	Area	Actions	Target Date	Comments in supplementary audit response provided in 2021	Progress	Updated target date/completion
1.	Safeguarding Policy and Procedure (update and content)	Ensure the Policy clearly states how frequently it should be reviewed, circumstances for review outside of the normal review cycle and who is responsible for the review and for approving it Include a version control table for the document showing the version number, when the review took place, who undertook it, when was it approved, by whom, what amendments have been made and when the next review is due Ensure the policy is in a more focused, streamlined and summarised form.	June 2022	The full audit report recognises and comments on how comprehensive the policy is and provides reassurance that our current policy is detailed, relevant and reflects current legislation. It also acknowledges that there are clear and detailed processes for identifying and reporting concerns. The report recognises the usefulness of the quick guides developed in 2020 to address the immediate need already identified, for the policy to be more accessible. The summary of key findings does not appear to	Forward plan item for new Policy approval scheduled: EAB 6 Feb 23 Executive 16 March 23 Draft Policy in progress Draft Procedure complete and being reviewed by enablers Recommendation already in corporate policy guidance Draft policy includes recommendation Draft Policy in progress following new corporate policy guidance structure Separate procedure draft makes information accessible	Quick Guides reviewed, updated, and published on Intranet March 2022 and August 2022 All policy recommendations incorporated in draft policy and procedure Full policy and procedure adoption in Forward Plan scheduled for March 23

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			acknowledge that the policy is meeting its aims.	Quick guides updated and published on intranet	
	Clarify governance structure around Safeguarding in place at the Council as well as interactions with Surrey County bodies and align this with the Terms of Reference for the relevant groups. Include elements regarding where and how to store the relevant documentation for each safeguarding		The draft safeguarding action plan has prioritised a review of the policy to improve accessibility. The high-level review and update of the safeguarding policy in 2020 during the pandemic was done in consultation with the Lead Councillor for safeguarding. This approach was approved in the Exec report that	Terms of Reference updated to be appendix in policy New referral document storage process Included in draft procedure with updated process	
	concern raised, who and how should follow up on the concerns raised. Update and provide clarity over the roles and responsibilities of individuals when it comes to safeguarding.		approved the policy in 2018. The Council's wider policy and governance framework is an area that has been addressed through Future Guildford by the creation of a Strategy and Comms team whose responsibility it is to improve that framework. Work is underway to	Embedded in Corporate induction Embedded through Operational Safeguarding Group Review and update included in draft policy	

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				standardise all policies to ensure they have version control. ownership, review dates etc.		
				Similarly, the governance framework around Safeguarding (Strategic Group and Operational Group) are not yet reflected in the policy as they have only recently been created. They will be included in the review of the policy in the governance section.		
2.	Draft Strategic Action Plan	Ensure the objectives included in the draft action plan are SMART Ensure that the plan is updated to address internal audit actions Clearly capture the date when the action has been added to the plan, the stages it is expected to go through, what progress has been made,	April 2022	Agreed – acknowledging the action plan is draft and needs ownership from the Strategic Safeguarding Group. We requested that audit recommendations provide content to be able to inform the action plan. The Strategic Safeguarding Group will review this task.	Updated Updated where relevant and not repeated Updated	Completed amends Review for each meeting

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3. Staff training	when was it last updated and the expected implementation date. Regularly monitor the progress of the actions at all Strategic and/or Operational group meetings. Spread responsibility for the implementation of the actions included in the plan across all the members of the Strategic Group in a balanced manner as far as possible. A clear, consistent, and transparent Council wide standard should be	April 2022	The draft action plan has prioritised the need for a training audit, review of	In progress In progress After the departure of the OD manager in Spring 2022, a training	Completion of audit Dec 22
	developed stating the training level required for each role and mentioned in the job description		the corporate training programme and a central recording system.	audit has been agreed and is in progress Training level guidance developed for audit aligned to Surrey Safeguarding Boards training pathway that specifies which Safeguarding training	Analysis of audit Jan 23 Outcomes of audit action plan implemented Feb 23 onwards

Area	Actions	Target Date	Comments in supplementary audit response provided in 2021	Progress	Updated target date/completion
				items are required in which role level	
				HR have advised Job Descriptions are purposefully high level and do not contain this detail. A standard Safeguarding statement has been included in all JD's. This approach to JDs is unlikely to change. Exploring the possibility of adding safeguarding levels to individual job descriptions	
	A comprehensive schedule with training sessions for each of the various levels required at the Council should be developed and adhered to.			Existing pathways in place through Corporate Induction and Surrey Safeguarding Children's Partnership and Surrey Safeguarding Adults Board. These are explicit in draft Policy and will be communicated through training	Full policy and procedure adoption in Forward Plan scheduled for March 23

