

Children and Young People's Services Scrutiny Committee

1 December 2021

Children First Report - Quality Assurance in Children's Social Care

Report by the Executive Director of Children, Young People and Learning

Summary

This report examines the role of a Quality Assurance Framework within West Sussex Children's Social Care. It explains how, following the Ofsted judgement of May 2019, a major programme of work has been undertaken, within the broad scope of the Children First Improvement programme, to promote a recognition of 'what Good looks like' in support of the aspiration to function as a 'learning organisation'. This also ensures management has a strong and accurate grip on performance and the quality of practice. These outcomes are achieved through a detailed, systematic programme of performance management and casework audit to take into account quantitative performance and the quality of practice.

Consistent quality is regarded as a long-term agenda for progressive improvement within the service. Having stable leadership and management has helped to model the principles and confirm auditing as a key service priority, making a major contribution to the Improvement programme. This report considers the progress made to date and how the service intends to maintain a trajectory of improvement in the months ahead.

The Focus for Scrutiny

The Committee is invited to note the arrangements set out in this report for ensuring that quality standards are clearly understood, achieved and maintained within Children's Social Care, and to confirm that these measures are likely to result in better outcomes for children, young people and their families.

Key areas for scrutiny to note include:

1. That the evidence and activities outlined in the report to improve quality and performance give assurance that sufficient progress is being made to address the areas of improvement highlighted by Ofsted and the Commissioner (para 1.2).
2. That the plans for future improvements to ensure continued progress to achieve a mature and developed quality of practice are sufficient and sound.
3. That the mitigation plans for the risks identified for continued improvement are robust and appropriate.
4. To consider what, if any, further assurance or reports the Committee requires to demonstrate that the journey of improvement remains on target.

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

1. Background and Context

Introduction – Quality in Children’s Social Care

- 1.1 The quality of practice is a key theme running through all activities associated with the Children First Improvement agenda. It is essential to be able to measure the quality of service delivery as well as compliance with the statutory requirements, such as visiting timescales. This report will explain how, within a Quality Assurance Framework, evidence is gathered through the rigorous auditing of casework practice, to provide a consistently scored, objective view of how effectively interventions are being delivered. Since the Ofsted judgement of May 2019, a major programme of improvement work has been implemented together with the partner in practice, Hampshire County Council. More recently, practice is now overseen by the service’s Quality Assurance Team which provides an objective and robust challenge to operational managers within the service.

Context - Ofsted and the Commissioner

- 1.2 In May 2019, the statutory regulator, Ofsted identified widespread shortcomings in the quality of delivery across many areas of Children’s Social Care. Ofsted’s report included criticism of the Council’s quality assurance processes, commenting that too few audits were undertaken and that non-compliance by managers in conducting audits, combined with a lack of understanding of what good practice looked like, meant it was limited in its impact. The subsequent report by the Commissioner for Children’s Services in October 2019, following his more detailed study, drew attention to ‘a lack of consistent quality assurance and audit leading to disturbingly low levels of awareness of what good social work practice looks like’ - going on to recommend that, as part of a management training programme, the service ‘establish and impose a model of performance management and quality assurance and audit that is understood at all levels’.

The Service Response

- 1.3 The service acknowledged at the outset of the improvement process that the quality of social work practice was weak. In order to make effective improvements, the leadership team needed to establish a clear baseline founded upon evidence. Having established a baseline, it has then been possible to regularly measure and quantify the degree and pace of that improvement. This process is essential to demonstrate to Ofsted, the Commissioner, other key stakeholders and the public that improvement work is effective in making a positive difference in outcomes for children and young people.

An accurate understanding of the Service

- 1.4 The Directorate Leadership Team therefore compile a quarterly Self-Assessment statement, which is submitted to Ofsted as a key piece of evidence of the progress being made. Ofsted has now repeatedly confirmed

from its Focused Visit and Monitoring Visits that the service does indeed have an objectively accurate sense of where it stands and what further areas of improvement are needed. This has built confidence in the improvement journey and its future trajectory, and has been one of the factors that prompted the Commissioner to recommend to the Department for Education (DfE) in December 2020 that the process of forming a Children's Trust should be paused for a year. The Commissioner has also set out his detailed judgement criteria towards his final recommendation to the DfE at the end of this year; the service's own performance framework is now closely aligned to this.

