

Southampton Children and Learning Service Quality Assurance Framework 2023-2025



Children and Learning Service Quality Assurance Framework

2023 - 2025

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Glossary

CLA	Children Looked After
CP	Child Protection
CRH	Children’s Resource Hub
DfE	Department for Education
EDCS	Executive Director of Children’s Services
EMT	Executive Management Team
HoS	Head of Service
IRO	Independent Reviewing Officer
LADO	Local Authority Designated Officer
PDP	Personal Development Plan
PLO	Public Law Outline
RP	Restorative Practice
SCP	Safeguarding Children’s Partnership
SILG	Serious Incident and Learning Group
SWF	Social work with families
TM	Team Manager

Southampton Children and Learning Service Quality Assurance Framework 2023-2025			
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		Effective date	Tbc – March 2023

1. Foreword

In Southampton, our vision for the Children and Learning Service is that:

We want all children and young people in Southampton to get a good start in life, live safely, be healthy and happy and go on to have successful opportunities in adulthood.

In 2022, we set our four key priorities in our new Children and Young People's Strategy. These are priorities for 2022 until 2027:

Good start in life:

We want every baby and young child to have the care and support they need to give them the best start in life, as this lays the foundations for better outcomes for children at school, and improved life chances throughout adult life.

Live safely:

We want children and young people in Southampton to be and feel safe in their homes and within their communities.

Be happy and healthy:

We want all children to live happy, healthy lives, and enjoy good physical, social, emotional, and mental health.

Learn and achieve:

We want all children and young people to have the skills they need to succeed and are prepared to move into adulthood.

To achieve this, we will ensure that children and their families remain the centre of all our work. This requires a strong **Quality Assurance Framework** to be in place to evidence that services are being delivered effectively and to standards that enable children's welfare to be safeguarded and promoted. This framework will hold us to account, help us measure the impact of service delivery and make sure that we achieve improved outcomes for children, young people, and their families.

Robert Henderson

Executive Director of Children's Services

January 2023

2. Introduction

A strong Quality Assurance Framework assists the Council to deliver an efficient and effective service. It aims to improve our understanding of whether we are supporting the right children, in the right way, at the right time and whether we are making progress that achieves improved outcomes.

Quality Assurance is an integral part of everyday practice within Southampton's Children's and Learning Services because:

- Children and young people deserve good quality services. Quality in the children's services world means making a positive difference, changing and improving their daily living experience.
- Making that difference motivates staff and managers. This can help with recruitment and retention and provide the organisational tone and culture likely to support strengths-based working.
- It is important to be accountable for public spending and best value. Making the best use of available resources to provide the most cost-effective services at the right quality is essential.

Central to this approach is our practice framework, translating the systemic principles that the service promotes into solution-focused, strengths-based social work practice. Southampton want to bring together the organisation and its partners, providing an evidence-based model for social work intervention and aligning organisational arrangements to improve outcomes.

3. Purpose, Principles and Priority Areas

Quality assurance within the Children and Learning Service seeks to place the *child at the centre* of all strategic initiatives as well as all children's services operational activities.

The purpose of this framework is to deliver a consistent approach to quality assurance. It will *improve outcomes for children and families* by ensuring that Southampton Children and Learning Service applies the lessons we learn into practice about children's lived experiences.

This is a strategic document and the service's declaration of intent regarding quality assurance. It should be read in conjunction with Southampton Children and Learning Service's Social Work Practice and Management Standards. These documents provide practitioners and managers with detailed information regarding their responsibilities.

Quality assurance is delivered within a qualitative and quantitative framework that sets and measures standards and identifies strengths and areas for improvement. It is a dynamic process that measures achievements against objectives and professional standards. It also uses performance data information in a feedback loop to continually improve services.

Our principles are:

- **Child-centred**

The focus of Quality Assurance is on the experiences, progress and outcomes of the child or young person on their journey through our social work and safeguarding system.

- **Restorative**

Quality Assurance is restorative, instead of a top-down approach. The Quality Assurance work is based on working **with** children, young people, their parents and families, staff and managers and Partners by building relationships. As a restorative process, quality assurance is characterised by both high support and high challenge.

- **Outcome-based**

In line with the key behaviours for children's services, the proper focus of Quality Assurance is on outcomes rather than processes.

- **Positive**

Our approach to Quality Assurance is solution focused; by looking at informing and encouraging improvement and supporting the development of staff and services.

- **Reflective**

Our Quality Assurance Framework is designed to be about promoting reflective practice, combined knowledge and shared learning.

Priority areas: we will make sure that...

- Every child has a good quality and proportionate assessment that leads to appropriate intervention. This includes a case summary and chronology.
- Chronologies are up to date; they reflect the child's lived experience and that they capture the child's journey with Children Social Care as well as other key services. We also need to ensure that Chronologies are consistently of good quality across all service areas.
- Every child has a SMART plan which is reviewed to ensure a timely and proportionate response to their needs, and where there are delays these are understood and appropriately challenged.
- Our work is child-centred because we know our children well and it represents their thoughts and feelings. This will be reflected in records of visits.
- Staff receive high quality supervision, guidance and support to support impactful work with children and families.
- Children are supported to live in home environments that are stable and safe, wherever possible.
- We achieve effective relationships with our families and each other, by modelling relationship based restorative principles and practice with staff and partners.
- We promote a culture of Learning and Improvement to support practice development, case reflection and progression.

4. Our Practice Framework

Southampton launched the Making the Difference Practice Framework in May 2021.

