

READING BOROUGH COUNCIL

REPORT BY HEAD OF TRANSFORMATION AND GOVERNANCE

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| TO: | ADULT CHILDREN AND EDUCATION COMMITTEE | | |
| DATE: | 3 FEBRUARY 2016 | AGENDA ITEM: | 7 |
| TITLE: | QUALITY ASSURANCE FRAMEWORK REFRESH | | |
| LEAD COUNCILLOR: | CLLR JAN GAVIN | PORTFOLIO: | CHILDREN'S SERVICES |
| SERVICE: | CHILDREN, EDUCATION AND EARLY HELP | WARDS: | BOROUGHWIDE |
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1. PURPOSE OF THE REPORT AND EXECUTIVE SUMMARY

- 1.1 Adult Children and Education Committee received a paper from the Managing Director in June 2015 recommending that a Children's Services Improvement Board be established. This was agreed and the Board has had oversight of the quality of service provision in order to support the service in driving forward improvements.
- 1.2 This report builds on the emphasis of quality and refreshes the directorate's approach to performance and to quality assurance. It outlines how we will assure ourselves, the elected members and service users that the services we deliver are of high quality.
- 1.3 It contains a refreshed audit programme for the directorate which will ensure that we are auditing approximately 100 case files per quarter and using the findings from those audits to deliver improvements and to share best practice.
- 1.4 A strong quality assurance framework assists the organisation to deliver an efficient and effective service. The framework if applied correctly will assist managers and the organisation to ensure:
 - Vulnerable children, young people and their families' outcomes are improved.

- Services are achieving consistently high standards.
- Services are regularly monitored, reviewed and evaluated.
- The organisational culture is committed to learning and continual development.
- The continuous improvement and development of the children's workforce.

1.4 It is important for this framework to be agreed by members both as part of their corporate parenting responsibilities and their democratic accountability.

1.4 The Quality Assurance Framework is attached as Appendix 1

2. RECOMMENDED ACTION

2.1 It is recommended that the Committee approves the Quality Assurance Framework for use in Children, Education and Early Help Directorate and that it notes that the Annual Report should be added to the forward plan.

2.2 That the Quality Assurance Framework is presented to the Audit and Governance Committee.

3. POLICY CONTEXT

3.1 Quality Assurance is part of a continual cycle of improvement. Whilst audit is one component of quality assurance, it is one of a number of tools we can use to evaluate our understanding of how we are delivering services and understand the experience of the service user. Surveys, consultations, focus groups and direct observations are other ways in which we can establish a baseline understanding of our services.

3.2 The Directorate has agreed that in order to deliver the framework they will have operational boards that fit neatly into the performance and business planning cycles.

3.3 A series of monthly operational performance boards will be summarised and themes fed into a quarterly operational quality assurance board. At the quarterly board, Heads of Service and key service managers will receive feedback from performance reports, audits, complaints, IRO escalations, service user feedback, quality of commissioned provision and themes arising from supervision.

3.4 The themes will be collated from this information and will be prioritised into a workplan that will inform the service plans and will input directly into the

Learning and Development framework to secure continual improvement. It will also determine what activity needs to take place, for example, whether we need to refresh a process, to undertake a multi-agency audit, or to undertake further consultation or focus groups with service users.

- 3.5 Quality Assurance and performance reports will be available through the normal Corporate Performance Reporting systems.
- 3.6 The Annual Quality Assurance report will however be reported formally to the Adult Children and Education Committee.

4. CONTRIBUTION TO STRATEGIC AIMS

- 4.1 This proposal is in line with the overall direction of the Council by meeting two of the following Corporate Plan priorities:
 - 1. Safeguarding and protecting those that are most vulnerable;
 - 2. Providing the best start in life through education, early help and healthy living.
- 4.2 Delivery of the Quality Assurance Framework will demonstrate the delivery of the Corporate Values and it is expected that the Quality Assurance Board will ensure this is done taking into account how we deliver on equalities.
- 4.3 The directorate's deliver of the Strategic Aim "To promote equality, social inclusion and a safe and healthy environment for all" will be monitored through the Quality Assurance Framework.
- 4.4 **Community Safety Implications** - Under Section 17 of the Crime and Disorder Act 1988, the Council must consider the following in the exercise of its duties and decision-making:
 - crime and disorder
 - anti-social behaviour
 - behaviour adversely affecting the environment
 - substance misuse reduction
- 4.5 The Quality Assurance Framework will be an additional mechanism for improvements and dissemination of best practice in relation to all service delivery areas within Children, Education and Early Help, including monitoring how the Directorate responds to youth offending, domestic violence and anti-social behaviour issues including substance misuse.

4.6 A regular quality assurance and performance monitoring framework will assist in addressing health inequalities for our service users and will help us to identify and address with partners how they can assist in addressing this issue.

5. EQUALITY IMPACT ASSESSMENT

5.1 Under the Equality Act 2010, Section 149, a public authority must, in the exercise of its functions, have due regard to the need to—

- eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

5.2 An Equality Impact Assessment (EIA) is not relevant to the decision as a good overview of the quality of service delivery will address any inequalities and seek to remove them.

6. LEGAL IMPLICATIONS

6.1 Whilst there are no legal implications in relation to this report, it is important to note that under Children's Services legislation, we are required under a general duty of the Children Act 2004 to address the quality of services and to safeguard and promote the welfare of children. This framework establishes a clear mechanism for doing so.

7. FINANCIAL IMPLICATIONS

9.1 There are no financial implications arising from this report.

Children's Social Care Quality Assurance Framework

January 2016

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About this document

| | |
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| 22/01/2016 | Draft 0.1 | First Issued | Katherine Peddie |
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Intended Audience

This document has been issued to the following people for Review (R) Information (I) and Review and Sign off (S). The Quality Assurance Framework should be shared with all staff and elected members.

| Name | Position | S/R/I |
|---------------|--|-------|
| ACE Committee | Reading Borough Council's Adult Children and Education Committee | S |
| Wendy Fabbro | Director of Children Education and Early Help | S |
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Contents

| | | |
|----------|--|-----------|
| 1 | Introduction | 6 |
| 2 | Key roles and functions..... | 7 |
| 3 | Professional standards – Social Workers | 11 |
| 4 | Quality Assurance Cycle..... | 13 |
| 5 | Methodologies for assuring quality of services..... | 14 |
| 6 | Audit framework | 17 |
| 7 | Learning and Development..... | 20 |
| 8 | Conclusion..... | 21 |
| | Appendix 1: Practice Standards | 22 |
| | Appendix 2: Audit Programme..... | 28 |

Our Priorities and Values

Our Corporate priorities set out in the Corporate Plan outline the key priorities of the organisation. They are:

- **Safeguarding and protecting those that are most vulnerable**
- **Providing the best life through education, early help and healthy living**
- **Providing homes for those in most need**
- **Keeping the town clean, safe, green and active**
- **Providing infrastructure to support the economy**
- **Remaining financially sustainable to deliver these service priorities**

Within Children's Services, these priorities are underpinned by our vision:

"Listening to Children and Young People, Enabling Families & Act quickly and in Partnership"

The graphic features a silhouette of a person jumping over two large purple blocks. The text 'LEAP Vision' is at the top, followed by 'Directorate for Children, Education & Early Help Services'. The acronym 'LEAP' is expanded into four points: Listen, Enable, Act, and Partnership, each with a brief description. The Reading Borough Council logo is in the bottom right corner.

LEAP Vision
Directorate for Children, Education & Early Help Services

Listen to our children, young people and families.

Enable families to make better constructive choices to have a positive impact.

Act quickly to deliver the right support & outcomes for each child working in a child focused, transparent, timely and inclusive way.

Partnership working to deliver integrated help early enough to be effective, efficient and Proportionate.

“Listen to Children and Young People, Enabling Families, Act quickly & in Partnership”

Reading
Borough Council
Working better with you

The Corporate Priorities and our Children's Services vision are underpinned by the values of the organisation. We deliver our services by working to the values of being:

- Fair
 - tackling inequality and promoting residents rights
 - ensuring residents are part of decision making
 - ensuring our staff have the right support

- Caring
 - putting residents at the heart of what we do
 - working with residents to look after each other

- Enterprising
 - unlocking the power of our communities
 - acting now to create a better future

Reading Children's Services are committed to achieving excellence through continual improvement where children and their families are at the heart of everything that we do and have the opportunity to influence and shape the services that they receive.

The delivery of quality services is dependent upon a whole system approach to organisational competence which reflects continual improvement and a learning organisation. The success of service delivery is measured by improving the outcomes for children and their families, achieving agreed targets and raising standards. It will need the commitment and support of all managers and their teams to ensure that quality assurance activity is embedded, evaluated and acted upon.

We recognise that we can only deliver our vision through effective and integrated partnership working across a variety of agencies, including schools, police, health and voluntary and community sectors. At the heart of our vision is the intention to always put children and young people and their families first and to deliver services that will help them to sustainably help themselves.

