

REPORT:	Update on Audit and QA Activity – operational copy	MONTH:	January 2019
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1) How much did we do?

This report provides an overview of audit activity for January 2019, including the completion of audits against expectations, the growth in the number of auditors through the rolling training programme and other relevant quality assurance activity (e.g. dip samples).

Our expectation is that every Senior Manager, Manager and Advanced Practitioner undertakes 1 high quality core audit per month (unless they are otherwise moderating the audits of their colleagues). We now have a pool of 82 trained auditors and 16 moderators including two external (ex-Ofsted) moderators available for audit activity. We have a further 3 auditors graduating to become moderators in February. For business as usual, we are expecting an approximate pool of 85 auditors and 26 moderators to be available with a completion rate of 90%.

Due to exemptions (see below), 65 children were allocated for audit from across all teams in Children’s Social Care and the 11-25 Service. Seven auditors did not return audits, which, alongside 1 completed audit that did not meet required standards when moderated, resulted in 57 audits completed to expected standards. For January these 57 audits were completed and uploaded to children/young people’s records – the findings of which follow.

There were no formal dip samples undertaken in January due to the Christmas holidays and Ofsted monitoring visit in January.

2) How well are we doing?

This section summarises progress against the targets to grow our auditor and moderator capacity and progress, and learning from auditing and dip sample activity.

The QA pool will grow with training of the next cohort of auditors and moderators in February.

Figure 1 charts the monthly rate of audit completion. In January there were 5 exemptions granted that were not related to maternity, health, or part-time working arrangements; and a further 7 nil-returns. This led to a completion rate of 83%.

This is below the expected completion levels of 90% and is largely influenced by the 7 nil returns (previous months saw <3 nil returns). We had more than double the number of late returns for the January audits. The Christmas break and the Ofsted monitoring visit in January are likely to have had some effect on this.

Fig 1. Audit completion rates: January 2017 – January 2018:

	Q4: Jan - Mar 18	Q1: Apr - Jun 18	Q2: Jul - Sept 18	Oct 18	Nov 18	Dec 18	Jan 19
Completed audits	79	92	81	46	45	57	58
No. of auditors	49	89	154	61	73	82	82
Overall Completion rate	161%	103%	53%	75%	62%	70%	71%
Completion rate less non-operational* exemptions	Not measured				47/62 (76%)	57/67 (85%)	58/70 (83%)

Note: December figures includes 4 completed audits not meeting standard

*** Non-operational exemptions include: extended leave, health reasons, p/t staff who audit bi-monthly, or those leaving GCC.**

Figures 2 and 3 below summarise the audit ratings. It is important to highlight that the audit methodology not only measures the quality of practice, but the impact of that practice for the child/young person. Better ratings should therefore be directly correlated to better outcomes for children, and vice-versa.

There continues to be good and improving practice and outcomes for children evidenced through the work. It is encouraging to see improvements around Good practice (16%) being sustained. Audited work that is deemed of an Inadequate quality (that is failing to attend to children/young people’s outcomes, or worse leaving them at risk of harm), continues to be high (29%) and is increased on recent months.

Fig 2. Audit ratings by month – percentages:

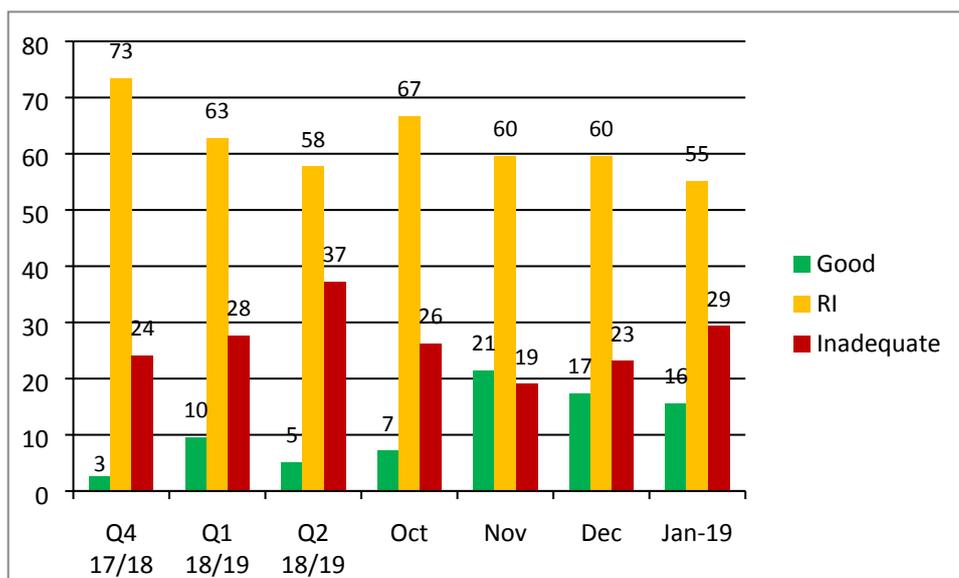


Fig 3. Audit ratings by month – actual numbers:

Month (2018)	Q4: Jan - Mar 18	Q1: Apr - Jun 18	Q2: Jul - Sept 18	Oct	Nov	Dec	Jan 19
Good	2	9	4	3	9	9	9
RI	58	59	45	28	25	31	32
Inadequate	19	26	29	11	8	12	17

Note: the audit that was not uploaded still clearly qualified as a Child of Concern so was included above.

