FROM:	Audit and Risk Manager	**SUBJECT:**	Safeguarding
TO:	Safeguarding Lead	**DATE:**	22 January 2020
C.C.	Chief Executive		
	Deputy Chief Executive (BH)		
	Head of Finance		
	Portfolio Holder (Cllr Day)		

1   Introduction

1.1   In accordance with the Audit Plan for 2019/20, an examination of the above subject area has been undertaken and this report presents the findings and conclusions drawn from the audit for information and action where appropriate.

1.2   Wherever possible, findings have been discussed with the staff involved in the procedures examined and their views are incorporated, where appropriate, into the report. My thanks are extended to all concerned for the help and cooperation received during the audit.

2   Background

2.1   Safeguarding is the term used in relation to the protection of relevant 'at risk' groups (i.e. children, young people and vulnerable adults) from all forms of abuse, neglect, exploitation, domestic abuse, radicalisation, forced marriage and human trafficking/modern slavery.

2.2   Warwick District Council has a duty to promote safeguarding awareness and report concerns, working with multiple agencies to help identify and reduce safeguarding issues across the district. The Council's responsibilities in this area are very important as missed warning signs could have serious consequences and leave children and vulnerable adults open to abuse, neglect and exploitation.

2.3   Section 11 of the Children Act 2004 states that Local Authorities and District Councils have a duty to ensure their functions and services pay due regard to the need to safeguard and promote the welfare of children.

2.4   The Children Act 2004 (replacing the Children Act 1989) brings together all of the Government functions of children's welfare and education, with the ultimate purpose of making the UK a better and safer place for children of all ages, and to promote co-ordination between multiple agencies to improve child welfare.

2.5   Safeguarding children, up to the age of 18, includes the following expectations:

- Protecting them from abuse, maltreatment and exploitation.
- Preventing anything from harming their health or development.
- Ensuring they are safe and cared for.
- Taking action on their behalf to ensure the best outcome for them.

2.6   The Council also has duties under the Care Act 2014 which defines safeguarding as protecting an adult's right to live in safety, free from abuse and neglect. The Act sets out the responsibilities and steps to ensure the correct support and care is provided for people who live in the area, including vulnerable adults.

2.7   A vulnerable adult is defined as a person who, for any reason, may be unable to take care of themselves or protect themselves against significant harm or exploitation. Expectations when safeguarding vulnerable adults are similar to those for children:

- Ensuring they can live in safety, free from abuse and neglect.
- Empower them by encouraging them to make their own decisions and provide informed consent.
- Prevent the risk of abuse or neglect, and stop it from occurring.
- Promote their wellbeing and take their views, wishes, feelings and beliefs into account.

2.8   Safeguarding is everyone's business. Everyone in society has a responsibility to protect and safeguard children and adults from abuse and neglect. By training and educating staff and members of the public, safeguarding concerns and incidents can be identified and reported allowing early intervention.

3   **Scope and Objectives of the Audit**

3.1   The audit was undertaken to examine the procedures in place for the Council to comply with its duties under the Children Act 2004 and the Care Act 2014.

3.2   In terms of scope, the audit covered the following areas:

- Leadership and Accountability
- Policies and Procedures
- Recruitment and Selection
- Staff induction, Training and Development
- Complaints, Allegations and Whistle-blowing
- Information Sharing, Communication and Confidentiality
- Listening to children and vulnerable adults
- Child Exploitation, Missing and Hidden Crime
- Staff Supervision
- Effective inter-agency working
- Quality Assurance and Outcome Measurement

3.3   The audit programme identified the expected controls. The control objectives examined were:

- The named responsible person can take ownership of safeguarding and staff know how to report concerns.
- Safeguarding information is readily available to all staff.

- Staff are knowledgeable when it comes to the complaints process.
- Safeguarding is always on the Council's agenda.
- Staff are aware of how to deal with any safeguarding issues that they come across.
- Safeguarding and welfare is considered in line with inter-agency procedures.
- Staff are vetted appropriately, using the current DBS legislation.
- There are clear safeguarding responsibilities within relevant job descriptions.
- Safeguarding training is mandatory for all staff and volunteers.
- Bespoke or in-depth training is provided to staff and volunteers that work frequently with children and / or vulnerable adults.
- Up-to-date safeguarding information is circulated to staff as needed.
- The training provided is relevant and effective.
- Staff are aware of changes to procedures and legislation.
- Safeguarding concerns are regularly discussed between staff and managers.
- Staff and volunteers feel safe when carrying out their roles.
- Concerns raised through whistleblowing procedures are dealt with correctly and sensitively.
- Only key information is shared following multi-agency guidance to ensure the safety and welfare of children and vulnerable adults
- Service development plans are improved by using feedback from the relevant customers.
- Tools, guidance and training are appropriate and readily available in order to help staff when making referrals.
- Safeguarding training needs are identified for individual staff members.
- Training and development plans are relevant and customised for staff and volunteers.
- Information is shared between the Council and safeguarding forums and meetings.
- Staff understand the roles and responsibilities within the Council and the importance of multi-agency partnerships.
- Necessary improvements are identified and improvements are made on an ongoing basis.
- Management should be aware of the impact of safeguarding provisions in place.
- Staff are aware of processes when challenging a decision.

