



## **NORTH EAST SAR QUALITY MARKERS CHECKLIST**

SAR Quality Markers are a benchmarking tool to support those who commission, conduct and quality assure SARs. They cover the whole process with the aim of providing a consistent approach to producing good high-quality SARs.

The Markers assume the principles of Making Safeguarding Personal as well as the Six Principles of Safeguarding that underpin all Adult Safeguarding work: Empowerment, Prevention, Proportionate, Protection, Partnership, Accountability.

### **ROLES AND RESPONSIBILITIES OF SAR SUB-GROUP\***

- Scrutinise and analyse information provided, to support the group in making recommendations to the SAB Independent Chair
- Coordinate additional information from own agencies as required, to make a recommendation about whether to commission a SAR
- Coordinate chronology from own agency
- Determine SAR methodology
- Agree draft Terms of Reference
- Agree draft scoping period
- Confirm organisations to be involved in the review. Confirm initial membership of panel or learning event etc (dependant on the review methodology)
- Approve any changes to Terms of Reference and scoping period
- Approve any changes to panel membership
- Ensure that relevant members of own organisation (including Board Member, IMR author, SAR Panel Member) are updated about commissioned SARs (including sharing review timeline, terms of reference, emerging learning as appropriate)
- Quality assure final draft of Overview Report, Executive Summary and Action Plan, ensuring that the review is of a sufficiently high standard and that wherever possible, multi-agency actions are SMART and have allocated action owners
- Ensure own organisation is adequately represented at relevant meetings (i.e. Case Review Sub Group meetings, SAR/IMR panel meetings, SAR publication meetings) and in key discussions
- Ensure that individual agency learning from SARs is shared within own organisation and that assurance is provided to the Case Review or Training Sub-Group, and the SAB
- Be the main point of contact within own organisation for single agency SAR actions updates

**\*Each Board / Partnership use different terminology for their SAR Sub-Group**

## SETTING UP THE REVIEW

### Quality Marker 1: Referral

**The case is referred for a Safeguarding Adult Review (SAR) consideration with an appropriate rationale and in a timely manner.**

- *Does the referral explicitly identify how the SAR criteria has been met?*
- *Does the referral clearly specify any other reason a SAR is needed?*
- *Does the information provided evidence the rationale given for why the case is being referred?*
- *Are explanations provided for any delays in the referral?*
- *Does the referral specify the type of abuse or neglect suspected?*
- *Have details of ethnicity and other protected characteristics relevant to the SAR referral been identified and appropriately recorded?*
- *Does the referral state what is known about protected characteristics, including race, culture and ethnicity?*

### Quality Marker 2: Decision Making – What kind of SAR / Enquiry

**Factors related to the case AND the local context inform decision making about whether a SAR is needed and initial thinking about its size and scope.**

- *Is the rationale for the decision clear and defensible, paying close attention to the **Care Act 2014** and **Making Safeguarding Personal principles**?*
- *Have all key agencies provided information about their involvement? (Consider other SAB areas)*
- *Has intelligence from other quality assurance and feedback sources been gathered e.g., audits/benchmarking, complaints and previous SARs? Has this been used to identify outstanding learning needs locally, as well as what is already known and does not need to be re-learned?*
- *Have other review pathways been considered/discounted (e.g., DHRs), and have parallel processes been identified (e.g., complaints)?*
- *Have SAB member agencies had the opportunity to contribute to the decision-making process and recommendation to the Chair?*
- *Are the decision-making processes and outcomes transparent, and has independent challenge been considered?*
- *Are explanations provided for any delays in decision making?*
- *Is there transparency about any conflicts of interest and how they have been managed?*
- *Has legal advice been sought, if appropriate, to check the lawfulness of the decision making?*

- *Is it evident how race, culture, ethnicity and other protected characteristics as have been considered?*

For consideration:

- *Has a clear legal mandate been established reflecting either a mandatory SAR (S44, 1, 2, 3) or discretionary SAR (S44, 4)*

