

# Blackpool Children's Services Quality Assurance Guidance April 2024

# **BlackpoolCouncil**



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#### 1. Overview of this guidance

Quality assurance is everyone's business, we are all responsible for evidencing that our practice is in line with local and national standards, procedures, policies and legislation. External inspection is important to assess the quality of the services we deliver, but it is also important that we have strong internal processes to routinely monitor the quality of our practice – the impact and outcomes this is having for Blackpool's children, young people and families. This guidance sets out our quality assurance processes and expectations for all teams, managers and practitioners in Blackpool Children's Services.



# 2. Core principles

It is important that we all help create and nurture a **learning environment**, one that develops professional curiosity, provides space for reflection, and that builds our analytical skills. A positive learning environment is one that recognises that there is always room for improvement and cultivates a healthy learning culture where it is safe to unpick practice – where instances when things don't go so well are seen as opportunities to learn rather than opportunities to blame.

Linked to this is our **Blackpool Families Rock** restorative practice and relationship-based approach in Blackpool. We expect all practitioners, managers and senior leaders to be fluent in understanding this approach – practicing in a Blackpool Families Rock way both with families and with each other. This means being restorative – working 'with' families and each other, taking a social pedagogical approach as well as understanding the impact of trauma both on ourselves and the families we work with.

We use all the information available to us and integrate it into a holistic view of practice that is as accurate as possible. We use qualitative and quantitative data, complaints, compliments, SQR Service quality assurance resolution process, feedback from children, young people and families, inspection and audit as standard sources of information. We look for patterns and themes and continually look to develop our analytical skills. We participate in wider quality assurance activities with partners and other teams, taking a collaborative approach to improvement.

Quality assurance needs to celebrate our successes and strengths of our service as well as link to the current goals, aims, priorities and specific areas of practice development the service has at that time. We are committed to ensuring our learning and insight links to explicit **actions** and SMART **plans** that helps our service continually improve.

# 3. Managers' responsibilities

Quality assurance is a core part of all managers' work. Every manager is expected to:

- Embrace the core principles set out above,
- Actively participate in audit,
- Know the current performance data and outcomes of recent audits for their team(s),
- Use performance data and audit learning to identify areas of practice that may need deeper analysis,
- Have a clear knowledge of the standards expected in their area of practice,
- Be able to clearly articulate the challenges and strengths in their team(s),
- Make time to observe their practitioners on a regular basis as set out in the supervision policy,
- Lead and model reflective, analytical, professionally curious conversations in team meetings and supervision that makes use of a wide range of data, families feedback, audit learning, national reviews, research etc.,
- Make use of development and training opportunities to improve practice in their team(s) linking this development to current service priorities and the current needs and performance of their team(s).

# 4. Audit cycle

We work on an 8 week audit cycle (see appendix 1 for the workflow). The Assistant Director will have oversight of service performance via their Quality Assurance (ADQA) meeting. At this meeting Heads of Service are expected to present a report (see appendix 2 for the template), an overview of the strengths and challenges in their part of the service and what they are doing to reinforce the strengths and address the challenges – linking this overview to current service priorities. This Head of Service report should also cover headline learning points from any specialist audits completed during the last audit cycle. This report should be based primarily on recent audit activity and performance data, but take a holistic approach and use wider feedback (e.g. from families), other recent reports, complaints/compliments, any thematic audits, inspection, or other recent relevant information. At this meeting the QA Manager also shares a report on the headlines from the audit cycle covering learning from moderation activity and the AD may set additional actions following these reports.

• Before the 8 week audit cycle starts all auditors are allocated an audit to complete during the first 2 weeks.

#### Week 1-2, The Audit:

- Heads of Service ensure that all audits are completed by their auditors before the end of this 2 week period, and are expected to set a culture enabling high quality audit practice.
- An audit is expected to only look at the last 6 months, unless it is clearly important to reference practice before this period.
- Auditors are expected to audit across the range of our service, not just auditing within their own service area\* (see exceptions below).
- Completing the audit during this 2 week period includes the expectation the auditor has completed a reflective discussion with not only the current allocated practitioner and their manager, but also any other practitioners and managers whose practice they have audited.
- The current Team Manager (the team where the child is allocated) is expected to log on Mosaic that a Reflective Case Discussion has been held, and the current Team Manager is responsible for recording agreed actions from this discussion.
- If the auditor has given an inadequate grade overall then the Service Manager must be also invited to the reflective discussion, and it is the Service Manager's responsibility to add the case note that a Reflective Case Discussion has been held, and what the agreed actions from this discussion are.

