

**The Section 11 SET Audit Tool**

Organisation/Department:

Date presenting back to the board:

Audit undertaken by:

Audit to be signed off by (agency lead):

Any queries regarding this form and its completion please refer to SSCB:

Shropshire Safeguarding Children Board Development Officer  
Tel: 01743 254251

Audit to be signed off by (SSCB rep):

*Please provide a completed section 11 audit with agency summary sheet by 1st October 2011.*

Areas of best practice to be shared with other agencies (if applicable):
Progress since last report (if applicable):
N/A
Training needs identified:
Areas of risk for serious attention:
None
Comments:
Version number: <input type="text"/>
Date issued: <input type="text"/>
Signed off by: <input type="text"/>
Expected date for next review: <input type="text"/>



## 1. Senior management commitment to the importance of safeguarding and promoting children's welfare

PLEASE NOTE: You must be able to evidence the response selected

Standard to Be Achieved	Evidenced Response			Score	Evidence - Details of Evidence to Support Score of '2' Effective or '3' - Exceeds requirements	If '1' 'Less effective' is selected, what plans are in place to meet the required standard? Who is responsible for these actions and by when?
	1. Less effective	2. Effective	3. Exceeds requirements			
Question					<i>If 'Exceeds requirements' share best practice with your LSCB</i>	<i>If 'Less effective' transfer actions to Agency Action Tracker</i>
<b>1.1) Is there a named person at senior management level responsible for safeguarding?</b>	A person has responsibility but is not at senior management level. A person has responsibility but safeguarding is not championed throughout the organisation.	A named person at senior management level is responsible for championing the importance of safeguarding and promoting the welfare of children throughout the organisation	A named person at senior management level is identified and responsible for championing the importance of safeguarding and promoting the welfare of children and the championing role is clearly contained within the job description, with identified actions in relation to this role as part of the individual work plan/ performance management plan	3	Named person in post - safeguarding in job description. Assistant Director for Patient Safety	
<b>1.2) Do they champion the importance of safeguarding and promoting the welfare of children throughout the organisation please give evidence</b>	A person has responsibility but is not at senior management level. A person has responsibility but safeguarding is not championed throughout the organisation.	A named person at senior management level is responsible for championing the importance of safeguarding and promoting the welfare of children throughout the organisation	A named person at senior management level is identified and responsible for championing the importance of safeguarding and promoting the welfare of children and the championing role is clearly contained within the job description, with identified actions in relation to this role as part of the individual work plan/ performance management plan	3	Named person in post - safeguarding in job description. Assistant Director for Patient Safety	
<b>1.3) Responsibilities to safeguarding and promoting the welfare of children and young people are integrated into Corporate Plans and where appropriate into the work objectives of individuals</b>	Plans are in place but are not reflected in practice, or staff are not aware of their content. Plans are in place but are not linked to the overall corporate plans. Plans are in place but are not developed through consultation	Corporate plans are in place and disseminated to staff. Reference to safeguarding and promoting the welfare of children and young people in internal documents etc and are reviewed on an annual basis. Team and individual plans are in place and link into and reflect the corporate plan	Corporate Plans include appropriate reference to the need to safeguard and promote children's welfare and are communicated effectively to staff, who have a clear understanding of their role in relation to safeguarding and promoting the welfare of children. All staff are involved in the development of Corporate Plans and have a sense of ownership of the Plans and team and individual plans contain clear objectives in relation to safeguarding and relate to the overall plan	3	Standard C of the Corporate objectives is that of Quality and Safety and to ensure that patients suffer no harm.	
<b>1.4) Staff/volunteers are able to access a supervision/support structure whilst working with children and young people</b>	Staff have access to their LSCB guidance but are not clear about their responsibilities or there is no coordinated approach to dealing with concerns. Inconsistent supervision arrangements. Policy in place but is not adhered to. No systems are in place to ensure that senior managers' commitment is understood by staff within the organisation.	Staff have access to LSCB guidance and a record is kept detailing how concerns about children are responded to. The organisation has appraisal/supervision policy and arrangements in place which is monitored for effectiveness. An audit process is in place to demonstrate to senior managers that their agency is monitoring the actions of their staff in relation to safeguarding and promoting the welfare of children.	Senior managers demonstrate a good understanding of safeguarding, are responsible for monitoring the actions of their staff to safeguard and promote the welfare of children and this is evidenced through supervision records, training, and active monitoring of any concerns about children which have been raised by staff. Annual monitoring takes place which is communicated via senior managers to staff and an action plan is developed to address identified issues.	2	Part of appraisal process. Supervision policy is part of supporting staff with traumatic events. Self assessment audit carried out annually.	

