

# Barnsley Safeguarding Adults Board Training Strategy 2024

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#### 1 Introduction

This strategy will support all agencies involved in keeping adults in Barnsley safe from harm and abuse to demonstrate that **all** staff are equipped to respond to Safeguarding concerns, using the

- Making Safeguarding Adult Principles
- Care Act
- South Yorkshire Safeguarding Adults( procedures)--principles
- Barnsley Safeguarding Adults Operational Guidance
- National Competency Framework for Safeguarding Adults (Bournemouth University)
- Decision support Guidance
- Adult Safeguarding: Roles and Competencies for Health Care Staff First edition: August 2018
- ADASS guidance Understanding what constitutes a safeguarding concern and how to support effective outcomes.

#### The document aims to

- Improve partnership working and practice that keeps the adult at the centre of all our safeguarding activities
- Support work based evidence of learning and competence in practice
- Provide managers with a framework to evaluate performance and practice and identify any training needs
- Provide a quality assurance tool for the Board and commissioners of services and contract monitoring.

The evidence of competence should be shared with BSAB via the dashboard managed by PMQA



# 2 Competencies and timescales

- 2.1 We believe that competence is a combination of skills; knowledge and experience that can be used by staff to keep adults safe or to address abuse and reduce the risk of further harm occurring. To apply this, staff need to be able to use the skills and knowledge and tailor it to meet the needs of each individual adult and address the risks to them and other adults affected by the issue(s)
- 2.2 Newly appointed staff members should be assessed against the competency framework within the first three months of their employment; this may include use of the Newly Qualified Social Workers (NQSW) or Assessed Year in Practice (AYSE) and health workers using the Intercollegiate document (detailed above). Spectrum use ESR Safeguarding Adults Training Tool, which has assessment built into it. For experienced members of staff an initial assessment of their competence should be made within three months and a Continuing professional Development plan agreed.
- 2.3 Assessment of competence should include a mixture of the following elements; observation of practice, questioning and discussions in supervision and appraisals, attendance of formal training and review of practice via reflective practice and/or case audits.
- 2.4 All training for formal training should be reviewed considering these competencies to maximise the benefits of attendance.

# 3 – Using the framework

The learning opportunities detailed show the **minimum** standards and what outcomes specific groups of staff should be able to achieve. Organisations must agree what level of competence their staff/volunteers require, and how they will evidence that competence has been achieved for their own staff and volunteers.

The pathway profiles four groups of staff who have different levels of responsibility to prevent and/or respond to harm or abuse of adults at risk. Each grouping is a guide and some roles may overlap or change over time and it is the responsibility of the organisation/employer to identify the competence that all members of staff will require. Staff who have been defined at levels B and above, need to demonstrate competence at the previous levels (A, B etc)

Learning and development is not dependent on attending a course, however multi-agency learning courses provide a valuable learning environment that can enhance practice and skills, by increasing knowledge of other organisations and their roles in keeping adults safe from abuse and harm.



The four levels of training are:

### Staff group A

Workers and volunteers in this group are expected to be able to

- ✓ Identify safeguarding concerns adult at risk, types of abuse, care and support needs
- ✓ Use the decision support guidance tool to direct concerns to the appropriate organisation, if the issues do not meet the threshold for safeguarding
- ✓ Make high quality referrals into adult social care, including evidence of a conversation with the adult, whenever possible
- ✓ Identify and address immediate risks and act to address these, when appropriate
- ✓ Discuss their concerns with the adult to confirm consent and seek their views about future action
- ✓ Recognise when they should act against the wishes of the adult
- ✓ Identify circumstances when referrals should be made in the "best interests" of the adult
- ✓ Contribute to safeguarding enquiries by sharing information about their relationship and knowledge of the adult and their life and supporting other organisations to establish contact with the adult.
- ✓ Identify the legal frameworks around safeguarding Care Act, Making Safeguarding Personal, Mental Capacity Act etc

# Staff Group A (Alerters/NHS Level 1\*)

Members of this group have a responsibility to contribute to Safeguarding Adults, but do not have specific organisational responsibility or statutory authority to intervene. (Drawn from the Bournemouth Competencies)

Examples of workers and volunteers who will require training at level A

- ✓ Elected members
- ✓ Drivers
- ✓ Volunteer in health, social care and the voluntary sector
- ✓ Support and care staff in health and social care e.g domiciliary care workers, health care assistants,
- ✓ Staff working in finance, benefits, taxation, etc.
- ✓ Other administrative and reception staff
- ✓ Police Community Support Officers
- ✓ Benefits staff



- ✓ Learning centre workers tutors, mentors etc
- ✓ Tenancy management staff
- ✓ Shared lives carers
- ✓ Personal assistants
- ✓ Community staff community support officers, anti-social behaviour teams etc
- ✓ Anyone working on behalf of Adult Social Care, who is not a Social Workers, Advanced Practitioner, Team Manager of Head of Service.

