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|  **Auditors Report – 6 Step Briefing** For staff to share, reflect and discuss |
| **1.Theme**  | **Re-referrals**  |
| **2.Methadology** (reasons for audit) | Managers reviewed the previous six months of the child’s case file and used the CareFirst Signs of Safety audit tool. In addition, the following eight thematic questions were answered:* Are the issues highlighted in the re-referral the same as previous concerns?
* If the previous assessment was abandoned, was there appropriate management rationale for this?
* Did previous interventions address identify risks?
* What work, if any, was outstanding when case was last closed?
* Was the role for partner agencies made clear to them at point of closure / step-down?
* Was a Safety Plan in place at time of closure?
* Was the decision to close underpinned by appropriate management advice?
* Identify examples of good practice
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| **3.Summary of findings**(positives & worries) | Auditors found good evidence that practitioners were able to identify risk and undertake assessments to address the risk to children. The majority of the cases previously opened also evidenced no outstanding work at the times of case closure. This indicates that social workers have a good understanding of risk to children, and can therefore action planning to address the risk and safeguard children. Referrals from partner agencies, who were also able to identify risk to the children, evidences that partner agencies are working in collaboration with CFN to provide safeguarding towards children. The audit identified gaps in ‘direct work’ practice. Notwithstanding the current challenges around Covid-19, there was minimal evidence of direct work being undertaken with children, young people, and their parents. Meaningful and effective Signs of Safety practice was not consistently evident within the case audits. Audits did recognise Signs of Safety practice being used sporadically, however the quality and effective use of Danger Statements – Safety Goals, Safety Planning, Direct Work tools and scaling was not consistent.  |
| **4.Learning** (examples of good practice, and areas for improvement identified)  |  Auditors found good evidence that practitioners were able to identify risk and undertake assessments to address the risk to children. The majority of the cases previously opened also evidenced no outstanding work at the times of case closure. This indicates that social workers have a good understanding of risk to children, and can therefore action planning to address the risk and safeguard children. Referrals from partner agencies, who were also able to identify risk to the children, evidences that partner agencies are working in collaboration with CFN to provide safeguarding towards children.Evidence from the audit would suggest that there are cases being closed down without robust safety planning in place. Rather than children and families actioning and ‘owning’ their own safety plans, cases are being re-referred to CFN. The audit evidenced that Signs of Safety practice is not consistent with practitioners lacking a meaningful understanding of the methodology and practice framework.  |
| **5.Recomendations**(what needs to happen to move up the *0 – 10* scale) | 1. **Practitioners need to think more creatively about how they capture children’s wishes and feelings and deployment of direct work tools during the covid-19 period.**
2. **In order to mitigate the numbers of re-referrals raising the same or similar concerns at previous case closure, Social Work teams need to focus on quality of case closures –**
* **Where are the safety plans?**
* **Are there good enough plans in place?**
* **Are other involved agencies aware of the plans at closure?**
* **Is there good enough management oversight?**
1. **Partner agencies should be provided with positive feedback when they produce good work which supports Social Workers and multi-agency planning.**
2. **Auditors need to feedback ‘good practice’ directly to the Social Worker and encourage showcasing this within their team / service area**
3. **Auditors should include the Social Worker in audits, whether this is face-to-face (subject to covid-19 restrictions), Skype or phone call and record this in the write up of the audit**
4. **CFN’s current training offer regarding ‘Safety Planning’ should be reviewed and strengthened.**
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| **6.Is there anything we can do differently?**(as a team, is there any particular practice you are going to change as a result of this audit?) |  |