# Template 2 Adult Practice Review Report

### **Adult Practice Review Report**

(insert name) Safeguarding Adults Board

Concise/ Extended (delete as appropriate) Adult Practice Review

Re: insert numerical case identifier xx Board 1/17

#### Brief outline of circumstances resulting in the Review

To include here: -

- Legal context from guidance in relation to which review is being undertaken.
- Circumstances resulting in the review.
- Time period reviewed and why.
- Summary timeline of significant events to be added as an annex.

An ... review was commissioned by ... Board on the recommendation of the Adult Practice Review Sub-Group in accordance with the Guidance for Adult Practice Reviews. The criteria for this review are met under *x*:

(a succinct anonymised account of the circumstances which required a review to be held by the Board)

## Practice and organisational learning

Identify each individual <u>learning point</u> arising in this case (including highlighting <u>effective</u> <u>practice)</u> accompanied by a brief outline of the <u>relevant circumstances</u>

(Relevant circumstances supporting each learning point may be informed by what was learned from the family's contact with different services, the perspective of practitioners and their assessments and action taken, family members' perspectives, evidence about practice and its impact, contextual factors and challenges)

17 These are based on the year an APR  $\underline{\text{began}}$ . So, for example, the first APR undertaken by CYSUR safeguarding Board next year will be (CYSUR 1/2017)

Improving Systems and Practice
In order to promote learning from this case the review identified the following actions for the Board and its member agencies and anticipated improvement outcomes:-

(what needs to be done differently in the future and how this will improve future practice and systems to support practice)

Statement by Reviewer(s)				
REVIEWER 1	REVIEWER 2 (as appropriate)			
Statement of independence from the case Quality Assurance statement of qualification I make the following statement that prior to my involvement with this learning	Statement of independence from the case Quality Assurance statement of qualification			
<ul> <li>I have not been directly concerned with the individual or family, nor have I given professional advice on the case.</li> <li>I have had no immediate line management of the practitioner(s) involved.</li> <li>I have the appropriate recognised qualifications, knowledge and experience and training to undertake the review.</li> <li>The review was conducted appropriately and was rigorous in its analysis and evaluation of the issues as set out in the Terms of Reference.</li> </ul>	<ul> <li>I have not been directly concerned with the individual or family, nor have I given professional advice on the case</li> <li>I have had no immediate line management of the practitioner(s) involved.</li> <li>I have the appropriate recognised qualifications, knowledge and experience and training to undertake the review.</li> <li>The review was conducted appropriately and was rigorous in its analysis and evaluation of the issues as set out in the Terms of Reference.</li> </ul>			
Reviewer 1 (Signature)	Reviewer 2 (Signature)			
Name (Print)	Name (Print)			
Date	Date			

Chair of Review Panel (Signature)				
,				
Name (Print)		•••••		
,				
Date				
Appendix 1: Terms of reference Appendix 2: Summary timeline				
Adult Practice Review process				
To include here in brief:				
The process followed by the Board and the services represented on the Review Panel.				
A learning event was held and the services that attended.				
Family members had been informed, their views sought and represented throughout the learning event and feedback had been provided to them.				
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Family declined involvement				
For Welsh Government use only  Date information received				
Data calmandadamant lattar cant to Danid Chair				
Date acknowledgment letter sent to Board Chair				
Date circulated to relevant inspectorates/Policy Leads				
Agencies	Yes	No	Reason	
CSSIW				
Estyn				
HIW				
HMI Constabulary				
HMI Probation				