Lambeth Children’s Social Care

Quality Assurance and Learning Framework

2015

- Learning from auditing
- Continuous Professional Development
- Robust examination of practice
- Learning from the voice and experience of the children and families we support
- Learning from the experiences of our Partners

Revised Document 1.1
To be reviewed: December 2015
# Index

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>2</td>
</tr>
<tr>
<td>What is the Quality Assurance and Learning Framework?</td>
<td>3</td>
</tr>
<tr>
<td>The Families First Continuous Improvement Model</td>
<td>4</td>
</tr>
<tr>
<td>Performance and Quality Assurance Framework</td>
<td>5</td>
</tr>
<tr>
<td>Practice Standards</td>
<td>6</td>
</tr>
<tr>
<td>Practice standards that inform single agency case file audits</td>
<td>8</td>
</tr>
<tr>
<td>Auditing Schedule and Feedback Loop</td>
<td>10</td>
</tr>
<tr>
<td>Quality Assurance and its impact on Learning &amp; Development</td>
<td>12</td>
</tr>
<tr>
<td>Learning and Improvement</td>
<td>14</td>
</tr>
<tr>
<td>Quality Assuring Evidence of Learning and the impact of Training</td>
<td>15</td>
</tr>
</tbody>
</table>
Introduction

What is the Quality Assurance and Learning Framework?

The Quality Assurance and Learning Framework for Children's Social Care in Lambeth cover's all activity undertaken to ensure that work is carried out to the highest quality. This will inform our work by providing the systematic monitoring and evaluation 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.

The Framework is designed to aid us to strive for continuous self-assessment that results in ongoing service improvement. The purpose of the framework is to:

- Embed quality into service through practice standards.
- Ensure that services are achieving consistently high standards and that this is sustained.
- Ensure services are regularly evaluated.
- Engender an organisational culture that is committed to learning and continual development.
- Support the continuous improvement and development of the children’s workforce.
- Ensure that quality assurance activity is carried out in collaboration with practitioners and managers, to engender learning, accountability, and change.

To ensure that the quality assurance framework is effective it is underpinned by a series of principles:

- Quality must relate to service-user experience and outcomes.
- Quality is not a single event but is part of a continuous improvement cycle.
- Everyone who is part of the children’s workforce has a role to play in improving quality.
- Quality assurance will be planned into all new services to ensure that practice and processes can be monitored from the outset to ensure that they are fit for purpose.
- Comprehensive policies and procedures will be in place to support staff in delivering good quality practice.

Quality assurance will draw together messages from a wide evidence-base to provide an overview of quality.
The Families First Continuous Improvement Model

Table 1

It is proposed we use the Continuous Improvement model (shown above Table 1) in conjunction with the associated Performance and Quality Assurance Framework (shown on next page Table 2).

The Continuous Improvement model subjects the performance information to systematic analysis, from which knowledge may be gained to inform service development and improvement.

It is expected that this continuous knowledge acquisition will drive evidence-based practice. This learning will be passed on through direct work, training, provision of guidance documents etc. to improve outcomes for children and young people.

Examples of which would include (amongst others):

- Responsiveness to users’ needs and wishes
- Reviewed / revised policies and procedures
- Integration of training into practice
- Workforce development strategies – learning, development and recruitment of staff
Performance and Quality Assurance Framework

Table 2

The combination of the two models results in performance management activities, feeding continuous improvement of services. This will form the basis for the Lambeth Children’s Social Care, Quality Assurance and Learning Framework.
Practice Standards

All staff employed by Lambeth Children’s Social Care, or providing services on behalf of the Council, are held accountable for making sure that practice standards are met at all times.

Practice standards are informed by statutory guidance and regulation. 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 College of Social Work set out standards of conduct for all social work staff, which is set in their Professional Capabilities Framework.

All staff are expected to maintain our local Customer Service Standards throughout their work; this is based upon the Lambeth Promise. The Lambeth Promise is based on our FRESH values and sets out our aspiration for excellent customer service. It is our public commitment to our residents and it outlines what they can expect from us as individuals, a service and as a council.

The Lambeth Promise makes the following commitment:

‘Lambeth Council is committed to ensuring you receive a high level of service. We will be helpful, open and honest with you and always aim to make a real difference.’