There are five key components:

- **Systemic Practice**, as the overriding approach
- **Motivational Interviewing**
- **Restorative Practice**

- **Trauma Informed Practice**
- **Strengthening Families** for child protection conferences

Adopting three mind sets:

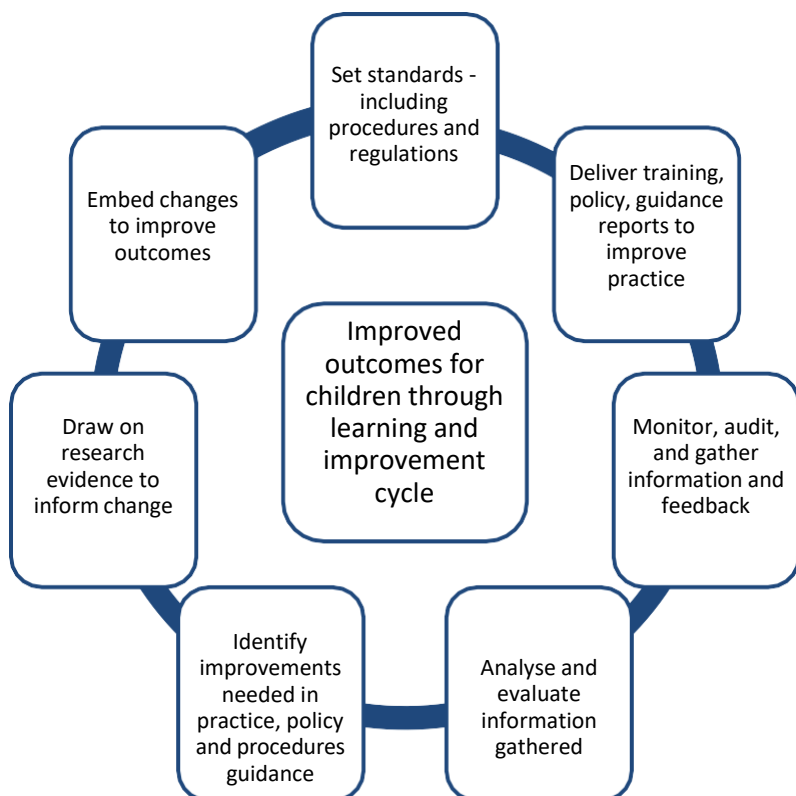
- Doing the simple things better
- The child is the central focus
- Safeguarding and promoting the welfare of children

Our Quality Assurance Framework has been designed to help us better understand the experiences of our children and families and to support effective change with them. Service improvement will be at case level, through immediate actions following individual audits, and at operational and strategic levels. The former will inform individual learning. The latter will be done through the analysis of evidence, reports to senior leaders, operational managers and practitioners, improvement plans that take into account learning, and continuous review.

5. Scope

Continuous Improvement

Quality Assurance is often expressed as a continuous improvement cycle (as in the graphic



The quality assurance framework should provide a clear structure, which ensures that practice is thoroughly explored and analysed through the routine oversight of case work, a robust cycle of independent and in-house case auditing, learning from complaints and consultation, and detailed scrutiny by the independent reviewing officer. Learning is translated into whole service change through the service improvement plan.

Ofsted, City of London (2016)

below) using a range of interdependent methods to measure prevalence, monitor practice, listen to people’s experiences, identify areas for improvement and enact change as a result. An effective model will identify both **‘what is working well and why’** and **‘what we need to do’**.

Benefits of a Quality Assurance Framework: Communication, Collaboration and Cohesion

- Ensuring that children and families are getting consistent and high-quality services.
- An accessible framework that is owned by the workforce.
- A transparent learning culture - never wasting a mistake and learning from what works.
- Organisational self-awareness and reflective learning.
- Improved communication and collaboration across the workforce, partners, children, young people, their parents, carers and senior management.
- Reviewing and evaluating practice standards – checking ourselves out – are we making a difference?
- Providing consistency in our system of monitoring and evaluating our effectiveness.
- Prioritising and facilitating continuous improvements within Children’s Services.
- Learning is supported, shared and fed into service planning and workforce development strategy.

Self-evaluation, Service Improvement Plan and Sector-led Improvement (SLI)

The 2017 framework for the Inspection of Local Authority Children’s Services (Ofsted, 2017 updated 2022), includes an annual self-evaluation of social work practice, which was developed in conjunction with the Association of Directors of Children’s Services (ADCS), the Society of Local Authority Chief Executives (SOLACE) and the Local Government Association (LGA). This requires organisations to critically evaluate their own performance with a focus on three questions:

- What do you know about the quality and impact of social work practice in your locality?
- How do you know it?
- What are your plans for the next 12 months to improve practice?

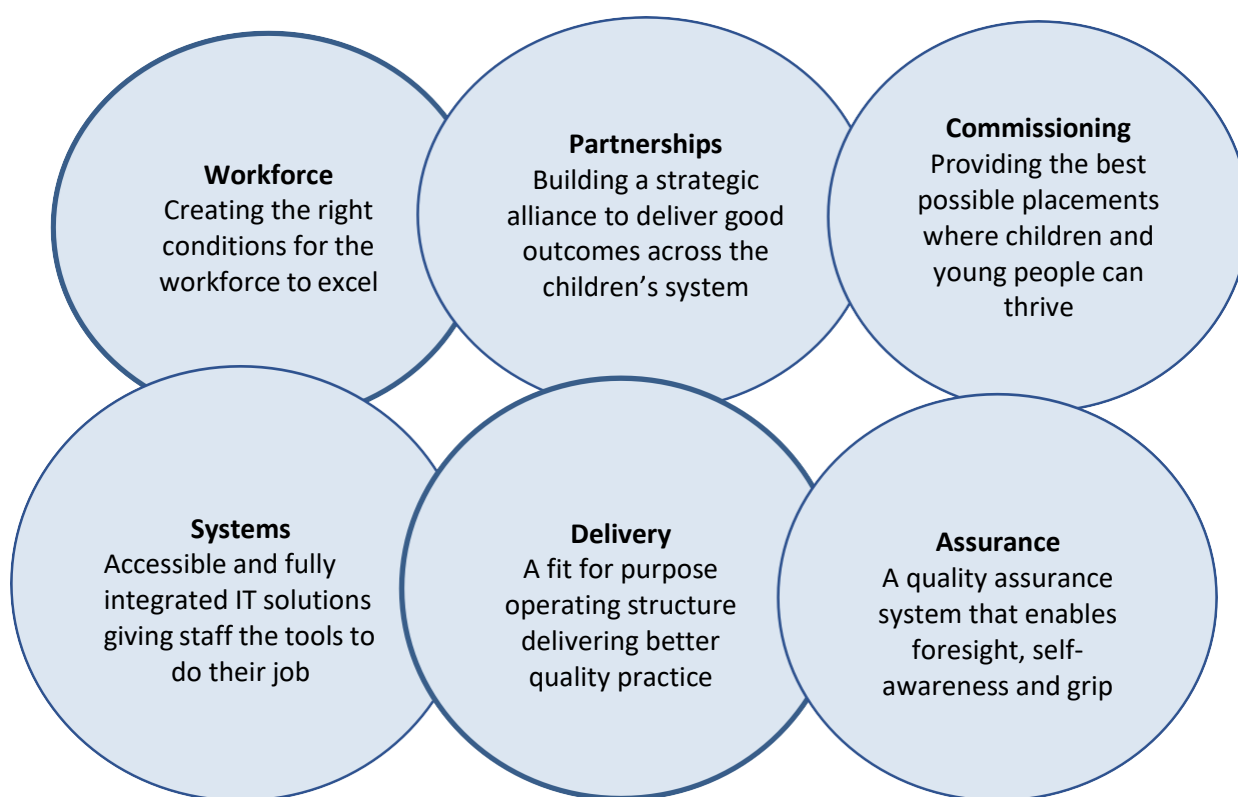
As Brookes and Holmes (2014) outlined in their review of Sector Led Improvement as a lever for evidence-informed practice: *“the evidence required to meaningfully undertake self-assessment is diverse and exceeds the statistical performance data traditionally used by local authority children’s services”*.

