

ISLE OF ANGLESEY COUNTY COUNCIL	
Report to:	Executive
Date:	17 October 2016
Subject:	Scrutiny Outcome Panel – Corporate Safeguarding draft report
Portfolio Holder(s):	Social Services & Housing (Cllr Aled Morris)
Head of Service:	Children Services (Anwen Hughes) Corporate Lead Safeguarding role
Report Author:	Chairman of Scrutiny Outcome Panel (Chairman also Corporate Scrutiny Committee) and Scrutiny Manager
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Local Members:	N/A

A –Recommendation/s and reason/s
See section 7 of this enclosed Scrutiny Outcome Panel Final Report.

B – What other options did you consider and why did you reject them and/or opt for this option?
<p>1. PURPOSE</p> <p>1.1 The purpose of this report: is to outline the Scrutiny Outcome Panel’s review on the arrangements in place to ensure that the Local Authority was able to deliver its Safeguarding responsibilities and submit this final report for the Corporate Scrutiny Committee to adopt and accept the recommendations. This is in line with the Council’s constitution 4.5.11 enabling the Scrutiny Committee to then forward its now adopted Report to the Executive for decision.</p> <p>2. CONTEXT</p> <p>2.1 The Corporate Scrutiny Committee at its meeting 6th July 2015 considered the Council’s response to the Wales Audit Office (WAO) Report on the Authority’s assurance and accountability arrangements in relation to Corporate Safeguarding. The Committee resolved the actions identified in the report presented were likely to enable the Authority to comply with the recommendations made by the WAO.</p> <p>2.2 However, members felt a duty to monitor compliance with the requirements and hold the statutory Director of Social Services, in line with the Statutory Accountabilities of the Director of Social Services (Part 7 Guidance), as being accountable for their completion by establishing a Scrutiny Panel at the appropriate time.</p>

3. METHODOLOGY

3.1. **The Scrutiny Outcome Panel's Terms of Reference (TOR)** were drawn up and commented on by the Senior Leadership Team (SLT), the Scrutiny Chair and Vice-chairman's Forum and adopted by the Corporate Scrutiny Committee on 11th April 2016.

3.2. The terms of reference contained a **Schedule Of Meetings and programme of work**, as follows:-

On **4th January 2016** - Meeting held with the Scrutiny Manager and Head of Children Services/Lead Safeguarding Role to receive feedback and sign up;

8th February 2016 – Share SOP's Terms of Reference with Senior Leadership Team;

16th March 2016 – Meeting with the Assistant Chief Executive, designated to the statutory director of social services role (DDSS) and the Scrutiny Manager, to share information and outline the SOP review;

11th April 2016 – Corporate Scrutiny Committee approved the TOR;

(a) 28th April 2016 (a.m.) – Inaugural panel meeting was held with invitations to Head of Children Services, Safeguarding and Quality Assurance Service Manager (QASM) and designated Director of Social Services, to attend. The Panel requested the information to better understand the context and difference between the work of both Adults and Children Services in responding to actual or suspected cases of abuse and the wider context of safeguarding, which is everyone's business. The Panel were also presented with the Corporate Safeguarding Policy which details the assurance and accountability arrangements in relation to corporate safeguarding

(b) 30th June 2016 – Elected Member Panel met to meet invited – Head of Children Services, Safeguarding and Quality Assurance Service Manager, Head of Profession – Human Resources (HR) and Human Resources Development Manager, to consider the County Council Safeguarding Policy – Action Plan (V3.7.1).

- The Panel considered the Action Plan, which had been updated at Corporate Scrutiny Board held the afternoon of 28th April 2016.
- Received information/evidence from Head of Profession (HR) and work HR had undertaken as part of corporate safeguarding work plan
- Agree the last meeting's suggested questions to be submitted to the designated Director of Social Services.
- Consider whether to invite any more officers to Panel or commission any more documents for reviewing e.g. service development plans.

18th July 2016 – Corporate Scrutiny Committee Chair and Scrutiny Manager met to review the process so far. It was agreed to start a first draft for the Panel's final report and to chase outstanding answers from DDSS to be included in the panel's final report. In addition share with lead officer

1st September – share the Panel's first draft report with SLT.

12th September 2016 – submit Panel’s report to the Corporate Scrutiny Committee for adoption, to enable forwarding to the Executive.

3.3. Membership

3.3.1. Core members of panel comprised of –

- Councillors: Meirion Jones, Llinos Medi Hughes, Jim Evans and Ann Griffiths (*did not attend*) and the Scrutiny Manager

3.3.2. Invited contributors –

- Are outlined in 3.2 (a) and (b) of this report.