4   **Findings**

4.1   **Recommendations from Previous Report**

4.1.1   The current position in respect of the recommendations from the previous audit, undertaken in December 2016, were also reviewed. The previous audit did not include safeguarding vulnerable adults. The current position is shown overleaf:

	Recommendation	Management Response	Current Status
1	The Officer Children's Champion should meet with the Member Children's Champions to explain their role and to agree a plan of work.	Agreed. DCEX (AJ) will arrange to meet with the Member Children's Champions.	Member Champions are invited to quarterly safeguarding meetings. This ensures they are kept up to date with changes and are keep in the loop with any local issues.
2	A publicity and awareness campaign should be launched to remind staff of the warning signs and the appropriate response. Regular reminders should be issued thereafter.	Agreed. Publicity/ awareness campaign to be launched in the new year. DCEX (AJ) & HR/Media to discuss.	No evidence could be found to show that a campaign was carried out. The Media team were unaware of any safeguarding campaigns. Report ref: 4.2.5 and 4.5.4
3	The status of the outstanding action points should be established and reported to members.	Agreed. Status of action points on the Improvement Action Plan to be reported to Members.	Actions are discussed and the action plan updated quarterly. This is reported to the Member champions and at relevant committee meetings.

4.2   Leadership and Accountability

4.2.1   Warwick District Council (WDC) has a named Lead Safeguarding Officer and a Deputy Safeguarding Officer. Both are senior managers within the Council and are appropriately placed within the business to ensure safeguarding is given full consideration. There is also a Safeguarding group within the Council, made up of various staff members throughout the Council and two Councillors.

4.2.2   The Lead Safeguarding Officer is a named point of contact for staff and agencies to raise and discuss safeguarding issues with. The Deputy Safeguarding Officer is able to support the Lead and ensure there is always a responsible point of contact in place.

4.2.3   A short staff survey was undertaken as part of the audit, with 56 staff members being selected at random across all services to assess the staff awareness of safeguarding. Only five percent of staff questioned were able to correctly identify who the Lead Safeguarding Officer was at WDC, 50 percent were unsure or did not know and the remaining 45 percent thought the Lead Officer was another Senior Manager.

4.2.4   The information available on the intranet was limited at the time of researching, with an incorrect staff member identified as the Safeguarding Champion (old term, now replaced with Lead). However, once raised with the relevant members of staff, various revisions and corrections have been made, including the addition of a new contacts page.

4.2.5   There is a dedicated Safeguarding team page but the only way to access the page is by entering 'safeguarding' into the search bar and finding it within the results. This page has been updated during the audit with various pieces of information and advice added. Other information can also be accessed through this page, with 'big buttons' on the page directing the user to forms and additional information and the 'safeguarding' search also brings up various policies.

Risk

There may be a risk of staff not finding safeguarding information and advice.

Recommendation

The 'Safeguarding' homepage should be made accessible and placed with the other team pages rather than only being available through the search bar.

4.2.6   Since April 2019 there have been at least 33 safeguarding referrals made to MASH (Warwickshire Multi Agency Safeguarding Hub) by WDC employees. The Safeguarding group keeps a log of the MASH referrals which have been shared with them and reviews the referrals for information and to ascertain if any trends can be identified. However, not all referrals are reported to the group as there is no requirement to do so, so it may not be possible to spot all (potentially relevant) trends.

Advisory

As best practice, the Safeguarding group could be informed of all safeguarding referrals. This would help them to identify where additional support may be needed as well as identifying current local concerns.

4.2.7   If staff were to have concerns that safeguarding duties were not being carried out correctly, the process on how to report it is documented within the Safeguarding Adults and Children Policy (see below).

4.3   **Policies and Procedures**

4.3.1   Safeguarding is referred to in some of the service area plans, either within their targets or themes for the Fit for the Future strategy. This is not something that has to be done but is a way of ensuring it is considered and always on the agenda helping the Council to fulfil its safeguarding duty.

4.3.2   The current policy in place, Safeguarding Adults and Children, replaced the Adult only policy, incorporating relevant responsibilities as set out in the Care Act 2014 and the Children Act 2004. It was accepted as a corporate policy rather than the need to have various policies for each service area. It was presented to and approved by Executive in October 2019.

4.3.3   The policy not only refers to the relevant Acts but defines safeguarding and the duties of the Council. Key staff are identified from within the Council with

information about their roles and expectations. As well as staff identified there are two Councillors identified as Safeguarding Member Champions.