(Each organisation must assess the needs of their staff and provide the relevant support and education to equip them to keep adults safe)

#### Staff group B

Workers in this group are likely to have an organisational and/or professional responsibility for safeguarding adults, using the Making Safeguarding Adult principles. Key areas of responsibility include

- ✓ Engage the adult in a conversation to agree their safeguarding outcomes and how these will be delivered
- ✓ Explain the safeguarding journey to the adult
- ✓ Contribute to a safeguarding planning meeting and enquiry
- ✓ Provide specialist reports e.g. tissue viability, medication management etc
- ✓ Provide a manager with a recommendation on whether a concern meets the threestage test
- ✓ Contribute or complete a disciplinary investigation
- ✓ Contribute to a criminal enquiry.
- ✓ Managing the risks faced by the adults by facilitating or making regular contact with the adult to seek their views
- ✓ Identify cases that may require a safeguarding adults review and make appropriate referrals

### Staff Group B (Responders and Specialist Practitioners/NHS Level 2 and Level 3\*)

This group have considerable professional and organisational responsibility for Safeguarding Adults. They must be able to act on concerns and contribute appropriately to local and national policies, legislation and procedures. This group needs to work within an inter- or multi-agency context.

Examples of staff who will require training at level B include

- ✓ Social workers, including newly qualified Social Workers
- ✓ Social Care Assistants



- ✓ GPs
- ✓ Specialist Housing Officers
- ✓ Safer Neighbourhood Officers
- ✓ Doctors
- ✓ Nurses
- ✓ Police Officers
- ✓ Other health staff (Physiotherapists, Occupational therapists, Midwives etc)
- ✓ Mental Health nurses and therapists
- ✓ Managers in social care and health
- ✓ Managers in the voluntary sector
- ✓ Safeguarding champions

# Staff group C

Workers in this group are responsible for managing staff in groups A and B and evaluating safeguarding activity in line with relevant legislation. Safeguarding quality assurance data will be provided to senior managers in advance of being shared with the Safeguarding Adults Board. Compliance with relevant legislation and policies will need to be evidenced for regulators such as the Care Quality Commission (CQC), HMIC etc. Key areas of responsibility will include

- ✓ Quality assuring safeguarding work in line with legislation, policy and professional requirements
- ✓ Providing guidance and management oversight of complex safeguarding cases
- ✓ Signing off Independent Management Reviews for Safeguarding Adults Reviews (SARs)
- ✓ Overseeing action plans resulting from SAR's
- ✓ Contributing to the work of the Safeguarding Adults Board and/or its sub groups
- ✓ Quality assuring the work completed by staff at levels A and B
- ✓ Setting priorities for training and development of staff
- ✓ Producing briefings for senior managers and elected members
- ✓ Forging and maintaining partnerships to safeguard adults.

# Staff Group C (Decision Makers/NHS Level 4 and Level 5\*)

This group is responsible for ensuring the management and delivery of Safeguarding Adult services is effective and efficient. In addition, they will have oversight of the development of systems, policies and procedures within their organisation to facilitate good working partnerships with allied agencies to ensure consistency in approach and quality of service.



Examples of staff who will require training at level C include:

- ✓ Advanced Practitioners
- ✓ Team Managers
- ✓ Safeguarding leads in partner organisations
- ✓ Named professionals in Health
- ✓ Safeguarding manager
- ✓ Senior managers in Health and Social Care
- ✓ Specialist police officers
- ✓ Senior police officers
- ✓ Regulators CQC etc.
- ✓ Workforce development managers
- ✓ Operational Managers
- ✓ Service Managers
- ✓ Heads of Clinical Units/Departments

# Staff group D

Workers in this group are responsible for demonstrating that their organisation is, at all levels, fully committed to Safeguarding Adults and have in place appropriate systems and resources to support this work in an intra an inter-agency context. Examples include Directors, Chief Executives, Owners, etc

