

# Safeguarding Service Annual Assurance Report – 2016/2017



Agenda Item No: 10.5.1



SCR/DHR/SAR GROUP ACTION LOG – 07.09.17

Please update your actions below – for details refer to Action Plan

CATEGORY	CASE	ITEM NO.	ACCOUNTABLE OFFICER	BRIEF DETAIL	UPDATE
SCR	RK	1	CW	26.05.17-CW to chase to ensure they have a robust system in place to inform GP's of DNA's for Imms. CW has sent an email.	10.08.17-DNA Policy OP101 was approved in June 2017 and sent to the intranet for uploading. Communication of All-User Bulletin attached on Action Plan.  <b>ACTION CLOSED 10.08.17</b>
SCR	CHILD F	1 2 3	AH	Guideline re non-mobile children presenting to ED. 23.06.17-AH to contact Lisa Kehler	07.09.17-Email sent to JH for update  10.08.17-Information on the front of the ED attendance sheet being reviewed. JH to update the next meeting.
SCR	CHILD F	7	AH	Enquire if self discharge policy is covered at ED Nurse Induction Training 23.06.17-AH to contact JH to clarify the above and then email Helen Nevett as necessary.	11.09.17-Response from Helen Nevett via AH advising that Helen does not deliver anything regarding self-discharge policy and she doesn't think it is mentioned when the paed's awareness session is delivered. Helen will forward AH's email to the Band 7 who over sees paed's. AH will provide a further update when received.  07.09.17-Email sent to JH for update  10.08.17-AH to email Helen Nevett to inform this is a recommendation and needs to be included in the ED Nurse Study Day.  Doctors induction is currently being reviewed. <b>ACTION: to have confirmation that this is included on doctors induction (JH)</b>
SCR	CHILD F	8	Julie Plant is providing updates on progress of DNA Policy	To disseminate information and improve awareness of children DNA policy - If a child is not brought to an appointment then Trust DNA policy for children should be followed. 23.06.17-LW emailed J.Plant for a progress update.	10.08.17-DNA Policy OP101 was approved in June 2017 and sent to the intranet for uploading. Communication of All-User Bulletin attached on Action Plan.  <b>ACTION CLOSED 10.08.17</b>

SAR	RP	2	CW	Raise with individual ED doctor who assessed on 14/01/15 to address any shortfalls in competency around history taking. <b>13.02.17-CW to chase progress via Head of Deanery.</b>	<b>07.09.17-EW emailed CW, cc. FP</b>  23.08.17-EW emailed CW to chase update  10.08.17-no update, to chase CW
SAR	RP	3	CW	<b>21.03.17-CW to take photo of noticeboard for evidence</b>	<b>10.08.17-JH to check datix to see if this is a SUI action. JH to provide an update for the next meeting, to send to LW.</b>
SAR	KS		EW	<b>Action for RWT:</b> confirm the substance of the letter from the fracture clinic to the GP. Did they identify that KS still had a cast on her leg or was it just a generic letter? Do we need to look at the letters? 26.05.17-EW to discuss with JH	<b>10.08.17-established that the discharge letter was generic and did not identify that patient still had cast in situ. JH agreed to contact the doctor who wrote the letter.</b>
SAR Initial information is being gathered	A-DM			14.12.16-Lady who is under the care of mental health services. She set fire to her trousers in ED sustaining small but significant burns isolated to her ankle.  <b>10.08.17-following presentation of RCA to committee, decision has been that all agencies scope last 12 months involvement with patient. To take back to next committee for table top discussion.</b>	

SAR	EE (NF)			<p><b>10.08.17-discussed the need for assurances against actions. Case dating back 2008. Paula Morris tasked to find details of the case.</b></p> <p><b>10.08.17-EW to identify what RWT have on file.</b></p>	
SAR recommended, awaiting decision from Independent Chair	CS			<p>Young lady under the care of mental health service who committed suicide. Had recently given birth.</p> <p><b>10.08.17-EW to scope RWT involvement.</b></p>	
SAR recommended, awaiting decision from Independent Chair	SCW			<p>Gentlemen under the care of mental health services who committed suicide. Recent discharge from New Cross Hospital.</p> <p><b>10.08.17-EW to scope RWT involvement.</b></p>	
DHR	DHR03		FP	<p>Review of standing operating procedures related to DV in midwifery and HV services.</p> <p><b>23.06.17-FP to clarify what actions are required from Kathy Cole-Evans</b></p>	<p><b>10.08.17-SOP related to DV in Midwifery and HV Services is incorporated in the OP108 Domestic Abuse Policy – embedded in Action Plan.</b></p> <p><b>ACTION CLOSED 10.08.17</b></p>
CURRENT ACTION PLAN	JR-N <b>RCA investigation STEIS 2016/30285 (Datix 168456)</b>		CW	<p>23.06.17-CW to confirm sign off of RCA.</p>	<p><b>10.08.17-RCA signed off on 20.06.17</b></p> <p><b>RCA investigation as STEIS 2016/30285 (Datix 168456)</b></p> <p><b>RWT IMR completed and signed off. Final draft of report circulated – awaiting date of publication.</b></p>
