**Children’s Services**

**Quality Assurance, Learning and Development Framework**

**October 2023**

****

**Index**

|  |  |
| --- | --- |
|  | **Page** |
|  |  |
| **Foreword** | 3 |
| [**Section 1** - Introduction](#Section1) | 4 |
| [Principles](#Principles) | 4 |
| [Purpose](#Purpose) | 5 |
| [Theoretical Model](#TheoreticalModel) | 5 |
| [Figure 1](#Figure1) - Modified - Research in Practice - Continuous Improvement & Learning System (2018) | 6 |
| [Figure 2](#Figure2) - Dudley Systems Map | 7 |
| [Reporting Mechanism](#ReportingMechanism) | 8 |
|  |  |
| [**Section 2** - Sources of Evidence Providing Assurance](#Section2)  | 9 |
| [Voice and Influence](#VoiceandInfluence) | 9 |
| [Performance Framework](#PerformanceFramework) | 10 |
| [Table 1](#Table1) | 10 |
| [Safeguarding and Review](#Safeguarding) |  |
| [Dudley Safer Peoples Partnership](#DSPP) | 12 |
|  |  |
| [**Section 3** - Quality Assurance Activity](#Section3) | 12 |
| [Auditing Schedule](#AuditingSchedule) | 12 |
| [Moderation](#Moderation) | 13 |
| [Re-audit of Inadequate Files](#Inadequate) | 13 |
| [Bespoke and themed audits](#Bespoke) | 13 |
| [Deep Dive Audit Process and Feedback Loop](#AuditProcess)[Targeted Audit Process and Feedback Loop](#Targeted)   | 1416 |
| [Auditors Learning Development](#AuditorsLearning) | 16 |
| [Observation, Visits and Welfare](#Observation) | 17 |
|  |  |
| [**Section 4** - Quality Assurance Impact on Learning and Development](#Section4) | 18 |
| [Practice Standards](#PracticeStandards) | 18 |
| [Supervision and My Annual Review](#SupervisionandMyAnnual) | 19 |

**FOREWORD**

Dear Colleagues,

Welcome to our Quality Assurance, Learning and Development Framework Guidance. This document will help us to ensure that the practice and development of the service will help us to achieve our vision;

**‘Children first at the heart of all we do’**

Working with children and young people and their families is complex, and all of us who work in this world know that their needs are multi-faceted, and that we need to take a whole system approach towards helping them to live safely at home and to prepare for their life as an adult

When working with families we need to ensure that we constantly explore and build on areas of strength and agree effective plans for improvement where risks are identified. Similarly, we need to explore and build on areas of strength in the quality of services we deliver to children and young people and their families and agree effective plans for improvement where the quality of practice does not meet required standards.

This Quality Assurance and Learning Framework sets out the principles and standards of practice expected of practitioners and managers across Children’s Services. It also sets out the mechanisms we will use to assess the quality of our practice, systems and processes, and use the learning to make improvements in practice and outcomes.

All of us are undertaking important work and aim to do the best we can to work with children, young people and their families to secure positive outcomes. I hope you will find this guidance both interesting and helpful in ensuring good practice from us and good outcomes for the children and young people we work with.

This revision of the Quality Assurance and Learning Framework was approved by the Senior Leadership Team on 10th October 2023

**Catherine Driscoll - Director Children’s Services**

**Section 1 - Introduction**

The Quality Assurance, Learning and Development Framework for Children's Services in Dudley outlines the principles, purpose, and theoretical models that underpin the range of quality assurance and learning activity undertaken by all managers across Children’s Services, in collaboration with families and practitioners, to ensure that work is carried out to the highest quality.

This informs our work by providing systematic monitoring, evaluation and implementation of practice, policies, and procedures, with the aim of improving our understanding of whether we are supporting the right children, in the right way, at the right time, and whether we are making a difference to improve outcomes for children, young people and their families.

