

DECISION-MAKER:	CHILDREN AND LEARNING SCRUTINY PANEL
SUBJECT:	QUALITY ASSURANCE BRIEFING
DATE OF DECISION:	27 JANUARY 2022
REPORT OF:	EXECUTIVE DIRECTOR CHILDREN AND LEARNING

<u>CONTACT DETAILS</u>			
Executive Director	Title	Children and Learning	
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STATEMENT OF CONFIDENTIALITY

N/A

BRIEF SUMMARY

This report outlines for the Panel how the service's quality assurance processes are informing service improvement and the associated scrutiny arrangements. It summarises the role of the quality assurance unit and then introduces:

- The Lead Independent Reviewing Officer's (IRO) annual report; presented to the Corporate Parenting Committee in November 2021.
- The Child Protection System report; presented to the Local Safeguarding Children's Partnership (SSCP) in November 2021.
- Analysis of the 'Focus 5' practice priorities.
- The Improvement Report; presented to the Improvement Board in November 2021.
- Report of the Principal Social Worker; content shared with the Chief Executive in January 2022.

RECOMMENDATIONS:

	(i)	That the Panel note the quality assurance arrangements in place for the Southampton Children and Learning Service.
	(ii)	That the Panel considers the next steps in paragraph 10 of the report and requests an update from the service in July 2022.

REASONS FOR REPORT RECOMMENDATIONS

1.	The Scrutiny Panel has oversight of the service improvement plan. The service quality assurance framework should underpin the successful delivery of good social work practice and the discharge of the service's statutory responsibilities.
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ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

2. None

DETAIL (Including consultation carried out)

3. The Quality Assurance Unit

The Quality Assurance Unit is led by the Head of Service for Quality Assurance and comprises of the Practice Development Team (led by the Principal Social Worker), the Child Protection Conference Team, the Independent Reviewing Officer Team, and the Safeguarding Partnerships Team. The service quality assurance framework was last reviewed in December 2020, with oversight from the service's Partner in Practice. An update is programmed for quarter 4, 2021/22, to include the new audit schedule for 2022 / 23.

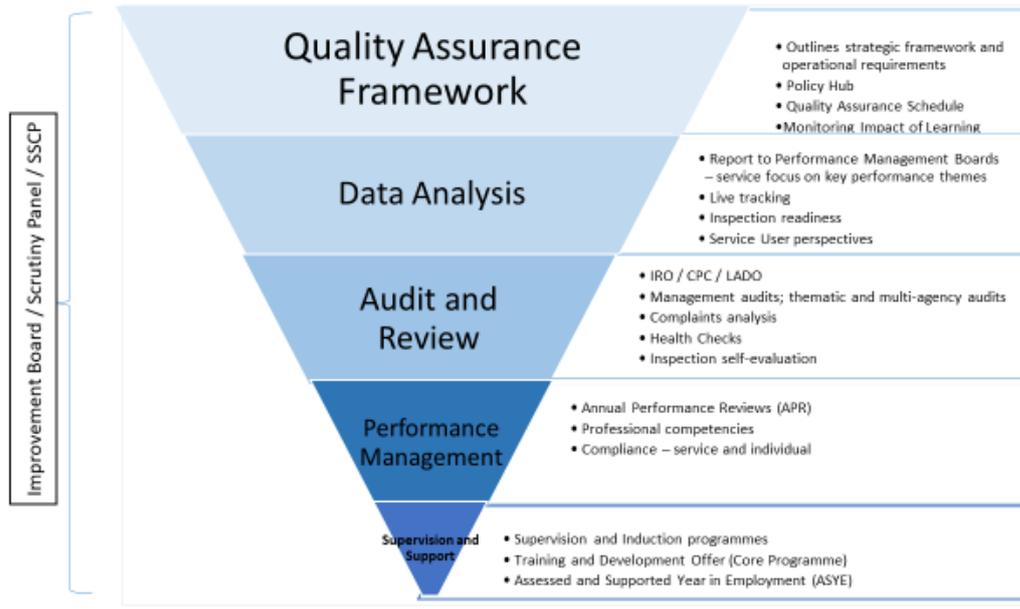
Unit Structure



- The Quality Assurance Unit supports these priorities by championing practice excellence across the Children and Families Service; supporting both Education and Early Help and Children's Social Care. We also ensure service compliance with statutory and regulatory requirements.
- The Safeguarding Partnerships Team and the Independent Reviewing Officer Team for looked after children sit within the Unit.

