

Leeds City Council
Children and Families Services



‘Doing simple things well and building better outcomes’

Quality Assurance Framework
March 2023

| About the Document | |
|---------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Title | ‘Doing simple things well and building better outcomes’ Quality Assurance Framework. January 2023 |
| Purpose | The purpose of this Framework is to outline how in which we undertake quality assurance and ensure our services ensure improved outcomes for Children and Families |
| Replaces | Quality Assurance Framework (2020) and Journey to Better Outcomes (2018) |
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1. Our Vision

Our vision is for Leeds to be the best city in the UK and the best city for children and young people to grow up in. We want Leeds to be a child friendly city. Through our vision and obsessions we invest in children and young people to help build an increasingly prosperous and successful city. We aim to improve outcomes for all our children whilst recognising the need for outcomes to improve faster for children and young people from vulnerable and deprived backgrounds.

Our Children and Young People’s Plan can be found at; [Leeds Children and Young People's Plan 2018-2023](#)

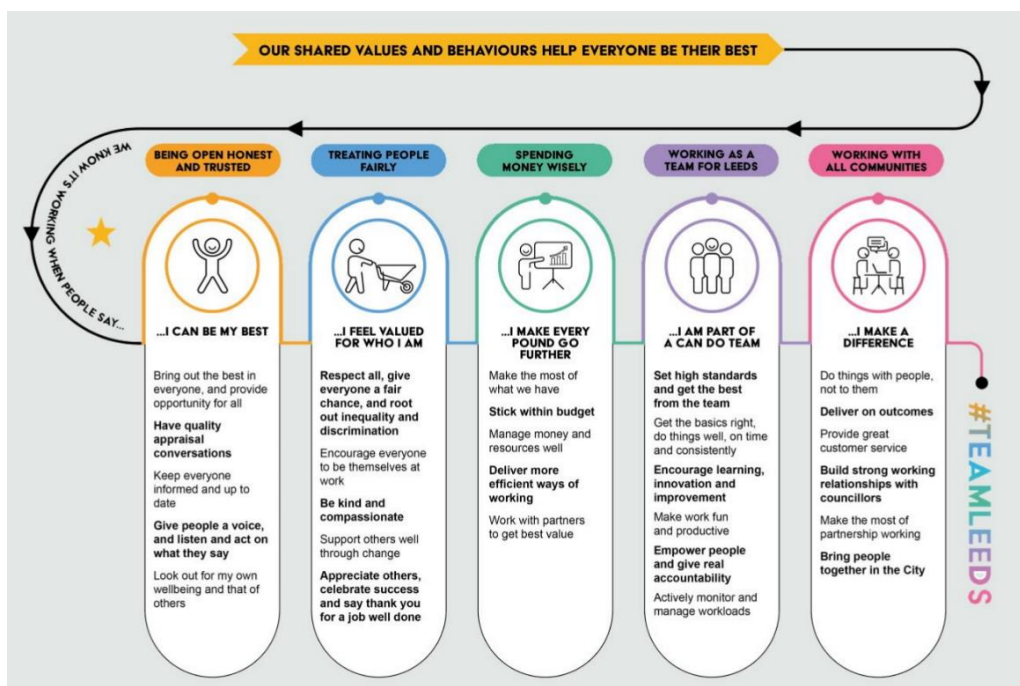
Quality assurance is part of our everyday practice for the Children and Families Service and provides evidence that services are delivered in line with Leeds Practice Guidance. The Children Act 1989 key principles guides our work with children and families. We practice on the foundation that children and their families have a right to be together, that their parents maintain their parental responsibility and our work with them should enable this to happen if we are able to ascertain safety for the children and support for the families. We drive change by using restorative practice and our Leeds Practice Model.

2. Leeds Practice Model

Our Service supports relationship-based practice for all our workforce. This enables practice to be as good as it can possibly be. Each practitioner and manager need to feel that they can do the best possible work with support of their leadership team. This means that clear analysis is required and rationales for decisions need to be obvious to show how conclusions have been reached, so that anyone can understand why at that time in a child’s life a certain decision was made.

