
Children and Young People’s Services Scrutiny Committee

17 January 2024

Children’s Social Care Quality Assurance

Report by the Director of Children, Young People and Learning

Summary

Our vision is to provide children in West Sussex with the right help and support at the right time, so they are kept safe, enjoy strong and enduring relationships, and are afforded the best permanent care possible.

This report examines the effectiveness of the Quality Assurance activity within West Sussex Children’s Social Care. The Quality Assurance processes within Early Help and Children’s Social Care enable us to robustly relate performance management data to quality assurance using three key questions:

1. What do we know about the quality of practice?
2. Is the child/ren’s voice and lived experience evident within practice?
3. Does quantitative and qualitative data demonstrate we are embedding practice?

The report focuses on actions completed since the Ofsted ILACS Inspection of March 2023 where West Sussex Children’s Services was judged to be Requires Improvement overall with features of Good seen in two of the five areas of focus.

Judgement	Grade
The impact of leaders on social work practice with children and families	Good
The experiences and progress of children who need help and protection	Requires improvement to be good
The experiences and progress of children in care	Good
The experiences and progress of care leavers	Requires improvement to be good
Overall effectiveness	Requires improvement to be good

The Ofsted report specifically highlighted: “A relentless and incremental approach to improving practice has led to significant progress in some areas, such as the safeguarding and planning for unborn children, achieving permanence for children, and the effectiveness of quality assurance.”

Ofsted also observed “The local authority works well with improvement partners and has been open to external scrutiny and support to strengthen practice. Well-established, comprehensive, and effective quality assurance processes give leaders

a clear line of sight to practice. The collaborative involvement of social workers in the process provides an opportunity for reflection and a sound understanding of 'even better if' to further improve practice."

There has continued to be a commitment, focus, and drive to ensure the quality of service provided to children is consistently Good with an aspiration for Outstanding.

The Continuous Practice Improvement Plan (CPIP) summarises our current key priorities for children in line with the seven practice areas for improvement identified in the ILACS report. It also contains actions from the previous Practice Improvement Plan where we aspire to do even better. Progress is scrutinised by the Children First Continual Improvement Board, ensuring management has a strong and accurate understanding of the performance and quality of practice.

Focus for Scrutiny

The Committee is asked to consider the progress of the Quality Assurance and Auditing work since the last full report to the Committee in December 2021.

Key Lines of Enquiry

Key areas for Scrutiny to consider and comment on include:

- How the audit outcomes, reflections and learning from this process demonstrate continued improvement in the consistency of high-quality practice across the service.
- Any areas of challenge being identified through the audit work, and the plans in place to address these.
- How the voices of children and families are being sought and their influence on practice improvement; how children contribute to their reviews, and how children and families' voices are captured within the audit process.

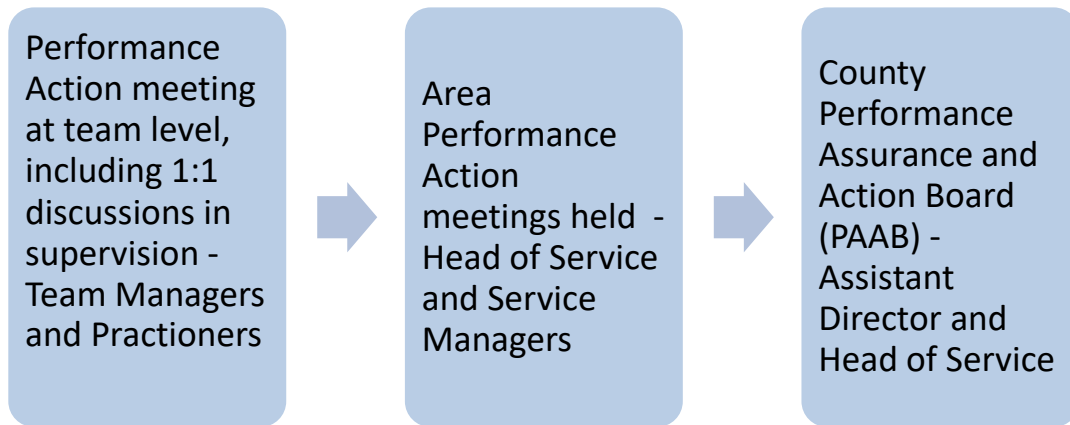
The Chairman will summarise the output of the debate for consideration by the Committee.

