

OLDHAM SAFEGUARDING CHILDREN PARTNERSHIP & OLDHAM SAFEGUARDING ADULTS BOARD



2024-26

SELF-ASSESSMENT AUDIT REPORT

CHILDREN ACT  SECTION 11
CARE ACT  SECTION 43

1 INTRODUCTION

1.1 Legislative Frameworks

Section 11 of the [Children Act 2004](#) and the updated [Working Together to Safeguard Children Guidance 2023](#) place duties on a range of organisations, agencies and individuals to ensure their functions, and any services they contract out to others, are discharged accounting for the need to safeguard and promote the welfare of children.

Section 43 of the [Care Act 2014](#) requires Local Safeguarding Adults Boards to coordinate and ensure the effectiveness of, what each of its members do in protecting individuals from abuse and neglect and delivering the outcomes that enhance their wellbeing.

1.2 Self-Assessment Oldham

This report concerns a Self-Assessment Audit coordinated by Oldham Safeguarding Children Partnership (OSCP) and Oldham Safeguarding Adults Board (OSAB).

Oldham agencies and organisations were asked to complete a self-assessment using an audit template. Agencies and organisations were advised to reflect on how well each standard is embedded into frontline practice.

The audit process is an opportunity for each agency to review the effectiveness of their safeguarding arrangements and identify areas for improvement to ensure practice is in line with statutory guidance, local guidance, research and best practice.

To support an all-age approach for 2024-26, the OSCP and OSAB Business Units collaborated to review and refresh the existing OSCP self-assessment audit template. Standards were adapted and added to include practice related to safeguarding adults at risk.

A guidance document was also developed to assist agencies and organisations completing the audit. The guidance document was developed to also provide a multi-agency benchmark through the use of a common language, to create a more consistent approach to considering safeguarding arrangements, at a strategic level, when addressing expectations across Oldham. Oldham agencies and organisations were sent the strengthened self-assessment template and guidance in August 2024 for return by late October 2024.

1.3 Following Submission

The OSCP and OSAB Business Units reviewed the returned self-assessment templates and in the following six months undertook some challenge activity, in addition to identifying good practice. The challenge activity was a further opportunity for agency leads to discuss their returned self-assessments and to provide additional assurance of safeguarding arrangements to OSCP and OSAB.

Further evidence was requested for specific standards based on this review and discussions with agency leads including how the self-assessment would be used to drive service improvement. This challenge activity and provision of further assurance and evidence led to improvements to some self-assessment scoring; the improved scores are reflected in this report.



2 WHO DOES 'SECTION 11' APPLY TO?

Compliance with Section 11 is a statutory requirement for:

- Local Authorities
- NHS organisations including NHS England, NHS Integrated Care Boards (ICBs) and NHS Foundation Trusts
- the Police
- British Transport Police
- National Probation Service
- Governors/Directors of Prisons and Young Offender Institutes
- Directors of Secure Training Centres
- Principals of Secure Colleges
- Youth Offending Services

OSCP and OSAB strongly encourages all agencies that work with children, young people and adults at risk to ensure their arrangements reflect the importance of

safeguarding and promoting the welfare of children, young people and adults at risk.

Organisations that are commissioned to provide a service on behalf of one of these agencies should also be compliant with Section 11. Housing and homelessness services in local authorities are subject to Section 11 duties. Practitioners working in these services may become aware of conditions that could have or are having an adverse impact on children. Under Part 1 of the Housing Act 2004, authorities must take account of the impact of health and safety hazards in housing on vulnerable occupants when deciding on the action to be taken by landlords to improve conditions. Housing authorities also have an important role to play in safeguarding vulnerable young people, including young people who are pregnant, leaving care or a secure establishment.

3 ENGAGEMENT WITH AUDIT

15 agencies and organisations returned the audit template (89% of statutory agencies). Oldham agencies and organisations that are not required to comply with Section 11 were asked to complete the self-assessment template at their discretion. 6 discretionary agencies returned the audit. 17 Children Residential Homes in Oldham also returned the audit; the findings in relation to those will be considered separately.

In view of their national remits, British Transport Police (BTP) have provided a summary report and the Probation

Service have provided a response covering children from a national perspective.

North West Ambulance Service NHS Trust (NWAS) complete a section 11 audit for their commissioning ICB (Lancashire and South Cumbria); when available, this will be shared with the Greater Manchester ICB. Once available, this ICB will cascade to GM ICB and relevant partnerships. All agencies and organisations who returned the local audit template are included in Appendix A.

4 STANDARDS FOR 2024-26

The self-assessment audit template contained eight sections each containing a number of standards for agencies and organisations to assess themselves against:

1. *Leadership and Accountability*
2. *Policies and Procedures*
3. *Recruitment and Selection*
4. *Staff Induction, Training and Development*
5. *Complaints, Allegations and Whistleblowing*
6. *Information Sharing, Communication and Confidentiality*
7. *Listening to Children, Young People and Adults at Risk*
8. *Equality of Opportunity*

An additional ninth section for each agency and organisation to consider statements in relation to Child Neglect was included to reflect the OSCP Business Plan Priority. Agencies and organisations were asked to assess their compliance with each standard and score themselves between 1 and 4 using the ratings below.

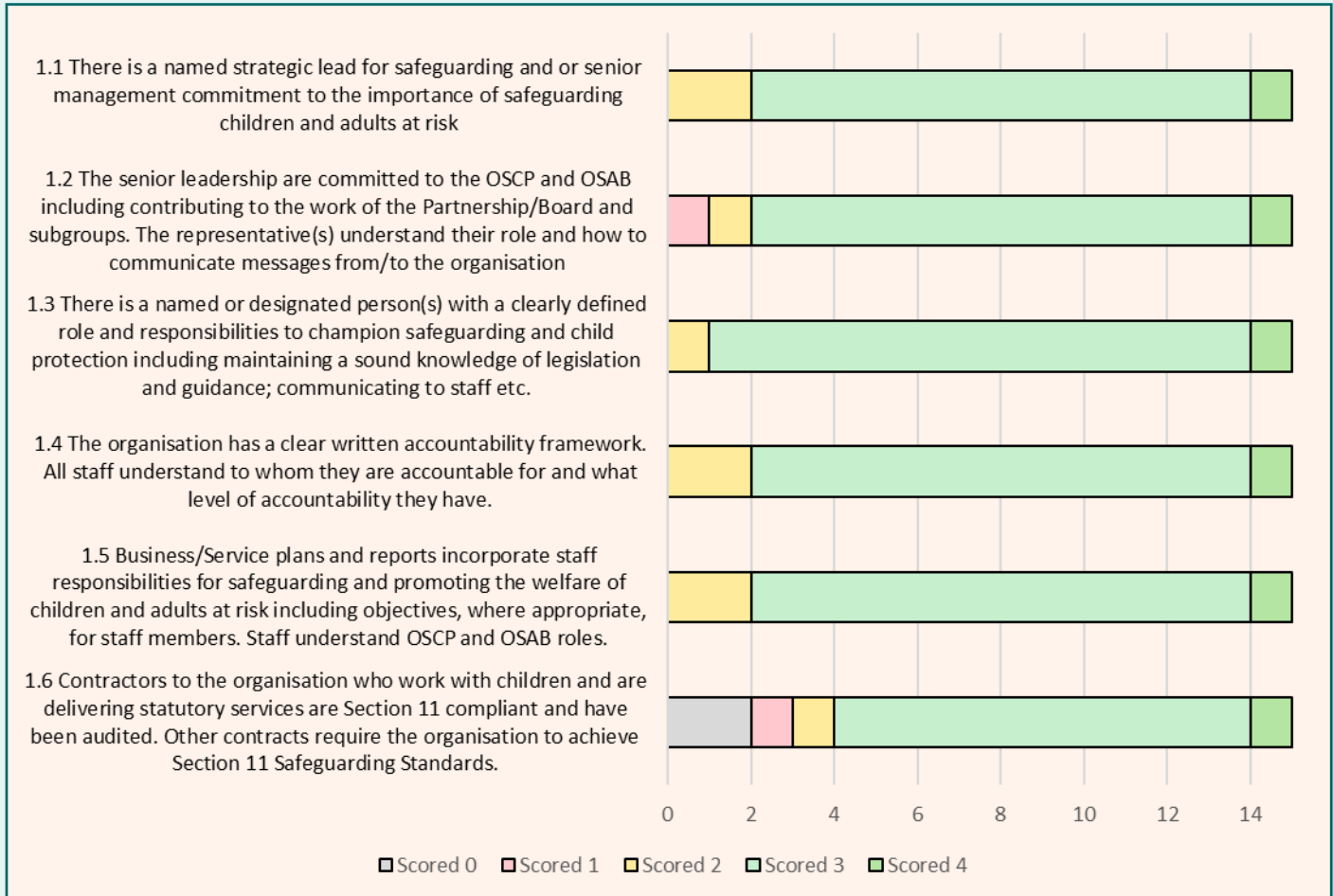
0	Not Applicable
1	Low Compliance
2	Moderate Compliance
3	High Compliance
4	Very High Compliance

5 FINDINGS SUMMARY & ANALYSIS – PARTNER AGENCIES

A summary of the findings from the partner agencies for whom compliance with Section 11 is a statutory requirement is provided below alongside analysis.

Section One: Leadership and Accountability

Findings



Analysis

93% of agencies confirmed that:

- they provide support for staff in achieving excellence in safeguarding with clear communication and accountability from senior staff (1.3).
- there is a named designated person with clearly defined roles and responsibilities who maintains a sound knowledge of legislation and guidance, ensures good communication strategies with staff are in place and is accountable for service improvements, and ensuring effective working relationships are in place (1.3).

87% of agencies confirmed that:

- they are committed to the partnership, communicate OSCP and OSAB messages effectively, and promote resources (1.2).
- they have named strategic managers who take a lead with safeguarding and have undertaken training to champion safeguarding (1.1).

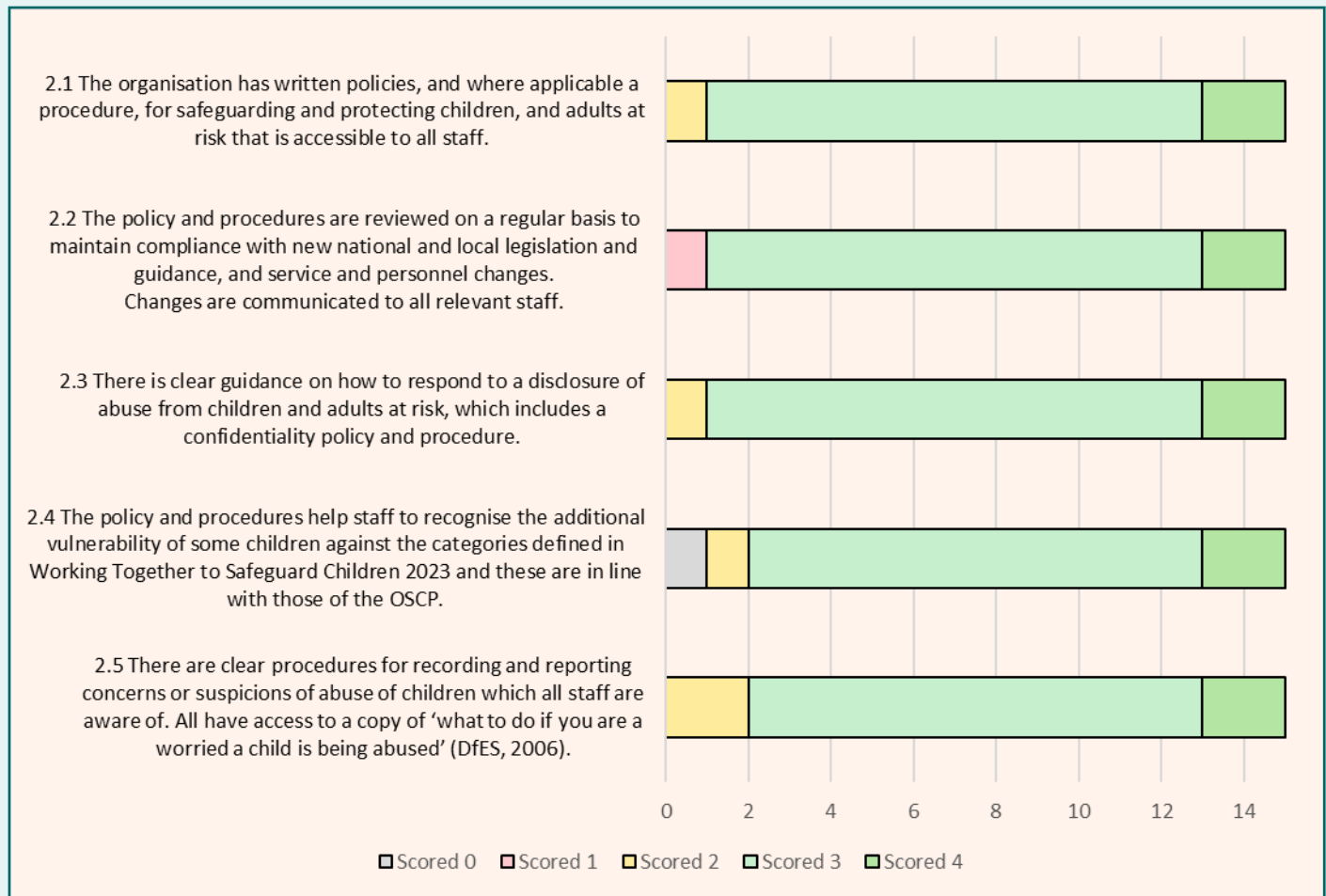
- they have a statement of accountability of teams, and senior management roles are clearly defined in relation to safeguarding children and adults at risk (1.4).
- they have clear written accountability frameworks (1.4), including safeguarding in their service plan (1.5).
- their staff are aware of their responsibilities and that of others in the organisation (1.4).
- their staff working with children and/or adults at risk receive management supervision on an individual basis and can access further support when required (1.5).
- they monitor data and staff attendance at multi-agency safeguarding meetings to ensure representation (1.4).
- they understand the need for accurate, clear and ongoing casework recording and have arrangements in place for auditing the quality of recording (1.5).