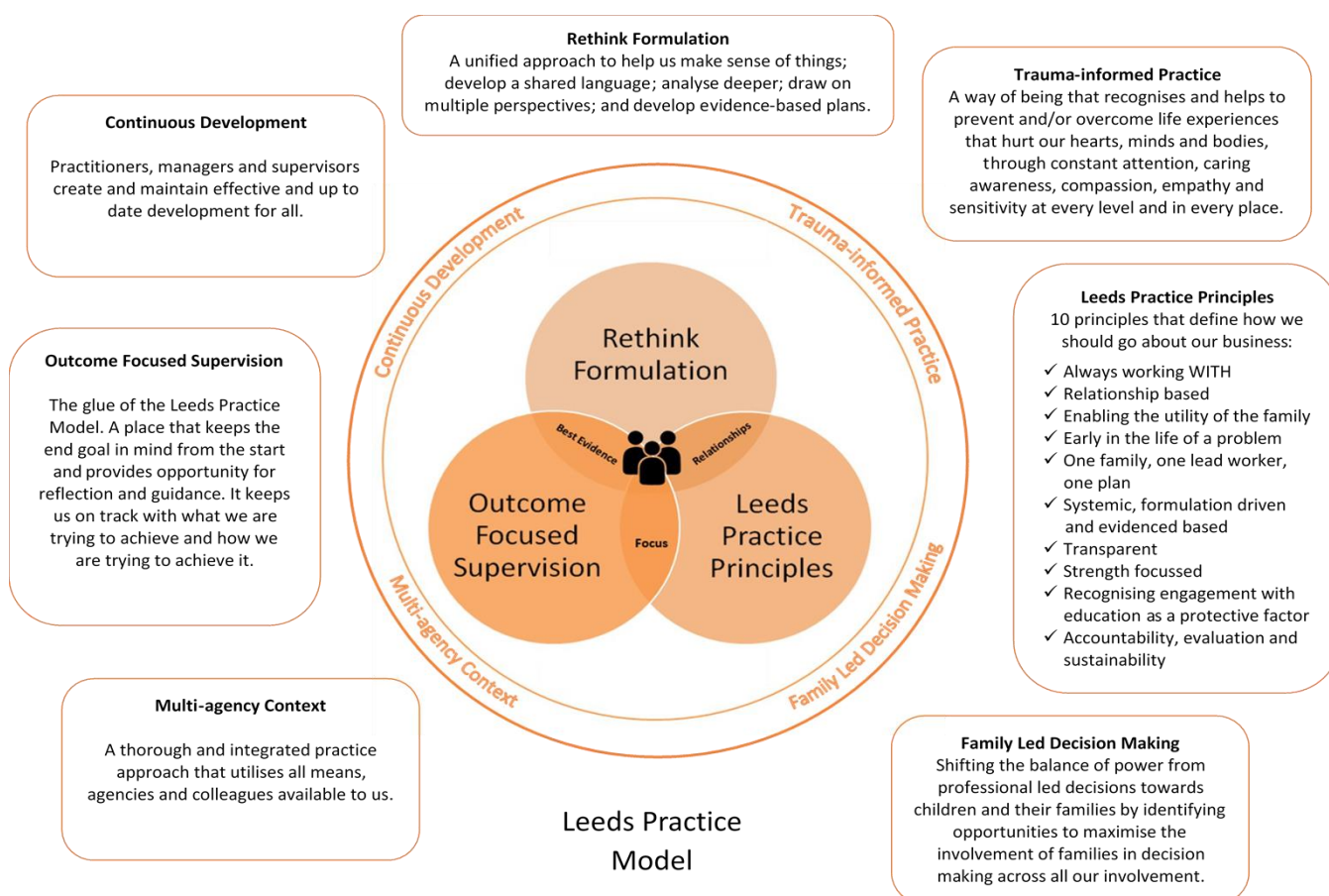
Leeds Children and Families Service uses the Leeds Practice Model approach to working with children and families. The model has also been shared with partner agencies, and there is regular training on the model provided through the Leeds Safeguarding Children’s Partnership and also the Rethink Team. Working in this way means that Services who work with children understand a common language and a consistent application of risk and safety. This helps practitioners and other professionals to have improved ways of working together, reflect, think, and talk about cases. The help provided to families is respectful, purposeful, and based on strong professional judgements and decisions. The prominence is on having the right conversations at the right time rather than ‘intervening’.

Wherever we work in Children and Families Service, we have a shared set of values and a model of practice.



The Leeds Practice Principles and Leeds Practice Model are –

1. **Always working WITH** – creating a context of high support and high challenge with children, young people and families and each other;
2. **Relationship based** – assuming that engagement and best outcomes are achieved through trusting and respectful relationships with each other, taking responsibility for creating and maintaining effective relationships at all levels;
3. **Enabling the utility of the family** – putting the family at the heart of everything we do; recognising and enabling the networks and skills within the family; and wherever possible families determine the direction of care and intervention;
4. **Early in the life of a problem** – engaging families in appropriate and effective support immediately when an issue is identified and maintaining a persistent offer to engage in support;
5. **One family, one lead worker, one plan** – wherever possible working to reduce numbers of practitioners involved with a single family and identifying one lead practitioner to coordinate a single comprehensive family plan. Where agencies are also involved with the adults in the family, a Think Family, Work Family approach should be adopted;
6. **Systemic, formulation driven and evidence based** – all plans consider the whole system around a family, information is effectively analysed and plans are created using the best available evidence;
7. **Transparent** – children, young people and families are as fully informed as possible and are always involved in and understand decisions that concern themselves and their families;
8. **Strength focussed** – all interactions, interventions and plans are seeking, affirming and utilising existing knowledge, skills and abilities; and adopt an evidence based approach to assessing needs and managing risk;
9. **Recognising that engagement with education is a protective factor** – seeking to maximise attendance, attainment and achievement;
10. **Accountability, evaluation and sustainability** – always working to continually understand a situation, improve plans and find ways to enable independence and reduce reliability on services.



The Leeds Practice model provides a restorative practice framework, restorative tools and an overall checklist of evidence-informed restorative practice that will support practitioners to meet the standards

Quality Assurance and Practice Standards

Our Practice Standards are the method of how we outline and maintain the high-quality practice and expectations of service to be delivered to our children and families. We recognise the vital importance of Early Help, Social Work and specialist provisions, and the need to invest in all aspects of practice and development so that we can achieve our ambitions for the most vulnerable children in our city. Our Practice Standards are part of a suite of practical tools to enable our staff to 'Do the simple things well' which are tied to processes and guidance which are set by national and local policy.

The Leeds Practice Standards are fundamental to the way in which we see ourselves and therefore determine what we aim to achieve. Nationally, there are Key Performance Indicators (KPI's) which are reportable to the Government and how Ofsted use their framework to inspect Local Authorities. However, for us to ensure that our services are fit for purpose, our Quality Assurance Framework looks at the quality of work behind those KPI's. This chapter breaks down the key areas which quality assurance explores.

Direct Work and Family led Decision Making

Working in a child centred way is an essential part of best practice, and we embrace this throughout our Practice Standards. Communicating and listening to children and young people helps practitioners understand what life is like for them, gain an understanding of their journey and what needs to change to increase their safety and promote their wellbeing and development. Direct work with children and young people is not only to ascertain their wishes and feelings, but also to completely involve them in an age-appropriate way in the plan of support. Children and young people should be involved as much as possible in the decisions being made for them and the help being offered.



