Policy Governance - Guidance

**Policy Owner:** Head of Service – Quality Assurance

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| Version 1 | September 2021 | Paul Shallcross | September 2022 |
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1. Context

1.1 Guidance which sets out how we work is central to supporting practitioners and managers in working safely and consistently within the complex world of Children’s Services.

1.2 In Somerset, Policy and Practice guidance is in the main located on the Somerset Children’s Services Procedures Manual, administered by Tri-x.

[Somerset Children's Services Procedures Manual (proceduresonline.com)](https://www.proceduresonline.com/somerset/cs/)

1.3 Tri-x provides national guidance which is updated regularly to reflect national changes in legal and practice guidance. This guidance applies to all local authorities in England.

1.4 Alongside this national guidance, the Somerset Procedures manual provides the option of storing local guidance, specific to the Somerset context. Local guidance is held in the Local resources area of tri-x and may be needed in the following circumstances:

* To provide more specific local detail regarding the interpretation and implementation of national guidance
* To provide guidance which is solely focused on the Somerset context – e.g. the Somerset Practice Framework; the Somerset Quality Assurance Framework
* To provide templates which are used in the course of operational work

1.5 The local resources area of tri-x can be used to hold the following types of documents:

* Policy – a policy will detail a mandatory way of working, usually set out in legislation; staff are expected to adhere to these policies when working in Somerset.
* Practice Guidance – provides a general overview and guidance to follow in pre-defined situations/circumstances. Practice Guidance is likely to be developed where there is an identified need, but no specific policy in place for staff to follow.
* Procedure – step by step instructions on how to carry our particular tasks; showing staff how to complete a task in a way that follows policies and guidance.

2.0 Process for creating and agreeing local guidance

2.1 Where there is a need to create new local guidance, or where national guidance needs to be updated to reflect the local context, it is important to have in place a clear process to ensure that new guidance is created and signed off with appropriate oversight and scrutiny. The process below should be followed:

**Feedback identifies that a new policy, practice guidance or procedure is needed (e.g. via QA activity, CSPR)**

**Service agrees a group which will develop the policy/guidance (usually via HoS meetings, OMMs, CMMs, CSWs, Service meetings)**

**Group (led by TM, CSW, OM, HoS) develops draft policy/guidance (N.B. development of guidance should include representation of and consultation with relevant practitioners and managers)**

**If required, draft policy/guidance is shared and consulted on at group meetings (e.g. OMs CMMs, CSWs)**

**Final draft is agreed by the service HoS, signed off at Heads of Service meeting and then referred to the Policy Governance Group (PGG) for sign off**

**PGG considers the policy. If no amendments are required, document is added to the Somerset Procedures Manual. Review date and policy owner are recorded on the final policy/guidance**

**If amendments are required, feedback is provided to the author, who is expected to return the amended document to the next PGG. If no further amendments are required, document is added to the Somerset Procedures Manual. Review date and policy owner are recorded on the final policy/guidance**

3.0 The Policy Governance Group (PGG)

3.1 The Policy Governance panel meet on the first Thursday of February, April, June, August, October and December (or more frequently if required). Policy documents and cover-sheets should be sent to the Service Improvement team at Quality Assurance Mailbox (CSC) [qualityassurancemailbox@somerset.gov.uk](mailto:qualityassurancemailbox@somerset.gov.uk) one week before the meeting in order for it to be reviewed. Any documents received less than a week in advance, or without a cover-sheet will be held over to the next meeting. The Policy Governance Group is made up with the following representatives:

* Head of Service – Quality Assurance (Chair)
* Service Improvement Officer (facilitator)
* Operations Manager (Deputy Chair)
* Prevention Services Manager
* Consultant Social Worker
* Social Work Team Manager
* Qualified Social Worker
* Team Manager – Practice Support and Service Development Team
* Prevention representative

3.2 The purpose of the group is to ensure that all policies, procedures and documents held on the Somerset tri.x manual are current and fit for purpose, and to review new content before being uploaded.

4.0 Update and review of guidance

4.1 The Somerset Children’s Services procedures Manual (national content) will be updated by tri-x at least every six months. All sections of the manual are assigned ‘owners’ from within the Children’s Services Management Team whose role is to check the policy updates and ensure that they continue to be relevant and

appropriate to Somerset. The owner is assigned to a position (e.g. Operations Manager Mendip) rather than an individual, to ensure that ownership continues when individuals move roles. If any changes are required, then it is the responsibility of policy owners to propose and agree amendments. Minor changes will not require consultation. Where changes are more significant, the process in 2.0 above should be followed.

4.2 Local guidance should be reviewed annually by the assigned policy owner, and any changes required actioned as outlined in 3.3 above.

4.3 Twice a year, the Service Improvement Officer responsible for maintaining tri-x will attend an OMMs meeting and highlight which areas may require updating/reviewing and who is responsible. This will act as a prompt for managers to ensure that the manual is always up to date and relevant.