4.3.4   Lines of responsibility are clearly defined within the policy, which also makes it clear that all staff have a safeguarding responsibility. There are also specific responsibilities identified for some of the service areas.

4.3.5   79 percent of the staff surveyed said they would report any concerns they had to their line manager and eleven percent advised that they would report it directly through MASH or using the referral form. The remaining ten percent were a mixture of responses which included: informing the Police, looking on the intranet for advice, asking HR and staff who were unsure of what to do. Line managers should direct staff to the referral form when a concern is raised and provide support where needed.

4.4   **Recruitment and Selection**

4.4.1   The recruitment and selection process is robust which helps to ensure the right people are employed into vacant roles. By making it clear which roles may have safeguarding implications, interview panels can ensure the questions asked are relevant to the role. All interviews are carried out by a minimum of two staff members, one of which must have completed WDC's recruitment and selection training course.

4.4.2   Before being appointed, successful candidates must provide two references and, when required, a Disclosure and Barring Service (DBS) check is completed.

4.4.3   DBS checks are completed once every three years, as long as the role still requires one. HR evaluate the role and use the online DBS checking tool to decide if one needs to be completed.

4.4.4   Two recently evaluated job descriptions and specifications were reviewed and neither mentioned safeguarding responsibilities or DBS requirements. Both roles have safeguarding responsibilities and successful candidates would require a DBS check.

Advisory

Although it is not a legal requirement, safeguarding responsibilities should be included in job descriptions and volunteer responsibilities.

4.5   **Staff Induction, Training and Development**

4.5.1   The current training plan includes safeguarding but it is only if it is identified as a training need. From April 2020, the new learning and development guide includes safeguarding as mandatory training for all staff. Existing staff that have not had the training will only receive it if their line manager puts them forward for it. Councillors receive safeguarding training when they are first elected into post.

4.5.2   The Learning and Development Officer coordinates the safeguarding training, keeping logs of who has received it and when to ensure staff have been provided with the most up-to-date information. 202 staff members received

face-to-face safeguarding training 2018-19. The results from the staff survey showed that 44 percent of staff had said they had completed safeguarding training with WDC.

4.5.3   Feedback is always sought after training sessions. This is used to adapt and develop the training provided and to ensure the tone and quality of the training fits the service needs. Feedback from training has identified where further support or information is required.

4.5.4   There is no additional top up training provided and there have been no reminders of issues to be aware of or 'Meta training' circulated. Staff may not, therefore, be aware of any changes to safeguarding legislation and procedures.

Advisory

Although not a legal requirement top up training and reminders could be issued regularly to ensure staff are aware of up-to-date information about safeguarding and are signposted to the relevant homepage.

4.5.5   A discussion with staff, in roles where safeguarding concerns are raised frequently, confirmed that safeguarding is discussed as an ongoing item in their one-to-ones.

4.6   **Complaints, Allegations and Whistleblowing**

4.6.1   There is a complaints procedure set out within the Managers' guidelines for handling a complaint document. There is no information to advise staff on the process if a complaint is raised with them, although the managers' guide can be accessed and used if required.

4.6.2   There is a whistleblowing policy available on the intranet. The policy recommends blowing the whistle within the Council by discussing concerns with your line manager or their manager. The policy contains out of date information as it advices staff to contact 'Intouch'. This is a service that the Council no longer subscribes to. The whistleblowing policy on the intranet was published in June 2012.

Risk

Staff may be provided with incorrect information relating to whistleblowing.

Recommendation

The whistleblowing policy should be reviewed and corrected with the current information.

4.6.3   Whistleblowing concerns are generally reported to line managers and the same could apply when reporting safeguarding concerns involving staff. However, some concerns may be reported directly to the Lead Safeguarding Officer if staff felt that this was the relevant route and they knew who to report the issue to. Reported staff concerns regarding safeguarding could

involve children or adults, for example: staff abusing their position and taking advantage of vulnerable adults financially or using their premises as a base to conduct illegal activities.

4.7   **Information Sharing, Communication and Confidentiality**

4.7.1   The safeguarding policy contains no information or guidance about information sharing. However, the Warwickshire MASH has published an Information Sharing Agreement document which sets out the terms of the agreement and the parties involved.

4.7.2   The MASH agreement provides a framework to facilitate the appropriate sharing of information between the partners signed up and enables them to carry out their key objectives.

4.7.3   The safeguarding group within WDC are currently working on a step-by-step procedure for staff to follow when reporting a concern. It has been highlighted to the group that a section about information sharing currently covers confidentiality rather than information sharing in safeguarding and MASH terms. This has also been published incorrectly on the intranet and has been highlighted to staff for review.