Direct work should be carried out according to the age and level of understanding of the child, explaining what is happening and why. All such work needs to be recorded on the case file to ensure that children and young people can have access to this in years to come. A variety of direct work tools and activities should be used to work with children and young people. There is a large variety of tools available with different activities to engage children and young people of all ages. In relation to very young children, observations of their interactions with others are powerful and should also be included. Direct work can also be undertaken through group work within services, for example in the Youth Service. This enables the assessment of the needs of a group of young people together, and a plan is devised with them to ensure needs can be met.

In Leeds, we are committed to helping families make choices and develop their own solutions to the challenges they face. Our behaviour is guided by relational practice and maximising the involvement of families in decision making – this is what we do when there are decisions that need to be made. We want the best outcomes for children and young people and believe that working in this way keeps them safe, supports them to grow up in their own families and helps them achieve sustainable outcomes. As early as possible we will identify the most appropriate opportunities to maximise the involvement of families in decision making across all our involvement, at early help and in social work, including when we support young people who have left care. We are committed to shifting the balance of power from professional led decisions towards children and their families. This is a way of behaving with families throughout our involvement, not a one-off event, and our culture and behaviour means that we are always thinking about how to put this into practice.

Practitioners need to have a clear understanding of what impact the Service has had to children and young people, and what has improved for them through our involvement. Feedback should also be sought from parents and carers about their views of how helpful the support they are receiving is and this information will inform and advise how services are provided. Feedback can be obtained on an individual basis but also through group work.

Assessments

The purpose of an assessment in any guise is to gain a clear realistic picture of the child/young person and an understanding of what is happening in their life, what it is like to live within their family, how they are cared for by the adults around them, and how their health, education and wellbeing needs are being met. Different services call the assessment they use by different names, for example, in early help this is an Early Help Assessment, in Social Work this is a Child and Family Assessment (CAFA).



The practitioner undertaking the assessment will analyse the information gathered using a multiagency approach and come to a professional judgement about its outcome with a suggested plan of next steps. The assessment will be undertaken in partnership with the child/young person and families, with their full consent and participation. If this is not possible, the reasons will be clearly recorded as part of the assessment, and this should also add to professional judgement and analysis.

The family history is critical to understanding and predicting the present and future, therefore every assessment will include a chronology which highlights key events in the child's life. The

chronology will be routinely updated whilst the case remains open.

The child/young person's perspective, wishes and feelings are central to the assessment. Each of the child/young people in the family will be seen and spoken to separately and on their own by the practitioner in the child's first language. If this is not appropriate or possible, the reasons will be clearly recorded along with how in which their input will be gathered, whether this is by observations or drawing, for example.

The assessment will explore the child's whole family, friendship & community network to identify support. Assessments benefit from a genogram which highlights key people in the child/young person's life. We will ask about all adult members of the family ensuring that relationships between family members have been observed and assessed.

The assessment is holistic and therefore requires information sharing from several sources, by all those involved with the child and family. Multi-agency conversations will be undertaken, which is trauma informed, to contribute to the assessment. Our written assessments will clearly show what we have found through our involvement, and what we think should happen next. It is evidence based and tools can be used such as Rethink Formulation to support a clear analysis of the information available. It should include why we think this and what we think should happen. The length of time it takes, and depth of the assessment will be determined by the complexity of the child's situation and the level of need, however, assessments should be completed timely to avoid drift or delay.

Meetings and Plans

A child/young person will have a plan of support which has been the product of a multi-agency meeting. This could be plan in relation to Early Help, Child in Need, Child Protection, a Child Looked After, or a Pathway Plan. The plan will ensure all that are involved are clear of its purpose.

The plan is a tool for helping the family and practitioner measure progress. The plan should be written using SMART goals to ensure that it is –

- Specific
- Measurable
- Achievable
- Realistic
- Timely



The plan should evidence how the child/young person's circumstances are changing and should be written using plain language. Plans will be regularly updated and reviewed. They should reflect the child/young person's circumstances,

and actions from the plan should be clearly followed and completed. If actions cannot be undertaken, then there should be a clear rationale for why these have not happened.

Management Oversight and Case Supervision

'Effective leadership sets the direction of an organisation, its culture and value system, and ultimately drives the quality and effectiveness of the services provided' (Laming 2009).

Management oversight and supervision support a learning culture and provide a setting for case reflection, discussion, and challenge. It is a fundamental belief in Leeds Children and Families Services that staff are the most important asset in fulfilling its responsibility to provide a quality service to children, young people and their families. This is consistent with the Council's values of 'Working as a Team for Leeds'. Supervision is an important right and benefit for everyone. It benefits the individual, the organisation, and those who use our services. Supervision supports the workforce to critically analyse, reflect on their work and their practice, and to manage the emotional impact of what they do. Ensuring supervision is used in this way results in better outcomes for children and families.



Supervision is a regular 1:1 meeting between the practitioner and manager to meet organisational, professional, and personal/case objectives. Supervision can also occur at any time that a practitioner needs support or if a manager needs to be part of decision making. This can be outside of a formal 1:1 meeting. The relationship between the practitioner and manager is key to ensuring that when things are at their most complex and vulnerable, which is often outside of formal supervision, the practitioner and manager can communicate openly and effectively. The purpose of supervision is that the practitioner leaves with a clear sense of the direction of their work and the steps they are going to take, and they are energised to do so.

Our Supervision Framework is clear in relation to support and oversight and can be found at; [1.1 Resources and Forms Library](#)

3. Quality Assurance Framework Purpose

Children are at the centre of everything we do. We have a relentless focus on their improved outcomes. To analyse the difference our involvement may have had, we are clear about our quality assurance practice and its purpose.

