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**THE LUTON QUALITY ASSURANCE & LEARNING FRAMEWORK**

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Children, Families and

Education Directorate

Department: Children Families Education

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**Putting children, young people and their families at the heart of everything that we do**

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**In Luton we are committed to the following principles which inform the work with children, young people, their families and carers:**

* **Engage with families** by working alongside parents, children and young people and seeking their consent and agreement;
* **Work to families’ strengths –** especially those of parents and carers and take the time to understand their needs fully. Parents tell us that they are motivated by having goals that reflect their family priorities;
* **Focus on preventing problems** before they occur and offer flexible responsive support when and where it is required;
* **Build the resilience** of parents, children, young people and communities to support each other;
* **Work together across the whole system** aligning our resources so we can best support families and do what needs to be done when it needs to be done;
* **Base all that we do on evidence** of both what is needed and of what works and be brave enough to stop things that are wrong;
* **Be clear and consistent about the outcomes** we expect, and judge what we do against them.

There are several factors that are essential to deliver effective early intervention:

**An open, honest and transparent approach to supporting children and their families**

Parents are usually the best people to understand their child’s needs; however, parenting can be challenging. Parents may need support when they request it, **asking for help should be seen as a sign of responsibility rather than parental failure**. Parents tell us that support works well when they are respected and listened to by practitioners.

In the majority of cases, it should be the decision of the parents when to ask for help or advice but there are occasions when practitioners may need to engage parents actively to help them to prevent problems from becoming more serious.

All practitioners should seek to work collaboratively with families, discuss any concerns with them and ensure that they are involved in decision making.

It is important they acknowledge and respect the contribution of parents and other family members.

**Earlier, solution-focused and evidence-based interventions**

Enabling children and their families to receive appropriate support in a timely way can lead to better outcomes for children and potentially prevent further escalation.

We will all work with families when needed, to help them to identify the things they want to change and the support they need.

The most effective support is tailored to the families need and provided at the minimum level necessary to ensure the desirable outcomes are achieved, with as little disruption to family life as possible.

**A multi-agency/disciplinary approach to assessment, support and intervention**

Safeguarding and promoting the welfare of children is the responsibility of everyone in Luton who works or has contact with children and their families.

The multi-agency/disciplinary approach ensures that children and families are understood, so that they receive the right support and practical help in a coordinated way, when they need it.

Partners and professionals who work with children and their families should, usually with parental consent, consult one another, share information and work together to ensure that the child and their family receive the most appropriate and effective support.

**A confident workforce with a common core of knowledge and understanding about children’s needs**

Appropriate, effective and timely support for children and families could not be achieved without the professional judgement and expertise that all practitioners working with children bring to their role.

We will support individuals and organisations in Luton to develop confident practitioners who can work in an open, non-judgmental way with families to enable them to make choices and changes.

Our aim is always to build resilience in children and their families. We want them to believe in and lead the changes to alleviate their difficulties for the remainder of their lives.

**Our Practice**

In Luton we all believe that every child should have the opportunity to reach their full potential and that children are best supported to grow and achieve within their own families.

**Luton’s Practice Framework:**

* We will use **conversations** to build relationships with children and their families, we will actively listen to both their strengths and what they need help with. We will create the opportunity to have conversations with our professional networks to help us provide the right support at the right time.
* We will practice with respectful **curiosity** to help us understand the lived experience of children and young people who need our help. We will be curious about the families past experience. We will encourage curiosity across our professional network, helping us to build strong local relationships.
* We will practice with **courage**, not being afraid to fail and try new things supporting our children and families through change, modelling courageous conversations to challenge without blame. We will use courage to seek feedback on our practice and create a culture of safe challenge.
* Our practice will be **considerate,** respectful of diversity and difference, we will practice with care to ensure the best outcomes for our children and their families.
* Luton’s practice framework will help practitioners to use conversations both improving and using their skills and knowledge. The practice framework will help us to use a common language, it will promote a clear, fair process that we can all understand and use.

By working together, we will develop flexible services which are responsive to children’s and families’ needs and provide the right level of intervention at the right time. This will support a shift of focus away from managing short-term crises and towards effective intervention and support for children and young people and their

Families at an earlier stage.

We are committed to the following principles which inform the way we work with children and families:

* **Wherever possible all children’s and families ‘needs will be met by universal services.**
* **As soon as any professional is aware that a child has any additional needs he/she will talk to that child and their family and offer advice and support to meet that need.**
* **Families will be empowered to identify their own problems, needs and solutions. In most cases, outcomes for children will only be improved by supporting and assisting parents/carers to make changes.**
* **We will offer support and services to help families find their own sustainable solutions. Once improvement is made services will reduce or end so as not to create dependence.**
* **Our aim is always to build resilience in children and families and the capacity to overcome their own difficulties for the remainder of their lives.**

**‘Luton CARES’ is a corporate value to Luton Borough Council, we will work collaboratively across the partnership to benefit the needs of Children, Young People and families.**

**Advice and consultation**

A consultation can take place between professionals, either face to face, by telephone or through virtual means, for the purposes of gaining or providing information or for discussing collaboratively on something. This can ensure that the right response is given at the right time and that the best course of action is followed.

