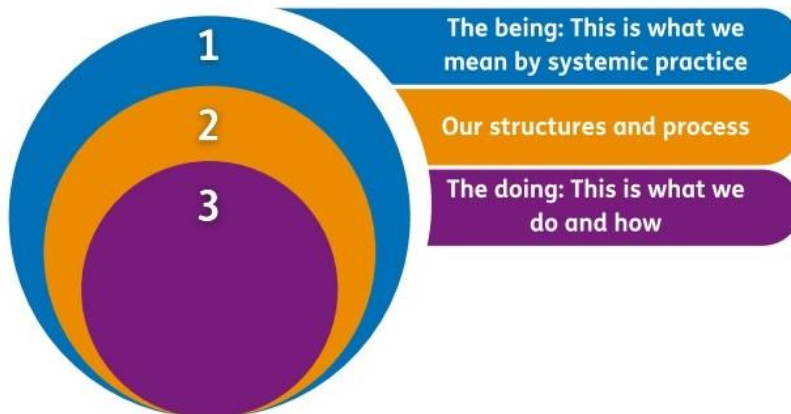
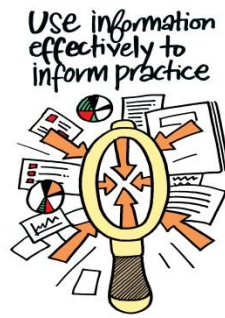


# Children's Services Quality Assurance Framework

2022-2024  
(Updated May 2023)



Supporting families in Havering



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## 1. Introduction

Havering Children's Services vision is to enable all children and families in Havering to lead happy, healthy lives, where all children get a good start in life and live in a borough where families and communities look after themselves and each other. To achieve this we have set the following priorities for 2022.

- **Recruitment, retention and workforce wellbeing**
- **Deliver our pledge: put children at the centre of all that we do; put their voices at the heart of our work**
- **Embedding systemic practice as an overarching approach**
- **Raising aspiration for children, families and young adults**
- **Respond to and challenge racism, inequality and discrimination**

### Guiding principles and systemic practice

Havering's model of practice is central to our quality assurance framework. Embedding systemic practice and its principles will enable us to understand the difference we make for children and their families. It will also increase our understanding of what systemic practice means to the workforce.

Through our use of systemic practice within quality assurance we strive to increase collaboration with our workforce and provide clear mechanisms for providing feedback. Increasing staff participation and collaboration is central to creating and embedding a culture of learning.

The principles and purpose of this quality assurance framework are aligned to our pledge to put children at the centre of all we do and our aim that:

***“Improved outcomes for Children is at the heart of all we do”***

We seek to meet our aim through the following principles:

- Ensuring children, young people and their families understand what we do and why we are involved, by having a child-centred approach;
- Ensuring feedback from children and their families is always sought, collected and analysed to inform our practice;
- Ensuring children, young people's and their families views and experiences help us to improve and reimagine our services as required;
- Ensuring we use information and intelligence to inform any service delivery and redesign;
- Establishing a culture where learning is valued and supports us to improve services and outcomes for children;
- Ensuring feedback is expected and welcomed across the organisation, using both high challenge and high support;
- Creating reflective opportunities for practitioners to learn from their peers and share learning;
- Ensuring everyone living in or working for Havering are partners in change;
- Ensuring change occurs one conversation at a time.

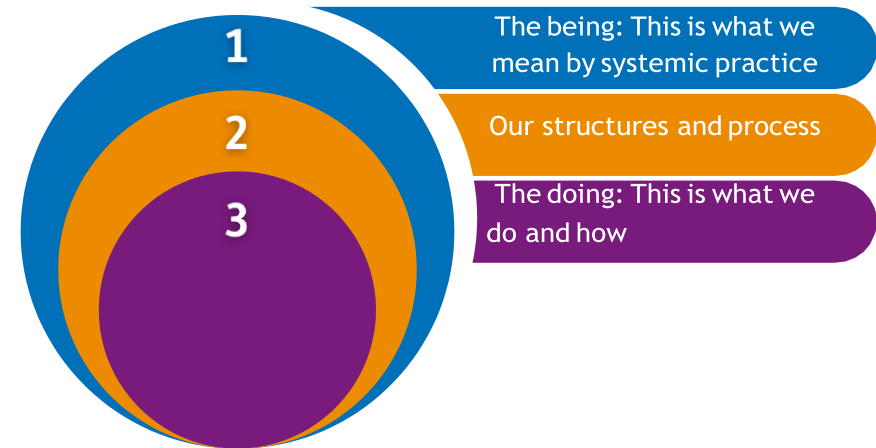
# Our Model of Practice

## The being: This is what we mean by systemic practice 1

- Strengths-based and relational
- Collaborative
- Curious with positive intent
- A systems approach
- Reflexive
- Interested in language and how it is used
- Attentive to context
- Systemic Practice as an overarching approach

## The doing: This is what we do and how 3

- Purposeful, planned and focused
- Child focused in all that we do
- Permission seeking
- Managing risk with confidence
- Considering social GRACES and issues of power
- Questions as interventions
- Hypothesising
- Systemic analysis
- Genograms as conversational tools
- Noticing and exploring patterns in relationships and over time
- Strengths-based relational statements and reframing
- Working with narratives and stories



## Our structures and process 2

- Training offer and practice development pathways
- Systemic Champions and Systemic Family Therapists embedded across the organisation
- Systemic (group) supervision and case consultations
- Reflective conversation and groups
- Co-working and joint learning opportunities
- Facilitated (network) meetings attended by family members and professionals
- Service user-led meetings and 'New Style' CP Conference Model
- Appreciative inquiries (e.g. peer auditing and audit moderation)
- Feedback loops via e.g. service user platforms and evaluation processes
- Multi-agency working offering multi-disciplinary responses

## 2. Key priorities for 2022-2024 Havering Quality Assurance Framework

### • **Disproportionality (Respond to and challenge racism, inequality and discrimination)**

(Hill, N. 2006) *defines* disproportionality as 'differences in the percentage of children of a certain racial or ethnic group in the country as compared to the percentage of the children of the same group in the child welfare system'.

