

**Manchester City Council
Report for Information**

Report To: Audit Committee - 23 June 2017
Subject: Child Protection Visit Performance
Report of: Head of Internal Audit and Risk Management

Summary

This report provides details of actions taken to report an error in the January 2017 Internal Audit Assurance report and assurance for Audit Committee over performance in Child Protection Visits.

Recommendations

Members are requested to note the report.

Wards Affected:

None

Contact Officers:

Carol Culley
City Treasurer
Tel: 234 3406
E-mail c.culley@manchester.gov.uk

Tom Powell
Head of Internal Audit and Risk Management
Tel: 234 5273
E-mail t.powell@manchester.gov.uk

Background documents (available for public inspection):

- Internal Audit Assurance Report January 2017

1. Purpose of Report

- 1.1. At the January 2017 Audit Committee the Head of Audit and Risk Management presented an audit assurance report that reported a decline in performance in recording of Child Protection Visits. Audit Committee noted this as a concern and asked that the matter be referred to Children's Scrutiny Committee and Corporate Parenting Panel for Further Review.
- 1.2. Following the Audit Committee meeting this matter was followed up with the Internal Audit Team and the Director of Children's Services (DCS). This additional review identified errors in the figures reported in the audit report and summarised in the report to Audit Committee.
- 1.3. This report confirms the actions taken to acknowledge errors in reporting, confirm the actual performance and avoid reoccurrence.

2. Actions Taken to Acknowledge Error in Reporting

- 2.1. On 8 February 2017 the reasons for the error and confirmation actual performance were sent by the Head of Audit and Risk Management to the Director of Children's Services, City Treasurer, Audit Committee Chair, Children's Scrutiny Chair, Executive Member for Children's Services and Executive Member for Finance, HR and ICT.

3. Reasons for Error

- 3.1. In 2016 Internal Audit started to produce an eight weekly summary report for Children's Services Management based on whole population analysis of MiCare system data. The aim of this was to focus on issues previously identified in casework audits with regard to recording activity; to determine timely recording activity and service targets in the period and to show the overall direction of travel in terms of improvement.
- 3.2. At that time, this approach to data analysis approach provided insight into progress with recording of data and activity on MiCare, in areas that had not been previously reported. Similar live data monitoring/performance information has since been refined and developed within Children's Services and is provided on a weekly and monthly basis by the Performance Team.
- 3.3. As with all Internal Audit reviews, key findings from these reports have been referenced in Audit Committee papers. The January 2017 Audit Assurance report to Audit Committee included a couple of highlights from the most recent monitoring that were an understandable cause of concern to Members as they indicated a significant deterioration in Child Protection Plan (CPP) visit performance. In particular the report stated that "CPP with no visit recorded increased from 7% of total to 19%"

- 3.4. Audit Committee determined that their concerns should be referred to Children's Scrutiny Committee and Corporate Parenting Panel for further consideration and to ensure actions were being taken to address the worsening performance as reported.
- 3.5. Following Audit Committee, both the Head of Audit and Risk Management and Director of Children's Services sought assurance over the actions being taken to address the reported performance issues. This review identified two issues
- Data provided as the basis for the audit report related to an earlier period and had been provided in error. This meant that the performance figures for CPP 'cases without visit' were misreported to management and to Audit Committee as 19% - the figure using correct data was 8%. At the time of the Committee, the reasons for this significant variation had not been fully considered by Internal Audit or management, which should have been done and could have identified this error.
 - Case visit analysis by the Performance Team in their weekly reports, used for Improvement Board and Scrutiny reporting/analysis by Internal Audit are using different approaches and methodologies. Crucially it is worth noting the DCS installed a 'service standard' for visits to children to be undertaken in 4 weeks, whereas the minimum statutory requirement is 6 weekly. The Performance Team's use of live data on a weekly basis enables them to determine more precisely those cases that should have had a visit, whereas Internal Audit figures cover a two month period.

4. Actual Performance

- 4.1. The live recording/reporting data provided by the Performance Team for the same period showed a far more positive position on compliance as follows:

4 week management service standard targets

January 2017

29 of 927 had not had a visit in the last 4 weeks (3.1%) - (96.9% did)

December 2016

36 of 953 had not had a visit in the last 4 weeks (3.8%) - (96.2% did)

November 2016

14 of 932 had not had a visit in the last 4 weeks (1.5%) - (98.5% did)

6 week statutory timescales

January 2017

3 of 929 had not had a visit in the last 6 weeks (0.3%) - (99.7% did)

December 2016

4 of 953 had not had a visit in the last 6 weeks (0.4%) - (99.6% did)

November 2016

6 of 932 had not had a visit in the last 6 weeks (0.6%) - (99.4% did)

- 4.2. Whilst the difference in approach would not impact on trend analysis, it gave rise to confusion and obvious disparities between reported figures that were not helpful.
- 4.3. The service continues to monitor performance on visits within four weeks and whilst this has reduced from the position reported in early 2017 the latest reported performance for April 2017 was 96% and for May 2017 was 98.5%.

5. Conclusion and Next Steps

- 5.1. Given that the Performance Team now provide a range of performance indicators and data quality measures which include CPP cases without visit, the Internal Audit team have agreed an approach with the Performance Team that ensures that Children's Services Leadership and Management Teams and Members receive assured, robust, reliable data based on a single data set in future. Performance will provide the reports and Internal Audit work will consider the basis of reports and improvement actions as part of ongoing audit planning.

6. Recommendations

- 6.1. Audit Committee are asked to note the report