The GDPR provides a number of bases for sharing personal information. It is not necessary to seek consent to share information for the purposes of safeguarding and promoting the welfare of a child provided that there is a lawful basis to process any personal information required. The legal bases that may be appropriate for sharing data in these circumstances could be ‘legal obligation’, or ‘public task’ which includes the performance of a task in the public interest or the exercise of official authority. Each of the lawful bases under GDPR has different requirements.15 It continues to be good practice to ensure transparency and to inform parent/ carers that you are sharing information for these purposes and seek to work cooperatively with them.

Principles of consultation

* Consultation should be open to all agencies who work with children, young people and their families
* Consultation should take place when there is a clear benefit to the child or young person and their family
* Consultation is an important part of helping agencies and practitioners to work together to achieve the best possible outcomes for children and young people
* Consultation is a two way process and demonstrates an acknowledgement of different but equally valid knowledge and expertise
* You should be able to explain to the family why you feel it would be helpful to consult with other agencies. Families should whenever possible be aware of and involved in consultations and informed of the outcomes and decisions taken as a result
* Information should be shared in the spirit of openness, transparency and honesty between practitioners, the child and their family. However it is important that you have due regard for the principles of confidentiality.
* Consultations may be recorded pending on the significance of concerns raised to ensure clarity and to enable you to evidence any decisions that have been made.

Contents

[Summary and quick guide 7](#_Toc101443786)

[What does the QA & Learning Framework cover? 8](#_Toc101443787)

[What do we mean by Quality Assurance & Learning? 8](#_Toc101443788)

[How our quality assurance activity leads to a continuous cycle of service improvement? 9](#_Toc101443789)

[What are our methods of Quality Assurance? 9](#_Toc101443790)

[Our QA & Learning Principles 10](#_Toc101443791)

[How to use this framework 12](#_Toc101443792)

[Our Audit Process 13](#_Toc101443793)

[What do we mean by Collaborative Audit of a child’s file? 13](#_Toc101443794)

[The Collaborative Audit Process 13](#_Toc101443795)

[The Quality Assurance Audit and Practice Improvement Team 14](#_Toc101443796)

[Team Managers 14](#_Toc101443797)

[Hints and Tips for Collaborative File Audits 14](#_Toc101443798)

[Heads of Service 15](#_Toc101443799)

[The Moderation Process 15](#_Toc101443800)

[Performance & Accountability 15](#_Toc101443801)

[**What Does Good Look Like?** 18](#_Toc101443802)

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# Summary and quick guide

Luton Children, Families & Education Directorate is clear about its journey to good and through the establishment of a strengths and relationship based practice framework. This will ensure our children receive the highest quality services and standards of practice which deliver the best possible outcomes for them, their families and carers.

Our programme of audit activity aims to:

* Provide assurance that practice positively influences outcomes for all vulnerable children and young people;
* Take into account the requirements of inspection bodies;
* Involve all children’s social care staff in continuously seeking to improve their practice
* Ensure consistency of practice across children’s social care and specifically the use and deployment of our Signs of Safety practice framework;
* Embed a culture of learning, confident practice and feedback;
* Identify areas of practice improvement to inform the performance conversation & appraisal process

Our Quality Assurance (QA) & Learning Framework enables us to robustly relate performance management data with quality assurance with three simple interrelated questions. *How much did we do?* (Service activity), linked to *how well did we do it? (*Quality) for families and most importantly, with all this effort *did we make a difference to children lives?* (Is anyone better off?).

Measuring the impact of our work at all levels across children’s services is crucial in closing the quality assurance loop and demonstrating the difference our services make to improving children’s outcomes. Consequently, this QA framework underpins the Luton Practice Framework and Expectations. The Luton Practice Framework establishes a strength/relationship based approach detailing expectations for each part of the service ensuring everyone is clear about what good practice looks like and understands what is expected of them as they carry out their work with children and families.

The Quality Assurance (QA) & Learning Framework enables us to robustly relate performance management data, with quality assurance, using three interrelated questions. *What did we do?* (service activity) *How well did we do it? (*quality) for our children and families, and most importantly, *What difference did we make to improve children and families lived experiences?*

# What does the QA & Learning Framework cover?

This Quality Assurance (QA) Framework outlines the five key areas of quality assurance, which collectively contribute to our understanding of practice within the Children, Families & Education Directorate. It is an important support and reference tool for managers and practitioners alike.

