



# Safeguarding Self-Audit Tool

(The National Safeguarding Office)

## Contents

INTRODUCTION: .....	3
GUIDE TO UTILISING THE SAFEGUARDING SELF-AUDIT TOOL:.....	4
SELF-AUDIT TOOL: .....	6
THEME ONE: PERSON CENTRED CARE AND SUPPORT. ....	6
THEME TWO: EFFECTIVE CARE AND SUPPORT .....	7
THEME THREE: SAFE CARE AND SUPPORT .....	8
THEME FOUR: HEALTH, WELLBEING AND DEVELOPMENT .....	10
THEME FIVE: LEADERSHIP, GOVERNANCE AND MANAGEMENT .....	11
THEME SIX: RESPONSIVE WORKFORCE .....	12
THEME SEVEN: USE OF RESOURCES.....	14
THEME EIGHT: USE OF INFORMATION .....	15
STUDENTS ON PLACEMENT: .....	16
VOLUNTEERS: .....	16
<b>SUMMARY OF SELF-AUDIT FINDINGS SECTION: .....</b>	<b>18</b>
<b>APPENDIX 1 - LINKS TO ADDITIONAL INFORMATION AND RESOURCES: .....</b>	<b>20</b>

## INTRODUCTION:

Safeguarding is often thought of only in terms of the response to a specific abuse or safeguarding concern that arises. However safeguarding means much more than this.

In its broadest meaning, safeguarding has a significant preventative component and means protecting people's health, well-being, and human rights. It is about enabling people to live free from harm, abuse, and neglect. Having the appropriate policies, protocols, guidance and practice in place ensures that the importance of safeguarding those who may be ~~at risk~~ in your service is known to all staff and that safeguarding concerns which arise in your service are responded to appropriately.

Promoting the human rights of older persons and people with disabilities is central to enabling a strong culture of safe services and prevention of abuse. A self-audit is one tool which services can use to improve quality and patient safety in relation to safeguarding both in their response and prevention.

The National Safeguarding Office (NSO) has provided this template to facilitate the conducting of a self-audit of safeguarding practices and policy compliance within disability and older person's services.

This self-audit is divided into eight themes in line with the standards of the *National Standards for Adult Safeguarding, 2019*. (HIQA/ Mental Health Commission).

This self-audit tool should be used as an aid to highlight service compliance with the HSE safeguarding policy as well as assisting in highlighting areas which require service improvement or capacity building measures.

A guide to completing the self-audit tool is included and it is advisable to consult this in advance of completing the self-audit.

## GUIDE TO UTILISING THE SAFEGUARDING SELF-AUDIT TOOL:

1. This self-audit tool has been designed to assist services to consider their safeguarding practices and to assess their own compliance with current safeguarding policy.
2. It will aid the service to identify areas of strength and areas where capacity building or assistance is required to address service improvement.
3. In undertaking the self-audit your service is in keeping with a recommendation and /or a requirement of the Community Health Area to ensure such a task is completed at least once yearly.
4. The information gleaned from the self-audit can be used to highlight good safeguarding practice in a service and to identify areas which require attention to ensure good safeguarding practices are adopted.
5. Services are encouraged to review findings internally and information can be utilised to inform ongoing performance management processes.
6. It is advisable that the person in charge (PIC) of each centre undertake this self-audit on annual basis.
7. This self-audit tool will assist local managers to assess the quality of their safeguarding practice. However, there will also be a need for a provider to assure themselves of the rigour and evidence to support the local findings within their staff practice. Any significant shortcomings and or service gaps should always be reported to the senior management team without delay.
8. This tool is designed to be applied at each centre level. However it can be also be utilised at an overall service level. As such the term “service” in the self-audit tool can refer to the individual residential centre or at an organisational level.
9. This self-audit is divided into eight subsections or “themes” which reflect the themes detailed in the HIQA/ Mental Health Commission publication; *National Standards for Adult Safeguarding (2019)*:
  - a. Theme 1: Person-centred care and support
  - b. Theme 2: Effective care and support
  - c. Theme 3: Safe care and support
  - d. Theme 4: Health, wellbeing and development
  - e. Theme 5: Leadership, governance and management
  - f. Theme 6: Responsive workforce
  - g. Theme 7: Use of resources
  - h. Theme 8: Use of information
10. There are a number of questions which require a “yes” or “no” answer.
11. There are a number of questions which are in the form of a statement. Please answer in accordance with your confidence of service compliance in each area. Questions should be answered using the scale from 1 to 5; with 1 being *no confidence / not compliant* and 5 being *fully confident/fully compliant*.
12. A section is included for students who are placed in your service as part of their course requirement. If your service does not support student placements, please answer question 1 of this section and disregard the questions that follow.
13. A section is included for volunteers in your service. If your service does not use volunteers as part of service delivery, please answer question 1 of this section and disregard the questions that follow.