Using insights from The Disproportionality Calculator, we will identify disproportionality and disparities in our work within our community. We will ensure that all audit activity considers these disparities and understand the patterns of over and under representations of the children who live in Havering. We will use this knowledge, to ensure culturally competent practices are promoted and ensure our policies, procedures and thresholds are fit for purpose.

### • **Voice of the child (Delivering our pledge to put Children at the centre of all that we do: put their voices at the heart of our work)**

This framework seeks to ensure that the voices of children are heard through active consultation and feedback. This framework will identify where there are opportunities to acquire feedback from children and how we will listen to that feedback to keep children at the heart of our work. We capture the voice of children and young people through the Mind of My Own app and through the co-production of Care Leavers Pathway Plans. We will use findings to improve our case recording system to ensure the views, wishes and feelings of children is more visible in case recording and within our assessments and plans and informs our practice.

We will continue to use the feedback form templates for families that we use as part of monthly case audits and practice week audits.

### • **Staff Training and raising aspirations (Recruitment, retention and workforce wellbeing and Raising Aspirations for Children, families and Young People)**

This framework seeks to ensure we have a well-supported, confident workforce that meets the needs and raises aspirations of Children, young people and their families. To do this we will ensure frontline staff are supported by having online procedures provided by Tri-x, with updated guidance on regulations through policies and practice standards. We will ensure Children's Services practitioners have access to a learning and developments programme delivered through the Social Care Academy. We will ensure practice observation take place across all tiers, from senior leaders, HOS, SM's, Team mangers and frontline staff. We will utilise learning from serious case reviews, rapid reviews, learning reviews to inform practice. We will use research to inform our interventions and assessments. We will utilise performance information to prioritise areas for improvement and celebrate areas of good practice. We will reflect on learning within supervisions and PDR's and collate to inform our training offer.

### • **Systemic practice (Embedding Systemic practice as an overarching approach)**

As stated Havering's model of practice is central to our quality assurance framework. Embedding systemic practice and its principles is a key priority for the service. We will continue to offer training and support in our systemic model and embed group supervisions and relational practice observations.

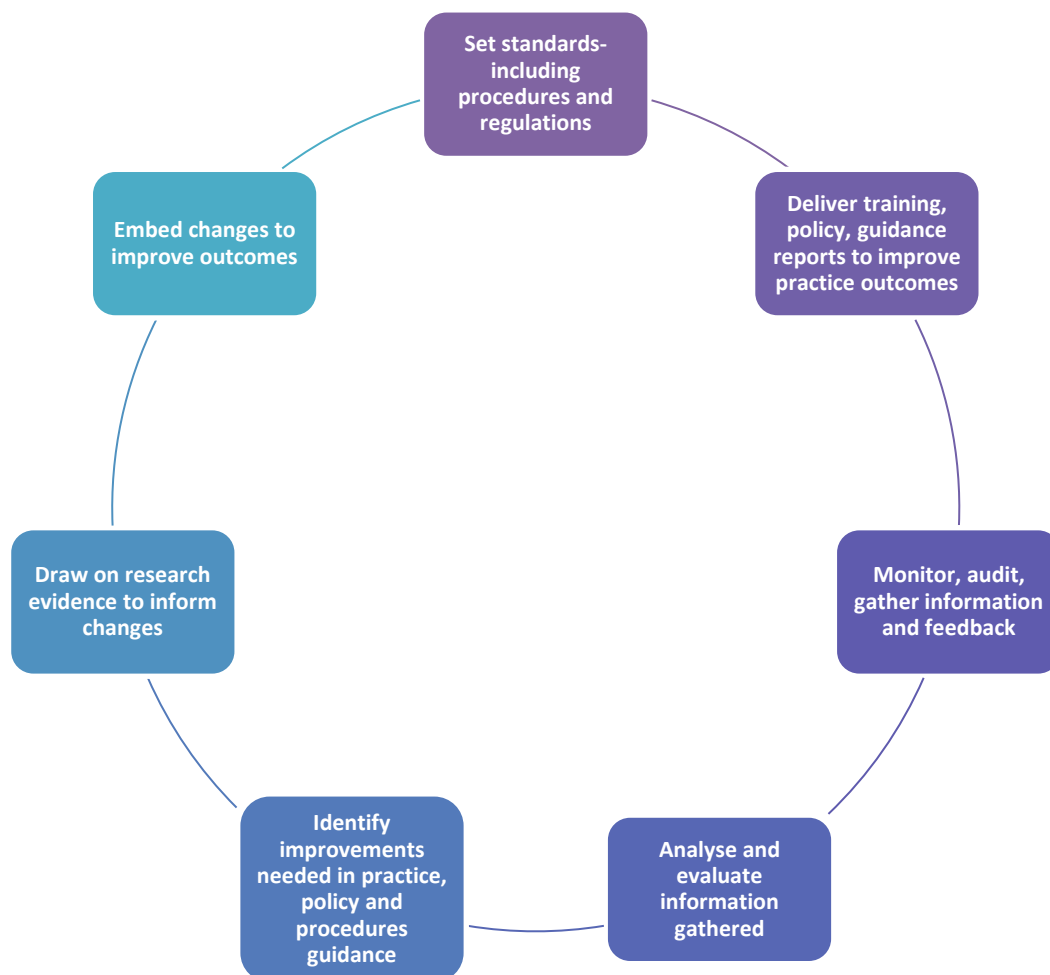
### 3. Outline of Our Quality Assurance Framework

Quality assurance is an umbrella term, which embraces all activity that contributes to service improvement; it is the means by which we understand the impact of 'Our way of Working' on outcomes for children/young people and identify where improvements should be focused.

