



Rutland County Council

Children's Services Quality Assurance Case Audit Annual Report April 2016 – March 2017

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1. Introduction

- This annual report provides a summary and analysis of audits completed during the period from April 2016 to March 2017
- Audit work undertaken falls within the scope of the 'Quality Assurance and Performance Framework'
- During this period, there has needed to be some flexibility in the schedule and themes of the audits completed, to reflect our actions taken from the learning from practice and to inform our preparation for the Ofsted Single Inspection Framework
- Rutland's Ofsted inspection of services for children in need of help and protection, children looked after and care leavers took place from 14th November 2016 to 6th December, and the case file audits completed for the inspection during this period are documented in this report
- In addition to scheduled auditing in Early Help and Children's Social Care, Early Help have also carried out quality checks of external Early Help Assessments and thematic audits of the child's voice in case files – these reports are included in the appendix 1 at the end of this document
- Service user feedback has also been obtained and a summary of this can be found in appendix 2
- Outside of the audit programme a series of audits will have been undertaken as the need arose, for example safeguarding check of all CWD cases in April 2016 and auditing of cases for the LSCB multiagency quarterly audit process

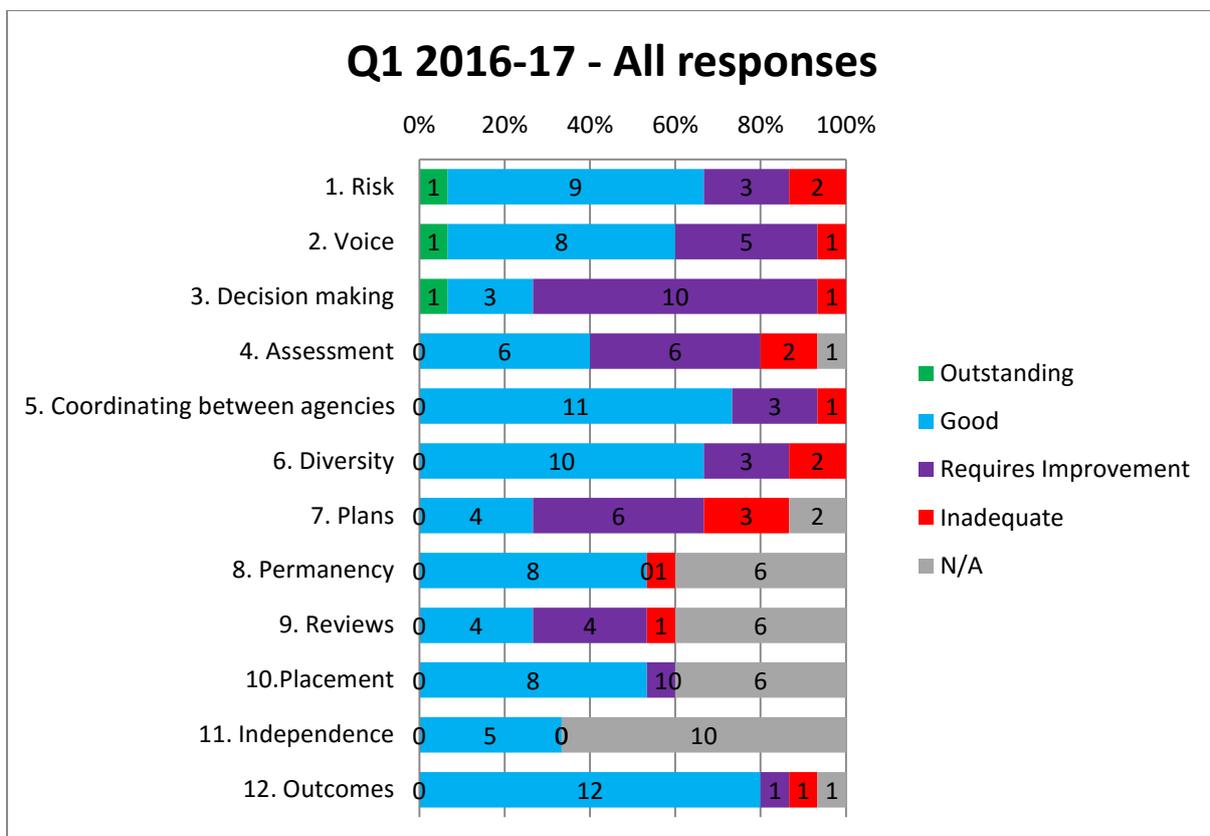
Table 1: Shows number of cases audited during the period April 2016-March 2017

Period	No. of audits completed	No. of audits moderated
Q1 April 16 – June 2016	15	4
Q2 - July 16 – September 2016	40*	3
<i>August 2016 - All CP cases were audited – 30 cases* (included above)</i>		
October 16	No audits completed due to inspection preparation	
November-December 2016	Ofsted auditing of 10 case files	
(Q4) January 17 – March 17	21	0

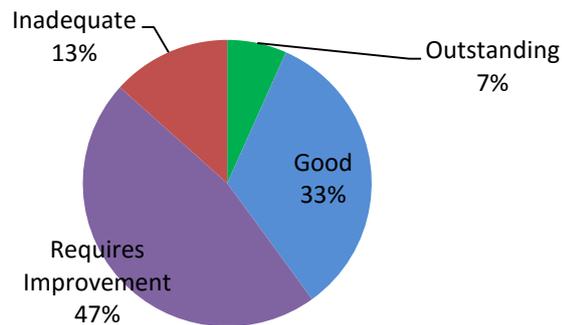
SUMMARY OF AUDITS - Q1 2016-17

Analysis Q1:

- 15 audits were completed in Q1 2016-17
- 6 of those audits were moderated
- Of the 15 audits completed, 1 was Outstanding, 5 were Good, 7 were Requires Improvement and 2 were Inadequate
- Areas of strength were:
 - Identification of risk
 - Coordination between agencies
 - Quality of placements
 - Outcomes
 - Permanency
- Areas for development:
 - Children, YP and families being involved including voice of the child
 - Decision making being timely and effective
 - Quality of assessments
 - Quality of plans
 - Children & YP benefiting from regular reviews



