

Board Business Plan 2013/2014

Version:	June Board 2013
Ratified by:	Leeds Safeguarding Adults Partnership Board
Author:	Sub-group chairs group
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Review date:	Reviewed and updated for each Board meeting

The Leeds Safeguarding Adult Partnership Board Business Plan 2013/14

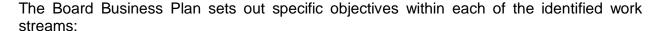
The Board Business Plan details specific objectives to be addressed during 2013/14. The Board Business plan is designed to promote the Board's Vision and 3 Year Strategic Plan as described below:

Board's Vision – sets out the overall vision of the Board and the outcomes it wants to achieve for the citizens of Leeds.

3 Year Strategic Plan – establishes key areas of development required to achieve the Board's vision; providing direction and continuity to each year's Business Plan.

Annual Business Plan – provides a detailed plan of specific key actions, supporting actions and target timescales required over a 12 month period, in order to achieve the Board's Vision and Strategic Plan.

The Boards Vision and Strategic Plan can be located on www.leedssafeguardingadults.org.uk



- Governance, Leadership and Partnership
- Policies, Protocols and Procedures
- Training and Workforce Development
- Serious Case Review and Professional Practice
- Performance, Audit and Quality Assurance
- Communication and Community Engagement
- Mental Capacity Act Local Implementation Network

Achievements against the Business Plan are reported to each Board meeting.

The Board Business Plan may need to be added to or amended during the course of the year in order to reflect continuous learning and competing priorities, and will include actions in progress from the previous Business Plan.

In the event that any individual, group or organisation feels that the Safeguarding Adult Partnership Board Business Plan omits important aspects of safeguarding that needs to be developed, they can write to the Chair of the Leeds Safeguarding Adult Partnership Board, detailing their recommendations. Any such recommendations will be given due consideration by the Chair of the Safeguarding Adult Partnership Board for inclusion into the Board's Business Plan.

Chair of the Safeguarding Adults Partnership Board c/o Safeguarding Adults Partnership Support Unit, 4th Floor East, Merrion House, 110 Merrion Centre, Leeds, LS2 8Q

Or email at: lsab.chair@leeds.gov.uk



Key Action	Start Date	Strategic Aims	Supporting Action(s)	Target Board Date	Progress Rating	Explanatory notes in relation to Progress Rating (inc. Actual Date of Completion)
1. Governance, Leadership and Partnership						
1.1 Hold a Joint Board Development Day with Children's Safeguarding Board and Safer Leeds Executive, in	April 2013	Partnership	Development day held to identify shared agenda	June 2013	Green	
order to identify and plan for shared work streams		Partnership	Board Chairs to agree objectives and work streams for approval by respective Boards	October 2013	Green	
1.2 Produce an Annual Report for 2012/13 detailing achievements and priorities as a Board.	April 2013	Accountability	Annual Report approved.	June 2013	Green	
1.3 Undertake workshops that promote close working practice between criminal and safeguarding adult investigations.	April 2013	Partnership	Learning disseminated and integrated into training.	October 2013	Green	
1.4 Review responses of member organisations to the Francis report and consider need for additional actions as a Board.	April 2013	Accountability	Summary of responses presented to Board.	October 2013	Green	
1.5 Review practice within Leeds against the learning from the Winterbourne View Serious Case Review.	April 2013	Accountability	Report to Board.	December 2013	Green	
1.6 Review governance arrangements and membership of the Board (including GP representation) ensuring these reflect the requirements of the Care Bill and other relevant guidance/legislation.	April 2013	Accountability	Arrangements captured in the Board's Memorandum of Understanding or successor document.	February 2014	Green	
1.7 Support regional approaches for more effective engagement of the DWP in the safeguarding adults	April 2013	Partnership	Advise the Board on progress.	February 2014	Green	
Explore potential and benefits of adopting an Multi- Agency Safeguarding Hub type model of practice in Leeds	April 2013	Partnership	Task group to be established. Report to the Board on findings.	February 2014	Green	

White	Green	Blue	Amber	Red
Unable to commence: Awaiting	Progress towards milestone /	Milestone Achieved	Timescale not met	Milestone delayed by more than
other action	timescale on track			3 Board dates