The service has a number of key responsibilities including co-ordination of the quality assurance framework; data analysis to inform robust self-evaluation and better practice; management of the audit programme; management of performance; oversight of supervision and support for staff.

Quality Assurance and Performance Management



4. **Service and Partner Scrutiny**

The service has worked hard to ensure robust line of sight of practice issues. The service senior leadership team and Cabinet Members are regularly briefed on the service improvement priorities. The areas of focus today have been recently reported to the Corporate Parenting Committee, Safeguarding Children's Partnership, Improvement Board and Chief Executive. There are five documents appended to this report:

5. **Lead Independent Reviewing Officer's (IRO) Annual report**

Presented to the Corporate Parenting Committee in November 2021, the report focuses on:

- Highlighting areas of good practice and areas for improvement
- Identifying emerging themes and trends
- Reporting on work undertaken to date
- Outlining service development priorities for the coming 12 months.

6. **Child Protection Report**

Presented to the Local Safeguarding Children's Partnership in November 2021, the report focuses on:

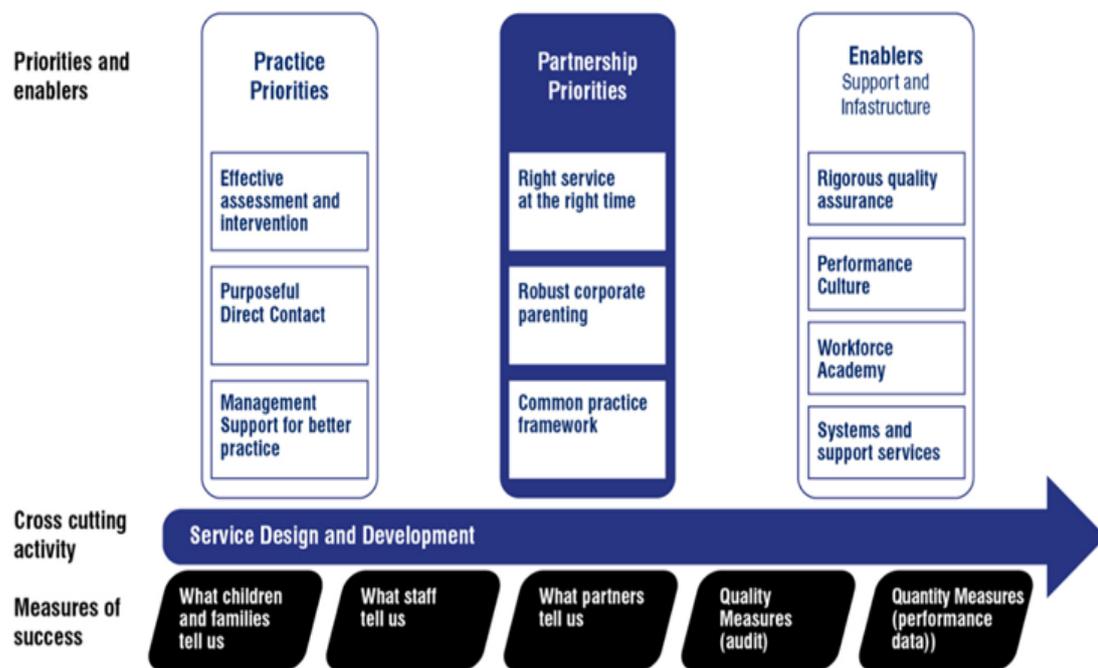
- Police / local authority discussion regarding levels of contact
- Safeguarding Children's Partnership involvement in Children's Resource Hub and threshold document
- Service and multi-agency audits
- Implementation of service assurance clinics
- Development of the Family Safeguarding Model
- Strengthening Families training.

7. Analysis of Practice and Improvement Board

283 audits were completed between January and December 2021. The appended summary identifies findings in respect of the Southampton ‘Focus 5’ practice priorities:

- Chronology
- Assessment
- Plan
- Visiting
- Supervision

Improvement activity continues to be monitored (last report appended) through the improvement board’s priorities:



8. Principal Social Worker Report

The Principal Social Worker last briefed the Chief Executive in January 2022; the briefing focused on:

- The Principal Social Work role, the Practice Development Team, The Children and Learning Academy, The Better Together Staff Reference Group.
- Staff feeling – PSW engagement and Senior Leadership responsiveness
- The Practice Framework & Academy
- Recruitment, retention and embedding practice change
- Revision of supervision across the service.

