

Adult Social Care Practice Standards

Swindon Borough Council

Adult Services

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Introduction

These standards will provide clear expectations of the quality of our practice and the way we work in Adult Social Care in Swindon. These standards and actionable commitments to uphold them complement existing Professional Standards.

Practice standards are necessary to ensure safe, effective, ethical, and quality practice with people. They link to our values and behaviours within Swindon and provide strong foundations to ensure outstanding quality of service. These standards have been written while prioritising strengths-based and person-centred practice, dignity and respect, safeguarding, and consent.

This guide is supplementary to our key external frameworks and guidance that help underpin our practice here in Swindon are the Care Act 2014, Mental Capacity Act 2005, Mental Health Act 2007 and CQC Standards.

Relevant frameworks and guidance for Social Work are the Professional Capabilities Framework (PCF), the Code of Ethics | BASW, the Social Work England professional standards, Post Qualifying Standards for Practice Supervisors and the KSS - Knowledge and Skills Statements for Social Workers in Adults Services. For Occupational Therapists, the HCPC Standards of conduct, performance and ethics and Professional standards for occupational therapy practice, conduct and ethics and Post Qualifying Standards for Practice Supervisors.

Acknowledgements

Our Practice Standards will only be effective if they include a commitment to understanding the lived experiences of the people we support. Therefore, we have based these Standards on the premise of the Think Local, Act Personal Making it Real I/ We Statements in order to keep the wellbeing of people at the heart of all we do. We would like to acknowledge and thank our local experts by experience who have worked together with us to tailor our 'I' statements to what the people of Swindon feel is most important. Our 'I' statements are also at the heart of our Adult Services Strategy.

We also acknowledge and thank the South West Adult Principal Social Worker Network who have collaborated to produce a shared approach and consistency in relation to Practice Standards, and particular thanks to Principal Social Worker at Bournemouth, Christchurch and Poole who led on this work.

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Theme 1: Working with people

Standard 1 Working Together with People

What people can expect

Swindon 'I' Statements:

"The key principle of the Working Together Plan, "Nothing about us, without us" is being adhered to. I am treated with respect. I am asked about how I want to be supported and what I want to be supported with. My views and wishes are listened to. I have people in my life who care about me – family, friends, and people in my community. I know what my rights are and can get information and advice on all the options for my health, care and housing. When I couldn't speak for myself, I had someone I trusted to speak for me. The people that support me, understand and respect my rights".

Our standards:

- ✓ We promote people's dignity, respect and rights, seeing people as people, not "referrals, cases or service users". Everyone is unique, no two people are the same. People with lived experience and unpaid carers are of equal importance and priority.
- ✓ We build positive relationships by communicating clearly in a way that ensures the person is fully involved. We ensure family, carers or advocates are involved where needed.
- ✓ We provide the right information and advice, at the right time and in the right way to empower people to make informed decisions that are best for them.
- ✓ We ensure all written letters and documents are clear and precise, avoiding confusion or misinformation. We use plain jargon free language to ensure people understand what is being explained or discussed.
- ✓ We are person centred, we ensure that the person's voice, wishes and feelings are respected, listened to and evidenced in all records and documents.
- ✓ We listen to and understand what is important to people, we focus on people's desired outcomes not just their assessed needs.
- ✓ We have honest conversations, we work with people as equals, we strive to build and sustain relationships based on trust, kindness, and respect.
- ✓ We recognise the strengths of each person, their family and their community. We recognise that people are experts by experience in their own lives and the situations they encounter and encourage them to lead in problem solving to enable them to live the life they want.
- ✓ We believe in the rights of all people to choose how they want to live, and what activities are important to them, with their wellbeing remaining central to all our work with them.
- ✓ We respond to people promptly and seek to resolve any disagreements quickly. We ensure we keep people informed and updated on any progress or changes - even if it is to tell them there isn't an update, but we are still working on things.
- ✓ We ensure people know who to contact and how to contact them, in a way that best suits their needs.

- ✓ We ensure we gain a person’s consent which is voluntary and informed, has due regard to capacity, is proportionate to the circumstances and is appropriately documented. We maintain a person’s confidentiality, unless risks are such that we can override this and adhere to the Data Protection Act 1998 and GDPR in how we manage all personal information.
- ✓ We participate in interprofessional and multiagency collaboration to ensure that well-coordinated, person-centred support is delivered in the most effective ways for people.
- ✓ We will ensure assessments, interventions, services, outcomes and documentation will be centred on performance (the level at which a person is able to carry out their activity), engagement and participation in life roles and in activities that are meaningful.