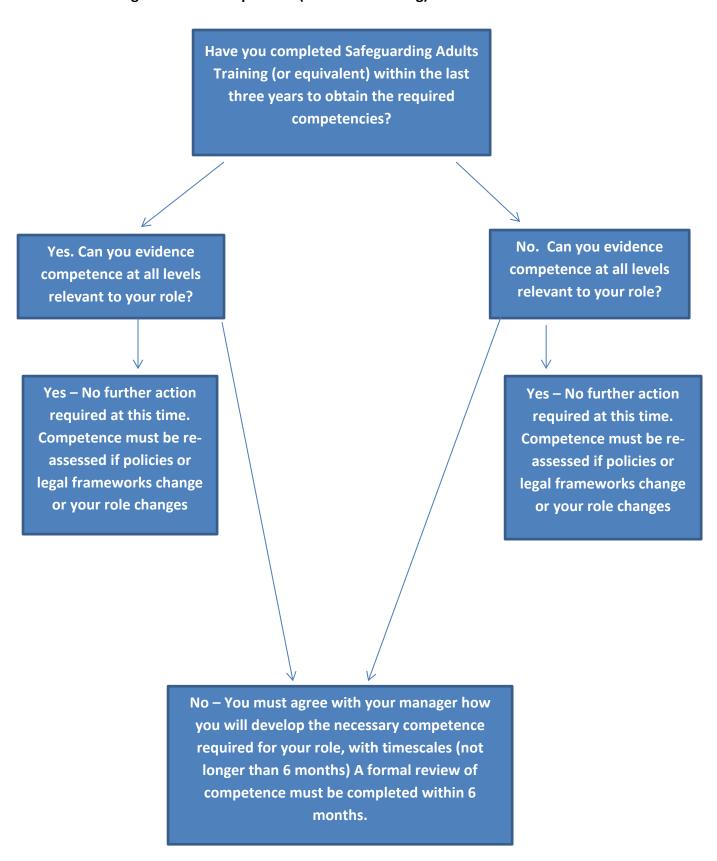
# (Governance and Board Roles/NHS Level 5 and Board and CEO Levels\*)

This group is responsible for ensuring their organisation is, at all levels, fully committed to Safeguarding Adults and have in place appropriate systems and resources to support this work in an intra- and inter-agency context.

- Service Managers
- Heads of Service
- Heads of Support Services
- Heads of Directly Provided Services
- Local Safeguarding Adult Boards



# **Demonstrating continued competence (Refresher training)**





Staff Group	Competence indicator	Possible Evidence	Possible learning and development opportunities
Α	•		
Workers and volunteers in this group have a responsibility to identify safeguarding concerns and contribute to safeguarding enquiries but do not have specific organisational responsibility or statutory responsibility to intervene.	<ul> <li>✓ Describe an adult at risk and what types of abuse they may experience</li> <li>✓ Recognise an adult at risk who may need safeguarding and describe what actions they will take to keep them safe</li> <li>✓ Explain how they would work with an adult at risk who lacks capacity to recognise the harm</li> <li>✓ Explain how they will obtain consent to share the information with adult social care or other agencies and in what circumstances consent is not required</li> <li>✓ Outline how they will record any activity linked to identification and responding to adult safeguarding</li> <li>✓ Explain what action they will take if the adult is in immediate danger</li> <li>✓ Explain what legal and policy frameworks are linked to safeguarding and how they would access them if needed.</li> <li>✓ Identify sources of help and</li> </ul>	<ul> <li>✓ Explain three stage test from Care Act that describes an adult at risk</li> <li>✓ Describe types of abuse and what indicators might suggest abuse</li> <li>✓ Factors that might increase an adult's risk of abuse and how they might reduce these</li> <li>✓ Explain the principles of the Mental Capacity Act and how this might apply to safeguarding (presumption of capacity etc)</li> <li>✓ Evidence that they can respect unwise decisions</li> <li>✓ Evidence that they recognise the need to obtain consent</li> <li>✓ Describe in what circumstances consent to take no action would be disregarded</li> <li>✓ Evidence that they can act or share concerns to minimise risks to the adult</li> </ul>	<ul> <li>✓ SY Safeguarding Adults Principles</li> <li>✓ Barnsley Operational guidance</li> <li>✓ Barnsley Decision Support Guidance</li> <li>✓ E learning via BMBC</li> <li>✓ Taught courses – BMBC</li> <li>✓ Taught courses – own organisation</li> <li>✓ Own organisation's policies and procedures</li> <li>✓ NCFC level 2 certificate in understanding dignity and safeguarding in adult health and social care www.theskillsnetwork.com</li> </ul>
	<ul> <li>Explain what legal and policy frameworks are linked to safeguarding and how they would access them if needed.</li> </ul>	take no action would be disregarded ✓ Evidence that they can act or share concerns to	



