

SAFEGUARDING RAISING THE PROFILE	
Indicator number	8.1
Indicator name	Learning from Safeguarding Concerns
Indicator weighting (% of CQUIN scheme available)	0.25%
Description of indicator	There is a need to ensure safeguarding practices support the needs of vulnerable children and adults. This indicator is aimed at ensuring that providers continue to embed safeguarding into practice, implement lessons learnt following a safeguarding event, reflect on practice and ensure that the voice of the child/adult is heard
Numerator	N/A
Denominator	N/A
Rationale for inclusion	It is essential that all organisations are sighted on safeguarding from Board level down. Staff should be supported with the necessary training and skills to identify and support vulnerable patients appropriately to take the appropriate steps to reduce risks of harm. Starting with a robust Training Needs Analysis, safeguarding training competency levels requirements should be known for all staff and a comprehensive training programme should be in place to ensure that a high % of workforce have been trained. Additionally patient stories should be shared and a culture of learning embedded
Data source	Provider
Frequency of data collection	Quarterly
Organisation responsible for data collection	Provider
Frequency of reporting to commissioner	Quarterly
Baseline period/date	Not applicable
Baseline value	
Final indicator period/date (on which payment is based)	April 2014 - March 2015
Final indicator value (payment threshold)	Targets are set out as part of quarterly monitoring and payment requirements.
Rules for calculation of payment due at final indicator period/date (including evidence to be supplied to commissioner)	As per milestones below
Final indicator reporting date	30th April 2015

Are there rules for any agreed in-year milestones that result in payment?	Yes - see below		
Are there any rules for partial achievement of the indicator at the final indicator period/date?	No		
Milestones			
Date/period milestone relates to	Rules of achievement of milestones (including evidence to be supplied to commissioner)	Date Milestone to be reported	Milestone weighting (% of CQUIN scheme available)
Q1	<p>The Provider must demonstrate that they have developed and implemented training and processes to capture service user stories:</p> <p>By the end of Q1 the provider will have developed/implemented:</p> <ul style="list-style-type: none"> • Trust safeguarding policy will be reviewed and updated where appropriate • 3 high risk stories to be presented to the Safeguarding Committee during Quarter 1 which could include SCRs, Serious incident or National case. • Actions from each story will be identified and included in the Trust Safeguarding Integrated Action plan • A summary of these will be included in a Quarterly report to Trust Board and any inter agency issues will be identified and discussed with commissioners safeguarding leads at regular 1:1 meetings to explore solutions <p>Evidence of the above to be produced in relation to the quarterly CQUIN report to the commissioner.</p>	31-Jul-14	<p>Monies will be withheld if there is insufficient evidence for each element of the CQUIN.</p> <p>Where all the Q1 requirements are met, 25% of annual CQUIN monies associated with this indicator will be paid.</p>
Q2	<ul style="list-style-type: none"> • 3 high risk stories to be presented to the Safeguarding Committee during Quarter 2 which could include SCRs, Serious incident or National case. • Actions from each story will be identified and included in the Trust Safeguarding Integrated Action plan • A summary of these will be included in a Quarterly report to Trust Board and any inter agency issues will be identified and discussed with commissioners safeguarding leads at regular 1:1 meetings to explore solutions • Any weaknesses in arrangements with other agencies will be captured and shared with commissioners safeguarding leads and at the Birmingham Safeguarding Board. (Commissioners will respond on actions to address these weaknesses within 1 month.) <p>Evidence of the above to be produced in relation</p>	31-Oct-14	<p>Monies will be withheld if there is insufficient evidence for each element of the CQUIN.</p> <p>Where all the Q2 requirements are met, 25% of annual CQUIN monies associated with this indicator will be paid</p>

	to the quarterly CQUIN report to the commissioner.		
Q3	<p>The Provider must:</p> <ul style="list-style-type: none"> • 3 high risk stories to be presented to each the Safeguarding Committee meeting during Quarter 3 1 which could include SCRs, Serious incident or National case. • Actions from each story will be identified and included in the Trust Safeguarding Integrated Action plan • A summary of these will be included in a Quarterly report to Trust Board and any inter agency issues will be identified and discussed with commissioners safeguarding leads at regular 1:1 meetings to explore solutions <p>• Any weaknesses in arrangements with other agencies will be captured and shared with commissioners safeguarding leads and at the Birmingham Safeguarding Board. (Commissioners will respond on actions to address these weaknesses within 1 month.)</p> <p>Evidence of the above to be produced in relation to the quarterly CQUIN report to the commissioner.</p>	30-Jan-15	<p>Monies will be withheld if there is insufficient evidence for each element of the CQUIN.</p> <p>Where all the Q3 requirements are met, 25% of annual CQUIN monies associated with this indicator will be paid.</p>
Q4	<p>The Provider must:</p> <p>Demonstrate that they have developed and agreed a plan for reporting on and reviewing more detailed safeguarding cases on a routine basis through the Trust Safeguarding Committee and through to the Trust Board. Results of this and progress in developing the plan will be shared with the commissioners safeguarding lead at the regular joint meeting between Trust and CCG safeguarding lead.</p> <ul style="list-style-type: none"> • In month 10 meet with CCG Safeguarding team and review current Safeguarding policies (Provider) against the CCG policy, to embed any learning etc. <p>Evidence of the above to be produced in relation to the quarterly CQUIN report to the commissioner.</p>	30-Apr-15	<p>Monies will be withheld if there is insufficient evidence for each element of the CQUIN.</p> <p>Where all the Q4 requirements are met, 25% of annual CQUIN monies associated with this indicator will be paid.</p>

