

FINAL INTERNAL AUDIT REPORT
EDUCATION, CARE AND HEALTH SERVICES DEPARTMENT

REVIEW OF TROUBLED FAMILIES AUDIT FOR 2015-6

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REVIEW OF TROUBLED FAMILIES AUDIT FOR 2015-6

INTRODUCTION

1. This report sets out the results of our systems based audit of Troubled Families Audit for 2015-6. The audit was carried out in quarter 4 as part of the programmed work specified in the 2015 Internal Audit Plan agreed by the Section 151 Officer and Audit Sub-Committee.
2. The controls we expect to see in place are designed to minimise the department's exposure to a range of risks. Weaknesses in controls that have been highlighted will increase the associated risks and should therefore be corrected to assist overall effective operations.
3. The original scope of the audit was outlined in the Terms of Reference issued on 4 January 2016.

AUDIT SCOPE

4. The scope of the audit is detailed in the Terms of Reference.

AUDIT OPINION

5. Overall, the conclusion of this audit was that substantial assurance can be placed on the effectiveness of the overall controls. Definitions of the audit opinions can be found in Appendix C.

MANAGEMENT SUMMARY

6. At the time of our testing there were approximately 75 individual claims due to be made to the DCLG for 'Payment By Results'. As the Intelligence & Operations Team were still working on confirming claims to be made (before the deadline of 31 January 2016), we selected a sample of 10% i.e. seven claims to check. We also reviewed one claim which was being 'tracked' with a

REVIEW OF TROUBLED FAMILIES AUDIT FOR 2015-6

view to claiming for it in 6 months' if the Outcome Criteria were met at that stage and two claims which the Intelligence & Operations Team had identified as not meeting the Outcome Criteria.

7. Controls were in place and working well in the areas of :-
8. Meeting the national and local outcome criteria for 'Payment By Results' claims, providing management information for the status of cases and identifying those cases which have not been actioned for a given period of time.
9. Process mapping the Troubled Families working processes.
10. Progressing the data sharing agreements which are required with other partners from whom the Intelligence & Operations Team require data.
11. However we would like to draw to Management's attention the following issues relating to the main scope of the audit:
12. There was no evidence of authorisation given by a Senior Family Support and Parenting Practitioner to close a case, or that the Intelligence & Operations Team had been consulted prior to the closure, to ensure that the required outcomes had been met and there was evidence of significant and sustained progress.
13. The check carried out to identify whether or not a family has been attached and claimed for previously under the Troubled Families Programme should be done as part of the screening process when new referrals are received.
14. The information recorded on the Synergy database about action taken in Troubled Families cases was not always clear and comprehensive.
15. Goals for a family could not always be related to the Outcome Plan and the need to meet the 'significant and sustained' progress required for a Troubled Families claim.
16. During the course of our audit testing we also identified the following areas for improvement, which fall outside of the main scope of the audit but are included here and recommended for Management to address:-

REVIEW OF TROUBLED FAMILIES AUDIT FOR 2015-6

Issues identified, particularly where a Family Support and Parenting Practitioner is off sick or not available for other reasons, or there are difficulties contacting the client, need to be followed up promptly and appropriately.

In two cases from our sample there was no evidence of a letter sent to the client confirming that the case was being closed.

SIGNIFICANT FINDINGS (PRIORITY 1)

18. There are no significant findings.

DETAILED FINDINGS / MANAGEMENT ACTION PLAN

19. The findings of this report, together with an assessment of the risk associated with any control weaknesses identified, are detailed in Appendix A. Any recommendations to management are raised and prioritised at Appendix B.

