

**Adult Services
Practice Quality Assurance Framework
September 2017**

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Introduction

Coventry City Council through its values and priorities is committed to delivering the best quality support for residents and families who have care or support needs, within the resources available. These are not just City Council resources but the resources available to the individual through their own families, friends, networks and other resources.

The purpose of this framework is to describe our Adult Services Practice Quality Assurance Framework and its components. The Framework forms part of the overall People Directorate performance management system and provides the overall setting within which our staff operate on a day-to-day basis according to the policies and guidance the City Council have developed to help them meet the care and support needs of people with care and support needs, and carers. Performance monitoring as outlined in this document will assure, evidence and improve the social care service we provide to residents and families in Coventry.

Aims and Objectives of the Framework

The aim of the Framework will be achieved through the following objectives. They are:

- To apply quality standards across Adult Services
- To take a consistent approach to how we monitor and evaluate quality
- To implement clear and robust governance arrangements for quality assurance
- To celebrate good practice and success
- To take action to support quality improvements when necessary
- To contribute to organisational learning

Adult Services seeks to develop a culture of openness and equality that empowers all social care staff to make professional judgements within a supportive environment. This includes proactive participation in quality assurance activities and frameworks.

Whatever their role or base, our aim is for social care staff to uphold best practice across health and social care and that all staff, regardless of qualification, are supported by policy and practice guidance to support application of statutory social care functions and practice, stored in the online [Adult Policies, Procedures and Practice Resource](#).

There are also a number of professions within Adult Services with specific registration requirements. For Social Workers and Occupational Therapists, these are described and regulated by the Health and Care Professions Council (HCPC). This framework does not replace or undermine the requirement for staff to maintain and comply with specific registrations where they exist.

Capturing evidence on how we are achieving positive outcomes for service users and carers is important. This can include examples of good practice, innovative working practice, improvements to services, user involvement in developments or decision making, and users' views about services. A 'storyboard' has been developed to allow anyone to submit an example of best practice and grow our evidence bank www.coventry.gov.uk/storyboardform.

Quality Assurance and its Value

Quality assurance in Adult Social Care can be described as:

‘Collection of ways in which we learn, improve and comply with legal, contractual and professional standards. As with all businesses, social care is at its best when people with care and support needs get the services and products they want and which do the things needed’.

Four levels of quality assurance can be identified:

- Ensuring safety - ‘Staff who provide care and support do not harm people with care and support needs and know how to provide a safe service and recognise and report neglect, exploitation and abuse’
- Complying with standards - ‘Registered services meet essential standards of quality and safety and staff meet professional and training standards’
- Improving quality - ‘Staff know what a good service looks like, know their role and value its importance’
- Learning about what works - ‘The service culture is one that encourages learning from mistakes and staff are able to make professional judgements’

Strategic Briefing, Quality Assurance, Research in Practice for Adults (2016).

Our Approach to Quality Assurance

The Adult Social Care Management Team (ASCMT) provides strategic leadership, oversight, scrutiny of professional and organisational performance systems and financial effectiveness in Adult Services.

This Team provides formal assurance to quality assurance processes, overseeing and agreeing any professional and organisational activity in response to performance management, improvement and quality assurance of service delivery.

The Team meets monthly and is chaired by the Director of Adult Services, with strategic and operational leads in attendance.

The findings from quality assurance will be collated, with compliance and key themes presented to the ASCMT on a quarterly basis. The findings will also form part of the Annual Account for Adult Social Care and used to supplement other information on the performance of Adult Social Care.

Our Quality Assurance Methods

This Practice Quality Assurance Framework will focus on self-assessment and quality assessment methods at social work and occupational therapy practitioner level. By applying the framework we will be able to achieve greater consistency and accountability in the quality of the service we provide and put the right support and challenge in place to improve practice.

The specific audit components are in two key areas, those to be owned and delivered by practitioners and their line managers and those that are delivered at an organisational level.

The elements relating to practitioner and their first line managers are:

- Staff Supervision audit
- Practice standards audit
- Practice observation

The elements to be led at an organisational level are:

- National Professional standards audit
- Caseload and workload audit
- Annual Health Check process
- Thematic practice reviews

Practice Quality Assurance Framework at a practitioner level

Staff Supervision Audit

Supervision should provide an opportunity for the worker to reflect on practice. It should provide support in complex work and decision-making and consider the professional development of the worker and the development of the wider service.