14. At the end of each theme/ section there is scope to record the evidence to support your answers and also any actions which are planned or which have commenced to address service improvements.
15. When complete the self-audit should be reviewed on an overall basis to highlight areas of service strength and areas which require service improvement.
16. This review of your completed self-audit will also provide an opportunity to highlight areas that you believe need to be addressed with management in relation to capacity-building support.
17. In areas identified as requiring service improvement or where capacity-building support is identified, it is recommended that realistic time frames for improvement should be noted.
18. Findings of this self-audit whilst being a quality assurance measure should also be seen as an opportunity to yield quality improvement information to share with colleagues and supervisors. This is of particular relevance if quality improvement plans are being incorporated into wider service improvements and for informing one-to- one performance meetings between Persons in Charge and their supervisors.
19. It is recommended that this exercise is undertaken annually which will allow for improvements and developments to be tracked every year.
20. Support and advice on devising an improvement plan may be available for areas such as education or practice enhancement from your CHO QSSI team and/or the Safeguarding and Protection Team. The NSO is also available if you wish to research areas of practice or policy alignment with the HSE safeguarding policy. The NSO can be contacted on [safeguarding.socialcare@hse.ie](mailto:safeguarding.socialcare@hse.ie)

## SELF-AUDIT TOOL:

## THEME ONE: PERSON CENTRED CARE AND SUPPORT.

1.	Does your service have a stated principle and philosophy of person centeredness in the delivery of your service?	Yes <input type="radio"/>	No <input type="radio"/>
2.	My service operates within the principles and philosophy of person centred care?	Please rate 1-5	
3.	Does your service have a stated position on the human rights of service users?	Yes <input type="radio"/>	No <input type="radio"/>
4.	Service users have the opportunity to live socially valued lives.	Please rate 1-5	
5.	Does your service have a stated position on advocacy and empowerment for service users?	Yes <input type="radio"/>	No <input type="radio"/>
6.	Service users have their choice and autonomy respected with regard to where they live and who they live with?	Please rate 1-5	
7.	My service follows the principles of ADM Act particularly when decision making capacity is in doubt?	Please rate 1-5	
8.	My service has a strong safety culture which also promotes person centred support plans?	Please rate 1-5	

Note any evidence to support your answers in the section above:

Highlight actions currently being undertaken or planned to address areas highlighted above which require service improvement, including timelines to achieve same:

## THEME TWO: EFFECTIVE CARE AND SUPPORT

1.	Effective interagency collaboration is happening in relation to safeguarding concerns in my service?	Please rate 1-5	
2.	In my service we have access to adequate M.D.T/ clinical support staff in devising and implementation behaviour support plans and/ or safeguarding	Please rate 1-5	
3.	Are you clear on the limits of confidentiality with regard to reporting abuse or neglect?	Yes <input type="radio"/>	No <input type="radio"/>
4.	Are you clear on the steps to follow in relation to retrospective allegations of abuse, including notification to TUSLA where necessary?	Yes <input type="radio"/>	No <input type="radio"/>
5.	Are you clear on the requirements to notify HIQA following any allegation of abuse suspected or confirmed for any resident in a residential setting?	Yes <input type="radio"/>	No <input type="radio"/>
6.	My service works well where interagency cooperation is required in safeguarding matters.	Please rate 1-5	

Note any evidence to support your answers in the section above:

Highlight actions currently being undertaken or planned to address areas highlighted above which require service improvement, including timelines to achieve same:

## THEME THREE: SAFE CARE AND SUPPORT

1.	All available measures are being taken to prevent abuse and neglect in my service?	Please rate 1-5	
2.	Does the service have an internal safeguarding policy for persons at risk of abuse?	Yes <input type="radio"/>	No <input type="radio"/>
3.	Has your service developed a user friendly version of your safeguarding policy that is accessible to all service users?	Yes <input type="radio"/>	No <input type="radio"/>
4.	The service's safeguarding policy is available to service users, parents, carers, advocates, and the wider community?	Yes <input type="radio"/>	No <input type="radio"/>
5.	Does your safeguarding policy set out the immediate actions to be taken on receipt of a safeguarding concern?	Yes <input type="radio"/>	No <input type="radio"/>
6.	Staff take the appropriate immediate action on receipt of a safeguarding concern?	Yes <input type="radio"/>	No <input type="radio"/>
7.	My service has a declared "No Tolerance" approach to any form of abuse or harm towards service users?	Please rate 1-5	
8.	Are you clear on the grounds for notifying suspicions of abuse that might be criminal in nature to An Garda Síochána?	Yes <input type="radio"/>	No <input type="radio"/>
9.	Does your service have an identified Designated Officer (DO)?	Yes <input type="radio"/>	No <input type="radio"/>
10.	Are you clear about the role and responsibility of the DO?	Yes <input type="radio"/>	No <input type="radio"/>
11.	Does your service have the DO's name, photograph and contact details on display in the service?	Yes <input type="radio"/>	No <input type="radio"/>
12.	Has your DO sought to undertake training on the 'Safeguarding Vulnerable Persons at Risk of Abuse- National policy and Procedures (2014)'?	Yes <input type="radio"/>	No <input type="radio"/>
13.	Preliminary screenings are submitted by my service to the HSE Safeguarding Protection Team (SPT) within three days.	Please rate 1-5	
14.	Preliminary screenings submitted by my service to the HSE SPT are completed to the required standard.	Please rate 1-5	
15.	Are you clear on the role and responsibility of the safeguarding co-ordinator?	Yes <input type="radio"/>	No <input type="radio"/>
16.	Service users in my service are able to express concerns about their own safety.	Please rate 1-5	
17.	Service user's views and preferences are adequately taken into account in the drafting of any preliminary screenings or safeguarding plans?	Please rate 1-5	
18.	Does your service have the contact details for the confidential recipient displayed prominently?	Yes <input type="radio"/>	No <input type="radio"/>
19.	Does your service have a general complaints policy that is accessible to all?	Yes <input type="radio"/>	No <input type="radio"/>
20.	Does your service have a named complaints officer?	Yes <input type="radio"/>	No <input type="radio"/>



21.	Do service users and relatives know how to contact your complaint officer?	Yes <input type="radio"/>	No <input type="radio"/>
22.	Do you understand your role in dealing with non-abuse complaints?	Yes <input type="radio"/>	No <input type="radio"/>
23.	Service users and their family members, relatives, friends, and members of the public have a mechanism to make a complaint?	Please rate 1-5	
24.	Does your service review the proportion and necessity for the use of any restrictive practice on a regular basis?	Yes <input type="radio"/>	No <input type="radio"/>

Note any evidence to support your answers in the section above:

Highlight actions currently being undertaken or planned to address areas highlighted above which require service improvement, including timelines to achieve same:

## THEME FOUR: HEALTH, WELLBEING AND DEVELOPMENT

1.	Does your service have a policy on visitors to your service?	Yes <input type="radio"/>	No <input type="radio"/>
2.	Does your service have an on-going resident's forum or formal engagement process for families, relatives and friends of service users?	Yes <input type="radio"/>	No <input type="radio"/>
3.	Does your service have an on-going formal engagement process for families, relatives and friends of service users?	Yes <input type="radio"/>	No <input type="radio"/>
4.	The visitor policy is being applied correctly in my service?	Please rate 1-5	
5.	Does your service have a policy on personal development of service users including friendships?	Yes <input type="radio"/>	No <input type="radio"/>
6.	Does your service have a policy on relationships and sexual health of service users?	Yes <input type="radio"/>	No <input type="radio"/>
7.	The service policy on the safe administration of medication is being applied correctly in my service.	Please rate 1-5	

Note any evidence to support your answers in the section above:

Highlight actions currently being undertaken or planned to address areas highlighted above which require service improvement, including timelines to achieve same:

## THEME FIVE: LEADERSHIP, GOVERNANCE AND MANAGEMENT

1.	Have all your staff received induction on the organisation's safeguarding policy?	Yes <input type="radio"/>	No <input type="radio"/>
2.	Are you confident in your staff awareness of their responsibilities to report safeguarding concerns.	Please rate 1-5	
3.	Is there current valid Garda vetting on file for all your staff?	Yes <input type="radio"/>	No <input type="radio"/>
4.	Do you have a HR (Trust In Care) policy for investigating allegations against staff?	Yes <input type="radio"/>	No <input type="radio"/>
5.	Do you have a training plan for your service?	Yes <input type="radio"/>	No <input type="radio"/>
6.	Do you have a dignity at work policy?	Yes <input type="radio"/>	No <input type="radio"/>
7.	Do you have a regular staff meeting in your service?	Yes <input type="radio"/>	No <input type="radio"/>
8.	Is safeguarding a standing item on your staff meeting agenda?	Yes <input type="radio"/>	No <input type="radio"/>
9.	Is safeguarding a regular agenda item at senior management meetings and you have an opportunity to attend to discuss any concerns in your service?	Yes <input type="radio"/>	No <input type="radio"/>
10.	There is a frame work within my service for PIC's to raise safeguarding concerns with senior management.	Yes <input type="radio"/>	No <input type="radio"/>
11.	Does your service have an incident reporting system?	Yes <input type="radio"/>	No <input type="radio"/>
12.	Does this incident reporting system capture safeguarding concerns?	Yes <input type="radio"/>	No <input type="radio"/>
13.	Do you use incident reports to study trends of safeguarding issues and concerns in your service?	Yes <input type="radio"/>	No <input type="radio"/>
14.	Does your service have a risk management policy and procedure?	Yes <input type="radio"/>	No <input type="radio"/>
15.	I am aware of my responsibilities under my service's risk management policy?	Please rate 1-5	
16.	Do you have a policy on the handling and management of service user's property, possessions and finances?	Yes <input type="radio"/>	No <input type="radio"/>
17.	The policy on handling service user's property, possessions and finances is being applied correctly in my service?	Please rate 1-5	
18.	My service has a clear process for the nomination of Designated Officers.	Yes <input type="radio"/>	No <input type="radio"/>
19.	Information in relation to the nomination of Designated Officers is shared appropriately with my local SPT	Yes <input type="radio"/>	No <input type="radio"/>

Note any evidence to support your answers in the section above:

Highlight actions currently being undertaken or planned to address areas highlighted above which require service improvement, including timelines to achieve same:

## THEME SIX: RESPONSIVE WORKFORCE

1.	My service has an open working environment and culture that allows staff question practices, values and attitudes?	Please rate 1-5	
2.	There is a strong safety culture amongst all the staff working in my service?	Please rate 1-5	
3.	Does your service have a policy for staff in relation to service users who are reported missing from the service?	Yes <input type="radio"/>	No <input type="radio"/>
4.	Does your service have a code of behaviour between staff and service users that is accessible to all?	Yes <input type="radio"/>	No <input type="radio"/>
5.	Does your service have a staff supervision policy?	Yes <input type="radio"/>	No <input type="radio"/>
6.	Do your staff receive regular supervision?	Yes <input type="radio"/>	No <input type="radio"/>
7.	Do you receive regular supervision?	Yes <input type="radio"/>	No <input type="radio"/>
8.	Does your service have a policy for staff working alone with service users?	Yes <input type="radio"/>	No <input type="radio"/>
9.	Staff in my service have adequate support and training to address self-harm and assaultive behaviour by service users?	Please rate 1-5	
10.	Have all your staff completed the safeguarding adults at risk of abuse awareness raising programme on HSELand?	Yes <input type="radio"/>	No <input type="radio"/>
11.	Does your service operate a policy on protected disclosures (whistle-blowing) by staff?	Yes <input type="radio"/>	No <input type="radio"/>

Highlight actions currently being undertaken or planned to address areas highlighted above which require service improvement, including timelines to achieve same:

Note any evidence to support your answers in the section above:

## THEME SEVEN: USE OF RESOURCES

1.	Does your service have a quality and safety committee?	Yes <input type="radio"/>	No <input type="radio"/>
2.	Do you receive feedback and guidance from your services quality and safety committee?	Yes <input type="radio"/>	No <input type="radio"/>
3.	Do you have any concerns with levels of staff retention in the service which impacts on the safety of service user?	Yes <input type="radio"/>	No <input type="radio"/>
4.	Do you have any concerns with regard to the level of agency staffing in your service?	Yes <input type="radio"/>	No <input type="radio"/>