Our Quality Assurance Framework establishes a clear mechanism for ensuring that services are delivered to the standards we want for our children and families. Through the delivery of the framework we can ensure and demonstrate that from the councillors to frontline staff that children are at the heart of service planning and delivery

1 Introduction

- 1.1 Quality assurance is an integral part of everyday practice within Children's Services. Measuring the impact of service delivery is central to achieving improved outcomes for children. This requires a strong quality assurance system to be in place that evidences that services are being delivered effectively and to standards that enable children's welfare to be safeguarded and promoted.
- 1.2 A strong quality assurance framework assists the organisation to deliver an efficient and effective service. The framework if applied correctly will assist managers and the organisation to ensure:
- Vulnerable children, young people and their families' outcomes are improved.
 - Services are achieving consistently high standards.
 - Services are regularly monitored, reviewed and evaluated.
 - The organisational culture is committed to learning and continual development.
 - The continuous improvement and development of the children's workforce.
- 1.3 Whilst quality assurance has a scrutiny role, it is important to focus on the supportive and educative function of the role by describing what good practice looks like, and evaluating against this. Effective quality assurance will provide high challenge and support, and is crucially important in supporting the workforce to improve outcomes for children and young people.
- 1.4 Underpinning the Quality Assurance Framework is an understanding that continual improvement depends on a culture of reflection in action and reflection following action (reflection during social work practice and in supervision/ consultation/ discussion). This is then fed into the double learning loop for the practitioner, service and organisation so that we can re-think, plan appropriately and improve outcomes.
- 1.5 The purpose of the Quality Assurance Framework is to:
- Ensure that children and families are getting consistent and high quality services
 - Review and evaluate standards
 - Provide consistency in our system of monitoring and evaluating our effectiveness
 - Prioritise and facilitate continuous improvements within Children's Services
 - Support learning and to inform our Workforce Development Strategy
- 1.6 The Framework is underpinned by a set of overarching principle priorities and standards which are continually reviewed and updated in line with new learning and understanding gained through improvement.

2 Key roles and functions

2.1 Assuring quality is everyone's responsibility. There are some specific roles, for instance:

- Frontline staff
- Managers
- Reviewing and Quality Assurance Service
- Directorate leadership team
- Local Safeguarding Children Board
- Elected Members

2.2 There are a number of different roles/functions/boards within the organisation that have a specific purpose in quality assuring our work., the responsibility to implement this framework rests with all of Children's Social Care; whether that be as the first point of contact for people approaching Children's Social Care or as a member of the Senior Management Team. Below is a table outlining the key roles/functions/boards within Reading Borough Council and their quality assurance function.

| Role/Function | Description |
|---|--|
| All Staff | All staff are responsible for ensuring they uphold high quality practice standards and that this is reflected in the quality of case files and outcomes for children and families, monitor their effectiveness and are responsible for embedding a culture of learning and continuous improvement in their teams. Those conducting inspections, audits and other quality assurance approaches share responsibility for ensuring that frontline staffs are actively engaged in the quality assurance process of setting and monitoring standards. |
| Team Managers and Assistant Team Managers | Team Managers and Assistant Team Managers are responsible for ensuring that quality standards are met and to take corrective action where necessary. They are responsible for supporting frontline and support staff to deliver services that are of a high standard and effective. This is achieved through the line manager process, including performance management. Managers are responsible for ensuring their direct reports are very clear about managers and employees in the supervision and appraisal structure and how practice standards are an integral element of the process. Managers will use all of the available processes to recognise and praise good performance and address poor performance. They will quality control pieces of work, for example by |

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| | <p>signing off assessments and by auditing a case file. They will also work with the staff they manage, using the council's supervision and appraisal systems, to give staff feedback about the quality of their work and ensure that staff receive the support and challenge they need to maintain and improve practice. Team Managers are also responsible for devising and monitoring Team Development Plans.</p> |
| <p>Service Managers and Heads of Service</p> | <p>Service Managers are responsible for ensuring that quality assurance activity is carried out thoroughly on a regular basis and that the findings are acted upon and shared with staff and form a part of any further development/improvement plan.</p> <p>Heads of Service are responsible for ensuring that findings inform policy and the strategic framework.</p> |
| <p>Director of Children's Services (DCS)</p> | <p>The DCS has professional responsibility for the leadership, strategy and effectiveness of local authority children's services. The DCS is responsible for securing the provision of services which address the needs of all children and young people, including the most disadvantaged and vulnerable, and their families and carers. The DCS will work closely with other local partners to improve the outcomes and well-being of children and young people. The DCS is responsible for the performance of local authority functions relating to the education and social care of children and young people. The DCS is responsible for ensuring that effective systems are in place for discharging these functions, including where a local authority has commissioned any services from another provider rather than delivering them itself. The DCS should have regard to the General Principles of the United Nations Convention on the Rights of the Child (UNCRC) and ensure that children and young people are involved in the development and delivery of local services (Statutory guidance on the roles and responsibilities of the Director of Children's Services and the Lead Member for Children's Services, DfE, April 2013).</p> |
| <p>The Directorate Leadership Team (DLT)</p> | <p>The Directorate Leadership Team is responsible for the strategic and operational function of Children's Services, inclusive of quality and performance. The Team receives quantitative and qualitative performance data from the Quality Assurance Team. The data is used to analyse performance against need, approve improvement plans and resource allocations. The Directorate Leadership Team is held to account by the Lead Member for Children's Services, for improving outcomes for children, young people and their families through the delivery of high quality services.</p> |

| | |
|--|--|
| Lead Member for Children's Services (LMCS) | <p>The LMCS, as a member of the Council, has political responsibility for the leadership, strategy and effectiveness of local authority children's services. The LMCS is also democratically accountable to local communities and has a key role in defining the local vision and setting political priorities for children's services within the broader political context of the Council.</p> <p>The LMCS is responsible for ensuring that the needs of all children and young people, including the most disadvantaged and vulnerable, and their families and carers, are addressed. In doing so, the LMCS will work closely with other local partners to improve the outcomes and well-being of children and young people. The LMCS should have regard to the UNCRC and ensure that children and young people are involved in the development and delivery of local services (Statutory guidance on the roles and responsibilities of the Director of Children's Services and the Lead Member for Children's Services, DfE, April 2013).</p> |
| Principal Social Worker | <p>The Principal Social Worker represents the views of frontline staff to senior managers and will champion frontline practitioners and the quality of practice. This includes mentoring and coaching practitioners, providing practice learning opportunities to students, undertaking reflective supervision, promoting innovation, and disseminating informed and evidence based interventions.</p> |
| Training and Development Lead Officer | <p>The Training and Development Lead Officer is responsible for promoting continuous professional development. In terms of quality assurance of practice they have a role in taking on board lessons from quality assurance and ensuring they are embedded into relevant learning and development opportunities for practitioners.</p> |
| Service Manager - Quality Assurance | <p>The QA service manager is responsible for oversight of this framework, for Independent Reviewing Officers and Child Protection Chairs; and the LADO and Quality Assurance manager. This team reviews, audits and raises challenge and themes of practice in their areas of responsibility. It is their responsibility to ensure the quality assurance processes in place are robust.</p> |
| Performance Analysts | <p>The Performance Analyst role is to provide a range of reports and information to support operational activity. Performance data ensures that there is sufficient reporting on local and national indicators, whilst highlighting areas of strengths and areas for development. Performance Analysts maintain a data quality role and are responsible for submitting statutory returns on behalf of Children's Social Care.</p> |

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| Corporate Complaints Team | Children's Social Care recognise that on occasions standards of service may fall below expectations. Where this leads to complaints, Children's Social Care will use the outcomes from such complaints to feed into improvements. Reading Borough Council implement restorative approaches to aim to respond to complaints swiftly and lead to early resolution. The Corporate Complaints Team will liaise regularly with Team Managers regarding ongoing complaints, and will feedback emerging themes and discuss actions that need to be undertaken in order for improvement to take place, in partnership with the Quality Assurance Manager. |
| Human Resources | Human Resources are involved in ensuring we understand the needs of our workforce. They also support us where individual practice consistently falls below expected standards, but also when organisational changes are required. |
| Children in Care Council (Your Destiny, Your Choice) | The Children in Care Council is made up of young people in care and care leavers and leads consultation projects with children about their experience in local authority care and feedback their findings to Councillors and senior managers. The Children in Care Council also meets annually with the Independent Chair of the Safeguarding Children Board. |
| Corporate Parenting Panel | The responsibility for improving outcomes and actively promoting the life chances of looked after children is shared by the local Authority and partner agencies. The Corporate Parenting Panel meets regularly and receives reports on progress, and participates in discussion about proposals for improvement and development. Children looked after and young people leaving care are subject to consultation through the Corporate Parenting Panel. |
| Local Safeguarding Children Board | The Local Safeguarding Children Board is a key statutory board for ensuring the effectiveness of safeguarding of all organisations working with children and young people. The LSCB plays a key role in relation to the links between Quality Assurance in Children's Social Care and partner agencies. The LSCB undertakes multi-agency audits, themed audits, serious case reviews, and collects and analyses multi-agency data. The outcomes of the work carried out through the LSCB will inform ongoing improvement. |

2.3 The LSCB is a key statutory mechanism for ensuring relevant organisations in a local area co-operate to safeguard and promote the welfare of children, young people and their families and ensure single agency and multiagency work in child protection is of a good standard. In delivering its function the LSCB Performance and Quality

Assurance sub-group receives regular reports on the performance of member agencies. The Performance and Quality Assurance sub-group provides the quality assurance function of the LSCB, commissioning multi-agency audits and reviewing audits of individual organisations.