Standard 2 Advice Wellbeing & Prevention

What people can expect

Swindon ‘I’ Statements:

“I can live the life I want and do the things that are important to me as independently as possible. I am able to spend time doing things I value or enjoy. I can meet people who like the same things as me and I can join in groups and activities. I have opportunities to learn, volunteer and work and I can do things that I like doing and am good at. I know how to find out about my care and support. I can get advice about this if I need it. I know how to find out about keeping healthy and well. This includes looking after my mental health. The people that support me, understand and respect my rights. I am supported to live the life I want to. I know what my rights are and can get information and advice on all the options for my health, care and housing”.

Our standards:

- ✓ We support people who don’t currently meet the criteria for our services to have access to information, equipment and adaptations to prevent, reduce or delay future needs and support individuals to explore different ways of doing the activities that are important to them.
- ✓ We provide information and advice to everyone who contacts us requesting support regarding their wellbeing, care and support needs. This includes people who arrange or fund their own support and care. The information we provide is objective, relevant and evidence-based where possible.
- ✓ We tell people about person-centred approaches to planning and managing their needs and support and make sure that they have the information, advice and support to think through what will work best for them.
- ✓ We tell people that social care services are chargeable and personal contributions are dependent upon financial assessment. We tell people that equipment and minor adaptations provision is non-chargeable. We advise people when interventions and support are means tested e.g Disabled Facilities Grants. Where people are not eligible for financial support we signpost to charitable funding opportunities as appropriate.

- ✓ We provide information to make sure people know how to navigate the local health, care and housing system, including how to get more information or advice if needed and refer on to other services if necessary. E.g. Live Well, health, voluntary and independent sectors.
- ✓ We provide accurate and up-to-date information in formats that we tailor to individual needs, face to face if necessary.
- ✓ We provide information and advice about health, social care, the local community (including groups and resources) and housing which is tailored to a person's situation.
- ✓ We understand the role of the practitioner in health promotion, health education and preventing ill health and we empower and enable people to play a part in managing their own health and wellbeing.
- ✓ We work in partnership with others to create opportunities for people to work, both paid and voluntary and to learn.
- ✓ We ensure that people who are waiting for an assessment are 'waiting well' by signposting them to other services, taking proactive action to mitigate risk.

Standard 3 Case Recording

What people can expect

Swindon 'I' Statements

"The people that support me, understand and respect my rights. I have records kept about me and my social care needs that are accurate, concise, and relevant. They are written respectfully, and they are clear enough that I don't have to tell my story more than once".

Our standards:

Our case recording standards apply to all records we keep and to our written communication and documentation, including case notes, assessments, support plans, letters and emails.

- ✓ We ensure all our recording is of a good standard, including grammar and spelling. They are written in plain language with no abbreviations, or acronyms.
- ✓ We ensure our records are accurate, objective, and clearly distinguish fact and professional opinion, with valid supporting evidence including any clinical reasoning for equipment plans.
- ✓ We ensure records show a clear rationale and reasoning for all key decisions made with a record of the people involved and their rationale, including management direction or decisions.
- ✓ We record the next steps and actions within case notes to demonstrate accountability.
- ✓ We take care to ensure case notes only record information relevant to that person.
- ✓ We ensure our case notes are recorded on the same day or as soon as practically possible.
- ✓ We ensure emails and other documents are summarised and when necessary uploaded directly, not copied and pasted into a case note, as detailed in '[Adult Social Care - Adult Services Case Recording Guidance](#)'.

- ✓ We use summaries and closure summaries at relevant intervals to ensure clarity for colleagues and prevent the need for the person to have to retell their story.
- ✓ We all ensure that people's personal details are checked and kept up to date on the case management systems.
- ✓ We maintain records within the legal frameworks of Data Protection Act (1998), General Data Protection Regulations (GDPR), Caldicott Principles and Legal Professional Privilege.
- ✓ We ensure that people who have difficulties with reading are supported to understand what is being written about them through the use of reasonable adjustments.

