

# Appendix B - Quality Assurance Audits

## Quarter 2 – Audit Overview Report

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### *Quality Assurance Audits*

Quality Assurance Audits take place on a monthly basis within Children and Young People Services and Adult Services. This report gives an overview of the thematic audits reported on in quarter 2 of the 2019-2020 period, what is working well, what we will improve and by what methods. This report collates audit activity from across Social Services: Children and Young People Services, Adult Services and Hillside Secure Children’s Home.

Each audit tool devised is circulated to relevant stakeholders in Children’s Services, Adults Services and Hillside prior to audits being completed. Audit days usually take place once a month in the Quays IT room with managers collectively auditing and analysing the themes arising.

### *Audits Completed*

During this quarter we have reported on three thematic audits:

Audit Theme	Cases Audited	Service
Supervision Audit		Hillside Secure Children’s Home
Finances Managed by the Provider Audit		Adult Services
Inspiring Families Audit		Children’s Services

### *What are we doing well?*

We’ve identified through the audit process what is working well and have highlighted many good working practices evident across the Social Services IT System.

#### **In the Hillside Supervision Audit:**

- In the Wellbeing Section and the Roles, Responsibilities and Professional Practice areas of the personal supervision section we have evidenced an increase of 10%, taking both up to 100% (13/13) of the cases audited these areas were completed with clear identified actions
- We have evidenced an increase in the Wellbeing Section of the supervision notes taking into account and fully exploring any physical, emotional and relationship difficulties or positive achievements up to 92% (+2%) (12/13) with auditors highlighting that the remaining 8% (1/13) some of the three supervision sessions looked at for each individual was detailed appropriately
- In all of the cases audited it was evident that the supervision notes were being stored securely
- We have evidenced an increase of 19% (9/13) from the previous audit whereby the supervisor has enabled the supervisee to reflect on their own practice (previously 50%)
- We have evidenced that in 85% (11/13) of the cases audited the supervisor reflected on the supervisee’s practice
- In 92% (12/13) of the cases audited the supervisor discussed the supervisee’s relationships within their own team and/or the wider staff, this is an increase of 12% since the previous audit
- In 85% (11/13) of the cases audited it was evident that the supervisee had attended training during the last three supervision sessions

- In 69% (9/13) of the cases audited the supervisions discussed or detailed the training that the supervisee had attended with a further 15% (2/13) of the supervisions evidencing some details/discussion around training

