

FOCUS FIVE – Audit Findings Year 2021

CHRONOLOGY

- Overall, it was identified in the audits completed over the past year that Chronologies were out of date in a majority of cases. Within the cohort of children whose cases were audited as part of 'This Child' programme of Spring/Summer 2021, a total 52% of the audit cohort had chronologies that were out of date by 6 months or more (with 27 months being the highest). Children who were subject to CP Plans were most likely to have chronologies that were a year or more out of date.
- The quality of Chronologies varied considerably across teams, most especially between Early Help and Statutory Teams. Generally, Early Help chronologies were more casework focused (home visit dates, TAF dates, allocation/closure dates) and less focused on significant events in the life of the child/family. As a result, they tended to provide less overview of the child/family's lived experiences and were less likely to be a useful tool for identifying trends/pattern in the family's timeline. The statutory teams performed better in this area, often beginning the chronology from the birth of the child, and also covering key events. However, the main area for improvement is consistency in the quality of recording. In summary, there is a training need in this area. Teams require additional support to improve their competency around creating and maintaining a Chronology Document that provides coherent overview of significant events in the child/family's timeline.

ASSESSMENTS

- It is generally accepted that 'Good' Assessments form the foundation of 'Good' decision making. In this respect, a sample of S.47 Inquiries were audited in Spring of 2021, specifically where the inquiry concluded with NFA. This audit activity highlighted that the decision not to proceed to ICPC was appropriate in almost all cases except one. Another short audit activity was completed in Summer 2021 that examined S.47 cases where the ICPC resulted in CIN plan being developed as opposed to progression to CP Plan. Within this audit cohort, it was found that the decision to present the case to ICPC was mostly evidence based and was justified. Thus, in some respects assessments are supporting good decision making in cases where risk of significant harm is present. However wider scale audit activity is needed to test the consistency of this across all teams.
- Within 'This Child' audit programme, in 60% of cases, the 'Assessment' section of the casework was graded 'Good' or above. The main areas of 'Good Practice' were analysis or risk, identification of needs/strengths, consideration for the child's whole journey, views of the children and their careers being incorporated, consideration for family history and context. In 40% of cases where the grading was 'Requiring Improvement' or below, the main issue identified repeatedly was timeliness; specifically, updated assessments not being initiated within appropriate timescale. The quality of the assessment itself was only identified as a concern in very few cases.

- Within the Fostering Audit activity that was completed over the Summer of 2021, the 'Initial Enquiry, Assessment and Approval' section was graded as 'Good' or above in 73% of cases. Within this cohort, it was identified that assessments were timely, there was evidence of appropriate agency checks being undertaken and there was evidence of assessments being completed at different stages of the carers' career to evidence their continued suitability for the role. The main areas of improvement for the cases that were rated less than 'Good' were timeliness of the assessments and delay in ADM ratification.
- A selection of cases were audited for the Safeguarding Practice Improvement Group in September 2021 where domestic abuse was identified as a primary area of concern. Within this audit activity, it was identified that male perpetrators were routinely engaged in DA assessments. This is especially positive as it places the Service in a better position to engage this group in meaningful interventions and also supports the Service's focus on shifting from placing excessive responsibility on the victim to effect change.
- With regards to the Thematic and Individual audits completed between January and October 2021, where an audit grade was provided for the 'Assessment' Section of the casework specifically, 62% were rated as Good or above. Within this group, there was significantly more 'Good' or 'Outstanding' assessments identified in the Jigsaw and SAT teams. There was less consistency in the quality of assessments in other teams (AST, YOT, LAC, PACT).

PLANS

- Within the Thematic and Individual audits completed where Core Audit Tool was used, 43% were graded as 'Good' or above for the Planning section of the casework. Early Help and Pathway Teams were rated highly within this cohort. It seems that services whose work centred more on management of risk (such as PACT and YOS) struggled more in this area, with greater percentages being graded as Requiring Improvement. Evidence of good practice that were identified within this audit cohort were, Plans being led by young people and permanency being achieved in a timely way. For Early Help cases, it was identified that Goals within Plans were SMART, there was Joint Agency input in the Plans and the Plans corresponded well to the areas of need identified. The areas of improvement within the PACT service in particular was greater consistency in the quality of Plans, more timely reviews of Plans, avoidance of delays where cases require escalation and avoidance of delay in the implementation of actions on Plans. More generally, it was identified that greater focus was required on achieving SMART plans across all teams.
- Within 'This Child' audit cohort, it was identified that in a majority of cases, Plans were child focused and were inclusive of the child's'/parents' views. Some of the areas of improvement that were identified were large gaps between the completion of assessments and the development of CIN Plans. It was identified that this left room for drift. It was also identified that Plans needed to be more 'SMART' and Reviews of Plans needed to be timelier. This outcome is reflective of the findings of the above audit activity also. Within 'This Child' audit cohort, 52% of the audits were graded as 'Good' or above for the Planning section and 48% were graded as Requiring Improvement or below.