2. Discussion

Quality Assurance in Children's Social Care

2.1 As part of the improvement programme, the Department has set out its clear intention to be a 'learning organisation', where continual improvement is a normal process, and embedded in social work practice. This characteristic is a facet of the total cultural change that is being sought throughout the service as part of the journey of improvement: put simply, this means that all staff will recognise and commit to achieving the higher levels of attainment now expected ('what good looks like'), always placing the child at the centre of their endeavours; and they will be fully enabled by management in terms of training, workplace supervision, technology and other forms of support, to do so. In this context, Quality Assurance is the application of all these factors within a skilled and motivated workforce, to guarantee, in ways that can be measured and verified, the best outcomes for vulnerable children and their families. As such, a firm focus has been maintained on improving quality assurance and performance management systems. Central to this undertaking are three questions, that mirror those at the forefront of the Ofsted inspection process:

- 1.** What do we know about the quality and impact of Social work Practice in West Sussex?
- 2.** How do we know?
- 3.** What are our plans for the next 12 months to maintain or improve practice?

The verification and learning process within the service is underpinned by Audit.

The role of Audit in Children's Social Care

2.2 Auditing of Children's Social Care is concerned with the detailed examination of selected children's case records by a qualified senior practitioner (service manager), to obtain evidence that all the components of best practice have been applied to the social work intervention, and giving each audited case a scored value. The approach is based on a collaborative Audit Tool introduced into West Sussex in August 2020. On this basis, each case will be rated 'good', 'requires improvement' or 'inadequate' – terminology that mirrors the gradings used by Ofsted. Auditing is supported by the Quality Assurance Team, which acts in an advocacy role, but the majority of the work is undertaken by service managers, who are thus enabled to model best

practice; the audit results are then moderated by senior managers, thereby providing an authoritative, rigorous and consistent evaluation.

- 2.3 The audit approach is based on three principles: professional intervention, a reflective approach to learning, and understanding the impact of the quality of social work practice on the child - outcomes for the child being understood as the foundation and rationale of the audit process. Quality Assurance through audit can take various forms, such as learning and thematic audits, including dip samples, re-audits, tracking of audit, and other diagnostic techniques best suited to investigating the particular work area under scrutiny. Implicit in the audit process is the feedback loop, whereby both the deficiencies identified in a particular case are speedily rectified and also that shared organisational learning results, which will feed forward into higher standards of future case working and long-term benefit to children.

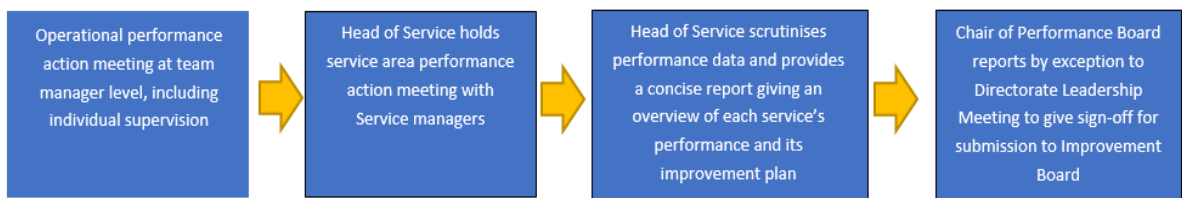
Audit programme

- 2.4 An audit plan sets out in advance the different service areas to be examined. It is natural that significant and timely attention will be paid to parts of the service that Ofsted has signified it wishes to focus on in its cycle of Monitoring Visits. Auditing work has been supported by the partner in practice, Hampshire County Council, whose staff have also undertaken audits of West Sussex cases: this has enabled staff to be clear about the standards applying to any authority seeking to be rated 'good' or indeed 'outstanding' and is helping to embed the cultural change referred to above, whereby staff are encouraged and empowered through new techniques to gain the confidence to excel in their professional practice. The audit programme, overseen by the Quality and Assurance Team, has consistently achieved a 95% record of completed investigations: these and the intelligence they deliver can be shown to be making a successful contribution to cultural change and improved performance outcomes in Children's Social Care. Examples of how audit outcomes can inform service improvement are given below in Section 3.