9.	Headline Analysis								
<table border="1"> <thead> <tr> <th data-bbox="240 259 815 304">Risk</th> <th data-bbox="820 259 1414 304">Mitigation</th> </tr> </thead> <tbody> <tr> <td data-bbox="240 304 815 544">The quality of practice is not yet consistently good across the service; with some areas that still require significant improvement</td> <td data-bbox="820 304 1414 544">There is good evidence of senior management oversight and an awareness of where and how things need to improve; informed by quality assurance information and performance data.</td> </tr> <tr> <td data-bbox="240 544 815 741">The level of demand upon the service and capacity within it do not yet support good practice.</td> <td data-bbox="820 544 1414 741">There are clear plans in place regarding recruitment and retention; implementing the workforce academy model and delivering against the practice framework.</td> </tr> <tr> <td data-bbox="240 741 815 902">All service areas need to take responsibility for the quality of work in their areas.</td> <td data-bbox="820 741 1414 902">There are examples of good ownership (MASH). A comprehensive audit and systemic practice programme has been planned with the service area.</td> </tr> </tbody> </table>	Risk	Mitigation	The quality of practice is not yet consistently good across the service; with some areas that still require significant improvement	There is good evidence of senior management oversight and an awareness of where and how things need to improve; informed by quality assurance information and performance data.	The level of demand upon the service and capacity within it do not yet support good practice.	There are clear plans in place regarding recruitment and retention; implementing the workforce academy model and delivering against the practice framework.	All service areas need to take responsibility for the quality of work in their areas.	There are examples of good ownership (MASH). A comprehensive audit and systemic practice programme has been planned with the service area.	
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All service areas need to take responsibility for the quality of work in their areas.	There are examples of good ownership (MASH). A comprehensive audit and systemic practice programme has been planned with the service area.								
10.	Next Steps <ul style="list-style-type: none"> • The service self-evaluation is being reviewed in January 2022, with a South East Sector Led Improvement Partnership (SESLIP) challenge session to look at quality and accuracy in February 2022. • The audit and systemic practice programme is being rolled out across the service in February and March 2022. • Scrutiny Panel Members are invited to express an interest in attending practice development sessions and to meet with the CPC, IRO, Practice Development and Safeguarding Partnerships teams. 								
RESOURCE IMPLICATIONS									
<u>Capital/Revenue</u>									
11.	The Quality Assurance Unit has recruited additional staff on a fixed term basis to respond to the current level of demand and to support the service improvement priorities.								
<u>Property/Other</u>									
12.	None at this stage								
LEGAL IMPLICATIONS									
<u>Statutory power to undertake proposals in the report:</u>									
13.	S.111 Local Government Act 1972								
<u>Other Legal Implications:</u>									
14.	None								
RISK MANAGEMENT IMPLICATIONS									
15.	A key role of the Quality Assurance Unit is to reduce the risk of service failure.								

POLICY FRAMEWORK IMPLICATIONS

16.	<p>The service quality assurance framework contributes to achieving the outcomes desired for children in Southampton.</p> <p>The 2021-2025 Corporate Plan sets out the following regarding wellbeing in the city: “We want a city in which people can start well, live well, age well, and live happy and fulfilling lives. We will be a city that prevents and intervenes early, promotes wellbeing, and allows people to live independently for longer, enjoying their lives and all our great city has to offer.”</p> <p>Aligned to this, priorities in the Corporate Plan include the following:</p> <ul style="list-style-type: none"> • Reduce the number of children looked after • Achieve our ambition to become a UNICEF Child Friendly City by 2024/25.
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KEY DECISION?	No
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WARDS/COMMUNITIES AFFECTED:	All
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SUPPORTING DOCUMENTATION

Appendices

1.	Lead Independent Reviewing Officer report to Corporate Parenting Committee (November 2021)
2.	Child Protection Report to Safeguarding Children’s Partnership (November 2021)
3.	Improvement Report Submitted to Improvement Board (November 2021)
4.	Focus 5 analysis (December 2021)
5.	Principal Social Worker’s report (January 2022)

Documents in Members’ Rooms

1.	None
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Equality Impact Assessment

Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out?	No
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Data Protection Impact Assessment

Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out?	No
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Other Background Documents

Other Background documents available for inspection at:

Title of Background Paper(s)	Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)
1.	None