**Appendix Three**

**Record of Multi-Agency Outcome and Lessons Learned Meeting**

* This meeting is held under the guidance provided by the Darlington Safeguarding Partnership’s Executive Strategy Procedure
* The matters raised are **confidential** to the members of the meeting and the agencies

that they represent.

* Minutes of the meeting are distributed on the strict understanding that they will be kept confidential and in a secure place. These minutes must not be shared outside the meeting without the agreement of the Chair

**Please complete all sections of the form in as much detail as possible.**

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| --- | --- |
| **Name of Service Provider:** |       |
| **Initial Meeting Date:** |       |
| **Time:** |       |
| **Venue (if applicable):** |       |

**Xx**

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| **NAME** | **ORGANISATION** | **CONTACT DETAILS** | **INVITED** | **ATTENDED** | **APOLOGIES** | **NAMED CONTACT** | **DATE NOTES CIRCULATED** |
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| **SECTION 1: PURPOSE OF MEETING:** |
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| **SECTION 2: REVIEW OF MINUTES OF THE REVIEW MEETING**  |
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| **SECTION 3: FINALISATION OF IMPLEMENTATION OF THE MULTI-AGENCY ACTION PLAN/SERVICE IMPROVEMENT PLAN** |
| Are multi-agency members agreed that the Action Plan / Service Provider Improvement Plan addresses the risks identified and that the Executive Strategy Process may be concluded? |
| Yes | No | Note any disagreements: |  |
| Date the service was closed/no longer subject to Executive Strategy Process (if applicable) | Date: |

**XXXx**

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| **SECTION 4: IDENTIFICATION OF LESSONS LEARNED** |
| **Clarification of information to be shared with Darlington Safeguarding Partnership:*** **Follow up recommendations**
* **Follow up Action Plans (including timescales if applicable)**
* **Multi-Agency issues and considerations**
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**Xx**

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| **SECTION 5:** **CONFIRMATION OF WHERE RECORDS OF THE SERIOUS CONCERNS PROTOCOL ARE TO BE HELD** |
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| Agree the information to be recorded on individual case files/electronic records | Yes | No |

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| **SECTION 6: SIGNATURE** |
| **Signed By Chair:** | **Date:** |
| **Date forwarded to DSP Business Unit****DSP@Darlington.gov.uk** | **Date:** |