Within social care organisations, it is a fundamental performance management tool, the meeting point between professional and managerial systems and the bridge between the employee and the agency.

Supervision audit focuses on the nature, extent and quality of supervision carried out by any supervisor within the City Councils Adult Social Care Supervision Guidance. It ensures staff are guided and supported properly in relation to workload, casework and their personal professional development needs.

The aim of the audit is to ensure that all staff receives supervision at regular intervals and that the professional supervision of social care staff provides supportive challenge to their thinking and reasoning in relation to particular cases, in line with the individual's competence and responsibilities.

As part of the quality assurance to ensure guidance is being adhered to, the supervisor's line manager/supervisor or their representative will audit a random sample of supervision records (Appendix 1).

This will take place annually with audit activity spread over year and the requirement is to include at least one supervision record from each of the staff members supervised by a specific supervisor.

The audit leads will be line managers of supervisors.

Practice Standards Audit

This is a process in which the journey of the adult in relation to the current case holder's intervention is mapped in discussion with social workers, occupational therapists and social care professionals, within a reflective environment. The approach focuses on outcomes as well as the quality of record keeping. It will help the Adult Services to celebrate outstanding

social work, occupational therapy and social care practice as well as identify gaps and learning.

The aim of the audit is to assess and improve the quality of social work, occupational therapy and social care practice providing social workers, occupational therapists and social care staff with an opportunity to reflect on their practice, identify actions and develop professional competencies to improve their work.

A revised set of standards will be introduced for social work and social care staff, utilising a regionally agreed audit tool utilised as part of West Midlands Local Authority Peer Challenge approaches (Appendix 2).

For Therapy Services an internally designed audit tool will be used (Appendix 3).

Supervisors will be required to carry out audits, twice a year, in conjunction with social work, occupational therapists and social care staff; whom will be expected to evidence good practice and their rationale relating to key decisions on a particular case. This reflective audit will take as part of supervision at an agreed date/time and therefore does not require a separate session to be set up.

The audit lead will be the operational supervisor.

Practice Observation

Observation is embedded with qualifying education and post qualifying learning and development, it is a legitimate and recognised element of learning and therefore should continue throughout a career.

The aim is to ensure that all social care staff have appropriate practice observation in order to identify strengths and development needs.

On one occasion a year supervisors will be expected to observe the practice of each of those whom they supervise.

Practice will be observed by:

- Listening in on a telephone conversation with the person with care and support needs or carer, and;
- Accompanying the supervisee on a visit to the person with care and support needs or carer, or;
- Observing the supervisee at a meeting with the person with care and support needs or carer and others

The findings from this practice observation will be shared and discussed in the next supervision session, and accounted for in the supervision record and used for part of the annual assessment against the behaviour framework.

The views of the supervisee should be sought following these observations and a copy of those views and the direct observation record will be kept on the person's supervision file to inform their learning and development (Appendix 4).

The audit lead will be operational supervisors.

Practice Quality Assurance Framework at an organisational level

National Professional Standards (Social Workers and Occupational Therapy) Audits

The National Standards for Employers of Social Workers are standards, which set out the shared core expectations of employers which will enable social workers in all employment settings to work effectively.

These expectations are being incorporated within self-regulation and improvement frameworks for public services and used by service regulators (Ofsted, CQC). All employers providing a social work service should establish a monitoring system by which they can assess their organisational performance against these nationally agreed standards, set a process for review and, where necessary, outline their plans for improvement. Employers should ensure that their systems, structures and processes promote equality and do not discriminate against any employee.

The Department of Health and the Chief Social Worker for Adults in England have commissioned a self-assessment and action planning guide for Mental Health Services 'How are we doing, a self-assessment and improvement resource'. It is intended to enable organisations that manage and/or employ mental health social workers to self-evaluate whether they are providing the conditions for excellent practice – and to plan and deliver actions for improvement where needed.

The Professional Standards for Occupational Therapy practice (produced by College of OT on behalf of British Association of OT) describe a level of practice that the Association expects its members to abide by, and believe all occupational therapists should follow. Although primarily for occupational therapy personnel working in practice settings, they are applicable, with some interpretation, to others who have an occupational therapy background but now use their skills in different areas of work, for example, in education or consultancy; also those in a generic setting or in a role with a generic title. Maintaining these standards will ensure that practitioners meet the requirements to remain registered with the Health & Care Professions Council (HCPC).

