

APPENDIX 1: MULTI AGENCY ACTION PLAN

Coventry Safeguarding Adults Board, Serious Adult Review Action plan

Name of Review SCR Mrs E	
Date 17 th September 2015	Updated on 30th October 2015
Completed by	Organisation All Agencies

Actions must be **SMART** (Specific **M**easurable **A**chievable **R**ealistic **T**imed) and **RAG rated** – **Red** =Not achieved and seriously behind schedule, **AMBER** = not achieved and slightly behind target, **GREEN** = on track to be achieved within timescale

Recommendation	Source of recommendation (Overview report or IMR)	Action required	Lead Officer and Job title	Update and on progress and evidence	Outcome – what is expected to be achieved from these actions	Target Date	Rag rating
Coventry Safeguarding Adults Board							
1. CSAB should assure itself that there is a clear framework and methodology for conduct of SARs including a protocol for agreeing how any parallel investigations and reports will be shared during	Overview Report	Develop a SAR Toolkit to provide professionals with guidance required to support the delivery of the SAR process	SAR Coordinator		All SAR's are conducted to be compliant with the required Care Act 2015 standards	Jan 2016 onwards	Green on track

the SAR process.							
2. CSAB should implement a quality assurance system to check the effectiveness of its safeguarding procedures, with a particular focus on the use of strategy discussions, quality of investigation reports, skills in chairing case conferences, and time-limits for distributing case conference minutes.	Overview Report	CSAB to mandate Quality Assurance Monitoring and Reporting as an agenda item for all CSAB meetings	Quality Assurance and Performance sub group		Safeguarding case reviews are consistently completed within the timeframes set out in Coventry Safeguarding policy and procedure guidance (2014) and the process applied is compliant with best practice guidance (Care Act 2015)	January 2016 onwards	Green on track
3. CSAB should be assured that either through the revised Pan West Midlands Procedures, or additional local practice guidance, there is detailed guidance on the circumstances when the police should be notified of safeguarding alerts including a	Overview Report	Review West Midlands and local safeguarding policy and procedure guidance, and if necessary update the local guidance to include the circumstances when the police should be notified of safeguarding alerts by all agency providers.	Policy and procedure task and finish group		The Police notification process standards for safeguarding cases are achieved by all partner agencies in accordance with local policy guidance.	January 2016 onwards	Green on track

<p>requirement that if a vulnerable adult, who is the subject of a safeguarding alert, dies in hospital, an automatic referral will be made to the police to explore whether neglect or mistreatment contributed to their admission, or to their death.</p>							
<p>4. CSAB should be assured that a protocol has been established with the Coventry and North Warwickshire Coroner for sharing information in cases where there is a safeguarding issue which may require a post-mortem, or an investigation through the safeguarding procedures.</p>	<p>Overview Report</p>	<p>Review West Midlands procedure to ensure that it includes the circumstances and the process for notifying the Coventry and North Warwickshire Coroner in cases where there is a safeguarding issue which may require a post-mortem, or an investigation through the safeguarding procedures.</p>	<p>Policy and procedure task and finish group Legal advisor to Board</p>		<p>Clear Policy guidance in place which are fit for purpose.</p>	<p>April 2016</p>	<p>Green on track</p>

<p>5. CSAB Members should assure themselves that agencies are working to local safeguarding protocols on how agencies will work together in cases where multiple agencies are involved including agreement on which professional will take the lead.</p>	<p>Overview Report</p>	<p>CSAB to establish a 'key issues' agenda item to ensure that agencies understand the impact of organisational and service changes on safeguarding</p>	<p>Board Business Manager</p>		<p>Individual service users receive, coordinated care which improves their quality of life as standard.</p>	<p>January 2016 On going</p>	<p>Green on track</p>
<p>6. CSAB Members should assure themselves that their staff have received appropriate training, and are working to national guidance issued by Department of Health, NICE, and professional bodies to implement the learning from this SCR on the identification, assessment and treatment of pain,</p>	<p>Overview Report</p>	<p>Training programmes delivered within partner organisations will be a standard inclusion in the CSAB Annual report</p> <p>Work Force Development sub group to review the available capacity to deliver training in relation to these key issues, and ensure that the training resource is able to meet the required need.</p>	<p>Board Business Manager</p> <p>Work Force Development sub group</p>		<p>Services are delivered in a way that is informed by best practice.</p> <p>All staff can access training to meet their individual needs</p>	<p>January 2016</p> <p>April 2016</p>	<p>Green on track</p> <p>Green on track</p>

constipation, back injuries, sepsis and mental capacity.		Provide a lessons learnt event which ensures staff are informed of the issues identified within the SCR findings, and able to improve their practice as a result	SAR coordinator		Improved service user experience	December 2015 On going	Green on track
		Assurance given annually by each member agency that their mandatory training compliance figures meet the agreed local standards	Workforce Development sub group		Training compliance figures across all agencies meets the agreed local standards	April 2016 On going	Green on track
7. CSAB Each agency must assure themselves and the Board Members through supervision and case audits, that staff have sufficient skills to engage effectively with persons in a personalised way, in gathering relevant information to guide assessments and care planning, particularly in	Overview Report	Supervision audit to be carried out by each agency and results reported to Quality Assurance and Performance sub group	CSAB Board member of each relevant agency / Quality Assurance and Performance sub group		People receive personalised care, that is delivered in partnership.	March 2016	Green on track
		Ensure that personalisation is effectively reflected in training programmes	Work Force Development sub group				

risky situations when patients and service users are reluctant to accept help or act on advice.							
8. CSAB Each agency must assure themselves and the Board Members that when patients' / service users are moving to a different environment, their organisation shares all relevant information, and contributes fully to multi-agency planning.	Overview Report	Interagency information sharing audit to be conducted. Each agency will provide an audit report for the Quality Audit and Performance (QA&P) sub group	Agency member of QA&P sub group / sub group chair		People receive personalised care, which is delivered in partnership.	March 2016	Green on track
9. CSAB request an update report from NHS England on progress on ensuring the proactive contribution of GPs in the development of multi-agency care plans and review of patients discharged from hospital.	Overview Report	Request report from NHS England GP representative, to be considered at full Board	Board Manager/ SAR Coordinator		Board are assured, or able to take corrective action to ensure that, the role of the GP in relation to care planning for patients on discharge from hospital is clear.	January 2016	Green on track

<p>10. CSAB should be assured that the hospital discharge procedures include guidance on:-</p> <ul style="list-style-type: none"> - factors which should trigger screening for post discharge support; <p>the inclusion of all relevant information in discharge summaries, including clear prompts for community professionals on follow up action where there are any outstanding test results;</p> <ul style="list-style-type: none"> - the importance of proactive liaison between the hospital, community services and 	<p>Overview Report</p>	<p>Request report from CCG, UHCW, CCC and CWPT on effective hospital discharge to be considered at full Board</p>	<p>Board Manager/ SAR Coordinator</p>		<p>Board are assured, or able to take corrective action to ensure that, hospital discharge is effective and person centred.</p>	<p>January 2016</p>	<p>Green on track</p>
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