Quality Assurance involves promoting critical thinking and encouraging professional curiosity to understand ‘what does this tell us?’, ‘what might this feel like to children and young people?’ and ‘what else do we need to know?’

This change in approach requires changes in how methods are used. Some examples are provided in the table below.

More	Less
Triangulation of information using different methods	Using single methods to look at quality
Conversations	Scoring and making written judgements
Learning from good practice and expertise	Only considering cases when things go wrong
Free-form narrative in audits	Audit checklists
Bespoke formats depending on the issue or question(s)	Using one audit format for everything
Crafting a practice story from / considering a number of indicators	Focus on single indicators

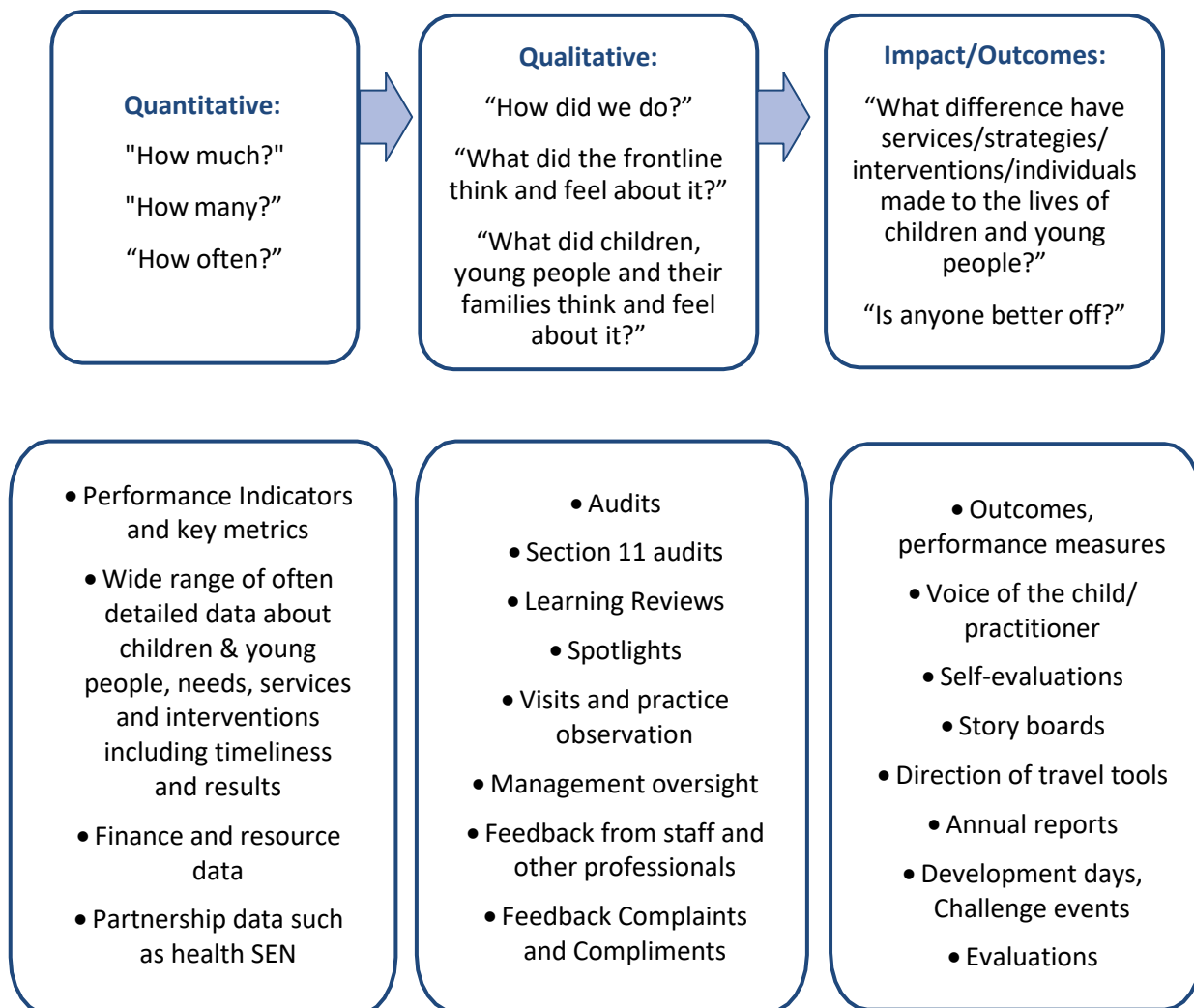
The **Children and Learning Service Improvement Plan** sets out activity and performance over the previous year, linking this with national context, policy and legislation and with Council priorities, to set the direction for the following year. The strategic issues arising from this Plan form the golden thread linking it to the Council Strategy and plans at service and team level.