84% of agencies confirmed that, where relevant:

- they ensure services they contract or commission are section 11 compliant, this is within contracts and is reviewed regularly to evidence compliance (1.6).

Section Two: Policies and Procedures

Findings



Analysis

93% of agencies confirmed that:

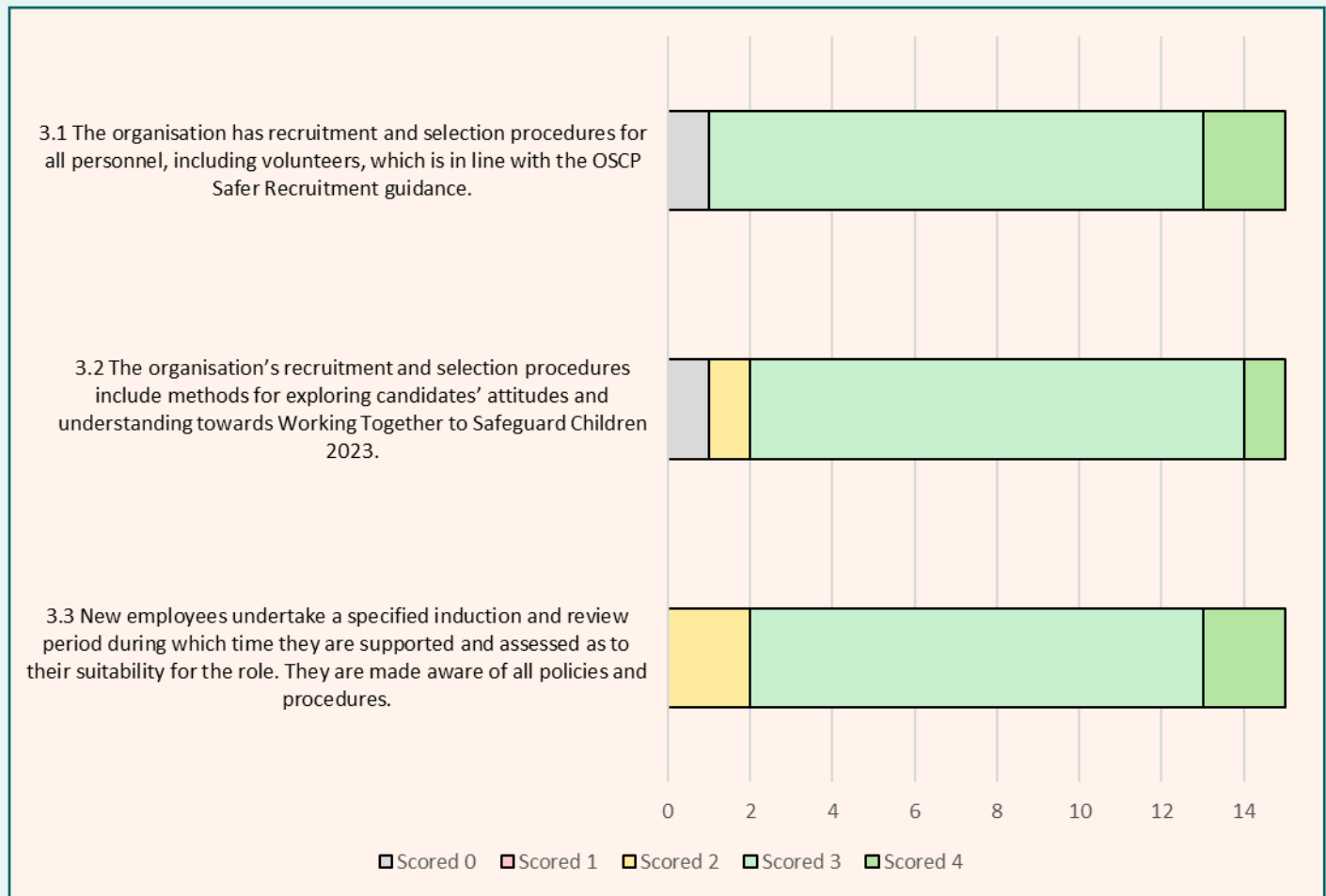
- they have written, up to date safeguarding policies in place (2.1) with regular updates planned, and the document owner ensures legislation is incorporated (2.2).
- there is effective dissemination to all staff (2.2), and use of the policies are discussed as part of induction, supervision and appraisal (2.1).
- they undertake audits to ensure adherence to the policies (2.2).
- they review policies on a regular basis to comply with legislation and when personnel or their service changes and they have evidence of discussions in supervisions about any changes (2.2).
- they ensure all staff receive safeguarding training and are aware of the statutory duty to safeguard and promote the welfare of children and adults at risk (2.2).
- they provide guidance to staff concerning appropriate responses to disclosures of abuse from children and adults at risk which references the importance of confidentiality and clearly states that if a child discloses that they are being abused that this cannot be kept confidential (2.3).

87% of agencies confirmed that:

- in line with the OSCP multi-agency child protection policies manual, their safeguarding policies include reference to recognising the additional vulnerability of some children (2.4).
- they have a framework of review in place to ensure that staff have received appropriate training regarding the issue of additional vulnerability and parent capacity (2.4).
- their staff working with parents or carers are aware of the impact of issues such as substance misuse, mental health issues, domestic abuse, trauma and learning disabilities on parenting capacity, always give consideration to the needs of the children, and where necessary, ensure that these are assessed and appropriate referrals are made or Common Processes are instigated (2.4).
- their staff are aware of the OSCP/OSAB policy and procedures and signpost to relevant agencies; have relevant training on the process and are aware of how to refer to Early Help and Social Care; and are aware of OSCP/OSAB procedures in relation to additional vulnerabilities.
- they currently have procedures for recording and reporting concerns or suspicions of abuse of children which all staff are aware of (2.5).

Section Three: Recruitment and Selection

Findings



Analysis

100% of agencies confirmed that, where relevant:

- they have effective recruitment and selection procedures for all personnel, including volunteers, which are in line with the OSCP Safer Recruitment Guidance (3.1).
- their recruitment policy ensures professional and character references are received and verbally checked and these include a reference from the candidate's current or most recent employer (3.1).
- all staff have Disclosure and Barring Service (DBS) clearance in place prior to the date their employment commences; and they ensure people moving across the organisation have DBS checks, where appropriate (3.1).

93% of agencies confirmed that, where relevant:

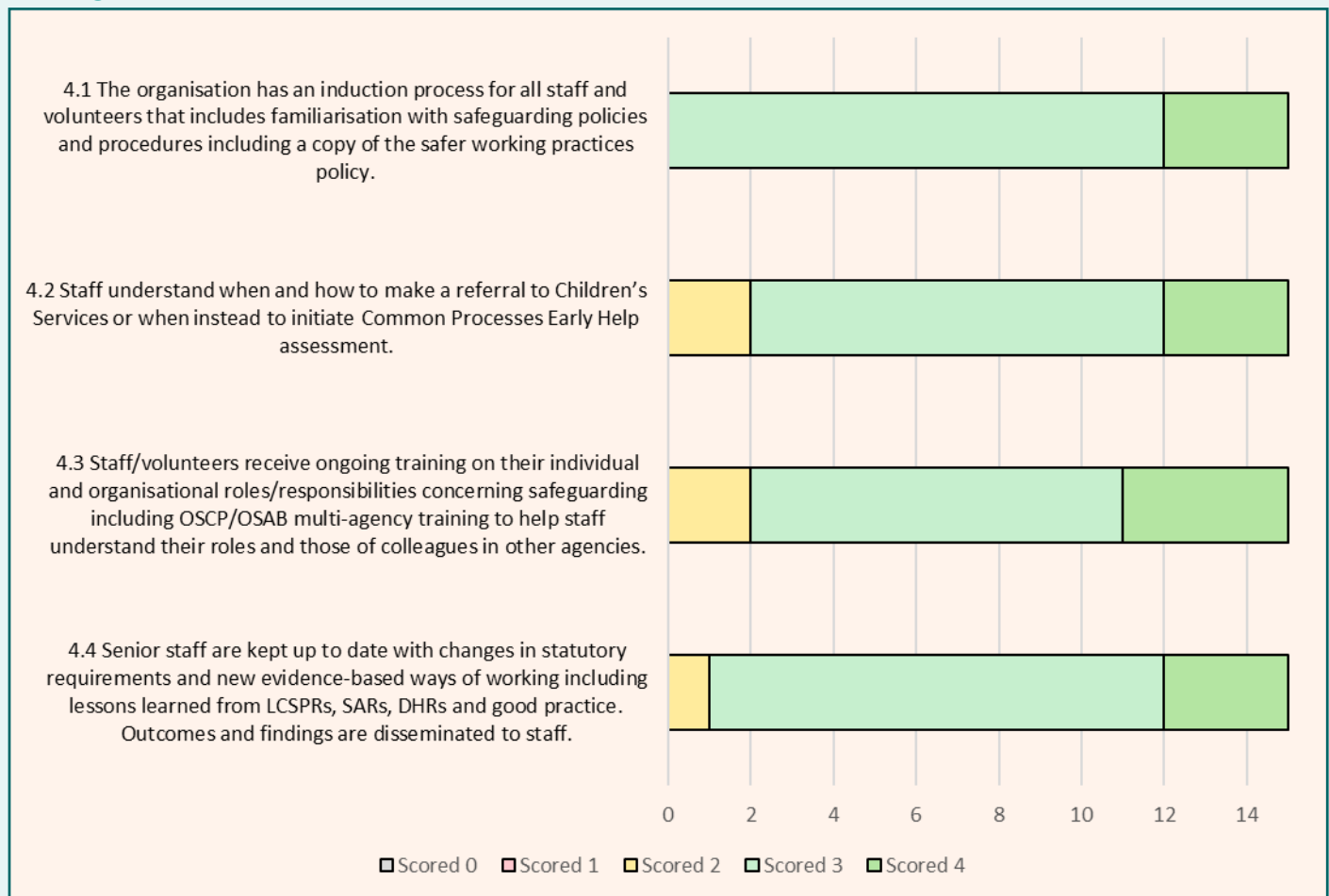
- their recruitment and selection procedures include thorough challenge of candidates' knowledge and understanding of, and attitude towards Working Together to Safeguard Children 2023 (3.2).

