**Case File Audit – Safeguarding - Quality Standards Guidance**

**1. Key Principles**

* Case file auditing is reliant on auditors making **evidenced-based judgements** about the quality of safeguarding practice from the practitioners in their team around 6 essential quality standards.
* The focus of the audit is on **excellent** **practice**, not compliance with mandatory recording requirements which are checked elsewhere within the Azeus workflow.
* Providing individual **feedback to each practitioner is vital** **and must be evidenced along with any actions to improve future case file records.**
* If a case file is found to be a significant concern then **urgent remedial actions must be set** **and monitored** by the practitioner’s line manager, which may involve reallocation of the case back to the practitioner to address.
* **Justifying comments must be recorded** when scoring to enable themes to be collated across the service.
* The collated themes will **help develop training and support for ASC staff**.
* The audit tool can either be completed as a **desk-top exercise or 1:1** **with the practitioner** through supervision.

**2. Scoring**

* All questions must be responded to using the **RAG rating** (red, amber or green) following these rules:

**RED** Quality standards have not been met.

**AMBER** There are some gaps in the case file which need addressing in the longer term and some learning or development may be required by the practitioner.

**GREEN** Quality standards are met and there are no issues to report.

* ‘N/A’ is not an option. **If the question is not relevant for an individual case then you must select GREEN** **on the basis that there are no quality issues to report**. For example, if there’s no requirement for an enquiry specific mental capacity assessment because the customer has no impairment in the functioning of their mind or brain you would mark 1c **GREEN**.
* The completed audit tool must be added up to give an overall quality rating score of the case file:

**Outstanding:** **13 GREEN** outcomes

**Good:** **9-12 GREEN** outcomes with **1-4 AMBER** outcomes

**Satisfactory:** **6-8 GREEN** outcomes with **5-7 AMBER** outcomes

**Requires Improvement:** **6 or less GREEN** outcomes or **1 or more RED** outcome

**3. Quality Standards**

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| **Making Safeguarding Personal** | | |
| **QUESTION** | | **GUIDANCE** |
| **1a** | If the Adult At Risk (AAR) had substantial difficulty engaging in the safeguarding process were they supported by an appropriate family member, friend or independent advocate? | * The Care Act 2014 places a duty on Local Authorities to arrange, where appropriate, for **an independent advocate** to represent and support an **adult who is the subject of a safeguarding enquiry or Safeguarding Adult Review** where the **adult has ‘substantial difficulty’ in being involved in the process and where there is no other appropriate adult to help them**. * Review **‘communication requirements’** in the **‘background information’** section of the Safeguarding Adults Form. * Review the tick box **‘Does the Adult at Risk require a paid advocate, IMCA or other support?’** in the **‘Mental Capacity & Consent’** section of the **Concern Form.** * Review the tick box **‘Was an Advocate or IMCA provided?’** in the **Enquiry Form** and read the information in the box titled **‘What support did the Advocate or IMCA provide?’** * Check that all information on the file is consistent with the wider written records about the customer’s circumstances and the **‘Summary / Interim Safeguarding Actions’ (Concern Form)** and where appropriate **‘Details of Enquiry and Actions taken’ section (Enquiry Form).** |
| **1b** | Was the AAR or their representative asked about their outcomes, and were these recorded and met? | Making Safeguarding Personal shifts emphasis to **improving outcomes for people experiencing abuse or neglect**. The key focus should be on:   * + - Developing a real understanding of what people wish to achieve     - Agreeing, negotiating and recording their desired outcomes     - Working out with them (and their representatives or advocates if they lack capacity) how best those outcomes might be realised     - Seeing, at the end, the extent to which desired outcomes have been realised. * Look at the practitioner’s answer to **‘What is the Adult at Risk's or their representative(s)' desired outcome regarding this safeguarding concern’** in the **‘Mental Capacity & Consent’ Section (Concern Form).** * Review all information in the **‘Making Safeguarding Personal Outcomes’** section of the **Enquiry Form**. * Review the **‘Safeguarding Adults Outcome & Conclusion Form’** and check all information in the **‘Safeguarding Issues & Actions’** section and all information in the **‘Case Conclusion’** section. * Ensure this is all consistent with the wider written records about the customer’s circumstances and the **‘Summary / Interim Safeguarding Actions’ (Concern Form)** and where appropriate **‘Details of Enquiry and Actions taken’ section (Enquiry Form).** |
| **1c** | Have any safeguarding specific mental capacity assessments been completed in line with the MCA Code of Practice and is there evidence of appropriately made Best Interests Decision(s)? | * Review the **‘Mental Capacity & Consent’** section of the **Concern Form** to ensure that rationale is provided for undertaking a s.42 Enquiry, especially where the AAR lacks capacity or cannot consent for other reasons. * Where appropriate, ensure that separate mental capacity assessments have been completed for all relevant decisions relating to adult safeguarding (e.g. finances, relationships, risky behaviour). * You must view any associated mental capacity assessment forms and best interest decisions. **Are the MCA 5 principles sufficiently met?** * Was the **‘two stage functional test of capacity’** correctly undertaken and recorded? <https://www.scie.org.uk/mca/practice/assessing-capacity/> * If the customer lacked capacity, were the **Best Interests principles** followed in the decision making? <https://www.scie.org.uk/mca/practice/best-interests/> |
| **1d** | Was the AAR or their representative kept involved and informed of the safeguarding process throughout? | * Check that there is evidence of this clearly recorded through **case notes**. * Check for evidence of involvement in the **‘Summary / Interim Safeguarding Actions’ (Concern Form)** and where appropriate **‘Details of Enquiry and Actions taken’ section (Enquiry Form).** * Are methods to involve and inform the AAR or representative reflected in the **‘Safeguarding Adults Plan’**? * In the **Outcome & Authorisation form**, check the **‘Reasons for ending the Safeguarding process’** section. * Was the AAR or representative involved in the **‘Review of Safeguarding Plan’** (where appropriate)? |

