

## Richmond and Kingston LSCB Supervision and Appraisal Prompt.

Our local learning and improvement case reviews, quality assurance and safeguarding oversight have led to key areas to be considered individual multi agency supervision, one to ones, or appraisals.

Learning area:	This learning comes from:	Questions:
		Do we know the key local learning from case reviews?
<b>Ethnicity, diversity – impact on parenting;</b>  <b>Safe sleeping;</b>  <b>Care of young / disabled children when unwell / not at home.</b>	Child B – Kingston LSCB CDOP Kingston DHR 2014.  Family A – Kingston LSCB	What are the diversity issues in this family? What is the impact on parenting?  What does their family history tell us?  Does this family understand emergency health procedures?
<b>Domestic Abuse</b>	Kingston DHR 2014.	DSV training attended? Are managers attending this training? Risk assessment? Quality of MARAC referrals.
<b>Reflection &amp; risk assessment</b>	Child H – Richmond LSCB.  Family A -Kingston LSCB.	How does this look from an objective perspective?  Are we sharing risk?  Is there resistance? Why or why not?  What does this child / adult’s behaviour tell us together with their verbal wishes?  What about observations of non-verbal children / adults?
<b>Thinking the Unthinkable</b>	Child H – Richmond LSCB.	Are there online safety issues?

	<p>Family L –Kingston LSCB.</p> <p>Family A – Kingston LSCB</p> <p>Child K – Kingston LSCB</p>	<p>Do we know all the people / partners / friends involved in household etc?</p> <p>CSE risks?</p> <p>Neglect?</p>
<b>Communication</b>	<p>Child H – Richmond LSCB.</p> <p>Child K – Kingston LSCB.</p>	<p>Are all agencies part of the core group, strategy meeting, LAC review, CiN meeting, EHA?</p> <p>Does the parent / carer/child need an advocate?</p> <p>Are we communicating changes?</p> <p>Who is working with the adults?</p> <p>Are all strategic groups aware – MARAC, MAPPA, etc?</p> <p>Any needs for escalation and resolution between agencies?</p>