



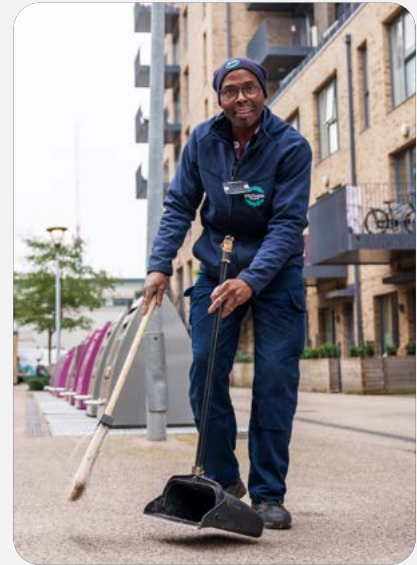
Resident Scrutiny Project on Safeguarding



We chose to review how well Southern Housing is delivering its safeguarding responsibilities as part of our annual programme. Safeguarding is a vital part of keeping residents safe, especially those who may be vulnerable or at risk.

Following the merger between Southern Housing Group and Optivo, the organisation brought in new policies, updated procedures, and created a dedicated Safeguarding Team, including a Corporate Lead for Safeguarding. Since these changes, the number of safeguarding referrals has risen by 80%, which shows that more issues are being identified and reported.

We used a range of methods to carry out our review. This included desk research, surveys, interviews, and looking closely at how processes work in practice. We didn't examine domestic abuse cases or anything under legal or regulatory investigation due to confidentiality and GDPR (General Data Protection Regulation).



CREATING
COMMUNITIES
TOGETHER



WHAT WE FOUND

We believe Southern Housing has made real progress in strengthening its safeguarding approach based on the evidence we gathered. However, there are also areas where improvements would further enhance the service.



POLICIES AND GOVERNANCE

We feel safeguarding policies would benefit from clearer ownership at senior level and more regular updates. We also recommend creating a clear and accessible safeguarding “offer” so residents and staff know exactly what to expect from the service.



CASE MANAGEMENT AND SYSTEMS

We saw opportunities to make better use of technology. Integrating the Safety Hub more effectively with Customer Dynamics could reduce duplication, improve case notes, and free up staff time for direct support.



LEARNING AND DEVELOPMENT

While staff understand safeguarding well, we believe more frequent refresher training and a wider mix of learning tools would help keep standards high. We also noticed differences in the quality of written case notes, and think additional support in this area would be beneficial.



COMMUNICATION AND RESIDENT AWARENESS

Many residents told us they're unsure what "safeguarding" means or when they should report something. We recommend clearer, more proactive communication. We also heard that residents who make a safeguarding referral would like better updates on what happens next, and we strongly support this.



RELATIONSHIPS WITH LOCAL AUTHORITIES

Working with multiple local councils can be complex. We noticed that some referrals do not progress as expected and suggest Southern Housing investigates why this happens, as failed referrals create unnecessary delays.



RESOURCES AND WORKLOAD

Once the safeguarding "offer" is clearly defined, Southern Housing will be in a better position to plan the right staffing levels, skills, and qualifications for the team. We also think some added administrative support and training may help the service run more efficiently.



Throughout our review, the Safeguarding Team was open, welcoming and fully supportive of the scrutiny process. We want to express our thanks for their cooperation and commitment.



**PROJECT TIMELINE:
AUGUST TO DECEMBER 2025**

August 2025	Planning and scoping
September 2025	Evidence gathering
October 2025	Review and analysis
November 2025	Testing findings and drafting recommendations
December 2025	Finalising the report



SURVEYS

A total of 200 surveys were completed, including 28 from residents and 172 from staff. This provided a strong evidence base for our review, with honest feedback shared to help strengthen safeguarding at Southern Housing.

RESIDENT SCRUTINY PANEL FINDINGS

Finding	Priority	Recommendation 'The Resident Scrutiny Panel Said'	'We're doing'
POLICY AND GOVERNANCE			
1.1	Critical	Develop the Safeguarding "Offer".	We brought together a working group to design a new and improved service standards. We're using the findings from this audit, along with resident feedback, staff insights, and sector research, to shape a service that is fit for purpose, future-proof, and aligned with our strategic goals. We're aiming to secure approval of the new service standards by April 2026. Steps are already underway to support this, and we remain on track.
1.2	High	<p>Develop a quality framework with indicators and metrics for Quality Assurance Partnership Coordinator (QAPC):</p> <ul style="list-style-type: none"> a. A set number of cases could be reviewed by the Safeguarding (SG) lead each month. The SG lead should have at least one sample case checked by an executive board member who has SG training and responsibilities. 	We'll be reviewing the framework in Summer 2026 , giving us time to fully embed and pilot the new service standards before making decisions about future QAPC arrangements. Our Safeguarding Lead has already begun reviewing a small sample of case reviews each month and is exploring ways to improve and digitise the review form to make the process smoother and more effective.