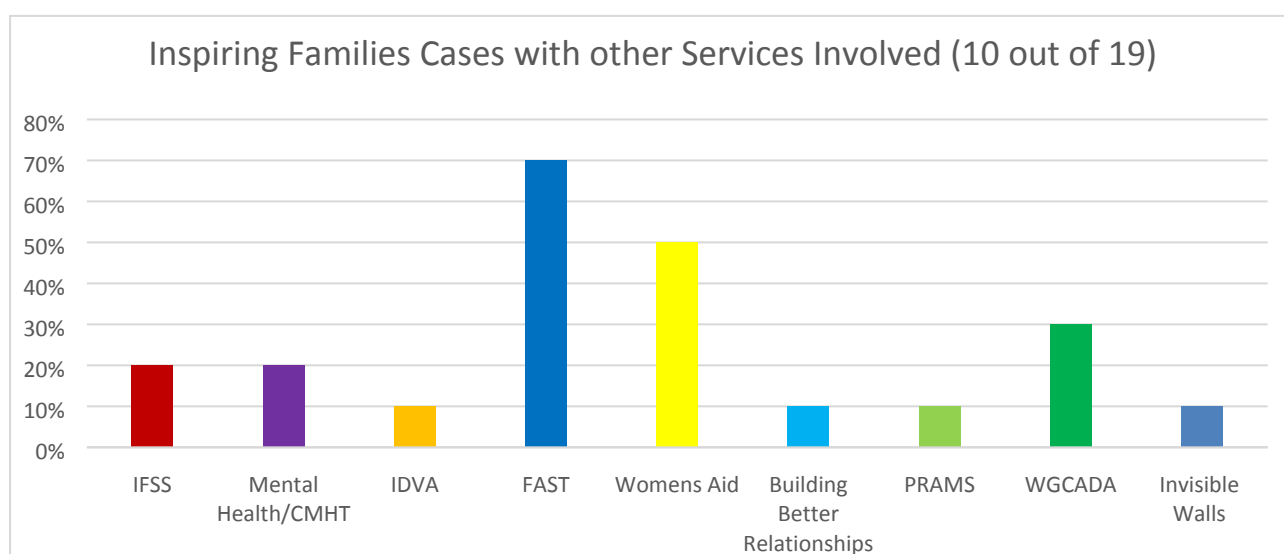
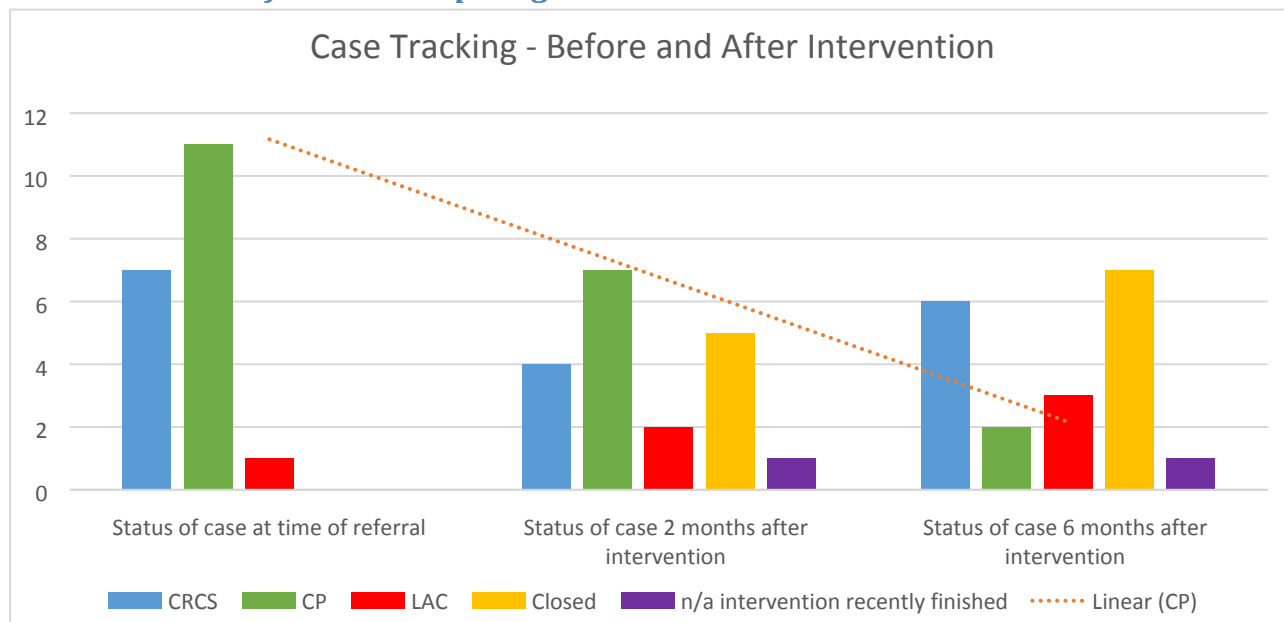
**In the Finances Managed by the Provider Audit:**

- In 23 out of the 24 cases audited a review or assessment had taken place within the last 12 months.
- In two thirds (14/21) of the cases audited there was evidence of extra expenditure requests in the recordings or recorded on idocs

**In the Inspiring Families Audit:**

- It was evident in 79% (15/19) of the cases audited that there was a multi-agency response to the domestic violence concerns
- 11 cases were child protection at the point of referral to Inspiring Families, this reduced to 7 following 2 months of the intervention being completed, then reduced further to 2 cases remaining on the child protection register following 6 months of the intervention being completed
- Two thirds (12/19) of the cases audited either have now closed completely or have been stepped down to TAF, however we do need to ensure that these cases that are closed or stepped down do have evidence of any safety plans in place for parents and partner agencies still involved to monitor
- In 74% (14/19) of the cases audited there has been a positive change in the family circumstances following Inspiring Families intervention
- In 93% of the cases audited Inspiring Families intervention clearly contributed to the positive changes in collaboration with other services. Inspiring Families was identified as the only service involved in 53% (8) and auditors felt that in 40% (6) this was a combination of Inspiring Families and other services collectively working with the family
- In 72% (13/19) of the cases audited the family were able to live together as a family following intervention and a further 6% needed other services to continue to enable them to do this
- In 89% (17/19) of the cases audited it was evident that domestic violence had reduced following Inspiring Families intervention
- In 78% (14/19) of the cases audited the work Inspiring Families carried out provided the social worker with further clarity on the safety of the victim/child