87% of agencies confirmed that:

- all newly recruitment staff have received adequate training and are made aware of safeguarding policies, whistleblowing policies and procedures, and their line manager's role and responsibilities (3.3).
- new employees undertake a specified induction and review period during which they are supported and assessed in terms of their suitability for the role (3.3).
- professional development forms part of the induction process and staff are encouraged to attend training opportunities (3.3).
- new employees are challenged on their knowledge and understanding of their role as part of their induction period (3.3).
- all practice concerns are escalated as part of the induction process and induction periods are extended where there is a cause for concern or an identified training need (3.3).

Section Four: Staff Induction, Training and Development

Findings



Analysis

100% of agencies confirmed that:

- they have an induction process for all staff and volunteers that includes familiarisation with safeguarding policies and procedures (4.1).
- induction processes ensure all staff are aware of contact points for safeguarding concerns (4.1).
- as part of induction processes, line managers challenge staff on their knowledge and understanding of safeguarding (4.1).

93% of agencies confirmed that:

- senior staff maintain awareness of changes to statutory requirements and new, evidence based, ways of working and this includes lessons learnt from Local Child Safeguarding Practice Reviews (LCSPRs), Safeguarding Adult Reviews (SARs), Domestic Homicide Reviews (DHRs) and good practice (4.4).
- the key findings and outcomes from these statutory reviews are shared with all relevant staff including via newsletters (4.4).
- lessons learnt from these statutory reviews are included in staff training and are embedded in practice (4.4).

- senior staff attend OSAB/OSCP Development Events and conferences to keep up to date with changing statutory guidance requirements and disseminate this information to their teams (4.4).

87% of agencies confirmed that:

- staff and volunteers receive ongoing training on their individual and their organisation's roles and responsibilities with regards to safeguarding children and adults at risk (4.3).
- all staff receive safeguarding training and this is reviewed at least every three years (4.3).
- they can provide evidence that safeguarding training is linked to practice, supervision, and appraisals (4.3).
- all staff have access to OSCP and OSAB multi-agency training opportunities (4.3).
- managers ensure any safeguarding training gaps identified are actioned (4.3).
- information is shared effectively with an information sharing framework in place (4.3).
- staff understand when and how to make a referral to children's services or when instead to initiate common processes Early Help assessment and/or referral and can evidence that information sharing is effective in this respect (4.2).

Section Five: Complaints, Allegations and Whistleblowing

Findings



Analysis

100% of agencies confirmed that:

- they have effective polices and systems in place to enable whistleblowing on an individual and organisational level (5.2).
- they can evidence dissemination of their whistleblowing policies to staff and service users in a sensitive and appropriate manner (5.2).
- they can demonstrate how their whistleblowing process is effective with relevant logs kept, and actions recorded (5.2).
- the lessons learnt and outcomes from whistleblowing work are fed back into practice to ensure improvements are made (5.2).
- their policies in this respect are one part of their wider culture asking for both positive and negative feedback (5.2).

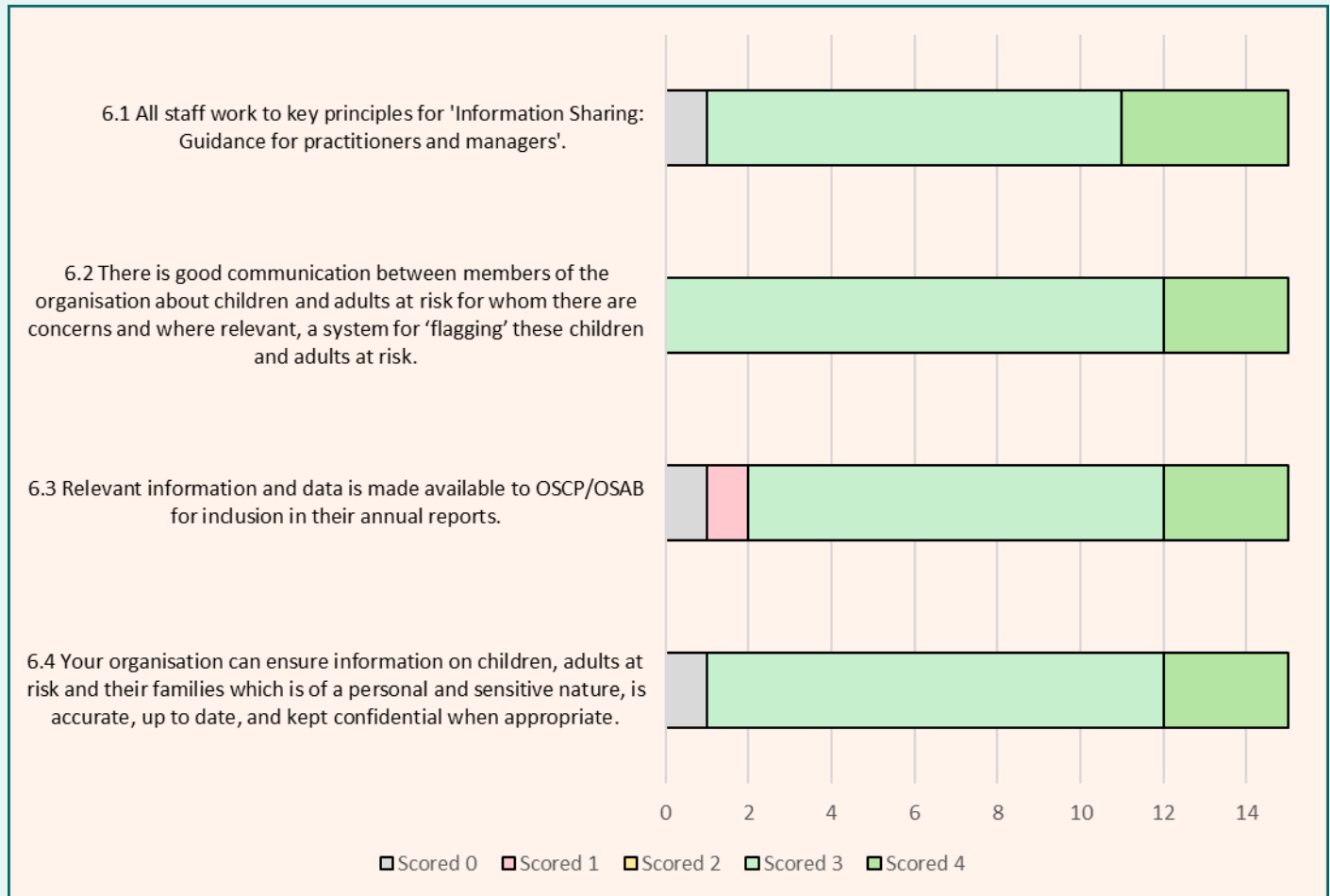
93% of agencies confirmed that:

- they have a named senior officer who has undertaken training and oversees all allegations, ensuring the organisation follows these policies effectively (5.1).

- they have with effective policies and systems in place to manage all concerns and complaints whether these are received from other practitioners or service users (5.1).
- their senior managers are trained to handle allegations and complaints about individuals who work with children and adults at risk and this includes allegations made by children and adults at risk (5.1).
- their allegation and complaint policies are family and child orientated and adapted to their needs (5.1).
- the lessons learnt and outcomes from allegation management work are fed back into practice and service plans, policies and procedures to ensure improvements are made (5.1).
- they can evidence liaison with the Local Authority Designated Officer (LADO) for children when allegations are received (5.1).
- they can evidence liaison with the Allegation Management Lead (AML) for adults when allegations are received (5.1).
- all complaints and allegations of abuse are recorded, monitored and are available for internal and external audit (5.3).
- they audit their complaint and allegation processes in order to monitor effectiveness (5.3).

Section Six: Information Sharing, Communication and Confidentiality

Findings



Analysis

100% of agencies confirmed that:

- there is strong communication between members of the organisation about children and adults at risk for whom there are concerns (6.2).
- their ICT systems allow practitioners to share information regarding children and adults at risk whom there are concerns about and there is evidence that information is shared successfully (6.2).
- where relevant, ICT systems allow children and adults at risk to be flagged where there are safeguarding concerns (6.2).
- their records include multi-agency plans that illustrate their contribution to improving outcomes for children and adults at risk and minutes which illustrate that their staff have participated in multi-agency meetings; their records are monitored and reviewed to ensure minutes and plans are saved (6.2).

93% of agencies confirmed that:

- information about children, adults at risk, and their families which is of a personal and sensitive nature is accurate, up to date and kept confidentially (6.4).
- all staff work to '[Key Principles For Information Sharing: Guidance For Practitioners And Managers](#)',

HM Government advice regarding the importance of sharing information about children, young people and their families in order to safeguard children (6.1).

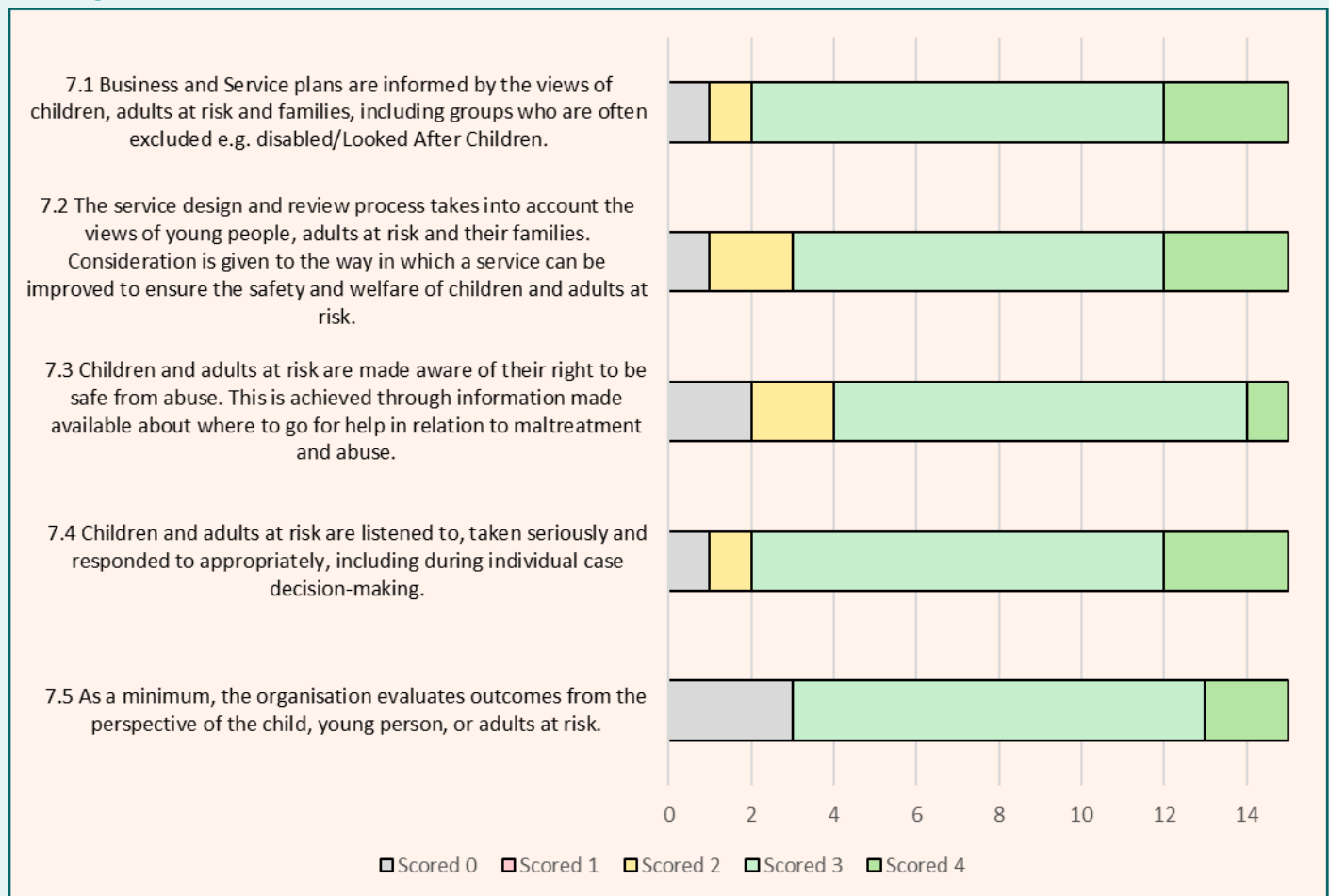
- they have statements and policies concerning the security of personal records (6.4).
- they understand their duty to share information where there are child protection concerns and safeguarding concerns about an adult at risk (6.1); and information is only shared in line with agreed policies (6.4).
- they have records of induction programmes completed which includes the responsibilities of staff if they are concerned about a child or adult at risk (6.1).
- they have records of training and briefings undertaken promoting information sharing information in relation to child protection concerns and safeguarding concerns about an adult at risk (6.1).