2.4 A part of the Board’s scrutiny function is carried out through the Serious Case Review process. The Serious Case Review process is an investigation into the engagement of services with that child or young person before their death or near miss of a death. Each Serious Case Review includes internal management review reports from each agency involved. The internal management review sets out how the agency carried out its functions. The LSCB Berkshire West Case Review Group analyses the learning from the Serious Case Review, develops and monitors the implementation of an action plan to achieve improvements. Serious Case Reviews are conducted under the guidance contained in Working Together to safeguard children (2015). The LSCB needs to demonstrate that all partner organisations have learnt from Serious Case Reviews and that practice has evolved as a result of the review.

3 Professional standards – Social Workers

3.1 Children’s Social Care employ qualified and registered Social Workers. Where needed we also contract with Social Workers to carry out bespoke pieces of work or to cover vacancies in our social work teams. Social Workers be registered with the Health and Care Professions Council who is the professions regulator.

3.2 Individuals are responsible for the way they practice and whilst our systems and processes are in place to support them, professionals employed or contracted by Children’s Social Care are individually accountable for the standards of their work. The various documents/codes listed below govern/direct the standard expected of those regulated professionals.

3.3 The Reading Borough Council Practice Standards are included at Appendix 1.

| Registered Social Workers | |
|---|--|
| Social Work Professional Capabilities Framework 2012 | This documents sets out consistent expectations of social workers at every stage in their career and provides a backdrop to post qualifying continuous professional development. |
| Health and Care Professions Council Standards of Conduct, | This document must be observed by registered Social Workers, Art Therapists and Psychologists and those applying to register. All standards relate to providing high |

Performance and Ethics
(HCPC, 2012)

quality and safe services, below are a selection;

- You must act in the best interests of service users (Standard 1)
- You must keep high standards of personal conduct (Standard 3)
- You must keep your professional knowledge and skills up to date (Standard 5)
- You must act within the limits of your knowledge, skills and experience and, if necessary, refer the matter to another practitioner (Standard 6)
- You must effectively supervise tasks that you have asked other people to carry out (Standard 8)
- You must keep accurate records (Standard 10)

HCPC regulated professionals must meet their standards for continuous professional development which are;

- Maintain a continuous, up-to-date and accurate record of their CPD activities
- Demonstrate that their CPD activities are a mixture of learning activities relevant to current or future practice
- Seek to ensure that their CPD has contributed to the quality of their practice and service delivery
- Seek to ensure that their CPD benefits the service user
- Upon request, present a written profile (which must be their own work and supported by evidence) explaining how they have met the standards for CPD

Health and Care
Professions Council
Standards of Proficiency –
Social Workers in England
(HCPC, 2012)

The Standards of Proficiency set out what a social worker in England should know, understand and be able to do when they complete their social work training so that they can register with the HCPC. They set out clear expectations of a social worker's knowledge and abilities when they start practising. It places responsibility on workers to engage with quality assurance.

Other Standards of Proficiency exist for other professionals such as Art Therapists and Psychologists.

4 Quality Assurance Cycle

- 4.1 The diagram below shows clearly and simply that quality assurance can be seen as a cycle. To improve the services that we deliver it is necessary to agree standards, monitor work; listen to those that use our services; and invest in the development of the organisation in order to secure the right outcomes for service users.



4.2 **Identify** : A Quality Assurance Board will review practice standards, audits, inspections performance information, compliments and complaints, IRO escalations, procedures and current issues for the service. This will identify key themes for service improvement and may result in action being required, whether this is an audit, a case review or observed practice.

4.3 **Task / Audit**: There are a number of outcomes of the discussion at the Quality Assurance Board. This could include the commissioning of an audit or a case review, the issuing of a management instruction, the development of a new procedure or managers observing some practice. For each, a scope will be developed by the Service Manager for Quality Assurance who will ensure that the scope is firmly linked to the request of the Quality Assurance Board.

4.4 **Develop improvement plan**: The outcome of the task or audit will be the writing of a report that is presented to the Quality Assurance Board and to the Children's Services

Management Team (CSMT). CSMT will have responsibility for developing an improvement plan to ensure that the outcomes of the audit lead to improvements in service design and delivery. Where the task was the development of a procedure or new process, CSMT will be responsible for developing an implementation plan that is monitored by the Quality Assurance Board.

4.5 **Support:** Support in delivering the improvements will be offered by the Principal Social Worker who will assist frontline practitioners in implementing any changes in practice. The Workforce Development Team will assist this process in ensuring that appropriate training is offered. Team Managers and Assistant Team Managers will ensure that supervision acts as a conduit for ensuring that changes have been made.

4.6 **Review:** When the cycle comes back to 'Review', the Quality Assurance Board will provide challenge to Service Managers and Team Managers to ensure that improvements have been delivered and are delivering positive outcomes for children and young people. By reviewing performance data, service user feedback and information from IROs and CP Chairs, the Board will assure itself that the relevant improvements have been made. A rolling work programme will be established by the board to ensure that key areas of practice are addressed and sufficient management oversight is given to key issues.

5 Methodologies for assuring quality of services

5.1 The framework covers the full range of services for children and young people across early help, targeted support, protection and specialist provision. This enables the creation of a more comprehensive understanding of the child's journey from which we can learn and improve our service delivery and make better informed decisions to achieve the desired outcomes.

5.2 Information is considered and gathered from the following sources:

- a) **Performance and Management Information:** Weekly data tells us something about how well the service is doing and will ordinarily measure either service outputs or outcomes for children. Many of these indicators are nationally set and reported upon. Statistical neighbours and best performance authorities benchmarking data is available and is used by Reading to drive service improvement. Looking at activity data allows us to consider the demands on the service. The journey of the child can be better understood through our system and conversion rates eg the number of referrals that become assessments, how many Section 47

enquiries lead to Child Protection Plans, how many children subject to child protection plans go on to become cared for children etc. This helps management identify whether there are any variations that require further exploration.

- b) **Complaints and Compliments** about Children's Services are another important element of the Quality Assurance Framework. The Complaints Officer will provide quarterly reports, briefly identifying the nature of all reports received and provide an analysis which identifies trends and makes comparisons about the nature of complaints.
- c) **Service User Feedback** It is essential that children, young people and their families' views about the services that they received are sought and captured within the quality assurance process. This ensures services are matching needs and that service users are central to the service delivery.

Consulting with – and using feedback gained – from children, young people, families, and workers is central to understanding the subjective experiences of those accessing or working for Children's Social Care. The Principal Social Worker role is pivotal in understanding the experiences of frontline practitioners. Seeking feedback helps us to improve how we deliver our services to individuals, improve the working conditions and processes for our teams, and enables us to identify themes to be addressed. Identifying themes will allow us to build upon excellence and continuously improve.

Feedback can be obtained in a number of different ways, even when not formally requested. Feedback can typically be found:

- Within assessments
- From staff and carer supervision records
- Within annual carer review records
- Contained within case notes
- From telephone call records or emails
- From complaints and compliments logs

There is an expectation that every child and carer who comes into contact with the service has an opportunity to express their views. Some of the ways we do this include;

- Frontline staff will undertake simple questionnaires with children during one of their initial visits.
- Follow up questionnaires will be completed at later points in the child's journey, review, case closure, and for a sample of cases six months after the end of our involvement. This will enable us to compare the child's position at each point.

- Parental views will be sought at closure using a standard questionnaire.
- Child and parent views will also be gained via the senior management audit, questionnaires from LAC Reviews and Child Protection Conferences.
- Feedback will be gained from thematic audits.

Foster Carer views will be obtained on an annual basis through their annual review. In addition to this there is an annual survey of foster carers.