The Quality Assurance, Learning and Development Framework recognises that audits of children’s files and performance data alone will not improve quality of practice and therefore sets out an ambitious vision that through a range of stakeholder feedback, quality assurance, observational and evaluative activity we will see improved and sustained quality of practice. Pivotal to the success of this framework is the ability to consistently share learning widely across services and in a way that is engaging and owned by Practitioners, Team Managers, Independent Reviewing Officers (IROs), Service Managers, Heads of Service (HoS) and Senior Managers across Children’s Services. The implementation of the Framework is supported by the Performance Team who produce performance data and the Centre for Professional Practice (CPP) who coordinate a range of quality assurance, learning and training activity.

***Principles***

* Quality assurance is child centred with a focus upon the experiences, progress and outcomes for children as they journey through Children’s Services and safeguarding systems – ‘children at the heart of all we do’.
* Quality assurance is more than meeting targets and counting activity, it includes a qualitative approach. There are three key elements that underpin our approach to Quality Assurance.
	+ Quantity – How much did we do?
	+ Quality – How well did we do it?
	+ Outcome – Did it make a difference?
* Our approach to quality assurance is restorative and is based on a high challenge, high support mindset using relational approaches to work *with* families, our staff, managers, and partners.
* Quality assurance is everybody’s business and is based upon building strong relationships, through conversations and shared values and understanding with each other and with our partner agencies.
* Quality assurance is enriched by developing an understanding of the perspectives and experiences of others. Meaningfully gaining and understanding the voices of children, families, staff and partners and the influence of those voices in the shaping of the services that we provide.
* Quality assurance is a learning system that enables us to collaborate with practitioners and managers, to promote learning, accountability and change.
* Quality assurance contributes to and supports an organisational culture that is committed to learning and continual development.

***Purpose***

* To deliver positive outcomes for Children and Families by developing a more confident and effective workforce, who understand ‘what good looks like’.
* To continually develop a mechanism to regularly evaluate services and identify what difference we are making to children, young people and their families
* To continuously improve and sustain good quality of practice through reviewed and updated Practice Standards, Practice Guidance, Procedures and Policies.
* To know ourselves well, through triangulation of quality assurance, performance data and feedback from children and families.
* To develop workforce involvement in the reviewing/evaluation process, thus ensuring that our self-evaluation is well understood and owned by all of our workforce.
* For Line Managers to use learning from quality assurance to develop their Teams and individual staff within supervision and appraisals.
* To highlight that senior managers’ role in promoting and monitoring quality assurance activity is undertaken consistently and ensuring that learning and improvement is achieved.
* To ensure that good practice and learning from quality assurance activity is effectively shared and that we monitor impact on practice.

***Theoretical Model***

The Continuous Improvement & Learning System (figure 1) provides a framework for the systematic analysis of information, the knowledge gained is used to inform service development and drives an evidence-based approach to practice improvement. This learning informs direct work with children and families and provides a direct link between practice development and training activity. The Quality Assurance, Learning and Development Framework informs the Workforce Development Strategy ensuring that recruitment, retention, and development of highly skilled practitioners is informed by a continuous cycle of learning and development.

***Figure 1.*** ***Modified - Research in Practice - Continuous Improvement & Learning System (2018)***

**Improved outcomes for children through learning and improvement cycle**

***Figure 2. Dudley Systems Map***

The Dudley Systems Map demonstrates how children, their families, and practitioners' “voice and influence” alongside “our sources of evidence” are gathered, reported, and brought together in a range of “self-assessment and scrutiny” activity. This informs the “learning and development” offer which provides a framework for continuous learning and improvement. This model ensures that practice and service development and delivery is responsive to the needs of children, their families, and networks.

Dialogue with and feedback from staff as well as individual and group supervision provide key opportunity for reflection and self-assessment, enabling learning from experience, which is an essential process in the learning cycle (Kolb, 1984).

The Team Manager for Quality Assurance in CPP produces a monthly quality assurance report, summarising the findings from audit including themes and trends. This is discussed at Service and Team Meetings and is shared with practitioners through audit briefings.

Monthly reports are complimented with quarterly reports presented to DLT. The Participation, Complaints and IRO Dispute Resolution and Quality Assurance Quarterly Reports (outlined within the Framework) will feed into the CPP Quarterly Quality Assurance Report, drawing together all the sources of evidence within the Quality Assurance and Learning Framework compiled by the Service Manager for the CPP.

The Head of Service for Safeguarding, Practice and Quality Assurance provides the Chief Executive and Lead Elected Member for Children’s Services with quarterly briefings outlining the audit activity and findings.