Effective quality assurance is dynamic and evolving, where there is an embedded cycle of monitoring, continuous reflection and learning based on the principle that there is always room for improvement. Quality assurance needs to be owned by everyone in the organisation, managers at all levels need to understand and routinely undertake activity on their individual supervisees, teams and service areas.

#### Continual Improvement

The Research in Practice paper 'Building a quality culture in child and family services' (April 2018) states that 'quality assurance is often expressed as continual improvement' as outlined below.



We will embed the continual improvement cycle to achieve better outcomes for children and young people through:

- Ensuring a bottoms up approach to quality assurance which will empower staff to bring effective challenge and inform practice to drive through improvements;
- All staff understanding their role to improve services and outcomes for children and young people.
- Enabling regular review of strategies, policy and practice guidance to respond to issues, with all staff clear of the standards they are required to work to;
- Shaping our workforce development strategy based on recommendations in the quarterly learning and Improvement report;
- Delivering robust analysis to ensure a full understanding of issues affecting practice;
- Ensuring outcomes, recommendations and changes from quality assurance activity is made from having robust data and information;
- Researching learning and best practice within the sector to inform improvements in our practice.
- Using the Havering Social Care Academy training programme that is informed by quality assurance discussions and data.

## HAVERING SOCIAL CARE ACADEMY



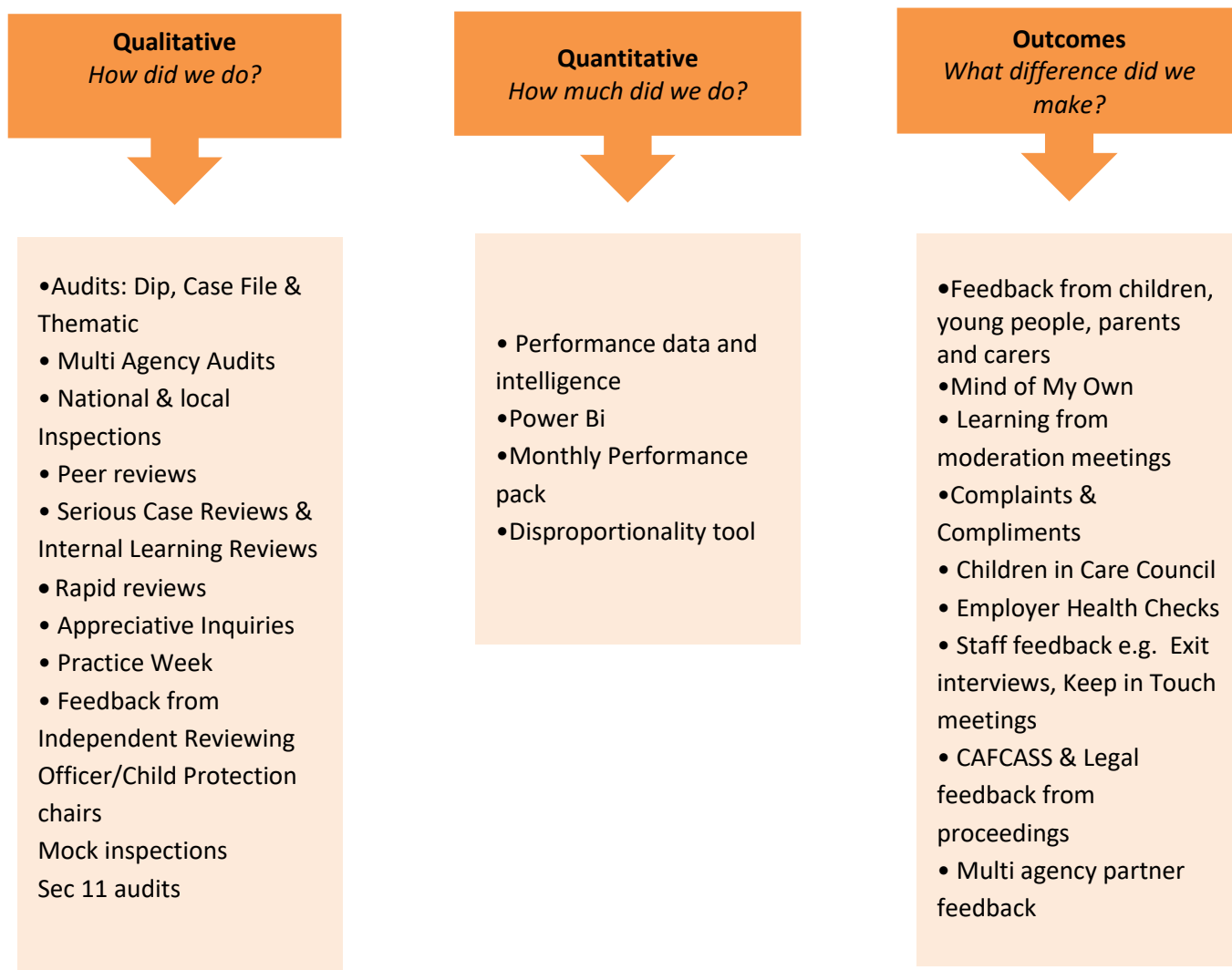
RECRUIT  
ENCOURAGE  
ENABLE &  
RETAIN.