#### Week 3, Moderation:

- A selection of audits are moderated by the QA Manager and Principal Social Worker during every audit cycle (at least 15%).
- All inadequate audits are also sent to the Assistant Director and their Head of Service (the Service Manager having already seen them having led the reflective discussion) to ensure any immediate actions are followed up.
- All good and outstanding audits are also shared with the Assistant Director, their Head of Service and Service Manager.

#### Week 1 (and Week 4-5), Head of Service Quality Assurance Meeting:

- Every Head of Service leads a Quality Assurance meeting every 4 weeks for their managers and PDL. The first meeting (week
  1) in the audit cycle should focus on performance data, the second meeting (week 4-5) should focus on audit findings as well as using performance data.
- During the second meeting (week 4-5 in the audit cycle) the themes from these audits, the strengths and challenges are drawn out and what we are doing to reinforce strengths and address challenges discussed and actions set. This then informs the Head of Service report for the ADQA meeting.
- Heads of Service will be expected to identify trends and focus on the impact and outcomes from actions in previous meetings.

• The Practice Development Leader for this area of the service is always invited to every Head of Service QA meeting, where plans are jointly made to support practice development.

# Week 6, Assistant Director's Quality Assurance (ADQA) Meeting:

- Heads of Service each present a report of the strengths and challenges in their part of the service and what they are doing to reinforce the strengths and address the challenges.
- The QA Manager shares a report on the headline learning from the audit cycle as well as learning from moderation activity.
- The meeting will refer to Annex A data, weekly and monthly data reports see below for standard data/measures.
- The AD may set specific actions, or request thematic audits to be completed.
- Every 6 months the QA Manager produces a fuller report drawing out the learning from the last 6 months of audit activity.
- The PSW shares the insight and learning from reports and information shared at the ADQA meeting with the team of Practice Development Leaders for them to include in workforce development activity (learning circles, training, guidance, briefings etc.).

#### Week 8, Preparation:

• Before the 8 week audit cycle starts all auditors are allocated an audit to complete during these first 2 weeks.

# 5. Exceptions and specialist audits

We aspire to have people auditing across as wide a range of service areas as possible both to develop individual's knowledge as well as the range of feedback people receive from audit. However, there are some parts of our service which require specialist knowledge to audit and some groups of staff it is not reasonable to expect to audit across the whole service. Below are the current exceptions and the specialist audits we currently commission from external auditors.

#### Early Help:

- Early Help auditors are not expected to audit across the rest of the service at present, but where other audits look at work of the Early Help teams they welcome the feedback and insight they have to offer.
- Early Help Team Leaders have their own Early Help audit tool at present, Team Leaders are expected to complete 2 Early Help audits per month and Team Managers expected to complete 1 full audit per month using the service-wide 10 Domain tool. The aspiration is that Team Leaders will progress towards using the 10 Domain tool over the next 6 months.

• Service Managers read all the audits completed and summarise the learning from these. The QA Manager to moderate a selection of inadequate and good audits alongside the Service Managers.

#### **Adolescent Service:**

- Leaving Care auditors are not expected to audit across the rest of the service at present, but where other audits look at work of their teams they welcome the feedback and insight they have to offer. They use the service-wide 10 Domain tool with the aspiration that these auditors will work towards auditing across the service over the next 6 months. The aspiration for Leaving Care is that Team Leaders will be involved in auditing in the next 6 months too.
- We are exploring a reciprocal auditing arrangement with another local authority for Youth Justice work so this may sit outside the specialist audits below. Youth Justice auditors are expected to follow the audit cycle with other auditors using the 10 Domain tool and also complete 1 victim audit per month.