87% of agencies confirmed that:

- they ensure relevant data and information is made available to OSCP/OSAB for inclusion in their annual reports; and OSCP/OSAB annual reports highlight their single-agency performance information due to timely sharing of key information with the partnerships (6.3).

Section Seven: Listening to Children, Young People and Adults at Risk

Findings



Analysis

87% of agencies confirmed that:

- children and adults at risk are listened to, taken seriously, and responded to appropriately (7.4).
- every contact with the adult at risk or child provides and evidences an opportunity for them to be listened to and responded to (7.4).
- there are a range of opportunities for the voice of the adult at risk or child to be captured within case files and through other forums; and they have policies in place to ensure that this is acted upon (7.4).
- the voice of adults at risk or children is monitored and reviewed through audits (7.4).
- assessments undertaken illustrate that staff understand the value of equality, diversity, and inclusion (7.4).
- their service plans are informed by the views of children and adults at risk and families, including groups who are often excluded (7.1).
- their programme of feedback and information gathering is timed to influence the development of service plans (7.1).

80% of agencies confirmed that:

- as a minimum, they evaluate outcomes from the perspective of the child, young person, or adult at risk (7.5).

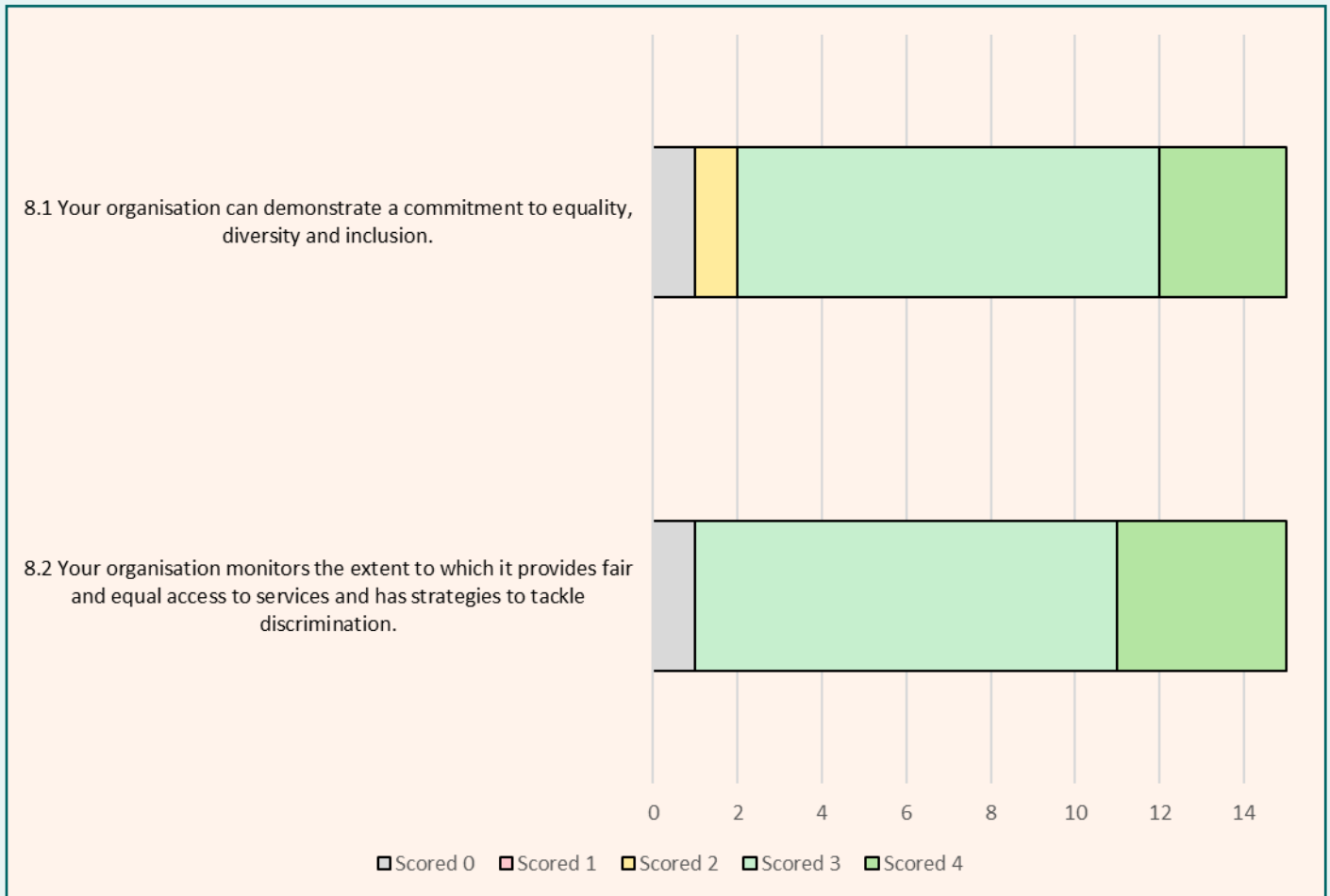
- outcome targets are developed, written, and evaluated with the input from adults at risk, children, and young people (7.5).
- the perspectives of adults at risk, children and young people are evidenced throughout the organisation (7.5).
- adults at risk, children and families are part of the 'team' and sharing of their views is actively encouraged and recorded (7.2).
- their processes are designed to take these views into account and these processes form an essential part of daily interaction with clients (7.2).
- they can evidence that information provided is in a format that they understand (7.2).

73% of agencies confirmed that:

- children and adults at risk are made aware of their right to be safe from abuse through information about where to go for help in relation to maltreatment and abuse (7.3).
- they utilise a wide variety of communication methods ensuring vulnerable children, adults at risk and hard to reach groups understand the right to be safe (7.3).
- they are consistently looking for ways to reach out to a wider audience (7.3).

Section Eight: Equality of Opportunity

Findings



Analysis

93% of agencies confirmed that:

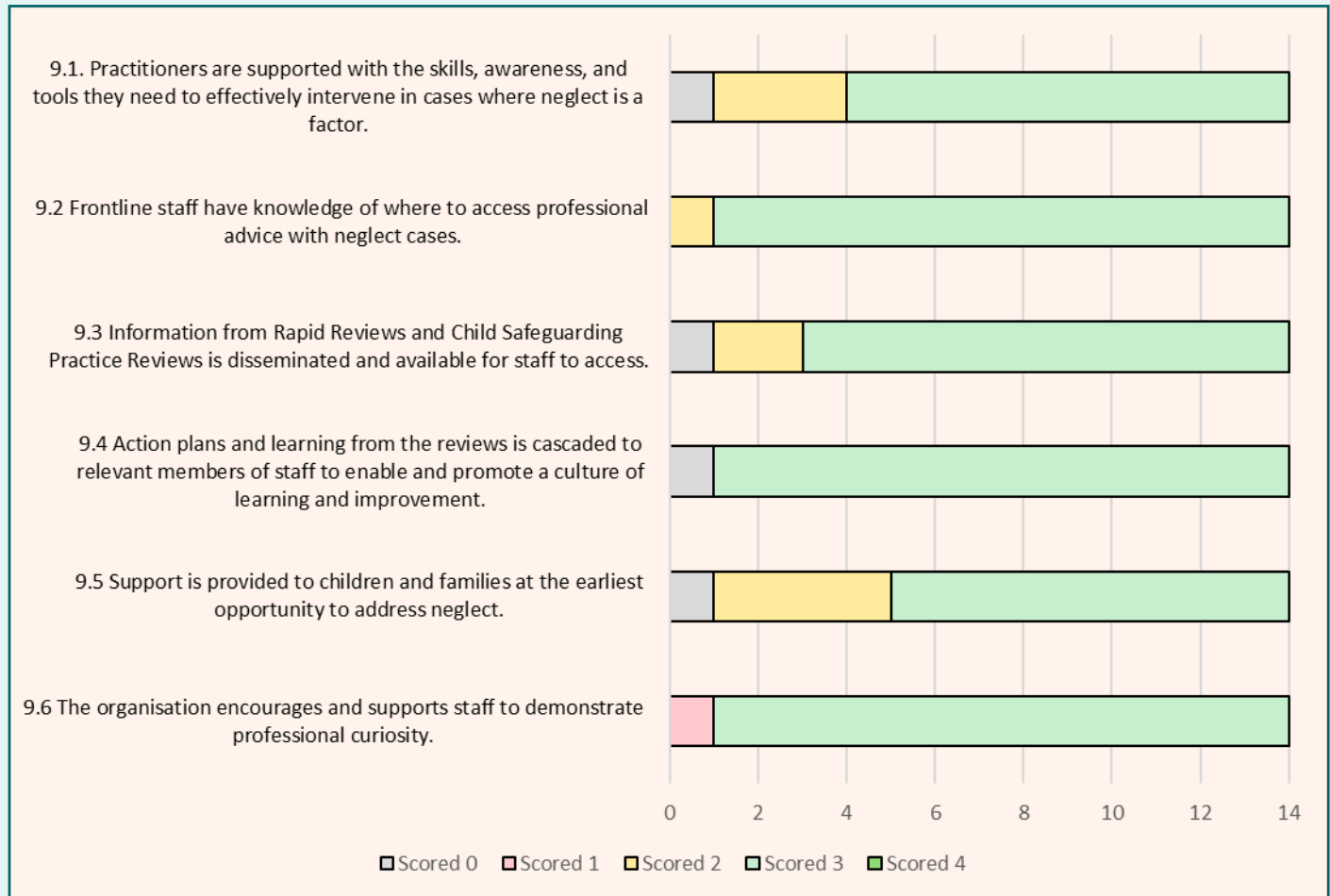
- they monitor the extent to which they provide fair and equal access to services and have strategies to tackle discrimination (8.2).
- their auditing tools record fair and equal access to services (8.2).
- their staff and others are challenged effectively to tackle discrimination (8.2).
- they have clear policies and procedures in place in this respect (8.2).

87% of agencies confirmed that:

- they can demonstrate a commitment to equality, diversity and inclusion (8.1).
- their services are accessible to all with any barriers addressed to promote equality, diversity and inclusion (8.1).
- information they provide is in a format and language that can be easily understood by all service users (8.1).
- records and assessment documentation include recording of ethnicity and diversity and this is considered within the assessment processes and delivery of services (8.1).
- their induction and supervision records include evidence that they are committed to demonstrating equality, diversity, and inclusion (8.1).
- all staff understand the value of an equality and diversity policy in contributing to improved outcomes for all adults at risk and children including, for example, those with disabilities, who do not have English as a first language, who are Looked After, or who are young carers (8.1).

Section Nine: Neglect (OSCP)

Findings



Analysis

93% of agencies confirmed that:

- their frontline staff have knowledge of where to access professional advice in relation to neglect cases (9.2).
- their frontline practitioners are encouraged to take a whole family approach, considering the needs of the child, carers, household members and the immediate network of the child, any support they may need, and the impact of those needs of others (9.2).
- they cascade action plans and learning from Rapid Reviews and Child Safeguarding Practice Reviews to relevant members of staff to enable and promote a culture of learning and improvement (9.4).
- they have a framework in place for identifying that safeguarding practice has improved as a result of the learning from reviews being disseminated to staff (9.4).
- an ethos of professional curiosity and healthy challenge is promoted and discussed with staff in briefings, team meetings and supervisions (9.6).