- d) **Participation and Advocacy** work completed with children and their families is also a vital component in the Quality Assurance Framework. The Children's Participation Worker will complete a quarterly report of all advocacy provided to young people and the report will contain a brief analysis which will identify key themes and trends in the nature of difficulties young people are experiencing with service provision and engagement.
- e) **Observation of practice:** Learning at and through work is an essential means of employee development. Direct observation involves a manager or supervisor observing a worker, carrying out a task, evaluating their practice and performance and providing structured constructive feedback. Every worker will be observed at least once a year by their manager. This may include a visit to a child or young person and their family or carer, a network or core group meeting, a child or young person's review meeting, a child protection conference, a looked-after children's review or Court presentation.
- f) **Mid-way reviews – Independent Reviewing Officers (IROs) and Child Protection Chairs (CPC):** IROs and CPC's play a key role in planning and assuring the impact and quality of work undertaken by children's social care. Their role is to ensure that the quality of the work on a single and multi-agency basis is of a high standard, that performance indicators and procedural requirements are met, and that plans for children and young people are outcome-based and meet the individual needs of the child or young person. IROs and CPC's undertake mid-way reviews on all children and young people who are looked after or in the child protections process.
- g) **Serious case reviews, serious incident and near misses** serious case reviews, serious incidents and near misses provide the opportunity to reflect in detail on practice within individual cases, and to identify and act on areas for improvement. The learning from all of these cases will be disseminated across Children's Services.
- h) **Team meetings:** Team meetings are an integral tool to ensure that key messages are disseminated across the service. All teams are encouraged to have a regular meeting to which the Service Manager and Head of Service are invited. A standing item on these agendas should include messages from CSMT and from DLT. Team meetings should take place monthly.

- i) **Joint meetings:** In order to promote good practice teams are encouraged to work effectively together. IROs and CP Chairs should meet with frontline teams to feedback on issues of quality at reviews and at conferences. A joint meeting between frontline teams and the IROs / CP Chairs should take place at least once per quarter. Where issues can be resolved informally in this way it is a constructive way of minimizing the need for IRO escalation of issues.
- j) **Transfer / Workload Allocation Meetings:** A weekly meeting takes place to ensure that cases can be effectively transferred between teams. This is chaired by the Head of Safeguarding and Long Term Teams. The Transfer procedure sets out the standards required of case file recording at the point of transfer. The Team Manager must have signed off a Transfer Summary and a Transfer Audit before the case can be transferred to another team.
- k) **Supervision:** The Supervision Policy requires that all social workers are supervised at least monthly although it may happen more frequently where the worker has a complex caseload. This is the opportunity for managers to ensure that practice standards are being adhered to and constructive support can be identified at an early stage where necessary.
- l) **Group Supervision** is encouraged as a mechanism for the team or a group of peers to reflect on the work undertaken with a particular family in order to help move the case on and secure positive outcomes. It may also be used to learn new practices together or to share best practice.
- m) **The Principal Social Worker:** The Principal Social Worker will offer support to teams to ensure that practice improvements are embedded and secured. Issues arising during the course of any work will be fed back routinely to the DCS and the Head of Safeguarding and Long Term Teams and will be a standing item on the agenda of the Quality Assurance Board. Key training issues identified by the Principal Social Worker will be notified to the Workforce Development Team to secure appropriate training.
- n) **Audits:** see section 6. Audits will be commissioned to regularly review the quality of case work to ensure that children and families are being supported appropriately and that positive changes are being made. The outcomes of these audits will be reported back to the Quality Assurance Board and to the Children's Services Management Team (CSMT) in order to monitor improvements.

6 Audit framework

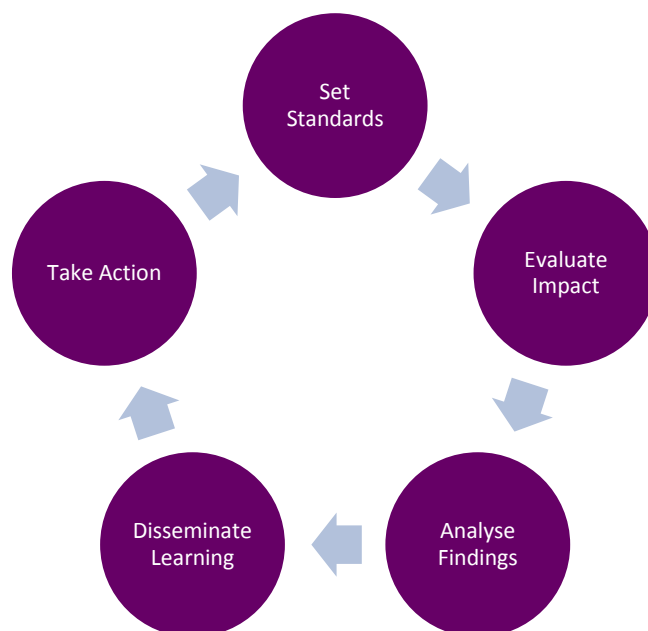
- 6.1 The audit framework provides a structure for the process of case work audit and review, creating a culture in which both quantitative and qualitative aspects of case management are routinely examined and reported in a systematic way to ensure the best possible outcomes for children and young people. Although these two aspects

of auditing can be conducted independently, both are necessary to ensure a total quality management approach.

- **Quantitative Auditing** Considers whether the record is up-to-date, contains all the relevant documentation and that the documentation has been properly completed, within timescale.
- **Qualitative Auditing** Consider the quality of the information and recording on the child or young person's file, the quality of the decision making process, risk assessment and analysis, and whether it reflects good practice.
- **Moderation Process** Built into any audit process must be a quality assurance process of monitoring the quality of the auditing carried out. This can be established through a process in which a manager or peer of the auditor re-audits random case files. Service Managers will be responsible for their service areas.

6.2 Audit is a continual and dynamic process. It is part on an improvement cycle by which we set standards, evaluate impact, analyse findings, disseminate learning (strengths and areas for development), and take action to improve.

6.3 The audit process should create dialogue between the auditor and the worker. Whilst the worker must be open to professional scrutiny and challenge as part of the process, it is important for this to be done in a way that is open, honest and transparent, so that everyone works together to improve the quality of service we deliver.



6.4 All staff are accountable for making sure that Reading Children's Services practice standards and priorities are met. Practice standards and priorities are informed by statutory guidance and regulation, based on evidence about the elements of practice

which are most likely to lead to good quality services and positive outcomes for children and young people.

6.5 A number of audit tools have been developed that are structured around Reading's practice standards and priorities and that scrutinise all areas of service delivery - see appendix 2. The types of audit include:

a) **Case file audits:** Monthly audits across the service are carried out by operational managers and are randomly peer reviewed across the service. In addition, monthly group audits, comprising of staff from across Children's Services take place and serve as a means to involve staff at all levels in the learning and development process. This work is crucial to add some qualitative information to data analysis and to pick up any practice themes that need attention. The Director of Children's Services and Managing Director will audit 2 randomly selected cases on a quarterly basis.

The Fostering and Adoption Team, Youth Offending Service, Children's Action Team undertake routine monthly audits using audit tools specific to their service and The Access and Assessment Team audit cases prior to transfer.

b) **Thematic audit:** These audits will take place at least twice a year. The primary purpose of a thematic audit is to identify and develop understanding in respect of a service, area of practice or issue, in order to assess the quality of practice. A thematic audit will follow an area of work across different teams or services and will examine a particular theme over a period of time and include a variety of methods, such as file audits and direct interviews or focus groups with staff across the relevant service and with other key stakeholders.

c) **Supervision audits:** Throughout the course of the year, Team Managers will undertake an audit of supervision files of each Assistant Team Manager's supervision with Social Workers. Service Managers will audit the supervision files of each Team Manager with Assistant Team Managers. Head of Service will complete a sample of supervision audits of each Service Managers' Supervision of Team Managers.

d) **Multi agency audits** facilitated through the performance and Quality Assurance subgroup. A rolling programme of multi-agency audits is in place to promote learning for all partner agencies. To ensure Reading LSCB has in place sound mechanisms for monitoring, evaluating and auditing safeguarding activity by partner agencies, particularly in relation to front line services, ensuring that improvements are made to deliver better outcomes for children. In addition its role is to demonstrate that Reading LSCB is a 'learning organisation' that has a strong focus on impact and effectiveness.

7 Learning and Development

- 7.1. It is imperative that learning from each quality assurance activity is shared with the right people and used meaningfully to change practice and improve outcomes for children, families and employees. Learning should make evidenced links to the following areas:
- Supervision
 - Training
 - Complaints and Compliments
 - Workforce Planning and Development
 - Commissioning
 - Service Plans and Team Plans
 - Reading Children's Services Priorities and Business Plans
 - Reading's Service Improvement Plan
 - Reviewing Officer/Child Protection Conference Chair quality assurance.
 - Monthly Performance Challenge Meetings
 - Adoption Panel and Fostering Panel quality assurance reports
- 7.2. Service Manager Quality Assurance with the support of the Principal Social Worker will provide quarterly reports which will identify themes from audits. The Quality Assurance Board will consider the messages and learning from these processes in connection to learning and action planning that emerges from this framework. The service level self-assessment will facilitate this process.
- 7.3. The quarterly reports will form the basis of the report that goes to Adult Children and Education (ACE) committee.
- 7.4. The Director of Children's Services, Head of Children's Services and The Principal Social Worker have regular dialogue with staff in Children's Services, to gather views/comments on practice issues, in a range of fora, for instance, focus groups, staff briefings, whole service conferences and Induction of new starters. Feedback in respect of the findings of audits and the relevant themes will be disseminated at such events.
- 7.5. The quarterly Quality Assurance Board is chaired by the Head of Transformation and Governance. The meeting will look at the various strands of quality assurance activity and will agree action plans developed as a result of activity. This meeting will act as a challenge meeting where the Heads of Service can scrutinise activity, receive exception and corrective action reports and call managers to account.