Overall Judgements - Q1 16-17

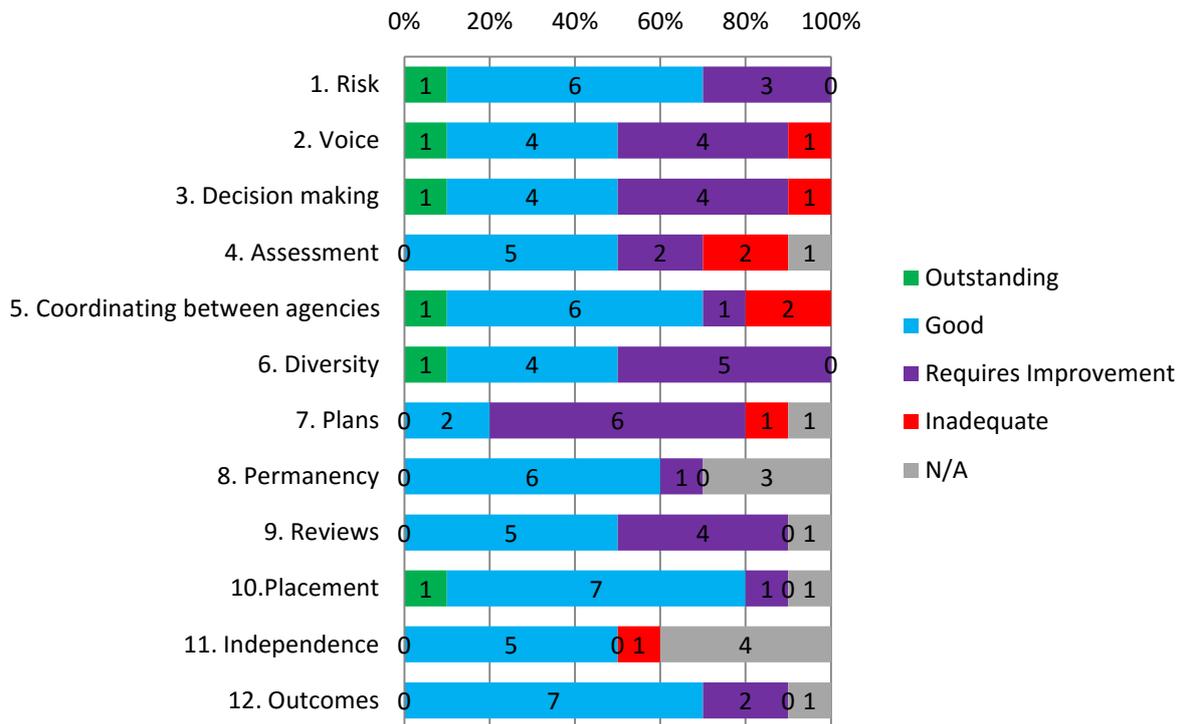


SUMMARY OF AUDITS – Q2 2016-17

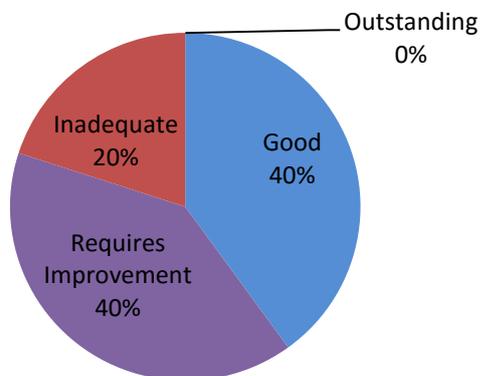
Analysis Q2:

- In total 40 case file audits were completed in Q2 2016-17
- This figure includes a thematic audit of all 30 Child Protection cases in August 2016 (*see further detail and analysis below*)
- Of the 10 'scheduled' audits completed, 4 were Good, 4 were Requires Improvement and 2 were Inadequate
 - 3 of those audits were moderated
- From the 10 audits; areas of strength were:
 - Identification of risk
 - Coordination between agencies
 - Quality of placements
 - Outcomes
 - Permanency
 - Preparation for independence
- Areas for development:
 - Children, YP and families being involved including voice of the child
 - Decision making being timely and effective
 - Quality of assessments
 - Quality of plans
 - Children & YP benefiting from regular reviews

All responses



Overall Judgements - Q2 16-17



August 2016 – Thematic Audit of Child Protection

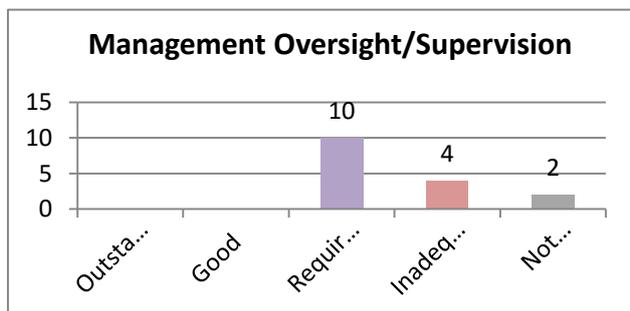
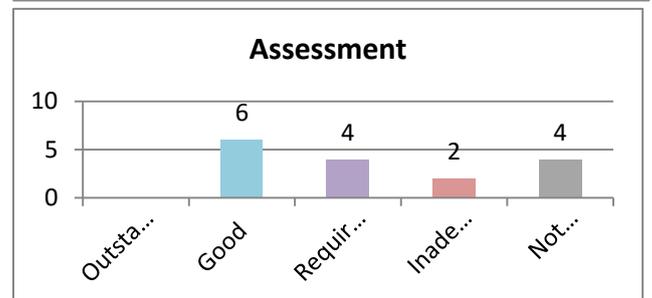
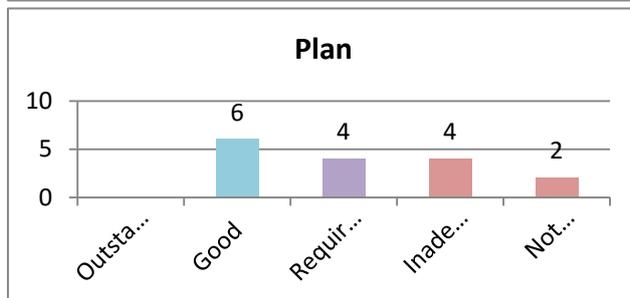
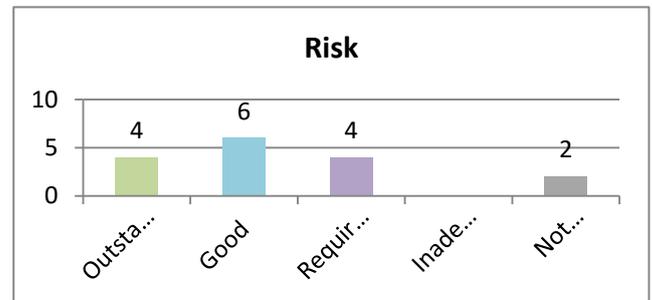
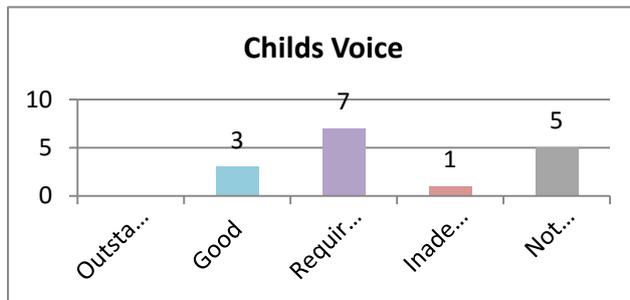
August Child Protection audits were recorded on a thematic audit tool, looking at:

- Child's voice
- Risk
- Assessment

- Plan
- Management Oversight

Type	Outstanding	Good	Requires Improvement	Inadequate	Not recorded
Childs Voice		3	7	1	5
Risk	4	6	4		2
Assessment		6	4	2	4
Plan		6	4	4	2
Management Oversight/ Supervision			10	4	2

	Outstanding	Good	Requires Improvement	Inadequate
OVERALL JUDGEMENT	0	7	17	6



Analysis of Child Protection case file audit:

- Visits to take place in line with recommendations in the CP plan and recorded on the child's file
- Children seen alone and bedrooms also seen
- Supervisions to take place routinely

- Stronger and more consistent management oversight
- SMART plans addressing all risks
- Child’s voice to be clear and evidenced in the child’s file – including wishes and feelings
- Stronger analysis
- Chronologies and genograms to be kept up to date
- Monitoring for disguised compliance
- Use Signs of Safety
- Core groups held, on time and recorded
- Ensure effective information sharing, particularly with health
- Ensure effective joint working – Early Help/Social Care
- Ensure current risk isn’t looked at in isolation – consideration should also be given to historical information on the child’s file

November 2017 - Ofsted Inspection – Case Audit Overview Report (Quarter 3)

1. Introduction

- Ten cases were selected for audit for the November 2016 Ofsted (Single Inspection Framework) of Children’s Services in Rutland County Council.
- Each of the ten audits provides an evaluation of case strengths and areas for improvement, and this report brings these together into a number of key themes.
- The audit report provides case examples drawn from the ten audits to illustrate the thematic findings.
- Each of the ten audits is graded overall (across outstanding, good, requires improvement and inadequate), and within each audit twelve key practice areas are judged individually across the same four point scale.
- The ten cases were audited by senior practitioners and team managers within Rutland children’s services, and each of them moderated by a different senior or team manager.

Profile of the cases audited:

Cases by age	No. of cases
Under 1 year	1
Age 1 to 5	2
Age 6 – 9	2
Age 10 – 14	2
Age 15 and over	3
TOTAL	10

Table 1 – Age summary of audited cases

Cases by type	No. of cases
Early Help	0
Child Protection	2
Child in Need	2
Looked After Child	3

Adoption and Permanence	1
Care Leaver	2
TOTAL	10

Table 2 – Type of case audits

Table 3 below shows a summary of the judgement for each of the 12 sections of the 10 case audits undertaken for inspection.

- Out of all the section judgements made (n=120), 3% were inadequate, 51% Requires Improvement, 42% were Good (4% were ‘not applicable’).
- For the overall judgement, six were Requires Improvement and four were Good.

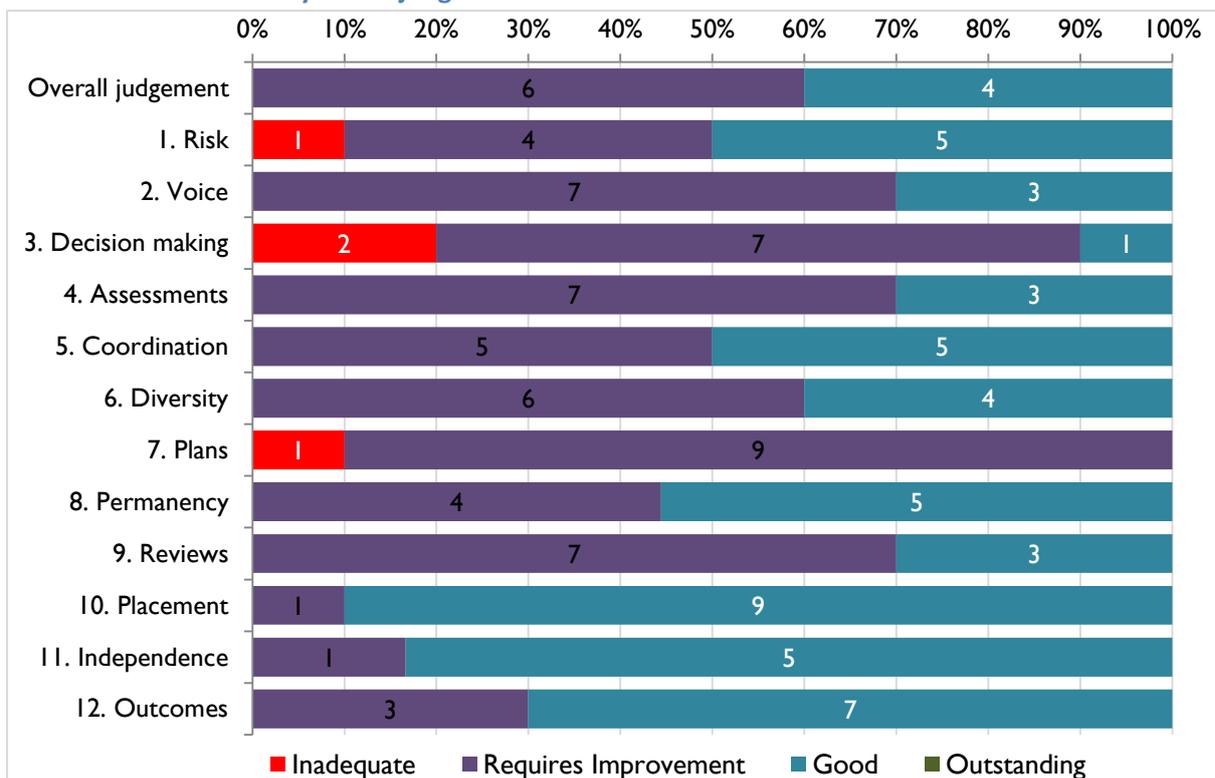
Across all areas, the best judgements were against the following sections:

- ‘Placements’ received the best scores, with 9 out of 10 case audits judged as Good and 1 as Requires Improvement.
- ‘Independence’ where 5 out of 6 judgements were Good and 1 Requires Improvement (4 were ‘not applicable’).
- ‘Outcomes’ where 7 out of 10 were judged Good and 3 Requires Improvement.

The sections which scored less well in the judgements were:

- ‘Decision Making’ which was judged as Inadequate in 2 case audits, Requires Improvement in 7 and Good in 1.
- ‘Plans’ was the only section which did not receive a Good judgement on any audited case; 9 were judged Requires Improvement and 1 was Inadequate.

Table 3 - summary of the judgement for each of the 12 sections



2. Feedback from parents/carers and partner organisations

- As part of this process, feedback from parents, carers and partner organisations was sought and this was generally positive.
- 9 out of 11 parents/carers responding said that the worker took their views into account sometimes or always, with 2 saying that they never did.
- Feedback was also positive in relation to the worker making it clear what they were worried about and what they thought needed changing (8 stated that they did this and 2 that they did not)
- In relation to whether they thought the worker had helped them and their family (8 said yes and 3 no).
- During the process, 6 parents said that they were told what they could do if they were unhappy with the service and 4 stated they were not told.

