

Safeguarding Maturity Matrix

2019



Governance and
Rights Based
Approach



Safe Care



ACE Informed



Learning Culture



Multiagency
Partnership
Working

Purpose and Summary of this Document

The National Health Service (NHS in Wales) is committed to protecting and safeguarding the welfare of vulnerable adults and children.

NHS Wales has an essential role in ensuring that all adults and children receive the care, support and services they need in order to promote a healthy, safer and fairer Wales. Measuring the effectiveness of health services in the contribution to safeguarding adults and children is difficult and complex.

The Safeguarding Children Quality Outcome Framework (QOF) was developed in October 2012 and reported annually for three years 2013-2016. In 2017 it was agreed at the Chief Nursing Officer's Nurse Directors Forum, that an all age revised document be developed via the NHS Wales Safeguarding Network. This opportunity to refocus the purpose of self assessments and to modernise the tool, led to the development of the NHS Safeguarding Maturity Matrix (SMM). It addresses interdependent strands regarding safeguarding: service quality improvement, compliance against agreed standards and learning from incidents and reviews they are doing'.

The improvement plans and scores should be submitted to the National Safeguarding Team to inform the national picture report through the NHS Wales Safeguarding Network to Chief Nursing Officer in Welsh Government. The aim of capturing and collating a national SMM is to provide assurance, share practice and drive improvements towards a 'Once for Wales' consistent approach to safeguarding across Wales.

Using the NHS Safeguarding Maturity Matrix for Self-Assessment

Each area of the Matrix is supported by a number of example indicators which should be considered in order to decide which score fits with the position of the organisation for the reporting period.

An organisation may fit within a particular score if there is evidence available to support the self assessment score. The evidence required for some indicators may be readily available and routinely collated in order to inform other audits. For some areas this may be challenging and systems may not be fully in place to capture data.



Whilst the Safeguarding Maturity Matrix is not intended to performance manage the organisation, a number of examples of evidence have been listed below to support the organisation in agreeing their Safeguarding progress and achievement. In addition to this it is expected to provide a guide in developing the improvement plan.




It is not necessary to provide the evidence for the completion of the SMM, however it would be expected that the evidence would be available within the organisation to support future inquiries by Welsh Audit Office and Healthcare Inspectorate Wales. Completion of the Safeguarding Maturity Matrix will test the concept for a digital solution in the future.

Following the submission of the Improvement plans, the Peer Review process will be used to drive continuous quality improvement involving self-assessment, enquiry and learning between organisations. Peer Review provides a way to focus, in a holistic way, on the quality of a service and the outcomes and experience it delivers.

Reviewers can examine compliance with standards and benchmarking with others, including engagement in service/quality improvement and research. The process will enable safeguarding leads from Health Boards and Trusts across Wales to undertake the role of a critical friend with each other whilst reviewing and discussing the plans for improvement.

Health Boards and Trusts will be able to build on the concept of working together more closely in relation to fulfilling their safeguarding responsibilities, for example by arranging site visits to respective organisations, sharing pertinent information and attending corresponding safeguarding committees to build on sharing practice and formalise the collaborative approach.

Progress Levels		Basic Level Score: 1	Early Progress Score: 2	Results Score: 3	Maturity Score: 4	Exemplar Others learning from our reliable achievements Score: 5
Key Elements	1 Governance and Rights Based Approach 	Principle accepted, committed to delivery. Less than 25% of the indicators can be evidenced.	Early progress in implementation. 25% or more of the indicators can be evidenced.	Initial achievements are evident. 50% or more of the indicators can be evidenced.	Comprehensive assurance is in place. 75% or more of the indicators can be evidenced.	Clear schemes of delegation and transparent governance arrangements in place. Strong and effective Safeguarding leadership driving a culture of continuous learning and improvements. Can demonstrate safe environments which promote a culture of Human Rights, Children's rights, dignity and respect throughout the organisation.
	2 Safe Care 	Principle accepted, committed to delivery. Less than 25% of the indicators can be evidenced.	Early progress in implementation. 25% or more of the indicators can be evidenced.	Initial achievements are evident. 50% or more of the indicators can be evidenced.	Comprehensive assurance is in place. 75% or more of the indicators can be evidenced.	There is a safe and competent workforce to provide prudent care across all services, for example exemplary practice regarding a zero tolerance for avoidable tissue damage. Robust and clear examples can be evidenced.