We pledge to:

- Treat you as an individual with dignity, fairness, courtesy and respect at all times
- Make every effort to get it right first time. When we can't help you straight away we will let you know why and when we will be able to help
- Say sorry if things go wrong. We'll listen to you and tell you how we'll try and put things right and learn from it
- Work with you to develop your trust and confidence in our services
- Respond to your requests, comments and complaints promptly.

Performance indicators provide an internal and external reporting mechanism with which to measure performance; identifying areas of strength and areas requiring improvement. Managers use the performance data as one strand for monitoring and evaluating the performance of teams and team members.
As a consequence we have an agreed set of performance indicators and targets that are set nationally and locally, and have developed a reporting schedule that allows us to use this information to continually improve practice. (Table 3)

**Table 3**

<table>
<thead>
<tr>
<th>Day</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Tuesday</td>
<td>• Performance Team produce first monthly digest report in draft, which is sent to ALL Heads of Service &amp; Service Managers</td>
</tr>
<tr>
<td>Second Tuesday</td>
<td>• Heads of Service and Service Managers attend Performance Surgery - chaired by the Assistant Director, to give account of performance.</td>
</tr>
<tr>
<td>Third Tuesday</td>
<td>• Managers provide management analysis and context behind performance</td>
</tr>
<tr>
<td>Fourth Tuesday</td>
<td>• Final monthly digest report produced by Performance Team. This is shared with Senior Strategic Leaders and Members, who provide scrutiny of our service delivery.</td>
</tr>
</tbody>
</table>

**Case File Audits** are an intrinsic part of the quality assurance process and examine social care practice against 10 social care practice standards through three supplementary questions; these Practice standards will inform our Single and Multi Agency auditing. (Table 4)
## Practice standards that inform single agency case file audits

### Table 4

| Standard 1 - All children will have an assessment which reflects a clear picture of the child’s experience, wishes and feelings; | Does the Contact and referral episode clearly states reason for involvement?  
Does the child have an appropriate and up to date assessment?  
Is there a record that the child was appropriately seen alone?  
Is it clear that the child's perspective informed the assessment? |
|---|---|
| Standard 2 - All children will have a plan which explains their needs, outcomes and agreed actions; | Does this child have a plan, with measurable outcomes and time-scaled actions?  
Is there timely review of the plan?  
Does the review of the plan clearly include evaluation of progress against outcomes? |
| Standard 3 - All assessments, plans and interventions will reflect an understanding of the wishes, feelings and needs of parents and carers, and will be focused on enabling them to fulfil their responsibilities to their children; | Has the involvement and views of the parent or carer(s) been sought, considered and clearly documented as part of the assessment?  
Has the involvement and views of the parent or carer(s) been sought, considered and clearly documented as part of the planning?  
Has the involvement and views of the parent or carer(s) been sought, considered and documented as part of reviewing the plan? |
| Standard 4 - All assessments, plans and interventions will be based on a clear analysis of all the information available about the child; | Is there evidence of appropriate information sharing, including evidence of consent to share information?  
Does assessment and analysis show due consideration of ethnicity, culture, disability, age, sexuality and faith issues?  
Are the risks identified and evaluated, clearly linked to the rationale for recommendations and decisions? |
| **Standard 5** - As far as age and understanding allows, children will be spoken to alone and worked with by professionals who have the tools and training to directly engage children; | Is direct work with the child described?  
Is there evidence of tools or skills used, appropriate to the child's age and level of understanding?  
Has the impact of direct work been evaluated? |
|---|---|
| **Standard 6** - Case records will have an up to date chronology of significant events and an accurate genogram; | Is there an accurate genogram on file?  
Is there an up to date chronology on file?  
Is there evidence that historical information has been considered? |
| **Standard 7** - Case recording will be up to date and will reflect the purpose of interventions and contacts; | Are case records clearly written, in a professional manner that is accessible to children and their families?  
Are case records complete in a way that meets applicable legislation and statutory guidance?  
Does the case recording demonstrate the child's story? |
| **Standard 8** - Every child has a risk assessment including a contingency plan; | Are there any safeguarding needs identified with this child?  
Is there a clear plan to address safeguarding concerns? |
| **Standard 9** - Every case will contain evidence of monthly supervision that is reflective in nature; | Is there evidence of regular case supervision on the child’s record over the last six months?  
Does the supervision record demonstrate that it supports critical reflection?  
Does the supervision record demonstrate that it supports clear decision making? |
| **Standard 10** - Every case will contain evidence of management oversight ensuring that tasks have been completed to the required quality standard. | Is there evidence of regular management oversight through case audit?  
Do all key documents include clear evidence of managerial sign off?  
Is there evidence of appropriate line management support or challenge that is effective in ensuring completion of tasks to the required standard? |
Auditing Schedule and Feedback Loop