		T	
✓	Demonstrate how they would	✓ Evidence that they know	
	share the concerns with Adult	the contact details for ASC	
	Social Care or another agency	and police and know how	
✓	Explain how they would report a	to share a concern	
	safeguarding concern out of	✓ Evidence that they know	
	"normal working hours"	about the safeguarding	
✓	Describe what other risks they	adults web site	
	will need to consider if there are	✓ Explain the chain of	
	other adults/children in the	accountability for	
	household	safeguarding in their	
✓	Demonstrate use of the decision	organisation	
	support guidance.	✓ What is whistle blowing –	
✓	Demonstrate how they will obtain	policy in their	
	the views and wishes of the adult	organisation?	
	about the concern	✓ Knowledge of national,	
		local and internal	
		legislation and policies and	
		how to access them	
		✓ What organisations have a	
		statutory responsibility for	
		safeguarding adults?	
		✓ Explain how they will	
		preserve evidence and	
		why this is important	
		and why?	

Staff Group	Competence indicator	Possible Evidence	Possible learning and development opportunities
В			



Workers in
this group are
likely to have
an
organisational
and/or
professional
responsibility
for
safeguarding
adults. They
will need to be
able to deliver
the outcomes
of the adult
and/or protect
other adults
by use of
disciplinary
processes,
complete
specialist
assessments
(e.g tissue
viability)
within the
legal and
policy
framework
Workers will
need to
demonstrate

- ✓ Demonstrate how Making Safeguarding Personal informs practice
- Demonstrate knowledge of relevant legislation and how this might inform safeguarding activity
- Demonstrate the ability to form and maintain relationships with key operational staff within and external to your organisation to safeguard adults
- Demonstrate knowledge of related processes and how to make referrals to them
- Demonstrate how they communicate to keep the adult/carer and relevant organisations updated and the limits of data sharing
- ✓ Maintain a list of useful contacts and escalation processes
- Demonstrate an ability to discuss safeguarding issues with the adult and to agree protection measures that enshrine the MSP principles
- ✓ Demonstrate an ability to maintain appropriate records and share accessible information with the adult to maximise their involvement

- ✓ High quality recording on appropriate systems
- Person centred risk
   assessments that recognise
   capacity, duress and
   coercion; including the
   need to escalate to senior
   managers
- ✓ High quality face to face meetings – feedback from the adult or their advocate
- High quality safeguarding meetings that follow agenda's and support production of quality minutes
- ✓ Use of legislation to either achieve adults' outcomes or to protect adults who lack capacity or are under duress.
- Knowledge of available services and support and how to access this
- ✓ Use of, or ability to, access statutory support for the adult who will struggle to engage with safeguarding
- Risk assessments that extends to the whole family

- ✓ MCA resources
- ✓ Barnsley operational guidance
- ✓ Barnsley Decision Support Guidance
- ✓ www.skillsforcare.org.uk/standards-legislation-mentalcapacity-Act/mental -capacity-act.aspx
- ✓ SY Safeguarding Adults Principles
- ✓ E learning via BMBC
- ✓ Taught courses BMBC
- ✓ Working together courses and workshops
- ✓ ADASS MSP
- ✓ SCIE self neglect
- ✓ SCIE legal guide for practitioners
- ✓ DASH risk assessment
- ✓ Link to Community Safety site for MARAC, MAPPA etc
- ✓ Link to cloverleaf site
- ✓ Link to Rethink Advocacy
- ✓ <u>Link to IDAS</u>



Competence	✓	Demonstrate an ability to address	<b>✓</b>	Demonstrate knowledge of		
and		any conflict when managing		when and how to engage		
knowledge of		patient/client safety and		an advocate or other		
Group A staff.	,	wellbeing		support for the adult		
	✓	Demonstrate an ability to identify	<b>_</b>	Demonstrate high quality		
		possible SARs and how to		capacity assessments and if		
		escalate them for possible referral		necessary inclusive best		
	./	Demonstrate an ability to identify	./	interest meetings		
	V	and appropriately manage self-	•	Demonstrate tenacity in managing self-neglect		
		neglect cases by engaging		cases and escalating lack of		
		appropriate organisations in the		appropriate multi-agency		
		care and support of the adult.		response		
		care and support of the addit.		1.63\$61136		
Staff Group C		Competence indicator		Possible Evidence		Possible learning and development opportunities
Workers in	✓	Assess competence of	✓	Supervision and team	✓	Involvement in case file audits
this group are		individual staff and the		meeting pro-forma that	$\checkmark$	Working together workshops
responsible		workforce and address any		include safeguarding and	$\checkmark$	Involvement in BSAB sub groups
for managing		learning needs		self-neglect	$\checkmark$	Internal and multi-agency safeguarding forums
staff in groups	$\checkmark$	Ability to oversee audits and to	✓	Single and multi-agency	$\checkmark$	SCIE guide for managers –
A and B and		use this data to evidence		case file audits		https://www.gov.uk/government/publications/safeguardi
are likely to be required to		application of learning to	✓	Management of		ng-adults-the-role-of-health-services
provide		practice		safeguarding meetings		http://www.cqc.org.uk/sites/default/files/20140416_safe
assurance to	$\checkmark$	Demonstrate use of		that facilitate		guarding adults - roles and responsibilities -
their		supervision and team		involvement of all		revised drafpdf
organisation		meetings to facilitate learning		parties and support	$\checkmark$	CQC – care provider standards
or	✓	Identify and address any gaps		production of high-	✓	MARAC
Safeguarding		or failings in multi-agency		quality minutes	✓	MAPPA
Board that		working, escalating	✓	Data production and	✓	Local multi agency workshops
adult		o, <del></del>		analysis that supports	✓	Achieving Best Evidence
safeguarding			ĺ	, 5.0 5.5.5.6.6.6.6.6		



