ESAB - Business Plan 2024 – 27 (Draft – V4) for Implementation by ESAB Sub-Committees

Green	Target met
Amber	Target in progress
Red	Target not met
Grey	Objective no longer viable or deliverable – with explanation

Qtr. 1	April - June
Qtr. 2	July - September
Qtr. 3	October - December
Qtr. 4	January - March

Priority 1 – Prevention & Awareness

We will improve the awareness of adults at risk within and across our communities and partner agencies, and we will work to prevent abuse and neglect.

1	Objective to be achieved	Who will be involved?	When and what will happen?	RAG status	What will be different and what will good look like?	Are there any risks attached to reaching the outcome?
			Y1: With Healthwatch set up a coproduction group, with TOR and share mutual expectations. Advise ESAB Executive Group for approval.		**Y1** **1.More safeguarding Adult referrals will be present from currently under represented groups.** **2.Safety will increase for adults at risk in particular communities.** **3. Engagement challenges will be more understood** **4.Co-production will enhance the work of ESAB**	
			With the co-production group, research and identify relevant community groups and organisations where engagement needs to be strengthened or put into place			
			Contact and meet with four 'under reached' community-based organisations (e.g., Faith Communities, Taxi Companies) and two 'easy to reach' organisations (e.g., Anglia Ruskin University; relevant voluntary sector groups) and explain why increased engagement is important.			
			With the co-production group, arrange briefings for Year 2 on ESAB responsibilities and priorities, to strengthen links to ensure closer working relationships, to learn from them. Document and analyse safeguarding challenges and recommend forward planning for Y2, based on assessment of achievement in Y1			
			Prevention & Awareness Sub-Committee to update ESAB Executive Team twice a year, on progress			
			Y2: With the co-production group, consider increased social media output from ESAB and set out alternative engagement routes (*e.g. working with GPs and increased cross working with SET).*			
			With the co-production group, and in relation to trying to prevent self-neglect, identify how we can reach people in rural areas who may or have difficulty in accessing services and plan engagement sessions where barriers can be identified and assess what could be done differently (linked to SAR			

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1.1 ESAB will strengthen its engagement with under reached groups; the voluntary sector, community leaders and faith groups, to better develop a shared knowledge and understanding of the safeguarding challenges faced by those communities, via an Equality, Diversity and Inclusion (EDI) lens, identify gaps and increase access to help and information, for those who may be at risk, and who have care and support needs	ESAB Officers ESAB Executive Team & Ind. Chair Quality Sub-Committee Prevention & Awareness Sub-Committee Multi-agency partners Community and Faith Leaders SET (Adult & Children and SETDAB) Learning & Development Group Healthwatch Essex Co-production Group	recommendations). Identify agencies and/or services who may benefit from learning more about safeguarding adult awareness.		**Y2** **1.Engagement routes will have foundations for maximisation.**	**1.Increased referrals may impact on partner resources.** **2. Particular community or faith cultures may discourage engagement and gaps may remain.** **3. Resource availability may change**
		Advise Executive Team of any resource impact and seek approval			
		Activate and deliver plan within Y2 of the ESAB Business plan			
		Y3: With the co-production group, evaluate outcomes, denote learning, and prepare a report for ESAB on the 3 years 'achievement space' and make any recommendations to ESAB for the forward plan.		**Y3** **1.A clear picture will be in place from which to move forward into 2027-2030, on community engagement and safeguarding adults at risk.**	
		Y1: With the co-production group, Create awareness raising events, and consider themed campaigns e.g. a conference or a series of on-line events/webinars/podcasts			
		Identify and agree partner communications leads, supported by the Executive Group			
		Gain agreement for shared implementation with key statutory partners, the voluntary sector and provider market, via the safeguarding Adult Leads network			
		With the coproduction group, plan calendar and ensure co-ordination with partner events			
		With the co-production group, set out Implementation Plan, associated costs and resource implications and make a written proposal to the Executive Group for consideration and ensure an evaluation of outcomes methodology is considered as part of the proposal			