## 2. A clear statement of the agency's responsibility towards children is available to all staff

PLEASE NOTE: You must be able to evidence the response selected

Standard to Be Achieved	Evidenced Response			Score	Evidence - Details of Evidence to Support Score of '2' Effective or '3' - Exceeds requirements	If '1' Less effective' is selected, what plans are in place to meet the required standard? Who is responsible for these actions and by when?
	1. Less effective	2. Effective	3. Exceeds requirements			
Question					If 'Exceeds requirements' share best practice with your LSCB	If 'Less effective' transfer actions to Agency Action Tracker
<b>2.1) The organisation /agency has a Child Protection Policy in line with LSCB guidance</b>	No clear policy is available to staff. No clear policy exists but there is a Child Protection statement.	A clear Child Protection Policy exists in line with LSCB Guidance, and is accessible by all staff.	A clear Child Protection Policy in line with LSCB guidance is in place within the organisation. Periodic audits are carried out by the organisation to ensure that staff are aware of how to access the policy, and of their particular responsibilities. Audits evidence is available for inspection.	3	Annual self assessment audit is carried out. Trust Safeguarding Policy in place.	
<b>2.2) An effective complaints process is in place and available to all</b>	No statement available to staff. Statement is written but staffs are not aware of it or its contents. A complaints process is in place but is not promoted or monitored or has any demonstrable effect on practice.	A statement of the agency's responsibility to all children with whom they come into contact is owned and understood by all staff within the organisation. A complaints process is in place with regular reporting and monitoring of recommendations and outcomes.	Effective systems in place for children, staff and other people to make a complaint about non-adherence to the agency's procedures. Child-friendly complaints information is available to all children and families. The organisation can clearly demonstrate the effectiveness of recommendations/outcomes on practice and these are reported to staff e.g. through the annual report.	2	Complaints process within Trust. Any incidents are raised at Paediatric Governance and the Trust Safeguarding Group for discussion. Incidents are highlighted in the Annual Report. Induction and staff Mandatory training highlights the complaints system.	
<b>2.3) When other organisations are commissioned to provide services on the organisation's behalf there are mechanisms in place to ensure that those organisations also have regard to the requirements of section 11</b>	Contracts are in place but are not monitored. Contracts are in place but make no explicit reference to safeguarding and promoting the welfare of children.	Robust contractual arrangements concerning all facets of work and services procured are in place with explicit reference to safeguarding and promoting the welfare of children and that these are monitored annually. The organisation has a demonstrable understanding that it is their responsibility to ensure that organisations providing services on their behalf are compliant with s11.	Commissioning arrangements include monitoring providers' compliance with s11 and sanctions are in place for non-compliance and any concerns are reported to the LSCB with recommendations for actions.	2	In 2010 a Safeguarding statement was written by HR to be included in all external contractors job conditions, this was work progressed through the Trust Safeguarding Group.	
<b>2.4) The organisation /agency has a clear equality and diversity statement in place.</b>	A statement/policy is not yet in place for the organisation.	A statement is in place and staff are aware of the responsibilities in respect of equality and diversity.	Children, young people and families are involved in the writing and reviewing of the equal opportunities policy.	2	Equality and Diversity policy and training in place. Equality Impact Assessment is carried out on all Trust pc	
<b>2.5) Equality and diversity training is available to staff</b>	Training does not include reference to equality/diversity issues.	A clear training programme is in place for staff to understand equality and diversity issues. Evidence can be provided that training provided by the organisation on other issues takes due regard of equality and diversity.	Children, young people and families are involved in the writing and reviewing of the equal opportunities policy.	2		
<b>2.6) There is a process for recording incidents, concerns and referrals in relation to children and young people and the actions that result from these</b>	Audits demonstrate that staff understand and incorporate policies and procedures into their practice. The organisation can demonstrate that their policies and procedures have a positive impact on outcomes for children and families. Different methods of communication are available for children to enable them to express their views.	All staff should be made aware of the agency's policies and procedures on safeguarding and promoting the welfare of children and the importance of listening to children and young people, particularly when they are expressing concerns about their own or other children's welfare.	Audits demonstrate that staff understand and incorporate policies and procedures into their practice. The organisation can demonstrate that their policies and procedures have a positive impact on outcomes for children and families. Different methods of communication are available for children to enable them to express their views.	2	Policy and procedures are in place. The Trust Safeguarding Group approves all policies. Self assessment au	

### 3. A clear line of accountability within the organisation for work on safeguarding and promoting the welfare of children

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	1. Less effective	2. Effective	3. Exceeds requirements			
Question					If 'Exceeds requirements' share best practice with your LSCB	If 'Less effective' transfer actions to Agency Action Tracker
<b>3.1) There is a named person/s with a clearly defined role and responsibilities in relation to safeguarding.</b>	Lines of accountability are vague. No named person with ultimate accountability. There is a line of accountability but it is not clearly understood and appreciated by all staff, or concerns are not routinely recorded and responded to in accordance with the flowchart.	Lines of accountability are communicated to all members of staff, who understand to whom they should go if they have concerns about a child.	A named person has ultimate accountability for children's welfare. There are clear lines of accountability from each staff member up through the organisation to the named person. A flow chart of accountability is clearly displayed in all offices and all staffs have a clear understanding of their responsibilities and to whom they should go if they have any concerns. There is clear evidence that this flowchart is adhered to and that concerns are dealt with appropriately.	3	Dedicated named professionals with job descriptions	
<b>3.2) Staff and volunteers are clear about who within the organisation is/are the named person/s.</b>	Lines of accountability are vague. No named person with ultimate accountability. There is a line of accountability but it is not clearly understood and appreciated by all staff, or concerns are not routinely recorded and responded to in accordance with the flowchart.	Lines of accountability are communicated to all members of staff, who understand to whom they should go if they have concerns about a child.	A named person has ultimate accountability for children's welfare. There are clear lines of accountability from each staff member up through the organisation to the named person. A flow chart of accountability is clearly displayed in all offices and all staffs have a clear understanding of their responsibilities and to whom they should go if they have any concerns. There is clear evidence that this flowchart is adhered to and that concerns are dealt with appropriately.	3	Accountability discussed at Induction and in all parts of safeguarding training.	
<b>3.3) Staff/volunteers are aware of what their personal responsibilities are if they are concerned about a child/young person?</b>	Staff likely to come into contact with children do not have a clear understanding of their responsibility towards children.	All staff likely to come into contact with children as part of their job understands their responsibilities towards children.	Anyone likely to come into contact with children as part of their job has their responsibility towards children explicitly stated within their job description.	3	Safeguarding statement is added to all job descriptions	