Progress Levels		Basic Level Score: 1	Early Progress Score: 2	Results Score: 3	Maturity Score: 4	Exemplar Others learning from our reliable achievements Score: 5
Key Elements	3 ACE Informed 	Principle accepted, committed to delivery. Less than 25% of the indicators can be evidenced.	Early progress in implementation. 25% or more of the indicators can be evidenced.	Initial achievements are evident. 50% or more of the indicators can be evidenced.	Comprehensive assurance is in place. 75% or more of the indicators can be evidenced.	Arrangements are in place to consider and mitigate the impact on people living in an environment where they are exposed to Adverse Childhood Experiences (ACEs) such as Domestic Abuse, Mental Illness and Substance Misuse. Robust and clear examples can be evidenced.
	4 Learning Culture 	Principle accepted, committed to delivery. Less than 25% of the indicators can be evidenced.	Early progress in implementation. 25% or more of the indicators can be evidenced.	Initial achievements are evident. 50% or more of the indicators can be evidenced.	Comprehensive assurance is in place. 75% or more of the indicators can be evidenced.	Embedded learning culture, committed to learning lessons from reviews and 'concerns raised'. Evidence of organisation wide dissemination of learning and system wide improvements in service and practice shared across the Safeguarding Network. Robust and clear examples can be evidenced.
	5 Multiagency Partnership working 	Principle accepted, committed to delivery. Less than 25% of the indicators can be evidenced.	Early progress in implementation. 25% or more of the indicators can be evidenced.	Initial achievements are evident. 50% or more of the indicators can be evidenced.	Comprehensive assurance is in place. 75% or more of the indicators can be evidenced.	Highly developed effective multi agency partnerships to safeguard adults and children. Evidence of improvement, innovation and use of best practice in multiagency working. Robust and clear examples can be evidenced.

1 Governance and Rights Based Approach



Rationale

There should be a clear line of accountability, without doubt or ambiguity about who is responsible at every level for the well-being and protection of children and vulnerable adults.

The UNCRC states that children should be free from abuse, victimisation and exploitation. The environments where children and vulnerable adults are treated should be safe, secure and child friendly.

Example Indicators

- The organisation has a clear Scheme of Delegation for Safeguarding with an Executive member and an Independent Member/ Non-Executive Director who has responsibility for Safeguarding.
- The organisation has a Sub-Committee of the Board with strategic oversight, scrutiny of organisational safeguarding risks and safeguarding assurance. This is supported by a cross organisational arrangement for monitoring and ensuring efficiency of Safeguarding arrangements across all services and function areas.
- Safeguarding policies, aligned to national guidance, are in place and have been formally agreed by the Board (or a Sub-Committee of the Board in line with the Scheme of Delegation).
- Mandatory training is completed by all staff on Equality, Diversity, Human Rights and Child Rights.
- The organisation has a process by which concerns (including complaints and incidents) in relation to safeguarding can be raised, recorded, reported and investigated appropriately.
- Adults and children can communicate in the language of their choice and there is access to independent advocacy and translation services.
- The organisation positively engages with the NHS Wales Safeguarding Network and its sub groups.
- There is a designated person acting as liaison with the Children's and the Older People's Commissioners for Wales.

2 Safe Care



Rationale

All organisations must have a safe recruitment process that takes into account the risks to children and vulnerable adults.

There should be a system by which safeguarding concerns about employees should be raised and addressed. Departments and professionals delivering services must take full consideration of their safeguarding responsibilities. Assurance of safeguarding services and processes is evident across all levels within organisations.

Example Indicators

- There is a safe recruitment process and the organisation is compliant with the Disclosure and Barring Service requirements.
- A policy to manage professional abuse allegations and the NHS Wales Procedure for NHS Staff to Raise Concerns (whistle-blowing) has been formally adopted by the Board (or a Sub-Committee of the Board in line with the Scheme of Delegation).
- All staff are made aware of and have access to all policies relating to Safeguarding and Safeguarding information is readily available to all staff via the organisation's Intranet.
- There is a Safeguarding Training Programme agreed within the organisation, consistent with the Intercollegiate Documents as a minimum standard, outlining the various levels of training and target groups.
- All staff working with children and families are supported by regular Safeguarding Supervision and peer review arrangements are in place for paediatricians.
- The Female Genital Mutilation (FGM) Pathway is in place and there is a system in place to ensure that data in relation to FGM as requested by Welsh Government is submitted quarterly.
- There is clear guidance and procedures are in place to ensure that all preventable hospital acquired Grade 3 and 4 pressure ulcers are referred in line with national and local policy.
- There is evidence that the Mental Capacity Act is integral to the organisation's safeguarding processes, including consideration of the wishes, feelings and views of all children aged 16 and 17 years regarding capacity and consent.

3 ACE Informed



Rationale

Adverse Childhood Experiences (ACEs) such as exposure to domestic abuse, substance misuse and mental illness are known to have a direct and immediate effect on a child's health.

The safety of the child and the safety of the vulnerable adult are intrinsically linked; preventing early exposure can reduce the impact on children and future generations.