The Havering Social Care Academy aims to provide tangible and accessible opportunities for staff to develop their careers in Havering across all disciplines, in order to attract a diverse and vibrant workforce. In practice, our academy brings together the activity, which supports the development of the workforce in Adult Social Care and Children's Services. Arranged by four faculties Practitioners, Management & Leadership, Providers, and Research Evidence & Evaluation, the academy combines externally commissioned training, peer to peer workshops, practitioner forums, internal and partnership learning events with, research from evidence-informed practice and regular detailed skills needs analysis.

We are committed to learning from what has gone well and not so well, incorporating important lessons from Quality Assurance & Audit, local & national practice learning reviews. The Academy captures our ambition and drive for excellence in our practice and represents our commitment to recruit, encourage enable and retain skilled staff across children and adult social care.

## 4. What are our Quality Assurance methods?

A combination of quantitative and qualitative information allows us to measure standards, performance and outcomes.



### Audit Schedule of Activities

Each year we will set out an audit schedule. We will undertake the following audit activities;

**Monthly case file audits:** Monthly audits undertaken by all managers (Min of 10 per year by TM's)

**One service request per quarter:** Service requests will be a bespoke piece of QA work as requested by a HOS or the Assistant Director of Children's Services

**One desktop activity per month:** Desktop activities are group auditing, moderating and reviews of practice

**Two Dip audits per quarter:** Short audits reviewing a sample of at least 20% of the cohort

**One themed audit per quarter:** Audits on a particular theme dependent on known risks

**Twice-yearly practice week:** Opportunity to highlight good practice



Quarter	Month	Monthly audits	Dip Audits	Desktop activities	Service Requests
<b>1</b>	April	Case file audit	ChAT Data	Desktop activity	<u>Request 1:</u>
	May	Case file audit		Desktop activity	
	June	Practice Week Case file audit	Dependant on service need	Desktop activity	
<b>2</b>	July	Themed audit	ChAT Data	Desktop activity	<u>Request 2:</u>
	August		Dependant on service need	Desktop activity	
	September	Case file audit		Desktop activity	
<b>3</b>	October	Themed audit	ChAT Data	Desktop activity	<u>Request 3:</u>
	November	Practice Week Case file audit		Desktop activity	
	December		Dependant on service need	Desktop activity	
<b>4</b>	January	Case file audits	ChAT Data	Desktop activity	Request 4:
	February	Themed audit		Desktop activity	
	March	Case file audits	Dependant on service need	Desktop activity	

## Moderation, Learning and Improvement

Audit moderation ensures we have a consistent understanding of what good looks like. Alongside monthly moderation, a panel moderation meeting gives senior managers an opportunity to understand practice within this area. We seek to moderate 50% of the total completed audits each month. Audit activity provides a reliable understanding of the quality of practice throughout the service, with areas for development feeding into training and workforce development.

Managers will use learning from audit activity within supervision sessions as well as within their team meetings. Managers will review the impact of learning to ensure they are influencing practitioner's practice. Additionally managers will be using these learning opportunities to identify team training needs and these will be mapped by the Academy to ensure training meets these needs. Managers will also use learning from QA activity to set team practice priorities, implement priorities from the established QA team and ensure the impact for children is measurable and well identified.

## Closing the loop

The effectiveness of our quality assurance activity will be determined by the difference this has made for children and their families. We want to be clear about how our work makes a difference both to the lives of individual children and to overall practice development. The learning, themes and strengths from all activities will be shared with the workforce using regular QA practice updates, presentations to managers meetings, briefings, workshops & training, practice guidance & standards. The workforce will have the opportunity to collaborate with us and share their experience of practice through forums. This will allow us to analyse and review the impact on practice and individual children. This will be captured on our closing the loop document.

<b>Title:</b>						
<b>Context:</b>						
<b>Drivers:</b>						
<b>Data:</b>						
<b>Known Risks:</b>						
<b>Goal</b> <i>(what do we want to achieve)</i>	<b>Measure</b> <i>(How will we know when we have achieved what we set out to do?)</i>	<b>Activity</b> <i>(What we did)</i>	<b>Sharing the learning</b> <i>(Method of reporting)</i>	<b>Feedback</b> <i>(What others told us about the experience/ learning)</i>	<b>Reviewing the outcome</b>	
<b>Updates:</b>						

- If the outcome of any audit is an “inadequate” judgement, we now have a robust, timely response to respond to children. In addition, the QA team will meet with the allocated social worker and team manager to facilitate a reflective conversation about the quality of practice and collaboratively devise an action plan to improve practice and therefore outcomes for that child(ren).
- Monthly theme report will be shared by the QA team reporting on key themes from audit activity and these areas will be mapped to ensure our Academy training offer matches identified staff development.
- Monthly audit compliance data will be shared to ensure we are tracking completion of audits by managers.
- Quarterly and Annual Quality Assurance Reports will be produced drawing together learning and themes from quality assurance activity undertaken and actions that need to be taken in response to findings. These will be presented to SMT, extended managers, and Members as required. These will include learning from feedback from children, families, and partners as well as from complaints, compliments, escalations, rapid reviews and independent reviews.
- These reports will also be shared and discussed by the QA team at the Service Meetings, Extended Managers Meeting and as required at Improvement Board.

- A monthly Best Practice Briefing to staff will be shared by the QA team, in light of emerging areas for development, with links to learning and this is aimed as a tool for managers to use within supervision and team meetings to discuss best practice in targeted areas. Managers will be expected to review their impact.

Whilst the QA team works closely with Havering Social Care Academy, we also recognise that learning and development is dynamic and does not just include formal education. Therefore, a variety of methods are used to promote the growth of social workers and managers, such as;

- Time to Grow monthly mentoring sessions for newly appointed Team Managers supporting their transition from practitioner into their managerial role, learning new skills and strategies to promote good, consistent practice and performance.
- Back to Basics and other bespoke workshops to support managers and practitioners to refresh and at times develop knowledge and understanding of key practice standards. Focusing on Havering's expectations and systemic model of practice to increase service quality and practice consistency across the board for Havering's most vulnerable children, young people, and families.
- One-on-one coaching and team support sessions where facilitated conversations provide a reflective space for review and/or change their own attitudes and habits. Finding their own answers through coaching and subsequently, closing the gap between their potential and present circumstances and/or ability.