ACKNOWLEDGEMENT

20. We would like to thank all staff contacted during this review for their help and co-operation.

DETAILED FINDINGS

No.	Findings	Risk	Recommendation
1	<p>From our sample of cases which had been closed, we were unable to see evidence that authorisation to close the case had been given by the Senior Family Support and Parenting Practitioner or that the Intelligence & Operations Team had been consulted prior to the closing of the case, to ensure that the required outcomes had been met and there was evidence of significant and sustained progress.</p>	<p>It may not be possible to make a claim for the action taken to turn a family around, due to a lack of evidence of meeting required outcomes. Significant and sustained progress may not have been achieved.</p>	<p>Ensure that, when a Troubled Families case is due to be closed :-</p> <p>(a) the Senior Family Support and Parenting Practitioner consults with the Intelligence & Operations Team to confirm that the required outcomes have been met and there is evidence of significant and sustained progress to enable a claim to be made,</p> <p>(b) authorisation to close the case is given by a Senior Family Support and Parenting Practitioner and the decision is documented on Synergy,</p>

Priority 1
Required to address major weaknesses and should be implemented as soon as possible

Priority 2
Required to address issues which do not represent good practice

Priority 3
Identification of suggested areas for improvement

DETAILED FINDINGS

No.	Findings	Risk	Recommendation
2	<p>We carried out a check of a sample of Phase 2 cases that had demonstrated either sustained and significant progress or employment progress. We compared these to the spreadsheet of cases which had been claimed for in Phase 1.</p> <p>This identified that two of the cases in our sample had been claimed for in Phase 1. We found that the Intelligence & Operations Team were aware of and had already identified these two cases and six others as part of their checking process to ensure that duplicate claims are not made to the DCLG.</p> <p>Whilst families are included on the Phase 2 spreadsheet of existing cases because they meet the Troubled Families referral criteria and require support, there is no flag on the spreadsheet to show that they have already been claimed for in Phase 1.</p>	<p>An accurate match between Phase 1 and Phase 2 data is a complicated process which could result in duplicate claims being produced and damage to the Council's reputation and integrity.</p>	<p>Carry out the check, to identify whether or not a family has been attached and claimed for previously under the Troubled Families programme, as part of the screening process when new referrals are received. Include a flag on the spreadsheet where any are identified. [Priority 3]</p>

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3	From our sample of cases we found that the information recorded by the practitioners was not consistent in depth and coverage e.g. where historic domestic violence had been identified as a criteria, it was not always evidenced if the client had been informed of a refuge service or confirmed that they had a place to go if the violence recurred.	If challenged, the Council may not be able to evidence the scope and type of the action taken to turn a family around.	Remind all Family Support and Parenting Practitioners that information recorded on the Synergy database about action taken in Troubled Families cases needs to be clear and comprehensive. [Priority 3]
4	We were unable to evidence for two cases in our sample that the goal setting process had been drawn up to meet the 'significant and sustained' progress for the family against which a claim could be made. We were informed that training for Family Support and Parenting Practitioners to relate goals to an individual family's Outcome Plan is due to be provided from April 2016.	A claim may not be made for a family because the goals set do not align with the Outcome Plan and/or do not demonstrate that significant and sustained progress has been made.	Ensure that goals set for a Troubled Family relate to the family's Outcome Plan and, when met, will demonstrate that significant and sustained progress has been made, enabling a claim to be made. [Priority 2]

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5	We found that in two cases from our sample there was no evidence of a letter sent to the client confirming that the case was being closed.	Unable to verify action that was taken by the practitioner..	A copy of the letter sent to the client confirming that the case is being closed is attached to the Synergy database. [Priority 3]
6	<p>We selected a sample of five current cases from the weekly management information report which highlights cases which have not had a recent contact recorded on the Synergy database by the Family Support and Parenting Practitioner. In four of those cases further contact action had been taken since 11 January 2016 and recorded on Synergy. We found that in one case however the Family Support and Parenting Practitioner was off sick. The client had been alerted of this and provided with the contact details of the Senior Family Support and Parenting Practitioner.</p> <p>We selected four further cases from that Practitioner’s workload. We identified one case (Sample 1) where the initial meeting with the client on 22 December 2015 had identified that her accommodation was suffering from damp and that she had debts outstanding and no repayment plan. An initial</p>	Lack of on-going involvement and face-to-face communication with client, leading to loss of confidence in service provided by Bromley Children's Project and possible disengagement.	<p>Ensure that any issues identified from cases which do not appear to have been actioned are followed up promptly and appropriately, particularly where a Family Support and Parenting Practitioner is off sick or not available for other reasons, or there are difficulties contacting the client.</p> <p>[Priority 2]</p>