### **Quality Marker 3: Informing the Person, their family and other important networks.**

**The person, relevant family members and any other important personal networks are told what the SAR is for, how it will work, the parameters, how they can be involved, being mindful of treating them with respect.**

- *Has the person, relevant family members, friends/network, carers or advocate been informed of the SAR at the earliest opportunity?*
- *Has the purpose, process and parameters of the SAR been communicated in the most appropriate way and by the most appropriate person to promote understanding?*
- *Have you agreed with the family their preferred methods and timeliness of communication throughout the process (verbal, written) considering any relevant dates for the family?*
- *Are opportunities being offered to discuss any queries about the SAR?*
- *Is the standard SAB correspondence available for use with family members in this SAR about the purpose, process and parameters of the SAR and is it adequately clear, accessible and kind?*

### **Quality Marker 4: Clarity of Purpose**

**The Safeguarding Board / Partnership is clear and transparent from the outset that the SAR Process is statutory with the focus on learning and improvement across organisations and acknowledges any factors that complicate this.**

- *Have you communicated with all relevant parties (SAB members, involved agency/provider/commissioner leaders, practitioners, Legal advisors) about the statutory purpose of the SAR with a focus on learning and organisational development?*
- *Has there been a multi-agency discussion regarding any tensions and complications?*
- *Is the decision-making rationale clearly documented on all records?*
- *Is the escalation pathway clear, if there is any non-engagement by providers, commissioners or other agencies involved in the SAR?*

## Quality Marker 5: Commissioning

**Decisions about the precise form and focus of the commissioned SAR consider a range of factors to make the learning and improvement proportionate. Decisions are made with input from the SAB Chair, members and reviewers.**

- *Have discussions about the form and focus of SAR to be commissioned considered the following:*
- *Are there any system conditions leading to poor safeguarding practice or communication?*
- *Do other quality assurance and feedback sources (e.g., audits/complaints) suggest the practice issues and/or their systemic causes are new, complex or repetitive?*
- *Are any of the issues relevant to the SAB strategic plan and current/future priorities?*
- *Has similar learning been identified previously, and has this been implemented or is there new learning to be identified?*
- *Is there evidence of good practice and supportive system conditions, which can be shared across the partnership?*
- *Are there any issues regarding the capacity of practitioners, SAB and member agencies, and experienced/qualified reviewer(s)?*
- *Does the process allow the reviewer(s) to influence the scope, nature and approach of the review?*
- *Is there media interest or serious public concern around the circumstances of the case?*
- *Principles of Making Safeguarding Personal and the six core safeguarding principles?*

## RUNNING THE REVIEW

### Quality Marker 6: Governance

**Governance arrangements are sound, enabling defensible decision making, reliable over-sight and accountability regarding the SAR process, outputs and impact. The SAR achieves the requirement for independence AND ownership of the findings by the Safeguarding Board / Partnership, member agencies and enables public accountability for learning and improvement.**

- *Are senior managers being kept up to date about the learning being identified?*
- *Are there mechanisms in place to allow challenge to the information and analysis of the review, so that the findings/ recommendations have been thoroughly considered before the report is finalised and taken to the SAB?*
- *Are there clear governance arrangements in place from the outset of the process?*
- *Has the system for quality assurance of the process and sign-off of the report been set out clearly from the start?*

### Quality Marker 7: Management of the Process

**The SAR is effectively managed. It runs smoothly, is concluded within a timely manner, and within available resources. The welfare of all participants attended to, and the process helps bring resolution to any tensions or conflict.**

- *Are there any issues in relation to key personnel, administrative support or reviewer capacity, which may impact on quality and timings of the SAR?*
- *Are mechanisms in place to inform the SAB Chair of any delays and reasons for them?*
- *Have Statutory Partners Senior Leads provided a clear message that how the SAR is conducted is important with an expectation that people are cared for and relationships fostered”.*
- *"Have any known sensitivities, tensions or conflicts been shared in order that they can be addressed appropriately.*
- *Is there a key plan with allocated roles and responsibilities for sharing information.*

### **Quality Marker 8: Parallel Processes**

**Where there are parallel processes, the SAR is managed to avoid as much as possible; duplication of effort, prejudice to criminal trials, unnecessary delay and confusion to all parties, including staff, the person and their family.**

