

Adults and Safer City Scrutiny Panel Meeting

Tuesday, 25 September 2018

Dear Councillor

ADULTS AND SAFER CITY SCRUTINY PANEL - TUESDAY, 25TH SEPTEMBER, 2018

I am now able to enclose, for consideration at next Tuesday, 25th September, 2018 meeting of the Adults and Safer City Scrutiny Panel, the following reports that were unavailable when the agenda was printed.

Agenda No	Item
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6	<u>Update on adult case file audits:one year on (report to follow) (Pages 3 - 14)</u>
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[Jennifer Rogers, Quality and Improvement Advanced Practitioner, to present report]

If you have any queries about this meeting, please contact the democratic support team:

Contact Earl Piggott Smith

Tel 01902 551251

Email earl.piggott-smith@wolverhampton.gov.uk

Address Democratic Support, Civic Centre, 2nd floor, St Peter's Square,
Wolverhampton WV1 1RL

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Adult and Safer City Scrutiny Panel

25 September 2018

Report title	Update on adult case file audits: one year on	
Cabinet member with lead responsibility	Councillor Sandra Samuels OBE Cabinet Member for Adults	
Wards affected	All	
Accountable director	David Watts, Director of Adults Services	
Originating service	Adult Social Care	
Accountable employee(s)	Louise Haughton	Principal Social Worker
	Tel	01902 555345
	Email	louise.haughton@wolverhampton.gov.uk
	Jennifer Rogers	Advanced Practitioner for Quality and Improvement
	Tel	01902 555704
	Email:	jennifer.rogers@wolverhampton.gov.uk
Report to be/has been considered by	Adult Social Care Management Team	5 June 2018
	PLT	2 July 2018
	SEB	10 July 2018

Recommendations for decision:

The Scrutiny Panel is recommended to:

1. Note and comment on the progress of casefile audits carried out in 2017-2018 in adult social care.
2. Note and comment on the findings of a thematic mental capacity assessment (MCA) audit from quarter four of 2017-2018.

1.0 Purpose

- 1.1 The City of Wolverhampton Council (CWC) introduced an on-going case file audit schedule for adult social care from March 2017. This report presents an overview of the findings of the audits carried out in 2017- 2018, identifying improvements and areas for further development. This includes the results of a thematic audit examining the quality of mental capacity assessments completed in 2017-2018.

2.0 Background

- 2.1 Sector-led improvement was put in place by local authorities and the Local Government Association (LGA) when the previous national performance framework was abolished. This was set out in the LGA's document '[Taking the Lead](#)', published in February 2011.

The approach is based on the following principles:

- Local Authorities are responsible for their own performance
- Local Authorities are accountable locally not nationally
- There is a collective responsibility for the performance of the sector as a whole

- 2.2 Quality Assurance is crucial to sector led improvement, as it enables local authorities to measure performance and identify areas for improvement. CWC implemented a Quality Assurance framework for adult social care, which sets out all of the activity that relates to quality assurance across the service.
- 2.3 The purpose of audit is to retrospectively examine practice against service standards, policy and legislation and take remedial action where required.

3.0 Progress update on case file audits in 2017-2018

- 3.1 Case file audits form a key part of the LGA's approach to supporting sector led improvement in adult social care, as they provide a mechanism for monitoring quality in frontline practice. A thematic review from the LGA led adult social care peer challenges undertaken between 2012 and 2014 identified that case file audits are a robust and effective tool to support effective practice ([Adult social care peer challenges: Sharing the learning, LGA, 2015](#)).
- 3.2 Case file audits in adult social care in Wolverhampton take place bi-monthly. Each auditor is assigned one case each and uses the regional West Midlands case file audit tool, developed by the Principal Social Worker network.
- 3.3 Cases are randomly selected by the Insight and Performance team based on certain parameters. All cases that have had an assessment or review in the last three months. A proportion of cases are selected because they have had a safeguarding enquiry in the last six months, as well as a Care Act assessment or review. More cases are selected from older people's services as it is the largest service user group.

The service user breakdown is as follows:

- 16 cases from older people
- Seven from disabilities
- Seven from mental health

4.0 Findings of case file audits in 2017-2018

4.1 From quarter three 2017-2018 changes were made to the case file audit tool to enable auditors to make judgments about the standard of the audit in line with Care Quality Commission (CQC) ratings. The aim of this is to improve the quality of the audits, as well as provide a way to benchmark performance.