Themes from the quality assurance activity will inform monthly practice briefings and a rolling programme of practice development workshops delivered by the Academy.

- Child, Young Person and Family Feedback annual report and feedback templates and guidance.
- Complaints and Compliments, quarterly and annual report

All services are encouraged to share learning opportunities with each other through the Social Work Academy by allowing their presentation and learning materials to be stored and made available.

- A library of good practice exemplars will be held and updated by the Academy. The learning from QA activity will inform the review of the types of exemplars required.

## **Developing a positive Quality Assurance Culture**

London Borough of Havering recognises that it is vital that we learn from all our quality assurance activity and from feedback, both positive and challenging. The culture of the organisation is one of learning, where staff at all levels feel safe to raise issues and discuss any difficulties, and are confident that their views will be heard and action taken to address the issues raised. In order to achieve this, feedback to staff needs to be positive, celebrating achievements and improvements and challenging in a positive way. In this commitment we will all ensure colleagues are supported and listened to when raising issues, and informed of actions to be taken. It is essential that practitioners feel part of audit activity and not "done to".

Audit's will be completed with the involvement of the practitioner enabling a learning opportunity to each practitioner, facilitating a learning opportunity between practitioner and auditor. This will ensure that the practitioner can contribute effectively, learn directly from the process and better understand what good practice looks like, understand decision-making and application of thresholds of audit grades.

To support manager's confidence and accuracy of audit completion, we deliver an audit workshop on a rolling programme and these will become part of the core-training offer from the Academy.

Additionally we have provided managers with an exemplar audit for them to use and we have developed grade descriptors to ensure accurate and consistent grades are applied.

## **Responding to Findings**

### **Limiting judgements**

Where a subsection is graded as inadequate, it is unlikely that the overall judgement can be anything other than inadequate.

### **Audits where practice has been judged inadequate.**

Havering has strengthened arrangements to respond to children following an audit judging practice to be inadequate. We have implemented a workflow and template for actions and review where the HoS reviews the case within 24 hours, and decides whether a multi-disciplinary action meeting needs to take place within 3 days. Where risk is identified, a visit to the child will also take place by the SW.

### **Audit action tracking**

Arrangements in the form of audit action tracking now systematically ensure that actions/recommendations from audits are routinely tracked/closed down. Actions from all audits are now recorded on a QA tracker held by the QA team, and Team Managers are responsible for sharing with the QA team when these have been completed, any additions and the reviewing mechanisms. A selection of cases are chosen at random each month. The Team Manager and Practitioner will meet with the QA team to discuss how far they have got in implementing the actions, and whether practice and/or outcomes have improved as a result.

### **QA Reporting Cycle**

The QA team will provide a monthly audit compliance report and a monthly overview of grade application for overall audits and subsections. Quarterly QA reports will provide an overview of the quarter grade applications, compliance as well as an overview of learning from complaints, feedback, voice of the child, escalations, multi-agency audit and other QA activity.

All of the above will determine the development of a robust and responsive Learning and Development Plan and a single agency themed audit schedule; it will also if necessary feed information to the Havering Safeguarding Children's Partnership (HSCP), which will help the HSCP to determine the Multi Agency audit schedule.

This reporting cycle will enable us to build a library of month on month audit activity, key areas requiring improvement, identify cohorts of children to audit and ensure we maximise, and evidence, the impact of all QA activity.

The Framework sets out the expectation that workforce development plans, service plans and personal development plans will evidence that they are shaped by the learning from the quality assurance process.

### **Best Practice Briefings**

The QA team will develop a one page Best Practice Briefing to all staff. These will be mapped against audit findings and will target practice improvement in key areas, for example, purposeful social work visits, direct work with children, professional curiosity, Genograms, assessments and more.

These are intended to be a 5 minute read and will be used by managers to generate practice discussions in team meetings and supervision and enable a focus on good quality practice.

The Academy and QA team and Principal Social Worker will utilise the learning from quality assurance activity and develop procedures, support, reflective sessions and training opportunities to improve areas of practice in conjunction with the Academy.

## 5. What activities will be Quality Assured?

All areas of practice will be quality assured. These areas maybe identified from patterns and themes emerging from the regular auditing activity, notable issues and/or changes raised through performance data, triggered by a complaint, a management review or changes in legislation and regulations. All service areas may be reviewed (Intervention & Support Service, Early Help, Fostering, Adoption-(ALE), Youth Justice Service, Families Together Team, Leaving Care, Children and Adults with a Disability).

### Our Practice Standards:

To support a shared understanding of 'what good looks like' we have introduced quality grades for the monthly case review tools.

Quality grades are made for the following areas:

- A. Quality of Recording: The case file is up to date, comprehensive and tells the child's story.
- B. Quality of application of thresholds and decision-making: Thresholds are applied appropriately and decision-making is proportionate to risk to prevent drift and delay for children.
- C. Quality of Assessment: Assessments are timely, comprehensive and analytical leading to appropriately focused help and effective interventions.
- D. Quality of Risk Assessment: Risks are identified, risk assessments are comprehensive, updated and provide strategies for mitigating them.
- E. Planning and intervention: Plans and interventions have a clear Purpose, Plan and Focus. They are timely, effective and SMART. Reviews of plans ensure progress is being made within a timeframe that is right for the child.
- F. Voice of the Child and Engagement: effective direct work leads to sustained changes, work is child-centred, and this is evidenced in recording.
- G. Supervision and Management Oversight: Effective management oversight and decision making is evidenced and is improving outcomes for children/ young people.
- H. Outcomes achieved as a result of the work: The intervention has resulted in positive sustainable changes in the lives of child and/ or their family.
- I. Overall quality grading: An overall grade consistent with the quality grading is above.