The practice and purpose of our Quality Assurance Framework include key elements for our service which are:

- **Child Centred:** the focus of quality assurance will be on the experiences, progress and outcomes of their journey through our children and families service;
- **Restorative:** quality assurance will be restorative. Instead of a top-down approach, quality assurance work will be based on working *with* practitioners and managers, building relationships. And emulating best practice. As a restorative process quality assurance will be characterised by both high support and high challenge;
- **Outcome Based:** in line with the key behaviours for children's services, the focus of quality assurance will be on outcomes rather than processes;
- **Positive:** our approach to quality assurance will be positive, looking at working in partnership with the workforce development team to encourage improvement of service delivery, and support the knowledge and development of our workforce and services on offer;
- **Reflective:** our quality assurance framework is designed to be about promoting reflective practice and shared learning.

How we'll know if we've made a difference

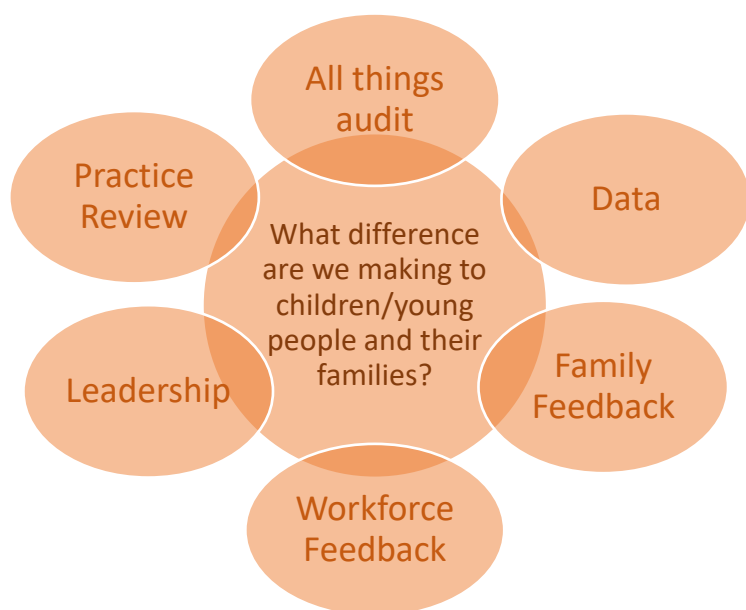
This Quality Assurance Framework outlines the quality assurance activity in Children and Family Services; providing an overview of the purpose, processes and tools used and how it links together. It is deliberately centred on key areas of activity and the framework provides details of each activity and is an important support and reference tool for managers and practitioners. A quarterly Quality Assurance Report will bring together all review work into one place so key learning is identified and the impact of agreed actions are monitored through a performance and accountability

cycle.

Using restorative approaches is a key element of Leeds City Council's ambition to become a child friendly city. These approaches provide staff with a range of language, behaviours and tools that strengthen their relationships with children, young people, and families, empowering them to share responsibility by using a solution-focused approach, which supports positive change.

The framework for quality assurance is reflective; we measure the impact and quality by examining service delivery against Practice Standards and consider the views of children and families, practitioners, and partner agencies about the services in place. The framework is also pro-active as we ensure continuous improvements to practice and services by focusing on things that matter, getting it right first time, seeing the differences, and making sustainable improvements.

The key areas that are central to understanding practice within the organisation:



1. All things audit: All audit activity is undertaken using a strengths-based approach which focuses on good practice whilst highlighting learning for service delivery

2. Data: Data is provided by our Performance and Intelligence Service, so we can see how in which we are performing against key performance indicators and statistical neighbours. This helps us review and ensure that systems and/or processes are working effectively and assists with identifying areas of need

3. Family Feedback: Accountability is provided by obtaining feedback from children and families to understand their experience of our services and practice and how we can improve

4. Workforce Feedback: Accountability is provided by obtaining feedback from our workforce to ensure that they are full supported to provide best practice and

they can help shape and inform service delivery and practice

- 5. Leadership:** Provides strength and support for delivery of services, to shaping and embedding best practice. Our leadership shapes Team Leeds, including our vision, aims and principles
- 6. Practice Review:** Our practice is reviewed to establish what difference we are making to the lives of children, young people, and families and if we have supported them to achieve their goals and better outcomes

4. Quality Assurance Methods

The Leeds Practice Model ensures that we work in partnership with children and families, and each other. All quality assurance methods mirror this dynamic, and there are opportunities for the workforce to participate in auditing activity to share their experiences. As a workforce, we learn from what is working well and apply our best thinking about what can be further developed, and what development is required in the future.

Our methods for quality assurance are dynamic and adaptable, responding to Service requests for analysis and review where needed. To ensure there is a measure of quality assurance activity each quarter, Interactive Learning Audits are a significant function within our framework for individual cases. This activity is supplemented through other quality assurance activity across individual cases or in relation to themes which may require exploration across service areas. In this section we will outline just some of the quality assurance activity undertaken.

Interactive Learning Audits

The Interactive Learning Audits provide an invaluable perspective on front line practice. Effective audits can provide insight into the quality of recording but also into the quality of work with the child, the quality of management oversight, and the views, experiences, and outcomes for the child. The Interactive Learning Audit is a framework for auditing case files which can be used across different services including Early Help and our Children's Social Work

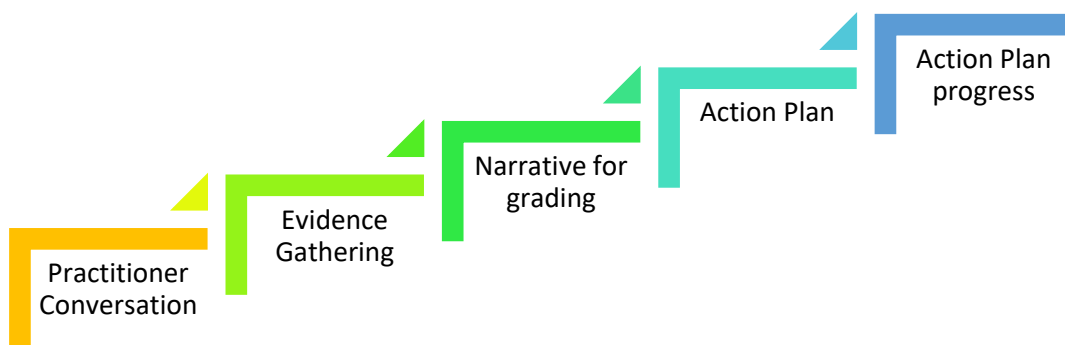
Service. The framework is also adaptable for other services to assist with consistent quality assurance activity as required.