4. EVIDENCE RECEIVED (DOCUMENTATION AND VERBAL)

4.1 Members received prior to the Panel meeting a copy of the;

- Terms of Reference for the agreed Corporate Safeguarding Panel, and
- Corporate Safeguarding Children and Vulnerable Adults’ Policy and Procedure (December 2012 final version).

Panel used both documents as base data for information and for reference throughout the review.

4.2. Panel received the County Council Safeguarding Policy/Action Plan, Version 3.71, dated 10th June 2016, at their 30th June 2016 meeting.

4.3. Panel received verbal evidence from the professional officers as highlighted in the schedule of meetings, section 3.2(a) & (b) of this report.

5. FINDINGS

5.1 The Head of Children’s Services attended both the Panel’s meetings and provided important definitions and context for; ‘Children Safeguarding’ and ‘Children Protection’ and ‘Corporate Safeguarding’. The Panel was grateful as these definitions helped clarify the historic view that safeguarding was only a Social Services matter.

5.2 The professional expertise and experience of the Head of Children’s Services to advise the panel was vital. She was present as Lead Officer not as a Head of Service to comment on her own service provision in these matters, but to outline the whole authority approach to responding to the WAO’ 2015 Report on IOACC’s Corporate Safeguarding.

5.3 Panel accepted safeguarding is the responsibility of all in the IOACC as such revisited its TOR to focus its questioning for evidence gathering.

5.4 The TOR stated that Panel undertake its role through closer examination of; –

- I. The Council’s current Corporate Safeguarding Children and Vulnerable People Policy;– in order to ensure that the policy enables the authority to discharge its statutory requirements and fix local determinations effectively and efficiently.
- II. Revisit the WAO’s report of the Authority’s assurance and accountability arrangements; - this is to be used as the base data for the monitoring progress against the recommendations
- III. Panel to review progress against the Council’s Safeguarding Action Plan response;- to ensure all outstanding key areas, outlined by WAO are implemented.

5.5 The Panel having received and considered the above two documents (first (i) as stated in 4.1 in this report and (ii) at the Corporate Scrutiny Committee meeting 6th July 2016) felt they should concentrate on the third (iii) as this would provide evidence of the efforts undertaken from that time, to the present.

Panel felt this approach would achieve its main purpose as set out in the Terms of Reference:-

“Ensure appropriate Corporate Safeguards were in place and that the Wales Audit Office recommendations have been fully implemented or are being actioned.”

5.6 Panel found following a previous internal audit re: safe recruitment, Isle of Anglesey County Council established;-

- Corporate Safeguarding Policy;
- Corporate Safeguarding Board;
- Corporate Safeguarding Action Plan.

The Policy– had been approved by the Pennaethiad, and the Quality Assurance Service Manager (QASM) responsible for corporate safeguarding had coordinated.

The Board – had been set up to meet bi-monthly and was chaired by the Director of Social Services. The Assistant Chief Executive designated to the statutory role of Director of Social Services post, has been the chair since early 2016. Therefore, this left only no 4.the Action Plan to review

The Action Plan - a dynamic document evidenced by the fact that the action plan although scheduled for the first panel meeting April 2016, was not available until it had been ratified by the Corporate Safeguarding Board on the afternoon of the 28th of April 2016. In addition, the QASM stated that the Action Plan, although in place prior to the Wales Audit report, since had been amended to reflect the recommendations of that report.

5.7 Panel also established that;-

- the Council Leader, was now leading as a safeguarding champion
- the arrangements and the Policy are on the Council website and MoniTor to guide staff
- the Safeguarding Children and Vulnerable Adults’ Policy and procedure document has been identified as one of the Council policies that have to be updated every three years.

5.8 Other policies under the safeguarding umbrella that have been revised were as follows:-

- Concerns and Complaints Policy
- Disciplinary Policy
- Young Persons – test purchasing for public protection
- Volunteering Policy
- DBS (Disclosure Barring Service) Checks Policy
- Recruitment & Selection Policy (in particular processing References)

5.9 Training is another key area to progress the concept of “corporate safeguarding” being

an organisation wide responsibility, rather than only a Social Services one. It was confirmed officers were looking in detail how to provide training within a formulated safeguarding framework – prioritising who needs training and at what level.

5.10 A useful list explaining the extent of abuse¹ covered under the term ‘safeguarding’ was provided for members. This demonstrated the scope of learning and awareness training required.

5.11 The Action Plan was received. It was explained that the Action Plan had been formatted in line with the 6 Corporate Safeguarding Standards and key Recommendations / Actions, as outlined by the Wales Audit Office in their Report on IOACC (March 2015) and the National Report (September 2015). The 6 corporate standards are;-

- Corporate Leadership
- Policies
- Safe recruitment of Staff
- Training and Development
- Partners, volunteers and commissioned services
- Systems

5.12 The Panel reviewed all six standards covered in the IOACC’s Corporate Safeguarding Action Plan. However only questions under three of the standards arose, findings as follows;-

5.12.1. Policies:

(a) The new guidance on safeguarding had been published under Part 7 of the Social Services and Wellbeing (Wales) Act in April 2016. The action plan had been updated to reflect this and it had been submitted to the Corporate Safeguarding Board on the 27 June 2016 for approval.