Service Leads develop **Service Development Plans** to reflect corporate strategic priorities, Ofsted improvement requirements, those within the Children and Learning Improvement Service Plan and issues at team level, which affect service development and delivery.

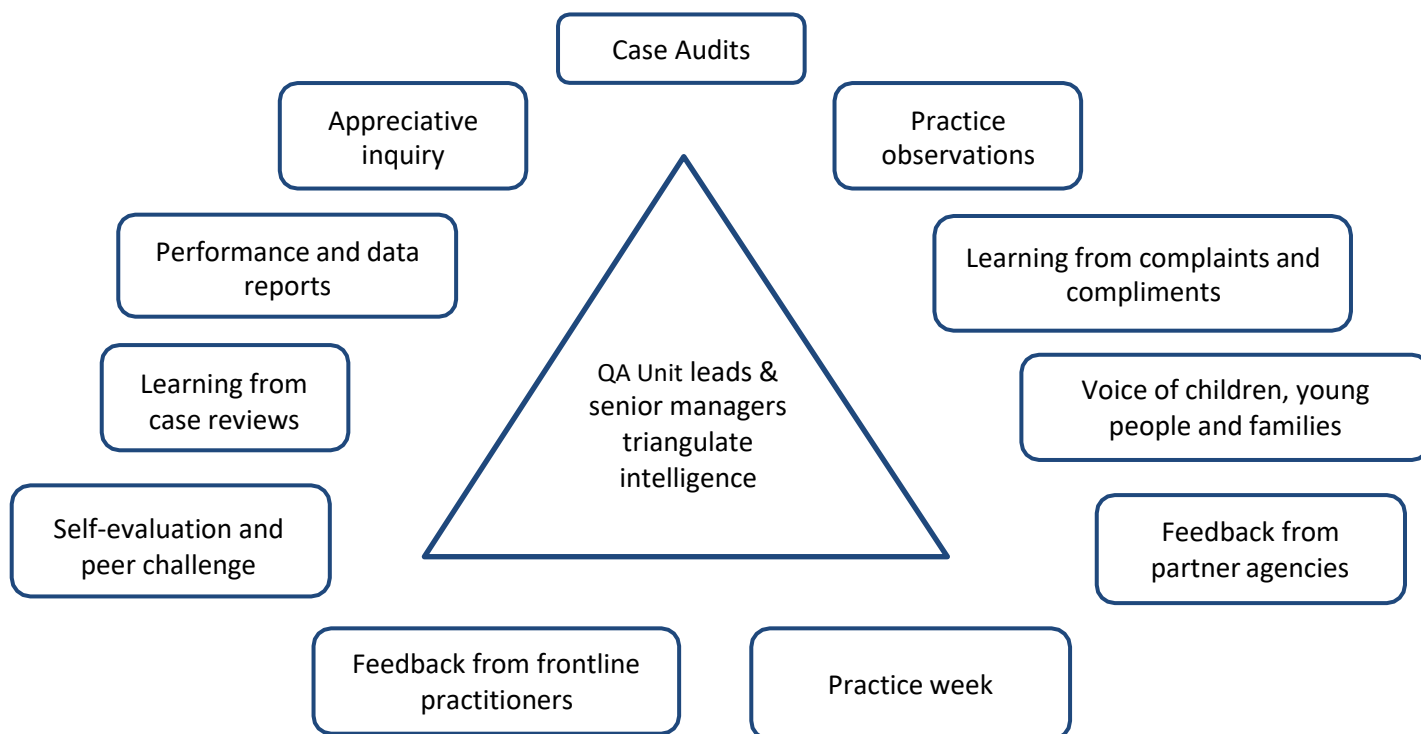
6. Key Activities

It is vital to triangulate a range of evidence to draw conclusions, and to consider the relative weightings of different sources and moderation processes to review individual interpretations.



7. Tools of Quality Assurance

Key sources of information for Assessing and Reviewing Practice



8. Roles and Responsibilities

All staff are responsible for ensuring that the quality of their work is of the highest standard and that this is reflected in the quality of case recording and outcomes for children and families. All staff are responsible for embedding a culture of learning and continuous improvement in their teams.

Practitioners are responsible for adhering to practice standards and procedures and engaging in practice improvement forums led by the Principal Social Worker.

Practice Managers have a particular responsibility to ensure that quality standards are met, and to take corrective action when necessary. They must:

- a. Quality assure pieces of work through supervision, guidance and by auditing case files.
- b. Ensure service quality by implementing procedures governing induction, supervision, exit interviews, appraisal, learning and development; and by giving staff feedback about the quality of their work.
- c. Promote and practice high support and high challenge to their team to maintain and improve practice.

Service Leads have a particular responsibility to ensure that quality assurance activity is carried out thoroughly and consistently, that the findings are acted upon and shared with staff and that teams build effective relationships with the Quality Assurance Unit. Service Leads must ensure they have an understanding about what constitutes "good" across all levels of their service and work with the senior management team to ensure whole service quality and cohesion.

The Quality Assurance Unit supports all staff and managers to deliver high quality, effective services in accordance with legislation, policy, procedures, practice standards and strategic priorities. The Quality Assurance Unit supports operational managers but does not replace their accountability for the services that they manage. However, the unit does have direct responsibility for the child protection conference and independent reviewing officer teams and workforce development.

The Children and Learning Service Senior Leadership Team is responsible for setting overall strategic direction and is accountable for the operational delivery of the Children and Learning Service. It ensures that services are in line with Council priorities and budgetary constraints.

The Southampton Safeguarding Children Partnership (SSCP) is the key statutory mechanism for ensuring that relevant organisations in a local area co-operate to safeguard and promote the welfare of children and their families. The Safeguarding Practice Improvement Sub-group co-ordinates multi-agency thematic self-evaluation. The Serious Incident and Learning Subgroup and pan-Hampshire Child Death Overview Panel oversee enquiries and disseminate learning from serious incidents and deaths.