These are our core quality grades, which are assessed as part of all audits. Thematic and service specific tools may include one or more of the following additional quality grades:

- J. Quality of transition: Services work together to plan and prepare children and young people for transitions
- K. Quality of Preparation for Adulthood: Care Leavers are prepared for adulthood early enough, and are provided with the necessary tools and resources to succeed.
- L. Quality of Referral: Professionals identify and make appropriate referrals. Timely and effective decisions are made by MASH that improves the child's situation.

## Audit grading

Case review grading will fall into the groups below in line with the Ofsted inspection grades.

<b>Inadequate</b>	<b>Requires Improvement</b>	<b>Good</b>	<b>Outstanding</b>
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<b>Outstanding</b>	The practice and impact is consistently good or better and results in sustained improved outcomes in the lives of children, young people and their families. Cases graded as outstanding can still have learning.
<b>Good</b>	There is evidence of good practice, positive impact and outcomes are evidenced through assessments, planning and direct work with children, professional decision-making and management oversight. Practice learning identified is minimal.
<b>Requires Improvement</b>	There are no safeguarding concerns however practice needs to improve to be graded good. Where good help or protection is not consistently provided.
<b>Inadequate</b>	The experiences of children in need or protection will be inadequate where there are widespread or serious failures, which leave children being harmed or at risk of harm. Where immediate action is required to keep the child safe.

## Roles and Responsibilities

<b>Role</b>	<b>Responsibility</b>	<b>Activity</b>	<b>Frequency</b>
Lead Member for Children's Services	To offer a critical friend role in reviewing the strategic priorities of the QA framework and performance of Children's Social Care and Early Help Services	Children's Services Executive Board  CPP	
Director of Children's Services,	To provide guidance on the strategic priorities which inform the QA Framework	Children's Services Executive Board  Practice Week  Moderation case file audits	Twice per year  Twice per year
Assistant Director of Children's Services	To provide guidance on the strategic priorities which inform the QA Framework  To undertake at least 6 x audits/ QA activities per year	Practice Audit  Practice Week  Moderation case File audits	Quarterly  Twice per year  Quarterly
Principal Social Worker	To champion a QA practice- learning loop across the Local Authority and with Multi-agency partners  To undertake at least 6 audits/QA activity per year	Practice Week  Moderation case file audits  Learning Reviews	Twice per year  Monthly  As required
Heads of Service	To champion the priorities as identified in this framework  To undertake at least 6 x audits/ QA activities per year	Practice Week  Thematic and dip audits on specific areas of practice  Moderation case file audits  Observations of practice  Case File Audits	Twice Yearly  Periodic according to need  Quarterly  Bi-monthly  Monthly

Service Managers	To support protected time to allow Team Managers to undertake Quality Assurance	<p>moderating the completion of actions identified in case audits</p> <p>Thematic/dip audits on specific areas of practice</p> <p>Moderating case file audits</p> <p>Facilitating Quality Assurance conversations during team and service meetings.</p> <p>Case file audits</p> <p>Group Supervisions</p>	<p>Monthly</p> <p>Periodic according to need</p> <p>Quarterly</p> <p>Monthly</p> <p>Monthly</p> <p>Monthly</p>
Team Managers	Team Managers will identify and encourage child-focused practice and ensure rationale is recorded to demonstrate safe and defensible decision-making.	<p>Monitoring and routinely presenting team performance data in team meetings</p> <p>Directly observing practitioners carrying out direct work with families or partner agencies</p> <p>Case file auditing</p> <p>Case discussions with SW's as part of Supervision reflected in case recording</p> <p>Group Supervisions</p>	<p>Weekly</p> <p>Monthly</p> <p>Monthly</p> <p>Monthly</p> <p>Monthly</p>
Practitioners	To be open to sharing their practice strengths and challenges	<p>Self-assessment to inform monthly case file audit</p> <p>Peer reflections</p>	<p>Periodic</p>

## 6. Impact: How will we know we have made a difference ?

It is critical that we forensically track the impact of our improvement activity to ensure that it is leading to better outcomes and experiences for children; we remain vigilant in our scrutiny of QA activity and impact and are flexible and professionally agile in adapting to emerging themes.

1. Children and their families say they feel more respected and able to make good decisions for their children with the support of professionals
2. Parents, children and carers say that they were listen to and actively contributed to their children's plans



3. More children and young people are safely remaining with their families.
4. Length of time that children require intervention or support is only for as long as it is needed.
5. Children and young people experience stability and permanence whether at home or in care without delays
6. Policies, procedures and guidance support best practice and empower practitioners to be creative and innovative.
7. A quality assurance process aligned with the strengths based approach demonstrates that we measure what really matters to children, young people and families, and drives improvements to practice.
8. Caseloads are manageable and practitioner tools enhance practice, maximising time with families.
9. All staff are confident using strengths based approach in a consistent manner and case audits show fidelity to the approach.
10. Feedback from families, practitioners and partners is regularly analysed and informs service development.
11. Our partners tell us that they have experienced multi-agency collaboration, that strengths based approach is helping them to make a positive difference with families.
12. Partners tell us they feel confident using the “professional differences” policy when needed.

There is clear evidence of learning from assurance processes both in children’s lives and systematically through closing the loop processes.

The Quality Assurance team, Systemic & Clinical Practice and the Havering Social Care Academy are routinely working together to inform the development of a training programme that meets the needs of the workforce. The training programme is aligned to audit findings; managers and social workers are also provided with the opportunity to influence the programme based upon their self-identified learning needs and giving feedback to inform the training programme.