- *Have you agreed the most appropriate process for the circumstances?*
- *Can parallel processes be used for TOR's and scoping to avoid any duplication and repetition?*
- *Is there defined agreed ownership of SAR documents?*
- *Is there an index of SAR material and agreement on arrangement for disclosure?*
- *Where necessary, are there early discussions with the police, CPS, coroner to consider any information relevant to criminal proceedings and if so how and what will be needed / used?*

### **Quality Marker 9: Gathering Information**

**The SAR gains sufficient range and quality of information to determine relevant objective facts and fully understand the way the single and multi-agency practice is shaped by work, social and organisational factors. Methods and extent of data gathering are transparent and proportionate.**

- *Are the aims of the SAR clear with specification of the information required, level of detail appropriate to the SAR?*
- *Have all avenues of information gathering been considered?*
- *Does the SAR allow for full inclusion and engagement (person, families, carers, advocates, practitioners, multi-agency partners)?*
- *Are there clear expectations in respect of gathering information – what specific information and level of detail is needed from people and paperwork and why? Will this facilitate the SAR to fulfil its purpose?*
- *Is there an escalation pathway in respect of non-engagement by participating agencies?*
- *Are notes of interviews and meetings and copies of reports that might be considered relevant for criminal proceedings being retained?*
- *" Had the Board / Partnership clearly shared the statutory duty on all agencies co-operate and contribute to the SAR, providing information when the SAB requests it (Sect 45 Care Act 2014)*



### **Quality Marker 10: Practitioner Involvement**

**The SAR is informed by the experiences and perspectives of practitioners and managers, enabling them to have a constructive experience of taking part in the review and cultivates an open learning culture.**

- *Does the SAR process express the value and importance of practitioner input and promote an open learning culture to all?*
- *Have the right practitioners and managers been identified to contribute to the process?*
- *Is the purpose of practitioner input clear and understood?*
- *Has an adequate Duty of Care to all participants involved in the SAR been secured and does the SAR planning refer to this?*
- *How will you gather feedback from all those involved in relation to the process?*
- *What arrangements are in place to thank people for their involvement once the SAR is complete?*

### **Quality Marker 11: Involvement of the Person, Family and relevant network**

**The SAR is informed by knowledge and experience of the person, family members and relevant social network, enabling the individual and family to see how the SAR is designed to have an impact and contribute to positive change.**

- *Is there a clearly documented and defensible decision process for involvement / non-involvement of the person / family with clarity around why they are involved, statutory requirements and the 6 Core Safeguarding Principles and of Making Safeguarding Personal?*
- *Who will be the specific point of contact with the person / family and what are the arrangements to support them throughout the process?*
- *If advocacy is being used, ensure that the advocate is afforded the same support and guidance throughout the process or where appropriate*
- *Is there clarity about what the family will be asked?*
- *How are the family to be represented in the final report and how do they provide feedback?*
- *Where there are criminal proceedings, has a discussion taken place with the police (Senior Investigating Officer) around the family involvement with the SAR Process?*
- *"Has the Statutory Requirement for early engagement with the individual, family and friends around their involvement, sensitive and appropriate management of expectations, been sustained throughout the SAR?"*

## Quality Marker 12: Analysis

The SAR analysis is transparent and assumes a systems approach and draws on the full range of relevant information to evaluate and explain professional practice. Conclusions are of practical value, and evidence wider learning around barriers and enablers to good practice. and rigorous. evaluates and explains professional practice in the case, highlighting challenges, themes and learning in relation to practitioners' efforts to safeguard adults.