Standard 4 Strengths Based Assessments

What people can expect

Swindon 'I' Statements:

"I am asked about how I want to be supported and what I want to be supported with. My views are listened to. I can live the life I want and do the things that are important to me as independently as possible. I have people in my life who care about me – family, friends, and people in my community. When I couldn't speak for myself, I had someone I trusted to speak for me. My care and support is well organised. Everyone works well with each other, and with me. The people that support me, understand and respect my rights. I am supported to live the life I want to".

Our standards:

- ✓ We make assessments and observations through conversations that capture the voice of the person, to understand the person's story, functional abilities, needs, wishes, preferences, and desired outcomes within the context of what's important to them and their environment.
- ✓ We recognise that people and carers are experts in their own lives and encourage them to lead in problem solving to support them to live the life they want.
- ✓ We focus on the strengths in a person's life and the impact their care and/or support needs have on their ability to participate in the activities that are important to them and on their wellbeing.
- ✓ We understand the person's aspirations, their relationships, their occupational identity and explore opportunities to sustain and develop further networks of support.
- ✓ We understand the structure and function of the human body, together with knowledge of physical and mental health, disease, disorder and dysfunction relevant to our profession to inform our strengths-based conversation.
- ✓ We make assessments that are proportionate to the person's presenting circumstances including any areas of risk and concern. We involve specially trained staff where necessary for specialist assessments, such as assessments for people with dual sensory loss, as well as requirements for interpreters.
- ✓ We ensure the person is fully involved and appropriate advocacy is utilised where needed.

- ✓ We capture any fluctuating needs through asking the person what a good day / bad day looks like for them.
- ✓ We take a whole family approach by exploring the impact of the person's needs on those around them, including any children, family members and carers and taking action when required.
- ✓ We are alert to where there could be safeguarding concerns and take appropriate action.
- ✓ We record when other professionals have been consulted or involved in order to understand and inform the person's presenting needs and situation.
- ✓ We make a reassessment where a person's circumstances and/or needs and/or personal budget have changed significantly.
- ✓ We ensure that all assessments are completely in a timely manner and are reflective of the person's current situation. We aim to have all assessments completed within a 28 working days timeframe. Where this is not possible, we record why this has not been achieved, and communicate with the person, their representative, and our line manager to confirm why this has not been achieved and confirm when the assessment will be completed.
- ✓ We clearly summarise a person's care and support needs in our assessment and support plan documents, including the impact of unmet needs. It is clear which needs are eligible for council-funded support and those which are not, and why this is so.
- ✓ We provide the person with a copy of their assessment and to relevant others with consent, which provides a clear statement of their needs and eligibility. This is irrespective of their eligibility or whether they go on to receive formal support.

Theme 2: Providing support.

Standard 5 Personalised Care and Support Planning / OT Intervention Planning

What people can expect

Swindon 'I' Statements:

"I can get help and support to employ my personal assistants. I know how much money is available to meet my care and support needs and I know that I can decide between having my care and support planned for me or I can have a direct payment and use this money in the best way to meet my needs. I have control over my daily life. I have people in my life who care about me – family, friends, and people in my community. I can meet people who like the same things as me and I can join in groups and activities. I have a place I can call home, not just a 'bed' or somewhere that provides me with care. I live in a home that works for me. When I am unwell I am still supported to stay at home. I am supported to live the life I want to. My support is planned around the things that I am good at and the skills I have. I helped to create my plan so I can keep myself safe and stay in control in emergencies. My care and support is well organised. Everyone works well with each other, and with me. I have the right support, at the right time".

Our standards:

- ✓ We work with people to make sure that their plans promote their wellbeing, belonging and social identity, and to support people to participate in activities that are important to them, with choice and control over their lives.
- ✓ We have conversations with people to plan care, support and intervention that remains open-minded to potential solutions, including innovative and / or community-based solutions, creative use of direct payments, environmental adaptations, equipment, assistive technology as well as more traditional models of care.
- ✓ When providing specialist advice and interventions, e.g. occupational therapy/hearing and vision, we will use national guidelines, current policy, research and best available evidence to underpin and inform our reasoning, rationale and practice to achieve the identified goals for people, keeping in mind best value.
- ✓ We understand the universal responsibility to work as effectively and efficiently as possible to make best use of and sustain environmental, physical, financial, human and personal resources, whilst seeking to meet the needs of those who access the service. This means using resources to deliver services in a way that does not compromise the health of present or future generations.
- ✓ We look for ways to involve people in their communities, so they feel included and valued for their contribution.
- ✓ We work with people to manage risks by thinking creatively about options for safe solutions that enable people to continue to do the things that matter most to them.
- ✓ We are clear that when support planning, and intervention planning, we must apply the appropriate legislation, i.e., Care Act (2014), Mental Capacity Act (2005), Mental Health Act (1983) s.117, National Framework for NHS Continuing Healthcare and NHS-funded Nursing Care, Health and Safety at Work etc Act 1974, Housing Grants, Construction and Regeneration Act (1996).
- ✓ We ensure people have access to appropriate aids, adaptations, technology and equipment that will overcome environmental barriers and promote participation in meaningful activities, thinking creatively to explore alternative solutions where 'off the shelf' solutions do not suffice.
- ✓ We believe in meeting needs and outcomes rather than providing services, when developing a plan and not just focusing on their eligible care and support needs.
- ✓ We are clear how any needs people have that may be linked to gender, sexuality, disability, ethnicity, or religion will be met in a personalised way.
- ✓ We ensure people are informed of their indicative personal budget, to enable them to have choice and control over how their support is arranged.
- ✓ We develop plans, in plain language, linking them, where necessary, with other plans, (such as plans of carers, health and other care plans).
- ✓ We plan for contingencies/emergencies when discussing care and support options, so the person can stay in as much control as possible at these times.
- ✓ We always give people a copy of their plan and share it with relevant others, as agreed with the person.
- ✓ We are clear about how people can contact us if their needs or situation changes.

Standard 6 Reviewing Care & Support plans

What people can expect

Swindon 'I' statements

"My care and support is well organised. Everyone works well with each other, and with me. I have the right support, at the right time. Since I started having support, there have been some big changes in the way I am supported. There was a plan in place for this big change and I knew who to talk to about this plan. When I couldn't speak for myself, I had someone I trusted to speak for me".

Our standards:

- ✓ We have strengths based, outcome focused review conversations, that are accessible and proportionate to the person and their needs, using outcome measures where possible to measure the effectiveness of our support and the impact on the person.
- ✓ We reflect on what is working, what is not working and what may need to change, considering whether the person's needs and outcomes are being met.
- ✓ We ensure the person is at the centre of their review, involving advocates and/or relevant others, so we are able to gather feedback about the impact of the plan and the outcome for the person.
- ✓ We review the person's needs, their outcomes, and their plan, and recognise the review and revision of the plan are intrinsically linked. We may also consider a review of the carer's plan at the same time, if this is agreed as the best approach.
- ✓ We consider the quality of care/intervention that is commissioned/provided for the person, asking them and ourselves is it of good quality? We address and report concerns to our contracts and commissioning colleagues and/or line managers. We are all responsible for reviewing the quality of care and support and reporting any concerns.
- ✓ We ensure review conversations take place 6-8 weeks after a plan is first implemented (service set up review), and then as required for the persons circumstances. We ensure reviews are no longer than 12 months apart, recognising that reviews mitigate the risk of a person entering into crisis.
- ✓ We review the person's plan and funding provision, ensuring the FAB assessment has taken place, personal contribution to care and support is discussed and personal budget amount is confirmed with the person and updated in their plan.
- ✓ We review equipment provided to establish if it is meeting the person's needs.
- ✓ We ensure that, where a person's circumstances and/or needs have changed significantly, we carryout a reassessment of needs.
- ✓ We send a copy of the record of the review to the person and with their consent share with relevant others.

Theme 3: How the local authority ensures safety within the system.

Standard 7 Working with Risk

What people can expect

Swindon 'I' Statements:

"I feel safe and have support to think about how to keep myself safe. I know who to contact if I don't feel safe. The people that support me, understand and respect my rights. I am asked about how I want to be supported and what I want to be supported with. My views are listened to. I can live the life I want and do the things that are important to me as independently as possible. When I couldn't speak for myself, I had someone I trusted to speak for me".