Through the Practice Development Manager consultations, we have provided opportunities for the workforce to self-identify their learning needs. The Havering Social Care Academy has then commissioned the identified training. We have seen an increase in attendance for the training that has been identified in this way.

Increased partnership working across the teams has seen an increase in the workforces understanding of what training and support is available. We have seen an increase in the use of Research in Practice and our internal SharePoint library.

We will know we have made a difference to the workforce when training impact is evidenced in practice.

### **Implementing the Framework: Sharing and Acting on the Learning**

Direct feedback from audits, observation of practice, practitioner events will all be used in addition to staff briefings involving practitioners from across the service. The aim will be to celebrate success, identify areas of potential risk and will adopt a “turning the curve” process which will enable practitioners to identify the priority outcomes they want to improve.

A regular QA briefing will be circulated to all staff to update them on quality assurance activity and provide senior leaders with an overview of each month’s audit grades and compliance rates.

## With Team Managers

The team managers are responsible for oversight of practitioners' work. They will assure day to day activity and support workers to meet practice standards. Team managers are responsible in ensuring audit recommendations/actions are completed.

They will guide and direct workers activity, provide oversight and QA key documents via sign off - e.g. plans and assessments. They will undertake file checks / audits of our work to monitor quality, consistency and develop individual learning plans with staff to help all meet the standards we have set.

## With Service Managers

The Service Managers are responsible for the oversight of the impact of the Quality Assurance Framework within their own service areas. They will monitor learning plans for their service to ensure actions are completed and will provide updates to performance meetings and boards. They will feedback to the Heads of Service who will collate strengths, learning and challenges for the Service Director responsible for that part of the service.

## With Senior Managers

The Heads of Service, Principal Social Worker and Director will work together to lead and deliver the service direction and ensure that our working environment is appropriate for continuous learning and development. The Heads of Service will collate information from their areas and liaise with Service Directors, who will ensure that the DCS and team are aware of our achieved standards, outcomes and performance across the QA framework, as well as challenges and focus areas to support improvement.

## The Continuous Improvement Model

This subjects the performance information into systematic analysis, from which knowledge may be gained to inform service development and improvement.

It is expected that this continuous knowledge acquisition will drive evidence-based practice. This learning will be passed on through direct work, training, provision of guidance documents etc. to improve outcomes for children and young people.

Examples of which would include (amongst others):

- Responsiveness to assessed need and the wishes of children and families.
- Reviewed / revised policies and procedures.
- Integration of training into practice.
- Workforce development strategies – learning, development and recruitment of staff.

## How will we know we are doing it?

Practice Standard	What does 'good' look like?	How will we measure this?
<b>Children and families will be placed at the heart of everything we do</b>	<ul style="list-style-type: none"><li>• Involve children/young people and their parents/carers in shaping plans and decisions</li><li>• We will listen to children</li><li>• We will work with children pro-actively taking account of their needs</li></ul>	<ul style="list-style-type: none"><li>• Reports on timeliness</li><li>• Team managers' sign off of assessments</li><li>• Audit activity "external" Audit activity IRO / CP chairs</li><li>• Audit activity</li><li>• Feedback from children and</li></ul>

	<ul style="list-style-type: none"> <li>• We will deliver relationship-based practice with children and families</li> <li>• We will involve them in genuine partnership</li> <li>• Timely Proportionate</li> <li>• Reflect historic information</li> </ul> <p>Identify risks and protective factors</p> <ul style="list-style-type: none"> <li>• Result in a clear analysis of the child/young person's situation</li> </ul>	<p>families</p> <ul style="list-style-type: none"> <li>• Scrutiny by DLT and CLT</li> </ul>
<b>Every Child will have an up to date Assessment</b>	<ul style="list-style-type: none"> <li>• Involve children/young people and their parents/carers in shaping plans and decisions</li> <li>• Reflect the child's life experiences</li> <li>• Include wider partners and family views</li> <li>• Regularly updates to take account of changes</li> <li>• Timely Proportionate</li> <li>• Reflect historic information, Identify risks and protective factors</li> <li>• Result in a clear analysis of the child/young person's situation</li> <li>• Detailed genogram will be included</li> <li>• Safety planning assessments of children will be clear</li> <li>• Written in clear and friendly way</li> </ul>	<ul style="list-style-type: none"> <li>• Reports on timeliness</li> <li>• Managers' sign off of assessments</li> <li>• Performance reports on timeliness</li> <li>• Audit activity</li> <li>• Feedback from IRO/CP chairs</li> <li>• Feedback from children and families</li> <li>• Feedback from partners</li> </ul>
<b>Plans are good quality and SMART</b>	<p>Reflect assessment findings Are clear and outcome focussed with attributed actions which are:</p> <ul style="list-style-type: none"> <li>• Specific</li> <li>• Measurable</li> <li>• Achievable</li> <li>• Realistic</li> <li>• Timescales are clear</li> <li>• Other agencies are involved as appropriate.</li> </ul>	<p>Service-related audit activity "external" audit activity</p> <ul style="list-style-type: none"> <li>• IRO scrutiny at reviews</li> <li>• CP Chair scrutiny</li> <li>• Audit activity</li> <li>• Management sign off/oversight</li> <li>• Children and family feedback</li> </ul>
<b>Children's records will be clear and accessible</b>	<p>Language will be easy to understand and not jargon</p> <ul style="list-style-type: none"> <li>• Recordings will be timely</li> <li>• Recordings will include reflection and analysis</li> <li>• Significant events will be explained and decisions evidenced</li> <li>• There will be explanation as to the purpose and impact of activity e.g. visits</li> <li>• There will be a pen picture of the child updated 3 monthly</li> <li>• Child and family views will be clearly recorded and confirmed</li> </ul>	<p>Management supervision/oversight</p> <ul style="list-style-type: none"> <li>• Audit activity</li> <li>• Scrutiny from CP chairs/IRO</li> </ul>
<b>Children's cases evidence regular management Oversight</b>	<ul style="list-style-type: none"> <li>• Regular, recorded management oversight will be on records</li> </ul>	<ul style="list-style-type: none"> <li>• Management oversight on files</li> <li>• Supervision reports</li> </ul>

