

Bedford Borough Council

Children's Services

## Quality Assurance and Learning Framework



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## 1. Introduction

- 1.1 Bedford Borough Council is committed to providing high quality, dependable services for children, young people and their families. We aim to keep children at the heart of our services and deliver against nationally agreed standards and ensure the achievement of our performance targets and standards by ensuring 'Quality Assurance' is part of our everyday practice.
- 1.2 The Quality Assurance and Learning Framework for Children's Services within Bedford Borough Council includes all activity undertaken to ensure work is carried out to the highest quality. It aims to improve our understanding of whether we are supporting and safeguarding the right children, in the right way, at the right time, and whether we are making a difference. The framework is designed to help us on our journey of continuous self-assessment and improvement.



- 1.3 This document applies specifically to children's social care services and the work of the early help teams.

## 2. Practice Standards

- 2.1 All staff employed by Bedford Borough Council Children's Services, or providing services on behalf of the Council, are held accountable for making sure that practice standards are met at all times. Practice standards are informed by statutory guidance and regulation. They are based on evidence about the elements of practice which are most likely to lead to good quality services and positive outcomes for children, young people, and their families.
- 2.2 The overarching professional standards framework for all social workers is **The Professional Capabilities Framework (PCF)**, which can be accessed through this [link](#), as well as the Health and Care Professions Council **Standards of Conduct, Performance and Ethics**, which can be accessed through this [link](#).
- 2.3 All staff are expected to maintain our local Customer Service Standards, throughout their work:
- We will explain to you why we are working with you and your family and what we can and cannot do;
  - We will listen to you and take into account your wishes and feelings in everything we do;
  - We will take care to ensure you understand what we are saying, by using clear and straightforward language, or a translator if necessary;
  - We will do everything we say and when we say we will do it;
  - We will be on time for meetings and appointments;
  - We will keep you updated on progress;
  - We will keep your personal information safe and explain how we are going to use it;
  - We will try to answer your questions or find someone who can.
- 2.4 Performance is measured against internally and externally reported **performance indicators** that identify areas of strength and areas requiring improvement. Managers use the performance data as one strand for monitoring and evaluating the performance of teams and team members.
- 2.5 **Case File Audits** are an intrinsic part of the quality assurance process and examine social care practice against ten social care practice standards through a number of supplementary questions:
- **Standard 1** All children will have an assessment which reflects a clear picture of the child's experience and wishes and feelings;
    - Does this child have an appropriate and up-to-date assessment?
    - Is there a record that the child was appropriately seen alone?
    - Is it clear that the child's perspective informed the assessment?
  - **Standard 2** – All children will have a plan which explains their needs, outcomes and agreed actions;
    - Does this child have a plan, with measurable outcomes and time-scaled actions?
    - Is there timely review of the plan?

- Does the review of the plan clearly include evaluation of progress against outcomes?
- **Standard 3** – All assessments, plans, and interventions will reflect an understanding of the wishes, feelings and needs of parents and carers and will be focussed on enabling them to fulfil their responsibilities to their children;
  - Has the involvement and views of the parent or carer(s) been sought, considered, and clearly documented as part of the assessment?
  - Has the involvement and views of the parent or carer(s) been sought, considered, and clearly documented as part of the planning?
  - Has the involvement and views of the parent or carer(s) been sought, considered, and documented as part of reviewing the plan?
- **Standard 4** – All assessments, plans, and interventions will be based on a clear analysis and understanding of all the information available about the child;
  - Is there evidence of appropriate information sharing?
  - Is there evidence, on the case file record, that we have consent to share information
  - Does assessment and analysis show due consideration of ethnicity, culture, disability, age, sexuality, and faith issues?
  - Are the risks identified and evaluated, and clearly linked to the rationale for recommendations and decisions?
- **Standard 5** – As far as age and understanding allows, children will be spoken to alone and worked with by professionals who have the tools and training to directly engage children;
  - Is direct work with the child described?
  - Is there evidence of tools or skills used, appropriate to the child’s age and level of understanding?
  - Has the impact of direct work been evaluated?
- **Standard 6** – Case records will have an up-to-date chronology of significant events and an accurate genogram;
  - Is there an accurate genogram on file?
  - Is there an up-to-date chronology on file?
  - Is there evidence that historical information has been considered?
- **Standard 7** – Case recording will be up-to-date and will reflect the purpose of interventions and contacts;
  - Are case records clearly written, in a professional manner that is accessible to children and families?
  - Are case records complete, in a way that meets applicable legislation and statutory guidance?
  - Does the case recording demonstrate the child’s story?