In relation to Interactive Learning Audits we aim to -

- Complete Interactive Learning Audits on a random sample of cases each year to explore practice and identify priorities for learning and development
- Ensure that each practitioner understand the need for Interactive Learning Audits and undertake these restoratively. All practitioners should have experience of quality assurance activity in its many pretences
- Ensure that the Interactive Learning Audit is carried out by an independent auditor who is unconnected with the case
- Ensure that all cases are randomly selected, and has not previously been audited in the last 12 months

Interactive Learning Audit Tool

The Interactive Learning Audit Tool is separated out into different sections with guidance on how to undertake the audit consistently. The Audit Tool is separated out into distinct areas for consideration, including a practitioner conversation, family feedback, and a case recording overview. All of which bring together evidence in relation to the overall grading.



Practitioner Conversation

The practitioner conversation provides an opportunity for the practitioner/manager allocated to the child to reflect upon recent involvement with the family. In preparation for the conversation the practitioner should undertake the **Pre-Audit Checklist**.

The practice conversation should be beneficial to both the auditor and the practitioner/manager. Through the discussion the auditor can ask questions which will have arisen from their review of the case file. Questions for the conversation should originate from the preparation work undertaken by the auditor. Auditors will always be transparent about the work that has been seen, and this includes areas of good practice as well as areas for development.

How are we doing?

Here at Leeds City Council, we really like to hear from you to tell us how we are doing. Listening to you means we can learn and improve on what we do when working with children and families.

To make sure our Children and Families Service are giving you what you and your family need, we want to speak to you about the workers and the teams in the council you have worked with.

The 'Quality Assurance Framework' is something we use to work out if the service we have given to people like you has been helpful. It also helps us find out what has improved since the service became involved in your life or what we could improve on to make things better for you and your family.

We cannot change assessments or decisions that have been made but we can learn from your experiences. What you tell us will help what we do for families young people, and children in the future.

The workers who contact you are friendly and easy to talk to and they will ask your views about our Children and Families Service by speaking to you on the phone or meeting with you if that's possible.

Telling us how you feel is not the same as making a complaint. If you wish to make a complaint you can email: complaints@leeds.gov.uk or telephone 0113 222 4405.

If children/young people wish to be involved in sharing your voice then you can contact the Voice Influence and Change Team and be part of feedback groups please email VIC@leeds.gov.uk

If parent/carers wish to be involved in sharing your voice then you can contact Let's Talk and be part of feedback groups - please contact Kelly Boyle at Let's Talk, on 0113 336 8735.



Voice of the child/young person and parent/carer

There is opportunity for the child/young person and parent/carer to be involved in the Interactive Learning Audit and offer their feedback and reflection upon Service involvement.

Area teams will be notified of audits that are randomly selected in their area and they will ensure that the child/young person and parent/carer are informed that an audit is taking place. An explanation leaflet has been devised to share with children and families so as they are aware of the process, and who will contact them.

Contact will be made with the parent/carer by the auditor to ascertain if they wish to participate in the audit being undertaken and offer their feedback. This will be undertaken as to how best suits their needs. Consent will be requested for children/young people to participate.

Children and families can feedback with regards to their participation in the audit process through the Let's Talk Forums as to if they feel the process and line of question was suitable and addressed their wishes to participate. There are other forums for children and family participation which is not linked to the Interactive Learning Audit which is detailed in the leaflet in case individuals wish to participate in a different manner.

Case Recording Overview

The auditor will read and review the case file for the child/young person. It should be read alongside Practice Standards and Policy for our view of best practice, and how we work with children and families. Given that Practice Standards are reviewed routinely, it is the auditor's responsibility to ensure that they are aware of any changes over the auditing period. If an auditor is unsure of any aspect of the audit process, they can contact the Team Manager within the Capacity and Change Team.

Opinions should be made on the quality of the recording, highlighting areas of good practice along with any areas of development. Examples should be given from where these have been seen on the file to corroborate evidence being observed. There should be clear specific actions identified as to how barriers can be overcome. When reading the case file, an extract of the work being undertaken should be reviewed. The Interactive Learning Audit is not looking at individual practice but must look at the Service as a whole. For example, if a child/young person is subject to a CP Plan and is on the cusp of coming into care – then it is likely that the child/young person will be allocated a Social Worker, a worker from MST, a Family Group Conference Coordinator, and a Child Protection Chair. The work from these Services should be commented on throughout the audit, and feedback can be obtained as part of the Practice Conversation with all the workers involved if the auditor feels this is required. Recording on the case file from the respective teams should be present, and it should be clear as to the joined-up plan.

As part of the Interactive Learning Audit, it is recommended that the auditor begins by reviewing the following –

- Assessment
- Visits – including work with the child and family in relation to their voice
- Meetings
- Current Plan
- Management oversight (including supervision)

Within the Interactive Learning Audit tool there are suggested questions to assist the auditor in gathering the evidence for the audit and to give a narrative as to what they have found. There should be clear evidence for where the information was seen on the case file and a view as to if this follows best practice.

Overall judgement and grading

Auditors are required to provide a narrative judgement and an overall grading. The judgement and grading must use evidence that is balanced and proportionate. Auditors need to be clear on what the grading is and why, what evidence is the judgement based on, and what would they have liked to have seen to have given a higher grading. There should always be a balance of information shared, with examples of good service delivery whilst highlighting any barriers.