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1.2 Develop a calendar of events/briefings/webinars to share with partners, for cross working and strengthen with campaign messages and straplines. Develop increased cross working with Safeguarding Boards for Adults and Children's Arrangements for Southend, Essex and Thurrock (SET); the Essex Suicide Prevention Board; The Essex Health and Wellbeing Board and the SET Domestic Abuse Board.	ESAB Officers Prevention & Awareness Subcommittee and Group Chair Executive Group and Independent Chair Multi-Agency Partners and Board Chairs Healthwatch Essex Co-production Group	With the co-production group, Implement plan and correlate delivery with Safeguarding Awareness Week, where and/or if possible.		**Y1** **1.A co-produced and co-ordinated calendar of awareness events will be in place.** **2. Cross working with relevant other Boards will be in place to strengthen safeguarding adult awareness and the prevention of abuse and neglect.** **3.Opportunities for shared working and increased collaboration will be in place.**
		Conduct evaluation and brief Executive Group with recommendations for Year 2		
		Y2: Repeat Y1 format		
		Recommend to ESAB any additional forward planning for Y3 based on assessment of achievement in Y2		
		Y3: Repeat Y2 format		
		Y1: Ensuring co production in all of the aspects below: jointly create templates for new newsletter(s), focusing on ESAB priorities and ensuring accessibility, readability, and suitability for different audiences (e.g. Easy read/ social media/ different languages/professional content/ community content/expert by experience stories/ safeguarding adult journeys/access (by agreement) positive narrative from partner safeguarding outcomes.		
		Produce a circulation list, with relevant contacts and share with Executive/Chair for approval.		
		Create first drafts a batch of newsletters for publication (*link with1.1)* and share with Executive group/Chair for approval pre-circulation.		
		Set out a range of social media targets for Years 1, 2 and 3, with metrics and targets		
		Increase newsletter circulation and social media reach range by 20% at the end of Year 1		
		Conduct Newsletter survey from circulation list to evaluate Year 1 impact		
		Y2: Analyse survey results		
		Set priorities out for newsletter content for Year 2 and associated target audiences based on survey results		
		Maintain contact and engagement with partner communications leads and involve them and gain their feedback		

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1.3 Develop new newsletters with increased accessibility and circulation, to enable ESAB to share safeguarding adult information with communities, partners, agencies and businesses. *(link to1.1)*	ESAB Officers Prevention & Awareness Sub Committee Partner (Communication Leads) Executive Group & Independent Chair Quality Sub-Committee Healthwatch Essex Statutory Partner leads Co-production Group	Conduct Newsletter survey from circulation list to evaluate Year 2 impact		**1. Awareness of the need to safeguard adults at risk will increase**	**1. Resource availability may change**
		Make recommendations to ESAB for Year 3 Forward Plan			
		Y3: Analyse survey results			
		Set Priorities out for newsletter content for Year 3 and associated target audiences based on survey results			
		Increase newsletter circulation and social media reach range by 50% at the end of Year 3			
		Conduct Newsletter survey from circulation list to evaluate Year 2 impact			
		Update ESAB with completion status; achievement and update report			
1.4 All ESAB/SET documents will be fully accessible and co-production will be in place to influence policy development by lived experience, enabling ESAB partners to strengthen their practice outcomes in Making Safeguarding Personal	Healthwatch Essex Co-production Group SAR Sub-Committee Prevention & Awareness Sub-Committee SET Safeguarding Adults Sub-Committee SET (Adults, Children's and SETDAB) Learning & Dev. Group ESAB Executive Group and Ind. Chair ESAB Officers	**Y1 :** Set up initial meeting with Healthwatch Essex to develop co-production strategies and jointly document what ESAB's co-production strategy will look like. Make consequent proposal to ESAB Exec Group.		**1.Co-production will improve:** **a) the embedding of Making Safeguarding Personal into safeguarding practice and activity;** **b) policy development and** **c) accessibility**	
		With the co-production group, identify priority areas for evaluation for Y1 e.g. jointly review ESAB website and its documents to assess accessibility and advise ESAB on any necessary changes.			
		Link with SABs in Southend and Thurrock to encourage a culture of regional co-production			
		Recommend to ESAB any additional forward planning for Y2, based on assessment of achievement in Y1			
		Y2 & Y3: As part of the co-production strategy, jointly review all ESAB and SET Policy, Procedure and Guidance documents to assess accessibility ensuring that MSP is embedded and update ESAB Executive group			
		Set out target areas where co-production will maximise accessibility and future positive development via influence on policy and procedure, from lived experience (connect with 1.3).			

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	Quality Sub-Committee				
		Y1: Conduct a review of ‘signposting’ information currently available from ESAB and if possible, who accesses it.			

