**Quality Assurance, Reviewing and Safeguarding Service (QARSS)**

**Resolution and Escalation Protocol**

“**One of the key functions of the IRO is to resolve** **problems** (in respect of plans being made for children)” (IRO Handbook, 2010).

**Resolution.**

The early resolution of practice concerns at the earliest possible stage is the primary intention of the Quality Assurance, Reviewing and Safeguarding Service (QARSS) approach to problem solving.

It is recognised the process to resolution may be different depending on those involved and the presenting problem, but they should all be characterised by honest and transparent conversations, carried out in a tone of kindness and empathy. This embodies a restorative approach of high support and high challenge, where importance is placed on building, maintaining and repairing relationships, and addressing conflict as it arises.

A resolution meeting/discussion should be considered. A collective decision needs to be made on who this will involve. This is likely to be social worker, manager, IRO, and the person who originally raised the concern. Consideration is needed for how the child and family’s voice can hold a space in this discussion.

The resolution meeting/discussion should consider:

* What has happened? Ensure clarity of the nature of concerns and the urgency for resolution are shared. Encourage people to share their experience and perspective on the concern.
* What were you thinking? And so how were you feeling? Linking thoughts, feelings and behaviour.
* Who has been affected by what has happened? A focus on harm and how to repair this harm; on the effect of the action and who has been affected.
* What do you need so you can move forward? An appreciation of individual needs and also that there is much similarity between the needs on all sides.
* So, what needs to happen now? And what can you do? By when? Ownership of problem-solving and decision making by those directly involved. Accountability; empowerment; collaborative problem-solving
* Clarity of next steps if a resolution cannot be met (implementation of escalation protocol).

This set of questions is not a script, but a guide to a conversation. It is a reminder of important restorative principles; to value and respect each perspective, seek to understand and work together to plan and problem solve.

Timescales for holding a resolution meeting must not cause delay and place a child at continued risk. There are many reasons why an IRO may bypass this stage to instigate the escalation protocol. These may include; the serious nature or urgency of the concern demands it. Other reasons may also be valid.

Where Reviewing Officer’s (IRO or ISRO) have agreed a change of plan or approach with the social worker or team manager at an early stage and a positive resolution has been agreed, this should be recorded on a Resolution and Escalation form on the child’s electronic file and re-assigned to the Team Manager to ensure transparency and a shared responsibility for progress.

**Escalation**

Where early resolution approaches have not been successful or where the Reviewing Officer identifies systemic issues that are impacting upon the effective planning for a child, the escalation protocol should be followed.

Further guidance regarding the type of concerns or issues that should be subject to Resolution and Escalation are set out at Appendix A. This list is not exhaustive and professional judgement should apply in all individual cases.

**Aim**

The processes and procedures set out in this document aim to;

* Ensure when a Reviewing Officer identifies a problem in relation to an individual child’s safety, care planning, social work practice, management or decision-making, issues are resolved quickly and effectively.
* Ensure where themes are identified that have implications beyond a specific child’s plan and therefore need for resolution by amendment to wider practice, management, systems, protocols and procedures, this is highlighted for senior managers consideration, through a structured mechanism.
* Ensure wherever possible issues of concern are resolved at the earliest possible stage with the social worker and their manager.
* Ensure there is an effective process to escalate concerns when issues are not resolved at an early stage, so that protracted professional disputes that put children at risk, obscure the focus on the child, or delay decision making are avoided.
* Contribute to a culture that has high expectations, provides high challenge and high levels of support to achieve shared goals.

**The safety of children and young people are paramount, and any professional disagreement or unresolved issues should be escalated using this procedure and with an understanding of and focus on the safeguarding risks for the child.**

**Recording**

In all situations where the Reviewing Officer has intervened in planning for a child, this will be recorded within this resolution process on the I3 on child’s electronic file.

The Reviewing Officer’s Escalation will identify the nature of the concerns under one of the following headings;

* Immediate safety
* Quality of assessment
* Absence or delays in assessment
* Quality of planning – safeguarding
* Quality of planning – independence/ transition
* Absence or delays in planning including permanence
* Participation
* Statutory compliance
* Stability of placement
* Suitability of placement
* Quality of relationships in placement
* Quality of professional relationships
* Management and oversight
* Direct practice with children and families
* Other

**Timeliness**

The timely and effective resolution of professional concerns is critical.

Professional disagreement and conflict must not place children and young people at risk and adherence to this procedure in regard to the time frames is essential to good practice.

This is a staged procedure intended to encourage early attempts to resolve concerns with the social worker and team manager, however, the ISRO/IRO may bypass any of the stages if the urgency or seriousness of the concern demands a more senior response. Informing the social worker and manager of this decision, before it is enacted where possible.