4.2 CQC ratings for quarter three and four:

	November 2017 (Q3)	January 2018 (Q4)	March 2018 (Q4)
Outstanding	2	1	0
Good	18	17	15
Requires Improvement	4	8	4
Inadequate	0	0	0
Total	24	26	19
% rated "Good"	75%	65%	79%

4.3 It should be noted that the “audit the auditor” session in December 2017 identified that around half of the audits did not provide balanced feedback. Most tended to take an optimistic approach whereby the focus was on the strengths of the case file and social work intervention rather than areas for improvement. In some cases the areas for improvement were downplayed or there was an assumption by the auditor that the work had taken place, although it may not have been clearly recorded. This calls into question the accuracy of a proportion of the ratings because there may have been areas requiring improvement which have not been fully analysed by the auditor when rating the case file.

4.4 A dip sampling of three audits rated as “good” from the March 2018 audit has taken place to measure the quality of the audits using the audit the auditor tool. Two out of three audits were deemed to have been over optimistically rated as “good”. A “requires improvement” rating would have been more reflective of the evidence provided by the auditor.

4.5 To address this the Quality and Improvement team has shared the findings of the audit the auditor session at a Social Work Unit Manager meeting and has offered 1:1 or group sessions to support auditors. Louise Haughton (Principal Social Worker) led an audit the auditor session at an Adult Social Care Management Team in June 2018. A further audit the auditor took place in July 2018 and feedback will be provided to individual auditors and the adults management team.

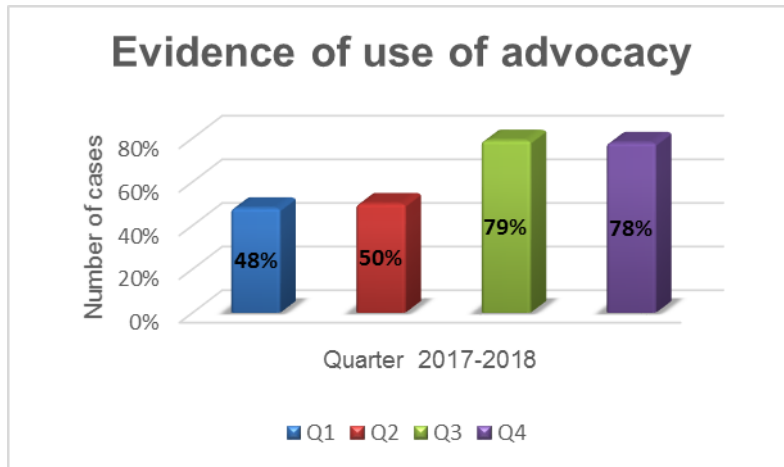
4.6 Overall however there has been improvement in social work practice this year.

5.0 Areas of strength highlighted by case file audits in 2017-2018

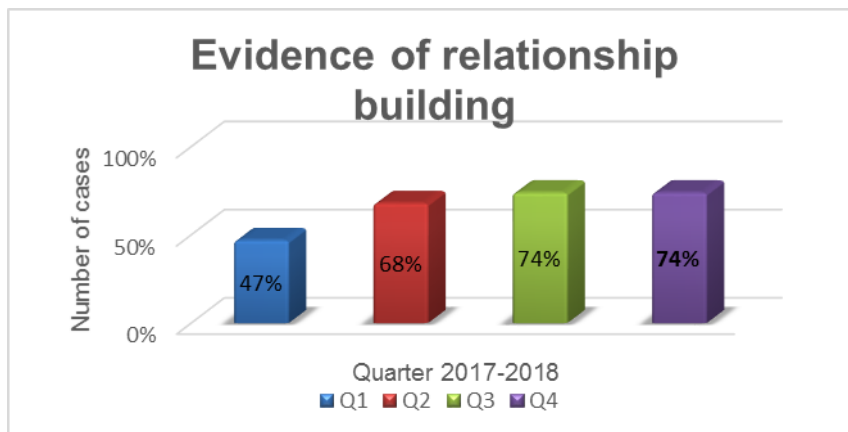
- 5.1 Making Safeguarding Personal (MSP) has been consistently well evidenced in all of the audits since quarter one.
- 5.2 Continuity of support, where cases had been transferred from one team to another, or from one worker to another is an area showing continued improvement since quarter one.
- 5.3 Demonstrating dignity and respect was evidenced in every case audited in January and in 83% of cases in March. Performance has been consistently strong in this area in 2017-2018.
- 5.4 Audits this year have identified that people are being fully involved in their assessment and support planning with around 80% of cases demonstrating this in quarter three and four.
- 5.5 Timeliness and responsiveness has been consistently strong in all of the audits this year.
- 5.6 From November 2017 the audit tool included a question about whether there had been improved outcomes as a result of the intervention. In quarter three improved outcomes were evident in 79% of cases, with two of those cases achieving an outstanding rating. This was consistent with the quarter four audits with almost 80% of cases rated as good or outstanding in this area.

