



SOCIAL WORKERS NEED TO BE ABLE TO SEE WHAT I FEEL

Durham Children's Social Care: Quality Assurance Framework



Contents

Introduction	3
Continual Improvement	3
The Practice System	5
The Quality Assurance Framework	6
Quality Improvement	13
Appendix 1: Team Meeting Structure	14
Appendix 2: Impact Statement Pro-forma	16
Appendix 3: What Good Looks Like	17

1. Introduction

- 1.1 This Quality Assurance Framework sets out how Durham Children’s Social Care Services will ensure a focus on a single framework that continuously drives improvement in the quality of practice which in turn leads to improved outcomes for children and families in Durham.
- 1.2 This document builds on the work described within the Research in Practice paper “Building a quality culture” and the learning from a number of Local Authorities who have effectively used this approach to drive improvement and achieve better outcomes for Children and Young People.

2. Continual improvement

- 2.1 We understand that improvement is a continuous process and this framework sets out mechanisms that support the improvement cycle that is shown below.



2.1 The continual improvement cycle will achieve better outcomes for children and young people through:

- Ensuring all staff have a role to play in the improvement of practice and practice outcomes;
- A bottom up approach which will empower staff to bring effective challenge, the ability to inform practice and ownership to drive through improvements;
- Enabling regular review of strategic, policy and practice guidance to respond to issues, with all staff clear of the standards they are required to work to;
- Ensuring all staff are clear on our quality of practice process and how this shapes improvement and outcomes;
- Delivering robust analysis will ensure full understanding of issues affecting practice and outcomes, recommendations and changes will be made from a position of being fully informed;
- Researching the sector and aiming to learn from best practice to inform improvement in our practice.

3. The practice system

- 3.1 We are passionate about working with families in a relational way that is strength based and continually pays attention to the trauma that children and young people may have experienced. We use the Signs of Safety practice framework to inform our practice and have set out a number of practice principles and shown how they align to the values of the wider council in the graphic below:

Children and Young People's Service - Principles of Best Practice

"Every conversation matters, every day counts"



Outcome Focused

We work together to achieve the best for people



People Focused

We put people and communities at the heart of everything we do and value our employees



Empowering

We value, trust and support each other



iNnovative

We embrace change and look for better ways to deliver services

Our Principles

- **The Best For Our Children:** We want every child to be safe, have the best start in life, good health and access to good, quality education, training and employment. We will strive to be a good parent when children are looked after in our care.
- **Think Family/Think Inclusion:** We will work with other agencies to deliver good outcomes for all children and young people through childhood, into adulthood and independence. Wherever appropriate, there will be one lead practitioner to coordinate a whole family plan.
- **Timeliness:** We know that childhood is precious and that every day counts. We will work hard to ensure there is no delay for children and young people's plans as a result of our work.
- **Stability:** We know that moving placements or schools can be hard for children and young people and can affect their progress and wellbeing. We will work hard to minimise moves for children and support smooth transitions.

- **Working With:** We will work with children, young people, families and each other with compassion and humility and in a context of high support, high challenge. We will try to ensure everyone receives the right support at the right time.
- **Child Focused:** We will ensure that we spend time with every child and young person so that we understand what life is like from their perspective, what 'good' looks like for them and to help prepare them for their next steps.
- **Relationships Matter:** We will take responsibility for creating and maintaining effective relationships with children, young people, families and each other using language that everyone can understand. We will strive to provide consistency of workers as we know this is important in building trusting relationships.

- **Strengths Based:** We will discuss with children, young people and families what we are worried about, ensure that we understand what is going well in their family and help them find their own solutions. We will adopt an evidence-based approach to assessing need and managing risk.
- **Supporting Families And Communities:** We believe that children and young people should remain living in their families and local communities with support where it is safe to do so. We want communities to be confident that our services safeguard and protect when they need to.