**4. Service development takes account of the need to safeguard and promote welfare and is informed, where appropriate, by the views of children and families.**

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	1. Less effective	2. Effective	3. Exceeds requirements			
Question					<i>If 'Exceeds requirements' share best practice with your LSCB</i>	<i>If 'Less effective' transfer actions to Agency Action Tracker</i>
<b>4.1) There are mechanisms in place that enable the views of children and young people to be taken into account in the planning and provision of services</b>	Plans are developed without reference to the wishes and feelings of children, young people and families. The organisation cannot demonstrate that service development takes into account the need to safeguard and promote the welfare of children. Unmet need is not acknowledged or actioned.	Children and families are actively involved in the planning process when services are being developed. Consideration is given within plans as to how the delivery of services will take account of the need to safeguard and promote the welfare of children. The organisation is pro-active in engaging with the Children and Young People's planning process. The organisation actively uses and shares its data in order to identify areas for service development.	Children, young people and families are actively involved in the design, development and delivery of services. The organisation can demonstrate how, at various levels, they enable children, young people and families to engage in service development. There is a responsive process in place which acts upon identified unmet need.	3	Children and Young people were actively involved in designing the new oncology service and will be asked to contribute to the new paediatric build at PRH. Public discussion and follow up with children and young people is part of the reconfiguration process.	
<b>4.2) Actively use and share this information</b>	Plans are developed without reference to the wishes and feelings of children, young people and families. The organisation cannot demonstrate that service development takes into account the need to safeguard and promote the welfare of children. Unmet need is not acknowledged or actioned.	Children and families are actively involved in the planning process when services are being developed. Consideration is given within plans as to how the delivery of services will take account of the need to safeguard and promote the welfare of children. The organisation is pro-active in engaging with the Children and Young People's planning process. The organisation actively uses and shares its data in order to identify areas for service development.	Children, young people and families are actively involved in the design, development and delivery of services. The organisation can demonstrate how, at various levels, they enable children, young people and families to engage in service development. There is a responsive process in place which acts upon identified unmet need.	3	Children and Young people were actively involved in designing the new oncology service and will be asked to contribute to the new paediatric build at PRH	

## 5. Staff training on safeguarding and promoting the welfare of children for all staff working with or, depending on the agency's primary functions, in contact with children and families

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	1. Less effective	2. Effective	3. Exceeds requirements			
Question					If 'Exceeds requirements' share best practice with your LSCB	If 'Less effective' transfer actions to Agency Action Tracker
<b>5.1) An induction process is in place which includes familiarisation with the Child Protection Policies and Procedures as well as basic Child Protection training</b>	Training is made available to staff on an ad hoc basis and there is no coordinated approach. There is a lack of guidance to staff on how to meet their training needs. Workloads are not adjusted to allow access to training.	Staffs receive appropriate training re safeguarding and promoting the welfare of children and young people. Training provided is appropriate in terms of a) level of contact with children and families, and b) standards and content A database of staff who have accessed training is kept and is up to date Training needs are discussed regularly between staff and their line managers Data is passed to the LSCB to enable training to be audited for quality by the LSCB. Staffs have an understanding of both their role and responsibilities, and those of other professionals and organisations. Training enhances staff awareness of race, culture, and disability, and the impact they have on family life by being overtly referred to in all training.	Individual training pathways are in place for all staff. The organisation can evidence training pathways and can demonstrate the impact that training has on practice, including multi-agency practice. A clear induction process is in place which addresses safeguarding issues and which is delivered in a timely manner.	2	Induction for all staff contains information about child protection. Child protection training is discussed at staff appraisals. There is a training need analysis which is completed and amended as per National / local directives and which is approved by the Trust Safeguarding Group.	
<b>5.2) A register is kept of staff/volunteers who have completed induction and basic Child Protection training</b>	Training is made available to staff on an ad hoc basis and there is no coordinated approach. There is a lack of guidance to staff on how to meet their training needs. Workloads are not adjusted to allow access to training.	Staffs receive appropriate training re safeguarding and promoting the welfare of children and young people. Training provided is appropriate in terms of a) level of contact with children and families, and b) standards and content A database of staff who have accessed training is kept and is up to date Training needs are discussed regularly between staff and their line managers Data is passed to the LSCB to enable training to be audited for quality by the LSCB. Staffs have an understanding of both their role and responsibilities, and those of other professionals and organisations. Training enhances staff awareness of race, culture, and disability, and the impact they have on family life by being overtly referred to in all training.	Individual training pathways are in place for all staff. The organisation can evidence training pathways and can demonstrate the impact that training has on practice, including multi-agency practice. A clear induction process is in place which addresses safeguarding issues and which is delivered in a timely manner.	2	Training is available and training & development department maintain records of all staff. Staff have recently been grouped as per new guidance and training developed appropriately	
<b>5.3) Staff training needs are periodically reviewed to ensure knowledge of child protection matters is maintained and up-to-date.</b>	Training is made available to staff on an ad hoc basis and there is no coordinated approach. There is a lack of guidance to staff on how to meet their training needs. Workloads are not adjusted to allow access to training.	Staffs receive appropriate training re safeguarding and promoting the welfare of children and young people. Training provided is appropriate in terms of a) level of contact with children and families, and b) standards and content A database of staff who have accessed training is kept and is up to date Training needs are discussed regularly between staff and their line managers Data is passed to the LSCB to enable training to be audited for quality by the LSCB. Staffs have an understanding of both their role and responsibilities, and those of other professionals and organisations. Training enhances staff awareness of race, culture, and disability, and the impact they have on family life by being overtly referred to in all training.	Individual training pathways are in place for all staff. The organisation can evidence training pathways and can demonstrate the impact that training has on practice, including multi-agency practice. A clear induction process is in place which addresses safeguarding issues and which is delivered in a timely manner.	2	Training is available and training & development department maintain records of all staff. Staff have recently been grouped as per new guidance and training developed appropriately	

