Croydon, Health, Wellbeing and Adults Case File Audit Programme

This audit programme is designed to provide a broad focus on standards and compliance, as well as the quality of social work practice and its impact on the adult who has care and support needs. These audits will take stock of our performance across all areas of social work intervention at regular intervals. They focus on the journey and experience of the adult through services, as well as the rationale for decisions being made on their behalf. They allow us to identify if the help that has been offered is planned, purposeful and undertaken in a timely manner. Crucially, these audits go beyond the marking of compliance, and seek to generate qualitative data about our practice, and the impact on the adult. This includes how the system and organisation supports good practice and where areas of development are highlighted. A cyclical culture of challenge and learning is therefore promoted.

Role	Quality Assurance Task	Type of Audit	Method	Purpose	Frequency	Outcomes
Corporate Director (DASS). Director of Adult Social Care Operations.	Audit of work with the person: Are records accurate and proportional? Is there a clear picture of who the person is? Are the adult's wishes and views clearly evidenced? Is there evidence of professional curiosity? Legal literacy and procedural competency and analysis? Is there evidence of risk assessment? Has a mental capacity or DOLs assessment taken place? Is it evidenced? Is there evidence of managerial oversight? Are any supervision outcomes recorded? Is there evidence of feedback to the referrer. Was the person asked for feedback?	Case file audit tool – LAS cases closed by practitioners in the previous six months.	Random allocation of closed social work/care manager cases from across teams – Performance Team data. Auditor to complete Case File Audit Tool (Produced in accordance with DASS PSW Network October 2022 recommendations) Audit includes all assessments, correspondence, documents, support plans, reviews on LAS.	To highlight areas of good practice, and development needs. To identify individual and departmental learning and development needs. To drive the continuing improvement of strengths based professional practice and service delivery across the department.	Monthly starting from September 2023	Feedback meeting: Auditors to check with supervisors/team manager before arranging. Feedback - highlight good practice and areas for learning, reflection, and next steps. Supervisors follow up. Audit added to LAS. Audits collated & analysed by the QA Group. Moderation Panel: Shared understanding of what looks good – cases graded inadequate, disputed, or outstanding, and random selection. Recommendation to take 10% of cases plus any cases presented to the panel. Quarterly meeting with Learning & Development re: Discussing: Practice forums/bite sized training/ training offers. Quarterly Report to QA Board with recommendations. Annual report to DMT Board

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Social Care Operations: Heads of Service, Service Managers, Principal Social Worker. Are view Is th prof Legg proc and Is th asse Has DOL plac Is th mar any recc Is th	dit of work with the rson: e records accurate and opportional? there a clear picture of the person is? e the adult's wishes and twist clearly evidenced? there evidence of ofessional curiosity? gal literacy and ocedural competency of analysis? there evidence of risk tessment? ss a mental capacity or OLS assessment taken oce? Is it evidenced? there evidence of anagerial oversight? Are y supervision outcomes corded? there evidence of feedback the referrer. Was the rson asked for feedback?	Case file audit tool – LAS cases closed by practitioners in the previous six months.	Random allocation of closed social work/care manager cases from across teams – Performance Team data. Auditor to complete Case File Audit Tool (Produced in accordance with DASS PSW Network October 2022 recommendations) Audit includes all assessments, correspondence, documents, support plans, reviews on LAS.	To highlight areas of good practice, and development needs. To identify individual and departmental learning and development needs. To drive the continuing improvement of strengths based professional practice and service delivery across the department.	Monthly starting from September 2023	Feedback meeting: Auditors to check with supervisors/team manager before arranging. Feedback - highlight good practice and areas for learning, reflection, and next steps. Supervisors follow up. Audit added to LAS. Audits collated & analysed by the QA Group. Moderation Panel: Shared understanding of what looks good – cases graded inadequate, disputed, or outstanding, and random selection. Recommendation to take 10% of cases plus any cases presented to the panel. Quarterly meeting with Learning & Development re: Discussing: Practice forums/bite sized training/ training offers. Quarterly Report to QA Board with recommendations. Annual report to DMT Board