Self-assessment audits will be undertaken against these National Professional Standards on an annual basis using a representative approach including the involvement and perspectives of front line staff and managers.

The audit lead will be the Adults Principal Social Worker.

Caseload and Workload Audit

Good caseload management and supervision processes are critical to maintaining effective practice. We need to ensure, and be able to demonstrate, that staff are maintaining caseloads of suitable sizes and complexities and are taking positive and proactive action to move cases on and resolve issues.

The National Standards for Employers of Social Workers in England, Standard 2 'Safe Workloads and case allocation' recognises the importance of this in protecting employees

and service users from the harm caused by excessive workloads, long waiting lists and unallocated cases.

The aim of the audit is to improve understanding of current caseload levels and activity undertaken with these caseloads.

Individual caseloads of each worker will be subject to ongoing monitoring through the established processes of supervision, this will seek to establish a parity of workload and activity to go alongside the qualitative measure of standards.

A regular annual organisational audit will be undertaken to identify the average caseloads for social workers and social care professionals in the organisation. Information on caseloads and activity will be drawn from Care Director.

This is in keeping with the National Standards for employers of social workers which require organisations to publish information about average caseloads for social workers in the organisation.

The audit lead will be the Adults Principal Social Worker with involvement from Heads of Service and General Managers.

Annual Health Check

The Social Work Task Force Report challenges social work employers to be part of a listening organisation. As part of their work programme, the Social Work Task Force recommended a 'National Standard for Employers' defined as "the development of a clear national standard for the support social workers should expect from their employers in order to do their jobs effectively" and provided a framework for helping employers and practitioners to assess the 'health' of their organisation which focused on the following areas:

- Effective workload management
- Proactive workflow management
- Having the right tools to do the job
- A healthy workplace
- Effective service delivery

An annual health check process will be undertaken as a self-assessment against the 5 areas, identify current strengths and plans to tackle areas for improvement.

A Health check process will include an online staff survey, focus groups (Appendix 5) and analysis of organisational intelligence on key areas.

The Health Check would include social workers, occupational therapists and social care professionals. The focus groups would discuss the following areas:

- Social care and social work practice and challenges
- Supervision and appraisal
- Learning and development – local authority and self-directed
- Career pathways and opportunities within the organisation
- Culture, organisational support and the voice of social care and social work
- Role and impact of the Principal Social Worker

The audit lead will be the Adults Principal Social Worker.

Thematic Practice Reviews

Certain areas of social care practice are sometimes identified for closer monitoring and review of current practice. Thematic practice reviews focus on these practice areas. The aim of these audits will be to explore the quality of practice relating to a specific area and as required improve and develop practice.

An annual cycle of themes for practice review will be produced. This will include up to four themed areas over the course of a twelve month period.

Themes will be informed by practice issues identified through a range of quality assurance activity and early warning systems such as recommendations arising from incidents, safeguarding adult's reviews; emerging issues identified from audit; complaints processes; Local Government Ombudsman or performance indicators. However each year a focus of audits will ensure coverage of personalisation and safeguarding practice.

Background documents evidencing policy and where possible, any existing evaluations of practice in relation to the thematic area will inform the review.

A thematic review group will be convened and will design the methodology for the review dependent on the thematic area and objectives of the review. This will usually include an element of auditing in discussion with case holders and could utilise practice standards audit tools. It could also involve facilitating some focus groups, work shadowing care staff and involvement of service users/carer representatives.

Themed practice proposals must be produced for each themed audit and the review group will be responsible for producing an analysis report:

- Key stages of a thematic practice review
- Scope, agree methodology and objectives
- Research, evaluate and investigation
- Report, recommend and propose

The audit lead will primarily be the Adults Principal Social Worker but audits can be led by other functions, for example, the quality assurance activity of Adult Safeguarding Boards could also count as a thematic review.

Implementation of the Framework

Audit methods will be deployed across the year. The annual audit plan is designed to ensure the most effective and efficient use of managerial, practitioner time and audit resources (Appendix 6).

The findings from quality assurance will be collated, with compliance and key themes presented to the ASCMT on a quarterly basis.