NB. The **IRO** Reviewing Officer may refer the issue to CAFCASS at any point in the process. They may also consider the option of a concurrent referral to CAFCASS. Informing the social worker and manager of this decision, before it is enacted where possible.

The following status rating will be used to help communicate the urgency of the escalation **AT EACH STAGE** and governs the required response time from the person to whom the concern has been referred;

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| **Urgency RAG Rating** | **Guidance** | **Response time** |
| GREEN. Low risk | Concerns regarding compliance and/or the quality of assessment, planning, participation, management or other practice, that do not meet the threshold for AMBER or RED rating. | Within 5 working days |
| AMBER. Moderate risk | Significant welfare concerns about a child, but immediate and urgent action is NOT require | Within 3 working days |
| RED. High or Immediate Risk | Urgent safeguarding concerns about a child requiring immediate action to ensure their safety. | Within 24 hours |

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| In all escalations, a resolution should be achieved within 20 working days or a timescale that protects the child from harm (whichever is less).  **Process**  Meeting/Discussion involving the person who originally raised  Resolution Meeting  the concern, Social Worker and Reviewing Officer (this  meeting may need to run concurrently with differing  stages in order to prevent delay – but continues to offer the  opportunity of exiting the escalation protocol if resolution  achieved.  Stage 1  Stage 1:  Concern has not been fully resolved at early resolution and/  or requires the attention of the Team Manager. | |
| Stage 2: Concern that has not been fully resolved at early  Stage 2  resolution and/or requires the attention of an Area Manager. \*  Stage 3: Concern that has not been fully resolved in previous  Stage 3  stages and/or requires the attention of a Locality Director\*  Stage 4: Concern that has not been fully resolved in previous  Stage 4  stages and/or requires the attention of the Head of Service\*\*  \*There are many reasons why an IRO may bypass a stage to bring the concern to the attention of a more senior manager. These may include; highlighting a concern about a decision made at a senior level or the serious nature or urgency of the concern demands it. Other reasons may also be valid.  \*\* Escalation of a concern to this stage requires discussion with the QARSS UNIT Operations Manager in the first instance.  **Accountability**  At each stage it is important the person who originally raised the concern is given feedback within the prescribed RAG rating timescale on what action has been taken in response. It is the responsibility of the person to whom the issue is referred, to ensure clear and timely feedback is provided, recorded on the I3.  The Reviewing Officer will notify the person to whom the escalation is referred by phone and email the same day as the escalation is raised.  **Themed Concerns**  Concerns that arise as a result of resource or other system issues and/or indicate a pattern or theme beyond an individual child, should be recorded on the Themed Concern Tab on the I3, re-assigned to the QARSS Manager who will review the supporting evidence, gather more if necessary and escalate directly to the Senior Safeguarding Manager, for consideration by the Senior Management Team. The expectations regarding timeliness and recording remain as set out above.  Escalation of themed concerns should always take place following consultation with the wider QARSS Manager in order to provide the opportunity for collective evidence gathering and coordination. | |
| **Cafcass**  The IRO should refer the concern of any child in care to Cafcass where the IRO considers it appropriate to do so and it has not been possible to resolve the issues through local resolution.  Section 118 of the Adoption and Children Act 2002 amending section26 of the Children Act 1989.  Examples of reasons an IRO may refer to Cafcass. In each example, the child could be either accommodated or subject of a care order or placement order This is not intended as an exhaustive list:   * Unreasonable failure by a local authority to meet the statutory requirements for the child in care. * Unreasonable failure by a local authority to implement an important element of a care plan – for example sibling contact, or a foster placement for an asylum-seeking child. * Unreasonable failure by a local authority to implement an important element of a care plan due to conflicts in decision making outside of the review process – for example, funding of a specialist placement or therapy. * Unreasonable decision to move a child’s placement. |

**Whistleblowing**

The Public Interest Disclosure Act 1998 was enacted to ensure a climate of greater frankness between employers and workers so that irregularities can be identified and addressed quickly and to strengthen employment rights by protecting responsible workers who blow the whistle about wrongdoing or failures in the workplace.

Devon County Council encourages employees and others with serious concerns about any aspect of the Council's work to come forward and voice those concerns without fear of reprisals. It recognises that certain cases will have to proceed on a confidential basis.