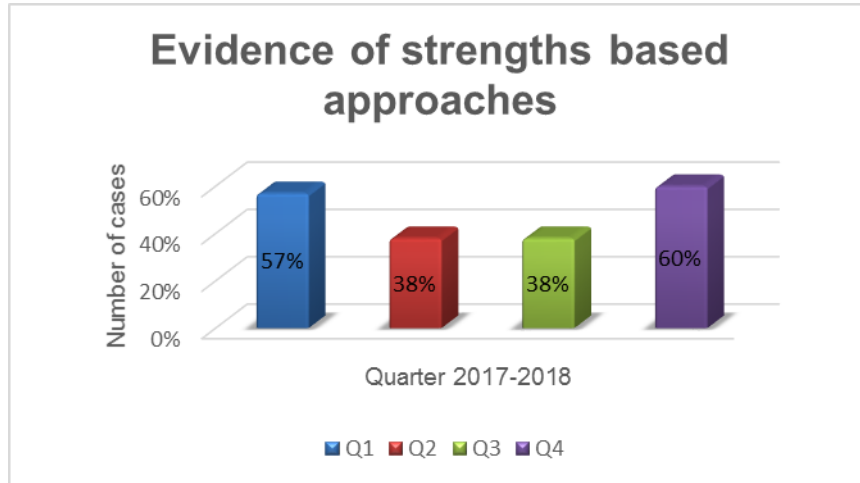
6.0 Areas showing improved performance in 2017-2018

- 6.1 Audits in quarter one and two highlighted that only half of the cases audited could provide evidence that advocacy had been considered and offered if appropriate. This has been a national issue and was highlighted by Community Care in April 2016 where a survey of 80 English Councils found that just 2% of people assessed under the Care Act from April to September 2015 were given access to an advocate.
- 6.2 To address this in Wolverhampton, Senior Social Work Managers invited advocacy groups to their team meetings and conversations took place about the advocacy duty under the Care Act. The Care Act e-learning was also updated by the Quality and Improvement team, which included a section on advocacy, and became mandatory from September 2017 for all social care staff. However, it is important to note that the renegotiation of the advocacy contract may also have had an impact on the uptake of advocacy and the improvement in performance. As a result, there has been a significant improvement in the last two quarters of 2017-2018 and this area is now identified as an area of strength:

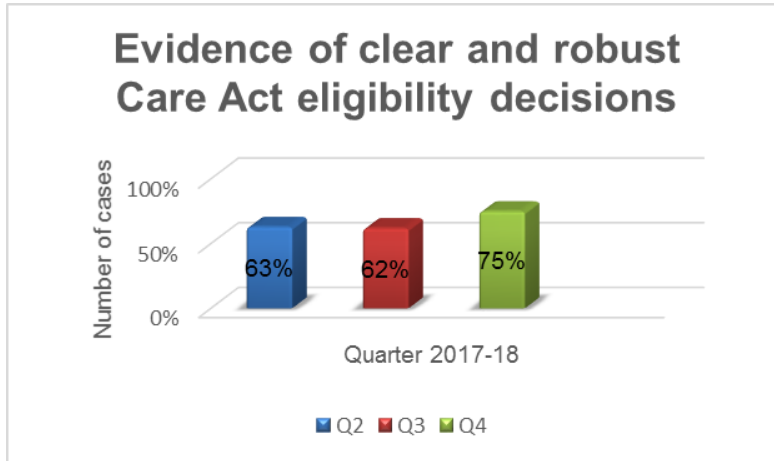


- 6.3 There has been an improvement in relationship building and the use of strengths based, personalised approaches in 2017-2018. This has been due to the move away from a care management style of working to a focus on strengths by using various approaches and tools (for instance narrative approaches, 24/7 grid and the ROPES tool). Strengths based assessing was a topic at the Adult Social Work briefing in May 2017 and the Quality and Improvement team produced a guide in October 2017 to support practitioners think about how to assess in a strength based and person-centred way.
- 6.4 However there is potential for further improvement in the use of strengths based approaches and this informed the decision to adopt the 3 Conversation model. This model is currently being rolled out across Adult Social Care with the first three innovation sites starting on 1 May 2018.





- 6.5 At the start of 2017-2018 case file audits identified that improvement was needed in regard to management oversight, particularly the recording of management decisions and supervisions discussions. Frontline managers discussed this feedback and set up actions to address this at one of their management meetings in June 2017. A decision was also taken that all assessments should be signed off by a manager to improve practice in the short term. Quality Assurance Meetings were set up in October 2017 to monitor the quality of decision making and ensure effective, appropriate challenge.
- 6.6 Performance has improved significantly in this area this year, which has been confirmed by a dip sampling audit of supervision records. This took place in January 2018 to check the quality of supervision discussions and recording on Care First. The audit was carried out by Senior Social Work Managers for every manager they supervise. A total of seven audits were completed. All supervision records audited confirmed that relevant discussions had been recorded on Care First.
- 6.7 Comments by auditors in quarter one raised concerns about the quality of eligibility decisions. A specific question was therefore added to the case file audit tool from July 2017. The quarter two audits confirmed that this was an area for further development. This led to a review and relaunch of the Care Act e-learning and it was made mandatory for all adult social care staff in September 2017. Audits have since identified that there has been an improvement, with 82% of cases in March 2018 being rated as good or outstanding in this area. Legal update training has been planned for 6 July 2018 which will cover Care Act eligibility and any recent case law to further improve legal literacy across adult social care.

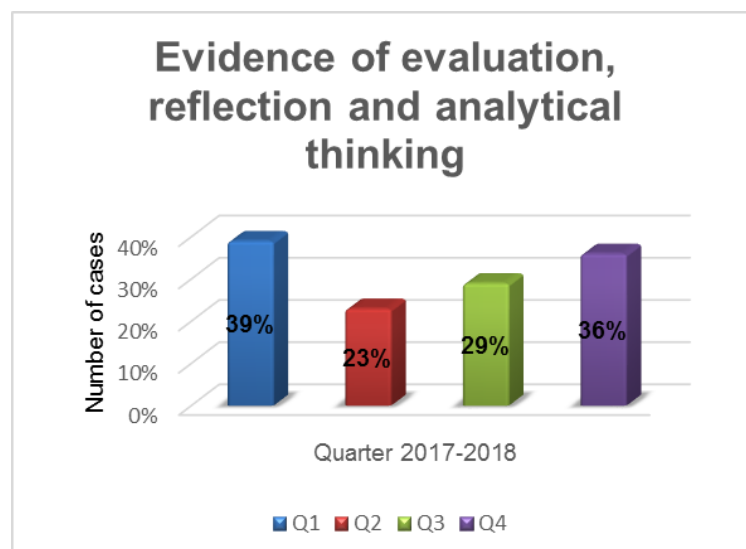


6.8 Case file audits carried out in quarter one and two identified that under half of the cases had considered issues of equality and diversity to the standard expected. All teams were asked to complete the equality and diversity eLearning. Guidance was also provided by the Quality and Improvement Team to support team managers better understand what to consider in terms of equality and diversity when auditing cases and also when scrutinising assessments and support plans. These actions have been effective as there has been continued improvement in this area over the year.