Section 11 Audit

The SSCP oversees annual reviews of the performance of local services as required under Section 11 of the Children Act, 1989. It also receives periodic reports from key providers of safeguarding services and carries out an annual exercise to self-assess progress. The Board produces an annual report, in accordance with the requirements in Working Together (DfE 2018), that analyses its own performance and that of partners. The Board receives the Section 11 social care audit and plan, the delivery of which is overseen by the Quality Assurance Unit.

The Executive Management Team (EMT) is responsible for setting the strategic direction of the Council as a whole, as well as providing managerial leadership and coordinating council-wide activity and planning. It consists of the Chief Executive and all those directly reporting and deals with key corporate issues and strategic service issues.

The Cabinet provides political leadership for the city and council, proposes the budget and policy framework and implements policy through directors. It consists of the Leader of the Council and Cabinet Members. Each Cabinet Member has responsibility for a range of council activities, called portfolios. Cabinet Members can make decisions individually for their portfolio area.

The Council makes important decisions which affect the whole city, as well as approving the budget and plans in the Policy Framework. In Southampton, the Executive Director for Children's Services reports directly to the Chief Executive.

The Overview and Scrutiny Committees hold the Cabinet responsible for the services the council provides. Their role includes:

- Advising the Cabinet on decisions it is about to take;
- Reviewing decisions made by the Cabinet before they are implemented;
- Investigating and reviewing services if there are concerns about the way they are being delivered.

The Overview and Scrutiny Management Committee is the parent committee that manages the council's overview and scrutiny process. The Children and Learning Scrutiny Panel undertakes scrutiny of services for children and families in Southampton. This includes children's safeguarding, education, early years' provision and youth offending services. The Health Overview and Scrutiny Panel undertakes scrutiny of health and adult social care.

9. The Quality Assurance Framework

The following delegations, procedures, mechanisms and checks are in place to assure service quality.

9.1 Supervision

All staff must have regular and effective supervision that includes casework management, professional guidance and personal support and group reflective supervision. The supervision should conform to the standards within the Practice Standards and the Supervision Policy. There is also a Supervision Audit Framework which underpins the quality assurance processes in respect of all forms of supervision.

Casework Supervision includes effective management oversight, monitoring, risk assessment and reflection, leading to decision making that secures the child's safety and wellbeing. Case supervision is recorded on the 'Supervision' form on Care Director.

Individual professional and personal supervision is recorded on the Individual Professional Supervision Record form.

The frequency of supervision may vary depending on the supervisee's role, level of experience and the types of cases they are managing. However, the minimum standard expected for supervision is four-weekly 1:1 meetings for one and a half hours for all registered social workers and allied staff within Children's Social Care, i.e., Personal Advisors; Children and Families First Practitioners; Family Engagement Workers. ASYE Supervision will be weekly for the first six weeks, increasing to fortnightly and then four-weekly in line with individual practitioner development.

Case management supervision will also form part of individual supervision. Whilst the aspiration is for every child and young person's case to be focused on in full every four weeks, this may not always be possible, or it may not be necessary in terms of the progress of the plan, particularly when there has been thoughtful and purposeful (recorded) management oversight. Case-level supervision should take place every eight weeks unless an exemption has been agreed by a Service Lead. These exceptions are detailed in the Supervision Policy.

Case management decisions (including by senior management) must be recorded on the case record (Care Director) and should reference whether these decisions were made in supervision or in other discussions.

Individual Professional Supervision is recorded separately from case supervision and does not record any service user names. These records are kept separately and

confidentially, whether electronically or in hard copy, but are available for inspection, auditing and quality assurance purposes. For some professions, such as Educational Psychologists, individual professional supervision is based upon case material and so there is less separation, but the same level of confidentiality applies. 1:1 reflective supervision is recorded on the supervision template.

Group supervision is an opportunity to engage in reflective discussion about children, young people and families and reflects the Making the Difference Practice Framework. It provides a forum to engage multiple perspectives on case work, professional development and wellbeing issues. It is agreed in advance and is complementary to, rather than a substitute for, 1:1 supervision. Teams are expected to provide a group reflective supervision space on a monthly basis, and it is the Practice Manager's responsibility to ensure this happens. This is monitored by the Practice Development Team.

Practice Managers are offered monthly reflective groups facilitated by the Practice Development Team where they can also learn and enhance their skills in leading group reflective supervisions.

Service Leads are offered a monthly reflective space facilitated by the Principal Social Worker.

Supervision is a two-way process and the expectations of both supervisor and supervisee should be recorded in a Supervision Agreement. This document is personalised to each supervisee and is reviewed every six months. The Supervision Agreement is maintained on each supervisee's supervision file.

Training in effective supervision is offered to all supervisors to equip them to provide effective reflective supervision, which aligns with the Making the Difference Practice Framework.

Implementation of the supervision policy is assessed through audit and observation of supervision as detailed in the Supervision Audit Framework.

9.2 Induction, appraisals and personal development plans

All new staff and managers must receive an **induction** to enable them to fulfil their job roles. The QA Unit developed a new programme in 2022. Managers must offer a programme as laid out in the Induction Programme and the staff member must sign off each element in the Induction Plan as it is completed.

Appraisals must be undertaken annually in accordance with the City Council procedure.

All staff have a **Personal Development Plan (PDP)** as part of their annual appraisal. The content of the PDP is collated at team level and provides the basis for individual, service and whole service-learning plans.

The Quality Assurance Unit oversees the development of a continuous learning programme based on the collated PDP. The service training needs analysis is reviewed annually. Learning and development opportunities are offered to all staff through a

combination of in-house and commissioned training, coaching, mentoring and e-learning. The Principal Social Worker engages with Social Work England, national and local networks regarding professional training and registration requirements, feeding this into the service social worker network and testing out compliance.

9.3 Audit Schedule – 2023

The purpose of audits

The improvement plan for children’s services sets the goals for us all. Case file audits assist in the development of a clear organisational vision and culture to guide the delivery of services for vulnerable children and their families. Audit in a social work organisation is core business and fundamental to how we know ourselves.

Audit assists managers to maintain their role as problem solvers and continuous improvement agents. It also provides an opportunity for social workers to demonstrate the verifiable impact of interventions on the outcomes for children and young people who must be safeguarded and have their needs met.

