

Quality Counts
A Quality Assurance
Strategy for Children's
Services in Bracknell Forest

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Contents

| | |
|---|---|
| Accessibility | 4 |
| 1 Introduction | 1 |
| 2 Scope of the Strategy..... | 1 |
| 2.1 Aims of the Strategy | 1 |
| 2.2 Principles Underpinning the Strategy | 2 |
| 3 Quality Assurance Cycle | 2 |
| 3.1 3.1 Organisational Development | 3 |
| 4 Roles and Responsibilities | 3 |
| 4.1 Lead member | 3 |
| 4.2 Executive Director People | 3 |
| 4.3 Assistant Director, Children's Social Care | 4 |
| 4.4 Principal Social Worker..... | 4 |
| 4.5 Managers in Children's Social Care..... | 4 |
| 4.6 Performance Analysts | 5 |
| 4.7 Quality Assurance Service | 5 |
| 4.7.1 Head of Quality Assurance | 6 |
| 4.7.2 Complaints..... | 6 |
| 4.7.3 Local Authority Designated Officer (LADO)..... | 6 |
| 4.7.4 Conference and Review Team..... | 7 |
| 4.7.5 Quality Assurance Officer | 7 |
| 4.7.6 Child Participation Officer | 7 |
| 5 Panels, Boards and Meetings with a Quality Assurance and Scrutiny Function | 8 |
| 5.1 Bracknell Forest Safeguarding Board (BFSB or 'Safeguarding Board') | 8 |
| 5.2 5.2 Overview and Scrutiny Commission..... | 8 |
| 5.3 5.3 Corporate Parenting Advocacy Panel | 8 |
| 5.4 5.4 Department Management Team Performance Board 9 | |
| 5.5 5.5 Children's Quality Assurance Working Group (CQAWG) | 9 |
| 5.6 5.6 Learning from Quality Assurance Events | 9 |
| 6 Quality Assurance Processes..... | 9 |
| 6.1 6.1 Monitoring | 9 |
| 6.1.1 Regular Monitoring and Review of Casework..... | 9 |

| | | |
|-------|--|----|
| 6.1.2 | Fostering and Adoption Report Monitoring..... | 10 |
| 6.1.3 | Monitoring Quality of Conference and Review Team and LADO work | 10 |
| 6.1.4 | Workforce Monitoring..... | 10 |
| 6.1.5 | Financial Monitoring..... | 10 |
| 6.1.6 | Regulation 44 Monitoring..... | 10 |
| 6.2 | Surveys and Reviews | 11 |
| 6.2.1 | Staff Surveys and Feedback..... | 11 |
| 6.2.2 | Specific Parental Surveys and Consultations..... | 11 |
| 6.2.3 | Children’s Annual Participation Survey | 11 |
| 6.2.4 | Peer Review/Peer Challenge | 11 |
| 7 | Audit Programme..... | 11 |
| 8 | Conclusion..... | 12 |
| 9 | Appendix 1 - Social Work England Professional Standards | 13 |
| 10 | Appendix 2 - Live Quality Assurance Framework and Toolkit | 14 |

Accessibility

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1 Introduction

Bracknell Forest Council is a learning organisation that is committed to providing quality services to children, young people, and their families and to the continual improvement of these services.

Quality assurance is a generic term that embraces all activity that contributes to service improvement through satisfying the organisation, that agreed standards are being met and outcomes for safeguarding children are being achieved.

In Bracknell we view quality assurance as an integral part of what we do. As such it is a continual and dynamic process by which standards are set and our achievements are monitored. As a learning organisation we use the information we must improve services and by undertaking ongoing review.

This strategy identifies the mechanisms by which relevant standards of quality are met and by whom.

2 Scope of the Strategy

This strategy focuses on the quality assurance framework within Children's Social Care and on the overall coordination of information and systems integral to the effective delivery of the service. This also encompasses some services that do not sit within Children's Social Care but have significant impact in terms of delivery and practice. This includes:

- Conference & Review Team which includes the Independent Reviewing Officer, Child Protection Conferencing and Local Authority Designated Officer functions
- Children's Statutory Complaints function
- Bracknell Forest Safeguarding Board
- Children's Principal Social Worker
- Performance, Participation and Quality Assurance
- Early Help

The Quality Assurance service is located within the Commissioning, People Directorate division of the Council, and provides line management and decision making which is independent of decisions within Children's Social Care and Early Help.

A central strand of the strategy considers how staff at all levels and in all teams in Bracknell Forest measure impact, asking the key question '**How do I know I am making a difference?**'

This Quality Assurance strategy should be considered within the context of Bracknell Forest Corporate Performance Structure.

The Strategy underpins Bracknell Forest Council's Audit Framework and Toolkit and annual audit schedule, which sets out key areas of audit activity. This is a cyclical arrangement and quarterly reporting is in place to ensure continued improvement activity.

2.1 Aims of the Strategy

- Improve outcomes for vulnerable children.
- Ensure services are achieving consistently high standards.
- An organisation committed to learning and continual improvement.

- Feedback on quality of services from children, their families, and staff.
- Continuous improvement and development of the children's workforce.

2.2 Principles Underpinning the Strategy

- Quality relates to service-user experience and outcomes.
- Quality can always be improved.
- Everyone has a role to play in improving quality from front line practitioners to senior managers, Executive Director, Chief Executive and Members.
- All staff must be flexible in meeting people's changing needs and choices.
- Quality outcomes and improvements are most likely where there are skilled, enthusiastic, and resourceful staff members.
- Comprehensive policies and procedures are in place so staff can see what they have to do in order to meet standards.
- Quality assurance draws together messages from a wide evidence base to provide an overview of quality.

3 Quality Assurance Cycle

The diagram below shows clearly and simply that quality assurance is a cycle. To improve the services, 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 to secure the right outcomes for service users



3.1 Organisational Development

Mechanisms exist within the Council that seek information to support improvement and development; this currently includes feedback from staff, staff supervision, audits, workforce data and information such as recruitment and retention, vacancies and sickness, allegations against staff and volunteers, workforce training and development and peer reviews.

All these components are individually important; this strategy aims to coordinate the above components to ensure that there is a complete picture of ongoing improvement within Children's Services.

4 Roles and Responsibilities

Quality Assurance, as with Safeguarding, is 'everyone's business' and there are a number of individuals and groups within Bracknell Forest who play a key role in ensuring that the services provided for children and families are of high quality and improve outcomes.

One of the key principles of Bracknell's Quality Assurance Strategy is that front line staff are engaged in the process of quality assurance and that social work staff are best placed to assess the quality of what they do and what, if any, constraints they experience in delivering quality. The process is therefore inclusive, working 'with' staff, rather than doing to them.

Social Work England set professional standards and education and training standards for Social Workers in December 2019. These are the threshold standards necessary for safe and effective practice. They are specialist to the social work profession and apply to all registered social workers in all roles and settings. These are set out in Appendix 1. They make clear the responsibility of individual social workers for their own good practice.

4.1 Lead member

The Executive (Lead) Member is politically accountable for ensuring the Local Authority fulfils its legal responsibilities for safeguarding and promoting the welfare of children and young people. The Lead Member receives assurance on the Safeguarding Assurance Monitoring Board and is a member of the Children & Young People's Partnership.

The Lead Member, with the Assistant Director Children's Social Care (CSC) and Executive Director People's Directorate meet with the Children in Care Council every six months.