work meets
the standards
outlined in the
legal and
policy
frameworks.
These workers
are
responsible
for developing
and
maintaining
high quality
partnerships
and
overseeing the
development
of systems,
policies and
procedures
within their
own
organisations.
I

- appropriately to senior managers
- Provide data and narrative on safeguarding activity to senior managers and BSAB
- Maintain high quality multiagency relationships that support challenge of practice
- Escalate high risk or highprofile cases appropriately
- ✓ Identify cases/issues that require advice from legal colleagues
- ✓ Seek 360 feedback to ensure that safeguarding is meeting adults' outcomes and reducing risks. This should include feedback from administrative colleagues
- Current knowledge of the status of commissioned care services
- ✓ Knowledge of key legislation and ability to explain this appropriately to staff
- Chair high quality safeguarding and self-neglect planning and outcome meetings

- evaluation of safeguarding practice
- ✓ Challenge of poor practice and identifying solutions to improve this in a timely manner (internally and multiagency). Escalation issues that could not be resolved appropriately to maintain working relationships
- ✓ Annual PDR or other appraisal system includes key skills required to manage safeguarding, mental capacity assessments and self-neglect
- Resources being used to develop new staff to build confidence and knowledge to manage safeguarding
- ✓ Working relationships with commissioners and access to appropriate information

Special Measures



✓ Evidence of cascading of	
information via	
supervision or team	
meetings etc	

Staff Group D	Competence indicator	Possible Evidence	Possible learning and development opportunities
committed to Safeguarding Adults and	<ul> <li>✓ Agree, implement and report on plans and targets for safeguarding at a strategic level within your organisation</li> <li>✓ Identify and address multi agency working that impact on safeguarding or self-neglect.</li> <li>✓ Escalate issues to the Board</li> <li>✓ Cascade learning from SARs and other learning events to staff.</li> <li>✓ Key messages about safeguarding are accessible to the public and other agencies</li> <li>✓ Commissioned services deliver high quality care and manage safeguarding appropriately</li> <li>✓ Staff are appropriately trained, and safeguarding practice is consistently delivered to a high standard</li> </ul>	<ul> <li>✓ Attendance of BSAB meetings and evidence that the key messages are cascaded within organisations</li> <li>✓ Engagement with relevant regional and/or national forums – e.g ADASS, NHS England meetings etc</li> <li>✓ Key safeguarding messages communicated and their impact on practice evidenced</li> <li>✓ Prevention strategies, based on audit evidence and feedback from customers and their advocates, are developed and resourced to prevent harm and abuse</li> </ul>	✓ Guidance on PiPOT ✓ SCIE guide for senior managers



Partner	✓ Maintain systems that provide	✓ Regular updates provided
organisation	data that provide assurances	to BSAB on safeguarding
members,	on the quality of safeguarding	practice
,	✓ Clear escalation routes are in	✓ Consideration and
		involvement in SARs and
	place within the organisation	
	and share with other partners	other learning events
	to resolve issues in a timely	✓ Contracts deliver high
	manner	quality services
		✓ Challenge
		meetings/conversations
		with colleagues within and
		external to your
		organisation that result in
		positive change to
		systems/practice or
		relationships
		✓ Use of regional and
		national data to evaluate
		quality of safeguarding
		services
		✓ Preparation for inspection
		and assessment (e.g. from
		the CQC).
		✓ Engage with scrutiny and
		other processes to
		provide public
		accountability