1. Introduction

- 1.1 The Ofsted ILACS Inspection in March 2023 judged West Sussex Children's Social Care to be overall Requires Improvement with a Good grading for *The impact of leaders on social work practice with children and families* and *The experiences and progress of children in care*. The Inspection also highlighted that "A relentless and incremental approach to improving practice has led to significant progress in some areas, such as the safeguarding and planning for unborn children, achieving permanence for children, and the effectiveness of quality assurance."
- 1.2 Such comments have provided assurance around the effectiveness of our Quality Assurance Framework. Understanding ourselves as an organisation and the quality of the service we are providing is key to improvement. This contributed to the Self-Evaluation Framework. The Self-Evaluation is an integral part of planning and delivering continuously improving services to

children, young people, and their families. It enables leaders to effectively identify areas of strength, development, and actions to improve.

- 1.3 Ofsted also highlighted "The local authority works well with improvement partners and has been open to external scrutiny and support to strengthen practice. Well-established, comprehensive, and effective quality assurance processes give leaders a clear line of sight to practice. The collaborative involvement of social workers in the process provides an opportunity for reflection and a sound understanding of 'even better if' to further improve practice."
- 1.4 Since the Ofsted inspection, the Practice Improvement Plan has been reviewed and replaced with a Continuous Practice Improvement Plan (CPIP). The CPIP summarises our current key priorities for children in line with the Ofsted-recommended areas for improvement, as well as practice areas where we aspire to do even better.
- 1.5 The reconstituted Continual Practice Improvement Board is independently chaired by Steve Crocker, previous Director of Children's Services for Hampshire, and newly appointed Department for Education Advisor, to oversee continual improvements until March 2024.
- 1.6 The Board meets monthly to seek assurance on behalf of the Department for Education (DfE) that the areas for continuous improvement highlighted in the Ofsted inspection are being given the appropriate focus to promote best outcomes for West Sussex children. In October the Department for Education undertook a six-month review of progress since the ILACS. The review focused on three areas highlighted in the Ofsted report to monitor: 1. The implementation of the Family Safeguarding model; 2. Services to Care Leavers; and 3. Effective Partnerships. The DfE concluded in their feedback meeting that they see evidence of sustained and committed improvement in all the areas that were reviewed and that the County Council remains focused on delivering a good service.
- 1.7 Essential to our improvement is a strong and robust quality assurance process. The Quality Assurance Framework is now well established within the department, providing a governance structure that offers robust scrutiny and oversight with reports on quality assurance and performance data being presented to the Performance and Assurance Action Board (PAAB) and the Children, Young People and Learning Directorate Leadership Team (DLT); this then reports into the Continual Practice Improvement Board. The main themes are shared with key stakeholders, Safeguarding Partnership, Lead Members, and the Chief Executive of the County Council.
- 1.8 Performance data capturing has matured, and dashboards are available to support the business needs. Performance data is available at an individual child level, worker level, team level, area level and county level. This oversight enables trends and patterns to be easily seen. The dashboards are accessible for all managers and practitioners. Performance data reporting continues at an operational level in line with the below activity and is reported into the senior management structures as described above.



1.9 The interlink between the quality assurance activity, practice standards, training and the progression of the continuous practice improvement plans is strong.