SAFEGUARDING RAISING THE PROFILE	
Indicator number	8.2
Indicator name	Increasing safeguarding awareness
Indicator weighting (% of CQUIN scheme available)	0.25%
Description of indicator	There is a need to ensure safeguarding practices support the needs of vulnerable children and adults. Therefore this indicator is aimed at ensuring that providers continue to raise safeguarding awareness through staff training, thereby ensuring workforce has sufficient competency to recognise and respond to safeguarding concerns
Numerator	N/A
Denominator	N/A
Rationale for inclusion	It is essential that all organisations are sighted on safeguarding from Board level down. Staff should be supported with the necessary training and skills to identify and support vulnerable patients appropriately to take the appropriate steps to reduce risks of harm. Starting with a robust Training Needs Analysis, safeguarding training competency levels requirements should be known for all staff and a comprehensive training programme should be in place to ensure that a high % of workforce have been trained. Additionally patient stories should be shared and a culture of learning embedded
Data source	Provider
Frequency of data collection	Quarterly
Organisation responsible for data collection	Provider
Frequency of reporting to commissioner	Quarterly
Baseline period/date	Q1 2014-15
Baseline value	
Final indicator period/date (on which payment is based)	
Final indicator value (payment threshold)	Targets are set out as part of quarterly monitoring and payment requirements.
Rules for calculation of payment due at final indicator period/date (including evidence to be supplied to commissioner)	As per milestones below
Final indicator reporting date	30th April 2015
Are there rules for any agreed in-year milestones that result in payment?	Yes
Are there any rules for partial achievement of the indicator at the final indicator period/date?	No

NOTE: Service Area reporting will be based on Trust configuration reflecting overall Clinical Director responsibilities.

Milestones

Date/ period milestone relates to	Rules of achievement of milestones (including evidence to be supplied to commissioner)	Date Milestone to be reported	Milestone weighting (% of CQUIN scheme available)
Q1	<p>By the end of Q1 the provider will have developed/implemented:</p> <p>Competence training</p> <p>A robust Training Needs Analysis (TNA) for safeguarding, MCA/DoLS, Domestic violence and PREVENT, will be produced and shared with commissioners - baseline by clinical service area together with trajectory actions to be agreed with commissioners to achieve a year end trained staff % per clinical service area of a minimum of Childrens and Adults Safeguarding Level 1 90%, 85% Higher Level(s) Adult Safeguarding and Childrens Safeguarding; PREVENT 50%; MCA/DOLS 85%</p> <ul style="list-style-type: none"> Trust system changes will be implemented to provide in depth training reporting by the end of Q1. Reporting to include clinical service specific training levels. <p>Competence training reporting</p> <ul style="list-style-type: none"> Develop and agree a dashboard to be presented Quarterly to commissioners that shows number and % of staff trained broken down to show rolling monthly figures that are clinical service specific. <p>The CCG recognises that the TNA will necessarily reflect;</p> <p>National / local evidence of what competence / knowledge staff require Evidence of current awareness of staff / staff groups / services Level of risks which those staff are engaged with</p> <p>The expectation is that the Trust will evidence a robust TNA which identifies what would be the best method to reduce these risks but which also reflects how to mitigate against such factors as;</p> <ul style="list-style-type: none"> Current capacity / resources of staff Best method to address any identified knowledge / deficit Areas of greatest risk / need 	31/07/2014	<p>As indicators are interdependent on delivering a sustained improvement quarter on quarter a penalty of a minimum of 50% of the % indicator will be imposed where the indicator has not been fully met. The % penalty may be applied pro rata where there is partial achievement.</p> <p>Where all the Q1 requirements are met, 20% of annual CQUIN monies associated with this indicator will be paid.</p>