1. All case auditing is undertaken using a strength based collaborative approach which interrogates essential elements of our practice framework and expectations whilst emphasising learning for the worker and system.
2. The system aligns core data with quality assurance, enabling effective and meaningful monitoring. The data provides a strategic overview of performance alongside monthly performance data, performance review and workforce data.
3. Feedback from children, families, staff and other professionals provides for accountability by acting as a critical friend to the system through answering the question “so what?”
4. Practice Leadership provides underpinning support throughout the system from induction to standards of practice
5. Practice Review keeps the system under review. *Finally, all these aspects are analysed together to report on what difference we are making to children, young people and families.*

The Safeguarding, Quality Assurance, Audit and Practice Improvement service oversee and monitor the impact of the framework. The QA Report will continue to bring together all work into one place so key learning is identified and the impact of agreed actions are monitored through the Performance & Accountability Cycle.

# What do we mean by Quality Assurance & Learning?

Quality assurance is more than just routinely counting numbers, meeting targets and periodically carrying out audits. 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 must to be owned by everyone in the organisation, managers at all levels should understand and routinely undertake quality assurance activity on their individual supervisees, teams and service areas. Most importantly, we need to get behind data trends to fully understand the lived experience of those receiving a service from us.

Learning organisations use a range of methods to gather both quantitative and qualitative information from a variety of sources, to measure and analyse the aggregated information against an agreed set of standards.

Measuring practice is only purposeful if the loop is closed and the organisation uses the learning to plan and deliver service improvements**.** As stated above, the learning from our quality assurance activity will be drawn together into a monthly report and reviewed within our Performance and Accountability Cycle.

# How our quality assurance activity leads to a continuous cycle of service improvement?

Quarterly report highlighting themes and recommendations

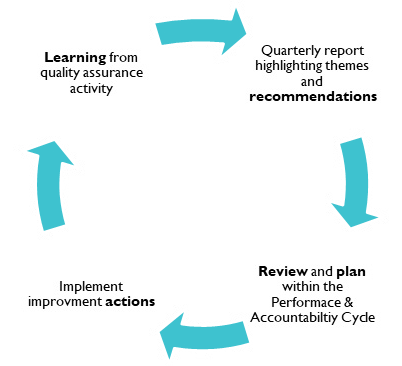
* Quality assurance is more than just routinely counting numbers, meeting targets and periodically carrying out audits

Implement improvement actions

* 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.

A range of existing documents, tools and processes underpin our QA Framework

* Children’s Improvement Plan
* Audit Schedule
* Audit Tool
* Luton Practice Framework & Expectations
* Performance & Accountability Cycle
* Luton Supervision Framework
* Social Work England Standards
* Professional Capability Framework (PCF) and Knowledge and Skill Statement (KSS)



Learning from quality assurance activity

Review and plan within the Performance & Accountability Cycle

# What are our methods of Quality Assurance?

A combination of quantitative and qualitative information allows us to measure standards and outcomes:

* Collaborative Audits – (core & thematic). The strength of collaborative audits is that they allow reflective discussion which supports greater learning
* Performance data
* National & local Inspections
* Peer reviews
* Child Safeguarding Practice Reviews
* Internal Safeguarding Reviews
* Practice Week
* Feedback from Independent Reviewing
* Officer/Child Protection chairs – midway reviews
* Internal Panel Processes such Care & Resource, Fostering & Adoption, Case Progression Panel
* Feedback from children, parents and carers
* Children in Care Council
* Care Leavers Forum
* Complaints & compliments
* Staff feedback. For example:

Exit interviews, Keep in Touch meetings

* Supervision, Probation, Appraisal
* CAFCASS & Legal feedback from proceedings
* Multi-agency partner feedback

# Our QA & Learning Principles

Practitioners and their managers work within the framework of The Children Act 1989 and must adhere to all associated statutory guidance.