1.10 The Quality Assurance auditing activities are carried out in various ways:

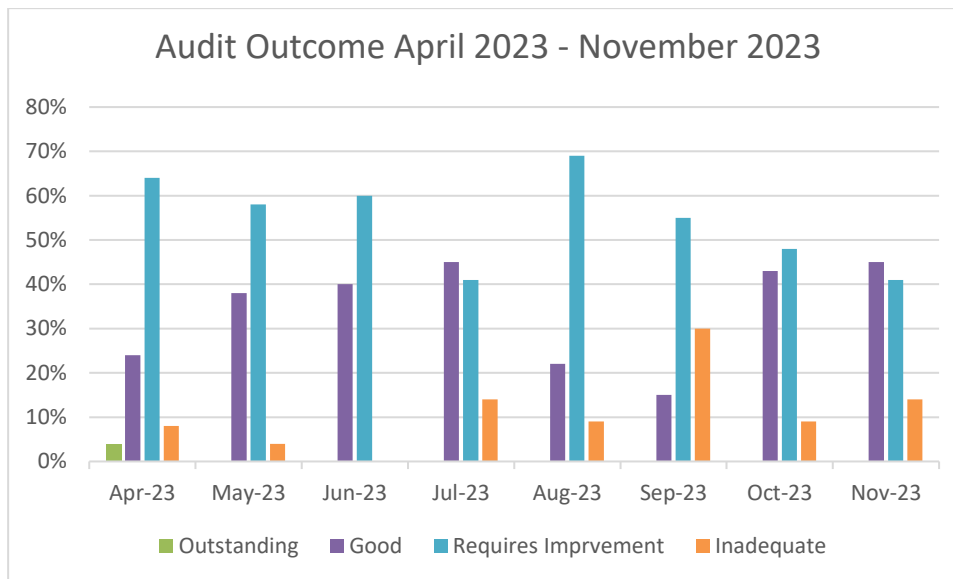
- Learning cycle audit – monthly collaborative case audit including the practitioner.
- Thematic Audits – themes identified through PAAB where deep dive audits take place and an action plan identified following findings.
- Dip Sampling – focuses on a specific issue as opposed to full case audit.
- Reviews – case review following significant event to identify learning and can contribute to partnership responses such as rapid reviews, local safeguarding partnership reviews, domestic homicide reviews and adult safeguarding reviews.
- Back to the Floor – mock inspection where team of practitioners across the service inspect an area. All teams have an inspection once a year and formulate a plan arising from the learning.

- Observations of practice – managers observe practitioners within their team.

1.11 The above actions provide assurance that progress is being made in line with the CPIP and, where needed, influences the development of new processes and practice standards. For example, the learning audit benchmark tool now provides examples of what the Ofsted grading 'Outstanding' looks like, where previously the focus had been on what 'Requires improvement' and 'Good' looks like. This is a reflection of the improvements that have been made and the continued aspirations of the department.

2. Discussion - How the audit outcomes, reflections and learning from this process demonstrate continued improvement in the consistency of high quality practice across the service

- 2.1 A monthly cycle of learning audits is completed across the department looking at the experiences of children open to the Early Help, Assessment & Intervention, Family Safeguarding, Children we Care for and Care Leavers Teams. These audits are now embedded within the organisation's learning culture and are undertaken collaboratively with the allocated practitioner, their team manager and, where appropriate, the Family Safeguarding Team adult workers as well as the conference and reviewing officer.
- 2.2 The number of case audits has increased from the previous target of 30 per month to 50 per month since October 2023. This equates to 600 audits per year – a sufficient sample size from which to assess the quality of practice.
- 2.3 Auditors are from a team manager level or above and have been trained in undertaking audits. Audits are then moderated by a pool of service managers and assistant directors. A moderation panel is also held, offering a robust scrutiny process and ensuring consistency is maintained within the grading outcomes. As we move away from Inadequate and work towards Good, the level of moderation has reduced and not all audits have this additional scrutiny. We consider the grading difference between audit and moderation to ensure consistency in the application of "what Good looks like" remains; there is also the flexibility to increase the moderation process if there is the need.
- 2.4 The below chart illustrates in % terms the audit findings from April to November 2023. It evidences that most practice is overall Requires Improvement.