Standard to Be Achieved	1. Less effective	2. Effective	3. Exceeds requirements	Score	Evidence - Details of Evidence to Support Score of '2' Effective or '3' - Exceeds requirements	If '1' Less effective' is selected, what plans are in place to meet the required standard? Who is responsible for these actions and by when?
<p><b>5.4) Additional training is available for all staff working with children/young people appropriate to role.</b></p>	<p>Training is made available to staff on an ad hoc basis and there is no coordinated approach. There is a lack of guidance to staff on how to meet their training needs. Workloads are not adjusted to allow access to training.</p>	<p>Staffs receive appropriate training re safeguarding and promoting the welfare of children and young people. Training provided is appropriate in terms of a) level of contact with children and families, and b) standards and content A database of staff who have accessed training is kept and is up to date Training needs are discussed regularly between staff and their line managers Data is passed to the LSCB to enable training to be audited for quality by the LSCB. Staffs have an understanding of both their role and responsibilities, and those of other professionals and organisations. Training enhances staff awareness of race, culture, and disability, and the impact they have on family life by being overtly referred to in all training.</p>	<p>Individual training pathways are in place for all staff. The organisation can evidence training pathways and can demonstrate the impact that training has on practice, including multi-agency practice. A clear induction process is in place which addresses safeguarding issues and which is delivered in a timely manner.</p>	3	<p>Multiagency training is available to all staff in Group 3 ( staff who work with children and young people ) and is accessed by all staff. They are all aware and follow the referral process. A Safeguarding report is given monthly at Paediatric Governance meetings.</p>	
<p><b>5.5) Please identify whether training is provided in-house, by external trainers, or a combination of both.</b></p>	<p>Training is made available to staff on an ad hoc basis and there is no coordinated approach. There is a lack of guidance to staff on how to meet their training needs. Workloads are not adjusted to allow access to training.</p>	<p>Staffs receive appropriate training re safeguarding and promoting the welfare of children and young people. Training provided is appropriate in terms of a) level of contact with children and families, and b) standards and content A database of staff who have accessed training is kept and is up to date Training needs are discussed regularly between staff and their line managers Data is passed to the LSCB to enable training to be audited for quality by the LSCB. Staffs have an understanding of both their role and responsibilities, and those of other professionals and organisations. Training enhances staff awareness of race, culture, and disability, and the impact they have on family life by being overtly referred to in all training.</p>	<p>Individual training pathways are in place for all staff. The organisation can evidence training pathways and can demonstrate the impact that training has on practice, including multi-agency practice. A clear induction process is in place which addresses safeguarding issues and which is delivered in a timely manner.</p>	3	<p>Multiagency training is available to all staff in Group 3 ( staff who work with children and young people ) and is accessed by all staff. They are all aware and follow the referral process. A Safeguarding report is given monthly at Paediatric Governance meetings.</p>	
<p><b>5.6) Equal opportunities is included within all training provided</b></p>	<p>Training is made available to staff on an ad hoc basis and there is no coordinated approach. There is a lack of guidance to staff on how to meet their training needs. Workloads are not adjusted to allow access to training.</p>	<p>Staffs receive appropriate training re safeguarding and promoting the welfare of children and young people. Training provided is appropriate in terms of a) level of contact with children and families, and b) standards and content A database of staff who have accessed training is kept and is up to date Training needs are discussed regularly between staff and their line managers Data is passed to the LSCB to enable training to be audited for quality by the LSCB. Staffs have an understanding of both their role and responsibilities, and those of other professionals and organisations. Training enhances staff awareness of race, culture, and disability, and the impact they have on family life by being overtly referred to in all training.</p>	<p>Individual training pathways are in place for all staff. The organisation can evidence training pathways and can demonstrate the impact that training has on practice, including multi-agency practice. A clear induction process is in place which addresses safeguarding issues and which is delivered in a timely manner.</p>	3	<p>All staff undergo induction and training is part of the appraisal process.</p>	



