

**Supervision of Staff in Relation to Safeguarding  
- Report for Wiltshire Council Adult Protection Conference**

**Report Summary**

- This report notes that there is evidence and assurance in relation to the issues raised in the initial ESM, which are set out in the body of the report. In particular it covers issues in relation to:
  - Triggers for investigation
  - Safeguarding policies and processes
  - Supervision policy and procedures
  - Performance Management and Monitoring
  - Training
  - Governance and Accountability
- It also notes that further work that is underway to analyse the delivery in practice of supervision, including consideration of safeguarding adult issues, in the named cases, and the action to report the outcome of this analysis and any identified recommendations and actions arising on completion.

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<p style="text-align: center;"><b>Supervision of Staff in Relation to Safeguarding - Report for Wiltshire Council Adult Protection Conference</b></p>

## 1. INTRODUCTION

1.1. On 15 February 2012 the Trust was informed, by email, that some Wiltshire Council social workers had alleged that AWP managers had instructed them to make incorrect RiO record entries.

1.2. In response to these allegations Wiltshire Council set up a formal safeguarding process and a Large Scale Investigation Early Strategy Meeting was held on 29 February 2012. As a result of this meeting AWP undertook to investigate the allegations. In particular, Wiltshire Council identified and shared details of fifteen cases where concerns had been identified.

1.3. A Large Scale Early Strategy meeting was held on April 4<sup>th</sup> 2012. This report address actions numbered seven and nine in the minutes of that meeting which were required to be undertaken by the Trust.

***7. AWP to ensure that supervision records of staff and managers involved, are investigated to quantify their understanding of safeguarding procedures. Report to be provided by AWP to next Safeguarding meeting week beginning 23rd April 2012***

***9 AWP to investigate/ provide information on :***

***What triggers exist within AWP to initiate safeguarding procedures***

***What policies /procedures exist to support safeguarding procedures***

***How each team undertake safeguarding investigations***

***What training has been given to each member of staff in last 12 months***

***How are staff performance managed around managing cases through the safeguarding procedures***

***How do managers compare performance of staff and teams around managing case through safeguarding procedures***

***What training have managers undertaken on safeguarding in last 13 months***

***How does the senior team at AWP monitor individual Safeguarding cases, have an understanding that training on Safeguarding turns into good practice and have an overall strategic view of how the organisation is managing safeguarding***

***How does the AWP Board hold senior mangers accountable for safeguarding – can previous Board minutes demonstrate there is a robust challenge about strategic and operation safeguarding issues***

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## 2. BACKGROUND

The concerns raised have potential implications in relation to a number of processes in relation to effective safeguarding of adults

Wiltshire Council has requested assurance in relation to AWP policy and procedures, performance management, training, supervision and governance.

This report provides information in relation to the above issues, and considers a process to audit supervision in relation safeguarding issues, based on the identified 15 service users.

## **2.1. Supervision Policy**

The Trust has a supervision policy. This policy has been in place since 2008. It was last amended in October 2011, to make the need to consider safeguarding risks more overt in both the policy and supervision templates. The policy covers line management and professional supervision.

Given the complex nature and variable construct and focus of mental health teams, models of supervision vary, but all should consist of two key elements – line management supervision and professional supervision.

There is a standard set for frequency of individual supervision sessions, which is monitored based on this standard and taking into account leave and other absence. The Trust standard for monitoring being two individual supervision sessions per quarter).

## **2.2. Definitions**

### **2.2.1. Line Management Supervision**

Line Management supervision consists of two elements, namely:

#### Managerial Supervision

This is regular, protected time for a discussion between staff members and line managers, which provides the opportunity for both parties to review and monitor progress, share information, and identify any issues or risks arising from day to day working practice.

Management supervision occurs in the context of individual supervision and within formal team meetings

#### Caseload Supervision

Caseload supervision is a process by which all of the cases allocated to a practitioner are reviewed to assess progress, identify any issues, risks, difficulties and good practice.

