

Provider S42 Enquiry Process

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| 1 | Team receives a safeguarding concern |
| 2 | Initial information gathering |
| 3 | Meets the threshold for a S 42 Enquiry and appropriate for provider to undertake the enquiry (single agency enquiry) |
| 4 | Discussion with Care Standards team and social work team, ELFT safeguarding lead, or hospital safeguarding lead to discuss if any concerns about the provider undertaking the enquiry. If there are concerns a discussion must be held and decision made as to whether appropriate/safe to ask provider to undertake the enquiry |
| 5 | If no issues and agreed appropriate for provider to undertake the Enquiry, the safeguarding team practitioner will have a discussion with provider/agency about undertaking the enquiry, agree template/ format of enquiry, expectations of enquiry and time scales (up to 28 days, less if non-complex enquiry) |
| 6 | DMT completed and forwarded to provider with recommendations/actions |
| 7 | Safeguarding Team Administrator copied into DMT so can input onto Provider S 42 Tracker spreadsheet |
| 8 | Safeguarding Team Administrator monitors spreadsheet to ensure completed enquires are received by the safeguarding team within time scales. If not received the agency is contacted. Any issues escalated to Safeguarding Advanced Practitioners |
| 9 | Safeguarding Enquiry Report received by team and acknowledged and inputted onto tracker spreadsheet |
| 10 | Audit of Enquiry undertaken jointly by Safeguarding Advanced practitioner and manager/advanced practitioner from relevant team. Audit report to ensure report has addressed issues and is of good enough quality, and Enquiry report graded as Excellent, Good, Adequate, or Poor. Audit to be completed within 2 weeks of team receiving report. |
| 11 | Where clinical knowledge/oversight is required, input and oversight from the CCG safeguarding Lead nurse will be requested |
| 12 | If report is satisfactory, feedback given to the provider who has undertaken the report |
| 13 | Team administrator/support worker attaches to SWIFT, closes down enquiry and inputs the outcomes and S 42 Enquiry completed |
| 14 | If the report has not addressed issues or not of good enough quality, advanced practitioner discusses issues with the provider and agrees remedial action and agrees new date for completion (usually another 2 weeks. Team administrator advised of new date |
| 15 | S 42 Enquiry Report re submitted |
| 16 | Advanced practitioner and relevant team manager/advanced practitioner relooks at report to ensure they are satisfied, feedback given to provider that Enquiry is now completed. If still issues with Enquiry, discussion between safeguarding team and relevant social work team as to what action to take, such as requesting provider include more information/amend report, relevant team takes over the Enquiry, relevant team works jointly with provider, further specific advice given to provider to be able to complete Enquiry Report. Further extension agreed, Safeguarding Administrator informed and tracker spreadsheet updated. |
| 17 | If Enquiry Report still unsatisfactory, the Local Authority takes over responsibility for the completion of the report and if appropriate completes a QA form to the Care Standards team highlighting the issues. |
| 18 | Team administrator/support worker attaches to SWIFT, closes down enquiry and inputs the outcomes and S 42 Providers Enquiry completed. |