- **Transparency And Accountability:** We will work with partners to make sure there is clarity in who makes decisions for and with children and young people and why these decisions are made. We will regularly review situations to ensure that decisions and support remain appropriate and ensure that we spend public money wisely.
- **Creative:** We will be creative in finding the best way to support every individual child and family to achieve good outcomes as soon as issues are identified as well as working to reduce their reliance on services.



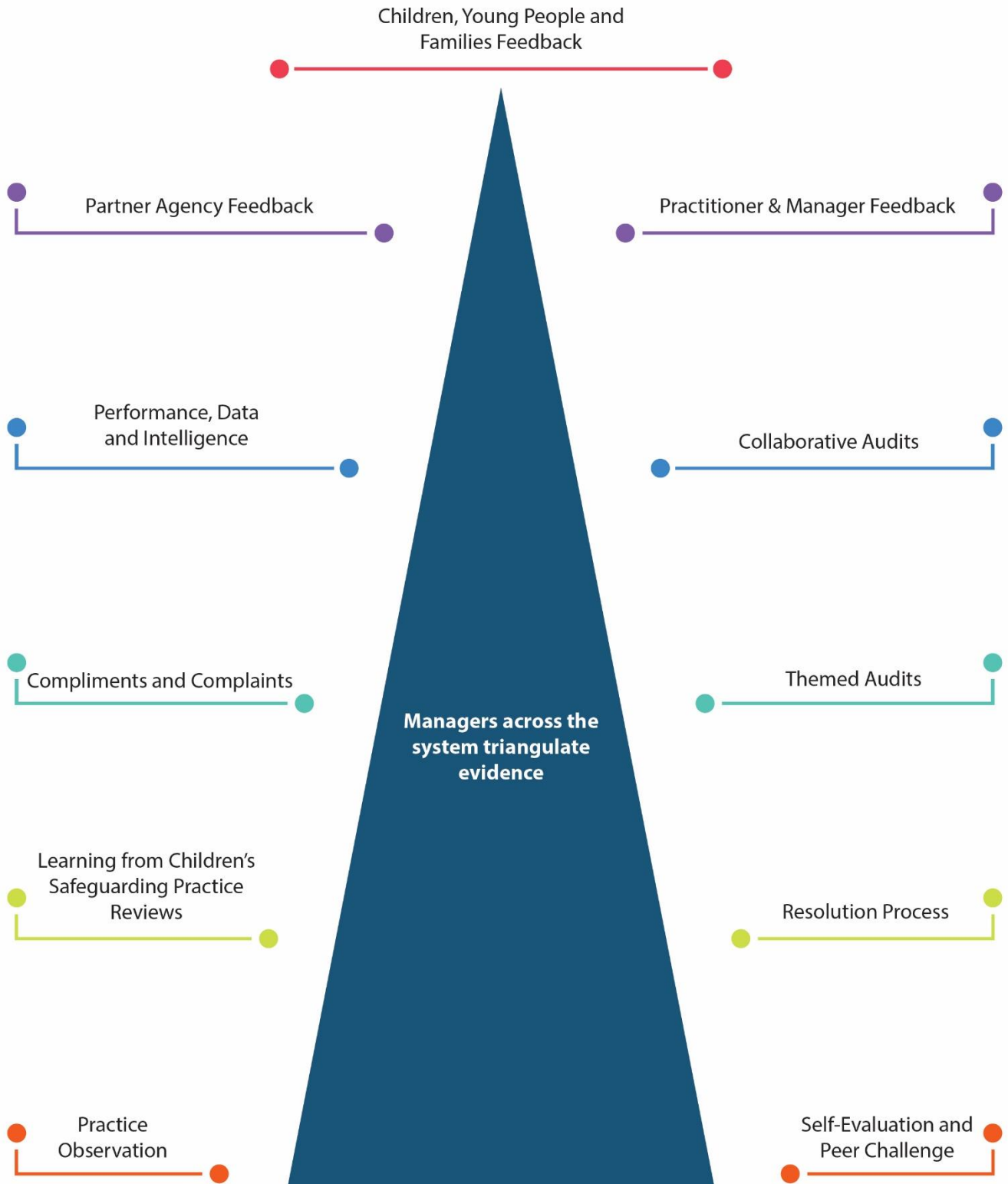
4. The Quality Assurance Framework

4.1 This Quality Assurance Framework combines both the quantitative performance data that we collect and the qualitative evidence that we gather from a range of sources across our Social Care system. The key components of this data are described below:

Quantitative	How much?
	How many?
	How often?
	How quickly?
Qualitative	How did we do?
	What did children, young people and their families think and feel about it?
	What did the front line think about it?
	What do frontline practitioners and managers think about it?
	What feedback have we had from partners?
Impact/Outcomes	What difference have services, strategies, interventions, and individuals made to the lives of children and young people?
	Is anyone better off and how do we know?
	How can we improve?

4.2 The ultimate aim is to accurately understand what the quality of practice is in Durham and what difference this is making to outcomes for children and families. The framework below illustrates the key sources of information that we use to do this.

Framework for a whole-system approach to assurance and performance management



4.3 The table below shows how each of the sources of information will be gathered and used to inform practice improvement.

Information source	How does this inform practice improvement?	Frequency
<p>Children, Young People and Families Feedback</p>	<p>We have a range of mechanisms across services to capture feedback from Children, Young People and their Families. Our Participation and Engagement worker is pivotal in ensuring that this work is strengthened and that we effectively use this feedback to influence practice and service development.</p> <p>Key themes from this feedback are reported quarterly in the Quality of Practice report that is presented to the Quality Improvement Board.</p>	<p>Monthly and quarterly</p>
<p>Practitioner & Manager Feedback</p>	<p>Feedback from practitioners is captured formally through the annual Organisational Health Check and DCC Staff survey.</p> <p>The Principal Social Worker hosts a forum with practitioners every 4 weeks where feedback is gathered. The Principal Social Worker takes responsibility for ensuring that this feedback is fed into the Raising the Bar Board so it can be acted upon.</p> <p>Practice Weeks are held bi-annually and consist of all Senior Managers undertaking visits and observations of practice to all areas of the service to hear about challenges and celebrate good practice. The feedback is reviewed by the Senior Management Team and agreed actions are communicated to staff via Team Manager and Practitioner Briefings.</p> <p>Head of Service Team Manager Briefings are held quarterly which provide an opportunity for Team Managers to feedback directly to the Senior Management Team.</p> <p>Head of Service Practitioner Briefings are held bi-monthly which provide an opportunity for practitioners to feedback directly to the Senior Management Team.</p> <p>Key themes relevant to practice improvement are considered at the fortnightly Children’s Social Care Management Team business meeting.</p>	<p>Annual</p> <p>Monthly</p> <p>Bi-annually</p> <p>Quarterly</p> <p>Bi-monthly</p> <p>Fortnightly</p>