8 Conclusion

- 8.1. Work to protect children is by definition complex and multi-faceted, requiring a whole system approach. The needs of the children involved are such that the system need to ensure that areas in need of improvement and apparent strengths are constantly explored and unpicked to ensure the strengths are real and embedded and the areas for improvement are being effectively addressed.
- 8.2. This Quality Assurance Framework sets out how that exploration will take place in Reading and ensures that improvement can never stand still. The framework will be reviewed on an annual basis.



Good Practice Standards For Children's Social Care

September 2013

This document sets out the standards of service we work to and against which we are measured in the quality assurance and performance framework.

Standards Overview:

1. In all our activities, the child's best interests will come first.
2. In our assessments and work we aim to understand and improve the child's lived experience.
3. Work is carried out in partnership with parents and carers to enable them to meet their responsibilities and achieve the best outcomes.
4. Children have a right to be involved in decisions that affect them.
5. In all our work, we will maintain an awareness of equal opportunities and the impact of discrimination.
6. We will work closely with other agencies to improve support that is offered to children, young people and families.
7. Work with children and families is undertaken within the legislative framework and makes use of best practice guidance.
8. Our records are accurate, complete and demonstrate the child's story.
9. Work with children is managed and supervised to achieve the best possible outcomes.
10. We treat children, families and our working partners with courtesy and respect.

Standard 1

In all our activities, the child's best interests will come first

Criteria

- 1.1 We will follow the Berkshire LSCB policy and procedures to ensure that children are safeguarded from harm.
- 1.2 Children's needs are identified and assessed using the agreed assessment processes, tools and frameworks.
- 1.3 Children are supported to achieve and enjoy their full potential in all aspects of their development.
- 1.4 We will ensure that our work promotes permanency for children – either in their birth families or in alternative permanent arrangements.

Standard 2

In our assessments and work we aim to understand and improve the child's lived experience.

Criteria

- 2.1 Children are seen alone, where appropriate, observed and communicated with according to their developmental needs and in accordance with the plans for them.
- 2.2 Intervention with children is timely and responsive to risk and need.
- 2.3 Children's identity is promoted through life story work and ensuring that they have personal possessions and family material.
- 2.3 All Plans for children will be focused on improving outcomes and the child's daily lived experience. Plans will be SMART and written in language that is understood by parents, carers and partners.

Standard 3

Work is carried out in partnership with parents and carers to enable them to meet their responsibilities and achieve the best outcomes.

Criteria

- 3.1 Planning and decision making promotes the child's upbringing within family and community networks wherever possible.
- 3.2 Parents and carers are engaged in assessment, planning and implementation of services to their family.
- 3.3 Parents and carers are treated with respect and encouraged to express their views and potential solutions to current issues.

- 3.4 Parents and carers are advised clearly about concerns and what needs to change to keep their children safe.
- 3.5 Contact is maintained between children and their families and communities wherever possible.
- 3.6 In the event that children cannot live with their parents, all steps possible will be taken to ensure that they can remain within their extended networks wherever possible.

Standard 4

Children have a right to be involved in decisions that affect them.

Criteria

- 4.1 Children's rights are promoted in all areas of work.
- 4.2 We will use a variety of tools to enable children to communicate their lived experience, their worries and hopes to us.
- 4.3 We run our meetings to enable children's participation wherever possible. Where they can or should not attend, we will use a variety of methods to ensure that their views are taken into account.

Standard 5

In all our work, we will maintain an awareness of equal opportunities and the impact of discrimination.

Criteria

- 5.1 Work challenges organisational culture and practices which contribute to discrimination and disadvantage.
- 5.2 Casework addresses and respects individual's race, culture, language and religion.
- 5.3 Work takes into account the impact of social disadvantage in neighbourhoods, networks and communities.
- 5.4 We advocate with and on behalf of children, parents and carers to enable them to access sources of support.

Standard 6

We will work closely with other services and agencies to improve support that is offered to children, young people and families.

Criteria

- 6.1 Assessments, plans and reviews take full account of the information and professional opinions

- 6.2 Plans for children are holistic and use the resources of the wider family and partner agencies.
- 6.3 Working relationships with agency partners are professional and responsive in including and engaging local agency forums and lead professionals.
- 6.4 Communication with agency partners is clear, timely and proportionate to the child's needs. This includes a commitment to share information as appropriate.
- 6.5 Active steps are taken to resolve conflicts should they arise between teams, services and agency partners.
- 6.6 In cases concerning child protection, agency checks will be undertaken.

Standard 7

Work with children and families is undertaken within the legislative framework and makes use of best practice guidance.

Criteria

- 7.1 Work is in accordance with legislation, guidance and local policy and procedure.
- 7.2 Work is undertaken with due regard to the national minimum standards, best practice guidance and is informed by the best evidence available including research findings.
- 7.3 Work is in accordance with the principles of Best Value.
- 7.4 Work will contribute towards self-evaluation and external inspection.

Standard 8

Our records are accurate, complete and demonstrate the child's story.

Criteria

- 8.1 Case recording is up to date and demonstrate the purpose and outcome of each contact. We will avoid the use of jargon and acronyms wherever possible.
- 8.2 All relevant basic details concerning the child are reflected on the case record and are up to date.
- 8.3 There is a genogram, care plan and chronology for each child receiving a service. These adhere to the good practice guidance.
- 8.4 Recording is concise, analytical and distinguishes between fact and opinion.
- 8.5 Information about the child is written and stored in accordance with Data Protection and Information Sharing protocols.

Standard 9

Work with children is managed and supervised to achieve the best possible outcomes.

Criteria

- 9.1 Managers use agreed systems to ensure that children receive a timely and appropriate service.
- 9.2 Work is allocated to suitably trained and qualified staff, who fully understand what is required of them.
- 9.3 Management accountability and decision making is evidenced at all stages of work with the child from referral to closure.
- 9.4 Managers audit case records on a regular basis and require action to be taken where necessary.
- 9.5 Good practice is promoted and recognised.
- 9.6 Reflective supervision takes place regularly and outcomes and decisions are recorded.
- 9.7 Managers critically evaluate the work of their staff and actively challenge poor practice, delay and drift in decision making.

Standard 10

We will treat children, families and our working partners with courtesy and respect.

Criteria

- 10.1 Communication through email, telephone and letter will be timely, polite and responsive.
- 10.2 We will be punctual for meetings and visits and if we are unavoidably delayed, we will explain and apologise.
- 10.3 The Council will be presented as one organisation and we will take responsibility for resolving any inter-service issues without involving service users or partners.

Appendix 2: Audit Programme

The chart below sets out Reading Children’s Services Annual Audit Programme. The Programme will be kept under review by the Director of Children, Education and Early Help Services throughout the year and updated to reflect any changes required to support evolving organisational priorities. Routine audits cover all social work teams including early help services and the youth offending service.

| Service Area | Key tests of activity | Themes as identified | Method | Frequency | Quantity for service area | Audit Tool |
|--|--|----------------------|------------|-----------|---|--------------|
| Contact and Referral and Access and Assessment | <ul style="list-style-type: none"> • Threshold application • Appropriateness of response to action • Management oversight and decision making • Timeliness • Outcomes communicated with referrer or agencies • Transfer/Closure procedures | | Case Audit | Quarterly | 4 per ATM 4 per TM Moderation by SM | Audit Tool A |
| Children In Need | <ul style="list-style-type: none"> • Assessment • Risk Assessment • Information gathering and analysis • Chronology • CIN planning (including partnership working) • Direct work with child • Visits • Family engagement • Supervision and Management oversight • Improved outcome • Escalation or de escalation • Case Closure/transfer procedure completed | | Case Audit | Quarterly | Locality Teams 4 per ATM 4 per TM Moderation by SM | Audit Tool A |
| Child Protection | <ul style="list-style-type: none"> • S 47 - outcome | | Case Audit | Quarterly | Locality Team – | Audit Tool A |