1. “It is a child’s right to a family life. This means we will work in partnership with our children’s family and friends to help them do their best for all our children. We strongly believe that children belong in natural networks with people they know and who will love them and keep them safe. We expect all practitioners and managers to prioritise this value, and to help children have safe permanent relationships as a basic entitlement. Our Practice Framework and Expectations articulates the key theories, values, principles and approaches that inform the way we work with children and families in Luton and how we work together as professionals. It describes the way we do things in Luton and why we do them that way. It provides a structure through which everyone can be part of working together to achieve our shared outcomes for children and families.
2. Luton has adopted a strength/relationship based approach as its practice framework. ‘Nothing about us without us’ - emphasises the need to foster open, honest and respectful relationships with families. This means social workers and other professionals must have open and honest conversations with families in a compassionate and respectful way. Our practitioners believe that it is only through trusting relationships between families and themselves that change is possible. The 4C’s: Conversations; Curiosity; Courage and Consideration form part of our Practice Framework and Expectation principles about how we work with children and families and are directly aligned to support this approach. The full practice context of the 4 C’s can be found in our Practice Framework and Expectation document.
3. Relationship based practice, requires a social work environment that supports practice to be as good as it can be. Every social worker and manager has to feel that they can do their best work with the backing of their leaders. Our QA Framework supports a learning culture, to allow our practitioners to adopt the stance of reflection, learning and improvement to ensure the best outcomes for our children.
4. Our work is underpinned by strong and consistent management oversight of practice. This comes in many forms, though at the core is a basic requirement that a robust case management system is in place which provides data on demand, throughput and timeliness on all statutory basics. Such quantitative data is complemented by collaborative reviews of practice, where managers and practitioners adopt monthly reflective sessions about the impact of our intervention on children’s outcomes. This is a coaching exercise with a focus on learning and improvement, rather than blame and deficit. Themed reviews of practice are commissioned as required.
5. Case records are required to be up to date at all times. There are additional systems in place for managers to review all open work, specifically where we have commenced or are commencing legal proceedings or children have a child protection plan or lengthy in need plan.
6. We operate an open door conversation policy where all practitioners are encouraged to discuss practice and talk with managers regularly (see [Luton Supervision Framework](https://www.proceduresonline.com/luton/childcare/g_supervision.html?zoom_highlight=supervision+Framework))
7. Our starting point in practice is that there will always be ways to do what we do better. We will seek feedback from each other and from families regularly and consider that without this, we have no real understanding about the difference we are or are not making.
8. We will ask for feedback from families in our monthly collaborative reviews of practice, and will meet them face to face if they have reason to complain. We will ask managers to report on family feedback in their monthly reports. We strive to learn from all reviews of our practice and seek out additional opportunities to do so – for example from Child Safeguarding Practice Reviews published, from inspection reports and from the variety of forums where we engage with children and or their parents/carers.

# How to use this framework

We all have a role in ensuring our work remains of a high standard and continues to meet the needs of the children, young people, and families we are supporting. Through our quality assurance activities, together, we will demonstrate that we understand ourselves and the difference we are making to the lives of children, young people, families and carers through good use of data, information, family feedback, compliments and complaints - always asking how we can make things better and being curious and innovative in our practice.

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| As a **Practitioner,** I will work with families in accordance with Luton’s Practice Framework and Expectations and uphold our values and guiding principles in my practice.  When I am unsure, I seek advice from colleagues and when I am concerned about practice I will report this.  I embrace learning and the opportunity to develop my practice.  When I am involved in a collaborative case audit, I will complete the self-analysis prior to meeting with the auditor. With the support of my manager I will take responsibility for progressing relevant actions from the audit to ensure children’s best outcomes. | As a **Team Manager**, I maintain regular oversight of children’s files, via audits and supervision to ensure recordings are up to date, assessments are evidenced based and demonstrate how practice improves the child’s safety, lived experiences and positive developmental outcomes.  I ensure practitioner’s work remains of a good standard by undertaking practice observations and providing reflective feedback. I provide feedback to workers on areas to develop and ensure concerns are actioned in a timely manner when safe practice may be compromised. I provide an overview of the performance of my team in the monthly performance and accountability report which enables me to share good practice and highlight any areas of improvement. | As a **Leader**, I lead and embrace change with a sense of confidence, optimism and creativity, seeking to understand the challenges and focusing on the opportunities, together as one complete children’s service. We won’t always get things right first time, however we embrace opportunity to reflect and learn, remaining calm and adaptable. I am a confident leader of system learning. I am visible and approachable, seeking and listening to other people’s thoughts and showing that we take into account different perspectives when making decisions and taking action to improve children’s outcomes. Our values and principles are embedded in every aspect of our work, I lead by example.  Our policies and procedures are transparent, consistently led by us and always improving the quality of our practice. This ensures our workers are supported by policies and procedure |

# Our Audit Process

* The annual schedule of auditing activity will routinely contribute to measuring core areas of practice to ensure the principles and bottom lines of our Practice Framework and Expectations is embedded. The themed audits are informed by quality assurance and improvement activity along with the Luton Children Improvement Plan.

## What do we mean by Collaborative Audit of a child’s file?

Collaboration between team manager and allocated worker is a reflective and learning audit. It is a partnership that supports the social worker to reflect with their manager on the positive impact of our intervention work with children as well as areas where we need to improve to ensure their best outcomes in a timely manner. The Practice Framework and Expectations provide a baseline of ‘bottom lines’ related to practice standards in all areas of the child’s journey. The reflective and learning audit process should use the bottom lines as a guide and judgment criteria as discussed below. The reflective discussion will also focus on what difference can we evidence from our intervention to improving children’s lives in their immediate, interim and longer term future outcomes.