Policies, Protocols and Procedures Policy revised in Safeguarding Policy Policy revised in partnership with the C&CE sub-group, an easy read Fact Sheet aimed at people alleged to have caused harm, informing them of the safeguarding procedures April 2013 Protocolo guidance on Service User Towards Service User Abuse Protocolo guidance on Service User Towards Service User Abuse Protocolo guidance on Service User Towards Service User Abuse Protocolo guidance on Service User Towards Service User Abuse Protocolo guidance on Service User Towards Service User Abuse Protocolo guidance presented to Board Protocolo guidance procedures Protocolo guidance presented to Board Protocolo guidance presented by the Board Protocolo guidance pre	Key Action	Start Date	Strategic Aims	Supporting Action(s)	Target Board Date	Progres Rating	Explanatory notes in relation to Progress Rating (inc. Actual Date of Completion)
Safeguarding Policy 2.2 Develop, in partnership with the C&CE sub-group, an easy read Fact Sheet aimed at people alleged to have caused harm, informing them of the safeguarding procedures 2.3 Produce guidance on Service User Towards Service User Abuse 2.4 Finalise LTHT/ASC protocol in relation to safeguarding coordination responsibilities 2.5 Review investigating institutional abuse guidance, addressing wider issues of abuse occurring within the context of health or social care provision. 2.6 Developing supporting guidance relevant to financial abuse. 2.7 Work with West Yorkshire Boards to support the development of a joint approach to safeguarding thresholds. 3. Training and Workforce Development 3.1 Review the current Partnership safeguarding inpeds. 2.2 Develop a peer to peer network with the aim of improving the quality of training on offer through peer incomposing the page to have caused harm to be developed. 2013 Protection 2013 Pr	2. Policies, Protocols and Procedures						
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	improving the quality of training on offer through peer			reviews of materials		Green	

Milestone Achieved

PP & P – Policy, Protocols and Procedures
T & WFD – Training and Workforce Development
SCR & PP – Serious Care Review and Professional Practice

Unable to commence: Awaiting

other action

Progress towards milestone /

timescale on track

C & CE – Communications and Community Engagement PA & QA– Performance, Audit and Quality Assurance MCA LIN – Mental Capacity Act Local Implementation Network

3 Board dates

Timescale not met

Key Action	Start Date	Strategic Aims	Supporting Action(s)	Target Board Date	Progress Rating	Explanatory notes in relation to Progress Rating (inc. Actual Date of Completion)
skills and support. The group will also facilitate the sharing of learning from cases and practice across the partnership.			procedures. Report to Board on case learning inclusion.			
3.3 Review the Partnership Training Framework	April 2013	Accountability & Protection	Conduct a review based on the response to the Training Needs Analysis	February 2014	Green	
3.4 Aggregate and monitor all current training provision across the Partnership and provide an overview to the Board.	April 2013	Protection & Prevention	Report provided to Board detailing training provision	February 2014	Green	
3.5 Review the Partnership's current approach to charging for training.	April 2013	Accountability	Review policy, provide proposals for change if required to the Board	February 2014	Green	
4. Serious Case Review and Professional Practice						
4.1 Review all existing policies and procedures in relation to establishing Serious Case Reviews.	April 2013	Accountability	Revised policy, procedures and guidance presented to Board	August 2013	Green	
4.2 In liaison with PA & QA Sub-group develop a framework for regular monitoring of agreed outcomes emanating from SCR Action Plans.	April 2013	Protection & Prevention	Framework developed and presented to Board.	August 2013	Green	
4.3 Develop clear criteria, procedures and templates for Learning the Lessons Reviews.	April 2013	Accountability	Draft criteria and procedure presented to Board	October 2013	Green	
4.4 Provide regular updates to Board of progress in relation to Serious Case Review and Learning the Lesson Reviews being undertaken	April 2013	Protection & Prevention	Updates provided.	February 2014	Green	

White	Green	Blue	Amber	Red
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5 Performance, Audit and Quality Assurance						
Description 5.1 <u>Balanced Scorecard</u> : Provide information as requested by the Board to assess the value of the proxy indicators and continue looking for national benchmarking Solution	April 2013	Proportionality & Accountability	Advise the Board on progress to identify benchmarks and proxy measures in order to provide clarification to clarifying their potential value to the Board	August 2013	Green	
			If approved, monitor the indicators and provide a report to the Board	December 2013	Green	
5.2 Partner Agency Self-Assessment: Refresh the current self-audit template, implement and analyse the results	April 2013	Prevention & Accountability	Report provided to the Board advising of findings and recommendations.	October 2013	Green	
			On the basis of recommendations made, take any further appropriate action as directed by the Board	February 2014	Green	
			Presentation of subsequent Partner Audit (annually).	TBC	Green	
5.3 Information/data sharing – all partner agencies (notably ASC and NHS) to address access and recording	April 2013	Partnership & Accountability	Update the Board on progress as appropriate.	August 2013	Green	

Amber

Timescale not met

Blue

Milestone Achieved

PP & P – Policy, Protocols and Procedures
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Green

