Appendix 2: Action Log - Audit and Complaints

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|----------------------|-----|-------------------|--|---|----------------|--------------|---|
| Recommendations | | | | | | | |
| From | Ref | Area | Description | Actions Graham Conroy and Amy Manji to meet, reflect on | Lead | Completed By | Updates / Outcomes |
| | | | Communication between SA Team | actions to be added around communication / joint work | | | Ongoing - SG case protocol agreed between |
| Complaints | | Communication | and HDT | with HDT | GC | 23.05.2019 | HDT and SG |
| | | Communication | Alleged Perpetrator has need for care | With Hot | GC | 23.03.2013 | TIET and SC |
| | | Adult at Risk | and support | Case reflection with SA Team | GC | 23.05.2019 | Completed and ongoing |
| | | | | LR referred as a case for the external safeguarding case | | | Report complete and signed off by SAB April |
| | 3 | Quality Assurance | External case audit of LR | audit commissioned | JP | complete | 2019 |
| | | , | Person Centred approach -balancing | | | | In light of peer review, audits starting August |
| | 4 | MSP | views and information | quarterly case audits | GC / GD | 15.05.2019 | 2019 |
| | | | | | | | |
| | | | Quality assurance audit system for | Propose a system for quality assurance in safeguarding; | | | Quarterly audits, external commissioning |
| External SA Review | | Quality Assurance | safeguarding | agree at TM Monthly meeting; sign off at DMT | GD | 23.05.2019 | audit annual for assurance |
| | | | | a) Review of supervision policy in relation to case | | | Amend current supervision policy for |
| | | | Recording reasoning for actions and | recording b) SA Team Manager and SAMs supervision | | | consistency across ASC, not just |
| | (| Recording | evidence of discussion | discussion and agreement | GD/ GC | 23.05.2019 | safeguarding. Completed 10.19 |
| | | | Protocol Mosaic and MH System | | | | |
| | 1 | Partnership | Recording for cross referencing | a) Protocol identification and refresh | Rachel Isidore | | 13.08.19 conversation with Eric Craig |
| | | | Daniel and an electric and a second and | | | | SAB development away day held on 0.10.19. |
| | l . | MSP- SAB | Board partners deliver a refresh of MSP | SAB Response to MSP | | | New SAB priorities agreed as SAB on 10.10.19 |
| | | IVISP- SAB | IVISP | LA Response to MSP- to deliver training session to SA | Daniel Morris | | 10.10.19 |
| | | | | Team and bite size training for adult social care | | | |
| | | MSP- LA | LA to deliver a refresh of MSP for staff | | GD | 15.06.2019 | Training commissioned 08.19 |
| | - | IVISF- LA | EA to deliver a refresh of Wish for Staff | practitioners | GD. | 13.00.2013 | Training commissioned 66.15 |
| | | | Managers consider the best way to | | | | |
| | | | capture data on how outcomes for | | | | |
| | | | people experiencing safeguarding | | | | |
| | 10 | MSP- AaR feedback | captured and delivered | Review of data capture of outcomes on Mosaic | GD and SA Team | 06.05.2019 | MH / ILDS need to be represented? |
| | | | | | | | Initial meeting of multi-agency SAB partners |
| | | | Tools for self neglect to improve | | | | task and finish group held 13.11.19 - |
| | 1: | Self Neglect | practice | Task and Finish Group SAB Outcome | Daniel Morris | 31.10.19 | adopted Lambeth protocol. |
| | | | Board may consider if all partners | | | | |
| | | | have an understanding in relation to | | | | |
| | | | financial abuse how information can | | | | |
| | | | be discussed with the DWP and the | | | | |
| | 12 | Partnership - SAB | OPG | Issue for SAB to consider specific actions | Daniel Morris | tbc by SAB | |
| | | | | a) Review of recording in Mosaic b) consideration around | | | |
| | | | | local practice guidance with the SA Team c) SA Team | | | Review completed. Initial changes to SG |
| | 13 | Advocacy | Use of advocacy | briefing d) inclusion in audit tool | GC / GD | 14.06.2019 | workflow with IT to implement. |
| | 1 | | | a) Review the approach to risk and safeguarding plans in | | | |
| | | | | the team b) ensuring consistent local practice guidance | | | |
| | 14 | Practice | Safeguarding Plans and Risk | c)inclusion in audit tool | GC/GD | 14.06.2019 | New Tool developed by GC and his team |
| | 1 | | | a) SA Toom briefing and info circulated b) to tall to ASS | | | |
| | 1 | | | a) SA Team briefing and info circulated b) to take to ASC | | | |
| | 1. | Fire Safety | LFB Safe and Well checks default | TM meeting to consider how this is implemented outside of safeguarding more consistently | GC / GD | 14.06.2019 | GC has circulate to SA Team the information |
| | 1: | of the Safety | Li b Sale dilu Well Cliecks deladit | or sareguarumig more consistently | GC / GD | 14.00.2019 | GC has circulate to 3A realli the information |
| Oragnisational | | | AaR or carer not contacted following | | | | |
| Learning - EB and MG | 16 | MSP | concern raised | See actions under point 9 for the Local Authority | GD | 15.06.2019 | |
| Ecurining Eb and Wic | 1 | | 227007770300 | a) Review and changes to the recording of safeguarding | | _5.00.2015 | |
| | | | Outcomes were not compliant with | on Mosaic b) training for the SA Team on policy and | | | |
| | 17 | Policy | London policy and procedures | procedurs | GD | 15.06.2019 | |
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