Caseload supervision occurs in the context of individual supervision and within formal team meetings

### **2.2.2. Professional / Clinical Supervision**

Clinical / Professional supervision is regular protected time for facilitated in–depth reflection on clinical practice. It aims to enable the supervisee to achieve, sustain and develop high quality practice. Personal and professional responsibilities laid down by professional bodies (NMC, HPC, etc) should underpin the process of clinical supervision with both parties guided by these when discussing the practice of the supervisee. It is normally provided through individual supervision, but may also be provided through peer group and other supervision methods

All professional health staff should demonstrate receipt of clinical supervision. Integrated Social Care staff (social workers) seconded to AWP should receive professional supervision from their employer (Wiltshire Council)

## **2.3. Compliance with Supervision**

A quarterly open survey of staff supervision rates is undertaken in the Trust. The last survey (Jan-March 2012) reporting 71% self reported compliance with the Trust standard for frequency of supervision across the Trust in Adult Community services. These rates are slightly lower than previous quarters, which is likely to be reflective of the major changes and restructuring of adult community services that were underway in this quarter.

The outcome of the survey forms part of the Trust balance scorecard and is also contained in the Trust workforce report, which is reported to the Board quarterly.

Supervision rates for social work staff are held by Wiltshire Council. There is no identified feedback notifying concerns or problems arising from professional supervision or supervision rates that has been available from or provided by Wiltshire Council.

## **3. Safeguarding Adult Training**

Safeguarding Adult training for AWP staff in Wiltshire consists of two elements, namely alerter training for all outward facing staff and training for professionals undertaking investigating manager or investigating officer roles.

### **3.1. MOT and Induction**

Safeguarding adult alerter training is provided in house by the AWP learning and development Department to all outward facing staff.

New starters are required to undertake safeguarding adult alerter training within initial induction prior to stating in practice. Safeguarding adult alerter training is currently repeated on a 2 year cycle within a full day statutory and mandatory training course (MOT day). Rates of alerter training are monitored on a quarterly basis (currently @80%)

### **3.2. Safeguarding Training – Wiltshire Council.**

Training for training for professionals undertaking investigating manager or investigating officer roles is provided by Wiltshire Council

### **3.3. Compliance**

Compliance rates for AWP alerter training in induction is 100%, and the current compliance levels for update alerter training are on target at 80%.

The figures for training rates for undertaking investigating manager or investigating officer roles are held by Wiltshire Council. No concerns over the access rates for this training by AWP staff or Wiltshire staff seconded to AWP have been raised with AWP or at the Safeguarding Adult Board.

## **4. ESM Required Actions**

Action seven and nine of the ESM meeting held on the 4<sup>th</sup> of April relate to Supervision

### **4.1. Action Point 7**

***“AWP to ensure that supervision records of staff and managers involved, are investigated to quantify their understanding of safeguarding procedures. Report to be provided by AWP to next Safeguarding meeting week beginning 23rd April 2012”***

#### **4.1.1. Methodology**

The methodology to provide assurance in relation to supervision and records utilised the fifteen cases raised by Wiltshire Council. The investigation will consider the evidence of supervision for the previous six months of the care pathways prior to the concerns being raised by the Council, or the total length of the pathway, if that is shorter. Although the sample size is reasonable (n=15), the professional make up of the care coordinators involved (14 out of 15 were social workers) may mean that the findings arising from the investigation are not fully applicable to all other professional groups within the relevant teams.

Although the primary sources used to undertake the investigation are the individual supervision records (both line management and professional supervision records), a number of other sources of evidence will be considered, including information arising from team meetings of the supervision and management oversight of the case and any arising safeguarding adult risks. The collection of AWP records has been undertaken.

In the interim, confirmation has been sought and received from the relevant team/service managers that there was regular oversight of these cases within the team and management processes in the relevant period, this initial assurance provides a level of assurance which will be examined and tested within the investigation process.

Given the complex nature of the sources of evidence, collection and collation of the evidence will take some time to complete, as a full set of the records in relation to individual cases is required to provide a robust analysis, and therefore greater assurance

This is particular due to the fact that 14 out of the 15 cases are managed by social work staff previously seconded to AWP teams. The professional supervision records are particularly key to identifying the consideration of safeguarding issues. These records have been requested from Wiltshire Council, and this has been agreed. The records as of this date (11<sup>th</sup> May 2012) not yet been received although are expected in the near future.

#### **4.1.2. Findings**

Initial indications from AWP documents so far received, and from confirmation from the relevant managers that a variety of processes were being used to oversee the care pathways in the relevant cases, indicate that there was a level of supervision in place in these cases, and provide an initial level of assurance pending full investigation and analysis.