Quality and Performance during 2021

- 2.5 A range of activities this year have continued to improve the Quality and Performance functions and their impact on service improvement. These have purposefully addressed the deficiencies originally noted (para 1.2 above) and include the following:
- **Governance:** There is now a clear governance structure around Quality Assurance and feedback from audit activity; quarterly reports are presented to the Children, Young People and Learning Directorate Leadership Team (DLT) and the Performance and Assurance Action Board (PAAB). The highlights and overall themes are shared with the partner in practice, key stakeholders, Safeguarding Children Partnership, Lead Members, and the Chief Executive of the Council. Practitioners report that senior managers being involved in the audit process has improved relationships at all levels, ensuring that senior managers are visible and fully committed to Quality Assurance and the learning culture being developed.

- A new **Quality Assurance Framework** has been developed to govern the drive for quality across the service. This is reinforced by a Performance Board which together with the Directorate Leadership Team and the Improvement Board, chaired by the Commissioner for Children's Services in West Sussex, constitute the high-level governance for this discipline, demonstrating that the service is serious about improving quality and performance.
- **Performance data** now fulfils its correct role as the vital currency used to understand and improve the service and has continuous application at both strategic and operational levels. A monthly scorecard assists the Directorate Leadership Team and other senior managers to review performance at dedicated meetings for this purpose; weekly 'Required Action' reports are provided to all managers, promoting an immediate response to performance issues and intervention where necessary. The following table illustrates that a chain of accountability reaches from operational teams, right up to the Improvement Board:



- **Audit Moderation:** Testing the initial audit findings through the moderation and verification of scoring has now achieved a strong profile within the overall process. Monthly Group Moderation meetings have as one of their key tasks the identification and challenging of weak practice. Auditors are now required to fully evidence their grading, especially around 'good' and 'inadequate' results. Progress has been made towards ensuring that all auditors apply audit scoring to the same consistent set of standards. The result is that the intelligence derived becomes more robust, providing a better foundation for further learning and improvement activity.
- An updated **Audit and Moderation Tool** was launched in September 2021: this will be linked to a more powerful computing capability, the Power BI Dashboard, due to be launched in December 2021. The Audit and Moderation Tool now offers more accurate reporting of practice in five specific service areas of practice Improvement: Assessment, Planning, Intervention, Review, Supervision & Management Oversight.
- **Practice Standards:** In addition to the Quality Assurance Framework, and as part of the ongoing commitment to high quality and improvement, the Core Practice Standards of the service have been refreshed. The revised Practice Standards were launched in November 2021 and will be promoted as a key resource throughout the service. They explain clearly to all staff the minimum standards of quality expected in working with children, young people and their families: this expression of 'what good looks like' will now be built into the supervision arrangements and personal performance targets for all practitioners, and provides an important link into the cultural change that is in progress.

- **Complaints:** Responding to and resolving complaints in a timely manner is a key aspect of the service's responsibilities. Complaints frequently draw attention to areas for improvement and addressing them constructively merits high priority within a learning organisation. Arrangements are in progress, in partnership with the corporate Complaints team, to support managers to respond to complaints in a timelier manner. The aim is both to reduce the number of complaints received, and to ensure that complaints are addressed effectively, at the correct management level, and in ways that achieve and apply the resulting organisational learning.

3. Commentary on the current position

- 3.1 None of the provisions outlined above would be of lasting value if they did not result in an improved social work practice that achieves better outcomes for children and young people. The following paragraphs reflect on the intelligence that recent audit results are providing about the journey of improvement, based on Quarter 1 of 2021/22 (April-June 2021) and Quarter 2 (July-September 2021). This six-month period has witnessed greater stability in the service generally, and significant moves towards consolidating a culture orientated toward learning and improvement; these features are reflected in broadly positive audit findings about the quality of practice.