- **Standard 8** – Every child has a risk assessment including a contingency plan;
  - Are there any safeguarding needs identified with this child?
  - Is there a clear plan to address safeguarding concerns?
  - Is there a clear contingency plan in place?
  
- **Standard 9** – Every case will contain evidence of monthly supervision that is reflective in nature;
  - Is there evidence of regular case supervision on the child’s record over the last six months?
  - Does the supervision record demonstrate it supports critical reflection?
  - Does the supervision record demonstrate it supports clear decision making?
  
- **Standard 10** – Every case will contain evidence of management oversight ensuring that tasks have been completed to the required standard;
  - Is there evidence of regular management oversight through case audit?
  - Do all key documents include clear evidence of managerial sign-off?
  - Is there evidence of appropriate line management support or challenge that is effective in securing completion of tasks to the required standard?

### 3. Quality Assurance Tools

- 3.1 Audit tools have been developed to scrutinise the above standards, and contain specific targeted questions in relation to Children in Need, children subject to a Child Protection Plan, Disabled Children, and Children in Care. The audit tools and guidance can be found in Appendix 3.
- 3.2 Complaints and compliments about Children’s Services are another important element of the Quality Assurance and Learning Framework. The Customer Feedback Manager provides quarterly reports, as well as annual reports, which identify trends and make comparisons about the nature of complaints on a year by year basis. The Customer Feedback Manager also contributes to a briefing sheet issued by the Departmental Management Team that is circulated to all children’s services staff, which contains information about common themes and lessons from complaints, compliments, and customer feedback.

### 4. Assessing and Reviewing Practice

- 4.1 Each month, the cases to be audited are selected randomly by the performance team liaising with the Head of Service (Safeguarding and Quality Assurance) in accordance with the thematic schedule agreed by the Departmental Management Team – see [Appendix 1](#). Each Head of Service, Team Manager, Advanced Practitioner, and Independent Reviewing

Officer/Conference Chair will be asked to audit at least 1 case a month. Team Managers and Advanced Practitioners will audit cases that they are not directly responsible for.

- 4.2 Auditors are encouraged to complete the case audit with the Social Worker responsible for the management of the case. This element of the process is being further developed so that the framework becomes more reflective for Social Workers and is a positive, learning experience.
- 4.3 The audit tool includes a judgement about the quality of the work based on Ofsted grading structure and priority weighted actions required to address deficiencies. The implementation of actions is monitored centrally. There will also be in the future a facility to enable auditors to offer advice or comment about cases that are not monitored. Completed audits are discussed with the appropriate Managers and Social Worker and placed on the child's case file (by the Social Worker).
- 4.4 In addition, members of the Safeguarding and Quality Assurance service undertake bespoke audits exploring themes that arise from the social care audits and performance management information as and when they are required.
- 4.5 The Head of Service (Safeguarding and Quality Assurance) reviews themed audits carried out to ensure a consistent approach to auditing. The findings are reported to the Departmental Management Team where any issues can be discussed and learning shared.
- 4.6 ***To be introduced in the Autumn of 2016:*** A schedule of 'Senior Manager Practice Audits' compliments the audit timetable. A Manager meets with the case holder and explores with them the core elements from the audit template, holding a reflective 'support and challenge' conversation. As a part of this schedule, Managers may choose to attend a meeting with the worker, for example, a core group meeting or child protection conference. Examples of outstanding practice as well as areas for improvement will be recognised as part of this process.

## 5. Learning and Changing

- 5.1 On completion of an audit, the auditor feeds the results of the audit and any actions required to the Social Worker. The auditor at the same time copies in the Team Manager and relevant Head of Service or Service Manager line managing the team. In all cases, the auditor copies in the Lead Auditor. The Lead Auditor logs the fact that the case has been audited and will routinely seek confirmation from the Team Manager that any actions requiring implementation have been completed within the required timescale.
- 5.2 Whilst the lead auditor is accountable for tracking completion of actions and escalating any delay, the Team Manager, along with the relevant Head of Service or Service Manager



remains accountable for making sure the action is completed and for any further qualitative check on that case file. For example, is the Child Protection Plan SMART?