As soon as the professional records have been received from the Council, analysis will be undertaken of all the relevant available records, and the outcome and findings reported as soon as is practicable.

## 4.2. Action Point 9

Each question listed in action point nine detailed in the ESM minutes of the 4<sup>th</sup> of April is listed and a response provided.

a) What triggers exist within AWP to initiate safeguarding procedures?

The triggers in AWP for the initiation of safeguarding procedures are those contained in the Policies and Procedures for Safeguarding Vulnerable Adults in Swindon and Wiltshire. This is set out in the AWP Policy to Safeguard Adults.

AWP therefore does not have separate trigger documents, although it does make the South West Thresholds Guidance March 2011 available on the Trust Intranet to assist practitioners in making threshold decisions.

There is also guidance available on the decision pathway for risks that are managed under CPA and Safeguarding available on the intranet

b) What policies /procedures exist to support safeguarding procedures

The Trust has a Policy to Safeguard Adults which is an over-arching policy that defines the local multi agency procedures in each area as the key policy and procedures to safeguard adults.

The Policy to Safeguard Adults was reviewed and updated in 2011.

The key policy to support safeguarding practice was the No Secrets in Swindon and Wiltshire multi agency policies and procedures, which was last updated in 2007. This policy is currently being reviewed by a multi agency working group chaired by the AWP Head of Safeguarding. Any updates to the 'No Secrets' policy will be reflected in the AWP Safeguarding policy.

c) How each team undertake safeguarding investigations

Each team currently undertakes investigations as set out in the (No Secrets) Policies and Procedures for Safeguarding Vulnerable Adults in Swindon and Wiltshire. The team manager is responsible for identifying the appropriate investigating manager and chairing manager for the individual alert, in liaison with Wiltshire Council where that is appropriate.

This will change following the recent separation of the health and social care functions, with this responsibility reverting back to the Council. Planning to undertake this transition in a timely manner is underway.

d) What training has been given to each member of staff in last 12 months

As stated, all relevant staff (as identified in the Trust training matrix) currently receive alerter training as part of their induction, and this is repeated on a two yearly cycle. The current training rates for alerter training are 100% on induction and 80% on the two year cycle.

A number of in team training events have been held for specific target groups, including

inpatient staff at Fountain Way and Green Lane Hospitals and for student nurses from UWE and Bournemouth Universities prior to placements in 2011 and 2012.

Staff who are undertaking investigating or managing roles in relation to alerts receive training as provided by Wiltshire Council. The records of this training are held by Wiltshire Council. Additionally staff attend the quarterly investigating managers update training, with again records of this held by Wiltshire Council. There have been capacity problems with access to these levels of training that have been reported to the SAB Training sub group and have been considered by the group, which continues to consider the future development of the model, access and attendance rates of staff at the various levels of training.

e) How are staff performance managed around managing cases through the safeguarding procedures

Performance management for individual cases rests with the relevant team manager, through direct management (including team management meetings) and supervision processes. Safeguarding adult data is shared on an agreed basis with Wiltshire Council, who have the lead responsibility for performance management and reporting of performance to the Safeguarding Adult Board. This information is presented to, and considered at the Safeguarding Adult Board. No previous issues have been raised in these reports in relation to relative AWP performance, nor directly by the Council to the AWP representatives on the Board or sub committees in relation to previous safeguarding performance.

Historically there has not been a formal reporting meeting outside of these processes unlike in some other local authority areas (for example BANES). However, the AWP Safeguarding Admin Team follows up outstanding updates on cases on a regular basis, and in particular prior to the annual AVA data return.

The separation of the social care function in April 2012 will lead to the role of management of reverting to Wiltshire Council, and planning is underway to transfer this responsibility back to the Council, as soon as it is able to take on its responsibility in this area.

f) How do managers compare performance of staff and teams around managing case through safeguarding procedures

Performance management for individual cases rests with the relevant team manager, through direct management (including team management meetings) and supervision processes. Safeguarding adult data is shared on an agreed basis with Wiltshire Council, who have the lead responsibility for performance management and reporting of performance to the safeguarding adult board.