4.2 Executive Director People

The role of the Executive Director People, mirrors that of the Lead Member in that they are accountable for the legal responsibilities for safeguarding and the welfare of children and young people. The Executive Director, People, maintains an overview of the department and has a key role in ensuring the quality and effectiveness of services provided and in driving continual improvement.

The Executive Director People along with the Assistant Director for CSC and Assistant Director for Quality Assurance meet regularly with the Lead Member and the Chief Executive to discuss ongoing performance, areas of good practice and areas for concern.

The Executive Director, People will randomly view case files and receive case presentations from Social Workers on a regular basis alongside the Assistant Director CSC. The Executive Director will also meet regularly with the Principal Social Worker to receive feedback on behalf of practitioners.

The Executive Director People, the Assistant Director CSC, and Lead Member meet with the Children in Care Council every six months.

4.3 Assistant Director, Children's Social Care

The Assistant Director CSC, has a responsibility for ensuring that Children's Social Care delivers the range of statutory functions to support children who are looked after, children who are subject to child protection plans, and children in need (as defined under Section 17 of the Children Act 1989).

The Assistant Director CSC is responsible for the overall quality of these services, and for ensuring that practitioners have the relevant skills and tools needed to fulfil their roles. Inspection and auditing are a key aspect of the role, and the Assistant Director CSC will maintain an overview of the quality assurance activity within the department.

The Assistant Director CSC and the Executive Director People will receive case presentations from Social Workers and will randomly view case files. A case note will be put on the child's electronic file and in the management chronology as appropriate, where a case presentation or an audit has taken place.

The Assistant Director CSC with the Executive Director People and Lead Member meet with the Children in Care Council every six months.

4.4 Principal Social Worker

The Principal Social Worker has responsibility for undertaking multi agency audits with partners and to contribute to Bracknell Forest Safeguarding Board audits as required. The Principal Social Worker also contributes to learning from audit activities including representation on a monthly audit validation panel and Children's Quality Assurance Working Group (CQAWG).

Following any quality assurance activity, learning and development needs will be shared with the Principal Social Worker who will work closely with the CQAWG and CSC to support practice improvement.

4.5 Managers in Children's Social Care

Heads of Service and Team Managers in CSC have a responsibility to ensure that all relevant standards are met. They have a clear role in the supervision and appraisal processes and management oversight of how practice standards are being implemented.

In January 2016, proposals were made by the Government to reform children and families' social work and make important changes, including the setting up of a professional body to take the lead on a number of crucial functions, including the development of a post qualifying framework, an accreditation system and workforce planning. A Knowledge & Skills Statement for practice leaders and practice supervisors sets out standards/expectations for social workers supporting vulnerable children and families. (April 2016)
<https://www.gov.uk/government/publications/knowledge-and-skills-statements-for-child-and-family-social-work>

Managers in Bracknell Forest are committed to ensuring that the standards set by the Department for Education and legislative/policy changes are met. This is achieved by adhering to Bracknell Forest's Supervision Policy and the provision of the following for all staff:

- Induction

- Regular and high-quality support and supervision
- Appraisal
- Ongoing training

It is important that staff in Bracknell Forest know what is expected of them and that the above processes provide feedback for staff on overall performance.

In addition to the above, CSC managers will ensure:

- All practitioners adhere to the Social Work England standards in their casework by undertaking regular case file audits and that they, as employers, meet these standards set out by the Knowledge & Skills Statements (DfE) for child and family social work. To do this supervision sessions will be used to offer constructive feedback, promote reflective practice, and challenge sub-standard practice or behaviour, alongside praising excellent work.
- Any employee who cannot or will not meet the required Social Work England standards is subject to informal/formal HR procedures, for which managers have access to professional support. Equally, managers will use all available processes to recognise and promote good performance. It is the role of the manager to promptly address poor practice identified through supervision and implement actions to improve practice.

It should also be noted that the Standards for Employers and Supervision Framework recognises the changing employment arrangements that have evolved over the years with some workplaces relying on agency staff and independent social workers and consultants. It requires that employers ensure that their systems, structures, and processes promote equality and do not discriminate. The implementation of Bracknell Forest's induction and supervision processes includes information regarding how these policies and procedures are applied to those workers not directly employed by the Council.

4.6 Performance Analysts

The Performance Analysts provide a range of reports and information to support operational activity, compile a monthly performance management booklet, and report to the Children's Social Care Senior Leadership Team on a quarterly basis, highlighting areas of strengths and areas for attention. This is triangulated with audit data and contributes to the development of the audit programme. It is recognised that performance management information ensures that overall performance is measured against externally reportable performance indicators and locally determined indicators. The analysts maintain a data quality role in terms of reporting and statutory returns on behalf of the Department. Emerging themes from performance data is presented at the Learning from Quality Assurance and Complaints events as well as monthly exception reporting to capture information and improve learning across the council.

4.7 Quality Assurance Service

In order to fully achieve the best outcomes for children and their families through the implementation of this strategy, careful attention must be paid to the boundaries between the

offline quality assurance and performance role and the role of line managers responsible and accountable for supervision and casework within Children's Social Care.

Within Bracknell Council there are a number of specific roles which include a quality assurance function. These roles do not sit within Children's Social Care. This allows the functions to remain independent and in turn provide challenge and support. These additional roles are located within the Commissioning branch of the Directorate in the Quality Assurance Service.

The aim of the Quality Assurance Service is to provide a proactive approach to quality assurance to ensure that the quality of work across the organisation is sustained, or where appropriate, improved upon. The functions that sit within the Quality Assurance Service are detailed below:

4.7.1 Head of Quality Assurance

The Head of Quality Assurance contributes to preparation/response to inspections and maintains oversight of all the relevant functions below, working in partnership with Children's Social Care, the wider Department, and partners to identify and address key improvement issues.

4.7.2 Complaints

This function is provided under Regulation 13 of the Children Act 1989 Representations Procedure 2006 with related guidance, 'Getting the Best Out of Complaints'. https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/273895/getting_the_best_from_complaints.pdf

The methods of promoting positive improvements described in this strategy offer the most effective way of driving up standards and improving performance. However, it must be recognised that from time to time there may be occasions when Bracknell Forest provide a service that is less than excellent. Where this leads to complaints the relevant department within the Borough will use the outcomes from such complaints to drive improvement. It is the role of the Complaints Manager to monitor the complaints system and raise issues requiring immediate attention with the relevant manager and bring themes identified to the Children's Quality Assurance Working Group.

The Complaints Manager will liaise regularly with Team Managers regarding ongoing complaints, and attends the Children's Social Care Senior Leadership Team Meeting on a quarterly basis to feedback emerging themes and discuss actions that need to be undertaken in order for improvement to take place within the improvement cycle.

An annual complaints report is produced, and this is approved by the Executive Director People. The report is presented to the Local Safeguarding Board Quality Assurance sub-group and to the Local Safeguarding Board. Once shared at relevant Boards, it is published and available to the public.

The Complaints Manager provides training for Social Workers on the procedures and supports Learning from Quality Assurance events to support the dissemination of learning across the service.

4.7.3 Local Authority Designated Officer (LADO)

The Local Authority Designated Officer (LADO) provides advice and guidance to managers across the council, employers and other individuals/organisations that have concerns relating to an adult who works with children and young people (including volunteers, agency staff,

foster carers, religious leaders, school governors etc.). The LADO provides regular monthly updates regarding data trends and themes and reports quarterly on progress towards annual report targets. Feedback from the council and partnership is actively encouraged through the use of a service evaluation form completed at the conclusion of the LADO's involvement. This information is used to support future service improvements to the LADO provision and provides information for analysis as part of Section 11 Audits.