## 6. Recruitment, vetting procedures and allegations against staff

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	1. Less effective	2. Effective	3. Exceeds requirements			
Question					If 'Exceeds requirements' share best practice with your LSCB	If 'Less effective' transfer actions to Agency Action Tracker
<b>6.1) The organisation has an accessible safe recruitment policy which covers how to recruit safely for staff who have contact with children, including what checks need to be undertaken to determine suitability</b>	The organisation has not considered or formulated a policy in regard to safer recruitment and employment The organisation does not provide guidance or training support on safe commissioning and contracting processes	The organisation has agreed a safer recruitment and employment policy which is clearly reflected in its safeguarding procedures The organisation's policy specifies safeguarding standards in relation to safer recruitment and employment practices to be applied in the commissioning or contracting process	The organisation has a recruitment and selection policy, that makes particular reference to safeguarding, such as that outlined in Safeguarding Children and Safer Recruitment in Education and Bichard recommendations The organisation can demonstrate that agencies which are commissioned to provide services on their behalf rigorously apply safer recruitment and employment practices	3	Safe Recruitment Policy in place.	
<b>6.2) Staff are aware of the safe recruitment policy and how to access it</b>	The organisation has not considered or formulated a policy in regard to safer recruitment and employment The organisation does not provide guidance or training support on safe commissioning and contracting processes	The organisation has agreed a safer recruitment and employment policy which is clearly reflected in its safeguarding procedures The organisation's policy specifies safeguarding standards in relation to safer recruitment and employment practices to be applied in the commissioning or contracting process	The organisation has a recruitment and selection policy, that makes particular reference to safeguarding, such as that outlined in Safeguarding Children and Safer Recruitment in Education and Bichard recommendations The organisation can demonstrate that agencies which are commissioned to provide services on their behalf rigorously apply safer recruitment and employment practices	3	Safe Recruitment Policy in place.	
<b>6.3) All those who have contact with children have appropriate checks in line with current legislation and guidance (e.g. Criminal Records Bureau check, List 99 check, self-declarations about previous convictions or disciplinary action in relation to inappropriate behaviour towards children or vulnerable adults)</b>	The organisation does not have mechanisms in place for monitoring and reviewing recruitment and selection policies and procedures	The organisation has in place arrangements to monitor and review their recruitment and selection policies	The organisation can demonstrate via audit activity that they have policy and procedures compliant with LSCB defined safer recruitment and selection policy	2	HR policy. The Trust is working towards retrospectively checking all staff employed prior to 2002.	
<b>6.4) The organisation has a retention policy for the results of checks carried out on staff</b>	The organisation does not have mechanisms in place for monitoring and reviewing recruitment and selection policies and procedures	The organisation has in place arrangements to monitor and review their recruitment and selection policies	The organisation can demonstrate via audit activity that they have policy and procedures compliant with LSCB defined safer recruitment and selection policy	2	Policy in place and the Safeguarding Team is working with HR.	
<b>6.5) The organisation obtains professional and character references, checks previous employment history and verifies the identity of applicants</b>	The organisation does not have mechanisms in place for monitoring and reviewing recruitment and selection policies and procedures	The organisation has in place arrangements to monitor and review their recruitment and selection policies	The organisation can demonstrate via audit activity that they have policy and procedures compliant with LSCB defined safer recruitment and selection policy	2	Trust as a safer recruitment policy and HR are part of the Trust Safeguarding Group.	
<b>6.6) The organisation provides specific training on safe recruitment</b>	The organisation does not address the importance of safer recruitment and employment within the as part of its training programme	The organisation ensures safer recruitment and employment training is accessible as part of their training programme	Safer recruitment and employment training is available and is clearly identified as an integral part of single agency HR training Training is systematically evaluated and impact outcomes used to improve future training programmes	3	safer recruitment training is done	

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<b>6.7) The training is accessed by all those who have a role in recruiting staff who will have contact with children</b>	The organisation does not address the importance of safer recruitment and employment within the as part of its training programme	The organisation ensures safer recruitment and employment training is accessible as part of their training programme	Safer recruitment and employment training is available and is clearly identified as an integral part of single agency HR training Training is systematically evaluated and impact outcomes used to improve future training programmes	3	available to all staff who require it	
<b>6.8) Systems are in place for children/young people and staff to make a complaint where there are concerns and/or allegations about a member of staff</b>	The organisation's procedure does not include guidance about confidential reporting/ whistle blowing policy	The organisation provides integrated confidential reporting/whistle blowing policy	The organisation's policy and guidance on whistleblowing promotes a positive and open culture within organisations that enables staff to report unsuitable behaviour with confidence. The organisation includes confidential reporting/ whistle blowing within interagency training	3	Managing allegations policy in place	
<b>6.9) Whistle-blowing procedures are in place, such that all staff/volunteers can raise issues of poor practice</b>	The organisation's procedure does not include guidance about confidential reporting/ whistle blowing policy	The organisation provides integrated confidential reporting/whistle blowing policy	The organisation's policy and guidance on whistleblowing promotes a positive and open culture within organisations that enables staff to report unsuitable behaviour with confidence. The organisation includes confidential reporting/ whistle blowing within interagency training	3	Whistle blowing policy in place and is incorporated in safeguarding training.	
<b>6.10) The organisation/agency has formally agreed procedures on discharging their duties in relation to allegations of abuse</b>	The organisation has no formal agreement on how to discharge their duties with regards to the investigation of allegations of abuse against people who work with children and young people.	The organisation has formally agreed on procedures on how to discharge their duties with regards to the investigation of allegations of abuse against people who work with children and young people, including ensuring that all allegations are reported appropriately to the Local Authority Named Officer.	The organisation has a defined business plan that ensures effective procedures for dealing with allegations against people who work with children are in operation and are monitored and reported on. Procedures are disseminated to all employees working with children and young people and guidance is available to those employees facing allegations of abuse.	3	Incorporated in Managing Allegations policy	
<b>6.11) The organisation has recording and retention systems in place for allegations</b>	The organisation has no formal agreement on how to discharge their duties with regards to the investigation of allegations of abuse against people who work with children and young people.	The organisation has formally agreed on procedures on how to discharge their duties with regards to the investigation of allegations of abuse against people who work with children and young people, including ensuring that all allegations are reported appropriately to the Local Authority Named Officer.	The organisation has a defined business plan that ensures effective procedures for dealing with allegations against people who work with children are in operation and are monitored and reported on. Procedures are disseminated to all employees working with children and young people and guidance is available to those employees facing allegations of abuse.	3	Incorporated in Managing Allegations policy	
<b>6.12) A process is in place to support all staff who are subject to an allegation</b>	a) There are no agreed arrangements in place to provide support to the subject of an allegation. Irregularities in the process of reporting allegations leads to some people unnecessarily becoming aware of the details of an allegation.	Support is routinely available to all staff who are the subject of an allegation. Every effort is made to keep the details of the subject of allegations confidential, and guard against publicity, whilst the allegation is being investigated.	Support is routinely offered/ made available to all staff who are the subject of an allegation. There are opportunities for those people who have been the subject of an allegation to comment on the quality of the support they received. Systems exist to monitor the quality of this support. Guidance on maintaining confidentiality is disseminated to all staff and reinforced in training programmes as appropriate. Disciplinary procedures are followed in the event of a breach in confidentiality	2	HR confirmed that there is an HR policy for the 'Guidelines for Managers and Employees on the management of individuals involved in adverse events' also used is the HR policy 'Guidelines for Supporting Staff involved in Traumatic / Stressful Incidents, Complaints, or Claims'	
	b) People are suspended automatically if an allegation is made against them. Employers do not suspend staff regardless of evidence that they continue to pose a significant risk to the protection/ wellbeing of the child.	The organisation gives careful consideration as to whether the circumstances of each individual case warrant a person being suspended. Advice from strategy discussions is taken into account when considering whether to suspend or not.	Consideration of the appropriateness of a suspension is based on a formal interagency risk assessment.	2	Trust follows the Decision Making Tree before it decides whether or not to suspend anyone.	