The aim of audit

- ✓ A focus on improving the quality of social work practice.
- ✓ A consistent understanding and application of thresholds of need, vulnerability and harm; essential for making good decisions.
- ✓ Well-supported, confident and knowledgeable managers who understand the quality and impact of good social work practice.

The programme of audit

Every month, managers are required to complete a minimum of one audit for their service area; working alongside the case holder. In addition, the Quality Assurance Unit coordinates a programme of thematic and partnership audits and a range of learning activity: monthly Learning and Improvement Forums for managers; monthly practice forums and quarterly practice weeks, during which there will be reflection on audit activity alongside key practice themes, and feedback from service users. Relevant themes from audit will also be reviewed alongside performance data in monthly assurance clinics, chaired by the Deputy Director.

Audit Schedule – 2023

Audit framework 2023	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUGUST	SEPT	OCT	NOV	DEC
AUDIT FOCUS & THEMES Q&A Unit to Lead Audit Allocation and Analysis and Co-ordination of Audits	1. Contextual Safeguarding Audits (To be completed by managers across social work teams and Early Help) 2.Application of threshold audits (To be completed by Q&A, CRS, Housing, Q&A, Education, Health, Police) 3.YOS Education Audits (To be completed by YOS & Q&A)	1. Neglect Audits (To be completed by managers across social work teams and Early Help) 2. Supervision Audits (To be completed by Q&A) 3. Care Leavers Audits covering <ul style="list-style-type: none"> •Direct work •Accommodation •EET •Local offer •Involvement of YP in Pathway Plans (To be completed by Q&A and PTC Managers)	1. Physical Abuse Audits (To be completed by managers across social work teams and Early Help) 2. SEND Audits (To be completed by Head of SEND/ Send Manager/ CWD Manager/ Ed Psych/ Safeguarding service lead/ Health Rep) 3.Stability Audits (To be completed by Q&A)	1. Sexual Abuse Audits (To be completed by managers across social work teams and Early Help) 2. Application of threshold audits (To be completed by Q&A, CRS, Housing, Education, Health, Police) 3. Supervision Audits (To be completed by Q&A)	1. Emotional Abuse Audits (To be completed by managers across social work teams and Early Help) 2. Section 47 Audits (To be completed by Service Leads across social work teams)	1. Cases stepped down to C&FF Audits (To be completed by managers across social work teams and Early Help) 2.Dmetic Abuse Partnership Audit (TO be completed by Q&A, IDVA, Education, Health, Housing, Police, CSC, C&FF) 3.Supervision Audits (To be completed by Q&A)	1. Reunification Audits (To be completed by managers across social work teams) 2.Application of threshold audits (To be completed by Q&A, CRS,)	1. Education Audits (To be completed by managers across social work teams and Early Help Service) 2. Elective Home Education Audits (To be completed by Inclusion Service) 3.. Supervision Audits (To be completed by Q&A)	1. Repeat CP Plan Audits (To be completed by managers across social work teams and Early Help) 2. SEND Audits (To be completed by Head of SEND/ Send Manager/ CWD Manager/ Ed Psych/ Safeguarding service lead/ Health Rep)	1. Missing Children Audits (To be completed by managers across social work and Early Help Teams) 2. Application of threshold audits (To be completed by CRS partners) 3. Supervision Audits (To be completed by Q&A)	1. Children with Disabilities (To be completed by managers across social work and Early Help Teams) 2.Impact of Locality Working (Partnership Audit)	1. Radicalisation Audits (To be completed by managers across social work and Early Help Teams) 2. Annual Fostering Audits (To be completed by Q&A/ Fostering/External Partners) 3.Supervision Audits (To be completed by Q&A)
Moderation Panels	19th 15:00-17:00	16th 15:00-17:00	16th 15:00-17:00	20th 15:00-17:00	18th 15:00-17:00	15th 15:00-17:00	20th 15:00-17:00	17th 15:00-17:00	21st 15:00-17:00	19th 15:00-17:00	16th 15:00-17:00	21st 15:00-17:00
Children and Families Surveys				Survey 1						Survey 2		
CRH Audits			22 June 1330-1630			22 Sept 1330-1630			13 Dec 1330-1630			23 March 1330-1630
Safeguarding Children's Partnership Thematic			MET / CCE / CSE			Multi-Agency Safeguarding Arrangements				Neglect		
Practice Week			March 6-10			6-10 June			26 -30 Sept			5-9 Dec
Reports / reviews	Monthly report	Monthly report	Quarterly report	Monthly report	Monthly report	Quarterly report	Monthly report	Monthlyreport	Quarterly report	Monthly report	Annual report	Monthly report

Moderation and Management oversight

Service Leads will receive copies of audits completed within their Service Area as part of the monthly managers' audit programme on the 28th of every month. They will review the audits and add their comments on Care Director against the child's file to confirm that they have had oversight of the audit. This action will be completed by the 6th day of the following month; after this, the audit will be added to the child's file on Care Director by the auditor. This process will ensure timely progression of audit recommendations and that closure of the 'learning loop' is achieved promptly. Any disputes concerning the audit will be addressed directly with the auditor between the 28th and 6th timeframe. Where necessary, the Quality Assurance Unit will support this process to ensure that the dispute is satisfactorily resolved in a timely manner.

Quality Assurance Unit will produce Audit Analysis reports on a monthly basis covering key themes such as areas of strengths, areas of improvement, impact of new training on practice etc. The analysis will cover all audits completed in the month prior including manager's audits; partnerships audits and any other themed audits. The monthly analysis report will support service areas to engage in self-reflection continually with a view to ensuring that their interventions continue to have meaningful impact in the lives of children and their families. It will also enable Service Areas to measure their progress against their KPIs throughout the year and enable them to provide concise position statements on the quality of practice for the Improvement Board. A quarterly and annual analysis report will also be produced by Q&A which will focus primarily on trends observed in the months prior. It will also assess how far progress has been achieved against the areas of improvement identified over the months prior and support the planning of training programmes by the Practice Development Team to ensure that appropriate resource is directed where necessary.