3. Conclusions, key learning and next steps

In summary, the audits produced the following learning and next steps for Rutland County Council's children's services:

- The children are safe and outcomes for them and their families are consistently positive and demonstrating progress.
- Relationships between Social Workers/practitioners and families are strong, well established and valued.
- The quality of audit work undertaken by senior and team managers is variable – a particular focus on evaluative inquiry is required to drive further improvement in this area.
- Management oversight and clear decision making, especially in complex cases is improving, however there remains inconsistency.
- Case recording often lacks rigour, and there are missed opportunities to champion best practice where it is evident.
- There is an opportunity for the service to use Signs of Safety as a more effective, routine reflective practice tool
- Although the voice of the child is often evident within casefiles, it is much less common for there to be a 'golden thread' connecting the child's voice to action and progress within the child's life
- SMART plans are not routine and well-established but it has featured in recent all-service training and development
- Evidence of good practice leading to better outcomes could be better connected to the child's journey within the case file.

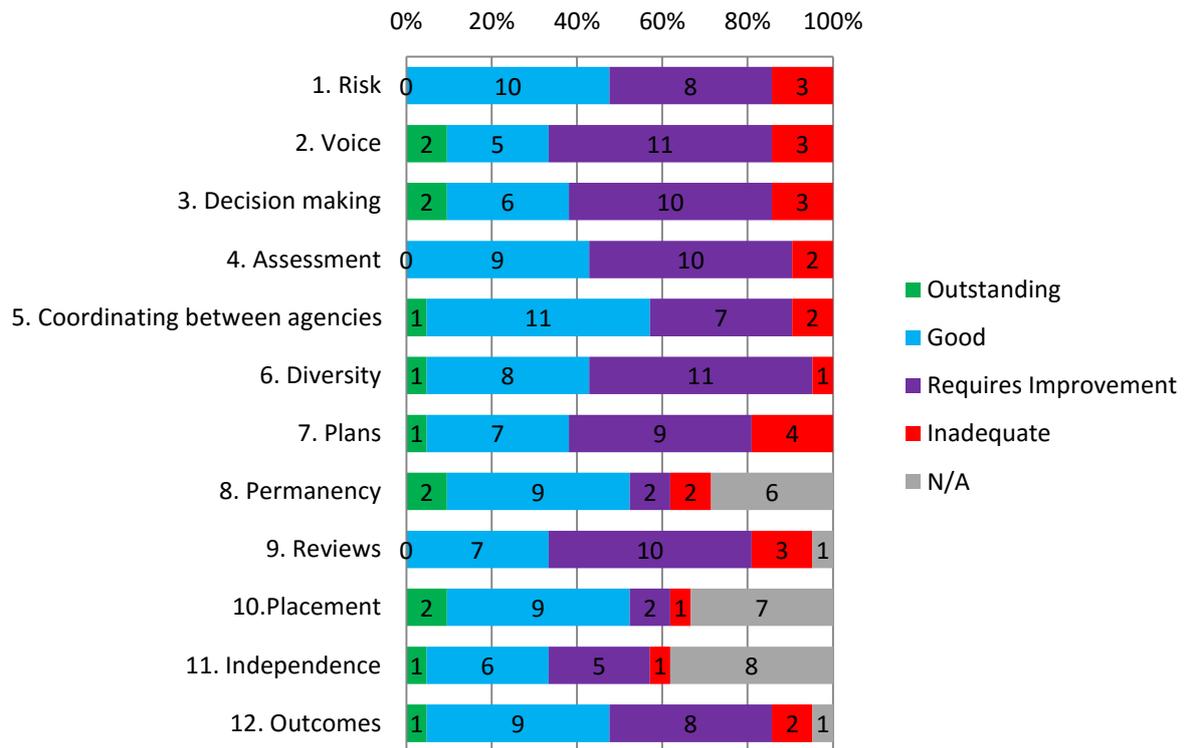
SUMMARY OF AUDITS – Q4 2016-17

Post Ofsted, we have continued with our scheduled auditing but focusing on all categories each month – Early Help, Child in Need-Children with Disabilities, Child in Need, Child Protection, Children Looked After and Care Leavers.

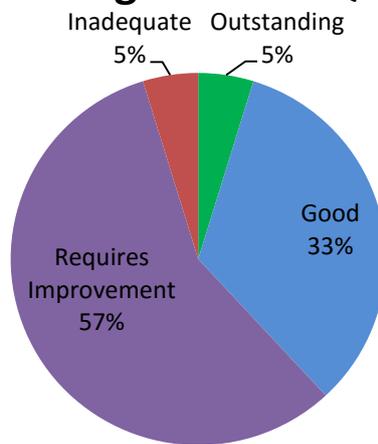
Analysis Q4:

- 21 case file audits were completed in Q4 2016-17
- Of the 21 audited completed, 1 (5%) was Outstanding, 7 (33%) were Good, 12 (57%) were Requires Improvement and 1 (5%) was Inadequate
- From the 21 audits; areas of strength were:
 - Quality of placements
 - Permanency
- The following areas saw audits where practice was identified as being Outstanding:
 - Children, YP and families being involved including voice of the child
 - Decision making being timely and effective
 - Coordination between agencies
 - Consideration and impact of diversity
 - Quality of plans
 - Permanency planning
 - Quality of placement
 - Preparation for independence
 - Outcomes
- Areas for development were:
 - Children, YP and families being involved including voice of the child
 - Decision making being timely and effective
 - Consideration and impact of diversity
 - Quality of assessments
 - Quality of plans
 - Children & YP benefiting from regular reviews

All responses



Overall Judgements - Q4 16-17



Annual Audit Report - Summary, Conclusion and Next Steps

Summary

Audit findings for this annual report period are evidencing some good practice which is encouraging; however we are still seeing variability as we move through the year.

Consistent areas of strength have been identified as coordination between agencies, preparation for independence and permanency planning.

During this reporting period we have been preparing for the Ofsted Single Inspection Framework and in preparation for this our auditing has needed to be flexible and responsive to the themes required. Following the inspection, our 'Next Steps' action plan clearly sets out any actions required along with timescales.

During the first half of the annual period we had a transient workforce with all of the managers as well as a considerable number of practitioners in children's social care being interim. Over the last 6 months we have moved from interim to having all permanent managers in children's social care which is reflective of the changes that we are now seeing with a stable management team in early help and children's social care.