| Service Area | Key tests of activity | Themes as identified | Method | Frequency | Quantity for service area | Audit Tool |
|-----------------------|---|----------------------|------------|-----------|---|--------------|
| | <ul style="list-style-type: none"> • CP Conference • Core group meeting • CP Planning (multi agency working) • Legal planning • Direct work with child and visits • Family engagement • Chronology • Supervision and management oversight • Effectiveness and impact • Escalation or de escalation • Case transfer procedure completed | | | | as above | |
| Looked After Children | <ul style="list-style-type: none"> • Assessment • LAC planning (including multi agency working) • LAC review (including child/young person's participation) • Contact arrangements • Legal Planning and court reports • Health Assessment • Personal education plan • Direct work with child and visits • Family and carer engagement • Chronology • Supervision and management oversight • Effectiveness and impact • Improved outcomes | | Case Audit | Quarterly | Locality Teams - As above CYPD – LAC cases to be included in quarterly CIN audits (as will CP cases) | Audit Tool A |

| Service Area | Key tests of activity | Themes as identified | Method | Frequency | Quantity for service area | Audit Tool |
|--------------|--|----------------------|------------|-----------|--|----------------------|
| | <ul style="list-style-type: none"> Case closure/transfer procedure completed | | | | | |
| Care Leavers | <ul style="list-style-type: none"> Education training and employment Housing and accommodation Pathway planning (including multi agency working) Health assessment Personal education plan Direct work with young people and visits Chronology Supervision and management oversight Effectiveness and impact Improved outcomes Case closure procedure completed | | Case Audit | Quarterly | Locality Team 4 per ATM 4 per TM Moderation by SM | Audit Tool A |
| Adoption | <ul style="list-style-type: none"> Management oversight and quality of SSW support and supervision Regularity compliance and recording consistency Quality of assessment and reports Effectiveness of preparation and support | | Case Audit | Monthly | Adoption Team 2 x SM 2 x TM 2 x ATM | Adoption Audit Tools |
| Fostering | <ul style="list-style-type: none"> Management oversight and quality of SSW support and | | Case Audit | Monthly | Fostering Team 1 x SM | Fostering Audit Tool |

| Service Area | Key tests of activity | Themes as identified | Method | Frequency | Quantity for service area | Audit Tool |
|--|---|----------------------|---|---|--|----------------|
| | <ul style="list-style-type: none"> supervision Regulatory compliance and recording consistency Quality of Assessment Quality of foster carer support and supervision Quality of foster carer training and development Foster care reviews and checks | | | | 2 x TM 2 x ATM | |
| YOS | <ul style="list-style-type: none"> Timely and appropriate assessment of the factors linked to offending behaviour Effective engagement with the young person, including assessment of basic skills Risk assessment Vulnerability screening Effective plan for young person including integrated action plan Young person's review is timely and effective | | Case Audit National Standards Audit Transitions Audit | Monthly Annually Annually | YOS 2 x TM 2 x ATM | YOS Audit Tool |
| Family Support; Targeted Youth Support Troubled Families | <ul style="list-style-type: none"> Quality and appropriateness of child and young person assessment Risk assessment Effectiveness of information gathering and analysis Chronology Dynamic plan for the child or young person Direct work Supervision and management | | Case Audit | | CAT 2 x SM 2 X TM 2 x ATM | CAT Audit Tool |

| Service Area | Key tests of activity | Themes as identified | Method | Frequency | Quantity for service area | Audit Tool |
|-------------------------|---|----------------------|----------------------|---------------------|---|--------------|
| | oversight | | | | | |
| Direct Observation | Quality and effectiveness of: <ul style="list-style-type: none"> • Direct work with child or young person • Participation and engagement of child and family • Supervision • Management and decision making • Role of the social worker • Partnership working | | 1 to 1 audit | Throughout the year | Every Manager will observe all of their staff in practice at least once | Audit Tool B |
| Supervision | <ul style="list-style-type: none"> • File structured in accordance with policy • Case discussion evident • Practice observations • Risk assessments and absence management • Frequency in respect of standards • Performance Management • Management Decisions and authorisation • Professional Development and record of training • NQSW compliance | | File Audit | Ongoing | SMs and Quality Improvement Manager | Audit Tool C |
| Group Supervision | All aspects of practice in Children's Services | | Deep Dive File Audit | Quarterly | Members of staff from all service areas | Audit Tool A |
| DCS,HOS, Elected Member | All aspects of practice in Children's Services | | File Audit | Quarterly | 2 x DCS 2 x HOS | Audit Tool A |

Full Case Audit Tool A

GUIDANCE FOR THE COMPLETION OF THE CASE FILE AUDIT

This tool should be used by the auditor and case worker together. The audit tool seeks to capture a holistic view of the case; monitor compliance with legislation and procedures; identify good practice and areas for improvement. The file should reflect the journey of the child and evidence of their voice being heard.

Evaluation of the case will follow discussion using the Ofsted criteria.

The grades match those of Ofsted and the descriptors are a succinct version of those set out in inspection framework:

- | | | |
|----------|-----------------------------|---|
| 4 | Outstanding | Highest quality practice delivering measurably improved outcomes, for some children their progress exceeds expectations. |
| 3 | Good | Practice is of a good standard, risks are identified and reduced. Decisions are made so that delay is avoided and children are helped to live in safe homes, with safe secure relationships with adults that will support them over time. There is clear evidence that the aims of the work are shared by the child, professional network and family and any obstacles to achieving these aims are quickly addressed. |
| 2 | Requires improvement | Minimum standards have been achieved, children are not at risk of significant harm and the welfare of looked after children is promoted and safeguarded. |
| 1 | Inadequate | Practice is below standard and may cause risk of harm to children and the welfare of looked after children is not safeguarded. |

The section grades should then be recorded in the table on the final summary page of the audit tool with a grade then being given for the three overall judgements.

Once the audit is complete, please discuss with the social worker / their supervisor to agree remedial actions and timescales (section 7).

Send completed audit and remedial actions to Service Manager Quality Assurance

AUDIT

This tool should be used to ensure the consistent recording of evidence when reading case records. It brings together the key criteria from the Ofsted evaluation schedule. Priority is afforded to evidence concerning the quality and effectiveness of help, care and protection and the impact this has on children, young people and families.

The auditor should only evidence criteria which is relevant / applicable to their area of work and should cross-reference with the 'evaluation guidance'.

1. Basic Details

| | | | |
|---|--|---|--|
| Child's First Name | | Child's Surname | |
| Mosaic ID | | Date of Birth | |
| Does the child have a disability (Y/N)? | | Does the child have a status of SEN (Y/N)? | |
| Allocated Worker | | Team | |
| Was worker interviewed for the audit (Y/N) | | | |
| Auditor Name and Role | | Date of Audit | |

| Basic information on Mosaic complete? Y/N | | | |
|--|--|----------------|--|
| Name | | Ethnicity | |
| Address | | Religion | |
| Key professionals | | Disability | |
| DOB | | Family members | |
| Are contact details for family recorded? | | | |

Case overview

Give a brief overview of the case (why we are working with the family / key interventions and impact) and the progress in the last 12 months

2. Case Details

Case Status:

| | | | |
|-------------|--------------------------|-----|--------------------------|
| Early Help | <input type="checkbox"/> | CP | <input type="checkbox"/> |
| CIN | <input type="checkbox"/> | CLA | <input type="checkbox"/> |
| Care Leaver | <input type="checkbox"/> | | |

Any **key changes** within the last 12 months? Do **not** count transfer from A&A to long term team.

| | Number |
|-------------------------|--------|
| Allocated social worker | |
| Supervisor (ATM?TM) | |
| IRO | |
| Number of placements | |

Comments/Action (including impact on the child)

Genogram

| | |
|---|-----|
| | Y/N |
| Is there a genogram on the file that enables you to understand the child's network? | |

Comments/Action

Chronology

| | |
|--|-----|
| | Y/N |
| Is the chronology up to date (should be reviewed every three months) | |
| Does the chronology highlight significant events | |

| | |
|---|--|
| Is there evidence significant events have been selected using judgement (rather just copy and pasted) | |
|---|--|

Comments/Action

| |
|--|
| |
|--|

| | |
|---|-----|
| | Y/N |
| Are case notes up to date and give you a good sense of the child and their journey? | |

Comments/Action

| |
|--|
| |
|--|

Diversity

| | |
|--|-----|
| | Y/N |
| Are diversity factors such as race, culture, religion and gender recorded accurately on the front sheet? | |

Comments/Action

| |
|--|
| |
|--|

3. Referral and Response

Section 3 to be completed where case has been open for less than one year

| | |
|--------------------------------|--|
| What is the type of referral ? | |
| CAF | |
| Police | |
| Other (please state) | |

| | Y/N |
|---|-----|
| Does the referral relate to CSE / FGM / Missing / Domestic Abuse? (state which) | |
| Does the referral contain sufficient information to make a decision? | |
| Was the referral acted upon promptly? (within 24 hours) | |
| Was the response to the referral appropriate? | |
| At the point of referral, was there evidence of risk analysis and appropriate response | |
| Is this a repeat referral (please give details below of the previous intervention and why the case was re-referred noting if the child was previously subject to a CP plan and why the plan was discontinued) | |
| Was the information sharing done in a timely way? | |

Comments/Action about referral and response

4. Audit Framework

1) Risk is identified, responded to and reduced in a timely way.

