



---

# Quality Standards

---

## Quarter 3 Audit Report October to December 2023

---

Angelique Alevantis  
Adults Practice Improvement and Audit Lead  
Quality Assurance Team

---



## 1. INTRODUCTION

This report showcases the work of the Adults' quality assurance team for the third quarter of this year, incorporating audit analysis of 2 general audits in October and November 2023.

## 2. HIGHLIGHTS

- ❖ A Providers Service Survey across the 3 care homes was completed in September 2023. Overall, the arrangement and support provided by the 3 care homes in terms of keeping the residents safe, secured, comfortable, valued and listened to have been positive. Majority of the relatives said, they are kept informed about their loved one's health and wellbeing and are involved in decision about the care and support arrangement.
  - Areas that were highlighted as needing attention was around loneliness, where only 25% agreed this was being addressed and nearly 68% disagreed. Relatives have requested for the care homes to address these issues, through introducing different activities that are meaningful to their loves ones and get their loves one to engage. Providing regular updates such as sending pictures of the residents doing the activities, regular updates on the file on why the resident was not engaging in any activity etc to the relative as a means of keeping them informed would be helpful.
  - Another area highlighted was around the care home offering a choice of meals, catering to the dietary and cultural needs of the residents.

Please refer to the report attached for further information.



Providers services  
survey report 2023 -2

QA team will follow up with the care homes in a 3 months' time to see how the areas of concerns has been addressed and feedback will be provided in the next quarter report.

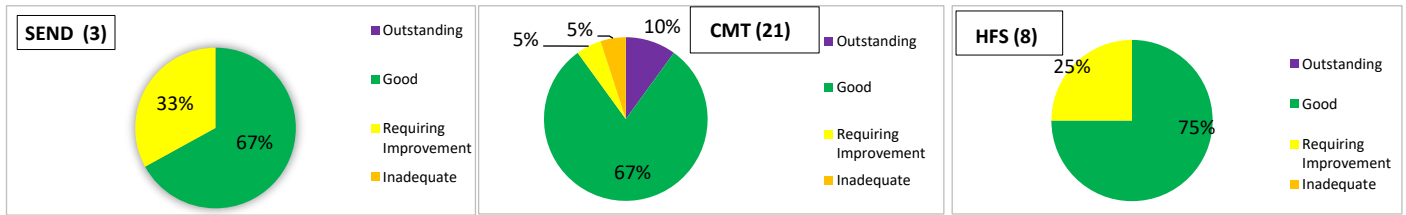
- ❖ A QA workshop was held in October 2023 on 'Community DoLS' which was well-attended by 22 practitioners. Feedback was practitioner found the presentation helpful and requested for a follow-up workshop on this theme and in particular, the forms practitioners need to complete in preparation for court.
- ❖ Following the audit findings from the 2 previous quarters, 3 practice forums were developed in collaboration with CART on MCA practice in October and November 2023. The session was on the importance of MCA and how to carry this out with service users, Mosaic forms and Best Interest process as well as complex MCA work including executive capacity and COP. QA also participated in a further practice forum on executive capacity with ACMT in December 2023.
- ❖ The audit grading guidance has been updated and rolled out in January 2024 audit cycle.
- ❖ As planned from the previous quarter, the feedback gathered from adults and families as part of the audit process is now shared with auditors earlier in the cycle to be included for discussion with practitioners, is incorporated in the audit template, when received, as well as shared with line managers at the end of the audit process.
- ❖ Compliance with Audit process: there was a slight improvement from 71% compliance in the last quarter to 77% in this quarter.
- ❖ The second cycle of Audit Moderation took place in this quarter for senior managers to discuss audit findings and look at consistent grading and audit practice. Out of the 8 moderation audits assigned, we have only received 4 reports and the findings will be included in the next quarter's report.

## 3. ASC AUDIT ANALYSIS OVERVIEW

In this third quarter, we carried out general audit cycles in October and November 2023 which included the following teams: ACMT, Review, CLDS, SEND, CART and HART.