***Reporting Mechanism***

**Section 2 - Sources of Evidence Providing Assurance**

The sources of evidence that inform our assurance activity are wide enabling us to seek assurance about the effectiveness of the services we provide and the quality of practice across Children’s Services. We believe that we our assurance activity should move beyond auditing processes and should be underpinned by learning from the expressed views of children, young people, parents and carers as well as our practitioners and the development of our workforce.

***Voice and Influence***

Participation and Advocacy work with children and their families is also a vital component in the Quality Assurance and Learning Framework.

The experiences and views of children, young people, and their families are sought as an integral component of our Deep Dive audit and quality assurance process.

We expect our workforce to have a commitment to meaningfully gaining the views of children, young people and their families and ensuring that they are involved in key decision making on a day-to-day basis. We are building on existing systems to develop participation and collaboration across Children’s Services. The important influence that feedback from families has upon the services that we offer is outlined in the Participation Strategy. This provides a continuous feedback loop, throughout our involvement with families and is essential to understanding families’ experiences of the support and interventions we provide and the impact this has on outcomes for children.

CPP will complete a quarterly report including participation and advocacy activity, internal and externally commissioned, provided to young people. The report will contain a brief analysis which will identify key themes, trends, and any difficulties young people are experiencing with service provision and engagement. The report will be shared with DLT

On a Quarterly basis, Service Managers undertake a ‘Stocktake and Showcase’ exercise to present work undertaken in relation to the Practice Framework and Participation Strategy. Reports are presented to the Principal Social Worker quarterly and during the quarterly events, Service Managers rotate on an annual basis to present their updates to the Service Manager group across the directorate, which Heads of Service and Service Directors also attend.

Complaints and compliments about Children’s Services are another important element of the Quality Assurance and Learning Framework. The Children’s Services Complaints Team will provide a quarterly report, identifying the nature of all reports received and provide an analysis which identifies trends about the nature of complaints. The report will be shared with DLT and analysed in the CPP Quarterly Quality Assurance Report.

***Performance Framework***

In Dudley, our performance data includes an agreed set of performance indicators and targets that are set nationally based on statutory guidance (Working Together to Safeguard Children, 2018; the Care Planning, Placement, and Case Review Regulations 2010) and locally. Nationally determined performance indicators allow us to benchmark local practice against national, regional and statistical neighbours to determine performance, identifying areas of strength and areas requiring improvement. Our focus is that all managers and practitioners fully understand their role to improve performance and that managers recognise that they are accountable for effectively managing the performance of their teams/services.

***Table 1 – The Performance Reporting Framework***

Performance data is generated from recordings on children’s electronic files and is available in a range of formats. Daily regenerated reports are available on the intranet meaning consistently accessible data is available to all levels of management and designed to assist Team Managers to monitor individual workers workloads and drill down into how individual children’s needs are being met in all areas. This data is used in staff supervision or team meetings to drive improved performance. The data is also used in Team Managers’ supervision and Performance Meetings (Service Manager chaired meetings with Team Managers and HoS chaired meetings with Service Managers). There is a monthly Directorate Scorecard which is used by Heads of Service and Service Managers to provide Performance Reports to the Director of Children’s Services monthly Assurance Clinic. HoS and Senior Managers and provide an overview of practice alongside agreed targets and enables comparison with national, regional and statistical neighbours. This data is used by managers as outlined in Table 1.

***Safeguarding & Review Service***

The role of the IROs in quality assurance is pivotal as the critical friends of the local authority. IROs have an important part to play in identifying good practice, the timely progression of children’s plans, and initiating effective challenge when practice falls short of practice standards.

Furthermore, the IRO Handbook states: 'the individual IRO is personally responsible for activating the dispute resolution process, even if this step may not be in accordance with the child's wishes and feelings, but may, in the IRO's view, be in accordance with the best interest and welfare of the child, as well as his/her human rights' (Section 6.4, IRO Handbook, 2010).

IROs and IRO Service Managers undertake monthly ‘deep dive’ audits as detailed in the Learning, Development and Assurance timeline. This includes analysis of independent review gradings and Head of Service oversight for inadequate gradings.