A dip sample of audits will be moderated by a Panel comprising of the Heads of Service for Children's Social Care and Integrated and Specialist Services, the Quality Assurance Unit Manager and nominated QA and improvement leads. This will be completed on monthly basis. Ongoing moderation of audits will also continue to be co-ordinated by Q&A Unit throughout the year.

Selection and distribution

Cases for the monthly audit will be selected by Quality Assurance Unit, using the Ofsted Annex A case list and the audit allocation list will be distributed on the 3rd day of each month. For maximum learning and improvement benefit, all managers are required to prioritise this audit activity and to complete their audits by the 28th of each month. The auditors are also required to hold discussions with allocated social workers/practice managers as part of the audit process to support the learning process.

Carrying out the audit

Auditors are advised to review the case file upon allocation prior to having a discussion with practitioner/manager. Their discussion should clarify any areas of ambiguity on the case file; it should refer to areas of strength identified in the casework as well as areas of improvement. This process will support the practitioner/manager to reflect and improve on the areas discussed. It will also enable a timely plan to be developed to address any recommendation made from the audit. During the auditing process, any immediate or serious safeguarding concern identified should be escalated immediately to the relevant Practice Manager, Service Lead, Head of Service and Deputy Director.

The monthly audits will cover six months of casework prior to the audit date and consider how events/decisions/planning/interventions have impacted the child/family. The exceptions are where long-term neglect is suspected and/or where interventions have not safeguarded children adequately. In such cases, the Quality Assurance Unit will consider a fuller Case Review outside of the monthly audit programme. With regards to audit grading, this will be informed by how far the overall involvement of services have resulted in improved outcomes for the child/family, rather than the extent to which processes have been complied with.

Audit completion

- a) Audits will be uploaded on Care Director by the auditor following Service Lead oversight.
- b) The Quality Assurance Unit will maintain a spreadsheet that will contain all audit activities and their outcomes.
- c) The audit process for each month will begin on the 3rd when the allocation list is distributed, and will be complete on the 6th of the following month once management oversight has taken place, any follow up action is agreed and the audit is uploaded on the child's file.

Inadequate or Requires Improvement cases

Where an audit is graded as inadequate, it will be moderated by the Quality Assurance Unit. Upon the grading being further agreed as inadequate, the case will be escalated to the Head of Service and Service Lead for the relevant area for an urgent review. Update will need to be provided to Quality Assurance Unit within 3 days of the escalation to confirm the actions that have been taken to address the concerns identified in the audit. A further update will be required after a week to confirm that all actions have been addressed or that an adequate plan is in place for any outstanding action. For both Inadequate and Requires Improvement cases, the relevant Service Lead will take responsibility for ensuring that remedial actions are completed in a timely manner. Inadequate cases will then be re-audited after a month.

It is essential to note that a CPM does not take the place of a formal statutory reviewing process. Where there may need to be changes to a care plan, pathway plan or a child protection plan, the CPM will recommend that the outcome of the meeting should then be taken to a formal review.

Good or Outstanding cases

Where cases are graded as Good or Outstanding, they will be used for reflection in practice forums and learning workshops.

Overview reports

Reports from the Child Protection Advisor and Lead IRO are included in the bi-monthly quality assurance report; alongside a report which also identifies any outstanding complaints for resolution.

Analysis of findings and dissemination of learning

Collection of this information needs to be purposeful and useful to support the improvement in

practice. The collation and analysis of information follows a series of principles:

- Emerging themes and trends are identified with a clear analysis to ensure they can be acted upon.
- In instances where practice issues are identified in different parts of the service, and for individual practitioners, contextual issues are considered. This could include staff shortages or resource issues.
- Good practice is shared across the service and discussed in team meetings. This information is also used to support less experienced staff understand the standard required to help develop their own knowledge and skills.
- Managers are provided with detailed feedback about the judgements made regarding their teams. Any issues are approached in the spirit of learning rather than blame.
- Any areas of concern inform a subsequent themed audit to investigate in more detail.

Analysis of the audit findings is aligned to the following key areas and compared to performance across previous quarters:

- **Narrative / History:** how well do social workers/practitioners know the family and can they present this during the audit? How well used are chronologies, are they up to date and of good quality?
- **Assessment and Analysis:** do the quality of assessments effectively analyse risks and parents' capacity (including protective factors and strengths) to meet their children's needs?
- **Planning:** how clear and easily understood are plans? How well does each agency and the family understand their role? To what extent do plans provide clear outcomes that measure and evaluate progress for children; how well is the service working with the family? Is there evidence of the 'Deal' approach and the impact of this?
- **Relationship:** how strong and positive is the relationship between the social worker/practitioner and the family? Is there evidence of good rapport and trust?
- **Outcomes:** to what extent is significant change occurring for the child and family? Can the difference being made be demonstrated?
- **Supervision:** do social workers receive good direction from their managers and are they supported to reflect on the impact their work has had upon children? How often is supervision taking place?
- **Management oversight:** does management oversight show practice leadership at all levels in the organisation to ensure consistent, good quality social work practice is in place?

9.4 Views of children, young people and families

The audit process requires auditors to establish if it is appropriate to contact children and / or their families to ask for their perspectives. This information is collated by the Principal Social Work team to inform service learning.

The Children and Young People's Participation Framework details the range of methods employed

to seek the views of children, young people and families. Such feedback is essential to informing policy, service delivery and direction in Children and Learning Services.

10. Performance indicator reports and meetings

All Children's Social Care case holding team managers receive regular performance management information and are required to attend monthly assurance clinics, chaired by the Deputy Director. Commentary is completed for the service's Improvement Board and scrutiny panel, alongside Corporate Parenting Committee and Council.

11. Observation of Front-line Practice and Supervision

Aligned with the 2019 Social Work Practice Management and Standards, there is an aspiration that managers must directly observe an area of practice for each of their supervisees at least once a year. Quarterly practice weeks are the ideal time to undertake this activity. Direct observation focuses on one of the following areas of practice:

- 1:1 work with children;
- Interviews with parents/carers;
- Participation at a meeting (e.g., Core Group, Child Protection Conference, Child Looked After Review).

For managers responsible for casework supervision there is an aspiration that their practice is by direct observation. The observation will provide a platform to focus on good quality work and areas requiring development and will result in an action plan that is then reviewed in supervision.