Each month, the cases to be audited are selected randomly by the Quality Assurance Team:

- Team Manager’s will audit 2 cases a month.
- Service Manager’s will audit 1 case every month.
- The Head of Service will audit 1 case every month.
- The Assistant Director will audit 1 case every two months.
- The Children’s Services Director will audit 1 case every two months.
- The DCS will re-audit a randomly selected previously audited case once every three months.
- The Lead councillor for Children and Families will re-audit a randomly selected previously audited case once every three months.
- The Chief Exec will re-audit a randomly selected previously audited case once every three months.

Team Managers will audit cases from teams they are not directly responsible for.

Identified cases will include a minimum of 2 step up, step down cases between MAT to Children’s Social care, and a minimum of 1 LADO case, in order to audit the partnership work completed with Universal services.

Auditors will be required to audit recent practice that has occurred within the six months immediately preceding the audit.

The audit tool includes a judgment about the quality of work based on Ofsted grades and priority weighted actions required to address deficiencies. The implementation of actions is monitored centrally. There is also a facility to enable auditors to offer advice or comment about cases that are not monitored.

Completed audits are discussed with the appropriate Managers and Social Worker and put on the child’s case file. It is critical that auditors ensure that what is recorded on the Child’s case record is appropriate information. This information may be used in future to support legal proceedings and may also be accessed by the child should they require access to their records at a later stage.

In addition, members of the Quality Assurance Team will undertake ‘themed’ audits exploring themes that arise from the social care audits as and when they are required.

A schedule of Audit Feedback compliments the audit timetable. A Manager will meet with the case holder and explore with them the core elements from the audit template, holding a reflective ‘support & challenge’ conversation. This will be recorded on the Framework system as supervision and be headlined as Supervision/response to audit. Examples of outstanding practice as well as areas for improvement will be recognised as part of this process and fed back to senior managers.

All case alerts will be immediately sent to the HOS, and any safety concerns will be addressed immediately. Any case found inadequate will be re-audited by the HOS at the next but one audit loop (8 weeks). This will ensure that the audit action plan has been completed and that the case is no longer inadequate.
Table 5 on the next page outlines the process in full

**Table 5**

---

**Findings fed back to allocated worker**

**Reflective Supervision**

Manager informs QA team of key audit findings- any case alerts to be sent to Head of Service - any safety concerns to be addressed immediately

Any case found inadequate will be re-audited by HOS at next but one audit loop (8 weeks). This will ensure that action plan has been completed and that the case is no longer inadequate

---

**QA team provide bi-monthly tracking of audits completed; Key themes and number of alerts to Senior Management team**

Key findings/ themes may be fed to the LSCB and Universal services to consider multi agency audits.

To further ensure the involvement of Universal services a minimum of two of the audited cases will be “step up, step down” cases between CSC and MAT team and one of the audited cases will be a LADO case

---

**LEVEL 1**

*(Every Month)*

- Team Manager completes 2 peer audits
- Service Manager completes 1 audit
- Head of Service completes 1 audit

**Drives individual performance supervision and appraisal targets**

---

**LEVEL 2**

*(Every 2 Months)*

- Assistant Director completes 1 audit
- CSC Director completes 1 audit

**QA team to feedback to Learning and Development quarterly in order to influence Children's Social Care Learning and Development Framework and the Training Strategy, including the annual training offer**

---

**LEVEL 3**

*(Every 3 months)*

- Re-audits a previously audited case - Randomly selected
- DCS completes 1 re-audit
- Children and Families Councillor completes 1 re-audit
- Chief Exec completes 1 re-audit

**Informs and shapes Children's Social Care self assessment and improvement planning**

---

**LEVEL 4**

*(Quarterly)*

- QA Team will identify and complete a minimum of 2 themed Audits & (As directed by LSCB board)
- Multi agency themed audit - completed in partnership with LSCB

**Informs and shapes LSCB Learning and improvement framework and the LSCB year planning/ LSCB Themed audits**

---

Revised Document 1.1
To be reviewed: December 2015
Quality Assurance and its impact on Learning & Development

Audit tools have been developed to cover the above standards, and specific targeted questions in relation to Children in Need, children subject of a Child Protection Plan, Disabled Children and Children in Care. (The audit tools and guidance can be found in Annex 1.) The Service Manager of the Quality Assurance Team will collate a quarterly report of all audits completed, and with a brief analysis will identify key themes and areas that need further exploration.

