**Quality Audit Findings**

Provider: Audit Date:

Address:

Provider representatives present:

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| **Referrals and Allocations****Measure 1 – Measure 8** |
| Key Findings: Recommendations: |
| **Safeguarding and Risk Managements****Measure 9 – Measure 13**  |
| Key Findings: Recommendations: |
| Support Provisions14 -22  |
| Key Findings: Recommendations: |
| Tackling AbtiSocial Behaviour Measure 23 -25  |
| Key Findings: Recommendations: |
| Health and Safety (If any other Enforcement outcomes are required, this will be sent separate) Measure 26 - 41 |
| Key Findings: Recommendations: |
| Appropriately skilled and resourced workforceMeasure 42-49  |
| Key Findings: Recommendations: |
| Value For Money – Housing Benefit |
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| Supported Exempt Accom Officer |  |  |
| Quality Officer – Exempt Accom |  |  |
| Principal Environmental Housing Officer |  |  |