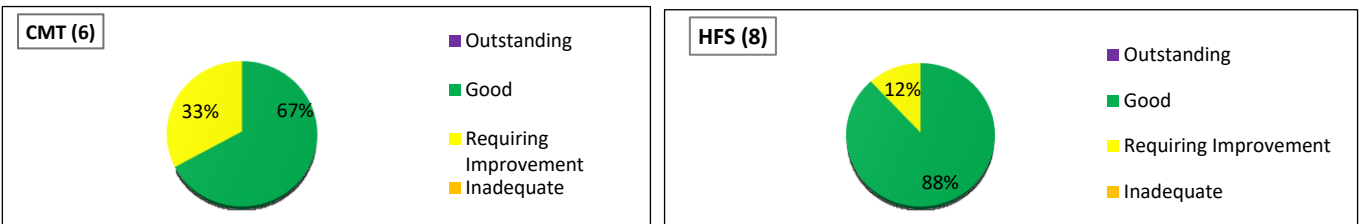
- ❖ ASC (29 audits): Overall, across CMT and HFS, 7% (2 audits) were graded outstanding, 79% (23 audits) were graded good, 10% (3 audits) graded requires improvement and 4% (1 audit) was graded inadequate.
- ❖ Care Management Teams (21 audits): In this audit cycle, 2 audits were graded outstanding, 17 audits were graded good, 1 requires improvement and 1 inadequate. (Last audit cycle 4 audits were graded good and 2 requires improvement).

- ❖ Home First Service: (8 audits): In this audit cycle, 6 audits were graded good and 2 were graded requires improvement. (Last audit cycle 7 audits were graded good and 1 was graded requires improvement).
- ❖ Overall audit compliance in ASC (excludes MASH & re-audits) was 70% in this quarter. This is a significant increase from last quarter when overall audit compliance was 55%.



Comparison with last quarter: Please note, the previous quarter included various strands of work and only 1 cycle of audits in addition to the themed audit. As a result, a comparison between quarters is not like for like.

Last quarter's overall grading was as follows:



#### 4. FEEDBACK FROM ADULTS OR THEIR FAMILIES

In this quarter, feedback was received from 12 people (Supported by CMT and HFS). For all other contacts, either there was no response or some of the adults were placed in a care home/supported living and had no relatives or ongoing formal advocacy to provide feedback.

" I's communication has been very good, what she said would happen, happened and when it didn't, she advised us accordingly. She has always given us time to express our views and wishes and there has been no pressure from her. I did have a complaint about the care she set up as carers didn't show up as agreed but I contacted I and she dealt with it. Mum has nothing but kind words about I, she is really reliable which is not the case for everyone; She honours everything she commits to and has been absolutely brilliant".

"S was in regular contact with me over phone as my mother was quite unwell at the time. Although there were no physical visits, there was not really a need for them. S was very good, she kept me updated and explained things clearly. I found her to be really compassionate and very professional. She did explain the complaint process to me and I had to raise one. This was nothing relating to S but about the Brokerage team. I feel S went above and beyond in taking an interest in my mother and her situation, she chased things up and ensured that my mother received the best outcome. I already sent my compliments to her manager."

"I'm 84 and a bit confused so I cannot remember S, I'm trying to look through my papers to jog my memory. I am waiting to get help with showering as I can't wash my back and my head as my shoulder is painful. I had a carer who was very good, named L but she was taken away. She was replaced by another agency but this was terrible. The carers were not trained so I stopped it and I was told they would find someone else. But I haven't heard anything for 3-4 weeks now. I only struggle with washing my back and head and can manage the rest".

" L provides great support, she always responds fast to any queries we have and feel like she is genuine and will go the extra mile to help R and the carers."

*"J hasn't really arranged any meetings and I've had to orchestrate these myself. He did make first contact after my father raised concerns of financial abuse. But communication has been quite poor throughout. To clarify, J hasn't spoken directly with my father as such so communication has mainly been through me and the social care team in Blackheath where my father currently is. I feel the information passed between professionals hasn't been accurate, so I've had to be the go-between them. Contact has mostly been in a meeting situation and conversations with J are mostly via email. I am currently waiting for him to get back to me but this seems delayed. I can say that in the last meeting between B and WF, my thoughts and feeling about my father's care and accommodation were taken on board. I would not raise a complaint as I recognise the pressure that Social Workers are under, so I do not believe this is specifically about J but rather social services teams in general and the lack of time. I am waiting for J to get back to me regarding where my father is going to be discharged and where he is going to live. I feel there is a lack of communication between organisations/ teams; I've had to ask them to speak directly to each other as the impact of poor communication is my father's care not being joined up and me having to spend a lot of time coordinating things I should not have to."*

" The process of resolving the situation for my father was long but R did her best to keep me informed with the information she had available. Overall, we are very satisfied with the result and care my father is receiving. Very much appreciated by the family."