## The Collaborative Audit Process

**Judgement**:The auditor and practitioner(s) are required to provide a judgement for each section of the audit, using the Practice Framework’s as a guide. Children’s files that do not evidence the ‘bottom lines’ should be graded as inadequate. The final grading should consider both evidence seen by the auditor in reviewing the file alongside the practitioner and information gained from the reflective discussion with the practitioner. The auditor should record their view, using the Ofsted grading below:

|  |
| --- |
| **Ofsted Grade** |
| Inadequate |
| Requires improvement |
| Good |
| Outstanding |

**Feedback:** Obtaining feedback from children and families we work with, is essential to the auditing process and reflects our strength/relationship based practice approach - ‘Nothing about us without us’ and the need to foster open, honest and respectful relationships with families and other professionals, is aligned with our 4 C’s, principles, as part of our Practice Framework and Expectations.

Roles & Responsibilities?

Team Managers will audit one child’s file per month; Moderators, (HoS and Quality Assurance Officers) will moderate one child file audit per month.

## The Quality Assurance Audit and Practice Improvement Team

* The QA Audit Team will identify a child’s case file (open for a minimum of four weeks)
* Team Managers, allocated social workers and HoS will be notified of the child’s LCS number by the QA team.
* The Collaborative audit process will be started on LCS/EHM on the 7th of each month and allocated to the auditing Team Manager.
* Practitioner self-analysis will be assigned to the allocated social worker

## Team Managers

* Team managers will complete collaborative primary audits with the practitioner within 10 days.
* The child’s file audit should account for the whole child’s journey, but with specific focus on the last six months.
* Feedback must sought by the auditing manager from the child/young person (if age appropriate), parents/carers during the collaborative audit process and recorded on the audit form on LCS.
* The auditor should record any actions to address bottom lines and to ensure that the child’s file and our intervention work is of a ‘good’ standard and thus having a positive impact for their safety and overall developmental outcomes.
* Once completed, the primary audit will be finalised and sent to the QA team LCS tray, the audit form will then be sent to the moderator.
* At this point if any audit is identified as Inadequate, a notification will be sent to the Head of Service and Director for Operational Safeguarding for their oversight.
* The auditor will ensure immediate tasks are actioned within 5 working days and where this is not possible a realistic time frame should be agreed. Case direction resulting from audit and tasks are recorded as Management oversight notes for accountability.
* The impact of the actions identified should be reflected upon in supervision, specifically related to the child’s safety and outcomes.

## Hints and Tips for Collaborative File Audits

The allocated social worker completes the self-analysis template prior to meeting with the auditor

Prepare well by understanding where key documents are recorded and what these say

Contact the worker early to set a meeting date for the audit

Contact the worker early to set a meeting date for the audit Contact the worker early to set a meeting date for the audit

Complex work, for it to be a meaningful process practitioner needs to take time

The final audit judgement needs to be informed by the evidence available on the child’s file alongside the parent/child feedback

**Remember COLLOBORATION is key!**

## Heads of Service

* Heads of Service are responsible for reviewing the audit findings and actions and must be satisfied areas of improvement are addressed to ensure outcomes for children are not impacted. The case up to the expected practice standards within **five** working days of the moderation.
* Heads of Service are responsible for ensuring the plan for improvement reviewing the audit findings and recommendations of any audit graded inadequate. The relevant Head of Service must be informed of all audits or moderations graded inadequate, on the day audit completed with a clear plan of action to keep the child safe.
* Head of Service must update the QA Team when all identified actions have been completed and the case now reflects the expected practice standards.

# The Moderation Process

* All primary audits will be moderated. Moderators have 10 working days to complete the collaborative moderation.
* Once primary audits have been finalized by the auditor, the QA team will send to Moderators. These will be allocated to the LCS/EHM tray.
* A further review of the case and collaborative discussion between moderator and auditor to agree shared expectations about best practice, thereby generating conversations between managers at all levels.
* Moderation will be completed within 10 days of initial allocation. This will enable the audit cycle to be fully completed each month and provide a timely learning and improvement opportunity.
* The Moderator will identify any additional recommended outcomes/actions necessary to bring the child’s file up to the standard of ‘good’ practice.
* The Moderator will then finalize and the moderation will be quality assured before final QA comments are added by the QA Audit and Practice Improvement Team Manager.

## Performance & Accountability

The Quality Assurance Team will select several audited and moderated cases to present to the Senior Leadership Team for overview and comment.

QA audit and practice improvement team produce a monthly audit report and a bi monthly and performance and accountability report.

The Quality Assurance Team collates learning to inform practice improvement and

work closely with the Corporate Learning & Development Team and Children’s Partnership Board to contribute to the Learning & Development Strategy.