Where relevant include evaluation of identification and response to children who experience and/or are at risk of: sexual exploitation / neglect / emotional abuse / sexual abuse / physical abuse /domestic abuse

| | | Y / N | |
|--------------------------------|--------------------------|-------------------|--------------------------|
| Is risk managed appropriately? | | | |
| Is the response timely? | | | |
| Is the response effective? | | | |
| Analysis: | | | |
| | | | |
| Judgement: | | | |
| Outstanding | <input type="checkbox"/> | Good | <input type="checkbox"/> |
| Requires Improvement | <input type="checkbox"/> | Inadequate | <input type="checkbox"/> |

2) Children, young people and families are appropriately involved

| | | <u>Y/N</u> | |
|--|--|-------------------|--|
| Is there evidence of impact of the involvement of children and their families in assessment, planning and intervention | | | |
| Are the views of significant males effectively gathered? | | | |
| Are children seen and seen alone and do they benefit from stable and effective relationships? | | | |
| Do children and parents/carers have an equal voice? | | | |
| Does it evidence individual work undertaken, including appropriate direct work? | | | |
| Is this linked to the plan and the reduction of risk? | | | |

| | | | |
|---|--------------------------|-------------------|--------------------------|
| What is the impact of this for children and their families? | | | |
| Analysis: | | | |
| Judgement: | | | |
| Outstanding | <input type="checkbox"/> | Good | <input type="checkbox"/> |
| Requires Improvement | <input type="checkbox"/> | Inadequate | <input type="checkbox"/> |

| 3) Decision making is effective and timely. | | | |
|---|--------------------------|-------------------|--------------------------|
| | Y/N | | |
| Is there evidence of effective and timely management oversight and direction on cases, and clearly recorded rationale for decisions being made? | | | |
| Is there evidence of regular case supervision (comment on the quality of this below) | | | |
| Is case recording clear, comprehensive and reflective of work undertaken and focused on the experience and progress of children and young people? | | | |
| Analysis: | | | |
| Judgement: | | | |
| Outstanding | <input type="checkbox"/> | Good | <input type="checkbox"/> |
| Requires Improvement | <input type="checkbox"/> | Inadequate | <input type="checkbox"/> |

| 4) Assessments are timely, comprehensive, analytical and of high quality. They lead to appropriately focused help. | |
|---|-------------------|
| What is the category of the most recent assessment of the child's needs e.g. s47; single assessment; review; case summary | |
| Date Assessment completed | |
| Does the assessment include: | <u>Y/N</u> |
| The child/young person's changing needs | |

| | | | |
|--|--------------------------|-------------------|--------------------------|
| Significant relationships for the child | | | |
| Relevant historical factors informed by up to date chronology | | | |
| Information from partner agencies | | | |
| Risks, needs and protective factors which include parental capacity | | | |
| Evidence that the child has been seen alone and their wishes and feelings taken into account? | | | |
| Evidence that the family were notified of the outcomes of the assessment? | | | |
| <u>Analysis:</u> | | | |
| Judgement: | | | |
| Outstanding | <input type="checkbox"/> | Good | <input type="checkbox"/> |
| Requires Improvement | <input type="checkbox"/> | Inadequate | <input type="checkbox"/> |

| 5) Coordination between agencies is effective | | | |
|---|--------------------------|-------------------|--------------------------|
| | <u>Y/N</u> | | |
| Is joint working and information sharing improving the experience and sustaining the progress of children and young people? | | | |
| <u>Analysis:</u> | | | |
| Judgement: | | | |
| Outstanding | <input type="checkbox"/> | Good | <input type="checkbox"/> |
| Requires Improvement | <input type="checkbox"/> | Inadequate | <input type="checkbox"/> |

| 6) Consideration and impact of diversity | | | |
|--|--------------------------|------------|--------------------------|
| | | | <u>Y/N</u> |
| Do issues of diversity inform the response and the plan? (<i>For example, age, disability, ethnicity, faith or belief, gender, identity, language, race and sexual orientation.</i>) | | | |
| <u>Analysis:</u> | | | |
| Judgement: | | | |
| Outstanding | <input type="checkbox"/> | Good | <input type="checkbox"/> |
| Requires Improvement | <input type="checkbox"/> | Inadequate | <input type="checkbox"/> |

| 7) Quality of plans. | | | |
|---|--------------------------|------------|--------------------------|
| Type of plan in place (e.g. CP Plan / Pathway Plan): | | | |
| | | | Y/N |
| Is the plan up to date and updated? | | | |
| Is the plan SMART? | | | |
| Does the plan effectively address permanence for the child? | | | |
| Is the plan implemented? | | | |
| Does the plan show quality of management oversight? | | | |
| Have other agencies positively contributed to the plan? | | | |
| Is the plan influenced by views of children and parents /carers and diversity issues? | | | |
| <u>Analysis:</u> | | | |
| Judgement: | | | |
| Outstanding | <input type="checkbox"/> | Good | <input type="checkbox"/> |
| Requires Improvement | <input type="checkbox"/> | Inadequate | <input type="checkbox"/> |

| | | | |
|--|--------------------------|-------------------|--------------------------|
| 8) Permanency is achieved without delay and reflects assessed needs. | | | |
| | | | <u>Y/N</u> |
| Are plans for permanency, including adoption, in the best interests of children and young people and achieved without delay? | | | |
| <u>Analysis:</u> (consider the quality of preparation for placement): | | | |
| Judgement: | | | |
| Outstanding | <input type="checkbox"/> | Good | <input type="checkbox"/> |
| Requires Improvement | <input type="checkbox"/> | Inadequate | <input type="checkbox"/> |

| | | | |
|--|--------------------------|-------------------|--------------------------|
| 9) Children and young people participate in and benefit from effective regular reviews | | | |
| | | | <u>Y/N</u> |
| Are reviews scrutinised and challenged robustly to ensure that they support children in making good progress? | | | |
| <u>Analysis:</u> (consider the influence and impact of the Independent Reviewing Officer/Child Protection): | | | |
| Judgement: | | | |
| Outstanding | <input type="checkbox"/> | Good | <input type="checkbox"/> |
| Requires Improvement | <input type="checkbox"/> | Inadequate | <input type="checkbox"/> |

| | | | |
|--|--|--|-------------------|
| 10) Quality of placement | | | |
| | | | <u>Y/N</u> |
| Are children appropriately placed according to their assessed needs? (at home or looked after) | | | |
| <u>Analysis:</u> <i>Include contact with family/friends support for placements (including adoption support)</i> | | | |
| Judgement: | | | |

| | | | |
|-----------------------------|--------------------------|-------------------|--------------------------|
| Outstanding | <input type="checkbox"/> | Good | <input type="checkbox"/> |
| Requires Improvement | <input type="checkbox"/> | Inadequate | <input type="checkbox"/> |

| | | | |
|---|--------------------------|-------------------|--------------------------|
| 11) Are young people prepared for independence and are they living in high quality accommodation that meets their needs? | | | |
| | | | <u>Y/N</u> |
| Is it safe, permanent and affordable (children at home or looked after)? | | | |
| <u>Analysis:</u> | | | |
| Judgement: | | | |
| Outstanding | <input type="checkbox"/> | Good | <input type="checkbox"/> |
| Requires Improvement | <input type="checkbox"/> | Inadequate | <input type="checkbox"/> |

| | | | |
|---|--------------------------|-------------------|--------------------------|
| 12) How has the help provided improved outcomes? | | | |
| | | | <u>Y/N</u> |
| <i>Are children supported to achieve their full potential?</i> | | | |
| <i>Do children have developed networks within their community and are they safe?</i> | | | |
| <u>Analysis:</u> <i>(Evaluate impact (including education, physical health, and their emotional well-being))</i> | | | |
| Judgement: | | | |
| Outstanding | <input type="checkbox"/> | Good | <input type="checkbox"/> |
| Requires Improvement | <input type="checkbox"/> | Inadequate | <input type="checkbox"/> |

5. Overall Summary:**Strengths:****Areas for improvement:****6. Overall Grade**

| Judgements summary | Grade |
|--|--------------|
| 1) Risk is identified, responded to and reduced in a timely way | |
| 2) Children, young people and families are appropriately involved | |
| 3) Decision making is effective and timely | |
| 4) Assessments are timely, comprehensive, analytical and of high quality. They lead to appropriately focused help | |
| 5) Coordination between agencies is effective | |
| 6) Consideration and impact of diversity | |
| 7) Quality of plans | |
| 8) Permanency is achieved without delay and reflects assessed needs | |
| 9) Children and young people participate in and benefit from effective regular reviews | |
| 10) Quality of placement | |
| 11) Are young people prepared for independence and are they living in high quality accommodation that meets their needs? | |
| 12) How has the help provided improved outcomes? | |
| 13) Overall judgement | |

Grading of the quality of recording and practice - See 'Grading Guidance'.