4.7.4 Conference and Review Team

The Conference and Review Team provide ongoing scrutiny and monitoring of children's plans as part of statutory Children Looked After Reviews and Child Protection Conferences. Feedback is provided both at formal conference/reviews in line with statutory expectations as well as in line with independent challenge mechanisms. The team members also participate in regular monitoring activity to feedback to operational social work teams and partners surrounding practice issues as they emerge. A quarterly report is circulated across teams in relation to this process.

Pan-Berkshire Dispute Resolution Policy documents the Independent Reviewing Officer's responsibility to address concerns about the care planning for children in line with the Independent Reviewing Officer Handbook (2010). In line with good practice, this policy is also used to support resolution for disputes in respect of child protection case conference professional disputes. In Bracknell Forest this is called the IRO/CPC Escalation Process.

4.7.5 Quality Assurance Officer

The Quality Assurance Officer plays a key role in the effectiveness and impact of the QA Strategy. The Quality Assurance Officer:

- develops and maintains the annual programme of audits,
- liaises with partners on multi agency audits and leads on some themed audits,
- provides a brief monthly and quarterly report to Children's Services Leadership Team and the Assistant Director and receives a written management response from CSC that is appended to the quarterly report.
- attends the Children's Quality Assurance Working Group and maintains the Audit Action Plan developed there,
- contributes to an annual report to DMT,
- Contributes to the Learning from Quality Assurance events held bi-annually.

4.7.6 Child Participation Officer

The Child Participation Officer plays a key role in quality assurance as he/she interfaces with children and young people. The worker in this role facilitates the structures and systems which ensure the views of children and young people who have contact with Children's Social Care are clearly heard in terms of planning and developing policy and practice. One of the key mechanisms for doing this is the Children in Care Council (SILSIP) which ensures that Looked After Children and young people are represented at local, regional and national events, and that their views are clearly represented at individual case level, and in a broader strategic and improvement level.

The Child Participation Officer provides an annual report on participation and supports SILSIP to meet quarterly with Department Management Team and the Chair of Corporate Parenting Advocacy Panel to address issues raised by young people.

5 Panels, Boards and Meetings with a Quality Assurance and Scrutiny Function

5.1 Bracknell Forest Safeguarding Board (BFSB or 'Safeguarding Board')

The Safeguarding Board is a key statutory mechanism for ensuring the effectiveness of safeguarding of all organisations working with children and young people. Working Together to Safeguard Children requires local Safeguarding Boards to monitor the effectiveness of organisations' implementation of their duties under Section 11 of the Children Act 2004. The Safeguarding Board plays a key role in relation to the links between quality assurance in Children Social Care and with partner agencies. The Safeguarding Board Business Manager supports the co-ordination of this activity.

One of the ways in which the Safeguarding Board undertakes its responsibilities is through the Quality Assurance sub-group, which undertakes multi-agency audits, and themed audits where data and information suggests there may be a cause for concern and the findings in turn support ongoing improvement. Internal social care audit findings feed into this sub-group to enable a joint multi-agency approach to learning from audits is included.

The Safeguarding Board will also undertake Practice Reviews and can request Individual Management Reviews where this meets the relevant criteria. The outcomes of these reviews are used to inform continued practice improvement.

The Safeguarding Board is required to produce and publish an annual report which is shared with the Children & Young People Board, the Health & Wellbeing Board, and the Overview & Scrutiny Commission.

5.2 Overview and Scrutiny Commission

The Council's Overview and Scrutiny Commission is one of the mechanisms by which the work of the department is governed. It is a legal requirement, designed to ensure that decision making in local government is efficient, transparent, and accountable, and that the best decisions are taken. The key roles of overview and scrutiny are:

- To hold the Council's Executive to account for its decisions and the Council's performance.
- To review policies adopted by the Council.
- To contribute to the development of new policies; and to review the activities of the National Health Service and other organisations providing services in the Council's area.

5.3 Corporate Parenting Advocacy Panel

The responsibility for improving outcomes and actively promoting the life chances of children looked after is shared by the local authority and partner agencies. The Corporate Parenting Advocacy Panel of elected members meets regularly and receives reports on progress and participates in discussion about proposals for improvement and development.

5.4 Department Management Team Performance Board

The Department Management Team Performance Board will ensure senior management oversight of performance across the whole department. This will include monitoring of key inspection activity, and performance issues across children's services and the impact of services on outcomes for children, young people and families. In carrying out this task Department Management Team takes account of all monitoring and auditing activity being carried out within the council.

5.5 Children's Quality Assurance Working Group (CQAWG)

The Children's Quality Assurance Working Group ensures senior management oversight of performance in Children's Social Care. This will include monitoring of performance and the impact of services on outcomes for children, young people, and families. CQAWG takes account of all monitoring and auditing activity being carried out in Children's Social Care, develops a prioritised action plan and reports to Departmental Management Team (DMT).

5.6 Learning from Quality Assurance Events

Learning from Quality Assurance Events take place bi-annually for frontline practitioners in Children's Social Care and Early Help and incorporate key learning from audit activity and complaints feedback. The aim of the event is to celebrate success, deliver learning from quality assurance activity and provide information to drive improvement.

6 Quality Assurance Processes

6.1 Monitoring

A range of information is needed to inform the Council and its partners about the quality and effectiveness of the services it provides to children and their families. Quality assurance is everyone's responsibility and as such it is not solely the responsibility of those individuals who have to provide quarterly or annual reports but is an integral part of what practitioners do on a day to day basis. The following quality assurance monitoring processes are in place.

6.1.1 Regular Monitoring and Review of Casework

Front line managers are expected to monitor service delivery in accordance with the departmental performance management process.

- The provision of induction for all newly appointed staff and completion of probationary reports.
- The provision of regular, timely and quality supervision of staff and annual appraisals.
- The approval by front line managers of all assessment and care plans.
- The approval by front line managers of all reports to Looked after Children reviews and Child Protection conferences before submission to the Conference and Reviewing Service.

Monitoring and review of child protection and children looked after casework is provided by the Conference and Reviewing Service in accordance with statutory requirements as set out in Working Together to Safeguard Children and the Care Planning, Placement and Case Review (England) Regulations 2010. The pan-Berkshire Dispute Resolution process is followed where practice standards are compromised, and prompt action is required.

6.1.2 Fostering and Adoption Report Monitoring

Monitoring forms are completed by both the Fostering and Adoption panels on the quality of social work assessments and reports. This information is used to highlight any possible practice issues, positive and/or negative so that improvements in practice are made. The feedback forms are sent to the Assistant Director for Children's Social Care for information; discussed in supervision with a copy being retained on the supervision file.

6.1.3 Monitoring Quality of Conference and Review Team and LADO work

The Head of Quality Assurance Service and the Conference and Review Team Manager will carry out quality assurance activity within the team to ensure performance standards are consistently understood and applied by the team when carrying out its statutory functions and ensuring best practices across Children Social Care. Performance reports will be available from these and will contribute to quarterly and annual reporting.

6.1.4 Workforce Monitoring

The ongoing monitoring of staff sickness, vacancies and workloads provide an indicator of the wellbeing of the workforce and areas that need to be addressed to improve quality or performance. Quarterly Service Reports are produced which summarise the relevant information and this is reported to the Department Management Team, and then reported to the Council's Executive through the Quarterly Service Reporting process. This information is considered within the overall approach to the workforce strategy.