A stated that her and her husband have had input from social services for a long time and K has been better than all the other social workers C has had in the past. A advised K is very caring and listens to her husband's voice and what he wants. She feels K doesn't do her job for the money but rather because she really wants to help. She further advised that K came to visit her husband in the hospital accompanied by her manager whom she also found to be very caring and helpful. A advised she has been really despondent with social workers in the past but her experience with K has been very positive. She feels very happy with her at the moment, especially in comparison with other experiences.

## 5. RE-AUDITS & MASH AUDITS SUMMARY

### 6.1 Re-audits

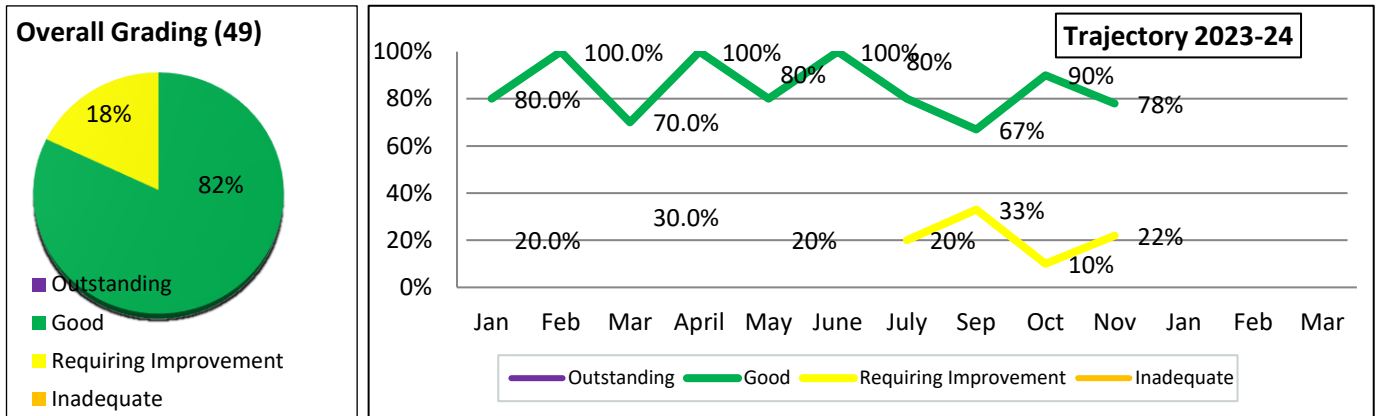
- ❖ 13 Re-audits were allocated in October and December as November was set aside for moderation. There were 2 re-audits outstanding from previous quarters.
- ❖ 7 Re-audits were completed this quarter (5 in October and 2 in December). There continues to be 1 outstanding re-audit from previous cohorts.
  - None of the improvement plans identified by auditors had been actioned in the 7 completed re-audits.
  - 2 re-audits (ACMT & CART) recommended a further re-audit. For one of these adults, there were no supervision records between June and October 2023 although the practitioner has liaised with family and completed all required work for a review.
  - In the other 3 re-audits completed, managers were satisfied with the progress of the customer journey and work completed with the adult by existing or new allocated practitioners. Although practitioners did not complete the improvement plan actions identified at the time of the initial audit, this is not a cause for concerns or escalation.
- ❖ From previous quarters, 7 re-audits have been identified to be allocated for the next re-audit cycle in January 2024. This excludes the outstanding re-audits from this quarter.
- ❖ Following the review of the re-audit protocols, 5 audits graded Requires Improvement/ Inadequate will be followed-up by the Principal Social Worker rather than allocated for re-audit. However, these stem from previous audit cycles, not in this quarter.