79% of agencies confirmed that:

- they disseminate Information from Rapid Reviews and Child Safeguarding Practice Reviews to staff and this is available for staff to access (9.3).

- their staff are aware of OSCP and their managers prioritise attendance at OSCP meetings and training (9.3).

71% of agencies confirmed that:

- their practitioners are supported with the skills, awareness, and tools they need to effectively intervene in cases where neglect is a factor (9.1).
- managerial support is in place with regards to the use of Graded Care Profile 2 (GCP2) and all queries are dealt with promptly to ensure the profile is effective and early interventions are in place (9.1).
- Their training records show that staff have accessed the GCP2 training and are using the tool effectively (9.1).
- their staff have a wealth of knowledge around what universal services are available to families where signs of neglect have been identified (9.1).

64% of agencies confirmed that:

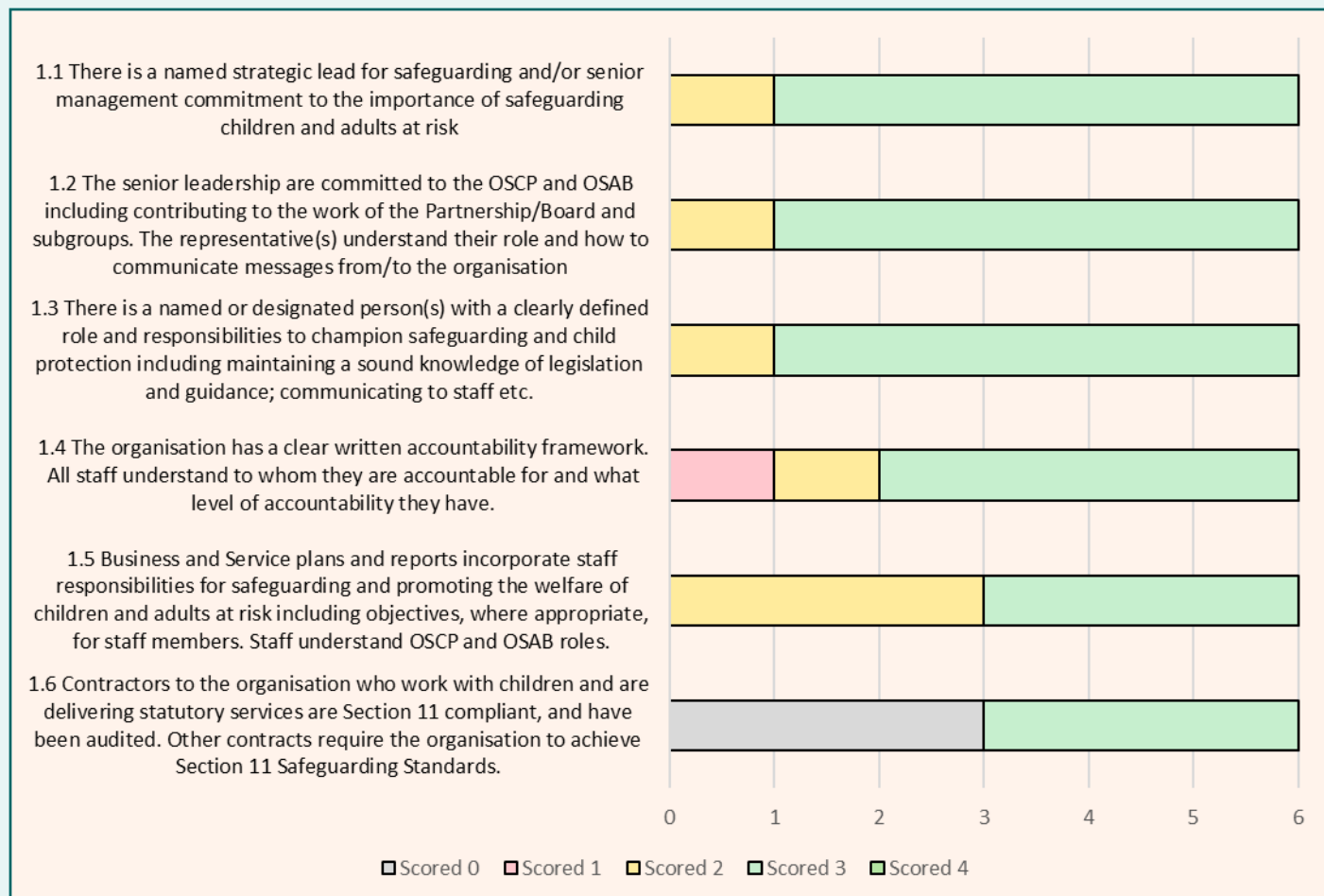
- support is provided to children and families at the earliest opportunity to address neglect (9.5).
- their staff feel confident in carrying out GCP2 and offering early help and pathways for support (9.5).
- they support their frontline practitioners to identify and respond to neglect at the earliest opportunity (9.5).

6 FINDINGS SUMMARY & ANALYSIS – DISCRETIONARY AGENCIES

A summary of the findings from the six agencies asked to complete the self-assessment template at their discretion is provided below alongside analysis.

Section One: Leadership and Accountability

Findings



Analysis

83% of discretionary agencies confirmed that:

- they are committed to the partnership (1.2) and provided assurance that a named strategic manager takes a lead with safeguarding children and adults at risk (1.1).
- they effectively communicate OSCP and OSAB messages and are committed to contributing to OSCP and OSAB work via the Board/Partnership and their subgroups (1.2).
- there is a named designated person with clearly defined roles and responsibilities who maintains a sound knowledge of legislation and guidance, ensures good communication strategies with staff are in place and is accountable for service improvement and ensuring effective working relationships are in place (1.3).

66% of discretionary agencies confirmed that:

- they have a statement of accountability of teams, and senior management roles are clearly defined in relation to safeguarding children and adults at risk (1.4).

- they have clear written accountability frameworks (1.4), including safeguarding in their service plan (1.5).
- their staff are aware of their responsibilities and that of others in the organisation (1.4).

50% of discretionary agencies confirmed that:

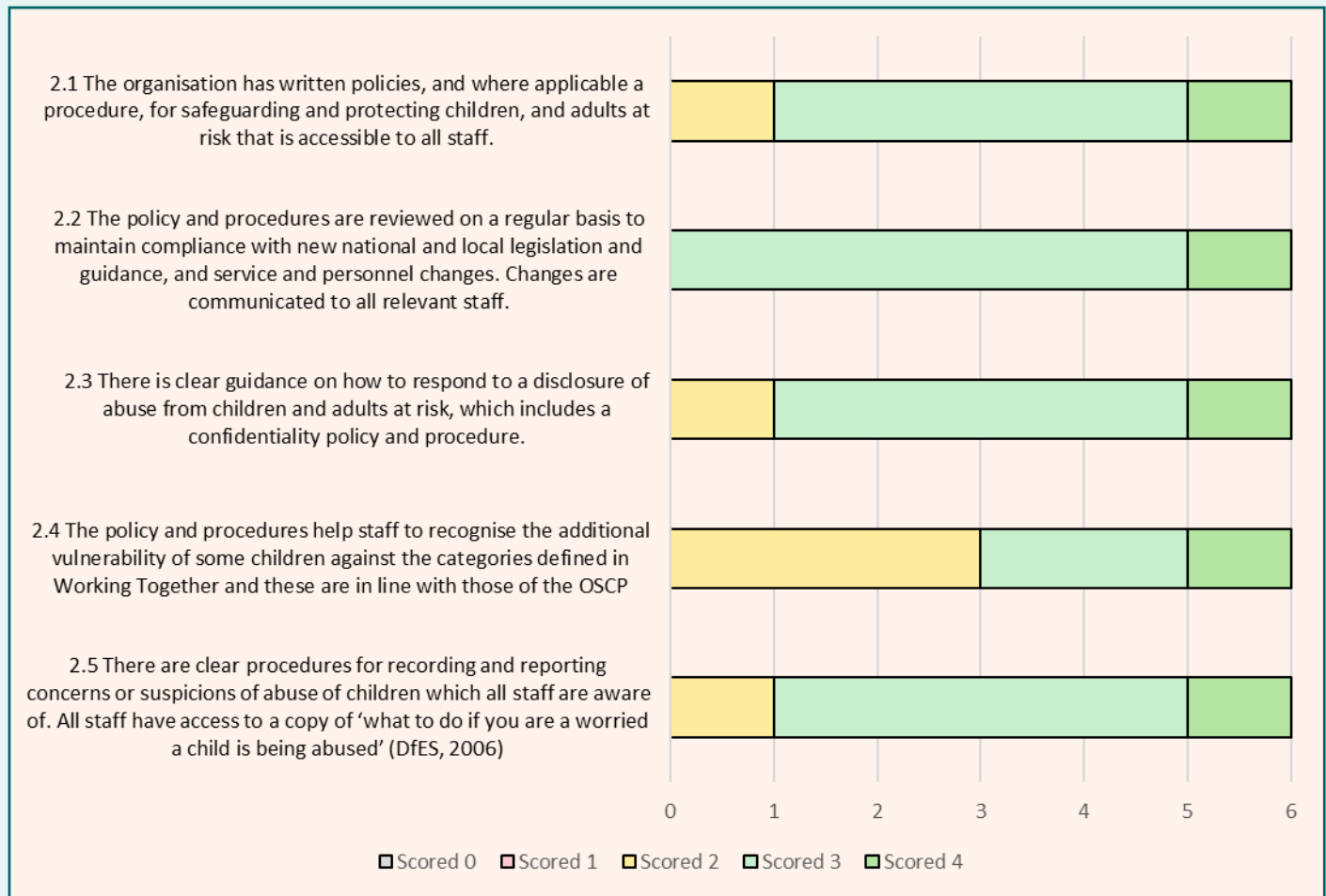
- their staff understand the roles of the OSCP and OSAB (1.5).
- their business or service plans and reports incorporate staff responsibilities for safeguarding and promoting the welfare of children and adults at risk (1.5).
- their staff working with children and/or adults at risk receive management supervision on an individual basis and can access further support when required (1.5).

100% of discretionary agencies confirmed that, where relevant:

- contractors to their organisation who work with children and are delivering statutory services are Section 11 compliant, and have been audited (1.6).

Section Two: Policies and Procedures

Findings



Analysis

100% of discretionary agencies confirmed that:

- their safeguarding policies and procedures are regularly reviewed, and the document owner ensures changes to legislation are incorporated and changes are communicated to staff (2.2).
- they undertake audits to ensure adherence to the policies (2.2).
- they ensure all staff receive safeguarding training and are aware of the statutory duty to safeguard and promote the welfare of children and adults at risk (2.2).