The team managers for conference chairs and independent reviewing officers should observe child protection case conferences, looked after children reviews or core group meetings and report on these as part of their annual reports.

Senior managers are also involved in observation of practice. They walk the floor regularly, talk to staff, listen and observe, sit in on interviews with children and parents and report back to the Quality Assurance Unit any themes that may arise.

12. Maintaining high standards in assessment, planning, review, recording and visiting frequency

Standards set for maintaining quality of practice in assessment, planning, review and recording are set out in the 2019 service standards in relevant policies on the Children and Learning Tri-X Policy Hub and on the Hampshire, Isle of Wight, Portsmouth, Southampton (HIPS) Safeguarding Children Partnership website.

13. Panels and meetings

A number of panels and meetings consider specific planning decisions on cases or services. Panels may be chaired by an independent chair or by a senior manager, and their membership will include staff with relevant specialist knowledge. The Panels scrutinise practice and planning decisions and provide support and challenge to the case holder and line manager. Panels may also determine access to resources which are beyond the delegated authority of the line manager.

Currently the panels are:

- a. Legal planning meetings
- b. Looked after children (High-cost Panel)
- c. Multi agency Resource Panel (pre-MARP and MARP)
- d. Adoption Panel
- e. Fostering Panel
- f. Permanence Panel
- g. Children Looked After Reviews,
- h. Child Protection Conferences
- i. Missing, exploited, trafficked operational group
- j. Special Educational Needs (SEN) Advisory Group

14. Alerts, complaints, representations and compliments

Child Protection Conference Chairs and Independent Reviewing Officers escalate cases when practice issues are identified. These are reviewed by the relevant team and service managers and resolutions are monitored by the Performance Board.

The 'How to make a complaint' is used to investigate all complaints made by, or on behalf of service users. A complaints investigation can be considered as a form of audit of practice. The Quality Assurance Unit, together with the Corporate Complaints Team, are responsible for identifying any emerging trends or systemic practice issues. Specific meetings are convened to consider lessons learnt from complex complaints.

15. Reflective Supervision

In addition to 1:1 discussions in supervision, practitioners can access group reflective supervision sessions co-ordinated by the Practice Development Team. The 'Focus on Practice' programme is included in the annual programme (see above).

16. Principal Social Worker

The Principal Social Worker role was created following the Munro Report 2011. Its purpose is to take a professional lead role across children and adults' social care, supporting the Director in the exercise of the duties under section 7(1) of the Local Authority Social Services Act 1970 and the complaints, performance, learning and development and safeguarding responsibilities. The role provides a professional lead for social work practice and has a role in developing and sustaining partnerships and promoting safe and effective social work practice. It also contributes to strategic decision making across the organisation, ensuring that any development or change takes account of professional social work.

In Southampton, the Principal Social Worker is a dedicated role. Reporting to her is a Workforce Academy Manager and a number of practice consultants who have links / lead responsibilities for early help, social care assessment, protection and court work, looked after children and permanence and recruitment and retention. The team links with the Safeguarding Children's Partnership Team.

The Principal Social Worker completes a report to senior leaders and regularly meets with the Chief Executive. The Cabinet Member for Children and Learning also receives practice updates.

17. Organisational Health Check

The service uses information gathered from the annual staff survey as well as performance information about issues such as staff vacancy rates, sickness levels, staff subject to capability procedures, experience of staff, the workforce profile, staff turnover and staff training; all of which have a direct impact on service provision. Colleagues from across the service are encouraged to participate in the Recruitment and Retention Strategic Group and the Making the Difference Programme Board. The findings are taken forward by an action plan developed, monitored and progressed by the Children and Learning Service management team. Practitioners are asked to participate in the service Improvement Board arrangements.

18. External Peer Review and Partnership Audit

The service works with the Southampton City Council Audit team with a plan agreed annually by the Director of Children's Services. Peer review activity may also be undertaken by the relevant department of another local authority in relation to a specific service area. The service contributes to the South East Sector Led Improvement Partnership (SESLIP) as detailed in section five of this guidance. The QA Unit supports this activity to ensure that learning is embedded within the service's own quality assurance mechanisms.

19. Case reviews led by the Serious Incident and Learning Group

Child safeguarding practice and other local reviews are undertaken at the direction of the Safeguarding Children's Partnership (SCP) in relation to cases where abuse or neglect are known or suspected and either the child dies, is seriously harmed or there are concerns about the way in which organisations and professionals worked together to protect the child. Reviews focus on identifying and embedding learning in order to support improvements in professional practice across the partnership.

20. External Supplier Audits

Many services are commissioned by the Integrated Commissioning Unit (ICU) and delivered by external suppliers. Procurement and review processes ensure these services are high quality and offer value for money.

The ICU:

- a. Examines the quality standards offered by providers;
- b. Ensures feedback mechanisms are used and informs re-commissioning arrangements.

21. Management and Governance

The Executive Director for Children and Learning is accountable for the delivery of a quality service and responsibility is delegated to the service lead level of management.

The Head of Service of the Quality Assurance Unit has the responsibility and oversight of the quality assurance processes set out in this Framework.

Non-compliance with the requirements of this Framework will initially be managed within a competency framework; but may eventually proceed to be managed through the Disciplinary

Procedure.

22. Supporting documents

See also:

- Supervision Policy
- Practice Standards
- Participation Framework

23. Service Area Audit Tools

BIT and SWF <https://forms.office.com/e/tDxEy6jwin>

PTC <https://forms.office.com/e/yqTGS3TxVe>

CRS 1 <https://forms.office.com/e/BpPyviCNPb>

CRS 2 <https://forms.office.com/r/yb2LuCc6hj>

CRS 3 <https://forms.office.com/e/Z3SDu06D5Q>

C&FF <https://forms.office.com/e/nfRz60MjFH>

Adoption <https://forms.office.com/e/Bn9ZbEwDNX>

Fostering <https://forms.office.com/e/qR27trj7hH>

Inclusion Team <https://forms.office.com/r/fRmBXnZtAR>

***Audit forms for Jigsaw and YPS are awaiting final approval**