Fig 4. Audit ratings by legal status:

Month (2018)	Children in Need	Children subject to a CP Plan	CiC	Care Leavers
Good	3	4	1	1
RI	11	7	9	3
Inadequate	5	9	3	0

Audit activity over the past 3 months has evidenced a high proportion of inadequate practice in the CiN group, and a fairly balanced split between good and inadequate practice in the CP group. In contrast, the January data indicates a shift in this to a higher proportion of inadequate practice in the CP group. Irrespective of this shift, the higher proportion of inadequate practice remains concentrated in the Safeguarding teams where we have also recognised the highest levels of staff turnover, and staff working across the widest remit (CiN, CP, Court, and CiC).

Auditing of practice with Care Leavers indicated no Inadequate practice in this month.

Fig 5. Profile of Practice identified through January audits (as a percentage):

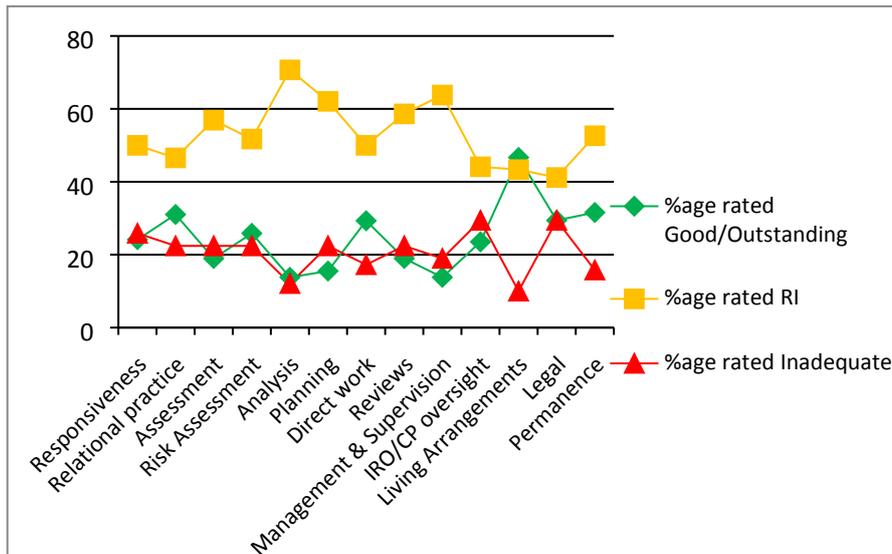


Figure 5 above outlines the main themes and areas of learning arising from audit activity in January:

- Good practice is most reliably demonstrated in the permanence and quality of living arrangements for children in our care, in some of our direct work, and in some relational practice.
- We have undertaken some good work with respect to legal activities but equally some of our weakest work evaluated in January related to this area.
- The same variability of good and inadequate work is observed in our responsiveness, relational working, and risk assessment.
- Inadequate practice remains concentrated in the areas of assessment, planning, reviews, and the oversight of work by managers, IROs and CP Chairs.

Feedback on the findings from file audits is shared with social workers and managers as a driver for development and learning. Alongside this, a tracker has been established to track any necessary actions and 'Children of Concern' (those in receipt of an Inadequate service). The latter fall into two categories:

Category 1: there are widespread or serious failures meaning that the child / young person is at immediate risk of significant harm and needs an urgent (same day) response from the Head of Service; with Director oversight.
Category 2: there are widespread or serious failures meaning that the service offer/risk assessment is not appropriate to the needs of that child/young person.

Of those audits uploaded to children's records in January, 16 were deemed to be Children of Concern. A further 1 Child of Concern was clearly identified amongst those audits that did not meet the standards required to be uploaded; so in total there were 17 identified this month. Four of these were Category 1, which is a higher than usual number. In relation to these 4 children, at the time of writing:

- One categorisation, moderated by an ex-Ofsted inspector has been rightly challenged by the Head of Service and consequently been revised by the Head of Quality to Category II against

the Ofsted Annex H guidance.

- One has been signed off by the director as no longer at Cat I.
- One is under Head of Service oversight and currently in proceedings. This is awaiting further information from the team before being submitted for director sign-off.
- One, the HoS feedback is still being sought.

Including the Children of Concern from January, there are currently 25 Children of Concern on the tracker. 1 of these Children has been on the log from August, 2 from November, and 6 from December indicating insufficient action to de-escalate the concerns as needed for these children.

3) What action have we taken as a result of January QA activity?

