West Midlands (Met Area) Safeguarding Board Multi-Agency Audit Tool

The purpose of multi-agency audits

1. The Multi Agency Audit Tool is to be completed by each agency involved in working with the child and/or adult and their family.
2. The tool provides a framework through which agencies are able to analyse the effectiveness of the work carried out in safeguarding the child or adult, and promoting their welfare, both on an inter-agency and single-agency basis.
3. Learning is identified from the review of the audit tool and wider multi-agency discussion at the audit in terms of strengths, areas for improvement and best practice or innovative work. The learning is shared with agencies directly involved and the wider workforce so that it can be used to promote improved safeguarding practice.

Guide to completing the tool

1. Auditors should focus on the impact the work is having on the child/adult.
2. The tool is to be used to audit the Childs/Adult’s case and records over the 12 months prior to the date of audit.
3. Please complete all Sections and answer N/A if not applicable.
4. References to **you/your** mean your agency.
5. For this audit tool an agency means a School, Housing Associations, Social Services, Local Authorities, Police, Probation, Youth Justice, Health and commissioned services.
6. When completing the audit tool please be clear on the information given e.g:

* Specific events, issues and references **should be dated**
* If an agency or worker contacted another agency- what **type of contact** was it, telephone, email
* If an agency or worker was invited to a meeting- **did they attend**

**West Midlands Regional Multi-Agency Audit Tool**

**Date:**

**Theme:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | **Name of auditor completing form:** |  | | **Name of your agency/organisation:** |  | | **Name of practitioner involved in the case:** |  | | **Date of audit:** |  | |

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| --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | **Name of Child / Vulnerable adult:**  **(delete as appropriate)** |  | | **Case status** |  | |

**Context questions:**

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| --- | --- | --- |
|  | How long has the case been open to your service? |  |
| Was the child or adult previously known? If yes for what reason? |  |

|  |  |  |
| --- | --- | --- |
| **PREVENTION /EARLY HELP/ THRESHOLDS** | 1. How were opportunities for prevention/ early help considered and utilised? |  |
| 1. How did this impact on the situation? |  |
| 1. Has the child/adult always received the right level of support? Please explain. |  |
| 1. If there is an escalation procedure, was it required and was it used appropriately? Please explain. |  |
|  | 1. How were disagreements resolved? |  |
|  |  |  |
| **ASSESSMENT** | 1. Which tools have been used for assessment (and when)? |  |
| 1. Are assessments timely and proportionate to risk?   Please explain. |  |
| 1. How do they consider the family history and context including use of chronologies and genograms? |  |
| 1. What steps have been taken to engage ***all*** family members in assessment? (have you considered estranged parents, new partners, step parents etc)   IE Support plans, CIN, CP plans etc |  |
|  |  |  |
| **PLANS** | 1. How are plans informed by assessment? |  |
| 1. How does the plan meet the child's/adult’s needs? |  |
| 1. How does the plan reduce risk for the child/adult? |  |
| 1. Are actions taken in appropriate time scales?   If not, why? |  |
| 1. Are reviews carried out in a timely manner?   If not, why? |  |
| 1. Is the plan outcome focussed?   Please explain. |  |
| 1. How has the plan had a positive impact on the child/adult? |  |
|  |  |  |
| **MULTI AGENCY WORKING** | 1. How are relevant agencies engaged in multi-agency decision making? |  |
| 1. Please describe how information sharing has impacted on the plan. Please identify good practice and any areas for development |  |
|  |  |  |
| **PERSON CENTRED APPPROACHES / LIVED EXPERIENCE (incl MSP)** | 1. How are the child’s/adult’s day to day lived experiences understood? |  |
| 1. How are children/adults safer as a result of the help they receive? |  |
| 1. How is the voice of the child/adult heard and incorporated into interventions? |  |
|  |  |  |
| **INTERVENTIONS** | 1. How has your agency identified vulnerabilities and root causes and are interventions and/or plans tailored to address these? |  |
| 1. How are individual and family strengths identified and built upon? |  |
| 1. What evidence Is there of the consideration and impact of age, disability, ethnicity, faith or belief, gender, gender identity, language, race and sexual orientation, mental capacity? |  |
|  | 1. Was prompt action taken to address interventions that are not working or where deterioration is recognised?   Please explain. |  |

**Learning**

|  |  |
| --- | --- |
| **Please record any actions for your agency identified by the auditor. Include any timescales and person/s responsible:** |  |
| **Is there good practice which should be highlighted?** |  |
| **Do you have any suggestions for practice improvement for your agency or the professionals group working with this individual/ family?** |  |

**Grading**

A Rating of “Outstanding” should be given where files exceed the standard expected for “good” and there have been significant and sustained improvements in regard to the wellbeing of or outcomes for the individual / carer. Outstanding files will demonstrate sound evidenced based or research-informed practice, some of which will be innovative, identifying that an exceptional difference has been made to the lives and experiences of adults with care and support needs.

The descriptor for a “good” rating should be used as a baseline for auditors when considering the effectiveness and impact of interventions to support, enable and safeguard children, young people and individuals with care and support needs and their carers.

A file should be rated as good where there is consistent evidence that practice is meeting expected standards. However, some questions may have more “weight” than others (for example, where there are safety concerns in terms of safeguarding or risks, poor outcomes for the person as a result of the intervention, etc). In such circumstances it may be necessary to rate as requires improvement even where there are a significant number of “good” ratings.

A “Requires Improvement” rating should be given where practice is not consistently meeting expected standards and actions or areas for improvement have been highlighted by the auditor.

An “Inadequate” rating should be given in one or more of the following circumstances:

• Practice is of concern

• Expected standards have not been met - this includes where the auditor cannot identify evidence / sufficient evidence to support all or most of the audit areas

• There are immediate actions needed to address concerns

Please use the criteria above to give the case an overall grade:

|  |  |
| --- | --- |
| Grading | Grade (X) |
| Outstanding |  |
| Good |  |
| Requires improvement |  |
| Inadequate |  |