## Fostering:

• Fostering managers are part of the audit cycle, but complete fostering audits as this is an area of practice other managers may find challenging without a level of knowledge of fostering regulations.

#### **Specialist audits:**

The 10 Domain audit tool may not fit for some areas of work, and some areas of work may not be audited frequently enough through our main audit cycle. The specific areas of practice here will be audited by an external auditor on the following schedule between April 2023 and March 2024. For each specialist audit a minimum of 9 audits should be completed. There may be other areas of practice that are identified for a further discrete thematic audit, these to be discussed and agreed at the ADQA meeting.

Month	Specialist Audit
April 2023	Private fostering
May 2023	Fostering
June 2023 Complex needs	
July 2023	EDT
August 2023	For Baby's Sake
September 2023	Family Time
October 2023	Family & Friends Meeting (Family Group Conference)
November 2023	Adoption
December 2023	Youth Justice
January 2024	EDT
February 2024	Awaken
March 2024	Parenting interventions (Early Help)

#### 6. Standard data/measures by service area (Measures from National Framework Dashboard indicators)

#### **Early Help & Support:**

- Audit findings: strengths and challenges,
- EH assessments undertaken,
- EH assessment timescales,
- EH assessments undertaken by partners,
- Data on support provided to families,
- % of referrals which are repeat referrals,
- Rate of assessments completed,

#### Multi-Agency Safeguarding Hub, Assessment & Support Teams, & Awaken:

- Audit findings: strengths and challenges,
- Numbers of contacts,
- MASH assessments,
- Age of child,
- Timeliness,
- · Outcomes.
- Sources of referral and Conversion rates (partner agency details)
- Co-production / participation,
- Child exploitation assessment tool,
- Child exploitation outcome measure tool initial and final,
- Chronology and Case summaries,
- Missing From Home return interviews / no interview,
- Private Fostering,
- Rate of assessments completed.
- % of children whose child protection plans were de-escalated and did not present again with unmet needs in 2 years,

• % of referrals which are repeat referrals,

#### **Strengthening & Supporting Families:**

- · Audit findings: strengths and challenges,
- Strategy meetings,
- Chronology and Case summaries,
- Visits, including child seen alone,
- Child in Need Reviews,
- Multiagency meetings on open assessments,
- Missing From Home return interviews / no interview,
- Co-production / participation,
- School attendance of children in need,
- Rate of assessments completed,
- % of section 31 proceedings that end with the child living with parents, and the age of the children in the proceedings,
- Rate and number of section 47 investigations,
- Rate of section 47 investigations which result in an initial child protection conference,
- Rate of new child protection plans,
- % of children whose child protection plans were de-escalated and did not present again with unmet needs in 2 years,
- % of referrals which are repeat referrals,

# **Supporting Our Children, Adoption, Fostering & Residential Homes:**

- · Audit findings: strengths and challenges,
- Co-production / participation,
- Chronology and Case summaries,
- Visits, including child seen alone,
- Missing From Home return interviews / no interview,
- Co-production / participation,
- Rate of assessments completed,

- Rate of new entrants to care,
- Rate of children in care,
- % of children in care living with their family networks,
- % of children in care living in foster care,
- % of children in care living in residential care,
- Distance of placements from home,
- Stability of placements of children in care,
- Strengths and difficulties questionnaire scores for children in care,
- Progress and attainment in Key Stage results for children in care,

#### Adolescent:

- · Audit findings: strengths and challenges,
- Co-production / participation,
- · Chronology and Case summaries,
- Visits, including young person seen alone,
- Rate of assessments completed,
- % of care leavers in education, employment or training,
- % of care leavers in higher education, % of care leavers in apprenticeships,
- % of care leavers in unsuitable accommodation,

# Safeguarding, Quality & Review:

- Audit findings: strengths and challenges,
- Child Protection conferences.
- Repeat Child Protection,
- Our Children Reviews,
- Co-production / participation,

#### Other Key Measures:

- Social worker turnover,
- Agency social worker rates,
- Social worker caseloads,
- Turnover of Director of Children's Services and practice leaders,
- Share of children's social care spend on children in care,

# 7. Appendix 1



# 8. Appendix 2



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