- 2.5 Any audit that is graded as Inadequate is moderated and the Head of Service for the child’s team facilitates a reflective conversation within five working days to understand any barriers and challenges. Within this meeting, practitioners collectively agree what action is needed to improve the quality of service provided to the child. This is then re-audited after six weeks, when most children’s cases are seen to have progressed to Requires Improvement. Previously a re-audit took place after three months; however it was felt that where a case is found to be Inadequate, urgent action is required and improvements should be seen quickly.
- 2.6 Within any audit, there is a discussion around “could be better if”, thus maintaining the focus on how we can improve. Themes are identified from the monthly audit cycle and are included within the monthly reporting to PAAB; this can result in further work to improve practice. For example, planning is an area that we have focused on, ensuring that plans are outcome-focused and SMART. This has resulted in training being delivered to front-line practitioners and good examples provided in the practice standards guidance.
- 2.7 Outstanding practice is also shared through the PAAB meeting and an example of outstanding visits has been a child we care for who has completed direct work with her social worker. Pictures of her undertaking this work are included within the case records with an analysis of impact; the records were clear and if the child were to read them in the future, she would have a good understanding of what was happening and why.
- 2.8 Audit activity is seen to be business as usual and part of everyone’s work. It is not a stand-alone task, but a golden thread enhancing the learning culture. Case audits are discussed within supervision, with identified learning supporting the development of practice on an individual basis. Team meetings reflect on learning to share this at an operational level and senior managers maintain oversight, driving forward the CPIP plans.
- 2.9 There is a direct correlation between the audit findings and data performance reporting, triangulating the assurance process around compliance - for example around visit timeliness, case summaries and supervision.

3. Discussion - Any areas of challenge being identified through the audit work, and the plans in place to address these

- 3.1 Relationships across the service have significantly improved. The department is working towards a shared goal of Children First and there is a willingness to continue along the improvement journey. This supports the quality assurance process, and we are becoming more forensic in our areas for improvement. For example when we were Inadequate, a child and family assessment would look at the needs of the family generally, whereas we are now focusing on ensuring the voice of each child in the household is heard and understood within assessment; that the non-resident parent is spoken with and contributes to the assessment as well as the parent caring for the children; that agencies contribute and share their knowledge of the family including an analysis of the impact that the child's lived experience is having on them.
- 3.2 Thematic audits are used to provide us with greater depth of knowledge around a particular area of focus. Terms of Reference are agreed prior to the thematic audit being completed and the audit template is agreed by the child's Head of Service who then carries forward any actions resulting from the audit activity. Themes can be identified through national or regional areas of focus, data performance reporting or workstream activity within the CPIP. For example, thematic audits on S47 child protection investigations have helped to identify areas of challenge around information sharing; this is an area of focus being worked on within the West Sussex Safeguarding Children Partnership.

4. Discussion - How the voices of children and families are being sought and their influence on practice improvement; how children contribute to their reviews, and how children and families' voices are captured within the audit process

- 4.1 This is a priority area for the QA service and the voice of the child and family is considered within each learning audit. Currently this information is taken from case recordings or the views of the practitioners working with the family. However, there are plans in place to gather the views of the family directly for every audit. This will be in the form of a questionnaire to ensure consistency of information being asked. This work will be completed in consultation with the Voice and Participation Team and could be replicated within thematic auditing where it is appropriate. The Back to the Floor activity is also noted to include feedback from families about their experience of the service.
- 4.2 The Voice and Participation Team sit within the Safeguarding Quality and Practice Service, and they feed into the quality of practice. A primary area of focus originating from the Care Leavers Advisory Board and Children in Care Council is around the use of language by practitioners, including language captured on children's records. The team have delivered training to the Children, Young People and Learning directorate and a working group has now been established, led by the Principal Social Worker, to ensure improvements in this practice area.
- 4.3 The Voice and Participation Service leads on the Bright Spots Survey which is a bi-annual survey undertaken by Coram Voice for our Children in Care and

Care Leavers. The survey explores children’s and young people’s feelings about relevant areas of their life. Coram Voice publishes a report which identifies areas of strength and spots we need to work on to improve the child’s lived experience. An action plan is identified for the following 12 months and progress against the plan is reported to the Children in Care Council and Care Leavers Advisory Board. This is then presented to the Corporate Parenting Panel to evidence the progress being made against the plan, which hopefully is represented when the survey is completed again. An example of progress from the 2021–2022 survey to the 2022-2023 survey was that more children reported to have the same social worker for over 12 months. This has been achieved through data reporting on changes of social worker, with managers providing clear rationale about why there is a change of worker.