Our standards:

- ✓ We practise safely and effectively within our scopes of practice by identifying the limits of our practice and when to seek advice or refer to another professional or service, recognising the need to manage our own workload and resources safely and effectively and keeping our skills and knowledge up to date.
- ✓ We discuss and consider risk throughout our assessment conversations, support planning and reviews.
- ✓ We take a balanced approach to risk and work with people to explore the positive aspects of risk taking, as well as what might go wrong to establish if it is a risk worth taking.
- ✓ We work together with people and their networks of support to undertake risk assessments and action plans, capturing the persons, views and wishes, to support positive outcomes that matter to them and in order to share and manage risks appropriately.
- ✓ We ensure all risk assessments support evidence-based discussions and decisions, recognising they are dynamic and can change and should be reviewed and shared regularly.
- ✓ We acknowledge that some risks cannot be eliminated, only minimised, and sometimes risk-taking benefits the person and their outcomes. We acknowledge and record that where residual risks remain, everything has been done to mitigate to best of everyone's ability, reviewing this as and when is necessary and ensure the person knows what to do if something has gone wrong.
- ✓ We ensure, where risks are identified, that the person's mental capacity to make decisions in relation to risks is evidenced in their records. This includes their right to take risks, even if we feel it is unwise.
- ✓ We ensure that we review available information to identify incidents, patterns, e.g. repeated unwise decisions which may prompt a mental capacity assessment.
- ✓ We take appropriate action where risks or concerns impact the person or others, including any children involved.
- ✓ We establish and maintain a safe practice environment and safe working practices and take reasonable care of our own health and safety and that of others who may be affected by what we do, or do not do.

- ✓ We ensure that we remain up to date in all our statutory training, where appropriate, to ensure safe practice e.g. moving and handling techniques, mental capacity assessment.
- ✓ We ensure that we, and those for whom we are responsible are trained, competent and safe in the selection and use of relevant equipment, being attentive to local procedures.
- ✓ We ensure that when a person moves between teams or services, handovers and transfers are comprehensive following due process.

Standard 8 Decision Making, Mental Capacity Assessments & Best Interest Decisions

What people can expect

Swindon 'I' Statements

"The key principle of the Working Together Plan, "Nothing about us, without us" is being adhered to. I know what my rights are and can get information and advice on all the options for my health, care and housing. I can live the life I want and do the things that are important to me as independently as possible. When I couldn't speak for myself, I had someone I trusted to speak for me. The people that support me, understand and respect my rights".

Our standards:

- ✓ We support people's right to make their own choices, ensuring they have all relevant information at the right time to enable them to make well informed decisions.
- ✓ We assume people have the mental capacity to make specific decisions unless it is established that they lack capacity.
- ✓ We facilitate supported decision making by ensuring the use of advocacy and person-centred approaches relevant to the person's needs. We modify our own means of communication to address the individual communication needs and preferences of people and carers, to remove any barriers to communication where possible. We consider factors such as time, place, support and confidentiality.
- ✓ We ensure that people are not treated as unable to make a decision, merely because they are making an unwise decision.
- ✓ We clearly record the specific decision to be made when undertaking a capacity assessment.
- ✓ We clearly evidence the 'salient factors' the person is required to understand to make a decision within the capacity assessment.
- ✓ We ensure the functional test of capacity (understand, retain, use & weigh, communicate) is clear, defensible and evidenced based.
- ✓ We capture the voice of the person within the capacity assessment, to support and evidence professional judgement and decision making.
- ✓ Where a person does not have mental capacity, we make certain that a suitable person or advocate is engaged at the earliest opportunity to ensure the person's voice is heard.
- ✓ We ensure that any decision made on behalf of a person is made in their best interest, ensuring it is necessary and a proportionate response to the presenting risks.
- ✓ We ensure that any decisions made on behalf of a person is made in the less restrictive way of their rights and freedoms.

- ✓ We ensure best interest decisions are made by the appropriate decision maker relevant to the specific decision, taking into account past wishes, advance decisions and ensuring that the decision maker has the necessary authority e.g. relevant professional, Lasting Power of Attorney, Court of Protection.
- ✓ We ensure our knowledge of legal frameworks is up to date and all decision making is inclusive of people, considers equality, rights and social justice.
- ✓ We explore any risks around specific decisions with the person and record these and our discussions on the relevant risk assessments / plans / tools.
- ✓ We use critical thinking and professional curiosity to understand a person's situation, ensuring accountability and defensible professional decision making.
- ✓ We recognise and record potential bias or differing views/disputes in decision making and seek resolution/mediation at the earliest opportunity. We refer to formal dispute resolution where necessary to support people and protect their rights e.g. Court of Protection, Office of Public Guardian, Local Government Ombudsman.
- ✓ We have considered other assessments that are required from the outcome of the mental capacity assessment (e.g. further capacity assessments, deprivation of liberty COPDOL11, DoLS, deputyship)

