

## **Case File Audit Guidance**

Case file audit is an essential part of the quality assurance arrangements in Bradford to support improving outcomes for children. Audit is an activity that is undertaken by managers at all levels in the service as part of a shared commitment to understanding the quality of practice and providing support to front line managers.

Auditing provides an opportunity to pause and reflect on the quality of case work and on the impact our assessments and interventions make towards positive outcomes for a child or young person and their family.

Audits are an intrinsic part of the quality assurance process and their completion is a mandatory element of core business. Audits examine social care practice against the practice standards, guidance, policy, and procedures.

The audit process in Bradford is underpinned by a coaching model, with audits being completed alongside workers to reflect on learning and service improvement.

### **1. The purpose of case file audit**

Auditing will assess what we are doing well against our practice standards and how we are making a difference for children and families.

Practitioners will be provided with an opportunity to reflect on their practice and develop their skills to help them improve how they work with children and families. This will be supported by auditing outcomes being shared to inform learning and development opportunities.

Auditing will provide a quality grading of practice - outstanding, good, requires improvement and inadequate. This will help us understand how well we are doing and what we need to do to improve the service we are providing to our children and families.

### **2. The audit process**

All Practice Supervisors, Advanced Practitioners, Court Consultants, Quality Assurance and Improvement Officers, Family Support Co-ordinators, Learning and Development Officers, Team Managers, Service Managers, and Heads of Service will be required to undertake one audit per month. All auditors, with the exception of Heads of Service and

service managers will audit children's records from teams that they are not directly responsible for.

All audits are coordinated by the Quality Assurance Team. At the beginning of each month, details of the child's record to be audited will be sent to the list of auditors. All audits need to be completed by the end of the month. Heads of Services are responsible for ensuring that audits are completed by managers in their respective areas.

Auditing is undertaken using the audit tool created for your service in the Supervision and Audit database.

The database can be accessed at <http://supervision.bradford.gov.uk>. For information to assist in using the Supervision and Audit database, please see the S&A Database Worker's Guide and the individual guides for each audit, available on Tri.X and via the database.

Audit tools are available as follows:

- Family Support and Parenting
- Fostering
- Social Work
- Youth Justice Service
- CCHDT

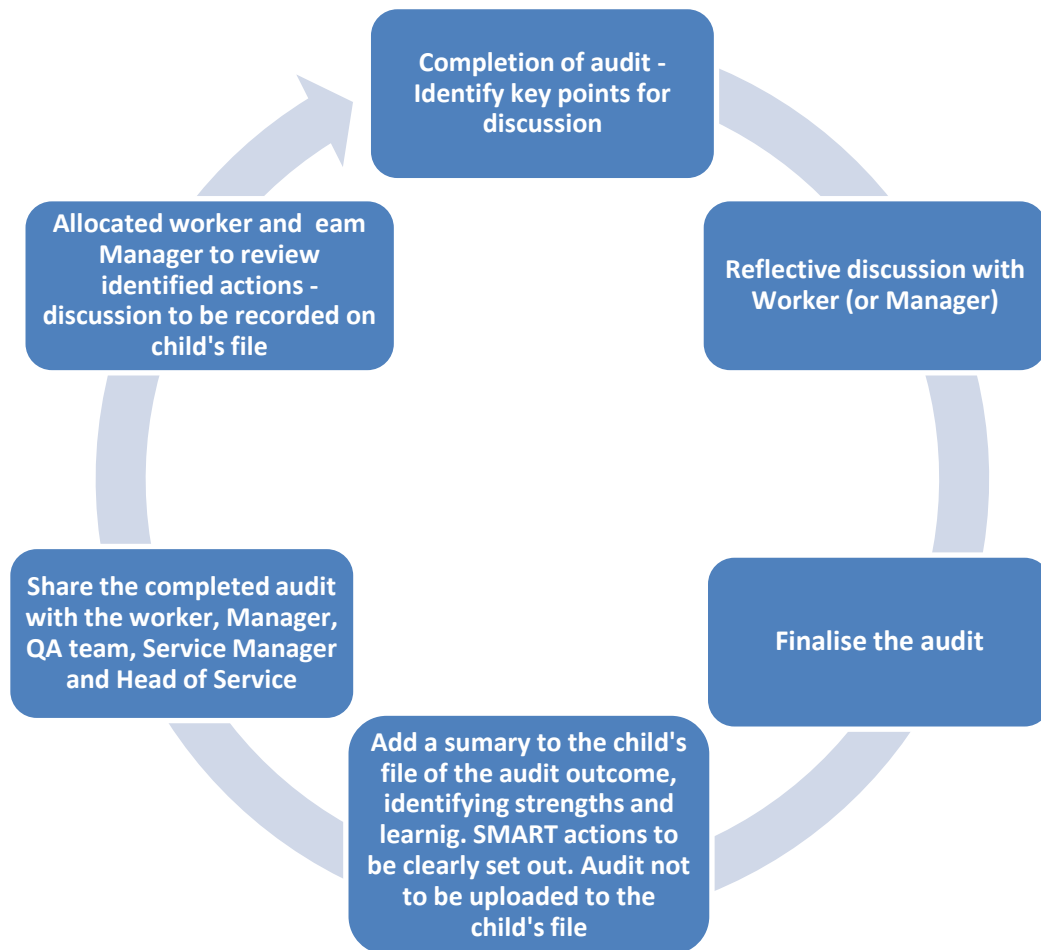
In addition, there are dedicated reviewing tools for Safeguarding & Reviewing Services that are not used for the monthly case file audits:

- Child Protection Co-ordinators
- Fostering Independent Reviewing Officers
- Independent Reviewing Officers
- Themed Quality Assurance

The Direct Observation audit tool is available for all services to use.

It is important that the worker is given every opportunity to participate in the audit and it is recommended that the auditor contact the worker in plenty of time before the audit is due, so a meeting (teams /face to face) can be arranged.

If the child has been recently re-allocated (within 1 month) and the original worker is still with the authority, the auditor should attempt to arrange a three way meeting with both workers to discuss the audit.



Once the auditor has submitted the audit, the worker and manager will receive a notification and can read the audit.

Actions from the audit will need to be reviewed and any immediate safeguarding to be addressed on receipt of the information. Any response to actions from the learning identified in the audit should be recorded on the child's file.

The actions will also populate the supervision record, to support further learning discussions.

For all inadequate audits, Head of Service will arrange to have a case planning discussion to reflect on the audit outcome and ensure that the plan and arrangements for the child are safe and in accordance with their needs. This will be recorded on the child's file.

Actions from audit can be allocated to other members of staff, such as reviewing officers and managers and these actions will populate their own supervisions.

It is the responsibility of the Head of Services to ensure that appropriate arrangements are in place to track the completion of actions: supervision and audit performance data will be available through Sharepoint to support managers to do this.

When audits have been moderated, the outcome will be shared with the auditor, allocated practitioner and the team manager responsible for the child. On receipt of the moderation, managers should discuss any additional actions with the allocated worker.

The Quality Assurance Team will report on audit outcomes, completion of audits and actions for each service.

### **3. Completing an audit – guidance principles**

The fundamental question that audit seeks to explore is whether our involvement is making a difference. Do we understand the lived experience of this child or young person and have we made things better? Are we delivering a safe, timely and child focussed service?

The audit needs to reflect on evidence of compliance with policy, practice standards and procedures because these are an essential framework for delivering the good practice that ensures positive outcomes.

Auditors should complete the case file audit without re-telling the story of the case and without cutting and pasting from the case file.

The main focus of the audit should be on the most recent 6 months of work, but where the case has a substantial history, the auditor will need to take into consideration whether needs and risk have been recognised and responded to over time and whether the legacy is impacting on current outcomes.

Each audit has a number of domains, each to be graded separately, that explore the key elements of good practice on the child's file. Each domain has key standard questions that should be answered Yes No or not applicable. The outcome of the key standard question will assist the auditor in determining the grade. For example, if all questions are not answered yes this section cannot be graded as good.

