

A Guide to Audits in CSSW

Why do we audit?

Our standards of practice are measured against our localised Camden 'Pledge to families' and 'Our Promise to Children' (www.camdenchildrensocialwork.info) They are also measured against a range of legislative and statutory responsibilities, professional standards, national guidance and Ofsted judgments. Case auditing is a key quality assurance mechanism in which to support our continued efforts to deliver on our promises and ensure we are making a positive impact on children's lives.



Our applied systemic 'Camden Model of Social Work' is based on promoting a relational, strengths-based approach to improving outcomes. This is mirrored in our auditing activity which is a collaborative process of engaging social workers, multi-agency colleagues and families to gather direct evidence on the quality of social work practice, decision making and engagement with children. In doing so, we aim to better understand what works and where the barriers and challenges are to delivering high quality professional practice in the context of individual, relational and organisational processes, and structures.

What is the focus of the audit?

The annual schedule of auditing activity routinely looks at the quality of social work practice and outcomes for children and families by exploring and understanding core areas of practice which include:

- The child's Journey, including transitions through the service
- Specific risk factors
- Assessment, planning and review
- Engaging families
- Joint working
- Equalities and Social Graces
- Recording
- Management oversight and decision making
- Impact and outcomes
- Staff wellbeing and practice development
- Social work processes

Who audits?

Auditing is undertaken by a mix of managers auditing case work in their own teams as well as peer auditing across other parts of the service. In addition, independent auditors within the Quality Assurance Unit (QAU), child protection chairs, independent reviewing officers and other senior managers also routinely undertake case auditing work.

What are the different kinds of audits?

There are a range of different audits that take place throughout the year and include:

- 'Early Help/Front Door' audits which focus on thresholds, decision making and transfer between services.
- 'Thematic Audits' which focus on direct practice that has taken place within the last 12 months and is based on a specific theme/area of interest.
- Practice Week which provides senior managers, partners and leaders with an opportunity to hear from and observe our staff on the work they do around a specific

theme and can involve joint participation with our Early Help and Youth Offending colleagues.

- Dip sample audits that take place on a regular basis throughout the year and follow key lines of interest arising from our data performance information.

What to expect when your work has been identified for audit

	The auditor opens a 'Audit Template CSSW' in the child's MOSAIC workflow. This provides the practitioner with a chance to view the document and see what areas of practice will be reviewed.
	The auditor will review the case files covering the period of the last 12 months. This is to ensure the auditor is familiar with the case work and identifies areas for clarity and discussion with the allocated worker.
	The auditor may highlight any compliance gaps in advance so that these can be addressed by the allocated work prior to the audit being finalised (this may include gaps in supervision, case notes, chronology or visits).
	Once the case files have been reviewed, the auditor will arrange a reflective case discussion with the allocated worker and, where possible, their direct line manager. This should last no longer than 1 hour and can be undertaken face to face or via MS Teams.
	The auditor will follow the prompts in the audit template and encourage and support a reflective and collaborative case discussion with the practitioner(s) in which to identify what works well and where the barriers and challenges are to delivering positive outcomes for children and families. The auditor will take a systemic approach to include professional practice in the context of individual, relational and organisational processes and structures.
	For 'Practice Week' only, the auditor will seek to also observe direct practice and with consent from the family, arrange an appropriate activity (such as a home visit, review conference, meeting etc) to include in the audit activity.
	The auditor will also ask the allocated worker to seek consent from the child/young person and their parent/carers to speak to the auditor about their experiences of Camden Safeguarding and Social Work (CSSW). Their feedback, which will follow 5 standardised questions, will be included in the audit template.
	The auditor will triangulate the information from the case records, the reflective case discussion (observations of practice) and feedback from the family to formulate a view of practice and the impact this has had on outcomes for the child.
	The auditor will use the Ofsted Guidance of 'what does good look like' when considering each section within the audit and provide an Ofsted rating, with a final rating provided overall.
	The auditor will provide an overview of areas for development and learning as well as good/outstanding practice. Where appropriate, the auditor will formulate an audit plan that is SMART and clear on what needs to be done, by who and when.
	The audit plan, once agreed, will prepopulate into the next supervision workflow so that practice level actions can be supported and addressed within the supervisory relationship
	Before the audit is finalised, the practitioner(s) will be invited to provide feedback on the audit process and the auditor recommendations, and importantly, on the proposed audit plan. Where there are strong differences of opinion between the auditor and the practitioner the audit and the proposed plan will be reviewed by the Head of Quality Assurance before any final decision is made.
	A percentage of all 'Themed' and 'Practice Week' audits will be presented to the audit moderation panel in which the auditor, allocated worker and line manager are invited to attend. Any final decision rests with the chair of the panel.
	Where there is evidence of Good/Outstanding practice, the senior management team will be notified, and the allocated worker will be invited to engage in completing a Story Board with the auditor. This is then disseminated across the service as part of our practice learning and development and made available to outside agencies, including Ofsted as a way of celebrating high standards of practice.

Appendices: Ofsted Guidance.

‘Good’ looks like...