Contributory factors as follows:

- Practice has improved as the Signs and Safety model becomes further embedded, which is evidence based and a solution focussed approach that identifies and builds upon strengths. The voice of the child, parents, family, carers and professionals is being captured during the assessment process and is informing the intervention required in many cases which in turn improves the outcomes for our service users and reduces the need for prolonged intervention.
- Management oversight is now evident and has improved following the introduction of monthly multi-agency panels that have provided the opportunity to discuss complex and concerning cases which in turn has led to clear and timely decision making. The panel chair actively encourages creativity, participation and transparency which is healthy in regards to motivating staff and providing a service that 'fits' the needs of our service users.
- Reflective supervision has provided an opportunity for critical thinking and appropriate challenge. In the last quarter there has been a shift from auditors completing desk top audits to completing the audit with the practitioner which has received some positive feedback from staff. Case auditors have endeavoured to work with practitioners to gather and analyse the findings and have actively encouraged them to judge their own work which has been a positive learning experience for them as opposed to feeling 'done to'. When actions have been identified they are understood and completed in a timely manner thus creating a level of accountability, removing resistance to change and further drift.
- From conversations held with staff and feedback from service users, it is possible to say that morale has improved as a result of the learning and accountability culture and has created a healthier environment, relationships and outcomes for our service users. Practitioners are able to see the benefits when they invest their time to engage, empower through partnership working, use evidence based practice that manages risk whilst building upon the strengths and are happy to 'showcase' their work through their case recording. This is encouraging as a lot of good work

was previously completed but not captured by workers who did not fully appreciate the importance of recording.

Conclusion

In general the case audits now give the reader a good insight into the child's world, assessments show their journey and plans have evolved in line with the individual child's needs. The learning and accountability culture adopted in Rutland has provided workers with the resources and support to enable them to embrace the changes that needed to be made to practice and in regards to processes which can be a challenge. Themes have been identified from the case audits which have been used constructively to develop learning workshops as well as identifying specific tasks for the worker and manager.

Next Steps

The Safeguarding and Quality Assurance service will continue to work closely with Children's Services to ensure that there is independent scrutiny and challenge from a 'critical friend'. The service will continue to undertake regular case auditing as we believe it is an integral part of the learning and development process.

Our Ofsted 'Next Steps' plan includes actions which are realistic and achievable addressing areas for further development such as training programmes to include workshops for staff, opportunities for joint working, further embedding Signs of Safety in all areas of our work with children and families, and strengthening management oversight, supervision and case recording.

Services for children with special educational needs and disabilities moved into Early Help services during the latter part of the reporting period and will now fall under the Quality Assurance and Performance Framework to include bi-monthly audits of EHC Plans.

We will continue to involve children, parents, extended family, carers and other professionals in the process as we believe that it is important for them to tell us about their experiences so that we can learn and improve.

We will 'showcase best practice' and will ensure that actions are completed in a timely manner when concerns are identified. We will endeavour to understand the difficulties experienced by workers, whether that be technical or other as we realise that it can be detrimental to our service users and their relationships with professionals.

We will continue to work to remove any barriers and resolve any difficulties to achieve positive outcomes for children and their families. Following our Ofsted Single Inspection Framework inspection we will continue to review and monitor actions against our 'Next Steps' plan that relate to Quality Assurance and Performance. This will be to ensure management oversight and supervision continues to play a critical role in all practice, we continue to strengthen our practice across children's services, the Signs of Safety approach is embedded in all work with children, young people and families, and that we continue to support our workforce to work to a consistently high standard, achieving the best outcomes for children, young people and families which are achieved in a timely way.

Appendix 1 – Quality Checks of EHA and Thematic Audit of Voice of the Child

Name of Auditor: Beatriz Perez Moreno, Early Help Co-ordinator.

Date of Audit: 16/08/2016

The purpose of this exercise was to select 10 random cases from the Early Help Tracker trying to find evidence of how the voice of the child is taken into consideration when creating a plan and the support that has been offered to the whole family. The cases selected are currently open to the Targeted Intervention Team (please note that these cases represent cases supported via: single agency, internal and external TAF and joint working with social care).

The results are based on evidence found on recordings from LIQUIDLOGIC (as per data found on 16/08/2016) for cases currently open, concentrating in the last 6 months work completed with the family.

	Gender	Age	Present at TAF	Evidence of the voice of the child in the plan	Evidence of 1:1 work completed with this child	Evidence of child seen / Observations made (Family visits, activities)
1.	Male	9	No information recorded on the system	No information recorded on the system	No information recorded on the system	✓
2.	Male	14	X	✓	✓	✓
3.	Male	2	✓	X	✓	✓
4.	Male	7	Joint working	X	X	✓
5.	Male	15	Joint working	X	✓	✓
6.	Female	10	Single agency	X	✓	✓
7.	Female	5	No information recorded on the system	No information recorded on the system	No information recorded on the system	No information recorded on the system
8.	Female	9	1 st TAF cancelled by the family	1 st TAF cancelled by the family	X	✓
9.	Female	10	X	✓	✓	✓
10.	Female	9	X	X	X	✓

Findings

Present at TAF	Evidence of the voice of the child in the plan	Evidence of 1:1 work completed with this child	Evidence of child seen / Observations made (Family visits, activities)
10%	20%	50%	90%

Observations:

Case 1

There is evidence that there have been TAF meeting and direct work started with the family based on case notes made on supervision on the 03/06/2016. However there is no record on the system of TAF meetings or direct work with the children.

Case 2

It has been noted that they have been two TAF meeting on record since the case started. This child's views were taken by the worker before the first TAF meeting and his views has been clear represented at the meeting and recorded. This child chose to attend another event on the school on the day of the meeting and there is evidence in the case notes that the lead of the case gathered his views about how things are progressing in a following home visit (recorded on case notes).

Case 3

This child is only 2 years old and has a disability who affects his communication skills and development. It has been noted that the lead has been using observation of his behaviour, feedback from practitioners (joint visit with SEN Team), activities (colouring) to engage the child and try to understand how life is for this child.

Case 5

This case is joint working with social care at CP level therefore there are not TAF meetings. There is evidence that the TIP worker has spoken or observed the children during visits. No evidence can be found of 1:1 work completed with this child; however, it is not clear if the role of the TIP (Changing lives) is more to support the adults in the family regarding Domestic Violence and Alcohol misuse and the impact that this is having on the children.

Case 5

This case is joint working with social care. The TIP worker is supporting the young person offering mentoring sessions. There is no evidence of that the case has had a review meeting.

Case 6

This is a very good example of working with children of different ages and how to get their individual views even if both children were present during the sessions. However, there is not a plan in place recorded.

Case 7

No evidence of involvement logged on the system, therefore unable to score.

Case 8

There is evidence that the worker has made efforts to arrange a first TAF meeting as this case was allocated to her 5 weeks ago but family cancel the meeting. Therefore unable to find evidence of children attendance to TAF meetings or their voice being taking into account when action planning.

Case 9

This child was not present at the TAF meetings however there is evidence that his views are being represented and shared. There is evidence that this child has been seen with their family and on her own and different resources have been used to get their views (i.e. My book of worries).

Case 10

This child hasn't attended a TAF meeting and her views are always represented by school and/or parents. No evidence of direct work with the child. However, case notes (i.e. supervision 28/06/16) clearly states that the lead is worried about the fact that this child does not want to be part of direct work with her due to have numerous professional involved previously. Despite the child not being directly involved with the lead of the case it is felt that the lead has a good understanding of how life is for this child.