Information source	How does this inform practice improvement?	Frequency
<p>Partner Agency Feedback</p>	<p>The Multi-agency audit programme provides an opportunity for partner agency feedback. The learning from these audits are discussed at the Embedded Learning Sub-Group of the DCSP and actions to improve practice are agreed and monitored.</p>	<p>Monthly</p>
<p>Performance, Data & Intelligence</p>	<p>Regular, routine performance information is shared with managers at all levels of the organisation to encourage the timely and proactive identification of issues and ensure oversight of any challenges faced. Data is benchmarked and trends, existing and emerging, highlighted. Practice improvement actions taken to address these issues are agreed and communicated. Business Critical Performance Indicators (PIS) and headline demand data is shared on a weekly basis.</p> <p>Senior Managers within the service are held to account and face challenge from colleagues, both within and outside of CYPS. Further areas for analysis/audit are also identified which also enable targeted practice improvement.</p> <p>Bespoke performance and data reporting also exists for specific aspects of the service and key partnerships as well as real-time information dashboards providing day-to-day management information.</p> <p>Areas for improvement identified in our monthly performance reporting cycle are followed up with deep-dive analysis, along with our service improvement priorities. This provides a clear focus on key topics and enables us to prioritise improvement actions. Impact Statements are produced following each deep-dive to capture and consolidate findings and learning and monitor the impact of our improvement actions. Next steps are then monitored through the QIB and reported back to the CYPS Performance Clinic.</p>	<p>Monthly</p>
<p>Compliments and Complaints</p>	<p>A summary of the learning from Compliments and Complaints are reported to the Quality Improvement Board where decisions are made about what actions need to be taken to improve practice or celebrate good practice.</p>	<p>Quarterly</p>
<p>Children's Safeguarding Practice Reviews</p>	<p>Safeguarding Practice Reviews will be led by the DSCP and all learning will be taken into the Embedded Learning Sub-Group.</p>	<p>Monthly</p>

Information source	How does this inform practice improvement?	Frequency
Practice Observation	All practitioners are observed by their line managers twice yearly. The learning from the observations is discussed directly with the practitioner and provide a rich source of feedback, both in terms of celebrating good practice and identifying areas of improvement.	Bi-annual
Collaborative Audits	There is a comprehensive programme of collaborative audits across the service. Case file audits are undertaken with the practitioner and it is expected to be a strength-based process, highlighting both good practice and areas for improvement. The outcomes of these audits are analysed by the Service Improvement Manager and reported quarterly to the QIB in the Quality of Practice Report. The learning from the audits are shared through the Locality Management meetings.	Quarterly
Moderation Process	<p>A moderation process led by Strategic Managers has been developed to ensure that there is a consistency of auditing across the system and that the expectations of good quality practice are maintained. Appendix 3 provides a summary of what we believe good practice looks like.</p> <p>Feedback from the moderation sessions will be provided at the start of each quarter to the collaborative evaluation audit group and to the Quality Improvement Board.</p>	Quarterly
Themed Audits	There is a programme of themed audits that is informed by performance information or feedback suggesting further understanding of practice is required, or where improvement activity has taken place and we want to understand whether or not it has had the desired impact. Learning is shared at the Social Care Quality Improvement Board and disseminated through Management meetings, Practitioner Briefings and the Raising the Bar Newsletter.	Quarterly

Information source	How does this inform practice improvement?	Frequency
Resolution Process	This process is well embedded and is used by the IRO service to ensure that there is effective challenge where necessary and that this challenge is ensuring that care planning for children and young people is effective, timely and making a difference to the quality of practice and that the experience of children and families is improved.	Monthly
Self evaluation and peer challenge	<p>The Strategic Manager for Professional Practice and Safeguarding is responsible for the continuous review of the Self-Evaluation document. This is shared with OFSTED on an annual basis and used to inform our strategic planning process.</p> <p>A range of regional peer challenge activity is undertaken to provide an external view of our practice. The learning from this activity is reported to the Senior Management Team and practitioners and managers through management meetings, practitioner briefings and the Raising the Bar Newsletter. Any improvement activity arising from it is tracked by the Quality Improvement Board.</p>	Continuous

4.4 Method of triangulating evidence

- 4.5 The above sources of information are all valuable and many will lead to direct actions being taken to improve the quality of practice. However, it is also important that there are opportunities for these sources of information to be viewed together so that we get a holistic and accurate understanding of the quality of practice.
- 4.6 The meeting structure in Appendix 1 has been designed to facilitate a “bottom-up” conversation about the quality of practice from front-line managers to the Chief Executive and to enable the triangulation of a range of both qualitative and quantitative evidence. These regular internal DCC meetings are also supplemented by discussion, scrutiny and challenge of our performance by partners in various partnership forums.
- 4.7 Through these conversations we will identify particular areas of practice where there is merit in undertaking a focused piece of analysis – a Deep Dive - to better understand practice and ensure a sharp focus on associated improvement activity.
- 4.8 A forward plan for Deep Dives will be maintained and this will be aligned to the existing Quality Improvement Board (QIB) work programme (see 5).
- 4.9 The thematic audit schedule will be continually reviewed to ensure it is aligned to the focus of any Deep Dives.