Link with Safeguarding Children's Arrangements, SET DAB and Suicide Prevention Board, to identify what learning exists for cross over areas (e.g., Transitions /Think Family/ Mental Health/ Domestic Abuse /Suicide Prevention).	
Ascertain figures on referral conversion rates and hold a consultation with the partnership to establish what information, systems, or action, would help **not** to make inappropriate safeguarding referrals and set out referral guidance in conjunction with statutory leads and the Executive Group. Make recommendations to ESAB Executive and preparation for outcome of publication.	
Access and record Adult Social Care referral statistics from 2023 and consider the impact of received Police Data. Conduct an exercise to cross reference data outcomes in relation to safeguarding and relevant referrals, and document findings. Prepare a detailed report for ESAB Executive, with recommendations.	
Identify any gaps in cross purpose working and shared understanding of safeguarding responsibilities (*other areas to be considered following the Self-assessment Partnership Audit 2024 outcomes*)	
Findings of the Audit 2024 version to be undertaken to be reviewed and analysed and areas of improvement identified from the Self-Assessment Peer Challenge events **(3.3)**	
Link with Adult Social Care and Healthwatch to identify numbers of cases where barriers existed for those not requesting, or accepting, carers assessments (links with **2.2** and SAR recommendations).	
Recommend to ESAB any additional forward planning for Y2, based on assessment of achievement in Y1	
Y2: With SET, review ESAB and SET Policy, Procedure and practice guidance documents, and identify gaps, making recommendations to ESAB's Executive Team, which contain how any updates or gaps are managed in relation to deploying co-production. Following feedback from Executive, make relevant links e.g. linking with Healthwatch Co-Production group **(3.3)**	
Consider how ESAB can influence or gain assurance that carers assessments are being offered in relevant safeguarding situations and that support is made available for completing the assessment in conjunction with the Self-assessment Partnership Audit	
Repeat: access and record Adult Social Care referral statistics from 2024 to include the impact of Police Data. Cross	

1.5 ESAB will strengthen partner's ability to appropriately sign-post people and referrers to the correct support contacts to ensure 'cross purpose'; and increase understanding of each other's practices and challenges, and fill gaps in shared understanding. (Links with 1.2)	Prevention and Awareness Sub-Committee SET Safeguarding Adults Sub-Committee SET(Adult & Children and SETDAB) Learning & Dev. Group SAR Sub-Committee ESAB Officers Quality Sub-Committee SET Domestic Abuse Board Essex Suicide Prevention Board ESAB Executive Group Essex Police Adult Social Care Co-production Group	reference data outcomes in relation to safeguarding and relevant referrals and document the findings. Prepare a detailed report for ESAB Executive, to include any improvement outcomes from 2024, with any further recommendations.		**1.There will be less inappropriate Adult Safeguarding referrals.** **2. Gaps in understanding of 'cross purpose' safeguarding activity will be identified and recommendations made as to how they may be filled.** **3. Police, Adult Social Care and relevant Healthwatch Essex data will be analysed and cross referenced to maximise assurance on appropriate safeguarding activity**	**1.Data availability may vary**
		Y3: Evaluate response of the self-assessment audit for the 2026/27 in relation to safeguarding concern/referral rates across partner agencies and compare to safeguarding concern/referral metrics within Adult Social Care.			
		Conduct gap analysis following completed self- assessment audit in partner learning in respect of making appropriate safeguarding adult referrals.			
		Set out 'Time to Learn' sessions to include learning from SARS. Include access to SAR e-learning and set out delivery/access plan, working with the SAR Sub Committee, particularly focusing on SAR outcomes.			
		Repeat: access and record ASC referral statistics from 2024 to include the impact of Police Data. Cross reference data outcomes in relation to safeguarding and relevant referrals and document the findings. Prepare a detailed report for ESAB Exec, to include any improvement outcomes from 2025, with any further recommendations that may be required.			
		Y1: Co-production should be an integral part in all aspects of our development below			
		Identify any directories of services currently be available			

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1.6 Jointly develop an online directory of safeguarding services with the voluntary sector and co- production group.	Prevention & Awareness Sub-Committee Quality Sub-Committee ESAB Officers Co-production Group	Explore ESAB access/joint work with Directory holders/ owners		**1.A co-produced on line directory of safeguarding services will be in place**	**No risk identified**
		Explore on line access/ownership/ maintenance and updating agreements.			
		Explore any correlation between access to the Directory and any reduction in inappropriate referrals/ concerns at ASC			
		Make recommendations to ESAB to include forward planning for Y2, based on assessment of achievement in Y1			

Priority 2 – Learning

We will be open and transparent, sharing lessons learned from safeguarding practice and promote the development of an up to date, competent and skilled shared workforce.

