



Adult Social Care

Internal Management Review Policy

Version 1.1

Version: 1.1 FOI Status: Controlled	Derbyshire County Council Adult Social Care Internal Management Review Policy	Originally Issued: May 2003 V1.1 Issued: November 2023 Review due: November 2025 Author: Safeguarding, Quality and Compliance team
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If you would like to make any comments, amendments, additions etc. please email ASCH.AdultCare.Policy@derbyshire.gov.uk

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1. Introduction

An internal management review (IMR) is an **internal process** Adult Social Care (ASC) can use when there appears to be learning for the operational team or department or an opportunity to identify best practice.

The purpose of an IMR is to identify learning and implement actions to improve quality and/or safety. This learning is then cascaded to other relevant parties.

If other external agencies are involved, then the operational service manager needs to consider whether a [learning review](#) (if other agencies are involved) or a [safeguarding adult review](#) referral is required.

This document provides ASC colleagues with an overview of the IMR process and what to expect.

2. What is the purpose of an IMR?

An IMR should be used as a tool to help understand and analyse what has happened, review actions and the involvement of ASC colleagues, processes and systems which were in place prior to the incident, during and afterwards, to learn and improve.

Where there is an opportunity to learn to prevent a reoccurrence then an IMR is used, not to apportion blame, but to:

- find out where systems and practice have contributed to a poor outcome(s)
- identify what can be changed in those circumstances or situations to improve practice and decision making
- contribute to a more positive outcome for people who draw on care and support in the future
- consider sharing best practice to see if the work can be expanded to other areas

If there is a potential for conflict of interest, the group manager will allocate to another operational service manager to complete the IMR.

If a disciplinary matter is identified during the review for either an individual or group, then this should be addressed through the appropriate HR procedure.

3. Identifying the Need for an Internal Management Review

An IMR must be carried out following:

- a serious incident involving ASC
- a notifiable incident if learning is identified by a group manager or assistant director

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- departmental management team (DMT) or group manager request

The types of incidents which are considered to be notifiable are:

- unexpected adult death
- unexpected child death
- child or adult missing from home or service provision
- issue/incident that is likely to attract media attention
- missing adult who draws on care and support
- life threatening accident/incident notifiable to the Health and Safety Executive (HSE)
- high profile case or prosecution in court
- all large-scale adult safeguarding investigations
- adult cases referred to the coroner
- suspected suicide
- suspected homicide

An IMR can be triggered if it is identified that learning is required from:

- **best practice** – to share across other service areas or departments for learning and development
- **Local Government Social Care Ombudsman (LGSCO) decision**
- **complaint or enquiry investigation** - where learning has been identified
- **any employee** - may discuss and raise concerns with their line manager and ask for consideration of an IMR or seek agreement to initiate one

4. IMR Report

The IMR report to be completed within a timely manner, refer to [IMR Practice Guidance](#).

5. Action Plan and Closing Summary

An action plan and closing summary must be created on the specified format available in the practice guidance.

Support can be obtained from:

- safeguarding quality assurance and development team (SQuAD) for safeguarding concerns
- quality and compliance team (Direct Care services only)
- appropriate manager depending on the subject

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6. Learning and Outcomes

Each IMR will be collated centrally by the quality team and forward to the group manager for quality & compliance & group manager for safeguarding quality assurance.

The lead group manager of the service area is responsible for ensuring learning is shared across the relevant services. They must sign off the IMR once all actions and closing summary has been completed ([Appendix C](#)).

Approval and Authorisation History

Approval and Authorisation History

Name	Date
Approved by Safeguarding, Quality and Compliance Team	May 2023
Approved by DMT	May 2023

Change History

Version	Date	Name	Reason
Version 1	May 2023	Safeguarding, Quality and Compliance team	New policy
Version 1.1	November 2023	Safeguarding, Quality and Compliance team	Minor updates