Recommendations:

- ✓ It is not clear for some cases if case work is up to date on the system as it seems to be gaps on the information recorded.
- ✓ It is felt that most children are not actually attending TAF meetings. However, some cases evidenced the reason behind this (i.e. child chooses not to attend). There will be times that it is not appropriate for a child/young person or they may choose not to attend their TAF meeting. However, I would recommend that if a child doesn't attend a TAF meeting is clear **stated the reasons why and who is representing their views** and these are taken into account when action planning.
- ✓ It has been noted that when a TIP offers support to a child open to social care (joint working) not always the work completed by the TIP is taken into account on action planning or assessments completed by the allocated social worker.

Name of Auditor: Beatriz Perez Moreno, Early Help Co-ordinator.

Date of Audit: 11/04/2017 (7 month period August 16 – February 17)

The purpose of this exercise was to select 10 random cases from the Early Help Tracker trying to find evidence of how the voice of the child is taken into consideration when creating a plan and the support that has been offered to the whole family. The cases selected are currently open to the Targeted Intervention Team (please note that these cases represent cases supported via: single agency, internal and external TAF and joint working with social care.

The results are based on evidence found on recordings from LIQUIDLOGIC (as per data found on 11/04/2017) for cases currently open, concentrating in the last 6 months work completed with the family.

	Gender	Age	Present at TAF	Evidence of the voice of the child in the plan	Evidence of 1:1 work completed with this child	Evidence of child seen / Observations made (Family visits, activities)
1.	Male	2	✓	✓	x	✓
2.	Male	9	x	x	✓	✓
3.	Female	14	✓	✓	✓	✓
4.	Female	11	x	✓	✓	✓
5.	Male	11	x	✓	✓	✓
6.	Male	11	✓	✓	x	✓
7.	Male	11	x	✓	✓	✓
8.	Male	15	x	✓	✓	✓
9.	Female	6	x	x	✓	✓
10.	Male	4	Joint working	No TAF plan	x	✓

	Present at TAF	Evidence of the voice of the child in the plan	Evidence of 1:1 work completed with this child	Evidence of child seen / Observations made (Family visits, activities)
Current	33%	78%	70%	100%
(August 2016)	10%	20%	50%	90%

Findings

Observations:

Case 1

The child was only one year old when the case started. There is no evidence of direct work done with the child but there are observations made of his behaviour in groups and home visits. These observations include comments about his behaviour and interactions with his family. The child is mentioned on every plan, including progress and observations made during activities. It is felt that despite of the child’s age and the fact that he just started talking there is a good understanding by the lead of the case of he feels and how life is for this child. This became apparent when during a

significant change on this child's live, the lead and the mother work on how the child is expressing how he feels about it by changing his behaviour and pushing boundaries with his mother.

Case 2

There is evidence of direct work with the child; however it is unclear how this has influenced the TAF plan or next steps decided to support the family.

Case 3

There are separate examples of 1:1 work completed with this young person: one page profile, life road map, wishes and feelings. She also attends TAF meeting and feedback about services put in place as part of the plan and how it is helping her.

Case 4

Different examples of 1:1 work completed with this young person: change balloons, three houses. She didn't attend the TAF meeting recorded on the system but it was clear that the lead worker was representing her views and wishes as this were taking into account when action planning.

Case 5

The child does not attend TAF meeting, however it is clear that the worker meets the child prior meetings to gain his wishes and she shows their work at the meeting to ensure that everyone get to know his wishes and feelings. There is evidence of 1:1 done with the child using different tools as well as the worker created her own to engage the young person. Example of Three houses used with Xbox pictures.

Case 6

There is evidence that the child attended the last TAF meetings and his views were recorded and influence the plan. There is no evidence of 1:1 work completed with the child. There is evidence of the child being talk to during visits but no evidence of the child being seen on his own.

Case 7

The child does not attend TAF meeting however the lead of the case meets the child normally a week before the TAF meeting to get his views. There is also evidence that his views are being shared at the TAF. The worker also asks for consent to read his views at the TAF meeting after every 1:1 session which is considered as good practice.

Case 8

The child does not attend TAF meeting however the lead of the case meets the child normally before the TAF meeting to get his views and there is evidence that his views and wishes are taking into account when planning. There is evidence of 1:1 work done using the Three Houses and his views are shared at the TAF meeting.

Case 9

Record of 1:1 work and visit the child at school, however there is no evidence on the TAF plan and record of the meeting of her wishes and feelings being considered when planning or either mention under child's opinion/view(s) were is stated "Children not in attendance at the meeting but have all

been seen recently to gain their wishes and feelings". Also the case summary explains that the child is open to EH but direct work is carried out with siblings.

Case 10

Joint working case (CIN) case notes on LCS portal.

The case was allocated to the Targeted Intervention Practitioner on the 09/02/2017 for joint working with social care. However, it has been two visits where children were seen and spoke to however there has not been any recent work as family has missed appointment and no responded to phone calls trying to arrange following appointments.

Recommendations:

- Use of toggle bottom in Liquid logic to make it clear when completing an Early Help Assessment, TAF meeting notes and/or closure what parts what statements/actions/views belong to each particular child.
- When completing direct work or 1:1 work with the child to ensure that a case note is completed on the child file explaining the purpose of the work, analysis of the findings and what the worker is going to do with the information.
- Case notes, TAF notes and documents to be saved in all children that the case is open to and information is relevant.

Early Help Assessment Audit Report August 2016

Background

In December 2015 the Early Intervention model moved from the Common Assessment Framework to an Early Help Assessment (EHA) process. Early Help Assessments have since been completed by internal practitioners as well as partners.

As part of our quality assurance framework 2-3 externally led EHAs are audited on a monthly basis by Early Help Coordinators, looking in depth at the quality of the assessment including the voice of the child and smart planning etc. This process aims to identify areas for improvement in the quality of EHAs received from external partners and to inform the team areas in which partners require further support and training.

Progress since first Audit in May 2016

The first audit process was undertaken in May 2016 and analysed cases from Feb-April 2016 period. A number of areas for improvement were identified (see previous report) and since this time school support days have been delivered for, Cottesmore Millfield Academy and Casterton College Rutland. Early Help Coordinators attended the schools to provide feedback on the assessments and training to help improve practice. This included providing advice on undertaking good assessments including case history, ensuring a holistic coverage of needs, how to chair a team around the family (TAF) meeting, the role of a lead practitioner, good case record keeping and tools to engage children in the assessment process e.g. 3 houses.