     Advisory

     The information provided to staff on the intranet and within policies and procedures should be updated to show the correct definition and advice on information sharing with separate guidance on confidentiality.

4.7.4   Safeguarding training includes guidance on both information sharing and confidentiality. There have been various Meta 'articles' circulated regarding GDPR and confidentiality.

4.8   **Listening to Children and Vulnerable Adults**

4.8.1   No feedback is sought for safeguarding services as WDC do not provide specific services. Feedback is sought whenever someone contacts the Council, whether to report something, complain, compliment or to seek advice. Feedback received is circulated to the relevant team where it can be incorporated into service plans and delivery.

4.9   **Child Exploitation, Missing and Hidden Crime**

4.9.1   There is a page within Health and Wellbeing on the intranet that covers child exploitation. It has information about child exploitation and how to report concerns. Child exploitation is covered within the Safeguarding Children and Adults policy, as is missing children and adults and hidden crime. Taxi drivers licensed with WDC are all provided with training on child exploitation.

4.10   **Staff Supervision**

4.10.1 Staff who might encounter safeguarding issues more frequently in their day to day roles may have discussions about safeguarding in their one-to-ones

and appraisals. This allows them and their line manager to identify any further training needs or requirements.

4.10.2 Staff who don't fill out the MASH referral form regularly, or require support to ensure it is completed correctly, are supported by other staff members who are used to completing the forms and know the process. This ensures there is a consistent approach and that the right information is entered into the relevant boxes.

4.11 Effective Inter-Agency Working

4.11.1 Local and national safeguarding issues are discussed at various groups within the area which are usually attended by the Lead or Deputy Safeguarding Officers. This includes external groups such as Coventry and Warwickshire partnership and internally the Safeguarding group. Some of the groups meet annually whereas others are monthly.

4.11.2 Inter-agency contact information is included in the Safeguarding Children and Adults policy and inter-agency updates are discussed at the Safeguarding group meetings.

4.12 Quality Assurance and Outcome Measurement

4.12.1 The Safeguarding group maintain an ongoing action plan which enables them to monitor changes and improvements to processes and procedures. The action plan was reviewed and this confirmed that various aspects of safeguarding at WDC have been considered and that the Safeguarding group are not only improving what is already in place but are actively looking at ways WDC can improve it further. This plan is updated when the group meet, which is currently on a quarterly basis.

4.12.2 The actions within the plan are used to produce a Safeguarding Position Statement which is reported annually at Overview and Scrutiny Committee. Any new policies or changes to existing ones are reported at and approved by Executive.

5 Summary & Conclusion

5.1 Following our review, we are able to give a SUBSTANTIAL degree of assurance that the systems and controls that are currently in place in respect of Safeguarding are appropriate and are working effectively.

5.2 The assurance bands are shown below:

Level of Assurance	Definition
Substantial Assurance	There is a sound system of control in place and compliance with the key controls.
Moderate Assurance	Whilst the system of control is broadly satisfactory, some controls are weak or non-existent and there is non-compliance with several controls.
Limited Assurance	The system of control is generally weak and there is non-compliance with controls that do exist.

5.3   There were minor issues, however, identified during the course of the audit relating to:

- The accessibility of safeguarding information and advice
- Out of date information being provided to staff in the whistleblowing policy.

5.4   Further 'issues' were also identified where advisory notes have been reported. In these instances, no formal recommendations are thought to be warranted as there is no risk if the actions are not taken. If the changes are made, however, the existing control framework will be enhanced:

- Informing the Safeguarding group of referrals so they can keep a record them
- Job descriptions and specifications referring to safeguarding responsibilities
- Top up training and reminders for staff
- Clarification of information provided to staff regarding information sharing.

6   Management Action

6.1   The recommendations arising above are reproduced in the attached Action Plan (Appendix A) for management attention.

Richard Barr
Audit and Risk Manager

Action Plan

Internal Audit of Safeguarding – January 2020

Report Ref.	Recommendation	Risk	Risk Rating*	Responsible Officer(s)	Management Response	Target Date
4.2.5	The 'Safeguarding' homepage should be available with the other team pages rather than only being accessible through the search bar.	There may be a risk of staff not finding safeguarding information and advice.	Low	Engagement Officer	The new homepage is due to be launched on the intranet, it will be easy to locate and will be kept up-to-date.	End of Feb 2020
4.6.2	The whistleblowing policy should be reviewed and corrected with the current information.	Staff may be provided with incorrect information relating to whistleblowing.	Low	Audit and Risk Manager	The whistleblowing policy is about to undergo a thorough review and, as part of that process, will be updated with the correct information.	Feb 2020

* Risk Ratings are defined as follows:

High Risk: Issue of significant importance requiring urgent attention.
Medium Risk   Issue of moderate importance requiring prompt attention.
Low Risk   Issue of minor importance requiring attention.