(b) Social Services have Restraint Policies in place but that there is a need to put in place a corporate policy on this, to outline the principles and good practice for use by other services. The Corporate Safeguarding Board has established a task and finish group to move this forward.

5.12.2. Safe recruitment of staff:

a) The Action Plan covered reviewing the Council’s Recruitment and Selection Policy and verbal evidence was received stating a revised Disclosure and Barring Service [DBS] Policy is in place and that services have access to information on the Disclosure and Barring Service website. In addition, work is ongoing to develop a simplified template for services to use and it was accepted that there is a need to monitor implementation of the policy in full. Both initiatives assist in complying with the Protection of Freedom Act 2012.

b) It was being highlighted to schools that they have a duty to comply with the DBS Policy. There were some issues in getting the DBS checks in time – it could sometimes take up to

¹ Safeguarding covers ‘emotional, physical, domestic violence, FGM (Female Genital Mutilation), people trafficking, etc.

8 weeks for new employees to have applications processed by the external body and 2 weeks to renew existing searches (normal to renew DBS for existing posts every 3 years). A new pilot process is set to be developed for schools so that an online check can be undertaken.

c) Panel acknowledged it was important all Heads of Services prepare a list of employees and the level of DBS checks required. It was recognised that understanding the provisions and applying those to individual posts was complex but the Corporate Safeguarding Board was doing everything possible to ensure full compliance with existing policies.

d) Re action 3.7 the Head of Profession (HR), stated that it could sometimes take several weeks to obtain the result of any check on new employees. There is an expectation that services apply for the DBS check as quickly as possible. Within the specification for the computerised HR personnel system, known as Northgate, there is a requirement to include recording/renewal notification of DBS checks within the system, thus they are made. It is hoped that this provision will aide services in notifications when DBS are required or need to be renewed in a timely manner. Panel was advised that the onus on undertaking checks was on individual services and schools. The Corporate Safeguarding Board was stressing this to all Heads of Services.

e) Action 3.8, requires updating, progress could be achieved on this matter when additional information has been provided by services for inclusion in the corporate scorecards.

f) Panel noted the Head of Profession (HR) had stated that the current action plan was reviewed and updated from a previous plan. The current action plan was not reflective of the important progress that had been taken by the Council in addressing safeguarding matters corporately. All officers present concurred with this view, adding that significant progress was being made and that the Corporate Safeguarding Board was driving improvement.

g) Safeguarding now forms part of the personal objectives for each Head of Service which highlights the importance of corporate safeguarding. This should now feed into service development plans and responsibility rested ultimately with Heads of Services to comply with the Safeguarding Policy.

5.12.3 Training and development:

a) It was highlighted as important that all staff working with vulnerable children and young people/adults should receive general safeguarding awareness training as part of their annual personal training and development appraisal. HR was confident resources were available to do this, but if not, it should be funded corporately. It was also confirmed that it was the responsibility of individual services to identify employees that required training.

b) Various methods to provide training were outlined. The Care Council for Wales have developed specific training modules to enable staff at all levels to gain an understanding of Safeguarding issues. In addition supporting e-learning packages are also available. With respect to specialist training this is also available to staff working in specific areas, once

the services had identified the training needs of their employees.

c) Corporate Safeguarding Board had requested work to be undertaken to implement training requirements over the next few years.

d) It was confirmed that a Safeguarding People: Child and Adult Protection Training and Development Strategic Framework was developed in early 2015 and that at the last Corporate Safeguarding Board meeting it had been agreed to accept this framework. The framework clearly identifies what training groups of staff require, based on Basic/General or Specialist modules.

e) Panel was told there was on-going discussion with the procurement unit as to who was responsible to ensure implementation of the appropriate safeguarding training for all contractors etc. Two options; it could either be a corporate action (led by the procurement unit) or alternatively, led by the relevant contract compliance officer in each service. It was proposed the Corporate Safeguarding Board should consider this matter further, and thereafter develop a framework document to address this issue. The Panel was of the view that this should be incorporated into the Contracting Framework of the Council and that it be implemented by individual services.

6. PANEL'S CONCLUSIONS:

6.1 The Panel was mostly satisfied that the Corporate Safeguarding Board was undertaking the task of ensuring that the Isle of Anglesey County Council' Services were undertaking their safeguarding duty as set out in the council policies and specifically in regards the Action Plan, as follows;

Policies:

Action 2.3 - The policy is reviewed every three years or whenever there is a significant change in the organisation or in relevant legislation.