- *Are the Six Core Safeguarding Principles and Making Safeguarding Personal reflected in the evaluation of safeguarding practice of this case?*
- *Does the review take into consideration cultural, organisational and systems practice?*
- *Is current, up to date research evidence about good practice used in the analysis?*
- *Does the analysis have clear conclusions in relation this case and the wider safeguarding practice, including whether practice issues were unique to this case or a symptom of wider systemic issues?*
- *Are you promoting the value of identifying the range of learning (whether good or bad practice) that the case reveals?*
- *Is information from contributing agencies fully and fairly represented in the report?*
- *Does the SAB support analysis that seeks out causal factors and systems learning beyond the SAR / SAR's?*



## OUTCOMES AND IMPACT

### Quality Marker 13: The Report

The report clearly and succinctly identifies the analysis and findings while keeping details of the person to a minimum but illuminating learning in line with the wishes of the individual or their family. Findings should reflect causal factors, systems learning, single and multi-agency learning.

- *Does the report meet the requirements of the commissioned specification?*
- *Is the tone and choice of words appropriate and is the report written in a way that is to the point, understandable and useful?*
- *Have the person / family had opportunity to comment and is there any legal advice required about publication?*
- *Does the report sufficiently protect the privacy of the person, family members and practitioners whilst still being accessible and able to support future practice improvement?*
- *Can the report be used to inform the work of the partnership to improve safeguarding outcomes and prevent future abuse and neglect?*
- *Is detail provided around barriers / enablers to good practice and systemic risks specific enough to be shared and compared with findings from other SARS?*
- *Does the report provide an insight into factors that increase the risk that people will not be effectively safeguarded or highlight areas that foster good practice?*
- *Does the report clearly identify case findings from system findings?"*
- *"Is it clear that the Final Draft Report is confidential and not for distribution or public comment until the proposed publication date?"*
- *Is the report free from hindsight bias?*

### Quality Marker 14: Publication and Dissemination

Publication and dissemination activities are timely and highlight key systemic risks identified through the SAR. Creative and engaging methods are used to circulate findings and learning. Publication decisions are made with sensitive consideration for the person and family. Professionals who participated are kept informed and supported.

- *Is there a co-ordinated media strategy that has been developed prior to publication with a "if asked" press statement?*
- *Can the Board / Partnership provide the rationale for the decision around publication / non-publication of the review, and this is clearly documented?*

- *Is there a clear and effective Communication plan which secures the right level of engagement from senior leaders and include provision for any legal issues to be managed?*
- *Does the plan clearly reflect the statutory functions and duties of the SAB?*
- *Has the person / family member been fully involved in the decisions around publication and have their views have been considered and discussed? Have they been informed in advance of the report publication?*
- *Does the communication plan engage with all the right audiences in an engaging and appropriate way?*
- *Is there is a clear agreement in relation to content and timeframe for release, ensuring where appropriate, the anonymity of those involved?*
- *Are there any other issues that would prevent publication of the full report? (community tensions, criminal proceedings, media interest)*
- *Does the publication date clash with any other important dates or activities? (anniversaries, criminal trials, media interest?)*
- *Has the SAR Regional Learning Template been completed for the case to be recorded in the Regional SAR Library and shared via the National Library?*

### **Quality Marker 15: Improvement Action and Evaluation Of Impact**

**Improvement Actions seek to inform new ways of collaborative working with integration across plans and activity (locally, regionally and nationally)**  
**Evaluation of impact is designed from the start with systemic improvement actions agreed across all partners. Any actions should be aligned with wider strategic improvement activity and led locally, regionally or nationally. The SAB retains a record of findings and actions.**

- *Has the Board / Partnership provided clear leadership around an open and challenging discussion around the effectiveness of safeguarding arrangements and practice and what needs to be done to address systemic risks and progress improvement?*
- *How can the voice of “experts by experience” have in the process of deciding actions and evaluation?*
- *How can you bolster partners towards suitably agreed ambitious goals?*
- *Are proposed actions adequately integrated into ongoing or planned workstreams / priority areas of the SAB / partner agencies?*
- *Are SAB expectations clear about long-term plans for monitoring improvement actions and follow up evaluate impact?*
- *Does reporting into the Board / Partnership’s Annual Report comply with Statutory requirements and provide genuine transparency and accountability about whether improvement actions have taken place?*
- *Have any “quick wins” been identified?*
- *Is there a clear plan of how the SAB / Partnership will monitor whether actions are on track – will a Task and Finish group be required?*