Standard to Be Achieved	1. Less effective	2. Effective	3. Exceeds requirements	Score	Evidence - Details of Evidence to Support Score of '2' Effective or '3' - Exceeds requirements	If '1' Less effective' is selected, what plans are in place to meet the required standard? Who is responsible for these actions and by when?
<b>6.13) Careful consideration is given to suspending those who an allegation is made against</b>	a) There are no agreed arrangements in place to provide support to the subject of an allegation. Irregularities in the process of reporting allegations leads to some people unnecessarily becoming aware of the details of an allegation.	Support is routinely available to all staff who are the subject of an allegation. Every effort is made to keep the details of the subject of allegations confidential, and guard against publicity, whilst the allegation is being investigated.	Support is routinely offered/ made available to all staff who are the subject of an allegation. There are opportunities for those people who have been the subject of an allegation to comment on the quality of the support they received. Systems exist to monitor the quality of this support. Guidance on maintaining confidentiality is disseminated to all staff and reinforced in training programmes as appropriate. Disciplinary procedures are followed in the event of a breach in confidentiality	2	HR policy for the 'Guidelines for Managers and Employees on the management of individuals involved in adverse events' also used is the HR policy 'Guidelines for Supporting Staff involved in Traumatic / Stressful Incidents, Complaints, or Claims'	
	b) People are suspended automatically if an allegation is made against them. Employers do not suspend staff regardless of evidence that they continue to pose a significant risk to the protection/ wellbeing of the child.	The organisation gives careful consideration as to whether the circumstances of each individual case warrant a person being suspended. Advice from strategy discussions is taken into account when considering whether to suspend or not.	Consideration of the appropriateness of a suspension is based on a formal interagency risk assessment.	2	HR reported that the Trust follows the Decision Making Tree before it decides whether or not to suspend anyone.	
<b>6.14) All staff are aware of who and how to contact the Named Senior Officer (s) for allegations</b>	The organisation has not identified a Named Senior Officer, or it is not clear at an operational level who is the NSO within the organisation. It is not clear within the organisation to whom to report/ seek advice from regarding allegations of abuse against staff. Staffing capacity impacts on the ability to investigate allegations expeditiously and in a fair and thorough manner.	The organisation has informed children's service providers who their named key staffs are, and provided contact details.	The organisation's named senior officer facilitates the dissemination of resources/training materials in relation to allegations against staff.	2	The Senior Officer for the Trust does not provide training in relation to alleagtions against staff. This has been done as part of Multiagency training by the LSCB.	