IRO Alerts and CP Chair Alerts are another important element of the Quality Assurance and Learning Framework. The Service Manager of both Child Protection Chairing and the Independent Reviewing Team will each collate a quarterly report of all alerts raised; identifying key themes about practice issues relating to; frontline work; management response or organisational/systemic culture. This report will include a brief analysis identifying recurring issues and unresolved issues. (IRO Dispute Resolution Protocol Annex 2)

Complaints and compliments about Children’s Social Care and Children Social Care Services are another important element of the Quality Assurance and Learning Framework. The Children’s Complaints Officer will provide a quarterly report, briefly identifying the nature of all reports received and provide an analysis which identifies trends and makes comparisons about the nature of complaints.

Participation and Advocacy work completed with Children and their families is also a vital component in the Quality Assurance and Learning Framework. The Children’s Participation Worker will complete a quarterly report of all advocacy provided to young people, (both internal and commissioned); the report will contain a brief analysis which will identify key themes and trends in the nature of difficulties young people are experiencing with service provision and engagement.

The Learning and development Plan will itself feed back into the loop, via quarterly reporting from different section of the Social Work Development Unit; this will include detailed feedback from the ASYE program, student placements, Inductions and new to Management program, as well as “soft” information from training sessions.

Responding to Findings

All of the above reports will feed into a quarterly Quality Assurance & Safeguarding Service Plan; which will determine the development of a robust and responsive Learning and Development Plan and a single agency themed audit schedule; it will also if necessary feed information to the LSCB via the Children Social Care board representative, which will help the LSCB to determine the Multi Agency audit schedule. The Framework has the expectation that workforce development plans, service plans and personal development plans will evidence that they are shaped by the learning from the social care audits.

This process is detailed in Table 6 (next page).

Revised Document 1.1
To be reviewed: December 2015
Table 6

1. Single Agency Themed Audits
2. Multi Agency Themed Audits
3. Partipation and Advocacy
4. Complaints and Compliments
5. IRO and CP Chair alert

Learning and Development Plan
## Learning and Improvement

Below are the key elements that will impact upon the Learning Plan.

<table>
<thead>
<tr>
<th>Case Reviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Serious Case Reviews</td>
</tr>
<tr>
<td>2. Child death reviews</td>
</tr>
<tr>
<td>3. Multi agency practice/partnership reviews</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Audits and Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Section 11 audits</td>
</tr>
<tr>
<td>5. Single agency audit &amp; performance data</td>
</tr>
<tr>
<td>6. Multi-agency audits</td>
</tr>
<tr>
<td>7. Performance information</td>
</tr>
<tr>
<td>8. Themed reports and audits</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td>9. Feedback from the workforce and workforce development</td>
</tr>
<tr>
<td>10. Feedback from children and families and communities</td>
</tr>
</tbody>
</table>
Quality Assuring Evidence of Learning and the impact of Training

Registration of social work staff with the Health and Care Professions Council is reliant upon evidence of minimum learning requirements over a three year period; requiring managers to provide oversight to, and sign off, the evidence of learning for each qualified Social Worker for whom they are responsible.

Lambeth has a supervision policy that requires practitioners, with their managers, to reflect critically on their cases and foster an inquisitive approach to social work; it clearly dictates that supervision records are used to demonstrate social workers’ and managers’ reflections on the progress of cases and the quality of decision making. The policy also clearly requires the manager’s 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 Children’s Social Care staff have an annual staff appraisal. 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 weaknesses in staff performance and provides a vehicle to address any concerns and areas for improvement.

The Quality Assurance and Learning Framework feedback loop includes the expectation that the impact of training will itself be quality assured; as a result Lambeth will be piloting the London Safeguarding Board’s Training Evaluation and Impact Analysis Framework in order to assess the impact of training; this will be reviewed twice per year. (Impact analysis Framework Annex 3)