Key issues to consider at each stage of the child’s journey:

- The quality and timeliness of assessment, risk management and planning.
- The effectiveness and impact of the help given to children and their families.
- The quality and effectiveness of inter-agency working.
- The effectiveness of quality assurance and management oversight of practice and decision making.
- The experience of particularly vulnerable children who live in households where there is domestic abuse, drug misuse and/or adult mental health issues.
- How well children and young people’s wishes and feelings inform every aspect of their care.
- How well diversity and identity has been considered and taken account of in care planning.

| OUTSTANDING | GOOD | REQUIRES IMPROVEMENT | INADEQUATE |
|-------------|------|----------------------|------------|
| | | | |

Justification for the Grading

If your overall grade is inadequate – please state whether you can tell if the child may be safe or unsafe because of the decisions made:

| | | | |
|------|--|--------|--|
| Safe | | Unsafe | |
|------|--|--------|--|

ESCALATE IMMEDIATELY TO TEAM MANAGER AND SERVICE MANAGER

7. Remedial Actions

| Section | Action | By when | Signed off by Manager |
|---------|--|---------|-----------------------|
| 1) | Risk is identified, responded to and reduced in a timely way | | |
| 2) | Children, young people and families are appropriately involved | | |
| 3) | Decision making is effective and timely | | |
| 4) | Assessments are timely, comprehensive, analytical and of high quality. They lead to appropriately focused help | | |
| 5) | Coordination between agencies is effective | | |
| 6) | Consideration and impact of diversity | | |
| 7) | Quality of plans | | |
| 8) | Permanency is achieved without delay and reflects assessed needs | | |
| 9) | Children and young people participate in and benefit from effective regular reviews | | |
| 10) | Quality of placement | | |
| 11) | Are young people prepared for independence and are they living in high quality accommodation that meets their needs? | | |
| 12) | How has the help provided improved outcomes? | | |
| Other | | | |

The supervisor and the allocated worker should review the audit findings and action plan. The allocated worker updates the action plan record with details of actions completed and comments/ actions on the findings and process. This is retained on the allocated workers professional supervision file and progress monitored on Mosaic supervision case note.

Signatures

| Name | Role (e.g SW / TM / Auditor / Moderator) | Signature | Date |
|------|--|-----------|------|
| | | | |
| | | | |
| | | | |
| | | | |

Post Audit Actions:

- Step 1. Business Support:** to email this audit form to case worker and copy in worker's line manager with a request to complete action points.
- Step 2. Business Support:** to provide list of cases where actions were identified, with worker name and manager and timescales to Service Manager for Safeguarding
- Step 3. Case Worker:** to complete the action points in Section 14 and forward audit form to line manager for sign off.
- Step 4. Line Manager:** within one month of receipt of audit form to confirm and sign off that all action points have been fully completed, and e mail Safeguarding Unit to confirm this has been signed off.
- Step 5. Line manager:** to arrange for fully completed audit form to be filed on child's electronic file.
- Step 6. Safeguarding Unit** to log completed audit form in 'completed and actioned' spreadsheet.

End of Audit Form

Reading Borough Council
Children's Services
Social Care

Name of Practitioner being observed:

Name of Manager undertaking Observation:

Nature of Observation:
(Telephone calls/Home visits/Meeting)

Date of Observation:

Record of Observation (to be completed by person observing)

Strengths Identified (to be completed by person observing)

Areas for Development Identified (to be completed by person observing)

Conclusions / Recommendation (to be completed by Supervisor and Supervisee during feedback session)

Any Actions Required (who will do what and by when)

Aspects Recommended for Discussion and Reflection at next Supervision (to be completed by Supervisor and Supervisee during feedback session)

Signature of supervisee.....

Signature of supervisor.....

Please ensure that a typed version is e-mailed to the worker and their line manager for discussion at their forthcoming supervision and to Jenny Quinn also for her to collate the forms.

SUPERVISION AUDIT Audit Tool C

READING BOROUGH COUNCIL CHILDRENS SERVICES

| | |
|--|--|
| <p>Name of Supervisor:</p> <p>Designation:</p> <p>Team:</p> | <p>Name of Supervisee:</p> <p>Frequency of supervision requirements:</p> <p>Designation/Grade:</p> <p>Date of Audit:</p> |
|--|--|

| File Structure | Y/N | Comments | Action Required |
|---|-----|----------|-----------------|
| Is the supervision file structured in accordance with Supervision Policy/Supervision File Guidance? | | | |
| Has a Supervision Agreement been completed between the supervisee & the current supervisor? Date? | | | |
| Case Discussion Records (Is the reader directed to the case file or most recent notes on file?) Observed Practice Records Risk assessments (relating to employees welfare at work) and absence management Admin Section Current HCPC Registration & CRB/DBS update if applicable. | | | |
| Evidence Of: | | | |
| Does the frequency and duration of supervision meet minimum standards as outlined in the supervision policy? | | | |

| | | | |
|--|--|--|--|
| Performance Management (focussing on outcomes and workload management). | | | |
| Is the record of the supervision sessions appropriate: - detailed enough to provide guidance / direction and legible, dated and signed by both supervisor/supervisee? | | | |
| Have decisions made about service users also been recorded on the case file/electronic record and signed and dated/authorised by the Manager as appropriate. | | | |
| Professional development - Is there evidence that the supervisor has considered and acted on the supervisee's performance / training / development needs? - Record of training in line with HCPC Registration requirements? - Is there evidence of an up to date PDP/PDR? | | | |
| Evidence of additional requirements for social workers in their NQSW / Assessed and Supported Year of Employment (including assessment, support and development opportunities, also evidence of Learning Agreement and quarterly reviews) | | | |
| Is there evidence that the supervisee's attendance has been managed in line with the Attendance Management and Sickness Policy and procedure? | | | |
| Welfare/Support Needs Is there evidence that the supervisor has acted on any concerns and issues identified? | | | |
| From the file audit is there a necessity to arrange an observation of the supervisors' supervision skills? | | | |
| Additional comments from the auditor following conversations with the supervisee and supervisor | | | |

Audit Completed by: (Name of Auditor)

Signature:

Date:

| | Action | By When | Completed |
|---|--------|---------|-----------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |

Actions Completed by:

(Name of Supervisor)

Signature:

Date:

NB Once actions are completed please confirm by email with auditor.

READING BOROUGH COUNCIL – AUDITING OF SUPERVISION PRACTICE

SUPERVISEE QUESTIONS

SUPERVISEE INITIALS:

SERVICE/TEAM:

AUDITOR:

| QUESTION | RESPONSE |
|--|----------|
| DO YOU HAVE SUPERVISION AT THE REQUIRED FREQUENCY? | |
| HOW DO YOU PREPARE FOR SUPERVISION? | |
| WHAT ARE THE BENEFITS OF SUPERVISION FOR YOU AND YOUR PRACTICE? | |
| DO YOU RECEIVE YOUR SUPERVISION NOTES TYPED, SIGNED AND IN A TIMELY WAY? | |
| IN SUPERVISION DO YOU REFER BACK TO PREVIOUSLY AGREED ACTIONS? | |
| ARE THERE PARTS OF SUPERVISION YOU FIND HELPFUL OR UNHELPFUL? | |
| WHAT THREE WORDS WOULD YOU USE TO DESCRIBE YOUR SUPERVISION? | |
| DO YOU HAVE THE OPPORTUNITY TO BE REFLECTIVE AND ANALYTICAL IN SUPERVISION? CAN YOU GIVE AN EXAMPLE OF THIS? | |
| IS THERE OPPORTUNITY FOR YOU TO DISCUSS YOUR PROFESSIONAL DEVELOPMENT? | |
| IS THERE ANYTHING ELSE YOU WOULD LIKE TO SAY? | |

READING BOROUGH COUNCIL – AUDITING OF SUPERVISION PRACTICE

SUPERVISOR QUESTIONS

SUPERVISOR INITIALS:

SERVICE/TEAM

AUDITOR:

| QUESTION | RESPONSE |
|--|-----------------|
| HOW DO YOU PLAN FOR SUPERVISION? | |
| DO YOU TRACK PROGRESS ON PREVIOUSLY AGREED ACTIONS? | |
| DO YOU PROVIDE A TYPED RECORD OF THE SESSION, SIGNED AND IN A TIMELY WAY? | |
| HOW DO YOU ENSURE THAT YOU HAVE REFLECTIVE, CHALLENGING AND SUPPORTIVE DISCUSSIONS? CAN YOU GIVE AN EXAMPLE? | |
| DO YOU PROVIDE OPPORTUNITY TO DISCUSS, REVIEW AND EXPLORE AREAS OF PROFESSIONAL DEVELOPMENT? CAN YOU GIVE AN EXAMPLE? | |
| DO YOU FEEL THAT YOU HAVE SUFFICIENT SKILLS, KNOWLEDGE AND SUPPORT TO PROVIDE QUALITY SUPERVISION? | |
| ANY OTHER COMMENTS? | |