## 7. Inter-agency working

PLEASE NOTE: You must be able to evidence the response selected

Standard to Be Achieved	Evidenced Response			Score	Evidence - Details of Evidence to Support Score of '2' Effective or '3' - Exceeds requirements	If '1' 'Less effective' is selected, what plans are in place to meet the required standard? Who is responsible for these actions and by when?
	1. Less effective	2. Effective	3. Exceeds requirements			
Question					If 'Exceeds requirements' share best practice with your LSCB	If 'Less effective' transfer actions to Agency Action Tracker
<b>7.1) The organisation has a role in multi-agency strategic planning arrangements for services to safeguard and promote the welfare of children</b>	The organisation works in isolation, leading to duplication of work. The organisation is not aware of other agencies' involvement with children and families who use their services. Staffs do not routinely attend multi-agency meetings or understand the importance of their attendance and contribution. The organisation cannot demonstrate a culture of challenge which enables staff to challenge poor practice from another agency or within their own agency.	Effective Clearly expressed information is readily available to all staff to enable staff to be aware of arrangements being made by both their own and other agencies in respect of Section 11, Children Act, 2004; and are aware of their own and other agencies responsibilities for safeguarding and promoting the welfare of children and young people Evidence of pro-active promotion of multi-agency working. Barriers to inter-agency working are actively addressed both internally and with other agencies/teams Attendance at multi-agency meetings e.g. child protection meeting, is expected throughout the organisation	Multi-agency teams are co-located and work on a 'team around the child' basis. Literature is available to other professionals about the roles and responsibilities of the agency's staff. Managers at all levels in the organisation can demonstrate that they encourage a culture of constructive challenge and openness. Attendance at multi-agency meetings is monitored and action taken to address non-attendance.	2	The Trust Safeguarding policy highlights the importance of effective multiagency working. Staff are not co l	
<b>7.2) Staff are pro-active in ensuring that multi-disciplinary and inter-agency working is effective, and issues that arise are appropriately and effectively resolved</b>	The organisation works in isolation, leading to duplication of work. The organisation is not aware of other agencies' involvement with children and families who use their services. Staffs do not routinely attend multi-agency meetings or understand the importance of their attendance and contribution. The organisation cannot demonstrate a culture of challenge which enables staff to challenge poor practice from another agency or within their own agency.	Effective Clearly expressed information is readily available to all staff to enable staff to be aware of arrangements being made by both their own and other agencies in respect of Section 11, Children Act, 2004; and are aware of their own and other agencies responsibilities for safeguarding and promoting the welfare of children and young people Evidence of pro-active promotion of multi-agency working. Barriers to inter-agency working are actively addressed both internally and with other agencies/teams Attendance at multi-agency meetings e.g. child protection meeting, is expected throughout the organisation	Multi-agency teams are co-located and work on a 'team around the child' basis. Literature is available to other professionals about the roles and responsibilities of the agency's staff. Managers at all levels in the organisation can demonstrate that they encourage a culture of constructive challenge and openness. Attendance at multi-agency meetings is monitored and action taken to address non-attendance.	2	The Trust Safeguarding policy highlights the importance of effective multiagency working. Staff are not co l	
<b>7.3) Arrangements are in place to support effective interagency working on individual cases</b>	Staff cannot demonstrate that they can utilise and build on existing assessments, resulting in repetition. Staff cannot demonstrate that they engage with partner agencies e.g. utilising the common assessment framework.	Evidence that senior managers/members pro-actively encourage multi-agency working. Appropriate staff are trained and encouraged to utilise the Common Assessment Framework.	Monitoring is in place to demonstrate the effectiveness of the Common Assessment Framework in terms of outcomes for children and families.	2	Multiagency work takes place within the paediatric / emergency dept. CAF are not routinely carried out in t	

## 8. Information sharing

PLEASE NOTE: You must be able to evidence the response selected

Standard to Be Achieved	Evidenced Response			Score	Evidence - Details of Evidence to Support Score of '2' Effective or '3' - Exceeds requirements	If '1' 'Less effective' is selected, what plans are in place to meet the required standard? Who is responsible for these actions and by when?
	1. Less effective	2. Effective	3. Exceeds requirements			
Question					If 'Exceeds requirements' share best practice with your LSCB	If 'Less effective' transfer actions to Agency Action Tracker
8.1) A clear statement of the organisation's responsibility to share information relevant to the safeguarding of children in a secure manner	a) Information is shared in an ad hoc way with no clear guidance from senior managers. There is no clear guidance available to staff about recording in a way that differentiates fact from opinion.	Information is shared in a way that is ethical and legal, and is in accordance with guidance provided by their LSCB. Staff have a clear understanding about recording in a way that clearly delineates fact from opinion and base their recording on evidence of what they see/hear/smell.	The organisation can demonstrate that they have a clear policy which encourages appropriate information sharing and can evidence how this impacts on outcomes for children and families.	3	The Trust is signed up as a partner agency to the Multiagency Information sharing policy which covers the statutory agencies across Shropshire.	
	b) Staff do not feel able to appropriately share information with other agencies or families.	Staff who come into contact with children understand the purpose and importance of sharing information in order to safeguard and promote children's welfare and should be aware of relevant legislation, and there is evidence that this is addressed in training/induction/supervision etc.	Training clearly addresses the need for appropriate information sharing and encourages staff to use their professional judgement.	3	Information sharing is a key part in all training	
8.2) Staff/volunteers are aware of this statement and their personal responsibilities relating to it, including the obtaining of consent where appropriate.	a) Information is shared in an ad hoc way with no clear guidance from senior managers. There is no clear guidance available to staff about recording in a way that differentiates fact from opinion.	Information is shared in a way that is ethical and legal, and is in accordance with guidance provided by their LSCB. Staff have a clear understanding about recording in a way that clearly delineates fact from opinion and base their recording on evidence of what they see/hear/smell.	The organisation can demonstrate that they have a clear policy which encourages appropriate information sharing and can evidence how this impacts on outcomes for children and families.	3	The Trust is signed up as a partner agency to the Multiagency Information sharing policy which covers the statutory agencies across Shropshire.	
	b) Staff do not feel able to appropriately share information with other agencies or families.	Staff who come into contact with children understand the purpose and importance of sharing information in order to safeguard and promote children's welfare and should be aware of relevant legislation, and there is evidence that this is addressed in training/induction/supervision etc.	Training clearly addresses the need for appropriate information sharing and encourages staff to use their professional judgement.	3	Information sharing is a key part in all training	
8.3) If yes, how are they made aware of these – for example do you provide training on information sharing	a) Information is shared in an ad hoc way with no clear guidance from senior managers. There is no clear guidance available to staff about recording in a way that differentiates fact from opinion.	Information is shared in a way that is ethical and legal, and is in accordance with guidance provided by their LSCB. Staff have a clear understanding about recording in a way that clearly delineates fact from opinion and base their recording on evidence of what they see/hear/smell.	The organisation can demonstrate that they have a clear policy which encourages appropriate information sharing and can evidence how this impacts on outcomes for children and families.	3	The Trust is signed up as a partner agency to the Multiagency Information sharing policy which covers the statutory agencies across Shropshire.	
	b) Staff do not feel able to appropriately share information with other agencies or families.	Staff who come into contact with children understand the purpose and importance of sharing information in order to safeguard and promote children's welfare and should be aware of relevant legislation, and there is evidence that this is addressed in training/induction/supervision etc.	Training clearly addresses the need for appropriate information sharing and encourages staff to use their professional judgement.	3	Information sharing is a key part in all training	
8.4) Specific policies or arrangements are in place to communicate with partner agencies in relation the safeguarding of children/young people? Please provide examples.	a) Information is shared in an ad hoc way with no clear guidance from senior managers. There is no clear guidance available to staff about recording in a way that differentiates fact from opinion.	Information is shared in a way that is ethical and legal, and is in accordance with guidance provided by their LSCB. Staff have a clear understanding about recording in a way that clearly delineates fact from opinion and base their recording on evidence of what they see/hear/smell.	The organisation can demonstrate that they have a clear policy which encourages appropriate information sharing and can evidence how this impacts on outcomes for children and families.	3	Safeguarding information form is used to communicate with all external agencies in relation to children and families where there are concerns. Effective information sharing is a key part of the Trust Safeguarding policy and the Self Harm policy.	
	b) Staff do not feel able to appropriately share information with other agencies or families.	Staff who come into contact with children understand the purpose and importance of sharing information in order to safeguard and promote children's welfare and should be aware of relevant legislation, and there is evidence that this is addressed in training/induction/supervision etc.	Training clearly addresses the need for appropriate information sharing and encourages staff to use their professional judgement.	3	Is discussed at all levels of safeguarding training	
8.5) Records relating to children/young people are stored securely and safely	a) Information is shared in an ad hoc way with no clear guidance from senior managers. There is no clear guidance available to staff about recording in a way that differentiates fact from opinion.	Information is shared in a way that is ethical and legal, and is in accordance with guidance provided by their LSCB. Staff have a clear understanding about recording in a way that clearly delineates fact from opinion and base their recording on evidence of what they see/hear/smell.	The organisation can demonstrate that they have a clear policy which encourages appropriate information sharing and can evidence how this impacts on outcomes for children and families.	3	Trust is signed up to the information sharing policy with the local authorities	
	b) Staff do not feel able to appropriately share information with other agencies or families.	Staff who come into contact with children understand the purpose and importance of sharing information in order to safeguard and promote children's welfare and should be aware of relevant legislation, and there is evidence that this is addressed in training/induction/supervision etc.	Training clearly addresses the need for appropriate information sharing and encourages staff to use their professional judgement.	3	All safeguarding training highlights the importance of good information sharing	