The grading criteria is linked to the Leeds Practice Standards to allow for consistency of grading across auditors. The gradings are -

- Outstanding Practice = Exceeding Practice Standards requirements
- Positive Practice = Meets Practice Standards requirements
- Some development required = Meets minimum Practice Standards requirements
- Significant development required = Does not meet minimum Practice Standards requirements

Action Plan

In all audits the Action Plan should be used to address any areas where improvements are required. The Interactive Learning Audit tool assists in identifying these actions by highlighting what is missing or what needs to be improved. Auditors are not case managers and therefore any complex actions should be discussed with the manager.

Cases that are any grade can have actions. Cases that are recorded as *some development required* or *significant development required*, must have actions to address the areas where practice needs to improve.

Moderation (including second moderation)

To review our audit activity, the Senior Leadership Team will undertake moderation on a sample of Interactive Learning Audits completed. The numbers of moderation are determined by the completed number of Interactive Learning Audits and discussed within the Quality Assurance Senior Leadership Team Meeting (which occurs monthly).

The moderation has been separated in to two activities – the first moderation and second moderation.

The first moderation will be undertaken by Heads of Service. They will review the Interactive Learning Audit, ensuring that the evidence presented in the audit tool justifies the grading. The moderator is responsible for checking the audit and feeding any learning points back to the auditor.

The second moderation will be undertaken by the Principal Social Worker (PSW) or Chief Officer. The aim of the second moderation is to magnify the Senior Leadership oversight of quality assurance activity.

From both moderation activities good examples of Interactive Learning Audits can be noted. All moderation activity will be captured on the case file to evidence senior leadership oversight.

Thematic Audits

Thematic audits are useful as a method to explore a theme or area of practice over a greater number of cases than that observed in an Interactive Learning Audit (which only reviews single cases). Each theme can be based upon information obtained from a variety of sources including when analysing case management data or feedback from practitioners. Thematic audits can be undertaken quickly (if necessary) and can take many forms with any number of auditors. A single auditor may look at a particular theme, or this could be via a group, for example, of Service Delivery Managers. All such thematic audit activity will have a clear methodology.

Such audits are coordinated by the Capacity and Change Team, who ensure that the outcomes of the audits are influential either by assisting in reviewing service delivery or reassuring that service delivery is having positive impact.

In any auditing activity there is a clear methodology of: why we are undertaking the audit, what tool we will use, and the process that will be used. From this activity, there must be information shared via a written report within the Quality Assurance Meeting and with the Senior Leadership Team. This ensures that we remain self-aware, of areas

where there is best practice, and areas for development.

Audit Participation Groups

The purpose of undertaking Audit Participation Groups is based upon the Leeds Practice Model of always working with. This is to ensure that audits are something that are done 'WITH' practitioners to enable learning and development rather than done 'TO' them.

Audit Participation groups are thematic audits which are undertaken in relation to a particular theme. The Audit Participation Group is open to all. Once a theme is selected then a methodology for the Audit Participation Group is devised and volunteer auditors are requested. The aim of the group session is to explore the information on the case file in relation to a specific theme and highlight what has worked well or if there are any barriers for practice. The Capacity and Change Team lead on the Audit Participation Groups and from the information shared will write a report for the Senior Leadership Team with recommendations for service actions and/or workforce development.

Additional Quality Assurance Activity

There is much other quality assurance activity undertaken throughout the Children and Families Service. This includes (as examples) -

- The Weekly Referral Review Meeting
- Quality assurance feedback (2-way) from weekly Decision and Review panel (DARP)
- Child Protection Conference Monitoring forms and quarterly data meetings
- Independent Reviewing Officer Children Looked After monitoring forms and quarterly data meetings
- Multi agency LADO Audits
- Front Door Audits
- JTAI Reviews

External validation

- LSCP multi-agency audits
- LSCP Appreciative Inquiries
- Independent reviews
- Learning from Ofsted outcomes
- Peer Reviews and Peer Challenge
- Mystery Shopping within youth work
- Activity Centre- 'Learning outside the classroom'

It is good practice that all such auditing activity is reported to Senior Leadership via different methods, including performance data and Service quarterly and annual reports. The Capacity and Change Service report on quality assurance activity to inform workforce planning and development.

We are always looking for new and creative ways to undertake audits and embed these into practice. Therefore, such activity will change over the course of the year and be modified as necessary.

Quality Assurance Meetings

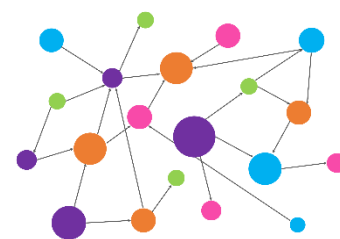
To share learning from quality assurance there are regular meetings to discuss this. There is a monthly Senior Leadership Quality Assurance Meeting, and a monthly Senior Leadership Performance Meeting. Both of these meetings are attended by the Chief Officers and Heads of Service for Early Help and Children's Social Work Services, along with the Performance Team and Capacity and Change Team. The aim of these meetings is to ensure that there is a clear understanding of current practice, and to explore themes highlighted in data. These meetings formulate the plans for quality assurance activity with the workforce.

There is also a monthly Audit and Quality Assurance meeting chaired by the Capacity and Change Team and attended by Service Delivery Managers, Team Managers and Advanced Practitioners from across Early Help and Children's Social Work Service. It offers a forum in which learning from audits and other forms of quality assurance can be shared with clear actions and recommendations for workforce development. Discussions take place as to how to share the learning wider with the workforce. When the recommendations are discussed, appropriate actions are

identified and tracked.

5. Case Management Data

Reporting is available from the case management system (mosaic). Reports have developed over time and will continue to be reformed to allow us to understand ourselves and to highlight areas where further quality assurance review may be needed. Reports are written by Business Intelligence staff in the Integrated Digital Service (IDS) and support by Children's Intelligence and Policy colleagues.