Example Indicators

- ACE indicators and impact are incorporated into mandatory safeguarding adults and safeguarding children training.
- The organisation has a local Violence Against Women, Domestic Abuse and Sexual Violence strategy specifying objectives, timescales and actions under the requirements of the Act. This has been jointly prepared with the local authority.
- Children and young people attending sexual health services are routinely screened for sexual exploitation.
- The organisation can evidence that children are referred when there are Child Sexual Exploitation (CSE) and Child Sexual Abuse concerns and that an appropriate health professional attends CSE strategy meetings.
- The All Wales Domestic Abuse Routine Enquiry is carried out and monitored within Maternity Services and Health Visiting Services.
- All staff working in Adult Mental Health Services receive training in safeguarding issues and there is a policy in place in relation to children visiting patients in a mental health setting.
- Staff treating adults with mental health concerns consider the risk to children and there are established communication systems in place between mental health and substance misuse services.
- Advice and information on drugs and alcohol services for young people and families is accessible to staff and patients.

4 Learning Culture



Rationale

By promoting a positive culture of multi-agency learning to generate new learning organisations can support continuous improvements in service delivery and practice.

Feedback from patients and clients in the NHS must be used to monitor and improve the quality of services.

Example Indicators

- The organisation actively contributes to the child practice, adult practice and domestic homicide review processes in the Region.
- The recommendations for health from national child practice, adult practice and domestic homicide reviews are acknowledged and changes to current safeguarding systems are made as required in a timely manner.
- As a member of the Regional Safeguarding Board, the organisation monitors and challenges arrangements in implementing agreed changes following a child, adult or domestic homicide review.
- Best practice, learning and new systems or processes implemented following a child, adult or domestic homicide review are shared with others across NHS Wales via the NHS Wales Safeguarding Network.
- There is a mechanism in place to support staff before, during and after a practice review learning event.
- There are opportunities for feedback from vulnerable adults, children and their families in all service areas.
- Information gained from safeguarding concerns and user involvement are used to support learning through audits and improve service delivery.
- Learning from safeguarding concerns, practice and domestic homicide reviews is included in the Annual Quality Statement.

5 Multiagency Partnership Working



Rationale

The protection and safeguarding of vulnerable adults and children relies on multi agency working and effective information sharing; working together to improve services and outcomes for all.

Example Indicators

- There is a clear referral process to Social Services, in line with national guidance, with evidence of regular audit and implementation of findings.
- There is evidence of appropriate participation in the Regional Safeguarding Boards and Regional Subgroups.
- There are arrangements in place to fulfil the statutory requirements for Looked After Children resident in the Health Board area with evidence of audit of the effectiveness of this service provision.
- The organisation contributes to the responsibilities of Multi Agency Public Protection Arrangements (MAPPA) and Multi Agency Risk Assessment Conferences (MARAC).
- The organisation contributes to the Procedural Response to Unexpected Deaths in Childhood (PRUDiC) process and there is evidence that information is shared with the National Child Death Review Programme.
- The organisation actively contributes to the multi-agency approach to Modern Slavery Regional working.
- The organisation actively contributes to the multi-agency approach to the duty of PREVENT through Regional working.
- There is evidence of appropriate participation at Public Service Boards in line with the Well Being of Future Generations (Wales) Act.

Examples of Evidence



Governance and Rights Based Approach

- Organisational Structure
- Safeguarding Accountability Structure
- Reporting Framework
- Safeguarding Policies
- Policy ratification process
- Access to Legal Support
- Corporate Safeguarding Meetings
- Safeguarding Practice Guidance
- Serious Incident (SI) Reporting Compliance
- Information Sharing Agreements
- Communication/Media Strategy
- Admission and Discharge Policies
- Intranet Knowledge Hub
- Risk Assessment Tools
- Access to Translation Services
- Access to Advocacy Services



Safe Care

- DBS Compliance
- Safe Recruitment Process
- Complaints/Concerns Policy
- Professional Concerns Policy
- Compliance with FGM reporting
- Safeguarding Job Descriptions
- Children's Charter
- Supervision Policy
- Statutory/Mandatory Training
- Safeguarding Training Strategy
- Pressure Damage reporting
- Child/Adolescent Friendly Services
- Consent Policy
- Mental Capacity Act arrangements