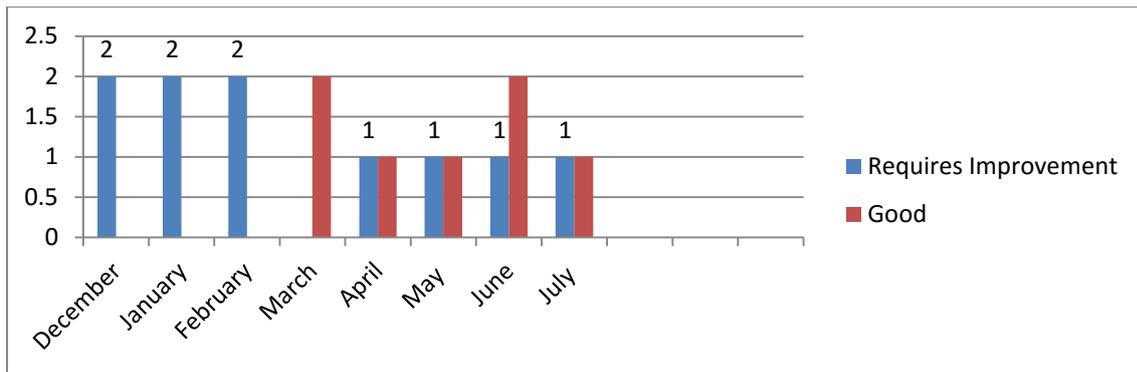
In both cases the feedback was well received by staff who felt more confident as a result. Ketton School have since made arrangements for an Early Help Coordinator to visit the school in September 2016.

Audit Period 2 Report: May- July 2016

A total of seven assessments were audited between May and August 2016, two in May, three in June and two in July. Of the assessments received five were completed by school staff, while the remaining two were completed by Health Visitors.

Findings

Out of the seven audited cases three were scored as 'Good' and four as 'Requires Improvement'. Those audited as good cases, demonstrates the confidence in practitioners since the changes in the Early Help Assessment process. We are seeing more 'good' assessed audits from partners than at the start of the process.



Auditors found that:

- Assessments are being completed with an increased level of confidence.
- Assessments are being completed with more detail than earlier assessments received.
- In most cases the family's view is included through the assessment, however further 'voice of child' training would ensure that the child's voice is specifically heard.
- In those graded 'good' it is clear that the assessment has been completed with the family.
- There were no cases of unsafe practise identified and in no cases no children were at immediate risk.

The common areas for development were:

- Ensuring the assessment is completed in full with all family details included.
- Plans are to be child focussed rather than the parent's needs being at the centre of the assessment.
- Voice of child to be included in assessment.
- In complete or misunderstanding of rating risk with the threshold document.
- A lack of understanding of what support is available to those families they are referring, both by RCC and across other early help services.

Summary

The chart above clearly demonstrates the improved quality of those assessments being received by external referrers. The confidence from practitioners is not only felt by those assessments being received but also in the discussions at the Early Help front door.

There remain common themes for improvement that have continued from the last audit summary. For example ensuring that the voice of child is captured and the lack of understanding or in some cases incomplete risk rating. Following some identified inconsistencies in both referrals and in the effectiveness of joint working, Early Help and Social Care practitioners will work together to support our Police colleagues with some specific training. The support will focus on the understanding of assessing risk for children where DV is a factor and ensuring the appropriate thresholds are being applied in such cases.

In addition a proposed multi- agency Early Help conference to be held later this year by Early Help Coordinators will cover the key areas for development identified through the audit process, as well as areas for development of the new Early Help process itself.

It is however felt that external practitioners are benefiting from the front door and school support days, where quality support and guidance is being provided and tailor made support is available. Evidence suggests that the support is helping practitioners to produce better quality assessments for families.

Next Steps/Actions

- Deliver joint training with Social Care to police colleagues focussing on risk associated with domestic abuse.
- Early Help Coordinators to arrange a multi-agency Early Help conference for late 2016 to include all development areas in both May summary and August.
- Early Help Coordinators recommend that internal referrals/step down assessments are included in subsequent audits as it is felt that the quality of these are varied.
- The Audit tool to be adapted to include, referring service, date of audit received and section for appropriateness for referral.
- Further audits to be completed, 2/3 per month, where available.
- The EHA guidance notes will be reviewed by EH coordinators in line with feedback from internal staff following a peer supervision session, to be held in September.

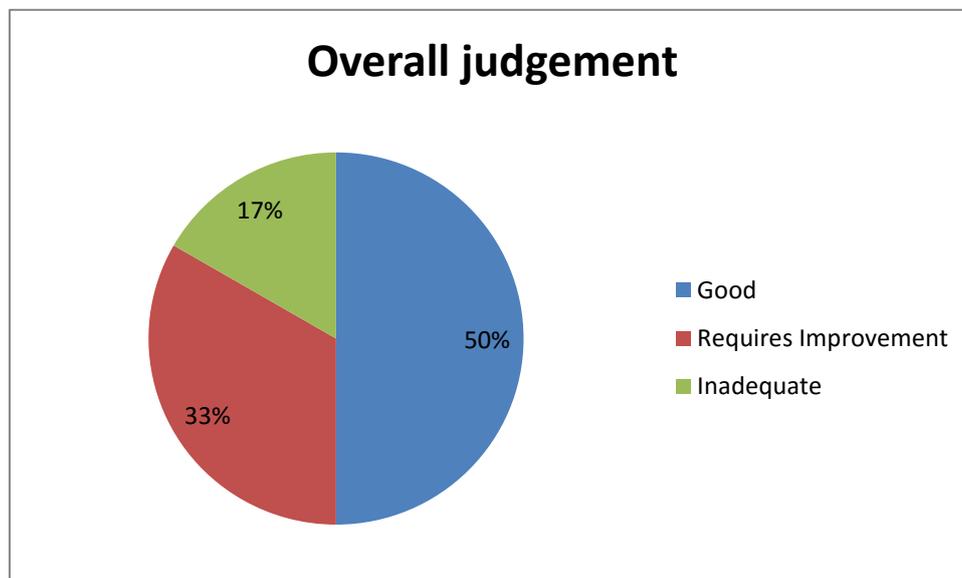
Early Help Assessment Audit Report November 2016

Audit Period 3 Report: August - October 2016

A total of six assessments were audited between August and October 2016, no completed Early Help Assessments were received during August. From the six assessment audited, two are step downs completed by social care, one was completed by Homestart, one was completed by a health visitor and the other two were completed by Education (primary schools)

Findings

Out of the six audited cases three were scored as 'Good' and two as 'Requires Improvement' and one as "Inadequate"



Those audited as good cases, demonstrates the confidence of practitioners since the changes in the Early Help Assessment process. We are seeing more 'good' assessed audits from partners now than at the start of the process.

Auditors found that:

- Despite some of the assessments not including the views of the child and/or parent it was clear that the professionals contributing to the assessment knew the children well.
- Assessments are being completed with more detail than earlier assessments received.
- In those graded 'good' it is clear that the assessment has been completed with the family.
- There were no cases of unsafe practice identified and in no cases were any children at immediate risk of harm.