- 4.10 Where a particular issue is the subject of a deep-dive a Task and Finish group will be established with cross-service representation to support the work of the Strategy Team and ensure there is an absolute focus on the quality of practice throughout.
- 4.11 Impact statements (Appendix 2) are used as a key vehicle for ensuring that qualitative and quantitative data is brought together so that we fully understand a particular practice issue and, having addressed the issue, we fully understand the impact we have had on children and young people.
- 4.12 When an Impact statement has been produced a review date will be agreed by the QIB. At the point of review, the Impact statement will be used as the basis to start the review.
- 4.13 The diagram below shows the relationship between the CYPs performance clinic and the QIB:



- 4.14 As part of each monthly performance cycle Team Managers analyse and respond to the Monthly Performance report produced by the Strategy Team. Team Managers are asked to scrutinise the monthly performance data and Children’s Services Analysis Tool (ChAT). The performance clinics offer opportunities to discuss what’s working well in team and service performance, highlight what is worrying to teams and the system as a whole, whilst working on next steps and expectations to improve. Team Managers are expected to be clear about their own team’s performance, taking ownership and responsibility for this. Alongside their operations/strategic managers they will lead on how improvements, if necessary are required to improve performance. This should be done by asking critical questions through appreciative inquiry of colleagues, where team performance is meeting or surpassing expectations, so that learning is shared.

- 4.15 This scrutiny and challenge by senior managers is then continued in the Children’s Social Care Performance Clinic, as a summary of what’s working well, what we are worried about, and mitigating actions alongside any deep-dive analysis. The outcomes of the Children’s Social Care Performance and Outcomes clinic are presented to the CYPS Senior Management Team and subsequently to the Chief Executive Performance and Outcomes meeting.
- 4.16 There is then further oversight and scrutiny from Members, which is supported by a regular programme of scrutiny agreed by the Children’s Overview and Scrutiny Committee.
- 4.17 The effective challenge and scrutiny on a frequent basis will ensure that performance issues that are specific to individual teams can be addressed and supported in a timely way. It also provides a forum to identify potential systemic issues that require further exploration via a deep-dive, themed audit, or that need a service wide response. Additionally, it creates a forum to identify areas of best practice that need to be celebrated and shared widely to support the continuous improvement of practice.

5. Quality Improvement

- 5.1 The **Social Care Quality Improvement Board (QIB)** is chaired by the Head of Service for Social Care and is the primary mechanism for ensuring that the learning from the Performance meetings is captured and that both the audit programme and improvement plan are aligned to what we have learnt about the quality of practice.
- 5.2 In addition to the learning from the Performance and Outcome meetings, the learning from the below sources of information will be collated and reported on a quarterly basis to the QIB by the Service Improvement Managers, Safeguarding and Professional Practice:
- Themes from Audits (that have not been discussed at the Performance and Outcome meetings)
 - Children, Young People and Families Feedback (that has not been discussed at the Performance and Outcome meetings)
 - Safeguarding Practice Reviews
 - Peer Challenge activity
- 5.3 There is a single Quality Improvement Board Action plan which summaries all key areas of improvement activity across Children’s Social Care. Each individual service area has a detailed improvement plan to ensure that is aligned to this overarching plan. The plan is routinely monitored by the QIB to ensure that it is driving improvement in the quality of practice and improving outcomes for children and families.
- 5.4 It is vital that everyone throughout the organisation is clear about the learning from the process described above and that they have an understanding of their role in any associated improvement activity. The Safeguarding and Professional Practice team will attend service specific management meetings throughout 2021 to share key messages and continue to raise the profile of the quality improvement agenda.

