

Quality Assurance Framework for Safeguarding Children

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1. Introduction

This framework seeks to provide a quality assurance dimension to our work by creating a consistent and transparent approach to monitoring and audit. The purpose of such activity is to continually improve the quality and effectiveness of services in supporting children, young people and their families to achieve good outcomes.

It is important that everyone in Children Services understands that they are responsible for improving outcomes for children young people and their families. The Quality Assurance Framework outlines each individual's role within quality assurance work across Bath and North East Somerset's Children's Services workforce from frontline staff to senior management level. The objective of this framework is to firmly embed "quality" into all aspects of Children Services work through regularly challenging our practice standards and to ensure that we regularly evaluate the quality of services on offer. It should also help to create a culture where B&NES children services are committed to learning and continued improvement.

Everybody is responsible for quality assurance and it is essential that staff across all tiers actively contribute towards this process. It is imperative to include staff across all tiers in this process so that they participate in driving up standards, whether this contribution derives from carrying out audits, visits, casework discussions or collating service user feedback.

Audit of social work practice forms a core part of ensuring the quality of services provided for children and their families in Bath and North East Somerset (B&NES). Audit sits within a wider framework of quality assurance measures within the division including the training strategy, the electronic children's social care procedures, the management of complaints and the Independent Reviewing Officers and Child Protection Chair's escalation procedures.

It is essential that audit carried out within B&NES is not only focussed on quantitative information regarding numbers and activity but is also focussed on the quality of service provided to children and families in B&NES and the impact that the service has on service user outcomes.

2. Role and responsibilities

The process of planning is essential to ensure that this Quality Assurance Framework functions effectively. The overarching plan is the Children and Young People Plan which embraces the high level priorities of the department, within the framework of the Council Plan. Plans at each level of the organisation need to be aligned within these priorities to ensure co-ordination across teams and services to meet those priorities and deliver improved outcomes for children and young people. The priorities in team plans need to be considered when preparing skills sets. Each staff members skill set should consider the competences needed to deliver the team's planned objectives, access to training and development opportunities should be designed to support the individual's competence and effectiveness in meeting these objectives. Supervision underpins this process and is the vehicle for development through reflective practice as well as individual case discussion and performance management. Reflective practice may also be delivered through team-based sessions led by either the Senior Practitioner and/or the Team Manager.

All managers and practitioners have a responsibility to ensure that the Local Authority provides a consistently good quality service to children and their families and which results in a positive impact on their outcomes. All members of staff are accountable for the quality of their practice and they have a duty to ensure that their practice improves by being open to continued learning through the evaluation of their practice. Senior managers have extra responsibilities in terms of quality assurance, and this strategy sets out the expectations in relation to these responsibilities.

Front-line staff need to be engaged with the purpose and process of auditing and quality assurance. The process must be inclusive and collaborative, conducted with staff rather than being imposed upon them. Practitioners are best placed to assess the quality of what they do, the constraints they experience when working with children and families and what can be done to improve their practice and, in turn, outcomes for children and families.

User feedback is regularly reported to the senior management group, as well as to front line teams, and learning from individual cases is shared across teams. In the coming months the service will start seeking regular feedback from parents whose children are subject to child protection plans. It will also continue to carry out qualitative research with both looked after children and children subject to a child protection plan on their experiences of multi-agency intervention.

Audit by reviewing a sample of case files and by direct observation of work by practitioners provides an opportunity to monitor the quality of work on a number of levels. Reviews of case files against agreed and published criteria should assure auditors that the evidence on file supports the key practice steps (referral, assessment, planning, implementation and review) and evidences that they have been conducted in a timely way, reflecting managerial oversight and contribution. Such reviews will identify variations of standards across teams as well as between workers within teams and can identify examples of good practice for dissemination across the service. The information and analysis generated from these QA

processes will also inform strategy to improve areas of weakness to ensure that services to children and young people continuously improve.

It is also very important that we are proactive in capturing the views of children, young people and their families within the quality assurance framework process so that we can effect change and promote effective service development. Such feedback will be collated via a series of service user feedback forms, service user focus groups or other measures such as meeting evaluation forms in addition to issues identified at case transfer points.

Audit of personnel files such as recruitment, retention, absence and training ensures the organisation is equipped to provide a good service and is essential in identifying emerging issues or trends that may require action.

There are three levels of audit in B&NES Safeguarding and Social Care Division.

3. Co-ordination

To ensure that the framework is implemented consistently and that lessons are learned and corrective action taken when necessary in a timely way, two strands will operate:

1. Those carrying out audit work liaise directly with the relevant social worker and manager to inform them of the Quality Assurance activity, to ask questions about the issues raised in an audit and to provide feedback in relation to good practice and any areas of concern.
2. The range of Quality Assurance activity and the dissemination of learning from audits will be coordinated by the senior management team. This will ensure that key activities and results are coherently managed, so that emerging themes and issues are tracked, and so that additional responsive Quality Assurance activity is commissioned.