The common areas for practice development are:

- Wrong paperwork/assessment completed, therefore the case was graded as Inadequate. It has been noted that EH co-ordinators met with the practitioner and delivered training and shared resources necessary to complete appropriate assessment in the future.
- Voice of the child not included on the assessment. Since then resources has been shared with the practitioners to enable them to better gain the views of younger children (My Life, Having my say booklet shared with partners).
- The need for better goal statements. This has been taken into account as one of the subjects for future multi agency training sessions delivered by EH Co-ordinators.
- Step down internal referrals need to contain more information about the specific piece of work and intervention that it is expected Early Help will deliver, as well as, ensure that appropriate consent is gained in writing.

Summary

It is felt that external practitioners are benefiting from the support via our integrated front door and the school support days, where quality assurance and guidance is being provided and tailor made support is available. Evidence suggests that the support is helping practitioners to produce better quality assessments for families.

More work needs to be done to ensure the step down procedure is followed and internal referrals completed by social workers as part of the step down include the voice of the child and their families, as well as, specific information about the support required by Early Help.

Next Steps/Actions

- Early Help Co-ordinators to arrange a multi-agency Early Help conference for January/February 2017 to include the above and previous findings from the audits i.e. goal statements, the voice of the child, etc. BMP/HSS/LH
- The Audit tool to be adapted to include, information on referring service, date of audit received and section for appropriateness of referral and application of threshold. BMP/JT
- Review of the Step Up and down procedure to ensure that reflect changes recently made, including paperwork, consent and Liquidlogic transfer process. BMP

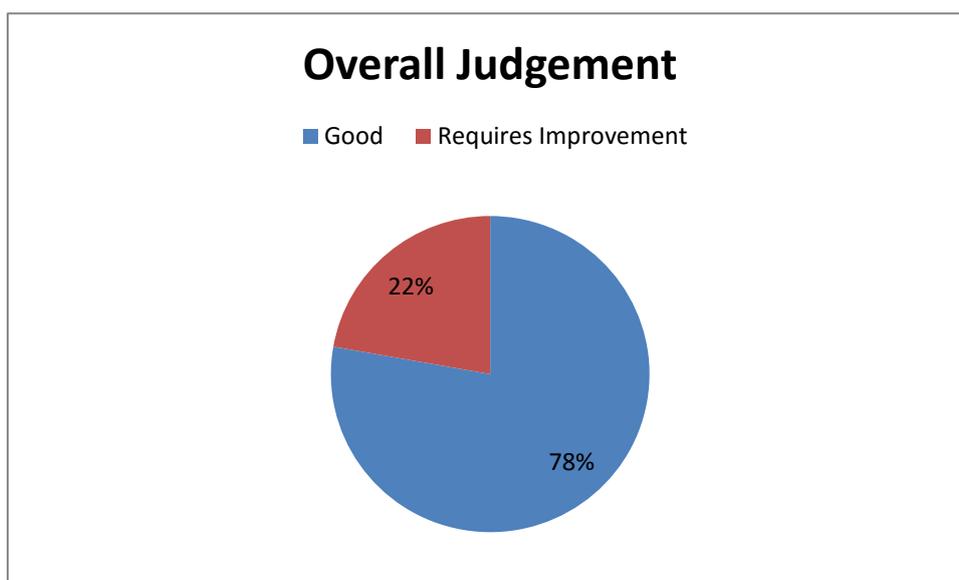
Early Help Assessment Audit Report February 2017

Audit Period Report: November 2016 – January 2017

A total of nine assessments were audited between November 2016 to January 2017. From the nine assessments audited, one was completed by a health visitor, another was completed by an Early Years setting (nursery) and the remainder (seven) were completed by Education.

Findings

Out of the nine audited cases seven were scored as 'Good' and two as 'Requires Improvement'.



The number of cases audited as 'good', demonstrate the increased confidence of practitioners since the changes in the Early Help Assessment process. We are seeing more 'good' assessed audits from partners now than at the start of the process and during this period no EHA audited was judged as Inadequate.

Auditors found that:

- In four of the nine assessments audited details of the children or adults eg Ethnicity, Religion and Language were left blank.
- Only two of the assessments reviewed include details of other practitioners working with the family and that their contributions have been taken into account when completing the assessment.
- All audit bar one showed that practitioners are clearly applying the principles of Signs of Wellbeing.
- It has been noted that wellbeing statements and goal statements are completed but this is not always reflected or included in the family/young person/child wishes and views.

The common areas for practice development are:

- Voice of the child is normally included on assessments; however it is not clearly part of the mapping or planning.
- The need for better goal statements. This has been taken into account as one of the subjects for future multi agency training sessions delivered by EH Co-ordinators.

Summary

It is felt that external practitioners are benefiting from the support via our integrated front door and the school support days. Quality assurance and guidance is being provided and tailor made support is available. Evidence suggests that the support is helping practitioners to produce better quality assessments for families.

Next Steps/Actions

- Early Help Co-ordinators to arrange a multi-agency Early Help workshop/consultation. Planned for 20th June 2017 and will include Voice of the child and how to reflect it in assessment, goal statements and wellbeing statement.
- Unsure of what happens after there is a recommendation/action agreed when an audit is completed. BPM/LH/HSS to discuss the possibility of logging outcome of actions on the audit record or create a record of actions/recommendations to ensure that these are followed up and completed.

APPENDIX 2 - Parent/Carer Feedback					
Q1: Do you think the worker took the views of you and your family into account?	Q2: Do you think your worker made it clear to you about what he/she was worried about and what they thought needed to change?	Q3: Do you feel your worker has helped you and your family?	Q4: During the process, were you told what you could do if you were unhappy with the service?	Q5: Was there anything your worker did really well or anybody who you think was particularly helpful?	Q6. Do you have any suggestions of how Children and Young People's Service can do things better in the future for yourself and/or other families?
Always	Yes	Yes	Yes	Workers saved our lives	Everyone works in the same way that our workers did
Always	Yes	In some cases - yes, some others, no	No (but wasn't necessary)	Changing Lives staff	For SH to help other families how she helped our family
Sometimes	Yes	Yes	Yes	Aiming High staff	Communication with education could be improved and EHCP prioritisation
Always	Yes	Yes	Yes	Worker linked with young person and work done was of great benefit to mum too	More mentors available in the service. More raising awareness of CSE/Grooming, in schools
Always	Yes	Yes	Yes	Really very helpful, supportive and reassuring	Let people know that SC can have a positive impact and not always a negative experience
Always	Yes	Yes	Yes	Worker went above and beyond – developed good relations with other LA which was needed due to the nature of	RCC been very supportive.

				the work involved.	
Always	Yes	Yes	Not sure	SW good with the children – rapport. Made them comfortable.	No
Sometimes	Yes	No	No	No	Too adult focused. Lack of child focus.
Yes	Yes	Yes	Yes	Reward/Star Charts	-
Sometimes	Yes	-	No	Worker been very helpful	Quicker access to relevant services when needed (Mental health)

-END-