Appendix 1: Meetings Structure

Meeting	Frequency	Who?
Demand and Business Critical PIs	Weekly	Head of Children’s Social Care Strategic Managers Strategy
CLA & Permanence Performance	Monthly	Team Managers Operations Managers Strategy Systems and Data
Families First Performance	Monthly (Locality)	Strategic Manager Operations Managers Team Managers Strategy Systems and Data
Quality & Review Team Performance (IROs)	Monthly	Strategic Manager Operations Managers Independent Reviewing Officers Strategy
Children’s Social Care Performance	Monthly	Head of Service Strategic Managers Operations Managers Strategy Systems and Data

Meeting	Frequency	Who?
CYPS Senior Management Team Performance	Monthly	CYPS senior leadership team: Corporate Director and Heads of Service Strategic Managers (where required) Strategy
Chief Executive Performance	Quarterly	CEO CYPS senior leadership team: Corporate Director and Heads of Service Corporate Director, Resources Head of Adult Care Head of Integrated Commissioning Strategy
Children's Overview and Scrutiny Committee		Members

Appendix 2: Impact and Evidence Statements

What is the Key Line of Enquiry?

What is/was the issue?

What have we done?

What impact have we had?

Next Steps

Action	Lead	Timescale

Supporting Evidence

Appendix 3

Contact/ Referral	<p>Contact/Referral showed clear understanding of when appropriate to refer to social care.</p>	<p>Contact/Referral on agreed format, containing all relevant information and is clear about the reason for referral</p>	<p>Contact/Referral responded to promptly (within 24 hours) and decisions taken are appropriate to identified need.</p>	<p>Decision making takes accounts of previous referrals/contacts.</p>	<p>What are we worried about: harm and complicating factors and what's working well: strengths and safety are recorded with specific behavioural detail.</p>	<p>Manager's risk analysis, scaling next steps and rationale for decision is evidenced and appropriate for referral information and history.</p>	<p>Evidence recorded on Liquid Logic (LL) to demonstrate child / young person allocated to qualified social worker promptly. A danger statement is created to guide next steps.</p>		
Basic Information	<p>LL recording is up to date, concise and analytical and provides sufficient detail to ensure effective safeguarding and focused planning at all times. There is a clear case summary on every file that is reviewed every 3 months.</p>	<p>LL records indicate that practitioner and managers have reviewed and quality assured records.</p>	<p>Danger statements, safety goals, and scaling are evident on file and address specific behaviours.</p> <p>Danger statements include the views of the child / young person about the impact of the worries on them (where possible).</p> <p>Safety goals include what the child / young person tells us they want to be different in relation to the worries.</p>	<p>Case recordings are written in plain, jargon free language that is compassionate and would allow a child / young person to understand their story.</p>	<p>Files for looked after children include a recent photo.</p>				
Assessment	<p>Assessment clearly identifies reason for the assessment, strengths and areas of concern, provides a detailed analysis and includes all members of the household. 'Absent' parents are included in the assessment unless there is a good reason not to.</p> <p>The assessment includes a chronology, genogram and is informed by the Harm Matrix (where appropriate).</p> <p>It explores the wider network of family and friends and what it is that they currently do to help.</p>	<p>The assessment is evidence based and uses the voice of the child / young person, multiple perspectives of the people who know the child / young person best (parents / carers, family network and key professionals) and observation to explore and analyse danger, worries, strengths and safety from different points of view</p>	<p>Assessment is written in plain, jargon free, compassionate language that is understandable to parents / carers and is written in a way that would make families want to work with us rather than feeling judged.</p> <p>Danger / worries, strengths and safety are described in behavioural detail and are clear about the impact on the child / young person</p>	<p>The assessment includes the views of key professionals who know the child / young person and parents best. When making reference to research, this is informed by evidence about how the danger, worries, strengths and safety is impacting on <i>this</i> child / young person in <i>this</i> family.</p> <p>The analysis includes danger / worry statement(s), safety / success goal(s) and matched scaling questions</p>	<p>Child / young person is seen alone (where appropriate), spoken to and their views and wishes recorded and reflected in assessment.</p> <p>The child's / young person's views and wishes are shared with the parents / carers / wider network and this information is used to inform the danger / worry statements, safety / success and the plan.</p>	<p>It is clear from the assessment what everyday life is like for the child / young person. There is evidence of direct work with the child / young person to understand their views, including use of communication aids, observation and speaking to the people who know the child / young person best (wider network and professionals) where the child / young person can't easily express their views</p>	<p>The assessment explores any diversity and disability issues and addresses these in the plan.</p>	<p>Assessments reviewed and signed off by Manager within timescales.</p> <p>Evidence of some quality assurance by Manager and follow up by practitioner where necessary.</p>	<p>Assessment is shared with parents / carers, child/ young person (depending on their age and understanding) in good time and their feedback is included.</p> <p>The outcome of the assessment is then shared with the parents / carers, child / young person and their feedback is gathered.</p>