83% of discretionary agencies confirmed that:

- they have policies and procedures for safeguarding and protecting *both* children and adults at risk and use of the policies are discussed as part of induction, supervision and appraisal (2.1).
- they have clear procedures for recording and reporting concerns or suspicions of abuse of children which all staff are aware of and have access to a copy of 'what to do if you are a worried a child is being abused' (DfES, 2006) (2.5).
- they have clear guidance on how to respond to a disclosure of abuse from children and adults at risk,

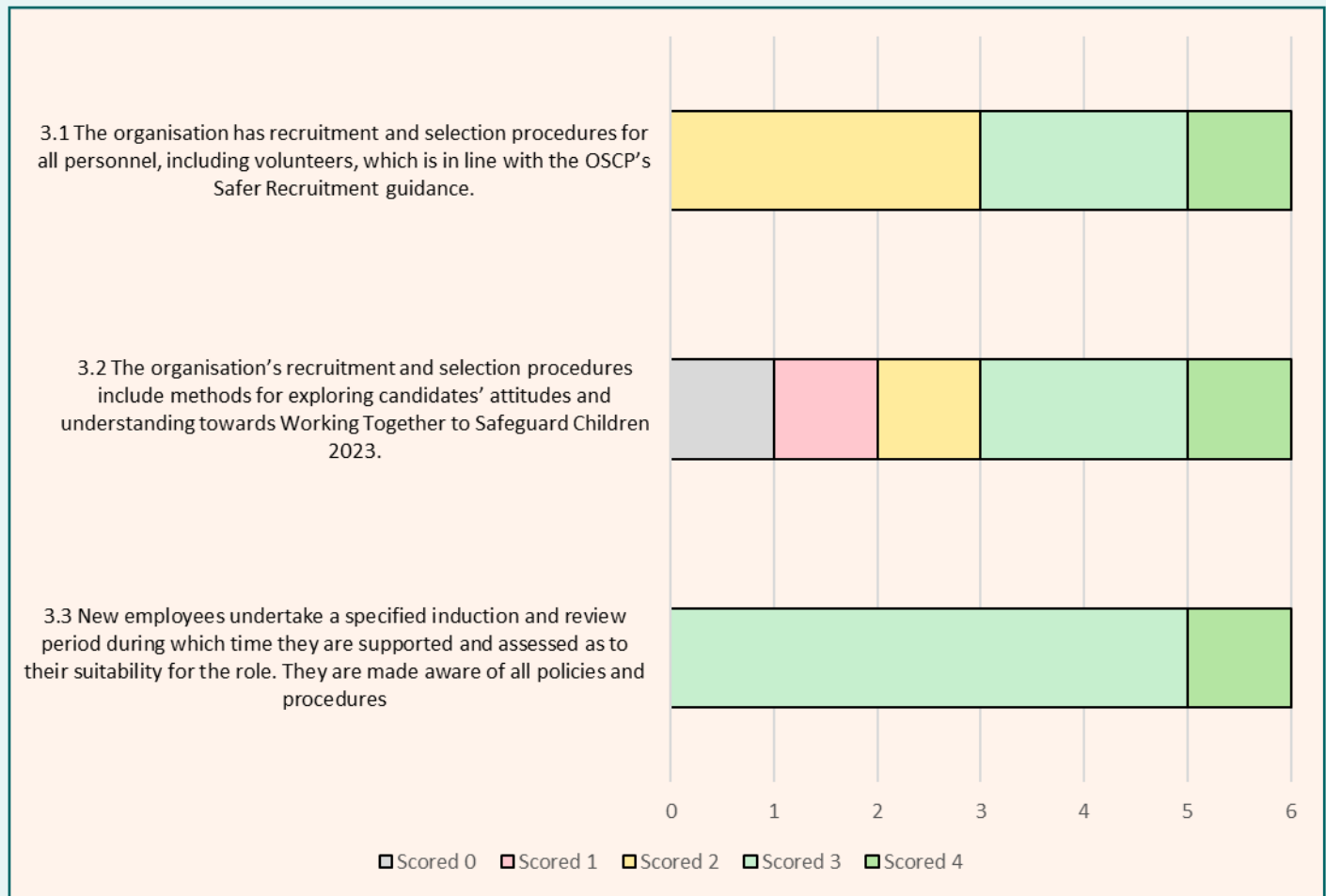
which includes a confidentiality policy and procedure and clearly states that if a child discloses that they are being abused that this cannot be kept confidential (2.3). The remaining 17% represents Mind (Tameside, Oldham and Glossop) who advised that it is not common for their staff to be involved in children's safeguarding processes, but they are reviewing their internal processes.

50% of discretionary agencies confirmed that:

- their policy and procedures help staff to recognise the additional vulnerability of some children against the categories defined in Working Together and these are in line with those of the OSCP (2.4).
- they have a framework of review in place to ensure that staff have received appropriate training regarding the issue of additional vulnerability and parent capacity (2.4).
- their staff are aware of the OSCP/OSAB policy and procedures and signpost to relevant agencies; have relevant training on the process and are aware of how to refer to Early Help and Social Care; and are aware of OSCP/OSAB procedures in relation to additional vulnerabilities.

Section Three: Recruitment and Selection

Findings



Analysis

100% of discretionary agencies confirmed that:

- new employees undertake a specified induction and review period during which time they are supported and assessed as to their suitability for the role (3.3).
- all newly recruitment staff have received adequate training and are made aware of safeguarding policies, whistleblowing policies and procedures, and their line manager's role and responsibilities (3.3).
- professional development forms part of the induction process and staff are encouraged to attend training opportunities (3.3).
- new employees are challenged on their knowledge and understanding of their role as part of their induction period (3.3).
- all practice concerns are escalated as part of the induction process and induction periods are extended where there is a cause for concern or an identified training need (3.3).
- they have effective recruitment and selection procedures for all personnel, including volunteers (3.1).
- their recruitment policy ensures professional and character references are received and verbally

checked and these include a reference from the candidate's current or most recent employer (3.1).

- all staff have Disclosure and Barring Service (DBS) clearance in place prior to the date their employment commences; and they ensure people moving across the organisation have DBS checks, where appropriate (3.1).

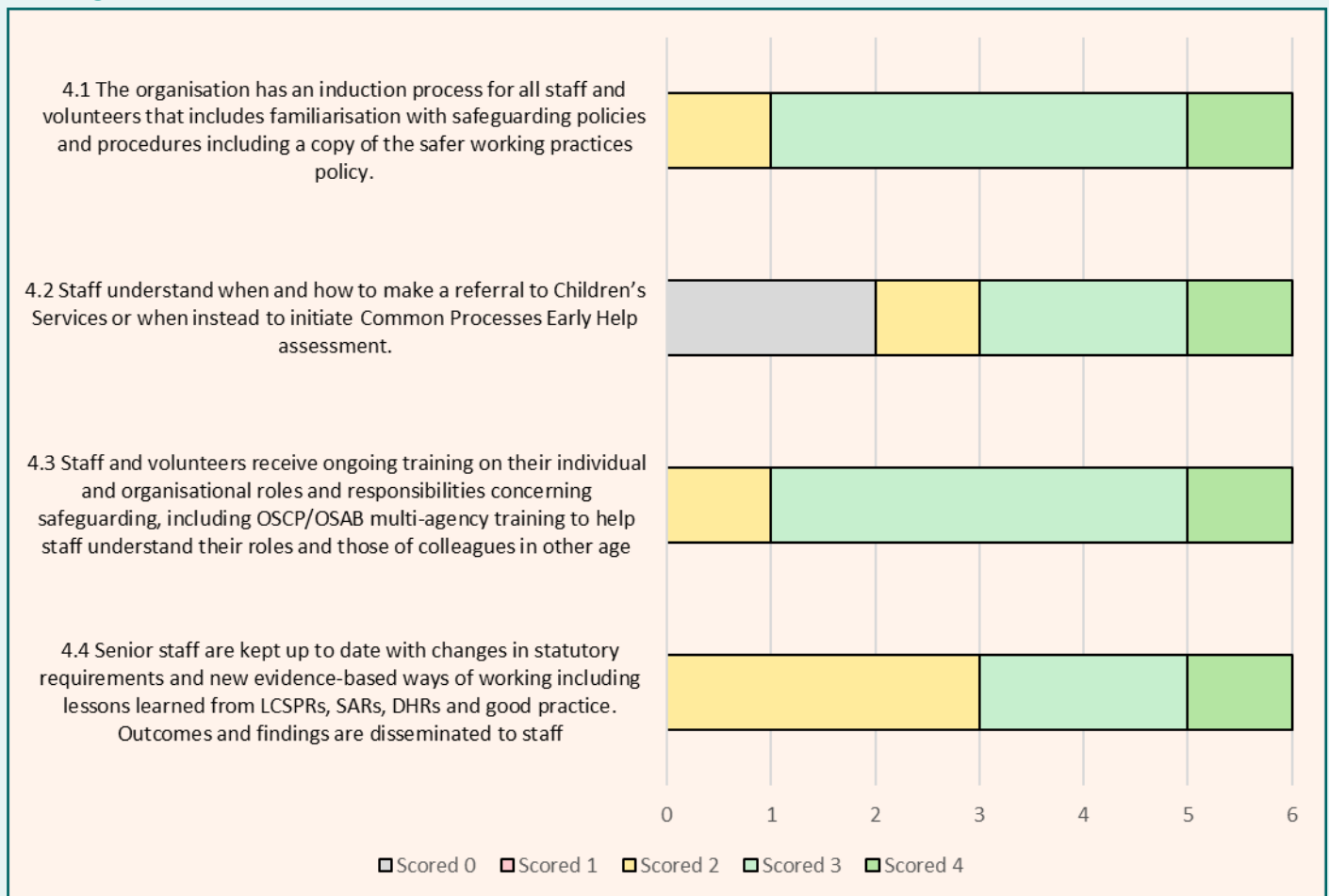
50% of discretionary agencies confirmed that their recruitment and selection procedures:

- are in line with the OSCP's Safer Recruitment Guidance (3.1).
- include thorough challenge of attitude towards and knowledge and understanding of Working Together to Safeguard Children 2023 (3.2).

The remaining 50% represent TOG Mind, MioCare Group, and Age UK Oldham, who offered either assurance around their plans to incorporate safer recruitment or explained that they do not believe attitudes to Working Together to Safeguard Children 2023 is relevant due to the nature of the services they provide.

Section Four: Staff Induction, Training and Development

Findings



Analysis

100% of discretionary agencies confirmed that:

- they have an induction process for all staff and volunteers that includes familiarisation with safeguarding policies and procedures (4.1). Only 17% (Age UK Oldham) stated that this did not include the safer working practices policy although they provided assurance that this would be addressed.
- their staff have access to OSCP/OSAB multi-agency training opportunities (4.3).
- all staff receive safeguarding training all staff and volunteers receive ongoing training on their individual and the organisational roles and responsibilities with regards to safeguarding children and adults at risk and this is reviewed at least every three years (4.3). 17% (Age UK Oldham) stated that they would now confirm that the safeguarding training provided to the minimal members of their staff who have contact with children, includes children safeguarding.
- they can provide evidence that safeguarding training is linked to practice, supervision, and appraisals (4.3).
- all staff have access to OSCP and OSAB multi-agency training opportunities (4.3).
- managers ensure any safeguarding training gaps identified are actioned (4.3).
- information is shared effectively with an information sharing framework in place (4.3).

50% of discretionary agencies confirmed that:

- their staff understand when and how to make a referral to Children's Services or when instead to initiate Common Processes Early Help assessment (4.2). The remaining 50% represent Mind, MioCare and Age UK Oldham, who advised that they do not believe this is relevant due to the nature of the services they provide and that they would however always make referrals to Children's Services.
- their senior staff are kept up to date with changes in statutory requirements and new, evidence-based, ways of working including lessons learned from Local Child Safeguarding Practice Reviews (LCSPRs), Safeguarding Adult Reviews (SARs), Domestic Homicide Reviews (DHRs) (4.4).
- the key findings and outcomes from these statutory reviews are shared with all relevant staff including via newsletters (4.4).
- the lessons learnt from these statutory reviews are included in staff training and are embedded in practice (4.4).
- senior staff attend OSAB/OSCP Development Events and conferences to keep up to date with changing statutory guidance requirements and disseminate this information to their teams (4.4).

Section Five: Complaints, Allegations and Whistleblowing

Findings



Analysis

100% of discretionary agencies confirmed that:

- they have with effective policies and systems in place to manage all concerns and complaints whether these are received from other practitioners or service users (5.1).
- their senior managers are trained to handle allegations and complaints about individuals who work with children and adults at risk and this includes allegations made by children and adults at risk (5.1).
- they can evidence liaison with the Allegation Management Lead (AML) for adults when allegations are received (5.1).
- they have effective policies and systems in place to enable whistleblowing on an organisational and individual level (5.2).
- they can evidence dissemination of their whistleblowing policies to staff and service users in a sensitive and appropriate manner (5.2).
- they can demonstrate how their whistleblowing process is effective with relevant logs kept, and actions recorded (5.2).
- the lessons learnt and outcomes from whistleblowing are fed back into practice to ensure improvements are made (5.2).

- their policies in this respect are one part of their wider culture asking for both positive and negative feedback (5.2).