## General Themes from the Inspiring Families Audit:



- Over half of the 19 cases referred to Inspiring Families had been opened to the department for over 18 months
- Of the 53% of cases where there were other factors why the case was open, all of these had substance/alcohol misuse as a factor
- Over half of the cases referred to inspiring families were already in the child protection arena
- 59% of the cases referred to Inspiring Families had a combination of services going in at the same time: Fast (70%/7), Women's Aid (50%/5), WGCADA (30%/3)
- Two thirds of the cases audited were either closed (61%) or had been stepped down to TAF (6%)

Further charts in relation to domestic violence across Neath Port Talbot can be found at Appendix 1

### What will we improve over the three audits completed?

1. In the Hillside Supervision audits we will ensure that all appropriate managers have access to the stored staff files
2. We ensure that any agreed actions of previous supervisions are being recorded and reviewed at subsequent supervisions
3. We ensure that the Training and Development Section of the supervision template is completed with identified actions

4. Supervision sessions will detail for those workers with a key child in Hillside more detail on the discussion held, we will also ensure that it details any guidance regarding presenting issues that the key worker has to deal with.
5. Although we have seen a substantial increase in the training being attended and evidenced in the supervision sessions we will ensure that supervisees explore with the worker how they will related the training into practice.
6. We will ensure that all supervisions discuss any planned leave or absences with the supervisee.
7. We will ensure that all supervision sessions discuss the supervisees role in relation to the completing of paperwork and their role in relation to quality assurance in Hillside.
8. All supervision records must be signed by both the supervisee and the supervisor.
9. Where finances are managed by another person on behalf of the individual open to Adult Services we will ensure that full details on who and how long they have been managing their money in this way is evident on the case files.
10. In any reviews or assessments the financial arrangements must be reviewed when an individual's money is being managed by a provider this will ensure that we are monitoring appropriately and must link in with the Commissioning Service to ensure that any information they hold on reviews they undertake are included within the individual's assessment/review.
11. In many of the cases audited where finances were managed by a provider the information on the case file was too limited to ascertain if any issues have been identified in relation to managing finances, however the Commissioning Team would have contacted the case manager if they had uncovered any evidence of financial mismanagement.
12. Where a best interest decision/mental capacity assessment had deemed an individual as unable to manage their own finances we will evidence a review of this decision every 12 months.
13. Provider records of any finances scanned will be scanned to the case file.
14. In Children's Services we will promote the use of chronologies within the service to ensure that all cases have a working chronology throughout the time the case is open to the department. Chronologies provide a key link in the chain of understanding needs/risks, including the need for protection from harm.
15. We will ensure that referrals to Inspiring Families are recorded on the case file as it was not always clear when this was completed.
16. The child/young person's plan will reflect how the domestic violence issues would be tackled by Inspiring Families intervention and following the intervention the plan must fully reflect the findings of the intervention.
17. Inspiring Families reports do not contain dates of intervention or report completion dates therefore we will ask the Inspiring Families service to include these on their paperwork.
18. DASH Assessments (Domestic Abuse, Stalking and Honour-Based Violence Risk Assessment) will be completed routinely on case where this is evident.