Referral	Referral shows clear understanding of when appropriate to refer to social care	Referral on agreed format, containing all relevant information and clarity regarding the reason for the referral	Referral responded to promptly (within 24 hrs) and decisions appropriate to identified need	Decision making takes account of previous referrals/contacts	Managers risk analysis and rationale for decision evidenced and appropriate for referral information and history	Evidence recorded on MOSAIC to demonstrate case allocated to qualified social worker promptly and clear expectations of what is required are recorded.			
Basic Information	MOSAIC recording is contemporaneous, concise and analytical and provides sufficient detail to ensure effective safeguarding and focused planning at all times		MOSAIC records indicate that social workers and managers have reviewed and quality assured records	Case recordings are written in plan, jargon free language that would enable a children and families to understand their story, should they request to view their files at a later date.	Files for looked after children include a recent photo.	The child's basic demographics are clearly recorded on MOSAIC including their ethnicity, language and religion where appropriate.			
Assessment	Assessment clearly identifies strengths and areas of concern, provides detailed analysis and includes all members of the household.	Assessment is of a good quality and identifies a clear case plan with relevant analysis of strengths, needs and risk.	Assessments are written in plan, jargon free language that is understandable to parents/carers with explicit explanations of worries/dilemmas, and strengths and safety	Identifies whether appropriate to work as CIN/CP, CLA or NFA.	Assessment includes some analysis regarding multi agency context and this information is used to inform decision making	Child seen alone (where appropriate), spoken to and their viewed recorded and reflected in assessment. Assessment demonstrates a sense of the child. There is evidence of direct work undertaken with the child to ascertain what life is like for them	Diversity and Disability issues addressed. Perhaps – diversity and disability are considered with respect for strengths in diversity and support to address any challenges arising out of diversity and disability	Assessments reviewed signed by manager within timescales. Evidence of some quality assurance by manager	Assessment shared with parents/carers promptly and feedback sought. Outcome of assessment is shared with parents/carers and child (where appropriate) and feedback sought.
Planning	There is evidence to show that the plan is making a positive difference to the child's life.	The plan shows evidence of a good understanding of the child's needs and how these will be met within clear timescales. The plan clearly outlines the day to day actions that	There is strong evidence of the child and family involvement in the development of the plan. This should include family network meetings,	The plan is progressing and meeting the child's needs. Where there is evidence, the plan is not meeting the	The case file recording tells the child's story and evidence progress.	There is clear evidence of discussion and decision making around transitions.	There is a clear trajectory for the work with the family to be completes (it is evident the plan is focused and beings with the end in mind)	Words and pictures explanations are used, and the plan shared with the child.	

		parents and carers will undertake to ensure the child's safety and wellbeing (and is not a list of services to attend).	outlining family and friend support with specific actions for supporting the child's safety and wellbeing.	child's needs, the reasons for this explored and changes made if needed.				
Review	The plan (CIN, CP, CLA) has been reviewed in accordance with statutory and procedural requirements and is responsive to the child, young persons changing needs.		Reviews are convened to allow maximum attendance of family and professionals. Where this is not appropriate, views are sought and feedback given regularly.		Children are actively involved where they have the ability to do so, including attending meetings. (or chair their own reviews?)		Records of reviews are comprehensive and provide detailed analysis of the issues and actions that are required to meet outcomes, including timescales.	
Management oversight	Supervision has been taking place in accordance with supervision policy and is responsive to the social workers needs.	Supervision is reflective, analytical, evidences the application of the Camden Model of Social Work and evidence issues which have been raised. It sets clear parameters regarding required actions, contingencies, and outstanding work, addressing timescales effectively.		Supervision reviews actions of previous supervision and these are complete. Records up to date and fit for purpose.		There is evidence of reflective tools such as appreciative inquiry or case mapping.		There is management footprint in the case records, including management overview and analysis in assessments and review reports.

'Requires Improvement' looks like...

Referral	Referral gave enough evidence that it was appropriate to refer to social care	Referral gives some indication of areas of strength and safety for the family	Referral on agreed format, but not all relevant information recorded.	Referral acted on promptly (within 24 hours) and appropriately	Indication that previous referrals and contacts have been reviewed.			
Basic Information	Danger statements, are evident on file, but not clear and concise in addressing specific behaviours		MOSAIC records provide some evidence of quality assurance activity on records.	Case file recording is of sufficient quality to enable the file to be accessed at a later date if required.	The child's basic demographics are not clearly recorded on MOSAIC including their ethnicity, language and religion where appropriate.			
Assessment	Assessment identifies some strengths/safety and areas of concern. Analysis is limited and may not include key members of the household (including fathers and partners).	Assessment identified a case plan which does not fully address risk/need	There is some consideration of family/friends network support, but this is not fully explored to enlist their help and support for the child/family	The assessment includes some information from other agencies	Evidence the child has been seen and spoken to but there is not a clear record of their lived experience, wishes and feelings, or what they say they need to feel safe.	Some evidence of direct work with the child including use of tools (as appropriate)	Diversity and disability issues considered but not deeply explored.	Assessment uses some jargon and is not fully written with the family as the intended readers.