Reports will be shared with Service and Team Managers through the Performance and Accountability cycle

Building a shared understanding of quality

The collaborative audit between the auditor and the allocated social worker should be an inclusive, constructive and positive learning process. The auditor, the allocated social worker and Moderator can seek support and guidance from the Quality Assurance & Practice Improvement Team Manager at any stage of the audit and moderation process should there be questions about judgements and rationale to support these.

Closing the loop

Integral to embedding learning and improvement from audit is the process of closing the loop. Closing the loop refers to the process of ensuring the actions identified by the primary auditor and moderator have been completed.

As mentioned above, primary auditors will identify actions for completion within 5 working days. The moderator will review the child’s file and provide their findings which include the impact of any actions completed following the primary audit. Their judgement will accord to their findings and additional actions may be identified.

When the primary audit and moderation are complete, the actions from both stages of the audit pull through to a ‘closing the loop’ form on LCS/EHM. The form is assigned to the Team Manager who is accountable for signing off all actions as complete. The closing the loop forms are tracked by the QA Audit and Practice Improvement Manager with weekly notifications to Team Managers and Heads of Service to ensure learning and improvement from audit impacts on outcomes for children. Completion of ‘closing the loop’ is incorporated into the QA Audit and Practice Improvement Performance and Accountability reporting.

Audit findings inform the training and development opportunities that are commissioned and developed for practitioners. In addition, audit findings enable bespoke QA Improvement support to be targeted.

Good practice identified via QA and audit activity is shared with practitioners, managers and Heads of Service to able learning from good practice to take place. The work of individual practitioners and managers is recognised by nomination for attendance at the DCS Celebration Breakfast.

Audit review process

Built in to the audit process is a dip sample review of previously audited files which takes place three months after the moderated audit has closed. This process identifies the impact of the closing the loop actions on learning and improvement, good practice observed and any areas for further improvement to achieve good outcomes for children and audit judgements.

COLLABORATIVE AUDIT & MODERATION FLOW-CHART

**Collaborative Audit sent to auditor and allocated worker on 7th of every month**

**Moderators are aware of the child file to be moderated on the same date.**

**The audit must be completed in 10 working days.**

**All Managers Audit one child’s file a month: There are approximately 17 managers in the Audit Pool.**

**Learning Bulletins highlighting learning, trends, areas of strengths and challenge, are completed on a monthly basis and fed into strategic meetings (CIB/PAM).**

**Audit Team data on the Themes, Trends, Strengths & Challenges will be available on Qlik once this has been created. This info is currently held on excel sheets.**

**Team Manager continues to review progress of primary actions and record on LCS/EHM until all actions have been completed and Team Manager places a note on LCS/EHM.**

**Service Manager assures that all actions have been completed.**

**Moderator and Primary auditor review the original audit and complete moderation on LCS/EHM and record any additional actions on LCS/EHM.**

**The moderation must be completed in 10 working days.**

**Audit Team send Closing The Loop emails to Manager/Deputy/Practitioner & Service Manager with the list of actions to be completed 5 working days at the close of the audit wndow.**

**Manager/Deputy/worker review progress of actions and records progress on LCS/EHM. Service Manager assures all actions have been completed.**

**The relevant Head of Service & Service Director MUST be advised of all audits/moderations graded inadequate, on the day the audit is completed. Where tasks have been identified of an immediate nature, the Team Manager must ensure that these are actioned within 24 hours.**

**Allocated worker completes self-reflection on LCS/EHM and sends to the manager on LCS/EHM.**

**Auditor and worker complete the audit and identify corrective actions and place a record on LCS/EHM.**

**What Does Good Look Like?**

**Contact/ Referral**

Contact / Referral gives no indication of areas of strength and safety for family (it is highly unlikely that a child/family has no strengths to be noted)

Consent is missing when it would be reasonable for it to have been obtained or rationale for not obtaining consent is not documented.

No evidence to indicate consideration been given to previous contacts/referrals

Contact / Referral responded to promptly (within 24hours) and decisions appropriate to identified need.

Indication that referrals/contacts reviewed.

Evidence recorded on LiquidLogic to demonstrate case allocated to qualified social worker promptly and clear expectations of what is required are recorded.

Required Improvement

Looks Like…

Good Looks Like…

Contact / Referral showed clear understanding of when appropriate to refer to social care.

Contact / Referral on agreed format, containing all relevant information and clarity with regards to reason for referral.

Decision making takes accounts of previous referrals / contacts.

What are we worried about: harm and complicating factors and what’s working well: strengths and safety are recorded with specific details about behaviours.

Manager’s risk analysis, scaling, next steps and rationale for decision evidenced and appropriate for referral information and history.

Contact / Referral acted on promptly (within 24 hours) and appropriately

Contact / Referral on agreed format, but not all relevant information recorded.