A key element within our quality assurance programme is to ensure that there is an effective and timely response to identified actions to address issues impacting on children and young people and drive organisational learning. The Quality Assurance Team maintains an action tracking log for all actions from audit, which is shared with managers and Heads of Service on a regular basis.

There are currently 432 ongoing actions from previous audits (including January). 142 (33%) of which are within timescale, and 290 (67%) are overdue – detail on these is available in Appendix 2. All overdue actions are regularly communicated to managers and senior managers. In addition to the tracking of actions directly with managers by the QA team, overdue actions (audit and Children of Concern) are now shared at the monthly Leadership Team meeting as a standing agenda item with an expectation that Heads of Service drive resolution as a result. Despite this, the proportion of overdue actions has not reduced since the December report when 63% of actions were overdue.

Under continued direction from the DCS, all exemptions from completing audits are to be authorised by the respective operations directors; this is notably improving audit compliance.

The Essentials training (focusing on Visits, Assessment, Analysis, Planning, and Risk) has been revised and re-launched across the service under the Accelerated Improvement Plan. Within this there is a clear emphasis on the role of managers in ensuring quality oversight and direction. Some of the Gloucester teams are already undertaking this training at the time of writing.

4) How well are we engaging Social Workers and Managers in audits?

Of the 58 audits completed, 56 were completed with a social worker (97%) and there were legitimate reasons for not doing so in the other 2 instances. The greater majority of audits are now undertaken by team managers in their own areas thereby increasing the participation of managers in the audit. In January, 47 (81%) managers reported their participation in the audit. 16 children/young people were contacted which doubled the December figure, and 23 parents chose to give their views during the audits. In a marked improvement on previous months, 16 IRO's/CP Chairs gave their views in the audit.

5) What is the impact of our audit actions on outcomes for children and young people?

The timely closure and oversight of audit actions promotes improved outcomes for children. Whilst this is improving circumstances for some children and young people, at present, we continue to have too many overdue actions on the audit and Children of Concern action trackers, and this has risen from the December QAF report.

We should be able to report more fully in future reports on qualitative feedback on audit impact following the launch of a new survey tool in February.

6) Conclusions

1. The current percentage of inadequate practice is too high and carries the risk of an Ofsted judgement of 'Inadequate'. Our primary aim of the Accelerated Improvement Plan is to

decrease this percentage markedly. To this end, QA activity has highlighted the following:

- a) Continued emphasis is needed on Assessment, Analysis, Planning and Review (including the assessment and management of risk). This work must include workers, managers, IRO's and CP chairs.
 - b) Work remains needed with our team management group to understand the barriers to management grip and to introduce the necessary individual and contextual solutions to overcome these.
 - c) The use of visits to build relationships and effect positive change for children and young people through direct work remains a priority area of need.
 - d) The rising issues in weakness of practice relative to legal activity requires monitoring and inclusion in wider discussions about improving our practice in relation to legal and court work.
2. The Ofsted monitoring visit in January reinforced the reliability of our auditing, describing the quality of audits as "good" which is thereby affording us an honest self-assessment. As per previous QAF reports though, Ofsted highlighted that we remain unable to routinely and systematically demonstrate the impact of this activity on children's lives. This urgently requires the timely completion of audit action and the removal of children from the Children of Concern tracker by effectively attending to their needs.
 3. Inadequate practice is largely concentrated in the Safeguarding teams.
 4. We are seeing steady improvements in audit completion rates as a result of considerable focus and the need to have exemptions approved by directors. This needs to be maintained until audit is seen as business as usual.
 5. There is continued pressure on the development of the moderator pool, wherein new auditors need more time to develop to allow prospective moderators to be identified.

7) Recommendations

Taking account of the learning from the volume and outcomes of our QA activity during December 2018, the following recommendations are made:

1. The current Accelerated Improvement Plan has clearly targeted inadequate practice in the system with an aim of reducing this incrementally in the coming months. This includes responses to the above issues as follows:
 - a) Weaknesses in practice fundamentals – in part being addressed through the Essentials intervention with Managers and AP's, and cascaded with them into teams and to individuals. Also, the expectation on team managers for not signing-off sub-standard practice should raise the standards.
 - b) Challenges in management oversight - mentoring and coaching by senior managers to team managers.
A review of the Supervision framework led by the operations director.
 - c) Challenges within identified teams - senior management-led units offering brief, solution-focused interventions with teams.
 - d) Share accounts of good practice at all key leadership forums, and through communications with the service.
2. To address the limited evidence of impact on practice following audit, we will deploy the impact measurement tool in February and include results in future QAF reports. This remains

secondary to SLT direction and grip to ensure the suitable removal of children from the Children of Concern tracker and resolution of overdue audit actions by heads of service and team managers. We will continue to use the monthly standing item on the Leadership Team agenda to report on audit completion, action tracking, and progress against recommendations from dip samples and audits.

3. Exemptions to continue to be signed-off by the respective director.
4. Continued resourcing for external moderator support.
5. We will be including reporting on audit activity in Early Help and Youth Support in the March QAF report.