Details of the Council’s Whistleblowing Policy can be found here;

<http://devonchildcare.proceduresonline.com/p_whistleblowing.html>

This policy covers concerns that fall outside the scope of other procedures. It is not intended as recourse against financial or business decisions made by the Council or its Committees under procedures set out in the Constitution. Nor is it an alternative to well-established disciplinary or grievance procedures. It may however overlap with other corporate policies for dealing with complaints, with Member or Officer Codes of Conduct and with protocols for good working relationships within the Authority. Concerns raised under this Whistleblowing Policy should be about something that is or may be:

* Unlawful or a criminal offence; or
* A breach of a legal obligation (but not a personal contractual breach unless such breach involves a matter of public interest); or
* A miscarriage of justice; or
* Mistreatment or abuse of a client or a member of the public for whom the Council has responsibility; or
* In disregard of legislation governing health and safety at work; or
* Seeking undue favour over a contractual matter or a job application; or against the:
* Amounts to improper conduct or unauthorised use of public funds;
* Has led to or could lead to damage to the environment; or
* Deliberately covers up information tending to show any of the above.

**Procedure Details**

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| **Author** | **Post** | **Date of update** | **To be reviewed** |
| Elizabeth Brierley  Georgina Adams | Operations Manager for Independent Reviewing Officers  Operations Manager for Child Protection | 13.05.2020 | May 2021 |

**Appendix A**

**Mandatory Issues for Escalation by Quality Assurance, Reviewing and Safeguarding Service (QARSS)**

Set out below are key areas that require resolution or escalation by the Reviewing Officer. The indicators given below for each key area are examples and are not exhaustive.

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| **Immediate safety** | **Quality of assessment** | **Absence or delays in assessment** | **Quality of planning – safeguarding** | **Quality of planning – independence/ transition** | **Absence or delays in planning including permanence** | **Participation** | **Statutory compliance** |
| Safeguarding issues are not being adequately addressed and there is a likelihood of immediate harm | Standard of assessment falls below expected level (including single assessment, s47, reunification, compatibility, risk or other required)  Poor quality information given to fostering team leading to inappropriate matching | Drift Prior to ICPC or ICIC  Assessments not up to date.  Assessments not completed  (this may include single assessment, s.47, reunification, compatibility, risk assessment or other required) | Gaps in Safety and Care Planning  Core Group not adhering to CP Plan  Plan is not matched to child’s needs | Independence skills are not being supported from early adolescence.  Gaps in Care/pathway Planning  Transition planning – plans not matched to need for any child leaving care or requiring transition to adult services. | Lack of Permanency Plan or where there is evidence of drift and/or poor planning.  Lack of progress at midpoint checks or reviews  Delay in initiating PLO or Care proceedings (Section 20 or where there has been agreement via CARP to do so)  Lack of clear plans for any child leaving care or requiring transition to adult services.  Delays in accessing key resources (School, FGC, CAMHS, Advocacy, Independent Visitor, additional aids for disabled children)  Delays in consideration of any legal action where risks are incompatible with a continued CP Plan | Children who do not have access to IV/Advocate or mentor where this is clearly indicated  Lack of support for participation for parents with additional needs  Child's voice not evident in assessment and planning  Lack of consideration of family support/ care/ conferencing | Key aspects of Corporate parent role not being adhered to - health assessments, education issues, dental checks etc.  Lack of key documents  prepared and provided to all in advance of reviews (Care Plan, SW Report, Health Plan, PEP)  Children not seen in line with minimum expectations or to meet their needs if needed more frequently than the minimum.  Statutory meetings including core groups not completed within required timescales. |

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| **Stability of placement** | **Suitability of placement** | **Quality of relationships in placement** | **Quality of professional relationships** | **Management and oversight** | **Direct practice with children and families** | **Other** |
| Lack of awareness and/or appropriate and timely planning regarding placement stability issues  Unplanned moves without assessment and matching where this could have been avoided | Planned placement with parents where clear risk assessments and/or senior management agreement not being sought.  Lack of awareness or planning to respond to concerns regarding the ability of the placement to meet child/young person's needs.  Inappropriate use of s.20  Unidentified or unassessed regulation 24 placements/ private fostering or other arrangements. | Lack of skills, commitment, attunement and/or strengths-focused care which is impacting on the wellbeing of a child who is in care | Lack of coordination or positive collaboration which is impacting the progress or quality of assessment and/or planning. | Significant changes to the Child's plan without consultation with the IRO/ISRO or Children’s Guardian (where proceedings are ongoing)  Lack of or concerns regarding the quality of supervision and/or oversight from Team Manager or other manager. | Poor working relationships between SW and family that relate to the skill of the SW.  Lack of innovative and creative planning leading to punitive and/or escalating approaches  Delays in Life Story work and/or Letters for Later Life.  Inadequate SW knowledge of a specific area to enable good practice | Dissenting view from resource or Placement Panel  Changes of Social worker that are impacting the quality or timeliness of assessment, planning, care or progress.  Delay in discharge of care order  Lack of provision of key documents to the IRO including court care plans. |