Contact / Referral gives some indication of areas of strength and safety for family but lacks details regarding behaviours.

Contact / Referral gave enough evidence that it was appropriate to refer to social care.

Inadequate Looks Like…

No risk analysis evident and rationale for decision making not recorded

Contact /Referral had some gaps with vital information missing or should have been made earlier.

**Basic Information**

Files for looked after children include a recent photo.

Case recordings are written in plain, jargon free language that would enable a service user to understand their story.

Danger statements, safety goals, and scaling are evident on file and address specific behaviours.

Good Looks Like…

LL recording is contemporaneous, concise and analytical and provides sufficient detail to ensure effective safeguarding and focussed planning at all times.

LL records indicate that practitioner and managers have reviewed and quality assured records.

LL recording is out of date, unfocussed, and does not provide

sufficiently clear information to support decision making.

Required Improvement

Looks Like…

Case file recording is of sufficient quality to enable the file to be easily understood by the child / young person if they were to access their file.

LL records provide some evidence of quality assurance activity on records

LL recording is contemporaneous, concise and sets out clear plans, which are measureable and understandable

Danger statements, safety goals, and scaling are evident on file but not clear and concise addressing specific behaviours

Inadequate Looks Like…

Case file recording is difficult to understand, inconsistent, or

incomplete

No evidence of quality assurance activity on the child’s LL records

Danger statements, safety goals, and scaling are not recorded on file

**Assessment**

Assessment uses jargon (i.e. developmental milestones, inappropriate behaviour, significant harm) and is not written in language that is plain and clear to parents/carers.

Some evidence of direct work with the child (using developmentally appropriate tools)

Outcome of the assessment is shared with parents / carers and child / young person (appropriate to age and under- standing). Feedback is sought.

Assessment shared with parents / carers promptly and feedback sought.

Assessments reviewed and signed by Manager within timescales.

Evidence of some quality assurance by Manager.

Diversity and disability issues addressed and support to address any challenges arising out of diversity and disability.

Assessment demonstrates a sense of the child. There is evidence of direct work undertaken with the child to ascertain what life is like for them.

Child seen alone (where appropriate), spoken to and their views recorded and reflected in assessment.

Assessment includes some analysis regarding multi- agency context and this information

is used to inform decision making.

Assessments are written in plain, jargon free language that is understandable to parents / carers & children with explicit explanations of worries / danger, strengths and safety. Identifies whether appropriate to work as CIN/CP or NFA .

Assessment is of a good quality and identifies a clear plan with relevant analysis of strengths, needs and risk.

Assessment clearly identifies strengths and areas of concern, provides a detailed analysis and includes all members of the household.

Good Looks Like…

Assessment identifies some strengths and safety and areas of concern, analysis is limited and may not include key members of the household (including fathers and partners)

Assessment identifies a plan which does not fully address risk/need.

There is some consideration of family/friends network support, but this not fully explored to enlist their help and support for the child/family

Assessment includes some information from other agencies

Evident the child has been seen and spoken to but there is not a clear record of their lived experience, wishes and feelings, or what they say they need to feel safe

Assessments reviewed and signed by Manager within timescales

Diversity and disability issues considered but not deeply explored

Required Improvement

Looks Like…

Assessment uses some jargon and is not fully written with the family as the intended readers

Assessment and outcome of assessment shared with parents/ carers and child/young person (appropriate to age and understanding)

Assessment not shared with family. Assessment outcome not shared with family.

No evidence of diversity or disability issues having been considered.

Assessments not signed off by Manager.

No evidence to suggest child seen, or where they have been seen, no evidence to suggest that they have been spoken to on their own.

No multi-agency context

to referral included, despite clear indication that other agencies are involved.

Doesn’t identify if CP/CIN appropriate

Assessment does not outline a clear plan.

Risk to child not considered.

Does not include all members of family.

Inadequate Looks Like…

Assessment does not iden tify strengths and areas of concern and provides little or no analysis.

**Planning**

There is evidence to show that the Plan is making a positive difference to the child’s life.

Recording on LL case file is limited/ absent with respect to key issues, including visits to the child

Pathway plan (where appropriate) is in place

Case file recording meets Luton Practice standards.

Social worker has visited in accordance with procedure/ statutory timescales and there is evidence that the child / YP has been seen on their own

Recording indicates that the plan is having some positive impact on the child and family; consideration is giving to amending the plan to better meet the child’s needs

There is evidence to show that the child/ YP, their parents/ family, and carers have been provided with a copy of the care plan.

There is some consideration of family/friends network support, but this is not fully explored to enlist their help and support for the child/family

The plan is more focused on tasks and services rather than “who, within the family and friends network, will do what in the children’s day to day life to keep them safe and well”

The plan is reviewed regularly and within statutory timescales.