In Dudley, IROs undertake a Progress Review for all children allocated to them. The practice standard for a Progress Review can be found in the [IRO Practice Standards Guidance.](http://www.proceduresonline.com/dudley/childcare/user_controlled_lcms_area/uploaded_files/Independent%20Reviewing%20Officer%20Practice%20Standards.pdf) The Progress Review is a recorded as a “Progress Review” case note on the child’s electronic file. The Progress Review is a key monitoring activity and is an opportunity for IROs to ensure children’s plans are being progressed. If there is insufficient progress the Dispute Resolution Process (DRP) is initiated.

******DRP is an important element of the Quality Assurance and Learning Framework. The Service Managers for the Safeguarding and Review Service collate a DRP quarterly report of all alerts raised, identifying key themes about practice issues relating to frontline work, management response or organisational/systemic culture. The report is shared at DLT and within performance clinics.

***Du******dley Safeguarding People Partnership***

DSPP undertake a programme of multi-agency quality assurance and audit activity each year, which is supported across the Partnership. Children’s Services will participate in and learn from relevant multi-agency audits commissioned by the DSPP. Findings from such multi-agency assurance of practice audits (MAAP) and Child Safeguarding Practice Reviews (CSPRs) will be included in the CPP Quarterly Quality Assurance Reports. The Head of Safeguarding, Practice and Quality Assurance chairs the MAAP process so there will be correlation across the audit learning.

Advanced practitioners from CPP complete audits for the MAPP. The learning from the MAAP audits is shared in a learning briefing published on the DSPP website. Learning is also shared via the learning from audit briefings.

We also engage in learning events and any improvement activity in relation to findings from Child Safeguarding Practice Reviews and Domestic Homicide Reviews. The Service Manager for Professional Practice sits on the DSPP Learning and Improvement Sub-Group and provide updates and feedback that inform the themes selected for MAAP. The Head of Safeguarding Practice and Quality Assurance chairs the Quality and Performance subgroup for the DSPP. The Head of Safeguarding Practice and Quality Assurance leads a quarterly workshop for managers across Children’s Services to share findings from CSPRs and DHRs (local and national).

**Section 3 - Quality Assurance Activity**

Audits of children’s files, welfare supervision audits, observations and service visits provide insight into the journey of the child and the impact of our actions and decision making and whether this has led to change.

Special Educational Needs and/or Disability (SEND)The Quality Assurance Framework supports the Dudley SEND system to produce high quality Education Health Care (EHC) plans and should be read alongside the Dudley SEND Strategy and the Preparing For Adulthood (PFA) Strategy.

This Quality Assurance Framework and Guidance also supports the ongoing improvement work detailed within the Local Area SEND Accelerated Progress Plan (APP), which was the outcome of the joint reinspection of the Local Area SEND system, January 2022.

The Quality Assurance Framework takes account of the statutory duties of the local area in respect of the EHC needs assessment process and EHC plans as defined by the Children and Families Act 2014 and the SEND Code of Practice 2015 thereby ensuring that there is a consistent approach to quality assurance and reporting that is person centred and places children at the heart of all we do.

This Quality Assurance Framework sets out the principles and standards of practice expected of all partners contributing to the EHC needs assessment process and those partners supporting the delivery of the provision identified within the EHCP. It also sets out the mechanisms we will use to assess the quality of our SEND practice, systems and processes, and how we will use the learning to make improvements in practice which will, in turn, lead to better outcomes.

SEND will complete multi-agency audits where files are reviewed by Education, Health and Care to ensure plans are representative of all agencies.

New EHCP’s

Draft EHCP’s are moderated by a Senior Practitioner prior to being issued by Assessment Case Officers. Changes are ‘tracked’ and returned to the case officer to ensure there is on-going learning opportunities resulting in continued improvement in the quality of EHC plans. *(Examples of EHCP’s with tracked amendments are saved)*

Moderating officers note areas of concern and any learning opportunities. These are shared as part of on-going training, delivered at termly ‘Plan-writers’ meetings.

*(Presentation saved)*

A specialist multi-agency auditing group meets on a monthly basis to monitor the quality of advice and information that is received to inform the writing of EHC plans and to consider whether this information is accurately represented within the final EHC plan. Feedback is recorded on the Advice QA Tool and collated and reported by the SEND Advanced Practitioner and shared through the monthly CPP report.