Q2	<p>The Provider must:</p> <ul style="list-style-type: none"> •Provide dashboard update and exception report where achievement of trajectory % of training compliance, as indicated in the TNA, has not been met. 	31/10/2014	Where all the Q2 requirements are met, 20% of annual CQUIN monies associated with this indicator will be paid
Q3	<p>The Provider must:</p> <ul style="list-style-type: none"> •Provide dashboard update and exception report where achievement of trajectory % of training compliance, as indicated in the TNA, has not been met. 	31/01/2015	Where all the Q3 requirements are met, 20% of annual CQUIN monies associated with this indicator will be paid
Q4	<p>The Provider must:</p> <p>Provide dashboard update and exception report where achievement of trajectory % of training compliance, as indicated in the TNA, has not been met</p> <p>Achieve a year end trained staff % per clinical service area of a minimum of Childrens and Adults Safeguarding Level 1 90%, 85% Higher Level(s) Adult Safeguarding and Childrens Safeguarding; PREVENT 50%; MCA/DOLS 85%</p>	30/04/2015	<p>Where all the Q4 requirements are met, 40% of annual CQUIN monies associated with this indicator will be paid.</p> <p>The indicator is weighted to an outcome based year end achievement target based on Q1 TNA. A penalty of a minimum of 50% of the % indicator will be imposed where the indicator has not been fully met i.e.</p> <p>50% or less No payment 50% to 69% = 10% 70% to 79% = 20% 80% to 84% = 30% 85% or above = 40%</p>

SAFEGUARDING RAISING THE PROFILE	
Indicator number	8.3
Indicator name	Embedding and acting on intelligence
Indicator weighting (% of CQUIN scheme available)	0.25%
Description of indicator	There is a need to ensure that existing safeguarding practices support the needs of vulnerable children and adults. Therefore this indicator is aimed at ensuring that providers continue to embed safeguarding into practice, actively seek and implement lessons learnt following a safeguarding event
Numerator	N/A
Denominator	N/A
Rationale for inclusion	It is essential that all organisations are sighted on safeguarding from Board level down. Staff should be supported with the necessary training and skills to identify and support vulnerable patients appropriately and to take the appropriate steps to reduce risks of harm. Starting with a robust Training Needs Analysis, safeguarding training competency levels requirements should be known for all staff and a comprehensive training programme should be in place to ensure that a high % of workforce have been trained. Additionally patient stories should be shared and a culture of learning embedded
Data source	Provider
Frequency of data collection	Quarterly
Organisation responsible for data collection	Provider
Frequency of reporting to commissioner	Quarterly
Baseline period/date	Q1 2014-15
Baseline value	
Final indicator period/date (on which payment is based)	
Final indicator value (payment threshold)	Targets are set out as part of quarterly monitoring and payment requirements.
Rules for calculation of payment due at final indicator period/date (including evidence to be supplied to commissioner)	As per milestones below
Final indicator reporting date	30th April 2015

Are there rules for any agreed in-year milestones that result in payment?	Yes		
Are there any rules for partial achievement of the indicator at the final indicator period/date?	No		
Milestones			
Date/period milestone relates to	Rules of achievement of milestones (including evidence to be supplied to commissioner)	Date Milestone to be reported	Milestone weighting (% of CQUIN scheme available)
Q1	<p>The Provider must develop a baseline and reporting format</p> <p>Trust to develop and agree a reporting mechanism for presenting to commissioners by means of a dashboard and action plan. Dashboard to include: 1) Referral/Alert figures broken down by service area; advice and support 2) Calls broken down by service area; 3) Numbers of incidents and complaints that have been referred to the safeguarding team for screening of safeguarding concerns; 4) Number of Dols applications; 5) Number of referrals to IMCA service; and Court of Protection cases. TRIANGULATION AND ACTION PLAN</p>	Where all the Q1 requirements are met, 40% of annual CQUIN monies associated with this indicator will be paid.	As indicators are interdependent on delivering a sustained improvement quarter on quarter a penalty of a minimum of 40% of the % indicator will be imposed where the indicator has not been fully met. The % penalty may be applied pro rata where there is partial achievement.
Q2	The Provider must produce dashboard and present to commissioners on a quarterly basis at CQRM	Where all the Q2 requirements are met, 20% of annual CQUIN monies associated with this indicator will be paid	Where all the Q2 requirements are met, 20% of annual CQUIN monies associated with this indicator will be paid
Q3	The Provider must produce dashboard and present to commissioners on a quarterly basis at CQRM	Where all the Q3 requirements are met, 20% of annual CQUIN monies associated with this indicator will be paid	Where all the Q3 requirements are met, 20% of annual CQUIN monies associated with this indicator will be paid

Q4	The Provider must produce dashboard and present to commissioners on a quarterly basis at CQRM	Where all the Q4 requirements are met, 20% of annual CQUIN monies associated with this indicator will be paid.	Where all the Q4 requirements are met, 20% of annual CQUIN monies associated with this indicator will be paid.
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