Reports are available to Senior Leadership, Service Delivery Managers and Team Managers. Each use them for different practices, and work together to understand the information behind the data. Work is being progressed to ensure that practitioners can also benefit from data reports to aid their work and understanding, whilst also preparing them for career progression. Such investment in our workforce is seen positively to ensure that all have the option to continue grow professionally.

Below we will outline just some of the ways in which the Case Management Data is reported and used to inform and influence our quality assurance activity.

Weekly Team Overview

The Weekly Team Overview gives an outline of team performance against routine but important operational indicators. It provides reassurance and alerts to Senior Leadership and to operational managers. It is based on data extracted from the case management system. The report enables users to gain an understanding of performance to individual practitioner level. The overview is circulated each week to all social care team leaders, strategic development managers, and the Senior Leadership Team. This is one of the documents used as a starting point for conversations in area/service practice improvement workshops.

Weekly Obsessions Tracker

An important way to generate and retain commitment is by sharing progress. One way this is done is through our weekly obsession tracker. Within our [Leeds Children's and Young People's Plan 2018 - 2023](#) we have a set of priorities which include three obsessions. These obsessions are –

1. Safely and appropriately reduce the number of children looked after
2. Reduce the number of young people not in education, employment, and training
3. Improve achievement, attainment, and attendance at school

By focusing on our obsessions and making improvements in these areas we will move a broad range of outcomes. By making our obsessions visible we are implying that they are the business of all colleagues who work with children, young people and families. By sharing beyond the children's community, we are saying they are city priorities and everyone's business. This tracker is shared weekly with the best available information; the visibility is more important than complete accuracy.

Doing Simple Things Well

Part of our restorative approach is the ability for operational managers to communicate their team's performance and practice to Senior Leadership. A simple dashboard summary is circulated weekly to operational managers, and they are asked to complete a report to share performance narrative, issues of concern and solutions. This encourages a common understanding and that performance questions are understood, owned, shared as appropriate and addressed. Doing the simple things well stops complicating factors getting in the way of good practice.

6. Feedback

Talking to children and families and our workforce, is extremely important and adds depth to our understanding of the services that we offer. A feedback rich culture, where people are comfortable asking for and receiving feedback, can empower and change how in which we work.

For children and families, engaging effective feedback can feel like a superpower. In services when individuals can at time feel powerless, it allows for their voice to be heard and acted upon. We can harness this voice to ensure that

services are fit for purpose and have positive impact.

For our workforce, feedback allows individuals to feel like we belong and are appreciated. In a work context this means feeling that there is a value to what we do, what we can bring, and a clear purpose.

Feedback can be obtained in many forms, whether this is part of the Interactive Learning Audit process, survey, compliment, or complaint. All forms of feedback are helpful to assist in understanding the impact of our service. As such, information from feedback assists in work force development and the learning cycle.

Children and Family Feedback

Feedback from children and young people, parents/carers is extremely valuable to the service to ensure that we are purposeful and have impact. People we work with are regularly asked, if we are making a difference to their lives and what they would like us to do differently. Children and young people can attend meetings/reviews if they so wish, but even if they don't attend, they will be active participants in plans about them.



The Children's Voice and Influence Team is integral to shaping processes for gaining feedback. The team is responsible for –

- Ensuring that children, young people, parents, carers and families are able to have a voice and influence over services that are provided in our city
- Supporting children and young people by underpinning their citywide approach with the behaviour “Listening and responding to the voice of the child
- Encouraging children and young people “to be active citizens who feel they have a voice and influence” as detailed in the Children and Young People's Plan
- Working towards the citywide ambition to become “Child Friendly Leeds” the best city to grow up in

The Children's Voice and Influence Team write reports every 6 months of all feedback received and ask the question of services how children and families voice is having impact. All Children and Families Services have a responsibility to respond and ensure that children and families voices are at the heart of all that we achieve. They do so in different guises and develop different ways to engage children and families they support. For example, Early Help are currently developing a survey for parent/carers in relation to the service that they received. This resembles a closure survey so as we can learn from their experience where we can improve.

In Leeds families can also attend the 'Our Voices' forums. These provide the family voice of their experiences of Children's Social Work Services. The forums encourage parents and carers to have their say to shape services for the future. The forums provide a safe space where ideas can be shared to ensure the best service for families. The feedback is crucial to developing next steps to help families help children.

Feedback is also welcomed through (just as examples) –

- Feedback forms for Child Protection, CLA Reviews, Fostering Reviews
- Feedback through Interactive Learning Audit process
- Advocacy Service
- Children in Care Council
- Care Leavers Council
- Parent Carer forums for children with SEND

Information from such feedback is correlated into annual Service reports which are presented to Senior Leadership. The Capacity and Change Team also ensure that information is reported in the quarterly and annual Quality Assurance Report so as the knowledge informs workforce development.

Workforce Feedback

Feedback from the workforce about their experiences as an employee are extremely helpful to any employer. This ensures good communication, staff retention and the long-term success of robust relationships. As part of our Quality Assurance Framework/HD/March2023

communication strategy, staff are encouraged to speak openly about their experiences with Senior Leaders responding to these on a regular basis. This includes regular “You say – We Did” updates from the Senior Leadership, as well as face to face group consultation sessions and 1:1’s if needed.

Practitioner Health Check Survey



The Practitioner Health Check Survey is designed to help us assess the ‘health’ of our service, to continue to develop areas of strength, and to identify and improve areas of development. We use this tool to help us understand the current climate and functioning in Leeds and to help us develop the Service. It is completed annually to enable Leeds City Council as an employer to assess whether the practice conditions and working environment of the front-line workforce are safe, effective, caring, responsive and well-led.

The survey is administered independently via the Capacity and Change Team. It is an easy task for staff to follow a link to the survey and complete online. The survey contains questions about the individual’s role and allows for multiple choice as well as free text answers.