### *How will we do this?*

- Through developing the IT system to reflect and record the information we want to evidence
- By changing, communicating and reinforcing to staff processes and procedures to follow
- By holding training sessions for staff on specific areas of the system where new processes have been introduced
- By direct feedback on individual cases to the responsible team manager and case worker
- By looking at the way we encourage engagement and participation of children, young people and their parents/carers
- Through circulation of audit tools to all practitioners to enable them to have an understanding of the areas auditors are looking at which will become evident in future audits on the same topic
- By discussing and ratifying proposed changes and improvements through the Outcome Focussed, Quality Assurance and the Practice Improvement Groups
- By circulating the thematic audit reports to all staff for their information

- By having a transparent quality assurance audit process in place which is responsive to suggestion and change

### *What have we learnt?*

In this quarter we have reviewed progress made in Hillside in relation to the quality, frequency and compliance with the supervision policy. This repeat audit has given us the opportunity to assess our progress or lack of progress in areas along with identifying what is working well and any other areas that require improvement. Following the previous audit we revised the audit tool in line with the recommendations of the report and the previous report was shared with all staff. Hillside need to procure appropriate storage for supervision files as access to the staff files was sometimes difficult as not all key holders were available on the day of the audit. We have seen several areas of improvement since the previous audit which is positive and have identified a few areas where performance dipped in comparison to the previous audit however many of these were compounded by the inability to access the full staff file. All completed audit tools will be shared with the respective House Manager/Manager who in turn will share with the appropriate member of staff for their professional development. The revised audit tool should be used in between audits for supervisors to use to check their quality of supervisions and compliance with the policy.

Prior to the Finances Managed by a Provider Audit we had an understanding that the case file would be limited in the information we were seeking therefore this audit was to establish what information we were recording so that we could introduce new working practices as a result of the audit. As anticipated this audit has demonstrated that there is often limited information contained within the individual's case file in relation to their finances when these are managed by another individual such as a provider. It is clear that the commissioning team do annually review an individual's finances whereby they are managed by the provider. They undertake this monitoring by checking what/where monies have been spent and verifying the balance sheet is correct with the case manager being notified if there were any discrepancies found along with a referral to safeguarding. The commissioning team compile a report on the reviews they undertake on a service including those where they review the finances of an individual, however this information is documented within an overarching report that sits outside of the IT system and the relevant parts relating to an individual are not included within an individual's case file. Despite this financial reviewing being undertaken in the majority of the cases audited, there is limited reference on the case file itself to evidence or reference this when a care plan is reviewed or there is a re-assessment. The service has considered that finances need to be reviewed by the case manager in more detail in relation to these cases and therefore work is being undertaken with Finance/Court Deputies section to create a proforma for workers to use when assessing or reviewing cases.

The Inspiring Families audit found a correlation between families undertaking and completing the inspiring families intervention and a reduction in domestic abuse. Some practitioners attending the audit commented that the intervention appeared to be a 'magic bullet'. However, this would be too simplistic an explanation for the reduction in domestic abuse, rather what the audit identified is a combination of multiple factors coming together at the right time in the lives of those individuals where domestic violence and abuse is an issue. The interplay of these factors is complex and not fully understood at the time of audit and further analysis of the data is required to identify, if at all possible any other correlations to enhance understanding and learning in this area. This audit has indicated that the Inspiring Families intervention is definitely having a positive impact on the cases that are referred through and complete the programme, however we do also need to be mindful that the individuals that complete the course are those families who are accepting of the need to change or

are willing to work with services to look at changing their behaviours so that they can stay together as a family.

To promote reflective learning within the service, the good practice and areas for improvement identified within each audit and the individual case file audit forms will be shared with the appropriate Team Managers and the workers involved in the case, this is done either on a 1:1 basis or through group sessions.