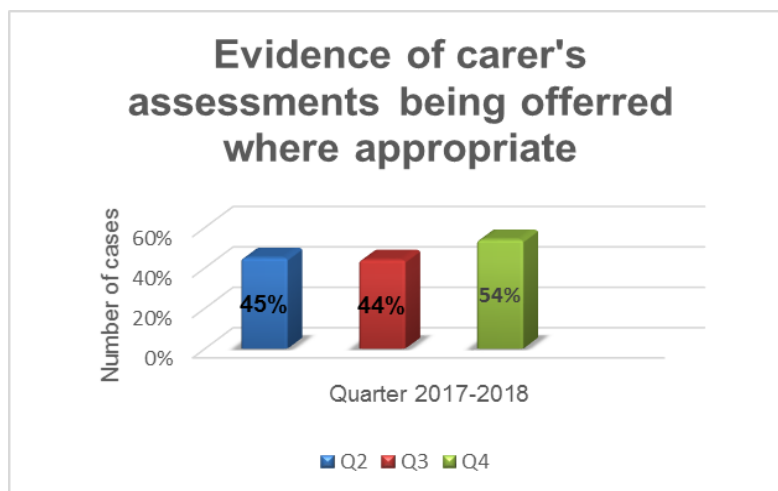
6.9 There has been improvement in the number of cases evidencing sound analysis and management of risk. Several actions were taken in 2017-2018 which has supported this change in practice. This includes the creation of strengths based risk assessment guidance and a separate risk assessment tool. This has been promoted by the Quality and Improvement team at locality team meetings in quarter three and four to improve performance in this area. The number of cases meeting the standard expected in this area has risen from 43% in quarter 1 to 65% in quarter four.

7.0 Areas requiring further development in 2018-2019

7.1 Reflective practice and analytical thinking remains an area that requires further development. Out of the three elements reflection has been most notably absent.



- 7.2 In January 2018 there was an audit of supervision records to check the quality of supervision discussions. Five out of seven records did not contain evidence of reflective discussions.
- 7.3 Actions taken to address this include the introduction of a reflective tool for practitioners to complete and discuss in supervision as part of the case file audit process. Although compliance rate for completion of this tool has been generally good in quarter three and four, the quality of the reflection is an area for improvement with the majority of workers tending to be descriptive and overly focussed on tasks. Guidance has been produced for practitioners to aid critical reflection. Reflective supervision training was also delivered in quarter three to all social workers who supervise others.
- 7.4 It is anticipated that the 3 Conversations model will promote reflective practice from 1 May 2018. This model will also provide more opportunity for autonomous decision making and analytical thinking via peer challenge.
- 7.5 Other actions include an update of the supervision policy, which has a strong emphasis on promoting critical thinking. This will be re-launched in Summer 2018 with the expectation that Senior Social Work Managers will audit at least three supervision files twice a year. To further increase confidence in recording reflective and analytical thinking the recording with care policy will be updated in 2018.
- 7.6 The quarter one audits highlighted a potential area for concern regarding the completion of carers assessments. A specific question about this was added to the audit tool in July to investigate this further. The findings show that this is an area for ongoing development, but there has been some improvement in quarter four:



- 7.7 Actions taken to improve performance include a talk by the carer support team at the adult's social work briefing in November 2017. In March 2018 a carer spoke at the joint social work conference as an "expert by experience". Feedback from both events was very positive and has raised awareness of the importance of carers assessments. In September 2017 the Care Act eLearning, which contains a section on carers assessments, was refreshed and made mandatory from September 2017. Each social work team has also identified a carer champion who will be attending a quarterly

information sharing session with the manager of the Carers Support Team. Carer champions will feedback to their teams and develop practitioner's knowledge of the support available for carers. These sessions started in September 2018.

8.0 Thematic MCA audit

- 8.1 Thematic audits are undertaken to assess quality of work in specific areas, which may be identified as a result of other audits or through learning (including serious adult reviews), complaints, performance monitoring and/or general feedback. Two thematic audits are planned to take place each year. The quality of mental capacity assessments was selected as the theme for this audit due to comments raised by auditors in the case file audit.
- 8.2 The thematic audit took place on 28 March 2018 to check the quality of mental capacity assessments completed within the last six months. There were five auditors and 17 audits were completed in total.
- 8.3 Case file audits have highlighted a continued improvement in the number of mental capacity assessments being undertaken in 2017-2018. Over 80% of cases met the expected standard in quarter four compared to 57% in quarter three and 41% in quarter two.
- 8.4 However less than half of the mental capacity assessments (MCA) audited as part of the thematic audit were rated "good" in terms of quality:

Overall rating	Number of MCAs
Outstanding	0
Good	7
Requires Improvement	7
Inadequate	3