As part of this auditing process the group will also consider the quality of advice that is provided by representatives and services from Education, Health and Care

On-going EHCP’s

A number of EHCP’s are audited each term by a multi-agency team, involving practitioners from education, health and care, along with representatives from PCF. The auditing of each plan is recorded on the QA tool. Each auditing meeting has a specific focus; e.g., Post 16, Early Years, etc. Feedback and learning are collated by the SEND Advanced Practitioner and shared.

As part of this groups auditing responsibilities there will be a specific focus on the Post 16 cohort to include representation from Preparation for Adulthood (PfA) groups, Connexions etc.

Annual Review of EHCP’s

Annual review paperwork has been updated and made available on the Local Offer. Training and guidance material has been provided to SENCOs through the SENCO network meetings.

As part of the statutory annual review process all EHCP’s are reviewed to ensure they remain relevant and up-to-date. The annual review meeting is conducted on behalf of the local authority by education settings. To audit the quality of these meetings all parents/young people will be requested to complete a survey to provide feedback of their experience. Links to the survey are shared on the annual review response letter and included on the Local Offer.

The timeliness of responding and processing paperwork is to be monitored through Synergy reports.

An auditing process is being developed to monitor the quality of amended EHC plans following an annual review. This to be implemented by October 2023.

Social Care input to EHCP’s

Education and Health care Plans are audited each month by the Designated Social Care Officer. 5 audits are completed per month which specifically look at children and young people on LCS where there is an EHCP.

The audit process will specifically be to establish where Social Care have made contributions to EHCP’s, the standard of these contributions (looking for good practice and areas of development) in order to support the longer-term goals of good social care contributions.

The children and young people’s PINS will be allocated by CPP each month, and an audit template that has been developed specifically for this process will be used to complete these. The Designated Social Care Officer will identify the key themes from this, which will be included in the monthly report completed by CPP.

Youth Justice

Youth Justice will be undertaking a deep dive into the files of four young people every month. The social care deep dive audit form has been adapted to ensure that it fits with the youth justice work. It is aimed that 4 audits will be completed per month by the Advanced Social Work Practitioners and Service Manager. There will be a monthly moderation which will be supported by an Advanced Social Work Practitioner from CPP, in order to assist in quality assurance and consistency of auditing between the managers. This agenda for this moderation meeting will be:

* Full moderation of one audit. (45 mins)
* Good practice from all audits
* Development points from all audits
* Themes from audits
* Updates/improvements since last audit

The key themes from this will then be included on a bi-monthly basis in the monthly audit report completed by CPP.

Early Help

Early help plans are audited on an 8-week cycle, in which 6 external EH assessments and 4 internal are picked randomly for audit.

The aim of the audit is to review the quality of the assessments to ensure that they are robust, and inform the support offered to families. The audit tool comments on 5 specific areas:

* Good assessment
* No Child Voice
* Lacks detail
* Father not included
* No consent

Three EH enablers complete the audits prior to each performance challenge for each family Centre. The audits are completed using the audit tool on EHM unless the child/young person is closed. In this situation, a word template is used and is then added to documents on the child/young person’s file. The enablers do not audit assessments from the centres that they are linked to.

A moderation meeting will then take place in order to ensure there is consistency in the completion of audits. The EH enablers come together to discuss the audits and feed back to each other. They will then attend team meetings in order to share good practice. These identified key themes will be incorporated on a bi-monthly basis into the audit report completed by CPP.

As additional audit activity, on a quarterly basis there is a Multi-Agency auditing session event that takes place with the leads of partner agencies. In the initial meeting, all individuals look at how/what they are going to audit and they are then paired up with an EH enabler for support. The following Monday, everyone meets again in order to report back their findings.

Children’s Social Care

All managers across Children’s Social Care (Team Manager level and above) will undertake monthly file audits to assess the quality of recording, practice and the outcomes and experiences of children and young people.

**Auditing schedule**

Monthly full case file audits are carried out, allocated to managers within children’s social care and Children’s files being randomly selected. Audits of Foster Carers are included within this monthly activity whereby managers within the fostering service complete these rather than the social care deep dive.