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2	Objective to be achieved	Who will be involved?	When and what will happen?	RAG status	What will be different and what will good look like?	Are there any risks attached to reaching the outcome?
2.1.	ESAB will review Safeguarding Adult Review (SAR) documentation; ensuring a) it's fit for purpose, accessible, and easy to complete b) ensure that MSP, lived experience and EDI are embedded in reports that are required for the SAR process - with particular focus on Independent Management Reviews (IMRs)		**Y1** 1.A Multi Agency Task and Finish group, linked to the SAR Subcommittee, will review current SAR documentation to assess if it is fit for purpose; address gaps, and make recommendations to ESAB Executive Group, the Independent Chair and ESAB. (*Co-production may not be appropriate on this occasion owing to confidentiality required in relation to SARs).*		**1.MSP will be integral to the SAR referral and IMR processes**	**No risks identified**
			Early learning will be identified from the point of receipt of the SAR referral; the scoping form and the initial SAR Panel.			
			The Children's Rapid Review Model and other Models will be explored with consideration for recommendations to the SAR subcommittee and Executive Group.			
			SAR Sub Committee to create a new document to advise ESAB, Executive Group and partners, of early learning (shared with SET).			
			This process to be supported by a system to advise the Ind.Chair, Executive Group and partners, of progress and outcomes. Process to be approved by Executive Group and			

2.2 ESAB to ensure that early learning is identified from SAR cases and shared quickly and appropriately, with relevant partners, at the earliest possible stage in the SAR process and prior to SAR completion *(linked to 2.1 – section to be included in the reviewed IMR documents)*	SAR Sub-Committee Executive Group & Ind. Chair ESAB Officers Quality Sub-Committee SET Safeguarding Adults Group	Ind.Chair.		**2. Early learning from the SAR process will inform partners about improving their safeguarding performance.** **3. An improved set of quality standards will support the SAR process.** **4.Alternative SAR Methodologies will be in place.** **5. Appropriate SAR Referrals will be received**	
		A record of early learning will be in place and highlighted on the Action Plan in relation to where, how and to whom this has been disseminated.			
		Agencies will be held to account about implementation planning for deployment of early learning, with supportive systems and records of evidence kept by the SAR Sub Committee and submitted to ESAB as part of the quarterly SAR update			
2.3 ESAB will develop a set of expected quality standards for the SAR process		**Y2 and 3** A Task and Finish Group will develop a set of expected quality standards for the SAR process, to include SAR Overview Report completion, different approaches to SARs and author commissioning, which will include achievable timescales, and will be linked with the SAR Quality Assurance Framework and be sent to the Executive Group and ESAB Chair, for approval.			
		The Task and Finish Group will consider the development of a training programme for professionals to support the production of SMART Recommendations, cross referenced to SCIE Quality Markers and the ESAB Quality Assurance framework			
		ESAB SAR Standards to be agreed and published on the ESAB website			
2.4 ESAB will develop standards for safeguarding training; annually review its training provision; consider any specialist safeguarding training needs (where budgetary constraints allow) and develop evaluation processes.	Prevention & Awareness Sub-Committee SET (Adult & Children and SETDAB) Learning & Development Group Executive Group & Ind. Chair SAR Sub-Committees ESAB Officers	**Y1:** A full review of training provision will take place and highlight direct links to SAR outcomes, to include improvement recommendations.		**1.Training Standards and training evaluation will be in place**	**No risk identified**
		Specialist safeguarding training needs to be explored with partner agencies and an outcome brief provided to the Executive Group with recommendations.			
		Explore partner training guidance e.g., NHS Intercollegiate document; Bournemouth Safeguarding Competency Framework and Police Competency Framework and identify common competencies and responsibilities that can be linked with SET training framework to ensure consistency in safeguarding training design and delivery across partnership.			

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Priority 3 – Quality

We will assure our work, learn from experience, and set up processes to give insight into our ongoing commitment to continuously improve safeguarding practices.