### 6.2 MASH audits

Across this audit cycle, the sample looked at the referrals with the following outcomes:

- No Further Action (8)
  - Progressed to Section 42 Enquiry (4)
  - RAS Assessment / Reablement - Adult Early Help Initial Assessment (7)
- ❖ During this quarter, 19 audits were completed from a total of 20 audits assigned.
  - ❖ 16 audits (84%) were graded Good, and 3 audits (16%) graded as Requires Improvement.
  - ❖ The reasons identified for these included:
    - Lack of basic information
    - No Adult Early help referral to support adult with homelessness.

- ❖ Delay or lack of evidence for decisions made or screenings completed.
- ❖ In this quarter there was an increase in overall compliance and grading in comparison to the previous quarter (July to September 2023) where 10 audits (67%) were graded Good and 5 audits (33%) were graded as Requires Improvement.



## 6. WHAT IS WORKING WELL

Related to practice:

- ❖ In this quarter, some great pieces of work were identified in the domains of recordings, person-centred practice and the adults' own voices. Here are some examples:
  - Practitioner's intervention made the adult "feel safe, reassured and heard". From records, the auditor was clear on this adult's "journey, experiences, current circumstances and needs and how the intervention ensured that they are appropriately cared for".
  - Overall auditors identified practitioners took adults' voices and wishes into account, hearing their voices as well as identifying what is important to them. Auditors also noted practitioners remained in good contact with families and other professionals where required as well as following up and adjusting course when something didn't go to plan for the adults.
- ❖ As part of learning from audit analysis in the previous quarter, a workshop on Cultural Humility is being developed to be presented in January 2024.

Related to audit processes:

- ❖ Following a challenge on re-audits, the process was reviewed to ensure re-audits only included identified improvement plans which had a direct impact on adults rather than being about the process and the skills of practitioners. This is now working well and reduced the number of re-audits and the re-audit waiting list.
- ❖ In order to better capture CQC key lines of enquiry, the reviewed audit tool was rolled out from October 2023.
- ❖ As planned from the 2 previous quarters, Quality Assurance are continuing to work with ASC team managers and the Social Care Academy Learning Lead to plan more effective ways of streamlining existing practices, to avoid duplication or work being done in isolation. As a result, 4 joint learning sessions were carried out with CART and ACMT.

## 10. WHAT NEEDS TO CHANGE / RECOMMENDATIONS

### 10.2 Management

Related to practice - Ongoing from previous quarter:

- ❖ A lack of closing/ transfer summaries, basic information on Mosaic or recordings and reallocation information not being up to date was highlighted. Practitioners need to be supported with good recordings and accountability skills and workshops are being developed to that effect by QA team.
- ❖ We also identified that supervision and management oversight can be improved to support practitioners to think in a strengths-based way; in particular, at the time of allocation but also in strengths-based support planning.

Related to audit processes:

- ❖ Improvement plans identified by auditors are not carried out. Senior managers will be required to follow-up on this as part of re-audits.
- ❖ Line managers having a discussion with the practitioner post audit has seen some improvement. especially in the CLDS and Review team. No follows up or management oversight can result in the improvement plan not being progressed, which in turn impacts on residents getting the appropriate support and intervention.
- ❖ Completed audits are not being uploaded onto Mosaic. In this quarter only 14 audits (43.7%) were uploaded by the audits
- ❖ Ongoing recommendation from the last quarter: for auditors to liaise with practitioners early in the audit cycle to make arrangements to meet; This allows for workloads and annual leave plans.
- ❖ Ongoing effort to maintain audit compliance levels.

## 10.2 QA Team

- ❖ Auditors found that recordings of practice guidance and supervision notes were lacking. Discussions with managers and an auditor's workshop is being planned in the new year to address this.

Ongoing from previous quarters:

- ❖ The Practice Standards guidance documentation to be completed and implemented within adults' social care. This is to provide a framework of expectations and guidance on good practice as well as links to good practice examples, forms and letter templates.
- ❖ Audits identified a lack of detailed closing/ transfer summaries, basic information on Mosaic or recordings and reallocation information not being up to date. This highlights the need to support practitioners with good recordings and accountability skills and workshops will be developed to that effect by the QA team in the new year.