Targeted DiP sample audits are undertaken when necessary following themes arising from performance indicators, complaints or practice reviews. This provides us with an approach to our quality assurance activity that is flexible and responsive allowing us to focus on specific themes and aspects of practice, having a very clear focus on the impact of practice on outcomes for children.

Themes and focus for any targeted audit are decided with Heads of Service and Service Director based on information from

* + Feedback from children, young people, and families.
	+ Performance data and themes identified from Performance Clinic
	+ Themes in practice and observations
	+ Learning from complaints
	+ Learning from good practice examples
	+ Learning from local and national Child Safeguarding Practice Reviews
	+ Learning from local MACFA
	+ Peer reviews
	+ Inspection
	+ Placement and adoption disruptions
	+ Learning from conference chair/IRO dispute resolution and escalations
	+ Feedback from Practitioner, Team Manager/IRO and Service Manager Circles

Additional audit activity is agreed at SMT or DCS assurance and planned by CPP together with the respective Service Managers for the area sampled.

***Moderation;***

* Each month, CPP arranges a second, moderation audit of all files graded as inadequate and 20% of the remaining audits undertaken within Social Care. This will be a range of the remaining gradings. The moderation form is completed on LCS on the child/young person’s file. These audits are undertaken by managers and APs in CPP. For all audits identified as Inadequate the Service Manager in CPP will ensure that the relevant Head of Service is aware of this, and it will be expected that the HoS will re-audit after 3 months in order to identify whether any progress has been made.

***Re-audit of Children’s Files with Inadequate Gradings.***

* Heads of Service are notified of audits with an Inadequate or Requires Improvement grading, by 12 noon the day following the audit submission date. Heads of Service will re-audit inadequate and (RI) audits in their service areas by 3 months after the initial audit. This ensures that the audit action plan has been completed and that the child’s file is no longer Inadequate or Requires Improvement. The re-audit will be shared with the responsible Service Managers to ensure any remaining actions will be monitored and evaluated.

***Bespoke;***

* An audit of a child’s file maybe requested at any point by the Senior Leadership Team in response to specific practice concerns arising from issues with individual, team or service performance or following a critical incident for a child.
* MAAP audits are completed in line with the DSPP priorities and are scheduled on a quarterly basis.

***Deep Dive Audit Process and Feedback Loop***

The deep dive audit tool has been developed by the CPP and includes specific targeted questions in relation to Children in Need, children subject to a Child Protection Plan, and Children in our Care. The audit tool includes a judgment about the quality of work based on Ofsted grades, underpinned by Ofsted’s evaluation criteria and grade descriptors. This is embedded into the Child’s electronic record.

At the point of allocation, the auditor will contact the practitioner and Team Manager to inform them that an audit is being completed and arrange a time, , to meet with the practitioner to undertake the audit together. This is an important part of the process and allows the auditor to focus on the right issues for the child and worker, in real time and reach conclusions that are jointly understood by the auditor and worker so that recommendations are agreed together, owned by the worker, and actions are the most important for improving outcomes for the child. The worker should prepare for the meeting by ensuring that the child’s electronic file is up to date.

The auditor should prepare for the meeting by familiarising themselves with the audit tool and supplementary reading, including practice or statutory guidance, provided by CPP when the audit was allocated. The completion of the audit tool on LCS, following the meeting is the responsibility of the auditor.

The auditor, following consultation with the allocated worker, will contact the child’s main carer, and the child if appropriate, to obtain feedback as part of the audit. This feedback is threaded through the audit form on LCS.

If during the audit process the auditor becomes concerned about the safety and welfare of the child the auditor will immediately alert the relevant HoS and any safety concerns will be addressed immediately.

If any practitioner involved with the audit disagrees with the findings of the audit, they should first discuss this with the auditor. If the practitioner and auditor cannot find a resolution, the auditor will alert CPP to the dispute. The CPP team will allocate a worker to hold a Restorative Conversation with the practitioner and auditor. If the dispute remains, the HoS for Safeguarding, Practice and Quality Assurance will be alerted.