3 Objective to be achieved	Who will be involved?	When and what will happen?	RAG status	What will be different and what will good look like?	Are there any risks attached to reaching the outcome
3.1 ESAB will ensure that all information received with regard to **SAR Action Plan** outcomes is evidence based, with accountability in place	SAR Sub-Committee Executive Group & Ind.Chair Quality Sub-Committee ESAB Officers Safeguarding Adult Leads network	**Y1:** Seek evidence from all partners who have been involved in improvement planning as a result of a SAR that occurred from April 2023 onwards, which demonstrates that learning has been embedded within their organisation e.g., changes in practice; metrics; supervision outcomes; safeguarding competency evidence; training, lived experience, MSP, EDI etc.		**1.Evidence based outcomes will be in place for SAR actions.** **2.Evidence will be in place to assure that organisational outcomes contain embedded SAR improvement actions.**	**Non-compliance by organisations**
3.2 ESAB will determine how/if practice improvement and learning are embedded in organisations, from SAR outcomes.		The quarterly SAR update report will include an update on embedded learning outcomes. To be shared with ESAB for early dissemination to partners with evidence of embedding processes to support organisational claims.			
		Y2 & Y3: The SAR Sub-Committee will ensure that information received to fulfil the Action Plan outcome requirements, is evidence based and assessed by the SAR Panel, in relation to their satisfaction of those requirements and any issues or disputes will be escalated to the ESAB Ind.Chair. The SAR T&F will identify a process to support this system.			
3.3 ESAB will explore the lived experience of those who access safeguarding services and work to improve that experience.	ESAB Officers Prevention & Awareness Sub-Committee SETDAB) Learning & Development Group Quality Sub-Committee Executive Group & Ind.Chair SAR Sub-Committee Healthwatch Essex	**Y1 & Y2:** Healthwatch to be asked to identify those with lived experience of accessing/using safeguarding services and invite the same to take part/ contribute to the co-production group to identify where improvement can be made; how safeguarding policy and procedure can be influenced, and subsequently develop a co-production strategy for safeguarding adults.		**Outcomes of lived experience will inform safeguarding activity and practice**	**No risk noted**
		Y1: Healthwatch to be invited to Chair a Lived Experience Group and present a bi-annual feedback report to the SAR Sub Committee Chair for escalation to Executive Group			
		To evaluate how many people are using post service evaluation, following use of safeguarding services and recommend how to encourage more completions, to gain meaningful information in relation to Making Safeguarding Personal.			
	Quality Sub-Committee	**Y1 & Y2:**			

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3.4 ESAB will endeavour to enable partners to make appropriate safeguarding referrals	ESAB Officers Executive Group & Ind.Chair Safeguarding Adult Leads network	ESAB to analyse data from Adult Social Care, considering the impact of increased safeguarding referrals and measures set out herein to try and improve the making of appropriate referrals and The group will advise the Ind.Chair every quarter of all ASC data.		**Information will exist to support the making of appropriate referrals and to seek assurance in relation to any surges in referrals or potential safeguarding backlogs.**	**No risk to this work is noted, however risk to service users may exist if high safeguarding referral figures denote backlogs**
3.5 ESAB will seek assurance from Partners on how they are meeting statutory Care Act requirements by undertaking a Self-assessment Audit Bi-Annually	SET Safeguarding Adult Boards ESAB Officers ESAB: Quality Sub-Committee ESAB Partners	**Y1:** Continuing the work started during Q4 of 2022/23, SET SABs will review the self-assessment audit responses from partners ensuring a) all statutory partners have contributed b) ESAB oversight on training /education around thresholds and referrals of potential safeguarding concerns/Making Safeguarding Personal, Lived Experience and EDI.		**Audit evidence will continue to be in place with regard to self-assessment of safeguarding activities to continue to provide assurance to ESAB and SET**	**Some risk to this work is noted, as partners will have to produce an evidence base which will require management and could impact on SAB resources for chasing info etc.**
		Y1: Partner agencies Peer Challenge events to be set up following the review of the self-assessment audits to enable partners to challenge each other and provide assurance to the Safeguarding Board in areas of training and education around thresholds and referrals of potential safeguarding concerns			
		Y2: A report to be presented to ESAB to further provide assurance following the partner agency peer challenge			
		Y3: Development to take place on the next reiteration of the partner self-assessment audit with safeguarding boards in Southend and Thurrock. Building on the findings from the 2024 audit and enabling cross reference to take place			
3.6 ESAB to evaluate its own practices by undertaking a SAB Peer Challenge with another SAB, set within a similar demographic	ESAB Officers Executive Group & Ind Chair ESAB partners (All) Quality Sub-Committee	**Yr1:** A SAB (external to Greater Essex) to be identified and approached to consider a reciprocal SAB Peer Challenge		**Healthy challenge will be in place to improve our development and learning**	**Availability of another SAB to carry this out could be an issue given pressures etc**
		Y2 & Y3 A findings report will be developed and submitted to the reciprocal SAB and details will be included in the respective Annual report			

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