Standard 9 Safeguarding People

What people can expect

Swindon 'I' statements:

"The key principle of the Working Together Plan, "Nothing about us, without us" is being adhered to. I am asked about how I want to be supported and what I want to be supported with. My views and wishes are listened to. I know what my rights are and can get information and advice on all the options for my health, care and housing. I can live the life I want and do the things that are important to me as independently as possible. I have people in my life who care about me – family, friends, and people in my community. I feel safe. I am supported to think about how to keep myself safe. I know who to contact if I don't feel safe. When I couldn't speak for myself, I had someone I trusted to speak for me. The people that support me, understand and respect my rights".

Our standards:

1. We work in partnership with the person to understand what is important to them, what makes them feel safe and identify their desired outcomes.
 2. We use a strengths-based approach by ensuring there is focus on what the person can do to keep themselves safe, as well as on any needs and risks.
- ✓ We support the involvement of the person by facilitating advocacy where they have substantial difficulty with being involved in any enquiry work, meetings, planning, or reviews.
 - ✓ We ensure professional involvement in a person's life is proportionate and ensure the least intrusive response appropriate to the risk presented.
 - ✓ We encourage people to make their own decisions and give informed consent.

- ✓ We understand the importance of safeguarding by actively looking for signs of abuse, demonstrating understanding of relevant safeguarding processes and engaging in these processes where necessary.
- ✓ We maintain our professional curiosity throughout our safeguarding work.
- ✓ We share responsibility for assessing and managing risk, co-producing person-centred risk assessments and plans.
- ✓ We ensure records are kept up to date and show a clear rationale and assurance for all key decisions made, including at point of closure. This includes a record of the people involved and their rationale, including management direction or decisions.
- ✓ We make sure that where any protective actions are declined, they are recorded with clear reasons and shared with the person and relevant others.
- ✓ We complete mental capacity assessments where there is reason to doubt the person's mental capacity, referring for advocacy as needed.
- ✓ We take a whole family approach to safeguarding. We make sure where there are others at risk, or where the alleged perpetrator is also a child, an adult at risk, or a carer, their needs are also addressed.
- ✓ We follow local safeguarding procedures and our legislative duties, raising any concerns as detailed (Care Act 2014, Mental Capacity Act 2005, [SSP Adult Safeguarding Policies & Procedures](#), [SSP Multi-agency policy and guidance on responding to self-neglect - Swindon Safeguarding Partnership](#)).
- ✓ We are responsible for keeping ourselves up to date with mandatory and core children and adults safeguarding training, relevant to our grade and role.
- ✓ We initiate timely, focused, regular multiagency meetings to support decision making.
- ✓ We ensure a safeguarding plan is in place and reviewed where there are clear actions to be taken as a result of an enquiry, with set timescales and responsible leads for accountability purposes.
- ✓ We ensure that we work in partnership with our statutory partners and colleagues from other agencies, to reflect the 'Adult Safeguarding Principles' highlighted in the Local Government Association (LGA) Chapter 14 guidance.
- ✓ We escalate concerns when there are disagreements, disputes or non-engagement from other professionals or agencies when working with adults at risk in accordance with [SSP Process for the resolution of professional disagreement relating to safeguarding protection of adults policy](#)

Theme 4: Leadership

Standard 10 Equality, Diversity and Inclusion

What people can expect

Swindon 'I' Statements

"I am treated with respect. I have people in my life who care about me – family, friends, and people in my community. I have a place I can call home, not just a 'bed' or somewhere that provides me with care. When I couldn't speak for myself, I had someone I trusted to speak for me. The people that support me, understand and respect my rights. I can live the life I want and do the things that are important to me as independently as possible. I am able to spend

time doing things I value or enjoy. I can meet people who like the same things as me and I can join in groups and activities. I am asked about how I want to be supported and what I want to be supported with. My views and wishes are listened to”.