The requirement of staff in respect is as follows:

Front line staff

- To contribute to the quality assurance agenda via engaging with audit activity and making practice improvements

Operational managers/supervisors/Principal Social Worker

- Ensure that the required audits are undertaken in accordance with schedule and requirements
- Identify successes, areas for improvement and lessons learned within their service
- Identification of themes for review and support to the thematic review processes

Senior Leadership or Management Teams

- Consider the evidence from audit activity and ensure planned actions and timescales are implemented and result in quality improvements
- Share good practice, success and lessons learned
- Escalation of risks and issues relating to social care quality
- Identification of themes for review and support to the thematic review processes
- Ensure that the required audits are undertaken in accordance with schedule and requirements
- Identification of themes for review and support to the thematic review processes

Monitoring Our Progress

The Framework will be monitored by the Practice Development Forum, a bi monthly practice meeting chaired by the Adults Principal Social Worker. The Forum will consider and learning from quality assurance and propose any amendments or changes to the Practice Quality Assurance Framework.

Progress against delivering the framework will be monitored by the Director of Adult Services and form part of the Adult Social Care annual account. Specific themes identified will be used to celebrate good practice where it exists and inform development plans for further improvement.

Monitoring will include customer feedback and take steps to ensure that the standards reflect people's priorities on quality.

The Framework will be formally reviewed and updated annually by the Adults Principal Social Worker in conjunction with the Practice Development Forum. It should engage people with care and support needs to improve the Framework and quality standards. The review process may include the following:

- Mapping of current quality assurance practice in the service i.e. what is taking place and what is not against the proposed quality assurance schedule set out within this document
- A consultation with front line workers and managers on the value of the current quality assurance processes in relation to the how practice has been improved as a direct result; user-friendliness of the processes; drawbacks, barriers and limitations

Outcomes from the Practice Quality Assurance Framework will be reported formally on a quarterly basis to the Adults Social Care Management Team and included in the Adults Principal Social Workers annual report identifying:

- Any recurrent themes arising from the audit processes
- Any issues of concern arising from the audit processes
- Comment on the organisation's approach to practice and practice improvement
- Evidence that demonstrates social care and social work practice is making a difference to people lives
- Comment on the quality of social care and social work practice and experience for service users
- Comment on the distinctiveness of social care and social work (reflective, evaluative and dynamic) and how this is evident in practice

References and Supporting Documents

- Strategic Briefing, Quality Assurance, Research in Practice for Adults 2016
- Workforce Development SCIE Guide 38 Social care governance: a workbook based on practice in England 2011
- National Standards for Employers of Social Workers in England, Local Government Association May 2014
- Professional Standards for OT practice (produced by College of OT on behalf of British Association of OT) 2011
- How are we doing? A self-assessment and improvement resource to help social care and health organisations develop the role and practice of social workers in mental health, Department of Health January 2016

Appendix 1

Staff Supervision Audit

Name of Auditor	
Name of Supervisor	
Date of Audit	

Questions	Yes	Partly	No	Comments (if required)
Is there an up to date supervision agreement in place?				
Has supervision been held at the required frequency?				
Are the supervision records stored securely?				
Are case decisions being recorded on the case record?				
Have required observations taken place?				
Is there evidence that case records are being checked for quality of recording				
Do supervision records demonstrate critical reflection and constructive challenge?				
Is good practice being recognised?				
Is poor practice and performance being challenged appropriately?				
Have a variety of learning and development opportunities been identified and pursued?				
Are there progress checks towards appraisal objectives? (plus registration and CPD if appropriate)				

General Comments

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Are there any actions arising from this audit? (including arrangements for feedback)

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Subjects comments	
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Auditor's signature	
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Appendix 2

Adult Services Practice Standards Audit

Date of Audit	
Allocated Worker	
Case Identifier	
Name of Auditor	

1. Is the record coherent and the person's story and circumstances clear to understand? Is the case recording up to date?	
2. Is there evidence that the need for advocacy has been considered, and if appropriate offered?	
3. Does the assessment promote and reflect that the person's health and well-being has been considered, and that it is based on a strengths based approach?	
4. Does the care and support plan reflect personalised approaches and does it outline that the interventions are supporting the person to live the life they want, focusing on outcomes?	
5. Is there evidence that the person has been fully involved in the assessment, decision making and care and support planning?	
6. Is there evidence of relationship building as part of a range of direct social work and social care interventions?	
7. Does the assessment provide a sound analysis of risk and detail how this is going to be managed?	
8. Is there evidence that family members, carers and significant others have been involved in the assessment process, decision making and care and support planning?	
9. To what extent does the case file demonstrate that the intervention is based upon evidence-based practice?	