- With regards to the LAC/Care Leavers audits of Summer/Autumn 2021, the 3rd audit cohort that offered in-depth reviews, concluded with 55% of cases being graded as 'Good' for the Planning section of the casework and 45% as 'Requiring Improvement'. The areas of good practice were child centredness of Plans, incorporation of children's/YP's wishes, recognition of growth and difficulties and good recognition of needs. The areas of improvement were Plans not being updated in a timely way, Plans not being sufficiently SMART, and actions not being progressed in a timely way. Within the 1st and 2nd audit Cohorts, it was identified that Care Plans needed to include analysis of the outcome of statutory visits. Overall however, the majority of the CLA and Pathways plans were identified as being of good quality and being child centred.

VISITING

- The LAC/Care Leavers audits of Summer/Autumn of 2021 focused extensively on the quality and frequency of visiting. Out of the first and second audit cohorts that comprised of 123 cases, it was identified that 44% of children were not seen within agreed timescales. In a significant number of cases, the reasons for the visit being out of timescale was not clear/not recorded. In a few cases, SW sickness or absence was cited as the cause. Slow improvement is however being noted in this area. For example, during the third audit cohort, cases found where the manager explicitly clarified the cause of delayed visits. However, more concerted effort is still required to embed this practice across all teams. On a positive note, 56% of children from the 1st and 2nd Audit cohorts were seen withing the agreed visit frequency. Additionally, in 87% of cases, it was found that the frequency and quality of the visits was meeting the child's needs.
- The impact of Covid restrictions was explored at length within the 1st and 2nd Audit Cohorts. Overall, it was identified that visits for most children in this cohorts changed to 'virtual' during the initial Covid lockdown period. Some good practice was still maintained nonetheless during this time. For example, it was found that conversations with children were still meaningful and in-depth, difficult issues were still addressed virtually, children were still spoken to alone and children coped well with video calls. However, there were areas where the change was less positive; for instance, where children had communication difficulties and or where they were hospitalised.
- Within the LAC service overall, there is a greater proportion of practitioners who routinely write visit records to and for the child. This practice is less consistent in the other statutory teams that hold LAC cases (i.e. PACT).
- Within 'This Child' audit cohort, 86% of children were seen in accordance with agreed visit frequency. It was additionally noted that visits were linked to the Plans for the child, there was evidence of trust bond being created between children and practitioners, in some cases the practitioner made more frequent visits than agreed in order to build a relationship with the child and the voice of the child was evidenced well in the visit records. The areas of improvement noted were that the use of 'visit recording template' was not consistent. This also correlated to the lack of consistency in the quality of visit records. Additionally, it was noted that the voice of the child needed to be evident

consistently, the progress of the child's plan needed to be more explicit, and more reflection/analysis was required of the information gathered during visits.

- Within the thematic and individual audits, 'visiting' was explored within the 'Intervention' section of the audit framework. In 70 cases where a grade was given for this section specifically, 36 cases were graded as Good or higher; 23 cases were graded as 'Requiring Improvement'; and 11 cases were graded as inadequate. Within the inadequate group, visits were significantly out of timescale, or not recorded or were of poor quality. Also, there was limited evidence as to how the visits were linked to the Plans, there was limited evidence as to how they were progressing Plans and there was no evidence that children were spoken to alone or that direct work was completed with them.

SUPERVISION

- Within the thematic and individual case audits, where a grade was offered for Supervision specifically, 46% were graded as RI, 43% were graded as Good or above, 11% were graded as Inadequate. Interestingly, cases where 'Inadequate' was given for Supervision, were more likely to receive similar grading for the Intervention section of the audit (i.e. 75%). The same trend was observed for cases where 'Good' was given for the Supervision (i.e. 89%). This highlights direct correlation between the quality of management input and the quality of service offered to families.
- In 'This Child' audits, 40% of the Supervision section was graded as good or above and 60% was graded as requiring improvement or lower. The areas of good practice identified were; focus on the referral concerns, clear plan around next steps, supervision tool being used with clear notes of discussion that had taken place, supervision notes providing clear plan of how to move the case forward, evidence of the needs of the child being reviewed and the ongoing changes being implemented. In the majority of cases where 'Requiring improvement' was given, supervision template was not used consistently, supervisions were out of timescale, some of the content of the supervision was the same with minimal variant, some of the supervision notes were hard to follow and there was no evidence of reflection (i.e. on children's wishes/views or the family's history).
- Within the Fostering Audits, 45% of cases were graded as Good or above for Supervision and 55% as Requiring Improvement or below. Within the latter group, it was identified that in some cases management oversight was significantly poor with limited recording of supervision, supervision was outside of SCC Policy of bi-monthly and aspects of the supervision form were not completed (including reflective analysis). The areas of good practice were provision of analysis of the child's progress/contact/plan for the future, analysis of placement stability, reflective case discussion pertaining to the individual children's needs and detailed handover supervision from one manager to another.
- Consistency in management structure within services/teams has had significant bearing on the quality of supervision overall. Typically, the PACT/LAC teams who have seen high management turnover and have seen many cases being supervised by a succession of managers have performed less well in the audits, in comparison to Jigsaw and AST for instance, where there has been greater level of stability.