6.1.5 Financial Monitoring

There is ongoing financial monitoring undertaken by the Placements Officer who ensures that placements are made that achieve good outcomes for looked after children and young people and provide value for money. All Heads of Service have regular monthly budget monitoring meetings, and there is a finance report included within the Quarterly Service Report which is reported to the Department Management Team and the Council's Executive.

6.1.6 Regulation 44 Monitoring

Regulation 44 Visits take place to ensure that all children within the placement are being appropriately cared for and their individual needs are being met with particular reference to needs arising from their ethnicity or heritage or known disability. Visits to Larchwood Residential Unit owned by Bracknell Forest Council are undertaken by staff independent from Children's Social Care, based in the Quality Assurance Service and occasionally accompanied by a lay person, such as a Corporate Parenting Advocacy Panel Member, to assess the quality of care to children and young people accessing the Short Term Care unit. These are carried out monthly and a summary report is included in the Quality Assurance quarterly report shared with Children's Services Management Team. Recurring practice themes both positive and negative are identified through this process, actions agreed, and an overview report presented.

6.2 Surveys and Reviews

6.2.1 Staff Surveys and Feedback

The Council undertakes a full staff survey on a bi-annual basis which allows staff to express their views and address worries, and concerns. These surveys inform the recruitment and retention strategy, staff induction programme, supervision and appraisal policies and procedures. The results of the survey are broken down by Department and there is an action plan developed (led by the OD Service Head) which addresses any issues identified. This is monitored by the Department Management Team and reported to the Council's Corporate Management Team.

6.2.2 Specific Parental Surveys and Consultations

Where intervention in family life is undertaken, the views of parents and children about the quality of the intervention are sought. Bracknell Forest People Directorate is committed to improving services in response to issues raised.

Feedback from children and families is sought by CSC and a report on the findings is made available to the DMT and CQAWG to inform practice improvement.

The Youth Offending Service request feedback from all young people at the end of their intervention. The information collated is analysed and a report produced. Feedback is also requested from parents who have worked with the Youth Offending parenting service.

6.2.3 Children's Annual Participation Survey

The Children's Participation Officer coordinates an annual survey (Big Ballot) to evaluate how the Council is performing against its pledge to young people in care. Additional surveys to gather views on the department's performance are undertaken with young people throughout the year. These are often based on specific themes identified via the regular case work audits. A Participation newsletter (SILSIP) and regular child-centred minutes/actions document is compiled by the department in response to themes identified. This is fed back to children and young people and informs service delivery.

6.2.4 Peer Review/Peer Challenge

The Executive Director People sits on the South East Regional Children's Improvement Board and is a strong advocate of Peer Review and Peer Challenge. The Department participates fully in this programme and as well as being subject to Peer Review, a number of staff have also participated in Peer Reviews of other authorities.

7 Audit Programme

The audit cycle forms a core element of the Quality Assurance Strategy for children in need, children subject to protection plans and looked after children.

The purpose of audit is to examine practice retrospectively against service standards, policy and regulation and take corrective action where required.

Audits will be undertaken in a variety of ways, including observations, flash audit activity, management audits, multi-agency audits in conjunction with the Safeguarding Board and themed audits as part of the live audit programme across Children's Social Care and Early Help provision.

- There is an ongoing rolling programme of live audits which reflect the core activity of Children's Social Care. These include themed audits in addition to flash audit activity that arise from findings identified in the core audits, key lines of enquiry identified from across Quality Assurance activity or where appropriate the findings and recommendations of the Quality Assurance subgroup, the Safeguarding Board or other quality assurance activity.
- The Live Quality Assurance Framework & Toolkit (Appendix 2) outlines the audit process, including the escalation process to ensure prompt follow up of cases requiring urgent attention and learning is disseminated in a timely way. It includes the audit tool used and gives guidance to case holders and auditors regarding grading, Bracknell Forest Practice Standards and "what good looks like". The Terms of Reference for this audit cycle sets out expectations of the audit validation process which is reviewed annually.
- The Quality Assurance Officer produces an audit plan for the year agreed with managers across Children's Social Care and will oversee the programme during the year.
- Files will be audited across teams. On completion audits are returned to the Quality Assurance Officer for quantitative data analysis and qualitative analysis. The Quality Assurance Officer will monitor any cases graded as 'Requires Improvement' or 'Inadequate'. The Quality Assurance service and Assistant Director CSC will ensure timely responses and learning is captured.
- A monthly audit validation panel takes place which scrutinises the quality of audits submitted and assesses whether the content justifies the judgement grading through dip-sampling. This panel is chaired by Head of Quality Assurance and is attended by CSC Heads of Service, the Principal Social Worker, and the Quality Assurance Officer. Messages from this panel are used to inform continuous improvement and learning from the audits to support practice improvement.
- A brief monthly summary report and a quarterly report will be written, which analyses the data and identifies trends and emerging themes. The report will include recommendations for learning needs, training proposals and any other issues that impact on service quality, policies, and practice. This report will be shared with the Assistant Director, CSC and will be presented to the CQAWG and DMT Performance Board.
- A summary of key recommendations will be circulated to all Children's Social care staff.

8 Conclusion

It should be highlighted that efforts to safeguard and protect children is complex and multi-faceted and this requires a joined up, whole system approach. The varying needs of the children involved are such that the system needs to ensure that 'stones are constantly overturned' and that areas of relative deficits are promptly identified while apparent strengths are scrutinised to ensure the strengths are real and embedded and that areas of deficit are effectively addressed. With an emphasis on quality that counts, this strategy sets out how that examination and enquiry will take place in Bracknell Forest to ensure a cycle of continuous improvement, challenge and learning is pro-actively promoted for the benefit of children and their wider families who come into contact with services at Bracknell Forest, in turn safeguarding and promoting better outcomes.

9 Appendix 1 - Social Work England Professional Standards

https://www.socialworkengland.org.uk/media/1640/1227_socialworkengland_standards_prof_standards_final-aw.pdf

People Directorate

Live Quality Assurance Audit Framework & Toolkit

January 2020

Contents

Bracknell Forest Quality Assurance – Live Case File Audit Guidance

Bracknell Forest Quality Assurance – Live Case File Audit Flow Chart

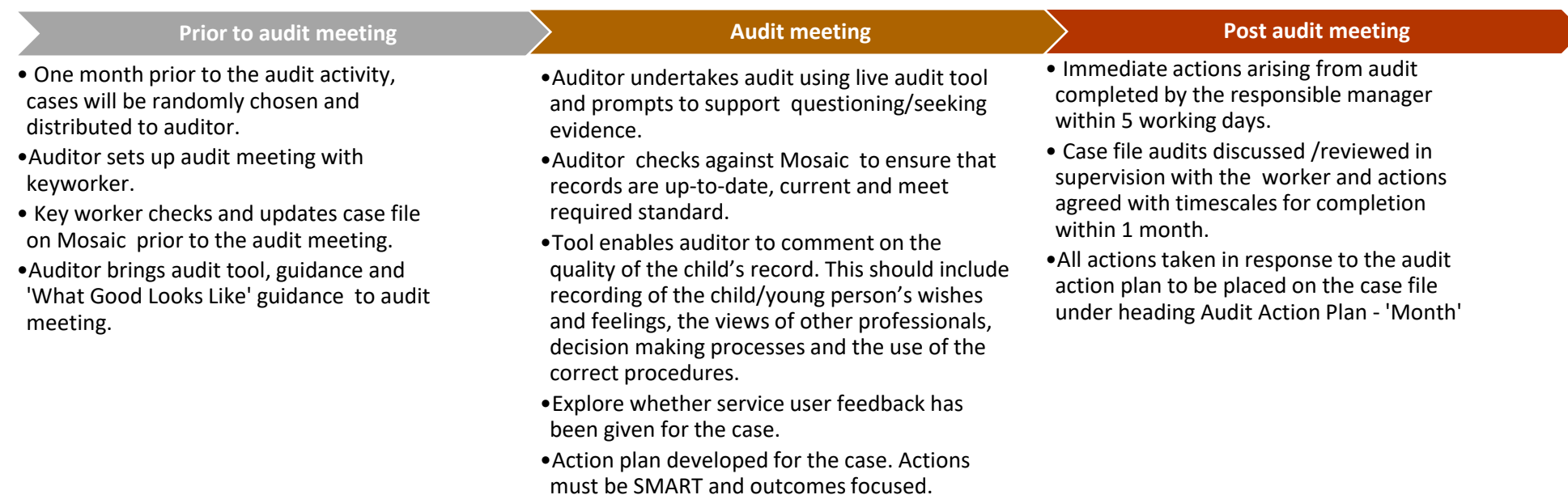
Bracknell Forest 'What Good Looks Like' Guide