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Team Managers. Advanced Social Workers. Professional Standards Team	Audit of work with the person: Are records accurate and proportional? Is there a clear picture of who the person is? Are the adult's wishes and views clearly evidenced? Is there evidence of professional curiosity? Legal literacy and procedural competency and analysis? Is there evidence of risk assessment? Has a mental capacity or DOLs assessment taken place? Is it evidenced? Is there evidence of managerial oversight? Are any supervision outcomes recorded? Is there evidence of feedback to the referrer. Was the person asked for feedback?	Case file audit tool – LAS cases closed by practitioners in the previous six months.	Random allocation of closed social work/care manager cases from across teams – Performance Team data. Auditor to complete Case File Audit Tool (Produced in accordance with DASS PSW Network October 2022 recommendations) Audit includes all assessments, correspondence, documents, support plans, reviews on LAS.	To highlight areas of good practice, and development needs. To identify individual and departmental learning and development needs. To drive the continuing improvement of strengths based professional practice and service delivery across the department.	Monthly starting from September 2023	Feedback meeting: Auditors to check with supervisors/team manager before arranging. Feedback - highlight good practice and areas for learning, reflection, and next steps. Supervisors follow up. Audit added to LAS. Audits collated & analysed by the QA Group. Moderation Panel: Shared understanding of what looks good – cases graded inadequate, disputed, or outstanding, and random selection. Recommendation to take 10% of cases plus any cases presented to the panel. Quarterly meeting with Learning & Development re: Discussing: Practice forums/bite sized training/ training offers. Quarterly Report to QA Board with recommendations. Annual report to DMT Board
Team Manager/ Individual practitioner/ Supervising practitioners.	Case work, evidencing commitment to ethical practice through reflection on decision making, utilising feedback from adults in receipt of a service. Maintaining records to a good standard.	Case discussion, Peer support, reflective logs. Completion of workload log for supervision. Supervisor to audit a case file.	Supervision and Appraisal. Assessment of case recording. Supervision records. Feedback from adults who use our services. Regular individual case file audits with feedback to staff built into	Individual, team and service learning. Practitioner reflection, taking responsibility for own professional practice and impact on individuals. Identify strengths and areas for improvement. Identify any Continuing	Monthly supervision or more frequent if on an approved programme e.g., ASYE, AMHP, Social Care Practitioners or Practice Educator	Individual, team and service learning. Practitioner self- reflection, taking responsibility for own professional practice and impact on individuals. Identify strengths and areas for improvement. Highlight good practice. Identify any Continuing Professional Development (CPD) needs. Continuing Professional Development (CPD). Organisational learning.

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			supervision. Practitioner Forums. Appraisals monitored, linked to service and team plans with clear targets for individuals.	Professional Development (CPD) needs.	Training, regular audits. Every supervisee to have at least 2 case audits per year	
Professional Standards Team	Safeguarding and other work with adults – to cover all teams and practitioners. Additional themed audits for Mental Health Act assessment, social circumstances reports, carers assessments and deprivation of liberty safeguards (DoLS).	Themed audits as part of audit cycle. Link with Croydon Safeguarding Adults Board As requested by Head of Service/ Service Manager: Special Audits SAR audits Complaints Complex cases Requests from SMT or from other internal procedures that address statutes or regulations.	Professional Standards Team audit tool in accordance with DASS Principle Social Worker Network October 2022 recommendations Audit reports for Special Audits, SARs, Complaints and Complex cases.	To identify good practice and raise standards. To help drive performance, continuous improvement, and service delivery. To provide a key mechanism by which the SMT can hold teams to account for their performance, including assessments, risk management and safeguarding.	Quarterly	Quarterly Reports to Croydon Safeguarding Adults Board Attendance at CSAB, CSAB subgroups and QAB - Bite sized sessions to share lessons from case audits, SAR's - The implementation of Making Safeguarding Personal, and the Mental Capacity Act at a local level and its impact on engagement and outcomes. MCA self-audit tools