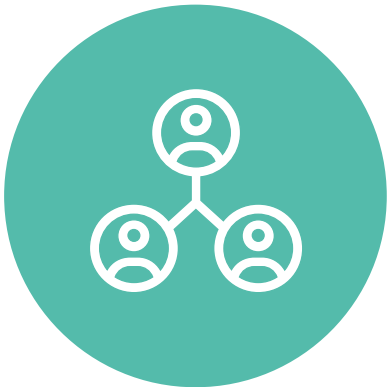
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- DA Routine Enquiry Compliance
- CSE strategy meetings/panels
- CPR/APR/DHR processes
- Ask and Act Compliance
- CSERQ Compliance
- Drug and Alcohol Misuse Policies
- Adult Mental Health Standards
- Adult Mental Health Visiting Policy
- CAMHS Liaison
- LAC Arrangements
- MAPPA Arrangements
- MARAC Arrangements



Learning Culture






- Child Practice Reviews
- Adult Practice Reviews
- Domestic Homicide Reviews
- Sharing Best Practice
- Learning Events
- Annual Quality Statement
- Regional Sub group
- Implementation Plans Compliance
- Stakeholder Feedback
- Putting things right
- DATIX Reporting
- Service delivery audits



Multiagency Partnership Working

- Regional Referral Processes
- Regional Safeguarding Board
- Collaborative Working
- PRUDiC process
- Modern Slavery Statement
- PREVENT arrangements
- CPR/APR/DHR
- Child Death Review Programme
- MASH
- LAC Health Assessments Compliance
- LAC Health Service Audits
- Public Service Boards

Safeguarding Maturity Matrix Improvement Plan

Standard	Maturity Score	Current Position Where a need for improvement has been identified	Proposed Action to Improve
1 Governance and Rights Based Approach 			
2 Safe Care 			
3 ACE Informed 			
4 Learning Culture 			
5 Multiagency Partnership Working 			
Overall SMM score:			

References and Evidence Base

- Adoption and Children Act (2002)
- Adult Safeguarding: Roles and Competences for Health Care Staff. Intercollegiate Document (2018)
- Adverse Childhood Experiences and their impact on health-harming behaviours (2015)
- A Guide to Safeguarding Children and Adults at Risk in General Practice (2016)
- A Healthier Wales: our plan for Health and Social Care (2018)
- All Wales Child Protection Procedures (2008)
- All Wales Clinical Pathway – Female Genital Mutilation (FGM) (2018)
- All Wales Pathway Antenatal Routine Enquiry – Domestic Abuse (2006)
- All Wales Policies and Procedures for Safeguarding Vulnerable Adults (2000)
- Children Act (1989)
- Children Act (2004)
- Child Sexual Exploitation Prevention Strategy for the NHS in Wales 2016-2019 (2016)
- Counter-Terrorism and Security Act (2015)
- Data Protection Act (1998)
- Female Genital Mutilation Act (2003)
- Health and Care Standards (2015)
- Human Rights Act (1998)
- In Safe Hands - The protection of vulnerable adults from Financial Abuse (2009)
- Looked after children: Knowledge, skills and competencies of health care staff. Intercollegiate Role Framework (2015)
- Mental Capacity Act (2005)
- Modern Slavery Act (2015)
- NHS Wales Notification Pathway for Looked After Children (2016)
- NICE Guidance Domestic Violence and Abuse: multi-agency working (2014)
- NICE Guidance 89: When to suspect child maltreatment (2009)
- Putting Things Right (2013)
- Rights of Children and Young Persons (Wales) Measure (2011)
- Safeguarding and Protecting Children in the NHS – Aylward (2010)
- Safeguarding Children and Young people: Roles and Competences for Healthcare Staff. Intercollegiate Document (2019)
- Safeguarding Children: Working Together Under the Children Act 2004 (2006)
- Safeguarding Training Framework NHS Wales (2019)
- Serious Case Review Winterbourne View Hospital (2012)
- Serious Crime Act (2015)
- Sexual Offences Act (2003)
- Social Services Well-being (Wales) Act (2014) Standards for Child Protection Paediatric Services in Wales (2014)
- Statutory Guidance on escalating concerns with, and closures of, Care Homes providing services for Adults (2009)
- Substance Misuse Service and System Improvement (2011)
- Taking Wales Forward 2016-2021 (2016)
- The Parliamentary Review of Health and Social Care in Wales (2018)
- The Right to Choose Multi agency Statutory Guidance for Dealing with Forced Marriage June (2014)
- The Victoria Climbié Inquiry (2003)
- Too Serious a Thing - The Carlile Review (2002)
- Trusted to Care (2014)
- United Nations Convention on the Rights of the Child UNCRC (1989)
- Using the gift of complaints - A review of concerns handling in NHS Wales (2014)
- Violence Against Women, Domestic Abuse and Sexual Violence (Wales) Act (2015)
- Wales Interim Policy and Procedures for the protection of Vulnerable Adults from Abuse (2013)
- Well-Being of Future Generations (Wales) Act (2015)
- You're Welcome: quality criteria for young people friendly Health Services (2011)

NHS Wales Safeguarding Network

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