Bracknell Forest Quality Assurance – Live Case File Audit Guidance

This document should be read in conjunction with Bracknell Forest Quality Assurance Strategy.

The primary challenge of quality assurance is to improve the quality of practice and outcomes for children. Therefore, quality assurance must be strongly linked into effective mechanisms for achieving change and be able to demonstrate measurable improvements for children and families. Emphasis should be given to the quality of practice, involvement of practitioners in the audit process, the effectiveness of multi-agency working, and the child's journey.

Individual Audit Process



SPECIFIC
Are they clearly identifiable or are they vague?

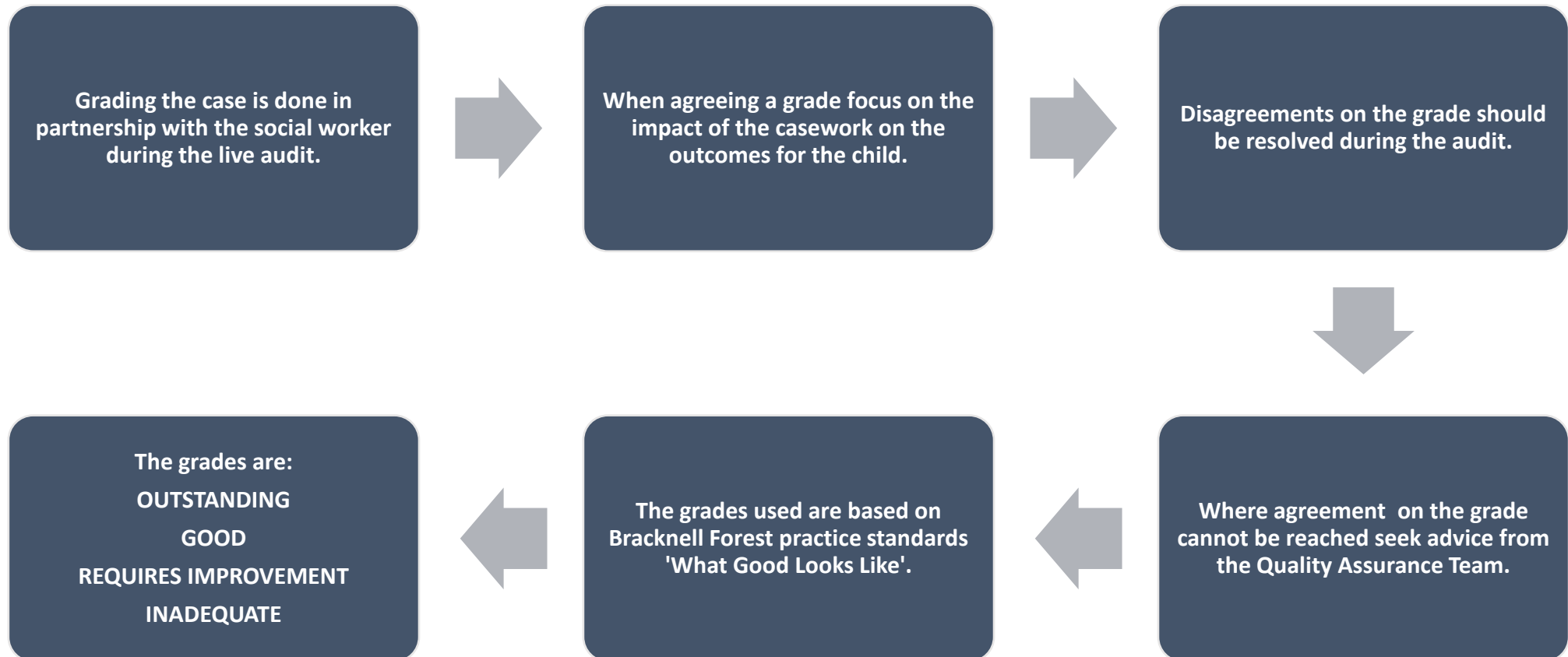
MEASURABLE
What are your success criteria?
If your goals are not measurable, how will you know when you've achieved them?

ACHIEVABLE
Do you have the necessary resources to achieve them?

REALISTIC
Are they "do-able"?
Are they achievable given the limited time and resources you have?

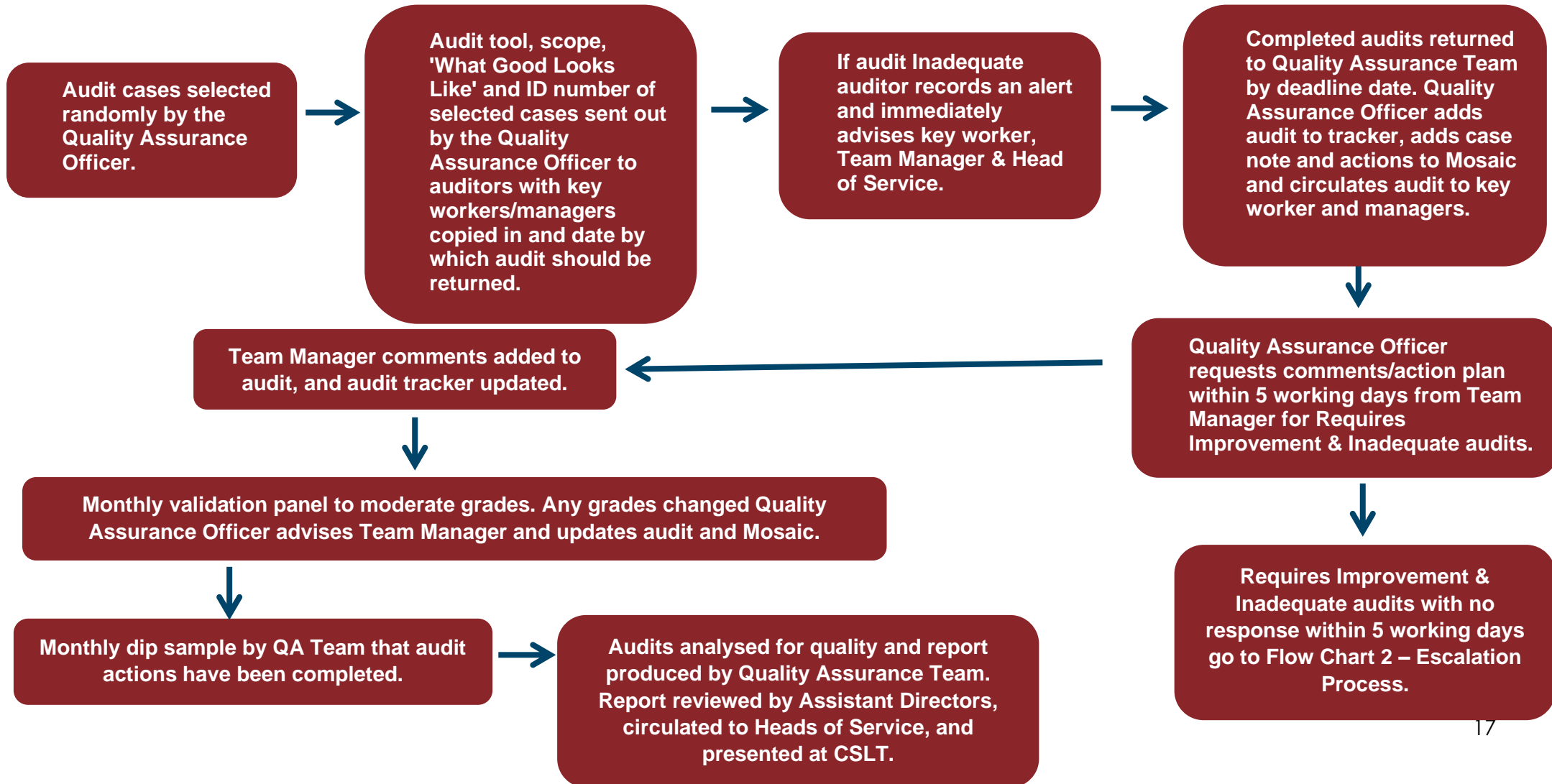
TIMESCALES
Have you set a deadline? Can you say what needs to be done, by whom, and by what time? Actions timescales should not be 'ASAP'