Action 2.5- Establishing and implementing guidelines on the use of restraint and time out had been flagged.- However, not seen evidence this was being progressed. More work is required on a Corporate Restraint Policy. Currently individual services are likely to have their own policy. There is a need for an overarching corporate policy, as a framework to support services and training to support delivery of the approach that is reflected in the policy. However, no evidence was provided that supported this was in place. Panel heard that the developments of the new Northgate system were likely to ensure that this was met.

Safe recruitment of staff:

Action 3.1 - Review and update the Council's Recruitment and selection Policy and implement the Protection of Freedoms Act 2012.

Action 3.7- Staff who require a Disclosure and Barring Service Check do not start work until this has been completed

Action 3.8 – All Services areas conduct an examination of “gaps” within their services workforces regarding current posts which require DBS and references.

Action 3.17(c) - A central record should be kept of risk assessments in order to ensure that there is relevant record and corporate monitoring on the Northgate system. – However, no evidence was provided that supported this was in place.

Training and development:

Action 4.2 – All staff working with vulnerable children and young people/adults should receive general safeguarding awareness training [1-day mandatory every 3 years] as part of their personal training and development programme.

Action 4.6 Evidence of appropriate safeguarding training for all contractors, agency staff and volunteers we use where the work undertaken on our behalf requires Disclosure Barring Service checks.

6.2 The good work being undertaken by Corporate Safeguarding Board could not be underestimated and that it should be congratulated for achieving significant progress in this complex area.

6.3 The Panel is anxious to avoid duplicating the work of the Corporate Safeguarding Board and agreed that it would not be appropriate to proceed further.

6.4 Currently, other than the adult and children services’ own performance indicators that relate to service specific safeguarding, only the DBS checks are recorded on the scorecard for corporate safeguarding. The Panel considered that it was necessary to improve the process for ensuring scrutiny of the corporate scorecard by the Board

7. RECOMMENDATIONS

(i) As Safeguarding now forms part of personal objectives for all the Heads of Service and there are plans for this to feed into service development plans and that responsibility rests ultimately with Heads of Service to comply with the Safeguarding Policy, the Panel suggests this be measured and included on the corporate scorecard for members to monitor.

(ii) With regard:

Action 4.6: evidence of appropriate safeguarding training for all contractors, agency staff and volunteers the Council use, where the work undertaken is on our behalf, requires Disclosure Barring Service checks,

The Panel was of the view that this should be incorporated into the Contracting Framework of the Council and that it be implemented by individual services.

(iii) That the membership of the Corporate Safeguarding Board should include a member of the Corporate Scrutiny Committee to improve communication between the Board and the Committee.

(iv) The Safeguarding Plan needed to be communicated in a clearer way. Establishing the

Safeguarding Coordinators group was noted to be supporting the ownership within services, but more information sessions needed to support this role.

(v) To utilise the new Polices e-check System to ensure that all staff read the revised Safeguarding Policy – which would include the issue of reporting suspicions.

(vi) More work is required on a Corporate Restraint Policy.

C – Why is this decision for the Executive?

In accordance with the Scrutiny Procedure Rules as contained in the Council Constitution.

CH – Is this decision consistent with policy approved by the full Council?

Not Known.

D – Is this decision within the budget approved by the Council?

Not Known.

DD – Who did you consult?		What did they say?
1	Chief Executive / Strategic Leadership Team (SLT) (mandatory)	The draft SOP report was shared with SLT 1st September 2016. ACE (CT) in her role as designated Director of Social Services and Chair of the Corporate Safeguarding Board attended the Panel meetings as a contributor.
2	Finance / Section 151 (mandatory)	
3	Legal / Monitoring Officer (mandatory)	
4	Human Resources (HR)	Head of Profession (HR) and Training Manager attended the SOP meeting held 30/6/16 to contribute to the work of the Panel.
5	Property	N/A
6	Information Communication Technology (ICT)	N/A
7	Scrutiny	The report was submitted to the Corporate Scrutiny Committee on the 12 th September, 2016. The Panel's report was approved by the Committee and recommended that it be forwarded to the Executive for a decision.
8	Local Members	N/A
9	Any external bodies / other/s	N/A

E – Risks and any mitigation (if relevant)

1	Economic	N/A
2	Anti-poverty	N/A

3	Crime and Disorder	N/A
4	Environmental	N/A
5	Equalities	N/A
6	Outcome Agreements	N/A
7	Other	N/A

F - Appendices:
None

FF - Background papers (please contact the author of the Report for any further information):
<p>Scrutiny Manager, Isle of Anglesey County Council, Llangefni, LL77 7TW.</p> <ul style="list-style-type: none"> • Various emails between Scrutiny Manager and Officers in Social Services • Minutes or Scrutiny Outcome Panel held 28 April and 30 June 2016.