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	<p>assessment was carried out but was rejected by the Senior Family Support and Parenting Practitioner as it was not complete. There was no evidence as at 15 February 2016 that the assessment had been completed or that these issues had been progressed.</p> <p>In one other case (Sample 2) similar text messages had been sent to the client on 4 and 11 December 2015 informing her that the practitioner was off sick.</p> <p>The contact for 11 December 2015 states 'phoned mum on both mobile numbers given and both were unavailable . . . also phoned the house number but the phone rang with no option to leave a message.'</p> <p>On 20 January 2016 the Senior Family Support and Parenting Practitioner sent a text message to the client explaining the situation and offering to help.</p> <p>A further attempt to contact the client was made on 10 February 2016 by an Admin Officer. The contact message on Synergy states 'Tried to contact to notify (client) that (practitioner) was still off sick - Number not in service.'</p>		

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	There was no evidence as at 15 February 2016 what alternative action had been taken to try to contact the client, given that the home and mobile phone numbers provided were not in use.		

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MANAGEMENT ACTION PLAN

Finding No.	Recommendation	Priority *Raised in Previous Audit	Management Comment	Responsibility	Agreed Timescale
1	<p>Ensure that, when a Troubled Families case is due to be closed :-</p> <p>(a) the Senior Family Support and Parenting Practitioner consults with the Intelligence & Operations Team to confirm that the required outcomes have been met and there is evidence of significant and sustained progress to enable a claim to be made,</p> <p>(b) authorisation to close the case is given by a Senior Family Support and Parenting Practitioner and the decision is documented on Synergy,</p> <p>Project Code: ECH/030/01/2015</p>	2	<p>Current processes already dictate that cases can only be closed with the authorisation of the Senior Family Support & Parenting Practitioners although this is not always clearly evidenced in Synergy Connect. A new case closure procedure will be agreed and implemented at the same time as the assessment re-design which incorporates Signs of Safety and Troubled Families Phase 2. The case closure will not only formalise the authorisation for closures by Senior Family Support & Parenting Practitioners but also take into consideration the need to directly consult the Intelligence & Operations Team (Intelligence & Operations Team) on each closure.</p> <p>Page 11 of 18</p>	Head of Service, Early Intervention & Family Support and Intelligence & Operations Lead	30/04/2016

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Finding No.	Recommendation	Priority *Raised in Previous Audit	Management Comment	Responsibility	Agreed Timescale
2	Carry out the check, to identify whether or not a family has been attached and claimed for previously under the Troubled Families Programme, as part of the screening process when new referrals are received.	3	A list of families and individuals claimed under phase 1 of the Troubled Families Programme has now been added to list of data checks that occur within the Intelligence & Operations Team upon receipt of a referral for family support. A field has been created on the Synergy Connect database for this information. Although this will inform the Senior Practitioner Panel and Family Support & Parenting Practitioner that the case has been claimed under phase 1, the referral decision, allocation and support offered will be treated no differently than any other referral. This is currently being backdated so that families claimed under phase 1 are immediately obvious in our current phase 2 and live	Intelligence & Operations Team	New fields in use and backdated by 31/03/2016

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MANAGEMENT ACTION PLAN

Finding No.	Recommendation	Priority *Raised in Previous Audit	Management Comment	Responsibility	Agreed Timescale
3	Remind all Family Support and Parenting Practitioners that information recorded on the Synergy database about action taken in Troubled Families cases needs to be clear and comprehensive.	3	case cohort. Given Early Interventions & Family Support's direction to implement the Signs of Safety framework across all aspects of the service, we have taken the opportunity at the same time to redesign our assessment process around Phase 2 of Troubled Families. A major part of this will be delivering clear training to all practitioners to create a consistent approach to recording information. Intermediate guidance has already been provided and one-to-one sessions have taken place with all practitioners. Senior Family Support & Parenting Practitioners will ensure that the quality of case notes and closing statements are of a high standard and address the	Senior Family Support & Parenting Practitioners	Training provided by 30/04/2016 and ongoing review

