CASE FILE ANALYSIS - GUIDANCE FOR THE LOCAL AUTHORITY

Introduction

The main purpose of file reading is to collect information that will assist the joint review team in reaching a valid judgement in respect of the key dimension *How well are people served?* This means reaching conclusions about performance in each of the domains associated with that dimension:

- access to services
- assessment
- care management and review
- range of services provided
- quality of services provided
- arrangements to protect vulnerable people
- success in promoting independence and social inclusion.

We will analyse approximately 50 of the more complex cases in respect of all these domains. Depending on the size of the authority, another 3-5 cases for each services user group will be scrutinised in respect of specific domains such as access, assessment, range of services, etc. This exercise (followed by discussion with selected staff and service users in the case study part of the process) should enable a number of key questions to be answered in relation to:

- the authority's general approach to case management practice
- the way this is delivered for specific groups of users and carers.

Some of these key questions are set out in Appendix 1.

Because of the powers to require information vested in the National Assembly for Wales by the Health and Social Care (Community Health and Standards) Act 2003 (Chapter 6, section 100), reviewers have the authority to examine any file/record connected with reviews and investigations. Permission does not have to be obtained from users or carers.

Case file selection

Please nominate an officer to help create the sample of case files. This person will need to accompany the liaison officer to any meeting with the lead reviewer during the preparatory stages (see below).

You are asked to make available around 80 case files for examination by reviewers. The lead reviewer will be responsible for selecting the case files to be seen, by drawing from a sample of names provided by the authority. The selection will need to be finalised no less than 2 weeks before the beginning of file reading.

The number of files will vary slightly, according to the authority's size. Usual practice is that 8-10 cases are selected from each main client group. There are about 9 identified client groups:

- Older people (including older people with dementia).
- People aged < 65 with a physical disability or sensory impairment
- People with a learning disability
- Mental health service users
- Other (e.g. /substance misuse/asylum seekers/ HIV. *This to be agreed with the lead reviewer and it will depend upon numbers in the authority, the existence of specialist teams, etc.*)
- People who were referred under the Protection of Vulnerable Adults procedure in the last 2 years.
- Children with disabilities
- Looked after children (including care leavers)

- Child protection
- Children in need (excluding child protection, including YOT)

The sampling process will go through the following stages.

Stage 1: During the initial meeting with the liaison officer and then in the set-up meeting, the lead reviewer will discuss the nature of the authority's client index and the feasibility of producing a sample frame as per Stage Two (below). Some adjustments can be made to the sampling methodology, with the agreement of the lead reviewer. For audit purposes, the lead reviewer must record any decisions of this nature.

Stage 2: For each of the following client groups, you are asked to produce an accurate list in alphabetical order of all cases which are referred or open at the time of the sampling, or were closed within the previous 6 months.

Stage 3: The authority then counts the number of cases on the list and turns this into a random sample of the following size:

- 40 older people,
- 20 clients in each of the other main adult groups, LD, MH, PSI
- 20 children with disabilities,
- 20 looked after children,
- 20 child protection cases,
- 20 children in need,
- 20 'other' (*as agreed with the lead reviewer)*.
- 15 vulnerable adults

The method for doing this is to tick every *nth* name on the list, depending on the size of the client group. *(Note that this will give 180-215 names, allowing the lead reviewer to select one in two or three).*

Stage 4: The sample frame is shown to the social work teams, who check the accuracy of the data. If the relevant data is invalid, you may choose to remove a name and replace it randomly with another one, recording the reason for doing so and making this information available to the lead reviewer.

Stage 5: The sample frame for each client group is emailed to the joint review team no less than 4 weeks before the beginning of file reading. Each list needs to be arranged into a table containing the following information:

Case file sample requirements:

Ref No	Date of Birth	Gender	Ethnicity	Disability	Date opened	Date closed	SW team	Case manager	Services being received or awaited	Legal Status
				NB. For older people, it is important to state here whether the person has dementia.					*e.g. residential, Learning Disability, Mental Health, nursing etc*	

Stage 6: The lead reviewer will select the required number of cases from each list, aiming for a balance in terms of age, gender, ethnicity, disability, etc. At this stage, the lead reviewer might also request additional files for some users. This might include, for example, the file of the foster carer with whom a child is placed or the case records from a user's residential care home or day centre.

Stage 7: The selection and additional requests will be emailed back to the authority no less than 2 weeks before the start of the file reading.

Records of each stage of the sampling process should be kept, for audit purposes.

Next steps

Once the case sample has been agreed, please ensure that the case manager completes the case analysis pro forma (see 1.13.1) and the relevant flow chart (see 1.12.2 - 6) before we read the file. You are asked to assemble the requested files in the agreed location by the first day of file reading. It is helpful if files are collated by service user group and within each group, by reference number. Secure storage needs to be made available within the space provided for the joint review team to read files. If a file is required by a social work team during the case file analysis period, reviewers will ensure that it is read and returned as soon as possible. Files will not be taken off site and will be returned to the teams immediately after the case file analysis.

When reading files in the agreed sample, we may ask to:

- speak to key staff, seeking clarification or to explore possible concerns
- scrutinise other files.

The file reading sample will be used to select a smaller number of cases for more thorough examination by means of interviews with individual users, carers, case managers and service providers. This part of the methodology ("Case Studies") is explained in more detail in the relevant section.

Key Questions

- Are people screened into the system effectively, with proper regard to urgency and complexity?
- What are response times?
- Are needs assessed by gathering the key information from all who have it, including users, carers and other agencies?
- Are relevant statutory requirements and guidance adhered to?
- Is this information used to design the service response?
- Are the types and costs of services provided commensurate with the identified levels of need?
- Do the processes used and the outcomes achieved match the authority's stated intent?
- Do plans maximise the capability of users and the responsibility of other agencies?
- Do plans specifically deal with the needs of carers, whenever this is appropriate?
- Do plans deal explicitly with potential conflicts of interest – user/carer, wants/needs, eligibility/choice?
- Do plans remain responsive and how is this checked?
- How much choice do users and carers have within the overall constraints of resources and statutory responsibilities?
- How easy is it for users and carers to understand the system and how users are experiencing it?
- Do managers monitor the way their staff operate the system and how users are experiencing it?