	Area	Actions	Target Date	Comments in supplementary audit response provided in 2021	Progress	Updated target date/completion
		Refresh sessions and			Existing refresher	Full policy and
		refresh periodicity			training schedule in	procedure
		should be agreed and			pathway documents for	adoption in
		adhered to ensuring the			safeguarding training	Forward Plan
		relevant information is			reinforced in draft policy	scheduled for
		up to date.				March 23
		•			Introduction of	
					induction refresher	Revised induction
					schedule in progress	training
					through audit process	programme
						delivery start April
						23 with launch of
						policy
		Adherence to the			Individual participation	Full policy and
		training requirements			in specialised training is	procedure
		and time frames should			already recorded in	adoption in
		be captured in employee			safeguarding training	Forward Plan
		training records,			records held by the	scheduled for
		monitored and enforced			safeguarding board.	March 23
		by and reported on			Responsibility for	
					managers to monitor in	
					staff development and	
					121's set out in policy	
					Recording of corporate	
					induction recorded in	
					staff files already	
4.	Recording	Define a clear and	July 2022	The draft action plan has	Operational	Interim procedures
	safeguarding	consistent way across		prioritised the need to	Safeguarding group	in delivery.
	referrals	the Council in which		address a central recording	created to include	

safeguarding concerns should be recorded stating; how, what documents would be acceptable, where should the case be recorded and tracked, where should the documentation and subsequent communication be stored, who should have visibility and how to restrict access only to relevant people. Communicate the new process to all staff, promote awareness and consistent application. Safeguarding monitoring are system for referrals across the council. Teams area created to store all documentation, access limited to members of the group. Safeguarding monitoring form created for members to complete. Spreadsheet created as a record of all referrals. All live referrals are visibility and how to restrict access only to relevant people. Communicate the new process to all staff, promote awareness and consistent application. Safeguarding monitoring form created for members to complete. Spreadsheet created as a record of all referrals. All live referrals reviewed and RAG rated by Operational group. New procedure for referrals communicated through Operational Safeguarding Group and included in draft policy and procedure Continue to review and procedure for referrals communicated through Operational Safeguarding Group and included in draft policy and procedure Continue to review and procedure for referrals communicated through Operational Safeguarding Group and included in draft policy and procedure Continue to review and procedure for referrals communicated through Operational Safeguarding Group and included in draft policy and procedure Continue to review and procedure for referrals communicated through Operational Safeguarding Group and included in draft policy and procedure for required to develop, cost to develop and time to implement.

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5.	Safeguarding groups	Clarify for each of the governance bodies what are members' responsibilities	April 2022	No further response	Complete- Terms of reference already exist	Completed prior to audit
		Clarify the inputs each group will use from the wider organisation and what outputs they are expected to produce for wider reporting as well as the form and frequency of communication to and from them.			Terms of reference already exist. Operational Safeguarding meeting held every 5 weeks. All live referrals discussed, and RAG rating reviewed with owner of referral. Closed cases moved to another tab in the spreadsheet. Any information from other groups shared with attendees at meeting. Strategic Safeguarding Group to be reestablished quarterly following Joint Management implementation	TofR for both groups and reporting to be incorporated in Policy
		Communicate and raise awareness regarding			Complete-Incorporated in Corproate Induction	
		what each of the two				

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		groups does among staff. Set out a clear calendar of meetings and establish how their activity will be evidenced and set out clear KPIs to measure and monitor the activity of the groups. Agree and implement a			Established in Terms of Reference	Continue to deliver scheduled meetings
		regular structure for how CMT will receive twice-yearly updates on Safeguarding.			policy following approval	Policy and commence reporting
6.	Sharing Best Practices and lessons learned	Formal case reviews should be undertaken as a regular part of reporting to detail valuable lessons and best practices for each concern raised.	April 2022	The county safeguarding boards have a statutory responsibility to compile and disseminate national and local learning. This resource is available through the boards and	All referrals discussed with whole group at meetings to aid continuous learning. Head of Service oversight of cases that are raised directly	Continue Operational Safeguarding Group referral reviews
		The best practices and lessons learned should be communicated to the wider staff groups with safeguarding responsibilities.		should be referenced as the primary content to share with the Operational Safeguarding group.	As above and additional use of Safeguarding Teams channels to provide updates, shared learning and changes to guidance being delivered	Continue to use Teams communication channels