# RECORDING TEMPLATE FOR ESCALATION/CONFLICT RESOLUTION PROCEDURE

The recording template for Escalation and Conflict Resolution procedure (see Page 9) is optional but for audit purposes or for Managers dealing with escalations, it would be a useful tool for ensuring consistency of different parties’ records. More important is that records indicate the key headings as follow:

1. Case name or PID number OR NHS Number
2. Names, agency and status of those making contact
3. Stage of escalation (1,2 3 or 4)
4. Type or nature of contact made – (whether or not it is a call, email, meeting etc.)
5. The issue or factors that are in dispute
6. Summary of the discussion
7. Actions and next steps agreed with decision made
8. Names and status of decision-makers
9. Dates of completion of each stage

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**NORTH EAST LINCOLNSHIRE SAFEGUARDING**

**Escalation Procedure Form**



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| --- | --- | --- | --- | --- | --- | --- |
| Case: | |  | | | | |
| Agency: | |  | | | | |
| Practitioner: | |  | | | | |
| Manger or Senior: | |  | | | | |
| Case details and issue to be resolved. In this box please provide details of:  a) the source of conflict, in what framework the conflict has arisen: E.g. referral, decision at a meeting, plan for a child/adult at risk, other (please specify)  b) the details and nature of the conflict: e.g. is this an agreement about the decision made by the other party, an assessment of risk, child care plan/adult safeguarding plan etc. | | | | | | |
| Please complete the boxes below dependent upon what stage the procedure is being used as per the guidance for completion | | | | | | |
| Stage: | Type of contact:  (telephone, meeting, email, other) | | Contact between: (relevant practitioners and line managers)  Names to be inserted | Summary of discussion | Outcome of discussion and further action agreed or next steps if appropriate | Date |
| 1. |  | |  |  |  |  |
| 2. |  | |  |  |  |  |
| 3. |  | |  |  |  |  |
| 4. |  | |  |  |  |  |