# Audit of [insert activity or practice area]

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| Name: |  |
| Social Work England registration number: |  |
| Audit covering activity between dates: |  |
| Sample size: |  |

# *Column headings may be edited to suit specific type of audit if more relevant fields exist but dates, reasons and sign off must be referenced as a minimum.*

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| **Item being audited:**  (record, plan, assessment etc) | **Date on item being audited:** | **Related service user ID:** | **Contact or entry appropriate for case?**  (Y/N and reasons) | **Entry made within designated timescale?**  (Y/N and reasons) | **Follow up action taken?**  (Y/N and reasons) | **Follow up action taken within designated timescale?** (Y/N and reasons) | **Completed to satisfactory standard?** (Y/N and reasons) | **Any remedial action needed?**  (Y/N and reasons) | **Remedial action completed and by when?**  (Y/N and dates) |
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| *Add or delete lines as appropriate* |  |  |  |  |  |  |  |  |  |

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| **Signed (social worker):** |  | **Date audit completed:** |  |
| **Signed (line manager / supervisor / reporter / mentor):** *delete as appropriate* |  | **Date audit signed off:** |  |
| **Counter-signatory comments:** | | | |
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