Progress towards milestone /

timescale on track

White

other action

Unable to commence: Awaiting

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issues – in particular in relation to ESCR and ensure that the requirements of safeguarding are taken into account in the development of the new Client Information System presently due for implementation in 2014			On the basis of recommendations made, take any further appropriate action as directed by the Board.	TBC	Green	
5.4 Balanced Scorecard: Undertake a review of the balanced score care to ensure alignment with West Yorkshire procedures and statutory reporting requirements to ensure that the balanced score card continues to meet the Boards requirements for performance and quality assurance information	April 2013	Accountability	Report provided to the Board advising of findings and recommendations regarding the alignment of the West Yorkshire procedures and the Score card	August 2013	Green	
			On the basis of recommendations made, take any further appropriate action as directed by the Board	December 2013	Green	
5.5 Quality Assurance Framework – finalise framework, implement and evaluate findings, making recommendations to the Board as appropriate to improve practice (this will ensure that domain 3 of the Balanced Scorecard can be populated)	April 2013	Protection & Accountability	Report provided an update to the Board on implementation – action taken and further action planned	August 2013	Green	
			Subsequent report following implementation of the Quality Assurance Framework provided to the Board.	December 2013	Green	
			1/4 report to be presented at	TBC	Green	

White	Green	Blue	Amber	Red
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			subsequent meetings, with assurance that the west Yorkshire procedures and the QA framework fully aligned and any necessary changes to the QAF are identified and implemented.			
5.6 <u>Balanced Scorecard</u> Finalise data collection and baselines for the Customer Perception domain	April 2013	Empowerment & Accountability	Run and assess a pilot implementation using lessons learned to fully implement the customer perception survey across all areas of safeguarding and review of approach to ensure it is fit for purpose.	October 2013	Green	
			Review of questionnaires in use and providing information for the customer perception dimension of the balanced scorecard,	February 2014	Green	
5.7 <u>Balanced Scorecard</u> — Review the scorecard to confirm that all parts can be and are being populated by activity performance data, monitoring of the Quality Assurance Framework and	April 2013	Protection & Accountability	Report to the Board	August 2013	Green	
associated quality assurance audits or other sources.			6 monthly report to Board on progress	February 2014	Green	1
White Green		Blue	Amber	•		Red

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6.	Communications and Community Engagement						
6.1	Agree strategic objectives of a prevention of abuse campaign, and the approach required to achieve these objectives	April 2013	Prevention	Actions and objectives established and agreed	October 2013	Green	
6.2	Agree and implement process to capture views of key stakeholders at the end of each safeguarding	April 2013	Empowerment & Partnership	A) Process implemented for Adults at risk	December 2013	Green	
	episode, routinely share the learning with the TWF&D subgroup and PP&P subgroup of learning.			B) Process implemented for Service providers	February 2014	Green	
				C) Process implemented for Relatives/informal carers	February 2014	Green	
				D) Process implemented in relation to case conference meetings	February 2014	Green	
6.4	Publicise preventative measures contained within Mental Capacity Act e.g. Last Power of Attorney, and Advanced decisions aimed at professionals and public	April 2013	Prevention & Empowerment	Advise on and make publicly available advisory information produced by MCA LIN Sub-group.	October 2013	Green	Also see Action 7.2
				Commencement of partnership campaign			
E	mprove the accessibility of information in line with the EIA Screening	April 2013	Empowerment	Updates through sub- group chairs report	December 2013	Green	
t a	Nork with ASC and NHS commissioners to ensure that hey understand advocacy needs within safeguarding and that these are reflected in both the advocacy commissioning strategy and the service specifications or individual advocacy providers.	April 2013	Empowerment	Update to Board on work with advocacy commissioners and providers in preparation for new contract.		Blue	New collaborative advocacy arrangements in place from April 2013.
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7. Mental Capacity Act Local Implementation Network						
7.1 MCA LIN maintains an overview of partner MCA/DoLS audits, performance and activity measures.	April 2013	Accountability & Prevention	Issues highlighted to Board as required.	August 2013	Green	
7.2 Develop, in partnership with the C&CE Sub-group, a leaflet(s) 'planning for your future in Leeds' e.g. advice on Lasting Powers of Attorney and other safeguards	April 2013	Empowerment	Provision of information	August 2013	Green	
7.3 Produce DoLS annual report 2012/13	April 2013	Accountability	Final report presented to Board	October 2013	Green	
7.4 Develop a joint approach with Children's Services to ensure that the MCA is fully implemented within Children's Social Care and its relevant partners.	April 2013	Accountability, Protection & Partnership	Expand membership of the MCA/LIN	October 2013	Green	
7.5 Undertake targeted work with identified providers and CHC teams to raise awareness, develop knowledge and skill sets in order to ensure that contract and statutory compliance in relation to the MCA is embedded.	April 2013	Accountability	Provision of training, support and information. Plus monitoring mechanism and revision of MCA/LIN membership	December 2013	Green	
7.6 Continue to monitor the resource impact and activity in relation to the transition of the transfer of supervisory functions from NHS to ASC	April 2013	Accountability & Protection	Issues highlighted to Board as required.	February 2013	Green	

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