Grading

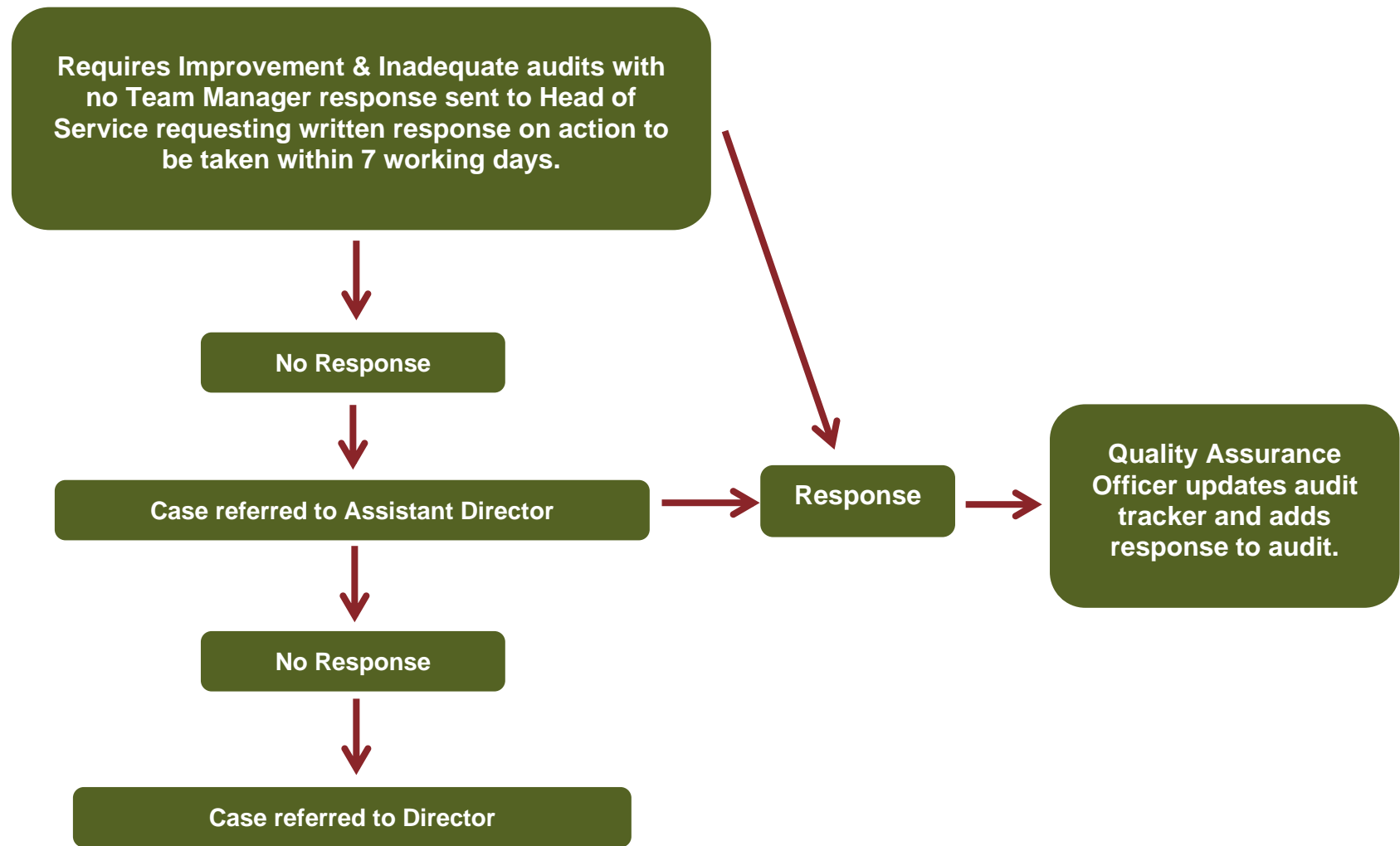


Bracknell Forest Quality Assurance – Live Case File Audit Flow Chart

Flow Chart 1 – Audit Process



Flow Chart 2 – Escalation Process



Bracknell Forest 'What Good Likes' Guide

This guidance should be used to ensure that auditors are recording evidence consistently during audits, and there is a shared understanding of '**what good looks like**'. This guidance brings together the key relevant criteria from Ofsted's evaluation schedule. Auditors should record evidence including highlighting areas of good practice. In addition, auditors should look for use of signs of safety within the FSM practice model throughout the work.