Finding	Priority	Recommendation 'The Resident Scrutiny Panel Said'	'We're doing'
POLICY AND GOVERNANCE			
1.3	High	<p>Ensure each Policy has an executive board sponsor to ensure this is reviewed annually or the agreed period:</p> <ul style="list-style-type: none"> a. The policy should have a version control that the Southern Housing team and residents can review to ensure it is the most up to date copy. 	<p>We met with the Policy Manager to review this in detail. Every policy now has a named Director Owner, and the relevant Executive Sponsor is accountable for the policies in their area. Version-control processes are in place, and this key information is included in the footer of all staff-facing documents. The Resident Policy Group also asked us to remove the detailed version-control table (including change logs and rationale) from resident-facing policies to keep them clear and easy to read. The Policy Team continues to oversee all mandatory policy review cycles, and if updates are needed before a renewal date, the review date is adjusted to reflect this. Completed.</p>
1.4	Medium	<p>Standardise case management auditor competencies, establish a systemic learning process (e.g, build a process for how the "lessons learnt/improvements identified" from individual case audits are fed back into organisational learning, policy reviews, or training programs and consider audit frequency and scope.</p>	<p>We'll start this work as soon as the new service standards is confirmed, and we'll track progress through our monthly action plan working group.</p>

Finding	Priority	Recommendation 'The Resident Scrutiny Panel Said'	'We're doing'
POLICY AND GOVERNANCE			
1.5	Medium	Check the contracting process to ensure that contractors and subcontractors comply with Southern Housing Safeguarding policies.	We've a meeting planned for May 2026 to review our current arrangements and identify any gaps. This will include looking at what is set out in our contracts and the checks we use to monitor them.

Finding	Priority	Recommendation 'The Resident Scrutiny Panel Said'	'We're doing'
CASE MANAGEMENT			
2.1	Critical	Integrate SafetyHub with Customer Dynamics (CD).	We've a meeting planned for March 2026 with the product owner to review all the recommendations linked to SafetyHub. This is commissioned software, so we need to fully understand what it can and can't do, including any limits on how information can be changed.
2.2	High	Tailor SafetyHub: clarify unexplained categories like "NA" and "Others" to improve reporting data; integrate better notes and household information.	We've created a specific working group to review our IT-related recommendations. This will be an ongoing three-month project, with progress monitored through our monthly action plan working group. A number of actions have already been agreed to improve the quality of our recording.
2.3	Critical	Only permit the Safeguarding Team to input and amend cases in CD.	We'll start this work as soon as the new service standards is confirmed, and we'll track progress through our monthly action plan working group.
2.4	High	Review CD case notes format with a view to moving from email cut and paste to easily-read record of the case.	

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CASE MANAGEMENT			
2.5	High	Review how to eliminate possible delay from people reporting via "Hello" email.	There's currently no delay in responding to this email address. We've introduced key words to help us identify urgent messages quickly, and we've added a dedicated safeguarding email and telephone number to our website so people can contact the team directly without delays. Completed.
2.6	Medium	Consider making SafetyHub available to contractors' staff.	We've a meeting planned for March 2026 with the product owner to review all the recommendations linked to SafetyHub. This is commissioned software, so we need to fully understand what it can and can't do, including any limits on how information can be shared.
2.7	Medium	The Concern Flow Chart might be further improved by showing how the Safeguarding Team handles the process once they are informed of the safeguarding concerns, e.g, internal processes, how they'll respond, and timescales.	We'll start this work as soon as the new service standards is confirmed, and we'll track progress through our monthly action plan working group.
2.8	Low	Implement a digital system for tracking compliance and identifying systemic issues, using PowerBI to automate data sourcing and analysis.	We'll look at this recommendation in Summer 2026. It sits within our wider action plan and is monitored regularly by our working group and managers.

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CASE MANAGEMENT			
2.9	Low	Consider adding a measure to show risk values at the start of the case, when a new risk presents, and at case closure.	We've created a specific working group to review our IT-related recommendations. This will be an ongoing three-month project, with progress monitored through our monthly action plan working group. A number of actions have already been agreed to improve the quality of our recording.
2.10	Low	Keep cases open until resolved by contact with affected persons. They may not want to interact with team, but the minimal contact can then be noted as permission not given and case can then be closed.	We'll start this work as soon as the new service standards is confirmed, and we'll track progress through our monthly action plan working group.