The auditor is responsible for completing the audit on the child’s record. It is critical that auditors ensure that what is recorded on the child’s file is appropriate information. This information may be used in future to support legal proceedings and/or accessed by the child should they request access to their records at a later stage.

It is essential that audits of children’s files result in improved practice with children and families, therefore, even those audits rated as good or outstanding, must include a **stretch target** for both the practitioner and manager involved. This learning includes feeding back any learning for partner agencies to the DSPP via the CPP Quarterly Quality Assurance Report.

To ensure this learning is acted upon within Children’s Services, the manager in supervision with the Practitioner, explore with them the core elements from the audit and hold a reflective ‘support & challenge’ conversation, including the setting of a stretch target, and ensure recommended actions are undertaken. This will be recorded on the child’s file as Supervision/response to audit as well as being recorded on the workers Welfare Supervision record on PIMs.

In addition, and to ensure the feedback loop is concluded, the Service Manager will discuss audit findings with the Team Manager in supervision and hold a reflective ‘support & challenge’ conversation, including the setting of a stretch target. This will be recorded on the managers Welfare Supervision record on PIMs.

Audits that have a ‘Requires Improvement’ judgement require Team Managers to follow up remedial actions within one week, Service Managers are required to respond and sign off actions within one month. Audits identified as being inadequate are subject to moderation and follow up.

For audits that have an ‘Inadequate’ judgement Service Managers are required to respond and follow up remedial actions within one week, Heads of Service are required to re-audit and review the actions have been completed within 3 months.

The Centre for Professional Practice collate identified good practice as well as Specific examples of good practice identified within audits will be recognised as part of this process and fed back to practitioner via individual recognition emails and to management as outlined in the Systems Map (Section 1).

***Auditors Learning and Development***

We have recognised that for good quality auditing to take place all managers need the time to undertake audit activity alongside effective training and support. Furthermore, that our staff in the CPP also need ongoing development to produce consistent moderations. Therefore, all staff undertaking audits will attend training around this Framework, best practice for audit and use of the audit tool. The audit training is included in the Induction training package for new Managers joining the Local Authority. Managers are also provided with Audit Guidance documents produced by CPP Guidance is also provided to practitioners to guide them through their role in the quality assurance process.

***Observation, Visits and Welfare Supervision Audits***

Observation of staff in their everyday work is an important element of quality assuring front line practice. Alongside supervision and audits of children’s files, observations are very useful for understanding the quality of practice and identifying strengths and areas of development of our workforce when working directly with families. Feedback from observations will be included in the CPP Annual Report. Observations will be submitted to CPP so this important activity is tracked and collated.

Key decision-making meetings will be observed in order to consider key factors such as leadership by Children’s Services staff, multi-agency working and the involvement of children and families. Any observation of planned meetings with children, young people and their families, will be with their explicit and informed consent. Observers will explain that the purpose of this is to assess the effectiveness of help, care and protection for children, young people, their families and carers; it is not to make judgements about individuals.

The approach to staff observation will be closely linked to the workers My Annual Review (Appraisal). Specific themes identified during practice observations will inform My Annual Review objectives. Learning from practice observations will be used to support individual staff members and importantly, the wider continuous improvement agenda.

Observations are planned, detailed and tracked by CPP using the Learning, Development and Assurance Timeline.

***Audit activity:***

* Observations of practice in Children’s Social Care teams (including Children with Disabilities), Family Solutions and Youth Justice take place on a planned basis twice yearly as part of ‘practice week’ held in Spring and autumn. The DCS, Service Director and Heads of Service are allocated to a team for two days and undertake at least two observations of practice
* Team Managers will complete at least 1 practice observation per team member a year.
* Observations of welfare supervision take place once per year for every manager
	+ Service Managers will undertake one observation of a Team Manager per year providing supervision to a worker who directly reports to them.
	+ Head of Service will undertake one observation of Service Manager once per year providing supervision to a Team Manager.
	+ Service Director will observe each Head of Service providing supervision, once per year
* IROs and Child Protection Conference Chairs will be observed at least once per year by their respective Service Manager, ; chairing one Child in Care Review or one Child Protection Conference
* All Senior Managers will undertake visits to staff teams, residential homes and other settings as part of planned practice week.

