

Safeguarding KPMG audit action plan update December 2022

Area	Actions	Target Date	Comments in supplementary audit response provided in 2021	Progress December 2022	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	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.	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	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
	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		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.	Recommendation already in corporate policy guidance Draft policy includes recommendation	
	Ensure the policy is in a more focused, streamlined and summarised form.		The summary of key findings does not appear to	Draft Policy in progress following new corporate policy guidance structure Separate procedure draft makes information accessible	

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	<p>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.</p> <p>Include elements regarding where and how to store the relevant documentation for each safeguarding concern raised, who and how should follow up on the concerns raised.</p> <p>Update and provide clarity over the roles and responsibilities of individuals when it comes to safeguarding.</p>		<p>acknowledge that the policy is meeting its aims.</p> <p>The draft safeguarding action plan has prioritised a review of the policy to improve accessibility.</p> <p>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 approved the policy in 2018.</p> <p>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</p>	<p>Quick guides updated and published on intranet</p> <p>Terms of Reference updated to be appendix in policy</p> <p>New referral document storage process Included in draft procedure with updated process</p> <p>Embedded in draft policy Roll out of policy comms provide further embedding and awareness Embedded through Operational Safeguarding Group Review and update</p>	

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			<p>standardise all policies to ensure they have version control. ownership, review dates etc.</p> <p>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.</p>		
<p>2. Draft Strategic Action Plan</p>	<p>Ensure the objectives included in the draft action plan are SMART</p> <p>Ensure that the plan is updated to address internal audit actions</p> <p>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,</p>	<p>April 2022</p>	<p>Agreed – acknowledging the action plan is draft and needs ownership from the Strategic Safeguarding Group.</p> <p>We requested that audit recommendations provide content to be able to inform the action plan. The Strategic Safeguarding Group will review this task.</p>	<p>Latest update Dec 22</p> <p>Latest update Dec 22 where relevant and not repeated</p> <p>Latest update Dec 22 where relevant and not repeated</p>	<p>Completed amends Review for each meeting</p>

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	<p>when was it last updated and the expected implementation date.</p> <p>Regularly monitor the progress of the actions at all Strategic and/or Operational group meetings.</p> <p>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.</p>			<p>Ongoing</p> <p>Ongoing</p>	
<p>3. Staff training</p>	<p>A clear, consistent, and transparent Council wide standard should be developed stating the training level required for each role and mentioned in the job description</p>	<p>April 2022</p>	<p>The draft action plan has prioritised the need for a training audit, review of the corporate training programme and a central recording system.</p>	<p>Training level guidance developed for audit aligned to Surrey Safeguarding board’s training pathways that specifies which Safeguarding training items are required in which role level</p> <p>HR have advised Job Descriptions are purposefully high level and do not contain this</p>	<p>Completion of audit Jan 2023</p> <p>Analysis of audit Feb 2023</p> <p>Outcomes of audit action plan to roll out training implemented April 23 onwards</p>

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				<p>detail. A standard Safeguarding statement has been included in all JD's. This approach to JDs is unlikely to change.</p> <p>Exploring the possibility of adding safeguarding levels to individual job descriptions</p>	
	<p>A comprehensive schedule with training sessions for each of the various levels required at the Council should be developed and adhered to.</p>			<p>Pathways aligned to training needs These are explicit in draft Policy and will be communicated through training</p>	<p>Full policy and procedure adoption in Forward Plan scheduled for March 23</p>
	<p>Refresh sessions and refresh periodicity should be agreed and adhered to ensuring the relevant information is up to date.</p>			<p>Pathway documents for safeguarding training reinforced in draft policy</p> <p>New training programme for all levels agreed – roll out April 2023 onwards</p>	<p>Full policy and procedure adoption in Forward Plan scheduled for March 23</p> <p>Revised training programme delivery start April</p>

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	Adherence to the training requirements and time frames should be captured in employee training records, monitored and enforced by and reported on			<p>Individual participation in specialised training is already recorded in safeguarding training records held by the safeguarding board. Responsibility for managers to monitor in staff development and 121's set out in policy.</p> <p>Recording of corporate induction recorded in staff files already.</p> <p>A proportionate approach to reporting training will need to be adopted for in house delivery only.</p>	<p>23 with launch of policy</p> <p>Full policy and procedure adoption in Forward Plan scheduled for March 23-responsibilities on monitoring and recording training</p>
4. Recording safeguarding referrals	Define a clear and consistent way across the Council in which safeguarding concerns should be recorded stating: how, what documents would be acceptable, where	July 2022	<p>The draft action plan has prioritised the need to address a central recording system for referrals across the organisation.</p> <p>It should be acknowledged that there is likely to be an</p>	Operational Safeguarding group created to include representatives from all areas of the Council. Teams area created to store all documentation,	<p>Interim procedures in delivery.</p> <p>ECINS capability/ exploration target April 23 dependent on ECINS support availability</p>

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	<p>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.</p> <p>Communicate the new process to all staff, promote awareness and consistent application.</p>		<p>IT solution required for this. Multi system use across the Council issues recognised. This has been the barrier to this being achieved before.</p> <p>Resource is required to define the processes, specification for a fit for purpose solution. The IT solution needs to meet all the accessibility, confidentiality and usability requirements and be corporately aligned (possible use of Salesforce new CRM or ECINS community safety case management). Resource required to develop, cost to develop and time to implement.</p>	<p>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 reviewed and RAG rated by Operational group.</p> <p>New procedure for referrals communicated through Operational Safeguarding Group and included in draft policy and procedure</p>	<p style="background-color: yellow;">[Empty]</p> <p style="background-color: #90EE90;">Continue to review and update as needed</p> <p style="background-color: #90EE90;">Scoping of new case management system in SSG 23-24 action plan</p>
<p>5. Safeguarding groups</p>	<p>Clarify for each of the governance bodies what are members' responsibilities</p>	<p>April 2022</p>	<p>No further response</p>	<p>Complete- Terms of reference already exist</p>	<p style="background-color: #90EE90;">Completed prior to audit Updated Dec 22 Appendix of policy</p>

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	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 re-established quarterly following Joint Management implementation	TofR for both groups appendix in Policy
	Communicate and raise awareness regarding what each of the two groups does among staff.			Complete-Incorporated in Corporate Induction	Appendix in Policy
	Set out a clear calendar of meetings and establish how their			Established in Terms of Reference	Continue to deliver scheduled meetings

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	activity will be evidenced and set out clear KPIs to measure and monitor the activity of the groups.				
	Agree and implement a regular structure for how CMT will receive twice-yearly updates on Safeguarding.			6 monthly reporting set out in policy following approval	Launch of new 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 should be referenced as the primary content to share with the Operational Safeguarding group.	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.			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