An up-to-date Care plan is in place (including a PEP, health plan, placement plan and permanency plan for looked after children), setting out the child/YP’s needs and how they will be met.

Inadequate Looks Like…

There is no or in- sufficient evidence to demonstrate that the child / YP is being visited.

The plan is drifting

and not being progressed

There is no evidence of the child/ YP, their family, or network (when appropriate) being involved in planning and/or decision-making

Where required, there is no evidence of a pathway plan.

Family network meetings have not taken place as part of assessment or planning

The plan has not been reviewed despite this being required.

There is no up-to-date care plan – including the absence of any of the following (PEP, Health Plan, Placement Plan, Permanency Plan (from 2nd LAC review)

The plan is a list of tasks to complete and places to go rath- er than a plan of who will do what in the child’s day to day life to help them be safe and well

Good Looks Like…

There is strong evidence of the child 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’s safety and wellbeing.

The plan is progressing and meeting the child’s needs. Where there is evidence the plan is not meeting the child’s needs, the reasons for this are explored and changes made if needed.

The case file recording tells the child’s

story and evidences progress.

The plan clearly outlines the day to day actions that parents and carers will undertake to ensure the child’s safety and wellbeing (and is not a list of

services to attend).

The plan shows evidence of a good understanding of the child’s needs and how these will be met, within clear timescales.

Required Improvement

Looks Like…

**Review**

Plan (CIN, CP or looked after) has not been reviewed in accordance with Statutory/ procedural requirements

Good Looks Like…

Plan (Child in Need, Child Protection, Looked After Children has been reviewed in accordance with statutory/ procedural requirements and is responsive to the child/YP’s changing needs.

Reviews are convened to allow maximum attendance of family and professionals. Where this is not appropriate, views sought and feedback is given regularly.

Children are actively involved where they have the ability to do so, including attending meetings or chairing their own reviews.

Records of reviews are comprehensive and provide detailed analysis of the issues and actions that are required to meet outcomes, including timescales.

Chronology is up to date and analytical. It shows all key points in the child’s / YP’s life and is easy to follow.

Key family members / child / YP or professionals are sometimes not invited to review meetings.

Review meetings are not meeting the child’s needs and do not act to encourage the child/YP’s engagement

Review records are insufficiently detailed to enable clear planning and action

Safety plan is not reviewed on each visit to ensure it is being enacted to meet the child’s need for safety or is not revised if not meeting the need (after exploring issues of what is getting in the way)

Chronology is non-existent or contains cut and pasted records that are not relevant to the purpose of the chronology

Chronology is evident and has been kept up to date, some events are not clear and have been pasted in.

Records of reviews are

in place, setting out key information, including recommendations and

some actions

Review meetings are focussed on the child/YP’s needs

Parents/carers/child/YP and professionals are invited to reviews.

Required Improvement

Looks Like…

Plan (CIN, CP or Looked After) have been reviewed in accordance with

statutory/procedural

requirements

Inadequate Looks Like…

**Management Oversight**

Supervision has been taking place in accordance with supervision policy and is responsive to social worker’s needs.

Supervision has been taking place in accordance with supervision policy

Supervision has not been taking place in accordance with supervision policy.

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.

Supervision records do not provide outline of decision making, have no evidence of reflection or analysis and/or fail to address concerns.

There is some evidence of using Strengthening Families but not an in-depth analysis using the framework.

Supervision does not include the principles of Strengthening Families, nor is there an expectation of work being undertaken within the

Framework including the use of evidence based tools.

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Supervision reviews actions of previous supervision and these are completed.

Records up to date and fit for purpose.

There is evidence of reflective tools such as appreciative inquiry or case mapping.

Good Looks Like…

There is evidence the plan is being reviewed, but effectiveness and impact not fully explored.

Supervision reviews actions of previous supervision but there is limited evidence to suggest that this has prevented drift.

Records mostly up to date and fit for purpose

Required Improvement

Looks Like…

Supervision is directive only and does not use appreciative inquiry and solution focused questioning

Safety/risk, harm/danger, and day to day safety not clearly reviewed/ recorded

Supervision decisions are recorded on the child’s electronic file but limited evidence of reflection and evaluation of work carried out.

Supervision has not been effective in ensuring referrals and actions are effectively progressed.

Lack of recorded QA activity

Inadequate Looks Like…

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| **Review / Contacts / References** |  |
| Document title: | Quality Assurance & Learning Framework |
| Date approved: | Draft for consultation |
| Approving body: | Children, Families & Education Directorate |
| Last review date: | 3 February 2022 |
| Next review date: |  |
| Related internal policies, procedures,  guidance: | Luton Practice Framework & Expectations |
| Document owner: | Head of Service, Quality Assurance & Practice Improvement |