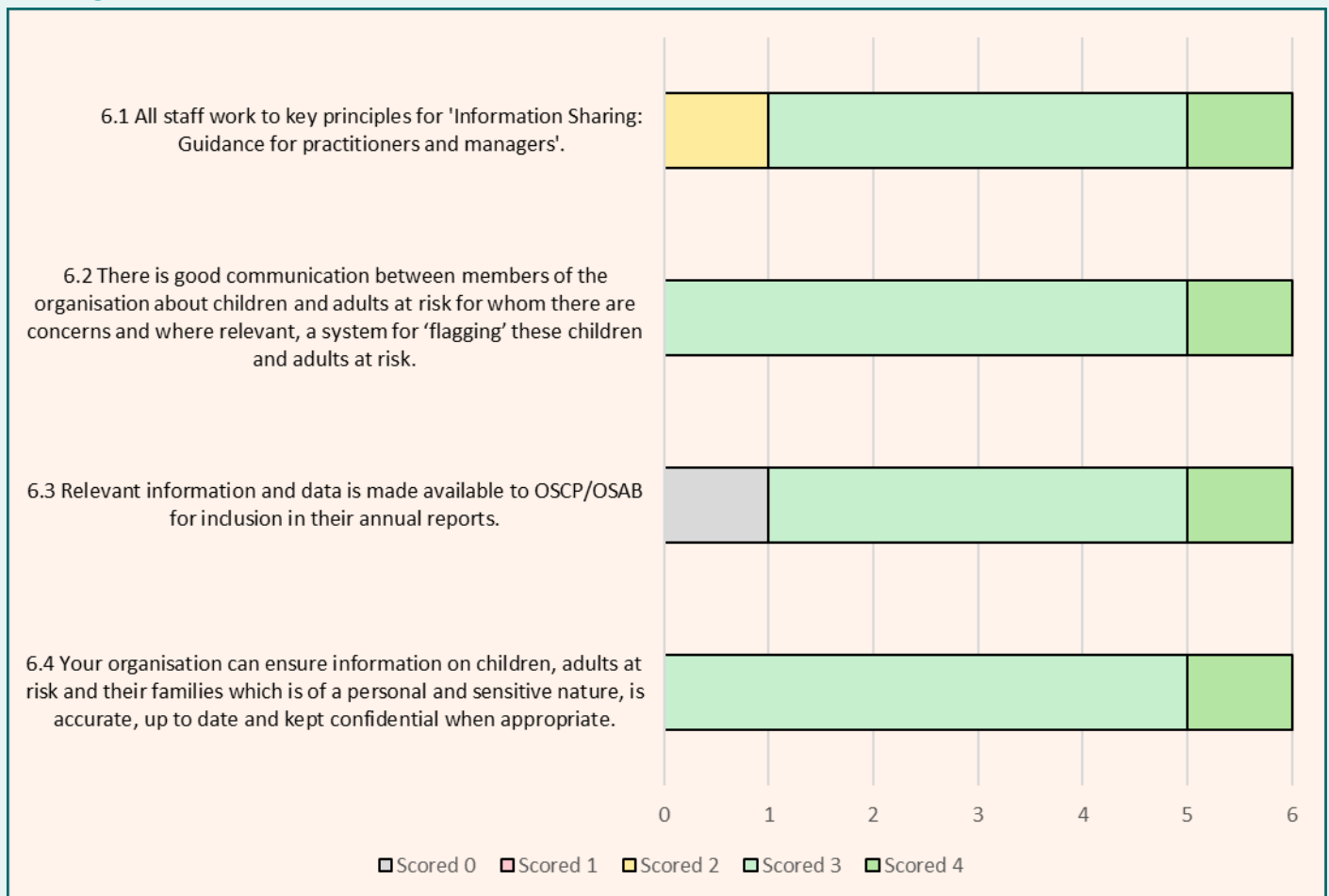
66% of discretionary agencies confirmed that:

- they have named senior officer who oversees and handles allegations, ensuring the organisation follows these policies effectively (5.1).
- all complaints and allegations of abuse are recorded, monitored and are available for internal and external audit (5.3).
- they audit their complaint and allegation processes in order to monitor effectiveness (5.3).



Section Six: Information Sharing, Communication and Confidentiality

Findings



Analysis

100% of discretionary agencies confirmed that:

- there is strong communication between members of the organisation about children and adults at risk for whom there are concerns (6.2).
- their ICT systems allow practitioners to share information regarding children and adults at risk whom there are concerns about and there is evidence that information is shared successfully (6.2).
- where relevant, ICT systems allow children and adults at risk to be flagged where there are safeguarding concerns (6.2).
- their records include multi-agency plans which illustrate their contribution to improving outcomes for children and adults at risk and minutes which illustrate that their staff have participated in multi-agency meetings (6.2).
- their records are monitored and reviewed to ensure minutes and plans are on file (6.2).
- information about children, adults at risk, and their families which is of a personal and sensitive nature is accurate, up to date and kept confidentially (6.4).
- they have statements and policies concerning the security of personal records and information is only shared in line with agreed policies (6.4).
- they ensure relevant data and information is made available to OSCP/OSAB for inclusion in their annual

reports; and OSCP/OSAB annual reports highlight their single-agency performance information due to timely sharing of key information with the partnerships (6.3).

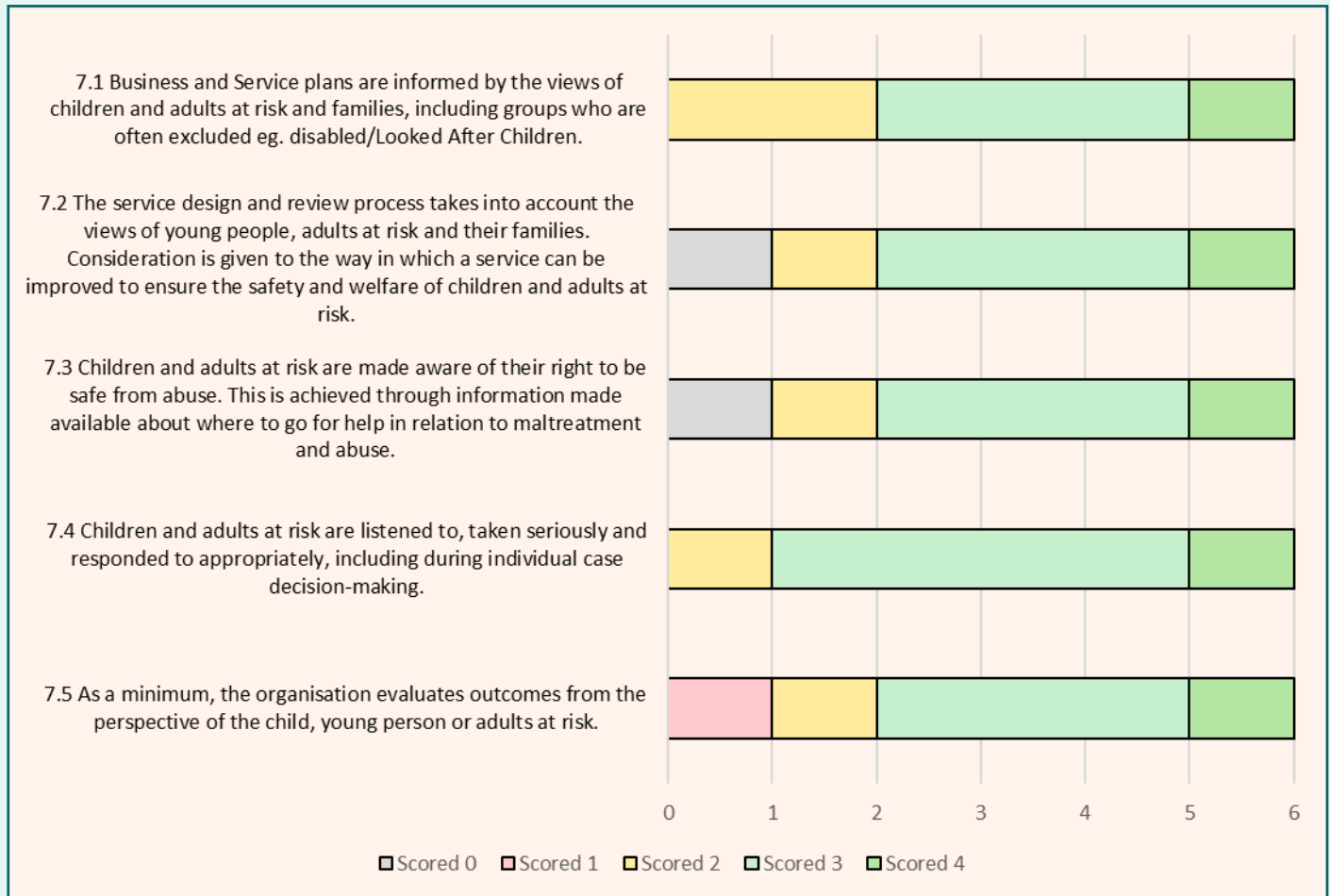
- there is evidence of regular performance information presented to OSCP/OSAB (6.3).
- they understand their duty to share information where there are child protection concerns and safeguarding concerns about an adult at risk (6.1).
- they have records of induction programmes completed which includes the responsibilities of staff if they are concerned about a child or adult at risk (6.1).
- they have records of training and briefings undertaken promoting appropriate information sharing information (6.1).

83% of discretionary agencies confirmed that:

- all staff work to '[Key Principles For Information Sharing: Guidance For Practitioners And Managers](#)', HM Government advice regarding the importance of sharing information about children, young people and their families in order to safeguard children (6.1). The remaining 17% (MioCare Group) confirmed that staff work to these principles but would take action to ensure staff are familiar with the guidance.

Section Seven: Listening to Children, Young People and Adults at Risk

Findings



Analysis

83% of discretionary agencies confirmed that:

- children and adults at risk are listened to, taken seriously, and responded to appropriately (7.4).
- every contact with the adult at risk or child provides and evidences an opportunity for them to be listened to and responded to (7.4).
- there are a range of opportunities for the voice of the adult at risk or child to be captured within case files and through other forums; and they have policies in place to ensure that this is acted upon (7.4).
- the voice of adults at risk or children is monitored and reviewed through audits (7.4).
- assessments undertaken illustrate that staff understand the value of equality, diversity, and inclusion (7.4).

66% of discretionary agencies confirmed that:

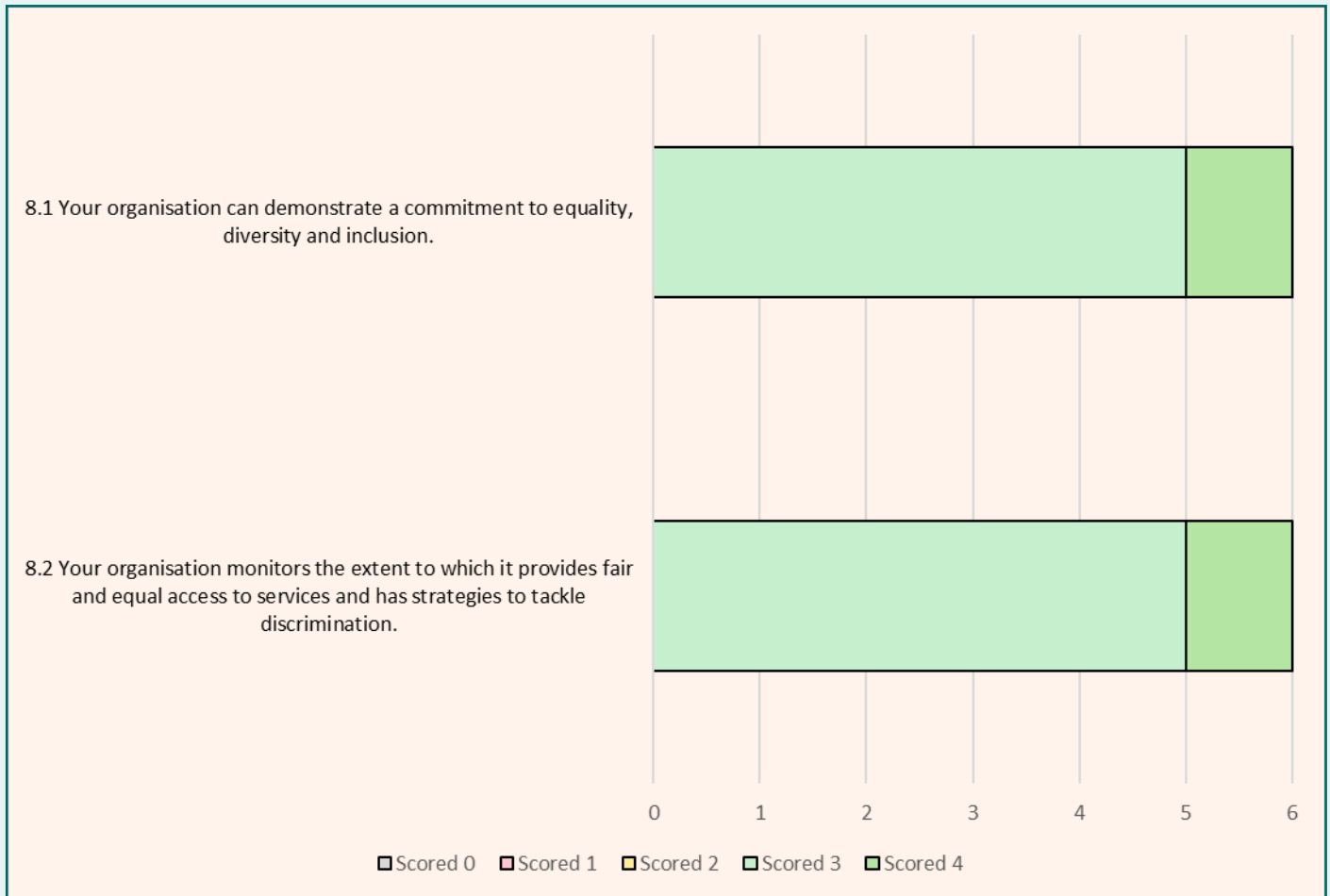
- their service plans are informed by the views of children and adults at risk and families, including groups who are often excluded (7.1).
- their programme of feedback and information gathering is timed to influence the development of service plans (7.1).
- as a minimum, they evaluate outcomes from the

perspective of the child, young person, or adult at risk (7.5).

- outcome targets are developed, written, and evaluated with the input from adults at risk, children, and young people (7.5).
- the perspectives of adults at risk, children and young people are evidenced throughout the organisation (7.5).
- their service design and review process takes into account the views of young people, adults at risk and their families (7.2).
- adults at risk, children and families are part of the 'team' and sharing of their views is actively encouraged and recorded (7.2).
- their processes are designed to take these views into account and these processes form an essential part of daily interaction with clients (7.2).
- they can evidence that information provided is in a format that they understand (7.2).
- children and adults at risk are made aware of their right to be safe from abuse through information about where to go for help in relation to maltreatment and abuse (7.3).
- they utilise a wide variety of communication methods ensuring vulnerable children, adults at risk and hard to reach groups understand the right to be safe (7.3).
- they are consistently looking for ways to reach out to a wider audience (7.3).

Section Eight: Equality of Opportunity

Findings



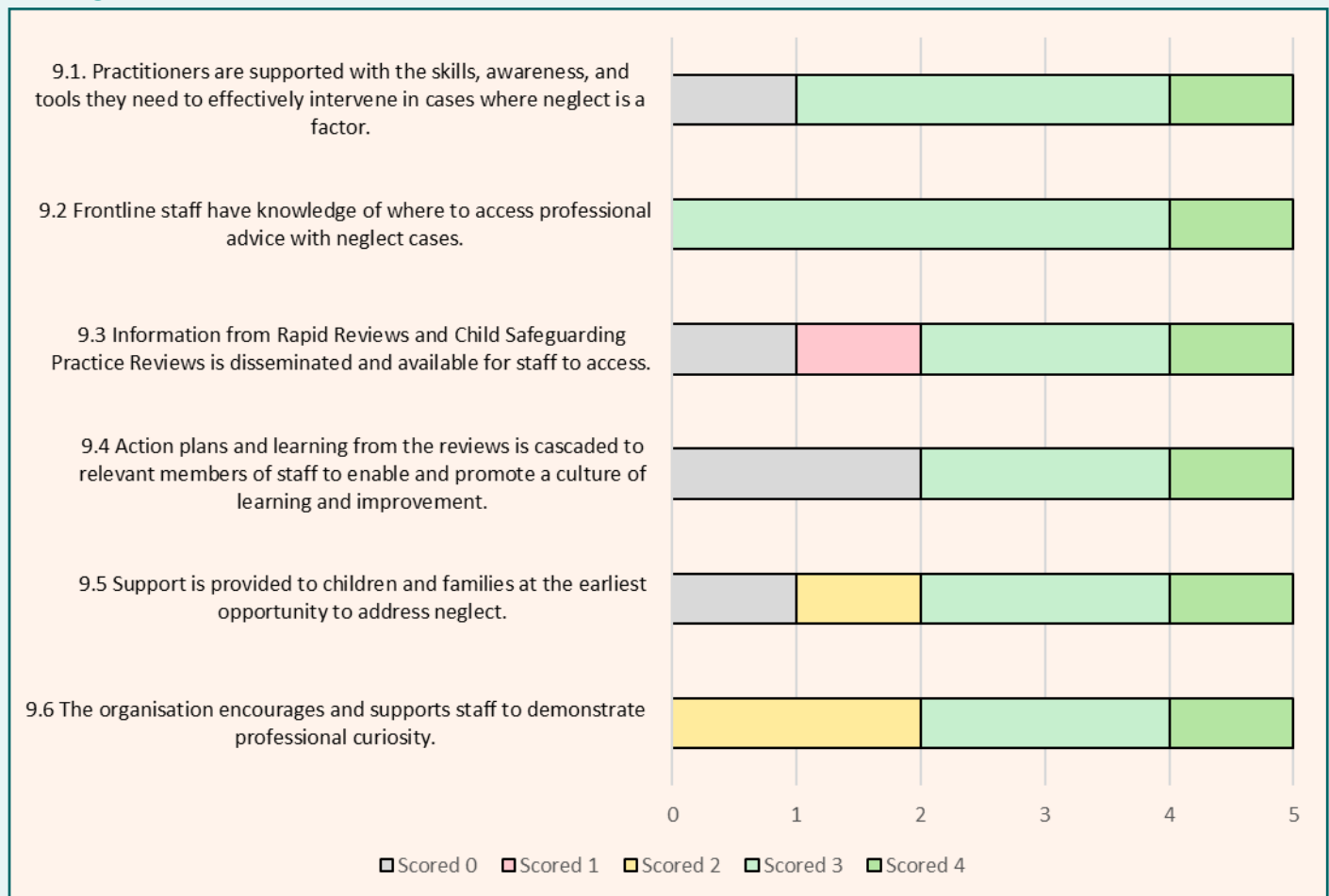
Analysis

100% of discretionary agencies confirmed that:

- they can demonstrate a commitment to equality, diversity and inclusion (8.1).
- their services are accessible to all with any barriers addressed to promote equality, diversity and inclusion (8.1).
- information they provide is in a format and language that can be easily understood by all service users (8.1).
- their records and assessment documentation include recording of ethnicity and diversity and this is considered within the assessment processes and delivery of services (8.1).
- their induction and supervision records include evidence that they are committed to demonstrating equality, diversity, and inclusion (8.1).
- all staff understand the value of an equality and diversity policy in contributing to improved outcomes for all adults at risk and children including, for example, those with disabilities, who do not have English as a first language, who are Looked After, or who are young carers (8.1).
- they monitor the extent to which they provide fair and equal access to services and have strategies to tackle discrimination (8.2).
- their auditing tools record fair and equal access to services (8.2).
- their staff and others are challenged effectively to tackle discrimination (8.2).
- they have clear policies and procedures in place in this respect (8.2).

Section Nine: Neglect (OSCP)

Findings



Analysis

100% of discretionary agencies confirmed that:

- their frontline staff have knowledge of where to access professional advice in relation to neglect cases (9.2).
- their frontline practitioners are encouraged to take a whole family approach, considering the needs of the child, carers, household members and the immediate network of the child, any support they may need, and the impact of those needs of others (9.2).

80% of discretionary agencies confirmed that:

- their practitioners are supported with the skills, awareness, and tools they need to effectively intervene in cases where neglect is a factor (9.1).
- managerial support is in place with regards to the use of Graded Care Profile 2 (GCP2) and all queries are dealt with promptly to ensure the profile is effective and early interventions are in place (9.1).
- training records show that staff have accessed the GCP2 training and are using the tool effectively (9.1).
- their staff have a wealth of knowledge around what universal services are available to families where signs of neglect have been identified (9.1).

60% of discretionary agencies confirmed that:

- they disseminate Information from Rapid Reviews and Child Safeguarding Practice Reviews to staff and this is available for staff to access (9.3).
- their staff are aware of OSCP and their managers prioritise attendance at OSCP meetings and training (9.3).
- support is provided to children and families at the earliest opportunity to address neglect (9.5).
- their staff feel confident in carrying out GCP2 and offering early help and pathways for support (9.5).
- they support their frontline practitioners to identify and respond to neglect at the earliest opportunity (9.5).
- they cascade action plans and learning from Rapid Reviews and Child Safeguarding Practice Reviews to relevant members of staff to enable and promote a culture of learning and improvement (9.4).
- they have a framework in place for identifying that safeguarding practice has improved as a result of the learning from reviews being disseminated to staff (9.4).
- an ethos of professional curiosity and healthy challenge is promoted and discussed with staff in briefings, team meetings and supervisions (9.6).

7 CONCLUSION

The 2024-26 self-assessment audit has provided a robust and comprehensive evaluation of safeguarding arrangements across Oldham's statutory and voluntary sector agencies and organisations. The findings demonstrate a strong commitment to safeguarding and promoting the welfare of children, young people, and adults at risk, with high levels of compliance observed across the majority of the audit standards.

The audit has identified numerous examples of effective practice, particularly in relation to leadership and accountability, policy implementation, staff training, and information sharing. Agencies have shown a clear understanding of their statutory responsibilities and a willingness to engage in reflective practice to improve safeguarding outcomes. Nonetheless, the audit has also highlighted areas requiring further development. These include strengthening methods to ensure children and adults at risk are aware of their right to live free from abuse, neglect, and exploitation; ensuring practitioners are consistently supported with the skills, awareness, and tools they need to effectively intervene in cases where neglect is a factor, to enable support to be provided at the earliest opportunity; and strengthening mechanisms for incorporating the voices of children, young people, and adults at risk into practice and evaluating outcomes from their perspective.

Agencies and organisations are taking action to ensure their compliance with the standards included in the audit. In practice, this means they hold single-agency action plans in relation to elements of the audit where they identified opportunities for improvement. OSCP and OSAB will continue to provide oversight, challenge, and support to agencies through ongoing assurance activity. Actions agreed in response to this audit will be monitored to ensure that improvements are implemented and sustained. This collective approach will ensure that safeguarding remains a priority and that all agencies and organisations are equipped to deliver safe, responsive, and inclusive services to Oldham's most vulnerable residents.

APPENDIX A: PARTICIPATING AGENCIES

Partner Agencies

- Children's Social Care & Early Help
- Depaul UK
- Early Break
- ForHousing
- Great Places
- Greater Manchester Police
- Housing 21
- NHS Greater Manchester
- Northern Care Alliance NHS Foundation Trust
- Onward Homes
- Pennine Care NHS Foundation Trust
- Positive Steps
- Public Health
- SafeNet
- Youth Service, Oldham Council

Discretionary Agencies

- Age UK Oldham
- Greater Manchester Fire and Rescue Service
- KeyRing Living Support Network

- Mind (Tameside, Oldham and Glossop)
- MioCare Group
- Turning Point

Children Residential Homes

- Alexandra Road
- Begin to Blossom
- Belgrave House
- Brierley Avenue Adolescent Support Unit (ASU)
- Capstone
- Cathmor
- CFS Care
- Covy House
- Dolphins House
- Meadows Care
- Old Lane Children's Home
- Olive House
- Sankofa Specialist Care
- Swans House
- Voices Homes
- Windsor Road
- Woodacre