**Section 4 - Quality Assurance Impact on Learning and Development**

The Framework has the expectation that quality assurance activity leads to learning for individuals, teams and the organization as a whole. The Quality Assurance and Learning Framework will ensure that we share what we have learnt about our quality of practice with the workforce in a way that develops and sustains good practice. These workforce development plans, service plans and My Annual Review plans will evidence that they are shaped by the learning from the quality assurance process.

Registration of social work staff with Social Work England (SWE) is reliant upon evidence of minimum learning requirements over a 12-month period; which social workers must upload to their SWE account.

The Quality Assurance and Learning Framework feedback loop includes the expectation that the impact of training will itself be quality assured. As a result, Dudley CPP will be assessing the impact of training; this will be reviewed quarterly by the CPP and inform the training schedule.

***Practice Standards***

Practitioners and managers employed by Dudley Children’s Services are held accountable for making sure that practice standards are met. [The Supervision Policy](https://proceduresonline.com/trixcms2/media/19829/supervision-policy.docx) and Annual Appraisal process ensures that staff are supported, challenged and have identified developmental targets to ensure practice is continually improved. and have identified developmental targets to ensure practice is continually improved.

Those providing services on behalf of the Council are held accountable for making sure that practice standards are met through Dudley’s commissioning arrangements which outline these expectations at the onset. Partner agencies working with children and their families are held accountable, and can hold Dudley’s Children’s Service staff accountable, through the Dudley Safeguarding People Partnership (DSPP) and the [DSPP Multi-Agency Resolution and Escalation Protocol](http://dudleysafeguarding.org.uk/blog/documents/dspp-multi-agency-professional-challenge-and-resolution-policy-march-2022/).

Practice with children and their families is underpinned by the Children Act 1989 and Dudley’s Practice Standards for [Social Workers](https://www.dudleycpp.org.uk/practice-standards), [Managers](https://proceduresonline.com/trixcms1/media/11320/managers-practice-standards.pdf) and [IROs](https://proceduresonline.com/trixcms1/media/11319/independent-reviewing-officer-practice-standards.pdf) are informed by statutory guidance and regulation (Working Together to Safeguard Children, 2018; the Care Planning, Placement, and Case Review Regulations 2010; IRO Handbook, 2010). They are based on evidence from the elements of practice which are most likely to lead to good quality services and positive outcomes for children, young people and their families.

The Professional Capabilities Framework sets out practice standards for all social work staff, originally drawn up by the College of Social Work and now held by the British Association of Social Workers. (https://dudleychildcare.proceduresonline.com/p\_whistleblowing.htmlrevised 2018).

Practitioners may identify unsafe practice or have concerns about the service a child is receiving outside of the audit activity. In the first instance this should be raised with their Line Manager and if unresolved would be reported to the Head of Service for Safeguarding, Practice and Quality Assurance. Processes are also outlined within the internal escalation and whistleblowing policy.

 <https://dudleychildcare.proceduresonline.com/p_whistleblowing.html>

***Supervision and My Annual Review***

Dudley has a Supervision Policy that requires practitioners, with their managers, to reflect on the support and interventions with children and families fostering professional curiosity and critical reflection. Supervision records are used to demonstrate practitioners’ and managers’ reflections on the outcomes being achieved for children with their families. The policy also clearly requires the managers to use this process to support the practitioner to identify training needs and to then reflect on whether the training has impacted upon the quality of their practice.

All Dudley MBC staff have a My Annual Review. The appraisal takes the aims and priorities set out in the Council Strategy and Service Plans and translates them into objectives and targets for individual staff members. It provides the opportunity to identify strengths and areas for development in staff performance, including findings and recommendations from audits, and provides a vehicle to develop good practice.

Our stable and developed workforce is essential to us on our continued improvement journey. Here in Dudley, we are working towards developing a supportive, yet challenging culture for our staff to grow. The Quality Assurance and Learning Framework feedback loop will inform the Workforce Development Strategy.

|  |  |
| --- | --- |
| **Approved by:** | **Date** |
| Catherine Driscoll DCS |  |
| **Shared with:** |  |
| Elected member |  |
| DSPP |  |
| **Review:** |  |
| To be undertaken by the Head of Service, Safeguarding, Practice and Quality Assurance | January 2025 |