There have been no significant issues raised with the Trust in relation to performance or case management by the Council or SAB in the last three years, nor any significant variance noted in relation to performance of AWP and Council in relation to safeguarding over this period.

g) What training have managers undertaken on safeguarding in last 13 months

All relevant staff including managers currently receive alerter training as part of their

induction, and this is repeated on a two yearly cycle. The current training rates for alerter training are 100% on induction and 80% on the two year cycle.

Managers who are undertaking investigating or managing roles in relation to alerts receive training as provided by Wiltshire Council. The records of this training are held by Wiltshire Council. No significant concern has been raised on the attendance of AWP managers in relation to attendance at this level of training in the last three years. Additionally managers attend the quarterly investigating managers update training, with again records of this held by Wiltshire Council.

There have been capacity problems with access to these levels of training that have been reported to the SAB Training sub group and have been considered by the group, however no concerns over the relative attendance by AWP staff has been raised.

h) How does the senior team at AWP monitor individual Safeguarding cases, have an understanding that training on Safeguarding turns into good practice and have an overall strategic view of how the organisation is managing safeguarding

Monitoring of individual safeguarding cases is undertaken by the individual team managers, and the data is reported on a regular basis to Wiltshire Council who have the lead responsibility for monitoring of performance of the management of cases.

Where the Trust safeguarding team are involved in providing advice on particular cases, they monitor overview the quality of the management of the case, reporting to the team manager and local authority if appropriate to resolve any identified concerns.

The Trust has a number of joint audit programmes in place with local authorities to consider quality and staff understanding and compliance with policy and standards, however no such programme has been developed by Wiltshire Council or through the SAB Quality Assurance sub committee.

The CQC inspects AWP teams on a rolling basis, and reports on understanding of safeguarding responsibilities under Outcome 7 in each responsibility. Any actions arising from inspection reports are implemented and the outcome reported to the CQC and Trust Board. No significant concerns have been identified in Wiltshire, and all actions arising from inspections have been completed.

A report on safeguarding adult activity and issues is reported on quarterly basis to a Trust board committee by the Head of Safeguarding, and is subject to an annual report to the Board which was last considered in December 2011.

i) How does the AWP Board hold senior mangers accountable for safeguarding – can previous Board minutes demonstrate there is a robust challenge about strategic and operation safeguarding issues

There is a clear governance structure with a MHL and Safeguarding Management Group (consisting of corporate, professional and SBU leads) reporting to a Board Committee on a quarterly basis,

As stated a report on safeguarding adult activity and issues is reported on quarterly basis to the Trust board committee by the Head of Safeguarding, and is subject to an annual report to the Board which was last considered in December 2011, which is presented by

the Executive Director with the lead responsibility for safeguarding.

The MHL and Safeguarding Management Group develops the annual safeguarding work plan, scrutinises actions plans, safeguarding risk register, and multi agency audit returns, including returns and action plans arising from the South West Quality and Performance Framework, and considers other performance information and reports.

The MHL Board Committee, chaired by a non executive Director has taken on the Board lead for safeguarding in 2011, and hold the lead Director, Head of Safeguarding and Clinical Directors to account. They scrutinise and agree the annual safeguarding work plan, other key governance documents, and escalated issues from the management group.

The Trust annual safeguarding report also references feedback from external sources, including the CQC and information from multi agency boards annual reports, including from Wiltshire Safeguarding Adult Board.

## **5. SUMMARY OF COMPLIANCE AND ASSURANCE**

This report provides evidence and assurance in relation to a number of issues raised by the ESM, in particular in relation to:

- Triggers for investigation
- Safeguarding policies and processes
- Supervision policy and procedures
- Performance Management and Monitoring
- Training
- Governance and Accountability

This will be further supported by the conclusion, findings and recommendations that arise from the investigation into the supervision in relation to the named specific cases. Evidence collection is underway to support this investigation in both AWP and Wiltshire Council, and the outcome of this investigation and any action plan arising from the findings and recommendations will be reported as soon as practicable.

## **6. CONCLUSION**

This report notes that there is evidence and assurance in relation to the issues raised in the initial ESM, which are set out in the body of the report.

It notes that further work is underway to analyse the delivery in practice of supervision, including consideration of safeguarding adult issues, in the named cases, and the action to report the outcome of this analysis and any identified recommendations and actions arising on completion.

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