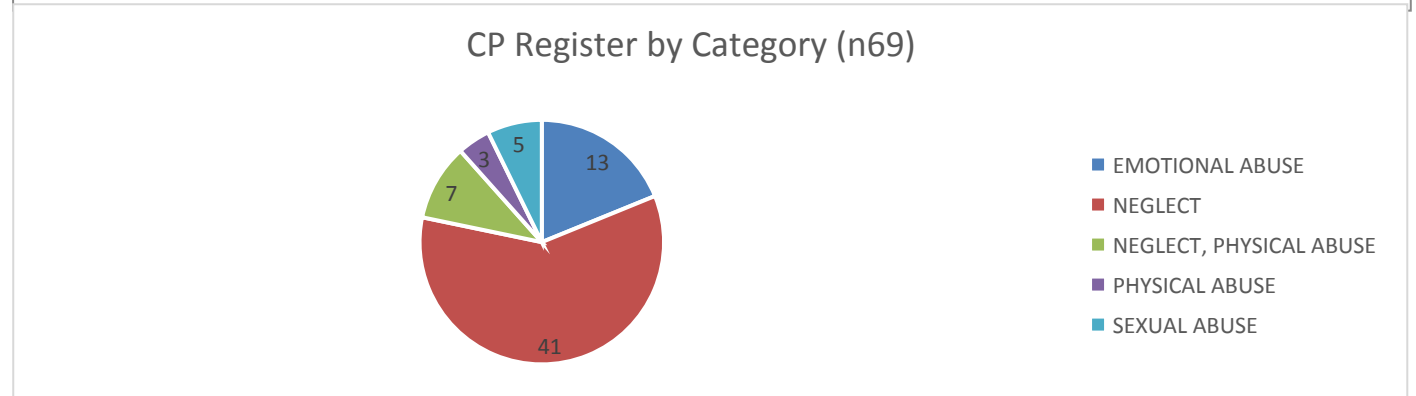
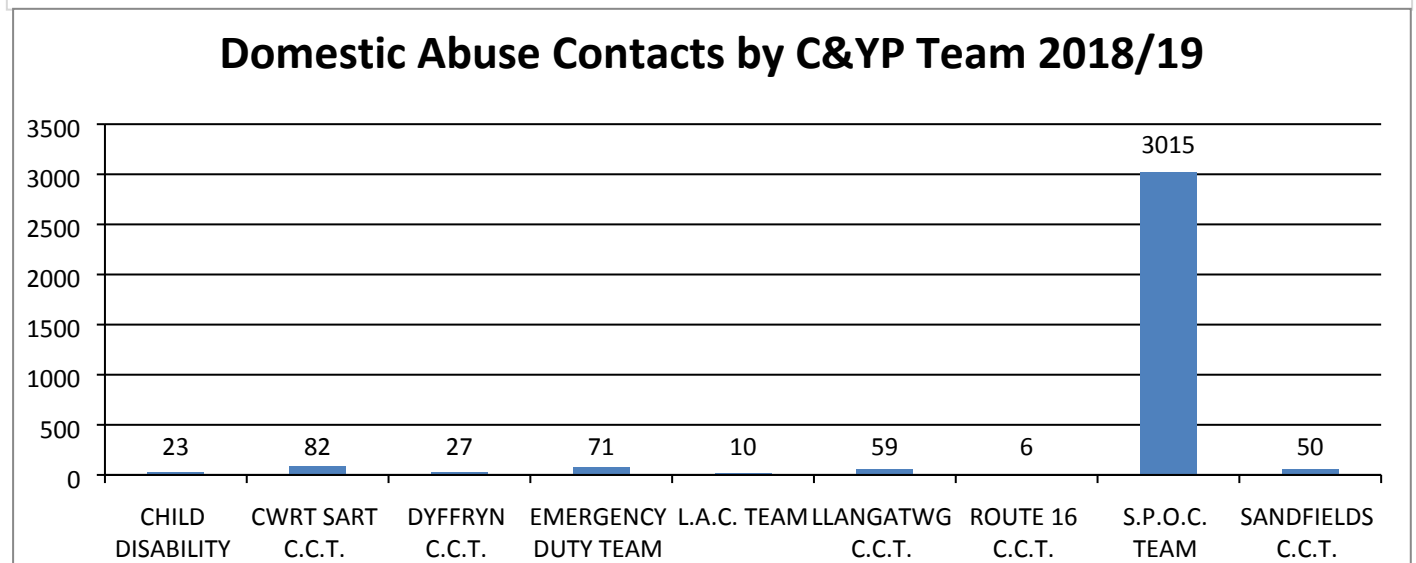