Our standards:

- ✓ We understand equality legislation and apply it to our practice by demonstrating anti-oppressive, anti-discriminatory and anti-racist practice and not supporting or accepting discrimination to or from others.
- ✓ We respond appropriately to the needs of all groups and individuals in practice, in a personalised way, recognising that this can be affected by difference of any kind including, but not limited to, protected characteristics (e.g. gender, sexuality, disability, ethnicity, or religion), intersectional experiences and cultural differences.
- ✓ We respect and uphold the rights, dignity, values and autonomy of people, including their role in the assessment and/or therapeutic process, having due regard to their unique experiences and feelings
- ✓ We influence positive change through a supported culture of feedback and learning.
- ✓ We recognise the potential impact of our own values, beliefs and personal biases (which may be unconscious) on practice and we use critically informed reflection to mitigate bias to ensure all people and carers are treated appropriately with respect and dignity. We are committed to continuous personal learning to inform how we develop and deliver services.
- ✓ We recognise the characteristics and consequences of barriers to inclusion, including for socially isolated groups and actively challenge these barriers, supporting the implementation of change and making reasonable adjustments wherever possible.
- ✓ We commit to an inclusive culture, which is reflected in our practice and direct work with people and the communities within which we work, recognising identity, purpose and connection as integral to a person’s wellbeing.
- ✓ We are committed to developing an environment which attracts and retains a workforce that is diverse and reflective of our communities.
- ✓ We are committed to working in an environment which actively seeks meaningful feedback, where we continuously learn through listening to others in order to improve quality of our practice.
- ✓ We identify our own leadership qualities, behaviours and approaches, taking into account the importance of equality, diversity and inclusion.

Standard 11 Supervision

What people can expect

“I am supported by people who see me as a unique person with strengths, abilities, and aspirations. I am supported by people who listen carefully, so they know what matters to me and how to support me to live the life I want. I am supported to make decisions by people who see things from my point of view, with concern for what matters to me, my wellbeing and health. I have considerate support delivered by competent people.”

What our practitioners and managers can expect:

Our practitioners and managers have regular supervision in line with our Supervision Framework [Supervision Policy](#) & [Supervision Practice Guidance](#) . Supervision supports employee wellbeing, accountability, performance management, continued professional development and a positive learning culture through critical reflection. Our practitioners and managers set performance and development objectives to work towards to maintain the quality and effectiveness of their work.

Our standards:

- ✓ We ensure active participation in supervision, and training, is a priority for both Supervisees and Supervisors to ensure high standards of practice, and personal and professional conduct.
- ✓ We ensure all colleagues have a co-produced supervision agreement in place and that this is reviewed annually or when there is a change in supervisor.
- ✓ We ensure all staff receive regular, supervision that meets the minimum requirements, set out in our supervision policy, for their role.
- ✓ We ensure supervision always includes:
 - a. staff wellbeing
 - b. recognition of strengths and successes
 - c. quality critical reflection of practice and performance
 - d. continued professional development
 - e. case work discussion, decisions, and oversight
 - f. cross reference to practice standards, professional standards, values and behaviours framework as appropriate
 - g. opportunities to reflect on feedback and sharing of learning
 - h. records any Management /HR data or issues including performance management, professional registration and annual leave etc
- ✓ We ensure supervision always takes place in a suitable agreed space, in person or online, ensuring that it is private, safe and uninterrupted space.
- ✓ We make and keep written supervision records, using the templates and tools provided. They are signed and shared by both supervisor and supervisee and kept securely.
- ✓ We ensure that we clearly record any case discussions/decisions on the supervision record, ensuring they are anonymised.
- ✓ We ensure that we clearly record any key actions or decisions on LAS in a case note on the persons file. This is to support transparency and provide clarity in terms of decision making and future actions that will be considered and discussed with the person.
- ✓ We ensure that all staff critically reflect on their practice and performance and that this is evidenced and recorded in supervision notes, alongside key learning and practice development through setting of objectives.
- ✓ We ensure that all supervisors are supported to feel confident and competent in their role.
- ✓ We ensure that if a supervisor has a different professional background to the supervisee, the supervisee is supported to develop peer support networks and have access to a supervisor from their own professional background if required.

- ✓ We ensure a high quality of practice through colleagues having a direct observation of their practice at least annually and supervisors having a direct observation of their supervisory practice at least annually, as well as audits undertaken by the Quality Assurance Team, Adult Services.
- ✓ We ensure registered practitioners uphold to regulatory professional standards.