4. Level one audits: examination of case records by managers within the division.

Auditing cases is a fundamental way for managers to ensure that practice within their team is safe and that workers are carrying out actions agreed in supervision. Deputy Team Managers are required to routinely examine case records on CareFirst and/or Documentum and to agree actions carried out by social workers. Each team will have clear expectations regarding the level of scrutiny by deputy team managers. Team Managers need to assure themselves that Deputy Managers are routinely scrutinising files. There will be a clear mechanism within CYP social care where the management team look at individual audits and provide action plans to ensure service improvements arising from such audits.

In recognition of the differing requirements of the work in each team, Deputy Team Managers and Team Managers will be required on a monthly basis to audit the following minimum number of cases:

- Looked after children and leaving care/ 16+ teams: One case per Deputy Team Manager.
- Child Protection and Court teams: One case per Deputy Team Manager.
- Duty and Child in Need teams: One case per Deputy Team Manager.

- Deputy Team Managers will audit all cases at closure to ensure that objectives are met against the current Plan objectives; chronologies are checked for gaps and trends, and the overall quality of the work is acceptable and that there is an appropriate exit plan in place.
- The above audits will consider in supervision; case direction and reflection of the case, and oversight and sign off in detail.
- The Deputy Team Manager will choose which case to audit each month and ensure that they audit at least one case of each of their social workers every six months.

Service managers and the Divisional Director for Safeguarding, Social Care and Family Services will ensure that team managers within the service are routinely examining the agreed number of case records on Documentum/CareFirst by auditing cases and recording their findings on Documentum/CareFirst themselves. In addition to this, Senior Management will also be responsible for monthly audits of files as follows;

- Divisional Director; two case files each month
- Service Managers; one case file each month
- Principal Social Worker; two case files each month.

In the interest of neutrality, these files will be selected at random, using a list generated by the Administration Manager. Whenever an audit of a file is undertaken it should be recorded on CareFirst under observations: audit quality case file. The observation should contain a summary of the findings of the audit and identify any actions that need to be taken by the allocated social worker to address shortfalls in practice. The manager completing the audit will send an alert via CareFirst/ Documentum to the relevant social worker. All tier one file audits should be undertaken alongside the Social Worker at their desk so that the manager and the worker can review the work in collaboration, as directed within the audit tool, and have an opportunity to discuss any issues raised within the audit process. The Manager will record the findings of the audit directly onto the audit tool.

All tier one, two and three managers within Children's services will undertake to spend two observation visits each a year with the front-line staff. This will include; undertaking home visits to families and children, or observing office visits so that they remain aware of the pressures faced by the front line teams, and are able to view the skills deployed by staff in dealing with service-users. All practitioners' direct work will be observed twice annually by deputy team managers to ensure that their practice is of a good enough quality.

The level of Tier 1 audit activity will be outlined by the Divisional Director for Safeguarding, Social Care and Family Support Services in their quarterly report to SLT summarising tier one audit activity (see below).

5. Level two audits: the annual programme of team and themed audits identified by the quality assurance team.

An annual programme of quality audits will be compiled by the Head of Safeguarding. The audits will be thematic and will take account of issues of concern raised, for example, from

serious case reviews, external audits, previous internal audit activity or other areas as identified by the senior management team.

From August 2013 there will be a minimum of one audit per year which will be 'deep dive' cross cutting across teams. The audits will examine 20 to 30 case files as well as other relevant data. Divisional Directors, service managers, team managers, deputy managers and social workers will be identified to undertake the audits which will take place over a week. If a manager/ worker who is identified to take part in the audit is unable to do so, the manager or their line manager (including service manager) must identify an appropriate substitute.

Each audit will be led by the Head of Safeguarding who will:

- Together with the other members of the auditing team, identify the audit tools to be used for the audit which will be agreed by the Senior Management Team (SMT) prior to the audit.
- Compile an audit report.
- Together with the other members of the auditing team draw up an action plan based on the recommendations from the audit. Areas of good practice and learning will be fed back in a timely manner to the individual social workers and managers and disseminated across the service as appropriate.

Any case examined during the auditing process that gives cause for concern should be brought to the immediate attention of the relevant service manager and Divisional Director.

The Head of Safeguarding will present a six monthly report to CLT summarising auditing activities for that period and proposed actions which should be taken in relation to the outcomes of such audits. The Divisional Director for Safeguarding, Social Care and Family Support Services will provide a quarterly report to CLT summarising tier one audit activity and what actions CYP social care are taking to mitigate any concerns arising from such audits.

6. Level three Audits: Multi agency audits undertaken by the Local Safeguarding Children Board

Currently the B&NES LSCB undertakes a number of multi-agency audits including audits of Initial Child Protection Case Conference minutes and agency reports by the Professional Practice Group to examine the effectiveness of procedures and practice in B&NES to safeguard children. The Professional Practice Group will meet nine times a year and they will audit a mixture of Initial Child Protection cases and themed audits. This will be allocated per meeting, with themes covering matters such as Child Sexual Abuse and BME Families. At least four cases will be audited and discussed per meeting.

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