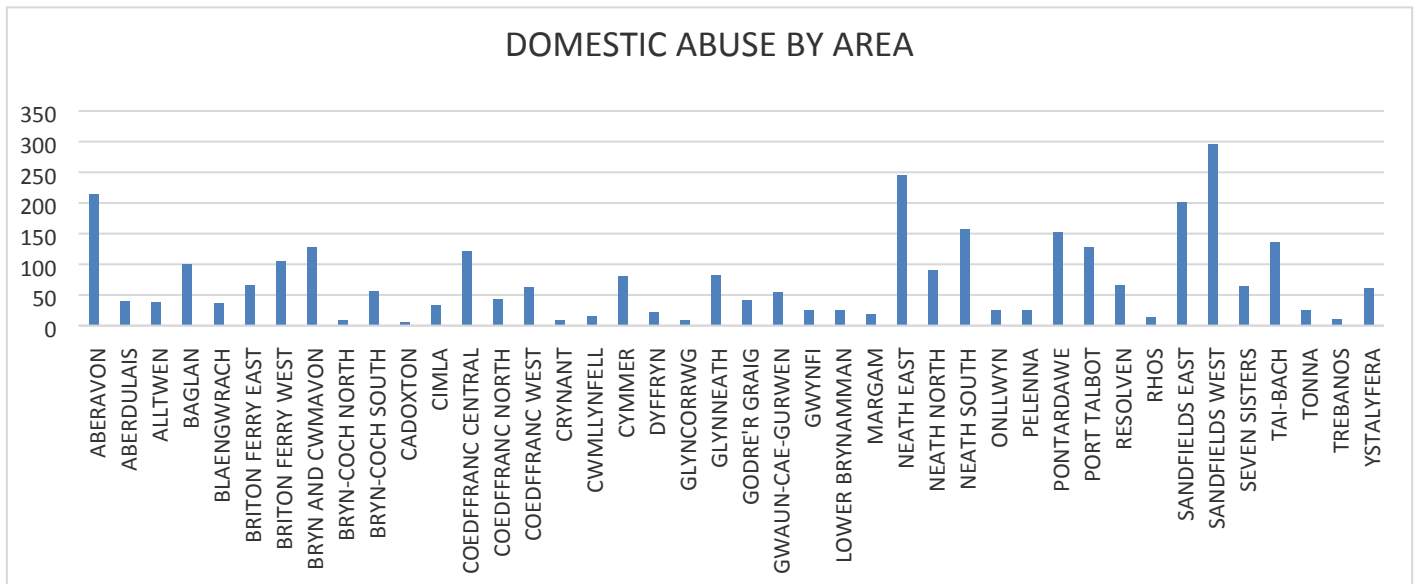
### *Next Steps?*