A clear assessment regarding the quality of the work needs to support the grading and should be recorded in the audit. At the end of each domain there is a question to assist the auditor to reflect on how the work has changed the life of the child or young person. The rationale should be provided to explain the judgments made. The auditor should summarise their findings and use evidence from the case file to support their argument. The detail in this section will be important in informing practice development.

A strengths based approach should be used to assess elements of good practice and evidence impact and added value through our involvement with the child.

Learning should be focused and succinct in order to be useful to take forward and apply to future practice. If immediate safeguarding has been identified, be clear what was

done and how this was managed. Avoid bland phrases and be clear regarding what was done well and what the learning is.

Ensure all your learning points have a SMART action that is child-focussed. If you consider that the chronology needs updating, be clear what outcome this will achieve for the child or young person.

Organisation learning points are a valuable way of raising areas of practice that need work and issues raised in this section will be included within the audit report.

Refer to the grade descriptors described in Appendix 1 below to determine your overall grade. Use the grades in each domain to guide you. It is likely that the overall grade will reflect the majority of your domain grades. Exceptions to this might be where there is one significant issue that is of particular concern that pulls down the overall grade. As a rule of thumb, it is not usually appropriate to give an overall grade that is more than one grade higher than your lowest domain grade i.e. if one domain is graded 'requires improvement', the overall grade cannot be higher than 'good'. Grade the information in the case file and not your knowledge of the practitioner.

Record your conversation with the worker and include their assessment of the case and response to the audit outcomes.

If there are immediate concerns regarding a child's safety and wellbeing the auditor is responsible for ensuring that the Worker, Team Manager, Service Manager and Head of Services are notified as a matter of urgency. Action should not wait until the audit has been completed or for the audit tool to be finalised. It is critical that the child's safety and welfare are prioritised.

Appropriate time should be booked to complete the audit to ensure that it is given the time required to make it a purposeful exercise.

After moderation, if there is a disagreement regarding the grade, the child's record will be reviewed by the Head of Service for Quality Assurance. If there is disagreement regarding the actions identified, this will be reviewed by the Head of Service for the relevant area (case holding) as this relates to practice.

#### **4. Organisational learning and reporting**

Auditing will generate themes and learning about how effective social care intervention and multi-agency working evidence positive outcomes for children, which will be collated reported in a Monthly Case File Audit report.

Each Head of Service is responsible for cascading the identified strengths and learning to their staff.

The Monthly Case File Audit report will also be shared with the Learning & Development Service so that identified strengths and learning are incorporated into training.

## Appendix 1: Grade Descriptors

The quality of casework should be measured by compliance to the standards and impact of intervention for the child.

The aim is for work to reach a good/outstanding standard.

Diversity should be captured throughout the audit; the child or young person being seen and their voice heard needs to be at the centre of all the work that we do.

The child's experience and their uniqueness should be considered throughout our work to ensure that are intervention is effective.

<p><b>Outstanding</b></p> <p>The best possible outcome for the child or young person has been achieved.</p> <p>There is evidence that these outcomes can be sustained over time.</p> <p>Imaginative, effective and timely interventions positively impact on the child, young person and their family.</p> <p>There are high standards of professional competence and case work.</p> <p>Cases graded as outstanding may still have minor learning points identified that do not affect the best possible outcome being achieved for the child or young person.</p>	<p><b>Good</b></p> <p>Good outcomes have been achieved for children and young people.</p> <p>There is evidence of good practice throughout case planning, direct work with children and young people, professional decision making and case recording.</p> <p>The child or young person's experience is understood and the analysis of their experience drives the assessment and plan.</p> <p>A case can be graded good overall even if there are some standards that still require improvement, as long as this does not compromise the good outcomes that have been achieved.</p>
<p><b>Requires Improvement</b></p> <p>Recognises that work meets our basic safeguarding responsibilities.</p> <p>There may be minor examples where the case file does not meet the practice standards but these are not impacting significantly on outcomes for the child or young person.</p>	<p><b>Inadequate</b></p> <p>Significant improvement is required to ensure minimum standards are met.</p> <p>Drift and delay is impacting on outcomes. Immediate review of arrangements may be required to ensure children and young people are safe.</p>