10. In safeguarding cases, have concerns and risks been fully considered and managed, and is there evidence of the 'Making Safeguarding Personal' approach?
11. Is there evidence of the use of legislation and social work interventions to empower the person e.g., DoLS, Mental Capacity Act, Mental Health Act and the Care Act (Safeguarding)? Have mental capacity assessments been undertaken?
12. To what extent are issues of equality and diversity demonstrated in the case file?
13. To what extent does the case file demonstrate dignity and respect?
14. What is your impression of the allocated worker's timeliness and responsiveness to the individual?
15. Is there evidence of evaluation, reflective and analytical thinking within the case file?
16. Is there a continuity of support where cases have been transferred from one team to another or from one worker to another?
17. Is there evidence of effective multi-agency working and appropriate contributions by partners to planning and service delivery?
18. Is there evidence of a rational of decision making and advice being sought and effective management oversight?
19. What was really good about this case?
20. Action plan following the practice standards audit (if applicable). Have areas of development/learning needs been identified? What action needs to be taken to address these? Is there a clear way to deliver these actions? Are there any other outstanding issues?

Appendix 3

Therapy Services Practice Standards Audit

Date of Audit	
Allocated Worker	
Case Identifier	
Name of Auditor	

1. Is the record coherent and the person and circumstances clear to understand? Is the case recording up to date?	
2. Does the assessment demonstrate the inter-relationship between occupation and health and wellbeing:- assessing occupational needs; facilitating occupational performance; analysing and prioritising these with the person?	
3. Do the actions and next steps reflect client centred personalised approaches and does it outline that the interventions are supporting the person to live the life they want, focusing on their outcomes?	
4. Is there evidence that the person has been fully involved in the assessment, decision making and support planning?	
5. Is there evidence of a therapeutic relationship building as part of a range of interventions?	
6. Does the assessment provide a sound analysis of risk and detail how this is going to be managed?	

7. Is there evidence that there is a focus on preventative measures to promote well-being and independence?
8. Is there evidence that family members, carers and significant others have been involved in the assessment process, decision making and action support planning?
9. To what extent does the case file demonstrate that the intervention is based upon evidence-based practice, taking account of most efficient and effective interventions?
10. Has safeguarding concerns and risks been fully considered and managed?
11. Is there evidence that practice and rationale has been guided by well-being and prevention principles in the appliance of legislative duties under Housing Grants, Construction and Regenerate Act 1996?
12. To what extent are issues of equality and diversity demonstrated in the case file?
13. To what extent does the case file demonstrate dignity and respect?
14. What is your impression of the allocated worker's timeliness and responsiveness to the individual?
15. Is there evidence of evaluation, reflective and analytical thinking within the case file?

16. Is there a continuity of support where cases have been transferred from one team to another or from one worker to another?
17. Is there evidence of effective multi-agency working and appropriate contributions by partners to planning and service delivery?
18. Is there evidence of a rational of decision making and advice being sought and effective management oversight?
19. What was really good about this case?
20. Action plan following the practice standards audit (if applicable). Have areas of development/learning needs been identified? What action needs to be taken to address these? Are there any other outstanding issues?

Appendix 4

Adult Services Practice Observation Template

Name of Worker	
Name and Role of Observer	
Date and Setting of Observation	

Part 1

Worker completes boxes one and two before observation

1. Brief background to observed contact between yourself and those in need of care and support.

2. Planning for intervention <ul style="list-style-type: none">The worker and observer plan the observation, agree and clarify the role of the observer during the intervention – how will they be introduced and under what circumstances.

Worker completes box three after observation

3. Reflections on the observed practice

Worker completes box four after reading the observer's report

4. Critical reflection and professional development <ul style="list-style-type: none">Have you identified any specific areas for further development? How do you intend to address these? What support do you need?