We believe that in order that a child / young person's lived experiences to be judged **good or **outstanding**, the following practice indicators should be evidenced:**

- **Up to date and reflective supervision records, that focus on the past, present and future with evidence of actions being taken forward in a timely way**
- **Up to date and good quality chronology**
- **An up to date and SMART plan, including safety plans where relevant, that reflects the needs of the child / young person**
- **Children are being seen regularly, within required timescales, and the voice of the child is evident**
- **Visits to children, young people and their families are focused and meaningful**
- **Evidence of a positive working relationship between social workers, parents, families, children, and young people**
- **Evidence of goals for permanency for the child.**

| Outstanding | Good | Requires Improvement | Inadequate |
|--------------------|-------------|-----------------------------|-------------------|
| □ | □ | □ | □ |

Standard 1 – Case Description and Child’s History

| Audited element | What good looks like |
|--|---|
| <p style="text-align: center;">Standard 1 – Case Description and Child’s History</p> <p><i>Case recording will be up to date and will reflect the purpose of interventions and contacts. It will include an up to date chronology of significant events and an</i></p> | <p>Information contained in records to be relevant and accurate and sufficient to meet legislative responsibilities and the requirements of the Recording Policy.</p> <p>Records must distinguish clearly between facts, opinions, assessments, judgements, and decisions. Records must also distinguish between first-hand information and information obtained from third parties.</p> <p>Records must be free from jargon and acronyms. Records must not contain any expressions that might give offence to any individual or group of people based on race, culture, religion, age, disability, or sexual orientation.</p> <p>Recording is reflective of work undertaken and focused on the experience and progress of children and young people.</p> <p>Reflective case summaries should be recorded whenever a case moves from one team to another or when there is any other change of worker.</p> <p>Genograms should show in diagram form the important relationships between children, their parents (including absent parents), siblings and significant family members.</p> |

| Audited element | What good looks like |
|---|---|
| <p><i>accurate genogram.</i></p> | <p>Chronologies should be a sequential listing of the significant events in the child’s life. It should build a picture of the child’s journey and the quality of care available to them. It should highlight incidents of concern within the wider family.</p> <p>Chronologies should also include significant family changes, such as changes in care arrangements, house moves, changes in school and the birth of siblings.</p> |

Standard 2 - Assessment & Analysis

| Audited Element | What good looks like |
|--|---|
| <p>Standard 2 – Assessment & Analysis</p> | <p>All children and young people will have an assessment that reflects their current circumstances and that has been completed within timescales and within the last 12 months.</p> <p>The assessment will reflect the Signs of Safety approach, including scaling which is directly related to danger statements and safety plans.</p> <p>A good quality assessment:</p> <ul style="list-style-type: none"> • Is timely, dynamic and changes in the light of emerging issues and risks. • conveys a clear sense of the child’s lived experience and addresses the individual needs of the child including factors arising from the child’s ethnicity, culture, religion, language, disability, etc. • incorporates the child’s voice, their views, feelings and wishes and conveys the views and wishes of the child’s parent/carer. |

| Audited Element | What good looks like |
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| <p><i>Assessments are timely, comprehensive, analytical and of high quality. They lead to appropriately focused help.</i></p> | <ul style="list-style-type: none"> • is based on an accurate and up-to-date chronology of significant events in the child’s life and a genogram of all the connected and significant people in the child’s life. • is informed by historical information, i.e. it builds on previous assessments (such as a CAF or a previous social work assessment) and considers previous referrals/contacts/early help. • includes the perspective and opinion of other professionals who are involved with the family and where appropriate the views of specialists in the features or factors affecting the family. • is informed by research drawn from validated sources relating to the features or factors affecting the family and to those impacting on the child’s welfare and development. • provides a compelling analysis of the information gathered, including observations, which spells out what is working well (strengths and safety factors), what we are worried about (harm and dangers) and complicating factors. • gives a rationale for decision making that is evidenced and appropriate to the referral information and history • is recorded in a way that can be understood by the parent/carer and, where appropriate, the child. • leads to an appropriately focussed plan and direct work to address identified needs. |

Standard 3 – Child’s Plan

| Audited Element | What good looks like |
|--|---|
| <p style="text-align: center;">Standard 3 – Child’s Plan</p> <p><i>All children/young people will have a plan which addresses what needs to change to achieve the desired outcomes and specifically their plan for permanency.</i></p> | <p>A good quality plan</p> <ul style="list-style-type: none"> • is based on the information and analysis in the assessment and shows evidence of good understanding of all the child’s needs and relevant areas of harm and danger. • is explicit about the goals for permanency for the child. • clearly identifies goals and provides the next steps to achieving the desired outcomes. • is focused on measurable observable behaviours that clearly inform the parents what is expected of them for CSC to be satisfied that the children are safe. • sets out the help is that is to be offered and if services are required their connection to improved safety/outcomes is articulated. • is implemented in a timely way, for example it will detail actions identified at an early stage of the assessment, even though the assessment is on-going. • is regularly reviewed within prescribed timescales and amended as appropriate (Danger statements and safety goals, what’s working well and worries, and appropriate scaling are updated at reviews and reflect progress of plans.) demonstrating robust scrutiny and challenge to prevent drift. • ensures permanent arrangements for children and young people are effectively and regularly reviewed by independent reviewing officers (IRO’s) who provide independent oversight and scrutiny. • is explicit and uses straightforward language. |

| Audited Element | What good looks like |
|-----------------|--|
| | <ul style="list-style-type: none"> • includes contingency planning and alternative actions should the circumstances for children and young people not change and the risk of harm or actual harm remains or intensifies, or newly identified risks become evident. • gives evidence of children and young people being involved in the development of the plan. • gives evidence of the parents/carers (and other adults who know them) being involved in the development of the plan. • gives evidence of the professionals being involved in the development of the plan. • Where the plan for a child or young person is to return home, there is evidence of purposeful work to help the family to change so it is safe for the child to return. • Further episodes of being looked after are avoided unless they are provided as a part of a plan of support. |

Standard 4 - Review and Statutory Duties

| Audited Element | What good looks like |
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| <p style="text-align: center;">Standard 4 – Review and Statutory Duties</p> <p style="text-align: center;"><i>All plans will be regularly reviewed in line with Statutory Duties and Guidance.</i></p> | <ul style="list-style-type: none"> • All looked after children have an allocated Independent Reviewing Officer and LAC reviews are held within statutory timescales. • A LAC review is always held - <ul style="list-style-type: none"> if it is proposed that a child should leave care before the age of 18. if it is proposed that a child should move to “semi-independent” or “independent” living. if a child in care has been in custody. wherever an unplanned move would affect a child’s education. if a move is planned whilst a child is still in Key Stage 4. if it is proposed to move a child from a settled placement. • The IRO will speak to the child/young person before the review; speak to the child’s social worker at least 15 days before; read all relevant reports and background information; and, send out forms to the child, their parents/carers and other people involved for each to complete with their views. These forms should be sent out two weeks before the review. • Care plans are regularly and independently reviewed to ensure they comprehensively address the needs and experiences of children and young people, including <ul style="list-style-type: none"> ▪ changes in circumstances since the last review. ▪ whether decisions since the last review have been carried out, and if not why. ▪ whether social work visits have been within timescales and the child feels the social worker has listened to them ▪ whether decisions have been taken and acted upon quickly enough. ▪ whether the child’s legal status is right; and whether it allows for permanency ▪ whether contact with friends and family is what the child wants and needs ▪ whether their home continues to meet their needs |

| Audited Element | What good looks like |
|-----------------|--|
| | <ul style="list-style-type: none"> ▪ that any moves are infrequent and in accordance with the care plan ▪ that their physical health needs and mental health needs are met ▪ that appropriate therapeutic help is available including services for children and young people with learning or physically disabilities. ▪ that school attendance and educational progress is good, and any actions needed including specialist educational support ▪ that issues of identity are addressed ▪ any other advice, support and assistance might be needed ▪ that timely preparation for leaving care is undertaken ▪ That they have access to an advocate and independent visitor. ▪ That they understand their rights and legal entitlements. ▪ That they understand how to complain ▪ Where the plan is for adoption, progress on finding adoptive parents <ul style="list-style-type: none"> • The looked after child is central to the review and their voice is promoted and listened to. • Reviews also involve the child or young person’s parents, family, and friends’ carers (connected persons), foster carers, residential staff and other adults who know them, as appropriate. • There is evidence that IROs bring rigour and challenge to care planning and monitor the performance of the local authority as a corporate parent, escalating issues as appropriate. • IROs engage with children’s guardians and there is evidence that this is focused on what children need and how the plans for them can be properly progressed. • Child protection plans and decisions are reviewed within statutory timescales set out in Working Together to Safeguard Children 2015 (i.e. first review within 3 months of initial conference further review within 6 months of last review conference.) |

| Audited Element | What good looks like |
|------------------------|---|
| | <ul style="list-style-type: none"> • The Signs of Safety approach is used in CP conference reviews to ensure a balanced approach to risk and protective factors, that the child’s voice is heard, and that parents’ views contribute to the discussion. • Children and young people are listened to; practice is focused on their needs and experiences and influenced by their wishes and feelings. • Where they cannot represent their view themselves, the child has access to an independent advocate for all reviews. • Authoritative action is taken where change is not secured and the risk to children intensifies or remains. • Information-sharing between agencies and professionals is timely, specific, and effective. |