The health check findings are analysed and results from previous years are examined to monitor trends and understand the impact of previous improvement plans. A report is produced outlining the themes. This is shared across Services and is scrutinised by the Senior Leadership Team. ‘Promises’ are developed from the information contained with the survey. Such promises are then put in to action as to how the service can implement changes that will support improvements. Staff are encouraged to be a part of this, and the information is fed back to the workforce through attending worksite and team meetings for practitioners and managers. Updates on how actions are progressing are communicated via regular “You say – We Did” updates.

Celebrating Good Practice

The ‘Child Friendly Leeds’ Awards showcase the diverse talent, significant achievements and energy of the city’s children and young people, as well as highlighting and celebrating those people, places and organisations that are dedicated to making Leeds a child friendly city. Awards are received across the city for inspiring young people, child friendly places, people who go the extra mile and fantastic organisations and community groups.

We are also developing additional ways in how to celebrate good practice on a systematic basis by ensuring that this is included within agenda items within team meetings. This is to provide regular positive feedback to the workforce to ensure that good practice is regularly celebrated and that practitioners feel valued for the work they undertake.

Compliments and Complaints

We value compliments and complaints as an important form of feedback about our services. We aim to learn from feedback and use the lessons learned to continuously improve and review the services we offer and respond positively to families’ needs and expectations. Most complaints are dealt with under the Leeds Corporate Complaints Procedure however some may be dealt with under the Children’s Social Care Statutory Complaints Procedure. An annual report from the Complaints Service offers information on compliments and complaints about our children’s services. Senior Leadership including Head of Complaints hold meetings during the year to discuss corrective actions and identify learning opportunities. Senior Leadership distribute learning to staff to ensure they reflect learning in practice and procedures where necessary.

Appendices

What Good Looks Like

Referral & Assessment

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| The referral recorded on the child's file is clear, appropriate, and progressed in a timely manner | Consent has been obtained unless there are safeguarding concerns which would prevent us from doing so | The history is clearly understood with analysis. Themes and impact are identified and understood with analysis and timely intervention | Assessments are holistic with clear evidence of analysis, judgement, and planning | The child's lived experiences are recorded, and their identity considered | Timely assessments with a clear and relevant plan | The child is seen timely, and the child's voice clearly captured | Absent parents and fathers are included in the assessment |
| The reason for undertaking the assessment is clear and linked to the identified concerns | | The family story and parent's experiences are explored | Fact and opinion are clearly distinguished | | Support within extended family and community is considered | | Assessment incorporates views of other professionals |

Recording

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|----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------|----------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------------------------|
| Child's details are accurately recorded including details of the child and family's diversity & identity | Carer's information is provided. Where parents are separated, shared care/contact arrangements are recorded | There are genograms which evidence the family network | IRO/CPC footprint is visible and there is scrutiny throughout the file | Information is easy to locate on the CMS | Children are seen consistently, timely and evidence time to build a relationship | Jargon free language is used in any recording | Clear decision making and follow up is recorded and followed through in supervision | There is clear evidence of Restorative Practice and Values |
| | | | | | | Avoid all acronyms | | |

Chronologies

| | | | | |
|----------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| The child's journey can easily be seen on CMS and in recording | The chronology is updated and relevant | The chronology is edited to show the child's journey with analysis, themes and impact | The assessment and analysis of impact and theme of events is recorded clearly | The chronology should be reviewed and any new information added as to additional impact that is identified after the event |
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Outcome Focused SMART plans

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|-------------------------------------------------------------------------------|------------------------------------|-------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------------------------------------------------|
| The child and family are fully involved in the assessment, reviews, and plans | Advocacy services are promoted. | The plan is outcome focussed and SMART, relevant, and up to | There are clear reasons for changes in the plan and the timeframes agreed | Plans are free of jargon and acronyms, and capture the child's and parents' voice | An updated assessment informs the plan | Family networks are used to assist with contingency planning for support/crisis situations |
| Parents have seen the | There is evidence of collaborative | | | Direct work with the child / family informs assessment | There is consistent multi-agency working | Contingency planning for if |

| | | | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------------------------------|
| plans/ assessments within a timescale that facilitates their involvement. Parents/stepparents/carers have been identified and offered the opportunity to participate in planning and knowing what is happening for their child | working with key professionals involved. | date Plans have an aim of improving the child's lived experiences | There is evidence that plans are reviewed timely | and plans The plan considers what is known about the family's history and the impact and implications of this. | with all relevant professionals which is clearly recorded. If attendance is a concern, there is escalation | the plan doesn't progress is clear and shared with children, families and professionals The sustainability of a plan is considered for service withdrawal | | |
| Voice and influence of the child | | | | | | | | |
| There is evidence that the child's gender, sexuality, ethnicity, religion, language, disability and any other protected characteristics are integral to work with them | The child's voice is evident in recording with good quality direct work tools used The child's voice and lived experiences are recorded clearly | There is good quality age-appropriate direct work with the child There is evidence that the child has been given information about advocacy services | There has been continuity of the allocated practitioner | There is a dependable relationship between the child and practitioner. This includes age-appropriate conversations as to what we are doing and why | The child contributes to relevant meetings. The child's views are captured and considered in assessments and reviews and inform plans/decisions | | | |
| Supervision and Management Oversight | | | | | | | | |
| There is evidence of reflection being used, multiple hypothesis being considered and evidence of steer from supervision and management oversight when required | There is evidence on file of case discussions and supervision There is clear evidence of Restorative Practice and Values used within supervision. | Key decisions are made at the right time and level | Regular manager oversight with rational, analysis and timely actions | Previous actions are explored with high support and high challenge. Action is outcome focussed with clear timeframes | Assessments, plans, visits, audits and other key documents are explored with rigour and steer | Evidence of consideration of diversity: for example, age, disability, ethnicity, faith or belief, gender, identity, language, race and sexual orientation is clear | The escalation process is used when required | Supervision takes place in line with the policy |