4.4 The use of advocates for children whose cases are progressing to Child Protection Conferences is actively encouraged by the department. Between April 2023 and September 2023, the Advocacy Service was present at 37% of all conferences relating to a young person aged 12+ to ensure their wishes and feelings were heard. Quarterly meetings are also held with the Advocacy Service to understand how we can improve the uptake of an advocate and to consider the quality of Child Protection Conferences to make them more inviting and engaging for young people.

4.5 Complaints also contribute to the quality assurance process’s understanding of how families view the services they have received. Between April 2023 and September 2023, we received 153 complaints, 31 MP enquiries and 48 compliments. A weekly meeting is held to review all open complaints and ensure compliance with response time. This remains a priority as Quarter 1 saw 65% of stage one complaints responded to on time and Quarter two saw 58%. There is also a quarterly complaints meeting held to look at themes and learning from complaints received. This information is shared across the department to support practice improvement. From January 2024 this will also be reported into PAAB. On a positive note, the process of the weekly complaints meeting is being replicated across other services within the County Council as it has been noted to be helpful and effective.

5. Resources

5.1 The service is delivered within the approved budget envelope and quality assurance goes across the directorate.

6. Consultation

6.1 Not applicable – this is a report for information.

7. Risk Implications and Mitigations

Risk	Mitigating Action (in place or planned)
The Quality Assurance Framework is not given priority and the volume of assurance work dips,	This risk is deemed unlikely to arise due to the emphasis being placed by senior management and the embedded levels of accountability from an individual, team, area

Risk	Mitigating Action (in place or planned)
resulting in quality of practice declining	<p>and county level which reports into DLT and the Continuous Practice Improvement Board. Key factors contributing to this include:</p> <ul style="list-style-type: none"> • The QA Framework with increased learning audit activity, a planned programme of Back to the Floor, thematic audit process lead by Heads of Service, who share the accountability. <p>Progress with the Continuous Practice Improvement Plan. Practice Standards and Training having dedicated Head of Service oversight.</p>

8. Other Options Considered

8.1 Not applicable – this is a report for information.

9. Equality Duty

9.1 The service recognises the primary importance of child safeguarding, sound family relationships, good parenting, and the nurture of children to fulfil their potential, as well as safe transition to adulthood. The provision of the service is based on need, as determined through formal assessment protocols. This need is not explicitly related to formally protected characteristics, but any such characteristic is and will continue (as now) to be respected in compliance with equality principles and taken into account in the way in which the service is delivered.

9.2 In terms of those with a protected characteristic, the service will ensure enablement and support across all relevant categories, and this will both continue and be enhanced through the Children First agenda.

10. Social Value

10.1 The Children First agenda and services discussed in this report will directly support improved delivery of the West Sussex Plan priority to give every child the Best Start in Life. Enhancing the protection of young lives and support for family life will continue to build resilience and social capital and contribute towards stronger and more effective communities. The implementation of the service improvements will also respect sustainability principles in accordance with the County Council's strategic policies.

11. Crime and Disorder Implications

11.1 There are positive implications for Sections 17, 37 and 39 of the Crime and Disorder Act 1998 in the prevention and reduction of crime and anti-social behaviour, and in reducing offending and re-offending by young people, all of which are affected by the progress activity discussed in this report.

12. Human Rights Implications

- 12.1 The County Council has an overriding duty to safeguard the Human Rights of children and young persons in its area, and this has been recognised in the Children First agenda. The County Council is mindful of Article 8 of the European Convention on Human Rights – The Right to Respect for Family and Private Life - and has taken relevant factors into consideration in preparing this report. The processing of personal and special category data is subject to the County Council's Data Protection Act policies and procedures in relation to discharging the County Council's and its partners' legal responsibilities.
- 12.2 The County Council is also mindful of Article 12 of the United Nations Convention on the Rights of the Child - which states that all children have the right to be consulted and to have their opinions heard on any decision that affects them. Hearing, understanding, and acting upon the voice and experiences of the child is a key design principle of the Children First service improvements. The County Council will continue to ensure it fulfils all its statutory duties regarding meeting the needs of children and young persons in its area during the Children First service transformation programme.

Lucy Butler,

Executive Director of Children, Young People and Learning

Contact: Laura Mallinson, Acting Assistant Director Safeguarding, Quality & Practice

Background Papers – None