Our effective auditing process is identifying key themes on good practice and areas we will improve. Post audit we have mechanisms in place for following through on actions identified. Any actions identified from each audit are transferred to an audit action register whereby individual actions are discussed and agreed, this allows us to monitor desired outcomes and progress. This gives a transparent view what we recognise is working well, what we will improve, how we will do it and when it will be in place. All audit tools and reports are disseminated to the appropriate teams within Social Services, this provides staff with information on good practice and areas for improvement and it also provides a visual tool for staff that can be referenced in the everyday tasks completed.

**Mel Weaver - Quality Assurance**

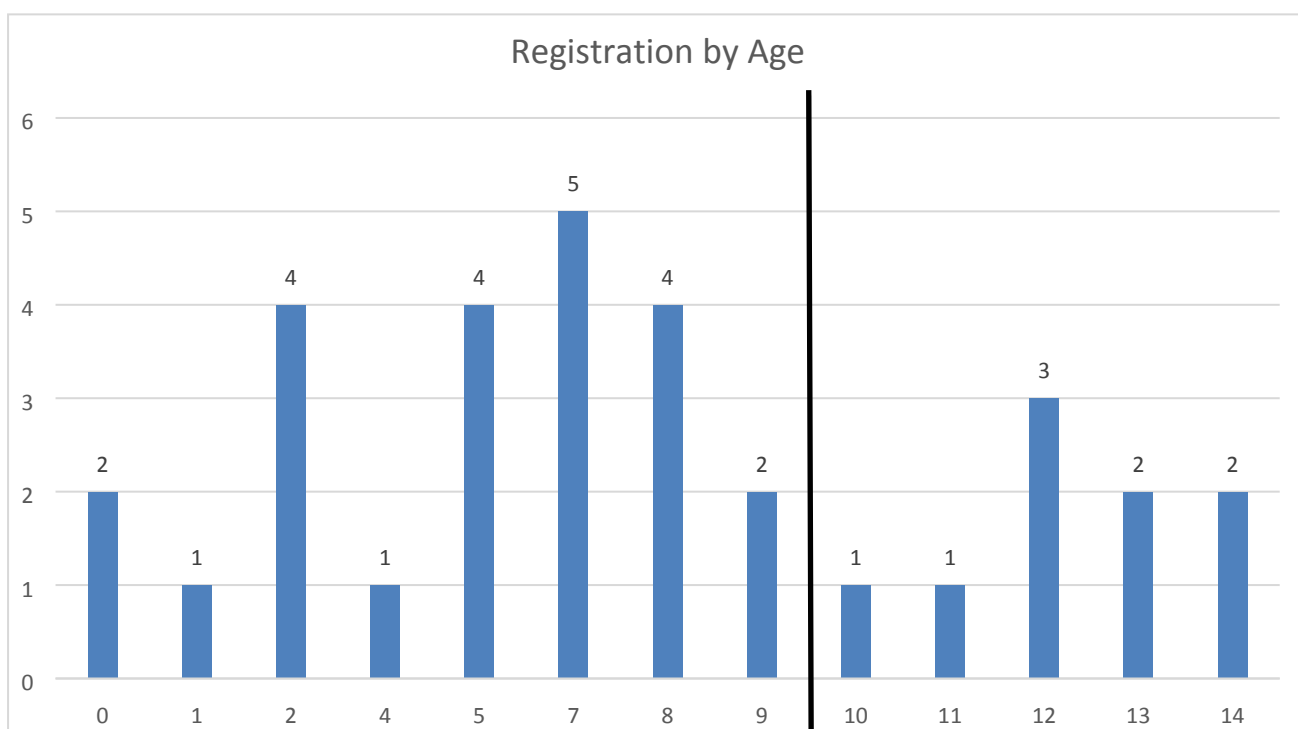
**Appendix 1 – Domestic Violence Charts**

## Neath Port Talbot Statistics on Domestic Violence



CP CATEGORY, then specific reasons	Number of cases
<b>EMOTIONAL ABUSE</b>	<b>10</b>
<b>Acrimonious relationship</b> between parents. Dad has Child Arrangement Order and refusing mother to have contact, emotional impact on child	1
Concerns around <b>witnessing domestic violence incident</b> .	2
<b>Domestic Violence</b>	5
<b>Domestic violence</b> between parents and mother's mental health	1

<b>Domestic Violence</b> , exposure to frightening adult behaviours	1
<b>NEGLECT</b>	<b>19</b>
Concerns regarding <b>domestic violence incidents</b> in mother's relationships, as well as concerns regarding her friendship group	2
Concerns regarding <b>domestic violence</b> , parental physical and mental health	7
<b>Domestic Violence</b>	3
<b>Domestic Violence</b> , substance misuse and financial instability	6
Mothers issue with MH and <b>historic DV</b> . 2 children previously removed from mothers care	1
<b>NEGLECT, PHYSICAL ABUSE</b>	<b>3</b>
Long standing concerns around <b>domestic violence</b> between the parents and alcohol use in particular in respect of the father	2
Significant concerns regarding both parents ( <b>DV</b> ).	1
<b>Grand Total</b>	<b>32</b>



- \* Of the 206 Children and Young People (C&YP) admitted to care in the last 2 years – 111 have an assessment stating current or historical domestic abuse (54%).
- \* Of the 14 C&YP currently residing at Hillside Secure Children’s Home, DVA is a factor in the care and trauma history profile of all.
- \* In a review of Serious Case Reviews undertaken between 2009 and 2016 (n91), ‘Domestic abuse was the most common risk factor in SCR cases, present at varied risk levels in 71% of the SCRs’ (Green and Halliday, 2017) [https://www.cafcass.gov.uk/wp-content/uploads/2017/12/cafcass\\_learning\\_from\\_scr\\_submissions\\_-\\_2017\\_-\\_external\\_version.pdf](https://www.cafcass.gov.uk/wp-content/uploads/2017/12/cafcass_learning_from_scr_submissions_-_2017_-_external_version.pdf).