- 5.3 An evaluative report on outcomes identified in the audit is produced by the Head of Service leading on that theme. Once a month, the Lead Auditor will provide a report to the Departmental Management Team giving a picture of a) how many audits have been completed per month per team, b) of what nature, c) the grading (inadequate, requires improvement, good or outstanding), d) the progress made with completing actions and e) any examples of outstanding practice.
- 5.4 Cases celebrated by the Departmental Management Team as outstanding practice will be fed back into training and used as exemplars.
- 5.5 Registration of social work staff with the Health and Care Professions Council (HCPC) is contingent upon evidence of minimum learning requirements over a three year period. It requires managers to provide oversight to and sign off of the evidence of learning for each qualified Social Worker for whom they are responsible
- 5.6 The Quality Assurance and Learning Framework feedback loop includes the expectation that workforce development plans, service plans, and personal development plans evidence are shaped by the learning from social care audits and performance management information.
- 5.7 Supervision records are used to demonstrate social workers' and managers' reflections on the progress of cases and the quality of decision making. Children's Social Care Services have a supervision policy that challenges practitioners to reflect critically on their cases and foster an inquisitive approach to social work. The supervision policy can be accessed through this link:  
[http://bedfordboroughcs.proceduresonline.com/chapters/pr\\_supervision\\_pol.html](http://bedfordboroughcs.proceduresonline.com/chapters/pr_supervision_pol.html)
- 5.8 All children's services staff have an annual Performance and Development Review (PDR). The PDR takes the aims and priorities set out in the Council's Corporate and Directorate plans and translates them into objectives and targets for individual staff members. It provides the opportunity to identify strengths and weaknesses in staff performance and provides a vehicle to address any concerns.

## **6. How does this Quality Assurance and Learning Framework link into wider assurance of practice?**

- 6.1 The welfare of children and young people is everybody's business. No service can or should operate in isolation. For this reason, the Quality Assurance and Learning Framework should be read in conjunction with the Bedford Borough Safeguarding Children Board procedures and performance and quality assurance framework. Practitioners working for the Council

contribute as appropriate to multi-agency audit activity and other learning processes such as Serious Case Reviews.

- 6.2 There is a monthly Performance and Quality Assurance meeting for all managers within Children's Services, chaired by the Assistant Director. The agenda for this meeting includes: the Performance Data and emerging themes from the data; the monthly overview report from the Casefile audits; lessons from the themed audit; lessons from audits carried out within Service area; issues from the MASH audits; the PLO/proceedings tracker and progress; IRO monitoring forms and escalations; complaints and themes from complaints.
- 6.3 Operational managers have a range of checks and balances to ensure compliance and quality of casework including monthly supervision on each allocated case, and administrative systems in relation to timescales for statutory visits and significant meetings.
- 6.4 Each Service area carries out audit activity including supervision audits and practice observations. The Assistant Director keeps a spreadsheet of supervision dates for each practitioner.
- 6.5 The children's homes are visited monthly by an independent visitor who completes a Regulation 44 report which is copied to the Head of Service Quality Assurance and Safeguarding. The findings from these reports are part of the report provided by the Home Manager at the Performance and Quality Assurance meetings.
- 6.6 The Engagement and Development Team collate the views of young people in relation to Service delivery.

## **7. Supporting the Quality Assurance and Learning Framework**

- 7.1 The Framework is supported by the following teams. Their purpose in doing so is to support and drive up the standards through consultation, independent challenge, and feedback:
  - The **Conference and Review Team** co-ordinates Child Protection Conferences and reviews progress against Looked After Children care plans and provides quality assurance feedback through these processes.
  - The **Bedford Borough Safeguard Children Board** (BBSCB) business unit supports all quality assurance audit and training activity arranged through the safeguarding board.

## 8. Appendices

- Appendix 1     [Social Care Audit schedule](#)
- Appendix 2     [Audit Process](#)
- Appendix 3     [Social Care Audit Tool and 'what good looks like' – advice to support the audit tool](#)
- Appendix 4     Template for Senior Management Practice Audit (*To be introduced – Autumn 2016*)
- Appendix 5     Senior Management Practice Audit rota (*To be introduced – Autumn 2016*)
- Appendix 6     Standards for Management Oversight (*To be introduced – Autumn 2016*)