Standard 5 – Partnership and Participation

| Audited Element | What good looks like |
|--|---|
| <p style="text-align: center;">Standard 5 – Partnership and Participation</p> | <p>Professionals</p> <p>Assessments incorporate information and views from other professionals, and these are clearly recorded and considered as appropriate.</p> <p>There is evidence of good multi-agency working and engagement by all relevant professionals (including adult services), working collectively towards improving outcomes for children and young people.</p> <p>Opportunities for joint visits are in evidence.</p> |

| Audited Element | What good looks like |
|---|---|
| <p><i>Work is carried out in partnership with children and their families and networks. They will receive clear information about the processes of assessment, planning, review, and decision making and how to participate. They will receive appropriate support to participate.</i></p> | <p>Voice of the child/young person</p> <p>Visits to children and young people are within expected timescales dependent on the status of the child's situation.</p> <p>Children and young people are seen alone (where appropriate), spoken to and views recorded.</p> <p>The social worker has clearly built up a positive relationship with the child/young person.</p> <p>Children and young people's views and wishes are listened to and clearly reflected in assessment, planning and intervention, and considered as far as possible.</p> <p>Children and parents/carers have an equal voice.</p> <p>Children and young people are engaged in all actions and decisions about them and understand the intentions of help they receive.</p> <p>Practice is informed by feedback from children and their families about the effectiveness of help.</p> <p>Where the child/young person cannot represent their view themselves, there is appropriate advocacy.</p> <p>Children and young people are protected or helped to keep themselves safe from bullying, homophobic behaviour, and other forms of discrimination.</p> <p>Where children and young people are unable to give their views or don't have a full understanding (due to age/disability), observation and recording of behaviour is evident.</p> <p>Direct work with children and young people is innovative, clearly evidenced and is delivering measurably improved outcomes and reduced risk.</p> <p>Children and young people are helped to develop secure primary attachments with the adults caring for them. Social workers help them to understand their lives and their identities through life history work that is effective and provided when they need it. Therapeutic materials are made available to the child and their family when and wherever the child is placed.</p> |

| Audited Element | What good looks like |
|-----------------|---|
| | <p>Direct work with children and young people uses a Signs of Safety approach. Three Houses (or equivalent) tool is used and captures the exact words or images of children regarding what worries them, what is going well in their lives and what they want to see change.</p> <p>Parents/carers/other important adults</p> <p>The social worker has built up a good working relationship with the parents/carers and has engaged with relevant family members, including any males or absent parent.</p> <p>The parents/carers are engaged in all actions and decisions and understand the intention of the help they will receive.</p> <p>The views and wishes of parents/carers are clearly recorded and considered as far as possible.</p> <p>Direct work with parents/carers is innovative, clearly evidenced and is delivering measurably improved outcomes.</p> <p>Children's information is discussed and shared with parents/carers to build engagement and focus on safety planning.</p> <p>Where parents/carers cannot represent their view themselves, there is appropriate advocacy.</p> <p>There is involvement of extended family and important adults in providing safety and support e.g. family group conference, family network meetings.</p> |

Standard 6 – Impact, Outcomes & Permanency

| Audited Element | What good looks like |
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| <p>Standard 6 – Impact Outcomes & Permanency</p> <p><i>Work is carried out, in partnership with children and their families and networks, to effect change and improve outcomes for children.</i></p> | <p>Recording, assessments and care plans focus on what needs to change for the child/young person to ensure they are safe, secure, reaching their potential and experiencing permanency.</p> <p>Supervision / management oversight focuses on the outcomes for the child/young person.</p> <p>Children, young people and families are offered help when needs and /or concerns are first identified, and as a consequence of the early help offered, children’s circumstances improve and, in some cases, the need for targeted services is lessened or avoided.</p> <p>There are clear next steps planned to meet goals (if services are required, their connection to achieving the desired outcome is articulated).</p> <p>There is evidence that the implementation of the plan has clearly led to significant improvement in the outcomes for the child/young person and this is identified, reviewed, and recorded.</p> <p>Authoritative action is taken where change is not secured and the risk to children and young people intensifies or remains.</p> <p>There is evidence of good multi-agency working and engagement by all relevant professionals (including adult services), working collectively towards improving outcomes for children and young people.</p> |

Standard 7 – Supervision & Management Oversight

| Audited Element | What good looks like |
|--|---|
| <p style="text-align: center;">Standard 7 – Supervision & Management Oversight</p> <p style="text-align: center;"><i>Management oversight and supervision on cases is effective and timely with clearly recorded rationale for decisions being made.</i></p> | <p>Evidence of effective and timely management oversight and direction</p> <p>Supervision / management oversight is within appropriate timescales.</p> <p>Supervision / management oversight is regularly evident and is in accordance with the supervision policy.</p> <p>Supervision / management oversight is reflective and analytical, clearly evidencing required actions, contingencies and outstanding work, addressing timescales effectively.</p> <p>Quality of decision making</p> <p>Decisions to look after children and young people are timely and made only when it is in their best interests. These decisions are based on clear, effective, comprehensive, and risk-based assessments involving other professionals working with the family where appropriate.</p> <p>Reference to danger statements and safety goals is articulated in decision making.</p> <p>There is evidence of the effective use of the Public Law Outline, including letters before proceedings, family group conferences and parallel planning. Care is used only if it is assessed to be in the child’s best interests.</p> <p>Decisions are clearly recorded and made at the right managerial level.</p> <p>Plans and decisions are reviewed, and alternative action taken where the circumstances for children and young people do not change and the risk of harm or actual harm remains or intensifies.</p> |

Outstanding, Requires Improvement & Inadequate Grade Descriptors

Outstanding

'The experiences and progress of children looked after and achieving permanence' and those who need help and protection' is likely to be judged outstanding if, in addition to meeting the requirements of a 'good' judgement, there is evidence that professional practice exceeds the standard of 'good' and results in sustained improvement to the lives of children, young people and their families. Research-informed practice, some of which will be innovative, continues to develop from a strong and confident base, making an exceptional difference to the lives and experiences of children and young people.

Requires Improvement

The experiences and progress of children and young people looked after and achieving permanence' and those who need help and protection' requires improvement when there are no widespread or serious failures or unnecessary delays that result in the welfare of looked after children not being safeguarded and promoted or that create or leave children being harmed or at risk of harm. However, the authority is not yet delivering good help and care for looked after children and young people and families.

Inadequate

'The experiences and progress of children and young people looked after and achieving permanence' and those who need help and protection' is likely to be inadequate if there are widespread or serious failures, including unnecessary delay in identifying permanent solutions for them and which result in their welfare not being safeguarded and promoted or serious failures which leave children being harmed or at risk of harm.