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			outcome plan. Regular supervisions, deep dives and case management discussions will reiterate this.		
4	Ensure that goals set for a Troubled Family relate to the family's Outcome Plan and, when met, will demonstrate that significant and sustained progress has been made, enabling a claim to be made.	2	As discussed with the auditor, the majority of cases included in the audit were cases closed before the current Outcome Plan was in place and therefore it could not be expected that these goals were linked to an Outcome Plan. Work has been underway since September 2015 to implement a new robust Outcome Plan, new processes and new evidence based recording systems for the Troubled Families Programme. Given Early Interventions & Family Support's direction to implement the Signs of Safety framework across all aspects of the service,	Senior Family Support & Parenting Practitioners	New goal process released by 30/04/2016 and ongoing review

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			we have taken the opportunity at the same time to redesign our assessment process around Phase 2 of Troubled Families. This process will be primarily goal orientated. A new goal structure has been designed that directly links each goal to an item on a family's outcome plan and shows the steps to achieve this goal. All goals for a family will be visible to review progress against the outcome plan. Senior Family Support & Parenting Practitioners will ensure that goals set are appropriate and are regularly updated and reviewed through regular supervision.		
5	A copy of the letter sent to the client confirming that the case is being closed is attached to the	3	Current processes direct that all cases should have a closure letter sent to the family and the referrer	Head of Service, Early Interventions & Family Support	13/04/2016

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	Synergy database.		upon case closure, and that this is attached to the contact history on the Synergy Connect database. Family Support & Parenting Practitioners will be reminded of the importance of attaching closure letters.		
6	Ensure that any issues identified from cases which do not appear to have been actioned are followed up promptly and appropriately, particularly where a Family Support and Parenting Practitioner is off sick or not available for other reasons, or there are difficulties contacting the client.	2	A formal process is to be established that sets out the appropriate actions and timescales to ensure families are supported in the event of Family Support & Parenting Practitioners being unavailable for any reason. This will set out the timescales at which point it is required for Senior Family Support & Parenting Practitioners to contact, take on and reallocate cases. Regular supervisions of cases by	Head of Service, Early Intervention & Family Support and Intelligence & Operations Lead	30/05/2016

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			Senior Family Support & Parenting Practitioners and new goal orientated processes will ensure that support is offered and reviewed regularly. The new structure will allow for reminders of impending outstanding actions to automatically be sent to Family Support & Parenting Practitioners.		

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OPINION DEFINITIONS

APPENDIX C

As a result of their audit work auditors should form an overall opinion on the extent that actual controls in existence provide assurance that significant risks are being managed. They grade the control system accordingly. Absolute assurance cannot be given as internal control systems, no matter how sophisticated, cannot prevent or detect all errors or irregularities.

Assurance Level

Definition

Full Assurance

There is a sound system of control designed to achieve all the objectives tested.

Substantial Assurance

While there is a basically sound systems and procedures in place, there are weaknesses, which put some of these objectives at risk. It is possible to give substantial assurance even in circumstances where there may be a priority one recommendation that is not considered to be a fundamental control system weakness. Fundamental control systems are considered to be crucial to the overall integrity of the system under review. Examples would include no regular bank reconciliation, non-compliance with legislation, substantial lack of documentation to support expenditure, inaccurate and untimely reporting to management, material income losses and material inaccurate data collection or recording.

Limited Assurance

Weaknesses in the system of controls and procedures are such as to put the objectives at risk. This opinion is given in circumstances where there are priority one recommendations considered to be fundamental control system weaknesses and/or several priority two recommendations relating to control and procedural weaknesses.

No Assurance

Control is generally weak leaving the systems and procedures open to significant error or abuse. There will be a number of fundamental control weaknesses highlighted.