Worker Signature	
Date	

Part 2

Observer completes after the practice observation

1. Assessment of the workers capability demonstrated in the observation of practice

Observer completes after the practice observation

2. Action plan following the direct observation (if applicable) <ul style="list-style-type: none">• Have areas of development/learning needs been identified? What action needs to be taken to address these? Are there any other outstanding issues?
Feedback from people in need of care and support (if applicable)
<ul style="list-style-type: none">▪ It is the responsibility of the worker and observer to ensure that the person is given the opportunity to comment on the workers capabilities and to be offered feedback about the workers and assessor's own assessment. It is important that in all circumstances the worker considers the issues of consent and mental capacity.▪ More information about gathering feedback from people who need care and support following direct observations of practice can be found as part of the Skills for Care website, please refer to tool six under www.skillsforcare.org.uk/Gatheringfeedback

Observer's Signature	
Date	

Appendix 5

Adult Services Health Check – Focus Group Questions

Effective workload management

1. How fairly is work allocated in your team?
2. Tell me about how you manage the tasks/demands of your caseload and who helps with this?
3. Do you approach others to assist you in work, if so who?
4. Do you have any recommendations for change in relation to how work is allocated and how you are supported to meet the demands of your caseload?

Proactive workflow management

5. We are interested in your views about the adults experience in our service from the case being opened to it leaving your part of the service or being closed. Think about cases where everything flowed well, what enabled this to happen?
6. Think about cases where it did not flow well, what caused this?

Having the right tools to do the job

7. Social workers, Occupational Therapists and social care professionals need a variety of tools to practice effectively, for example: access to IT; translators; legal advisors; research material, office space and equipment; transport; commissioned services and management advice. Tell me about the tools you have at your disposal to assist with your work?
8. What are the good things about the tools you currently use? How could these be improved?
9. Do you have the right knowledge and skills to do your job (thinking about skills as well as access to appropriate information?) If not, what are the gaps and how might you work to improve on these areas?
10. Do you feel that you are able to use your knowledge and skills?

A Healthy Workplace

11. What helps you achieve good outcomes at work?
12. What helps staff resilience at work?
13. Tell me about your experiences of supervision.
14. What difference does the supervision you receive make to <ul style="list-style-type: none">- Your work?- Your professional development? And you?
15. Do you have any recommendations for change in relation to the supervision?

Approach to Practice

16. How far do you agree with the following statement on a scale of 1 - 10? "I take responsibility for trying to find solutions to problems in my work"
17. How far do you agree with the following statement on a scale of 1 – 10? "I reflect on my practice and the decisions I have made, and consider what I could have done differently"
18. Have you done any of the following as a result of reflecting on your own practice? <ul style="list-style-type: none">- I have improved my organisational skills- I have improved my time management skills- I have improved my communication skills- I have improved my interpersonal skills- I have improved how I make decisions- I have not made any changes
19. How do you learn from findings from compliments, comments and complaints?
20. I have seen and understand the National Standards for Employers of Social Workers?
21. I have seen and understand the Professional Standards for Occupational Therapy practice
22. I have seen and understand the self-assessment and improvement resource to help social care and health organisations develop the role and practice of social workers in mental health

Appendix 6

Annual Audit Plan

Timing	Who	Activity	How is it done?	Outcome
Annually	Line Managers of supervisors	Staff Supervision Audit	Review of supervision records	Supervision is effective and held at agreed intervals
Bi-annually	Supervisors	Practice Standards Audit	Supervisor in conjunction with staff member / case holder	Quality of practice subject to reflection and review
Annually	Supervisors	Practice Observation Audit	Supervisor shadowing a live activity or intervention	To identify good practice and improvements. Supervisors have insight into live practice.
Annually (Quarter 3 Oct – Dec)	Team & Service Managers, Adults Principal Social Worker and Practice Development Forum	National Professional Standards Audits	Focus group activity, self-assessment against standards and improvement planning	Endorsed self-assessment, shared awareness and adherence to national standards with shape best practice
Annually (Quarter 3 Oct – Dec)	Team & Service Managers and Adults Principal Social Worker	Caseload and Workload Audit	Team level caseload collection and analysis	Effective caseload management, with caseloads at an appropriate and safe levels
Annually (Quarter 4 Jan – Mar)	Front line staff, Team & Service Managers and Adults Principal Social Worker	Health Check	Self-assessment including an online staff survey, focus groups and analysis of organisational intelligence on key areas	Endorsed self-assessment, shared awareness and current strengths identified and plans to tackle areas for improvement
Quarterly	Team & Service Managers and Adults Principal Social Worker	Thematic Practice Reviews	Convened thematic review group with designed methodology for the review dependent on the area and objectives of the review	Quality of practice reviewed and improvement plans developed