Standard to Be Achieved	1. Less effective	2. Effective	3. Exceeds requirements	Score	Evidence - Details of Evidence to Support Score of '2' Effective or '3' - Exceeds requirements	If '1' Less effective' is selected, what plans are in place to meet the required standard? Who is responsible for these actions and by when?
8.6) Staff are aware of who to go to should they require clarification on information sharing	Staff do not know to whom they should go if they have any concerns about sharing information.	Staff have a named contact to whom they can go for clarification of any issues in relation to information sharing	The organisation can demonstrate that staff feel supported around information sharing and have confidence in their professional judgement and when to seek advice.	3	Staff are aware of who to ask for advice about Information sharing	

	<b>AGENCY ACTION TRACKER SUMMARY</b>
<b>Agency:</b>	
<b>Date completed:</b>	
<b>Question</b>	<i>Less effective' actions transferred from each sheet to Agency Action Tracker</i>
1.1	0
1.2	0
1.3	0
1.4	0
2.1	0
2.2	0
2.3	0
2.4	0
2.5	0

2.6	0
3.1	0
3.2	0
3.3	0
4.1	0
4.2	0
5.1	0
5.2	0
5.3	0
5.4	0
5.5	0
5.6	0



6.1	0
6.2	0
6.3	0
6.4	0
6.5	0
6.6	0
6.7	0
6.8	0
6.9	0
6.1	0
6.11	0
6.12 a)	0

<b>6.12 b)</b>	0
<b>6.13 a)</b>	0
<b>6.13 b)</b>	0
<b>6.14</b>	0
<b>7.1</b>	0
<b>7.2</b>	0
<b>7.3</b>	0
<b>8.1 a)</b>	0
<b>8.1 b)</b>	0
<b>8.2 a)</b>	0
<b>8.2 b)</b>	0
<b>8.3 a)</b>	0

<b>8.3 b)</b>	0
<b>8.4 a)</b>	0
<b>8.4 b)</b>	0
<b>8.5 a)</b>	0
<b>8.5 b)</b>	0
<b>8.6</b>	0

## The Section 11 SET Audit Tool - Score Summary

Totals for each area

Area	No of questions	Less effective	Effective	Exceeds Requirements	unanswered
1. Senior management commitment to the importance of safeguarding and promoting children's welfare	4	0	1	3	0
2. A clear statement of the agency's responsibility towards children is available to all staff	6	0	5	1	0
3. A clear line of accountability within the organisation for work on safeguarding and promoting the welfare of children	3	0	0	3	0
4. Service development takes account of the need to safeguard and promote welfare and is informed, where appropriate, by the views of children and families.	2	0	0	2	0
5. Staff training on safeguarding and promoting the welfare of children for all staff working with or, depending on the agency's primary functions, in contact with children and families	6	0	3	3	0
6. Recruitment, vetting procedures and allegations against staff	16	0	8	8	0
7. Inter-agency working	3	0	3	0	0
8. Information sharing	11	0	0	11	0
<b>Total All Areas</b>	<b>51</b>	<b>0</b>	<b>20</b>	<b>31</b>	<b>0</b>