Planning	<p>There is evidence to show that the Plan is making a positive difference to the child / young person's life.</p> <p>The plan is informed by the danger / worry statements, safety / success goals and scaling questions – this links back to the analysis in the assessment.</p> <p>Any bottom lines needed to ensure safety are clearly outlined and kept to a minimum</p>	<p>The plan shows evidence of a good understanding of the child's needs and how these will be met, within clear timescales.</p> <p>There is strong evidence that the child / young person and the wider network of family and friends have been involved in creating the plan, e.g. Family Network Meetings; Family Group Conferences</p>	<p>The plan clearly outlines the day to day actions that parents, carers and the network will undertake to ensure the child / young person's safety and wellbeing (and is not a list of services to attend or a written agreement).</p>	<p>There is strong evidence of the child / young person and family involvement in the development of the plan. This should include family network meetings; outlining family and friend support with specific actions for supporting the child / young person's safety and wellbeing.</p> <p>There is evidence to show that the plan has been tried and tested over time and that this is making a positive difference to the child / young person's life</p>	<p>The plan is progressing and meeting the child / young person's needs. Where there is evidence the plan is not meeting the child / young person's needs, the reasons for this are explored and changes made if needed.</p>	<p>The case file recording tells the child / young person's story and evidences progress.</p> <p>The child / young person has a words and pictures explanation of their plan.</p>
Review	<p>Child and family plan has been reviewed in accordance with procedural requirements and is responsive to the child / young person's changing needs.</p> <p>The danger / worry statements, safety / success goals and scaling questions continue to guide the review of the plan</p>	<p>Reviews are convened to allow maximum attendance of family and professionals. Where this is not appropriate, views are sought and feedback is given regularly.</p>	<p>Children / young people are actively involved where they have the ability to do so, including attending meetings or chairing their own reviews.</p>	<p>Records of reviews are comprehensive and provide detailed analysis of the issues and actions that are required to meet outcomes, including timescales.</p> <p>Minutes of reviews are detailed and include an analysis of what is working well and what still needs to happen to move towards greater safety / success for the child / young person.</p> <p>The plan is updated to include any changes to actions by the parents / carers / wider network / child / young person needed to strengthen the plan</p>	<p>Chronology is up to date and analytical. It shows all keys points in the child / young person's life and is easy to follow.</p>	
Management Oversight	<p>Supervision has been taking place in accordance with supervision policy and is responsive to social worker's needs.</p>	<p>Supervision is reflective, analytical and evidences issues which have been raised. It sets clear parameters regarding required actions, contingencies and outstanding work, addressing timescales effectively.</p>	<p>Supervision reviews actions of previous supervision and these are completed.</p>	<p>Records up to date and fit for purpose.</p>	<p>There is evidence of reflective tools such as Appreciative Inquiry or case mapping.</p>	