- 8.5 There were a number of areas of strength identified in the mental capacity assessments audited:
- The impairment or disturbance in the functioning of the mind or brain was clear in the majority of mental capacity assessments audited.
 - It was clear what specific decision was being assessed in most of the capacity assessments.
- 8.6 Areas of strengths in regard to Best Interests decision making included:
- The majority of assessors sought the views of those who were appropriate to be consulted.
 - The decision maker was appropriate in all of the best interest assessments.
 - Where it was appropriate an advocate / IMCA was considered as part of the process,
- 8.7 Areas requiring further development in regard to mental capacity assessments:

- In just under half of the mental capacity assessments there was evidence that the assessor had explained the salient details to the person. Four assessments required improvement in this area and six were rated as inadequate.
- In just under half of the assessments there was evidence of what had been done to help the person make the decision. Eight assessments required improvement in this area, with two rated as “inadequate”. Common issues included assessors not considering the best time of day for the person and visiting at different times. Auditors also noted limited use of visual aids, objects of reference, written information etc.
- In five assessments the assessor provided a good analysis and strong rationale when determining whether the person could understand, retain, weigh up, communicate the information relevant to the decision. However, seven assessments required improvement and five were inadequate in this area.

8.8 Areas requiring further development in best interests’ decisions:

- Just over half of the best interest decisions demonstrated that all practicable steps had been taken to ascertain the person’s past and present feelings / wishes. Seven required improvement and one was rated as inadequate in this area.
- There was evidence that assessors had weighed up different options in just over half of the assessments. Two required improvement and two more were inadequate. The main criticism was a lack of a balance sheet approach.
- There was evidence of a strong rationale in eight best interest decisions, but three required improvement and another was rated inadequate. Issues raised included lack of exploration of lesser restrictive options.

8.9 Actions being taken to improve the quality of mental capacity assessments include:

- All teams have identified Mental Capacity Act champions who will support in driving up good practice across adult social care and will engage in additional training to share with their teams. The impact of champions will be monitored by the annual Social Work Health Check Survey, carried out every April by the Principal Social Worker. The survey will ask social workers to comment on the effectiveness of the champion role within teams and what topics have been discussed.
- July 2018 was designated as “Mental Capacity Act month”. All teams were asked to focus on mental capacity issues during this month and to offer shadowing opportunities to less experienced workers from across adult social care. In each of their fortnightly reflective sessions workers brought examples of capacity assessments to critically reflect on. Essex Street Chambers guidance on capacity assessments and best interest decisions was resent to teams by the Quality Assurance and Improvement team for them to discuss in their team meetings in MCA month.
- The free Open University resource on Mental Capacity Act assessments was made available via our Learning Hub on 31 May 2018. This eLearning will be reviewed annually by the Organisational Development team.
- An internal training session will be available to Mental Capacity Act champions and a limited number of practitioners from teams across adult social care in September 2018. Feedback forms will be completed following the training session and comments collated by the Quality and Improvement team to identify the

impact of this session. Champions will be expected to share the learning with the rest of their team.

- A second Mental Capacity Assessment audit will take place in January 2019, four months after the training, to measure the effectiveness of all of the actions taken to drive up quality in this area. This audit will be carried out by the Quality and Improvement team and findings will be reported back to the adult social care management team and to the social work teams.

9.0 Financial implications

- 9.1 There are no financial implications arising from this report. However, it should be noted that improvements in standards of practice and quality in adult social care is likely to achieve cost savings, for instance by reducing complaints and legal challenge.
[AJ/16072018/S]

10.0 Legal implications

- 10.1 The actions from the audits will ensure that practitioners are confident and compliant when implementing duties under the Care Act 2014. Improving practice and standards in this area also reduces the risk of judicial review. RB/21092018/V

11.0 Equalities implications

- 11.1 The audits consider whether equality and diversity has been considered in the cases identified. This monitoring will ensure that the City of Wolverhampton Council is carrying out its duties in an anti-discriminatory and anti-oppressive way when working with many diverse groups. Where there is insufficient consideration of equality and diversity issues in cases, actions will be taken as a result to address this with the workforce.

12.0 Environmental implications

- 12.1 There are no direct environmental implications arising out of this report.

13.0 Human resources implications

- 13.1 There are no Human Resource implications arising out of this report.

14.0 Corporate landlord implications

- 14.1 There are no specific Corporate landlord implications arising out of this report.

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