## **Outstanding**

In addition to meeting the “Good” criteria the file would evidence: -

- Impact and compliance has achieved the best possible outcome for the child or young person at that time.
- Action has been taken swiftly to ensure outcomes are achieved within appropriate timescales for the child or young person’s timescales.
- Long term outcomes for children and young people have been considered and plans are in place.
- Family and community have been fully explored to build a network of support around the child or young person and their family that will continue beyond involvement by children’s social care.
- Recording of the child or young person’s lived experience is detailed, compassionate and reflects their emotional complexity. This lived experience is at the centre of assessment, planning and review.
- The work has increased the child or young person’s resilience and emotional well-being.
- There is innovation in practice and the use of imagination to meet the needs of the child or young person.
- Collaboration between partner professionals has challenged ‘silo’ working and is driven by a commitment to achieve best outcomes; individual workers have advocated effectively.

## **Good**

- Good outcomes have been achieved for children and young people; their lives have already been improved by our intervention.
- Intervention has been timely, avoiding drift and delay.
- Assessments identify strengths, risk factors, needs, impact of history and past harm and include information from other agencies.
- Assessments are succinct and understandable to parents and the child or young person (dependent on age and ability). The child, young person and family have been engaged in the assessment and kept informed of what is happening.
- Assessments review quality of parenting and capacity of parents and carers to change and sustain change.
- Assessments have been reviewed and quality assured by the Manager.
- Children and young people are differentiated from their siblings in assessments plans and recordings and individual needs and voices are clear.
- Children and young people are enabled to make choices where appropriate. The voice of the child or young person is evident.
- Direct work with child or young person is planned and is in line with their age and level of understanding.
- Clear communication with the child or young person is evident, specialist communication methods have been used where appropriate.
- There are observations of relationships and interactions for young children that provide a clear picture of the child.



- Attempts to engage the family are clearly evident with all avenues being explored to support an effective working relationship.
- Professional relationships have been collaborative and effective.
- Plans are individualised, clear, and evidence progress. They are reviewed and change in the light of emerging issues and risks.
- Multi-agency meetings are effective forums for timely information-sharing, planning, decision-making and monitoring.
- Recording is up to date, meets the required standards, is child centred and reflects the current activity on the case.
- Decision making is clearly evidenced and appropriate to the case.
- Supervision has been undertaken in accordance with policies and procedures. It is reflective, analytical, evidences a review of previous actions, sets clear timescales and evidences discussions that have taken place.

### **Requires Improvement**

- Minimum practice standards have been met; the case file is compliant in all areas that impact on the safety and progress for the child.
- Outcome is safe though the basis of the assessment is not clear or logical; decision making does not include detailed rationale.
- Key risk factors are identified but not properly assessed such as the toxic trio.
- Indicators of physical and emotional abuse are not identified, assessed and linked to impact on child development.
- Limited evidence of the child/parents/carers or other professionals being involved in the assessment and planning process.
- Child or young person has been seen but no evidence of planned direct work with the child.
- Case recording is not consistent and does not reflect all activity on the case.
- Supervision is regular but there is limited reflection; actions are recorded but not routinely tracked and timescales slip.
- Evidence of minor drift and delay.

### **Inadequate**

- Children or young people are not safe: either there is evidence that they are being harmed or at risk of harm; or the quality of recording/compliance is such that the auditor cannot establish the level of risk.
- No evidence of timely intervention and protection.
- Significant drift and delay is impacting on outcomes for the child.
- Assessments lack depth and analysis of risk.
- The child or young person's journey, voice and lived experiences are not evident.
- Limited evidence that the child or young person has been seen or spoken to.
- Limited evidence of progressing plans to improve and sustain outcomes for children and young people.
- The case file does not meet the practice standards. There are gaps in compliance with policy and procedure. Basic information is incomplete or not up to date.

- Recording is limited and does not reflect the up to date circumstances of the child or young person.
- The lack of information and detail in the chronology, genogram or case summary prevents a proper understanding of the child or young person's history.
- Recurring patterns are not challenged by management oversight at any level.
- Supervision is not reflective and regular and does not add value to improving outcomes for children or young people in a timely way.