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LEARNING AND DEVELOPMENT			
3.1	High	Increase frequency of refresher training (perhaps annual); check compliance with mandatory training to ensure it covers 100% of staff and that there is clarity about who should ensure it happens and what the timeframes should be; verify contractors' training adheres to Southern Housing requirements.	We've already made great progress. Our 2026/27 training plan is complete, and we've begun designing the sessions. The programme follows a tiered approach so that training matches each person's role and responsibilities, including managerial duties. Completed.
3.2	High	Develop an action plan to address data inaccuracies and training gaps in CD, including case note language and method training; include review of case notes in regular supervision.	We've already made strong progress. Our new training plan for 2026/27 is ready, and we've started designing the training sessions. We're also setting up a tenure process so external providers can support delivery to our frontline teams. This recommendation will be included in the specifications, so it's fully built into the new approach.

Finding	Priority	Recommendation 'The Resident Scrutiny Panel Said'	'We're doing'
LEARNING AND DEVELOPMENT			
3.3	Medium	Make more use of case studies and learning from cases in role plays and scenarios.	We've already made strong progress. Our new training plan for 2026/27 is ready, and we've built in a stronger focus on using real case studies throughout the programme. We're now designing training sessions that incorporate case-based role plays and scenario-based learning to strengthen practical application. We're also setting up a tender process so external providers can support delivery of this approach to our frontline teams. This recommendation will be fully reflected in the training specifications so it's embedded in the new model.
3.4	Low	Consider additional training for members of the team in unconscious bias and reflective practice. Reformat "Threat of Suicide" document to be more user friendly and add clarity, such as checklist highlighting critical actions. Add case studies or scenarios to help staff in real life situations.	We'll look at this recommendation in Summer 2026. It sits within our wider action plan and is monitored regularly by our working group and managers.

Finding	Priority	Recommendation 'The Resident Scrutiny Panel Said'	'We're doing'
RESOURCES			
4.1	High	Review staffing numbers and structure based on the "offer" when that is finalised. Create a clear organisational chart for the Safeguarding Team, showing the QAPC's direct reports and their place within the Southern Housing structure.	We'll start this work as soon as the new service standards is confirmed, and we'll track progress through our monthly action plan working group.
4.2	High	Include in the safeguarding process automatic notification to people reporting cases, updating them about what is being done (in terms that don't broach GDPR) and notifying them about the support available to them to deal with any triggered issues arising.	
4.3	Medium	Make sure there is enough training, administrative and analytical support for the QAPC, given their significant data collection, collation, and analysis responsibilities and our recommendations for more training.	
4.4	Low	Based on the "offer", define the qualifications and experience required of members of the team. For example, if the "offer" is triage +++, there may be a case for recruiting people who have Social Work degrees/masters and/or social work experience.	

Finding	Priority	Recommendation 'The Resident Scrutiny Panel Said'	'We're doing'
COMMUNICATION			
5.1	High	<p>Create a plan to publicise the Southern Housing safeguarding “offer” to staff, contractors and the resident community. Some suggestions:</p> <ul style="list-style-type: none"> a. Use multiple channels b. Use QR codes and broaden poster content and consider using other languages c. Review suggestions about communication channels and content from the two surveys d. Review website search functionality for Safeguarding information e. Consider having a Safeguarding button for taking reporters straight to a reporting form f. Check that there is a “break-out” button to another website (e.g. bbc.co.uk) for safety 	<p>We'll start this work as soon as the new service standards is confirmed, and we'll track progress through our monthly action plan working group.</p>

Finding	Priority	Recommendation 'The Resident Scrutiny Panel Said'	'We're doing'
COMMUNICATION			
5.1	High	<ul style="list-style-type: none"> g. Work with the Resident Engagement Communications Group to develop the content and channels of safeguarding communications to residents h. Digital Inclusion: Plan to reach digitally excluded residents i. Consult with Communication Team on how to reach "street" development residents who don't have access to noticeboards j. Review all materials in use once the "offer" is settled. 	We'll start this work as soon as the new service standards is confirmed, and we'll track progress through our monthly action plan working group.
5.2	Medium	Develop and communicate more scenarios that provide a broader range of safeguarding issues, and their meaning, such as county lines, cuckooing, online abuse, modern slavery, etc.	We'll look at this recommendation in Summer 2026. It sits within our wider action plan and is monitored regularly by our working group and managers.
5.3	Medium	Define terms by explaining the meanings of safeguarding/abuse/neglect.	
5.4	Low	Clarify confidentiality and message of anonymous reporting.	

Finding	Priority	Recommendation 'The Resident Scrutiny Panel Said'	'We're doing'
LOCAL AUTHORITY (LAS)			
6.1	Medium	Root causes of "failed" submissions to local authorities need investigation to inform categorisation and learning.	Some local authority processes sit outside our control, but we know we can build stronger partnerships in the future once our roles and new service standards are fully shaped. We'll look at these recommendations as part of our longer-term plan and will start them after we finish the actions already under way in winter 2026.
6.2	Medium	Provide framework and advice for dealing with incidents that arise out of hours referrals.	
6.3	Low	Establish relationship management of local authorities to improve case acceptance and timeliness of acceptance.	