Note any evidence to support your answers in the section above:

Highlight actions currently being undertaken or planned to address areas highlighted above which require service improvement, including timelines to achieve same:

## THEME EIGHT: USE OF INFORMATION

1.	Appropriate boundaries of confidentiality regarding a safeguarding issue are maintained in my service?	Please rate 1-5
2.	Is there is a records management policy in your service?	Yes <input type="radio"/> No <input type="radio"/>
3.	Records kept in my service are maintained in in line with the service's records management policy and with data protection and information security standards?	Yes <input type="radio"/> No <input type="radio"/>
4.	Arrangements are in place for the appropriate sharing of information with other services in relation to safeguarding matters	Please rate 1-5
5.	When service user information in relation to safeguarding is shared without consent, every effort is taken to ensure it is necessary, proportional and minimised.	Please rate 1-5

Note any evidence to support your answers in the section above:

Highlight actions currently being undertaken or planned to address areas highlighted above which require service improvement, including timelines to achieve same:

## STUDENTS ON PLACEMENT:

If answer to first question in this section is NO, the other questions in this section can be skipped.

1.	Does your service accept students on placement as part of their college course? <b>If no please skip the rest of this section</b>	Yes <input type="radio"/>	No <input type="radio"/>
2.	Do you have a policy on the taking of students on placement?	Yes <input type="radio"/>	No <input type="radio"/>
3.	Are all students under the supervision of a named and suitably qualified staff member?	Yes <input type="radio"/>	No <input type="radio"/>
4.	Is there a supervision policy in place to ensure that students are appropriately supervised?	Yes <input type="radio"/>	No <input type="radio"/>
5.	Is there current valid Garda vetting on file for all your students?	Yes <input type="radio"/>	No <input type="radio"/>
6.	Is there an induction delivered to all students which includes safeguarding before they commence their placement with the service?	Yes <input type="radio"/>	No <input type="radio"/>
7.	Do you have a code of behaviour between students and service users that is accessible to all?	Yes <input type="radio"/>	No <input type="radio"/>

## VOLUNTEERS:

If answer to first question in this section is NO, the other questions in this section can be skipped.

1.	Does your service use volunteers as part of service delivery? <b>If no please skip the rest of this section</b>	Yes <input type="radio"/>	No <input type="radio"/>
2.	Is there current valid Garda vetting on file for all your volunteers?	Yes <input type="radio"/>	No <input type="radio"/>
3.	Do you have a policy for volunteers that work with service users?	Yes <input type="radio"/>	No <input type="radio"/>
4.	Is there an induction delivered to all volunteers which includes safeguarding before they commence in the service?	Yes <input type="radio"/>	No <input type="radio"/>
5.	How confident are you in your volunteers' awareness of their responsibilities to report safeguarding concerns?	Please rate 1-5	
6.	How confident are you in the ability of your volunteers to recognise signs of abuse and neglect?	Please rate 1-5	
7.	Is there a supervision policy in place to ensure that volunteers are appropriately supervised?	Yes <input type="radio"/>	No <input type="radio"/>
8.	Do you have a code of behaviour between volunteers and service users that is accessible to all?	Yes <input type="radio"/>	No <input type="radio"/>

Note any evidence to support your answers in the sections on student placements and volunteers above:



Highlight actions currently being undertaken or planned to address areas highlighted above which require service improvement, including timelines to achieve same:

SUMMARY OF SELF-AUDIT FINDINGS SECTION:

List Policies due for Review in the next year:

Areas of strength in safeguarding practices noted from completing the self-audit?

Areas which require service improvement noted from completing the self-audit?

Summary of action plan to address areas identified as requiring service improvement:

Summary of areas which require to be discussed with senior management as a means to improve practice;

Completed By:

Job Title:

Date Completed:

Date next Safeguarding Self-Audit Due:

APPENDIX 1 - LINKS TO ADDITIONAL INFORMATION AND RESOURCES:

HSE Adult Safeguarding Policy: [Safeguarding Vulnerable Persons at Risk of Abuse – National Policy and Procedures \(2014\)](#)

HSE National Safeguarding Office [homepage](#)

HIQA/ MHC [National Standards for Adult Safeguarding](#)