	<ul style="list-style-type: none"> <li>• Manager's directions and comment will be clearly recorded</li> <li>• Reflective supervision will be seen on files</li> <li>• Managers follow up of activity agreed will be evident</li> <li>• Evidence of managers reflecting on impact and agreeing next steps</li> <li>• Evidence of support and challenge</li> <li>• Evidence of managers impacting on case progression</li> </ul>	<ul style="list-style-type: none"> <li>• Audit activity</li> <li>• CP chairs/IRO interventions</li> <li>• Staff feedback – through reference groups</li> <li>• Partners feedback</li> <li>• Child and family feedback</li> </ul>
<b>The use of systemic practice approach</b>	<ul style="list-style-type: none"> <li>• Wishes and feelings of children/young people and families are:</li> <li>• Visible in assessments</li> <li>• Visible in notes of meetings</li> <li>• Reflected in plans</li> <li>• Feedback from Your Voice Matters informs service planning</li> <li>• Safety/wellbeing plans are evident</li> <li>• Multi agency plans are clear and proactive</li> <li>• Children and families are clear as to the concerns and actions required</li> </ul>	<ul style="list-style-type: none"> <li>• audit</li> <li>• service user feedback</li> <li>• Suggestions acted upon from feedback and consultation with children and young people and their families</li> </ul>

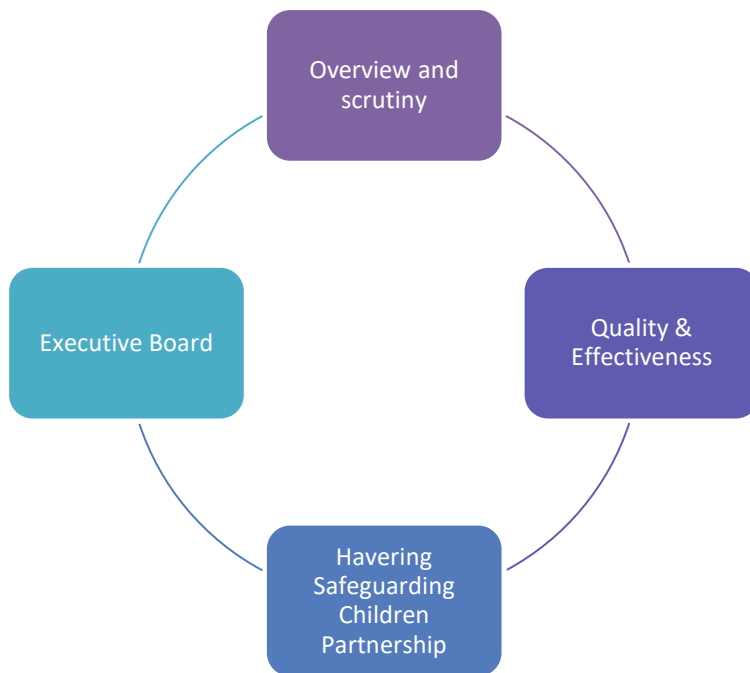
## Data and performance measures

The provision of data is key to understanding a range of compliance and performance measures, highlighting areas of good practice and areas requiring improvement and in helping to measure the extent to which remedial activity is effective in improving performance.

Havering has the benefit of a suite of data that allows us to track and analyse performance against key indicators to compare our performance with statistical neighbours. This intelligence is used to focus improvements works based upon service need.

## Governance

There are a variety of panels and boards, which enable us to ensure robust scrutiny to statutory requirements and a commitment to service improvement. There are embedded systems and processes for professional challenge by lead members, and our multi-agency partners. Through these channels and processes we undertake assessment, multi-agency audits and share learning. See outlined below;



## Forward plan

A 12-month improvement plan will strengthen our approach to Quality Assurance. Central to this plan is the development of a Quality Assurance Board, which will bring together, Quality Assurance, complaints & compliments, training & workforce development through the HSCA, and the IRO service.

QA Key priorities over the next 6 months

- **Improve audit compliance.** We will see at least 80% of allocated audits completed.
- **Improve audit quality and consistency in “what good look likes”.** We will see a reduction in the number of moderated cases downgraded.
- **Improve the timeliness of responses to actions arising from inadequate audits.** Timely action will lead to improved practice and consequently improved outcomes for child.
- **Increased consultation in audits.** Audits will be completed with Practitioners/Social Workers collaboratively, and Children and their families will share their feedback providing a mechanism for
- **Ensure it is well evidenced that QA activity contributes to sustained improvement.** Closing the loop mechanisms will have clear outcomes measures demonstrating what has improved as a result of QA activity.

Service Key Priorities over the next 3 months

- **Supervision and management oversight.** We will have a clear supervision policy which is adhered to thus supervision will be timely, of good quality and evidence its role in preventing drift and delay and thus improving outcomes for children.
- **IRO oversight.** We will see effective care planning and reviewing that supports children to flourish and thrive. We will see mid-point reviews, increased role in preventing delay in 16+ transition to leaving care services and formal escalations (when needed).
- **PLO pre-proceedings.** We will see pre-proceeding processes are adhered to so that decisions are made in a timely manner, and plans clearly identify what parents need to do. There will be oversight and review of all cases in PLO Pre-proceedings to prevent drift and delay.