Planning	There is a lack of evidence to show that the plan is making a positive difference to the child's life.	The plan shows a lack of evidence of a good understanding of the child's needs and how these will be met within clear timescales. The plan does not clearly outline the day to day actions that parents and carers will undertake to ensure the child's safety and wellbeing (and is not a list of services to attend).	There is a lack of evidence of child and family involvement in the development of the plan. There is not a consistent consideration of family network meetings, outlining family and friend support with specific actions for supporting the child's safety and wellbeing.	The plan is only partially progressing and meeting the child's needs. Where there is evidence, the plan is not meeting the child's needs, the reasons for this is not clearly explored with necessary changes made if needed.	The case file recording does not fully tell the child's story and does not fully evidence progress.	There is a lack of evidence of discussion and decision making around transitions.
Review	The plan (CIN, CP, CLA) has not been consistently reviewed in accordance with statutory and procedural requirements and shows a lack of evidence that it is responsive to the child, young person's changing needs.		Reviews are convened but do not consistently allow maximum attendance of family and professionals. Where this is not appropriate, views are not routinely sought, and feedback is not routinely given regularly.	Children are not actively involved where they have the ability to do so, including attending meetings. (or chair their own reviews?)		Records of reviews are not comprehensive and provide limited detailed analysis of the issues and actions that are required to meet outcomes, including timescales.
Management oversight	Supervision has not been taking place in accordance with supervision policy and is limited in being responsive to the social worker's needs.	Supervision decisions are recorded on the child's electronic file but limited evidence of applying the Camden Model of Social Work including reflection and evaluation of the work carried out.	Supervision reviews actions of previous supervision but there is limited evidence to suggest that his has prevented drift	There is evidence the plan is being reviewed, but effectiveness and impact is not fully explored.	There is a lack of evidence of reflective tools such as appreciative inquiry or case mapping.	There is limited management footprint in the case records, including management overview and analysis in assessments and review reports.

'Inadequate' looks like...

Referral	Referral has some gaps with vital information missing or should have been made earlier	Areas of strength/safety is not evidenced (it is highly unlikely that a child/family has no strengths to be noted	Consent is missing when it would be reasonable for it to have been obtained, or rationale for not obtaining consent is not documented.	No evidence to indicate consideration has been given to previous contacts/referrals	No risk analysis evident and rationale for decision making not recorded.	No evidence on MOSAIC to demonstrate the child/young person has been allocated to a qualified social worker, delay in allocation or not allocated.
Basic Information	MOSAIC recording is out of date, unfocussed and does not provide sufficiently clear	Danger statements are not recorded on the case files.	No evidence of quality assurance activity on the child's MOSAIC records.	Case file recording is difficult to understand, inconsistent or incomplete.	The child's basic demographics are missing from the case files.	

	information to support decision making.						
Assessment	The assessment does not identify strengths and areas of concern and provides little or no analysis. Does not include all family members. Risk to the child is not considered.	The assessment uses jargonistic language (ie: developmental milestones, inappropriate behaviour, significant harm) and is not written in language that is plain and clear to parents/carers	The assessment does not outline a clear plan.	The assessment does not identify if CIN/CP is appropriate.	No multiagency context to referral included, despite clear indication that other agencies are involved.	No evidence to say the child was seen of where they have been seen. No evidence to suggest they have been spoken to on their own. No evidence of diversity or disability issues having been considered	Assessment not signed off by a manager. Assessment not shared with the family including the outcome.
Planning	There is no up to date care plan including a pathway plan and there is absence of any of the following: PEP, health plan, placement plan on the case files.	The plan is a list of tasks to complete and places to go rather than a plan of who will do what in the child's day to day life to help them be safe and well.	The wider family network have not been considered as part of the assessment or planning. There is no evidence of the child, young person or the family being involved in the planning and or decision making.	The plan has not been reviewed despite this being required.	The plan is drifting and not being progressed.	There is no or insufficient evidence to demonstrate the child/young person is being visited.	Recording on MSAIC case files in limited or absent, with respect to key issues
Review	The plan has not been reviewed in accordance with statutory. Procedural requirements.	Key family members, the child or professionals are not routinely invited to the review meetings.	Review meetings are not meeting the child's needs and do not act to encourage the child, young person's engagement	Review records are insufficiently detailed to enable clear planning and action	Safety plans are not reviewed on each visit to ensure it is being enacted to meet the child needs. Nor is it reviewed if not meeting the need (after exploring issues of what is getting in the way)	Chronology is non-existent or contains cut and pasted records that are not relevant to the purpose of the chronology	
Management oversight	Supervision has not been taking place in accordance with the supervision policy	Supervision records do not provide an outline of decision making, have no evidence of applying the Camden Model of Social Work and no reflection or analysis and/or do not address concerns.	Supervision has not been effective in ensuring actions are effectively progressed.	There is an absence of quality assurance activity on the case files.	Safety and risk are not clearly recorded and reviewed.	Supervision is directive only and does not use appreciative inquiry, reflective or systemic exploration	There is no management footprint in the case records, including management overview and analysis in assessments and review reports.