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| **Information Gathering** | | |
| **QUESTION** | | **GUIDANCE** |
| **2a** | Has consent to share information been appropriately obtained from the AAR? | * Review the question **‘Does the Adult at Risk consent to information sharing across agencies, as necessary for the purposes of a safeguarding concern / enquiry?’** in the **‘Mental Capacity & Consent’** section of the concern form. * This should also be updated accordingly under the **‘Consent Decisions’** screen under the **‘Person’** menu, with a signed consent form uploaded as a **‘Related Document’**. |
| **2b** | Is there evidence that all relevant lines of enquiry have been fully pursued? | * Review the **‘Strategy Discussion Summary’** and **‘Strategy Meeting’** sections in the **Enquiry Form.** Does the **summary** and **‘Enquiry Actions’** comprehensively cover all lines of enquiry based on the information about the initial concern? * Is there evidence that these have been completed? * Review the **‘Safeguarding Adults Plan’** and consider information in **‘Evaluation of evidence gathered so far- Key findings’** box. * Review information recorded in **‘Details of Enquiry and Actions taken’** box in the **‘Safeguarding Adults Plan’** section. |
| **2c** | Is there evidence of involvement from other parties where their views and input have been clearly recorded? | * Look at the information contained in the Concern Form: does this include the full range of people involved? Consider the following areas **‘Any witnesses’**, **‘Details of person(s) alleged to have caused the harm’**, ‘**What type of Care / Support Plan does the Adult at Risk have?’** and **‘Details of person who reported this safeguarding concern’**. * Consider information in the **Enquiry Form**; look at **‘Strategy Meeting’** section and the invitees. * Are the actions on the **‘Safeguarding Adults Plan’** aligned to the correct person? * Is there evidence recorded in **‘Details of Enquiry and Actions taken’** section that the views of other parties have been sought and recorded? |

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| **Risk Management** | | |
| **QUESTION** | | **GUIDANCE** |
| **3a** | Are risks identified, assessed and appropriately managed at the earliest opportunity? | * Review the information in the **Concern Form** under **‘Summary / Interim Safeguarding Actions’.** * If a parallel Care Act assessment, reassessment or review has been completed in response to the Safeguarding Concern, then check that the **‘Risk Assessment’** section in the Azeus assessment or review summary must be fully completed in line with the guidance notes (hyperlink here) |
| **3b** | Has the Safeguarding Adults plan been reviewed and updated through the safeguarding process? | * Read information in the **‘Safeguarding Adults Plan’** section of the **Enquiry Form**. * Pay particular attention to the **‘actions’** and the **‘review date’** – is there evidence on the case file (forms or case notes) to suggest that this has taken place and periodically monitored? * Read the **‘Review of Safeguarding Plan’** form - have the actions been completed by the required date? |

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| **Decision Making** | | |
| **QUESTION** | | **GUIDANCE** |
| **4** | Is there clear evidence for decisions made throughout the safeguarding process? | * Review the information in the **Concern Form** under **‘Summary / Interim Safeguarding Actions’** as well as the **‘Safeguarding Management Directions’**. * Review the information in the **Enquiry Form** under **‘Details of Enquiry and Actions taken’** as well as the **‘Safeguarding Management Directions’**. * In Review of Safeguarding Plan form read the information contained in the **‘Review of Safeguarding Plan Recommendations and any other comments’** as well as the **‘Safeguarding Management Directions’**. * Consider all information in the **Safeguarding Adults Outcome & Conclusion Form** and the **‘Safeguarding Adults Management Directions’** in the authorisation section. |

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| **Partnership Working** | | |
| **QUESTION** | | **GUIDANCE** |
| **5a** | Is there evidence that information which is of public interest has been identified and shared with all relevant parties? | * Consider the **‘Conclusion for person, organisation or service who is alleged to have caused harm to the adult at risk’** section in the **‘Case Conclusion’** of the **Safeguarding Adults Outcome & Conclusion Form.** * Is there evidence in **case notes** or **Related Documents** to evidence that this has happened where necessary? |
| **5b** | Is there evidence that the outcome of the safeguarding process has been communicated to all relevant parties? | * Check the **case notes** for evidence that the outcome has been communicated to all relevant parties. * Ensure that the information communicated is consistent the information recorded in the **‘Safeguarding Adults Outcome & Conclusion Form’**. * Ensure that an **outcome letter** has been sent to the referrer, and a copy of saved in **Related Documents**. |

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| **Recording** | | |
| **QUESTION** | | **GUIDANCE** |
| **6** | Does all the safeguarding case recording meet the required standards? | **Key principles to consider:**   1. People have a right to be aware of records and **consent to share information**. 2. Records should be **accurate, owned and up to date**. 3. Records should be **easy for people to access** and understand. 4. Recording should be **concise and relevant.** 5. Recording should **distinguish fact from opinion**. 6. Recording should support **anti-discriminatory and equalities** based working. 7. Records should be **regularly monitored** and audited to support quality.   **Other considerations:**   * Do the case notes/forms record the views of the adult, in their own words where appropriate **(verbatim)**, including whether they have given permission to share information? * Do case notes and forms include a record of decisions taken and reasons for them? * Is there a chronology of significant events? * Are all case file records evidence based? * Is the case file data fully complete and accurate (i.e. race/ethnicity, gender, religion, language, disability)? * Is the case file backed up where necessary by hard copy records saved as **‘Related Documents’** – are these documents legible, signed and dated as necessary? |