Audit Findings

- 3.2 Below is a selection of indicators of positive change and areas for improvement derived from recent audit results, based on the cases selected for audit scrutiny. The five categories below are derived from the areas of analysis used in the Audit Tool, to reflect the different aspects of how a case should be managed. They only relate to a snapshot of certain parts of the service at a given time; nevertheless, cumulatively these exercises give a very accurate sense of the quality of practice across the service, and how it is changing over time. One of the key principles of good practice is high quality recording in case notes: if an intervention is not properly recorded, its detail will not be available for an auditor or Ofsted inspector to verify. This section concludes with a comparison between overall audit results for Quarter 1 and Quarter 2, showing a distinct move away from work graded 'inadequate'.

General findings

- Where a case is graded as 'inadequate' at audit, the case is escalated for priority intervention, and is subsequently re-audited: 80% of all audits previously graded as 'inadequate' were found to have moved to 'requires improvement' three months from the point of the reflective meeting. While this clearly leaves further room for improvement, it does illustrate that the service is responding with purpose in most situations where quality is seen to be defective, and making positive change.
- Within audits, there has been some evidence that initial assessments tend to be over-generous – that is, that the assessing manager may take a more optimistic view of what good practice looks like than is warranted by the objective standards. The audit moderation process is therefore an

important corrective to this tendency, and over time a move to greater critical objectivity is to be expected across the audit process.

- Within Quarter 2 there were three audit cycles, as opposed to Quarter 1 when only two audit cycles took place (representing a smaller number of children); the combined audits from each quarter demonstrate that while some areas of practice have dipped, practice in general is following an upward and consistent trajectory of moving towards 'good'.

Assessing the current ratings against the standard expected

- 3.3 In considering the detail presented in the tables below, the Committee will wish to be able to contextualise the percentage compliance currently being reported, and how this measures against an expected standard. The basis for the standard is 'what good looks like' and is set out in detail in the service's Practice Standards. These have recently been refreshed and reissued internally to staff. All local authorities with social care responsibilities are required to set out formal practice standards, and authorities that are rated 'good' or 'outstanding' by Ofsted will typically achieve 90% compliance across all the factors, allowing for the fact that in certain specifics, the applicability of a particular factor may depend on the circumstances of the intervention and the age of the child.
- 3.4 Therefore the implicit standard against which to assess West Sussex practice as audited over the past two quarters, is a target of 90%, as relevant to the child's circumstances. It will be clear that whereas some of the areas of practice discussed below are at or close to this expectation, others are some distance away, and in certain cases evidence is not yet embedded of a consistent forward momentum of improvement between different quarters. In this way audit results are valuable in directing attention to specific areas of practice requiring improvement.

1) Assessment:

Quarter 1	Quarter 2
In 95% of cases, auditors found that the child was seen as part of the assessment (it should be noted that there will be legitimate reasons for not seeing a child as part of an assessment, e.g., pre-birth).	Only 2% of children in the sample audit group required to be seen, were not seen; 90% of children were seen as part of the assessment and the 8% of children not seen were due to legitimate reasons, e.g., unborn children.
92% of children had their risks identified in the assessment, and 85% of children had been seen alone: this was an improvement of practice in these areas.	90% of risks to children were identified in the assessments; (whilst there is a slight dip of 2% regarding risk, practice has been maintained at 90% and above); 88% of children's needs were identified, and again this is an improvement in this area of practice.

With 82% of children, the assessment report was shared with the family/child/carer.	With 82% of children, the assessment report was shared with the family/child/carer.
31% of the children audited had an up-to-date chronology; and only 34% had an up-to-date case summary.	70% of children had an up-to-date chronology and 80% of children had an up-to-date case summary: this is a very significant improvement on the previous quarter.

Comment: Social work assessment has always been concerned to consider past events and their relevance to a person or family's current situation. There are limitations in any risk assessment but an accurate chronology can assist the process of assessment and review. A chronology seeks to provide a clear account of all significant events in a child's life to date, drawing upon the knowledge and information held by agencies involved with the child and family. A case summary can help to ensure continuity and is an important source of information for colleagues and supervisors in the absence of the case holder. The case summary is directly related to the aims and objectives set out in the child's plan and can be a useful tool in setting out the tasks necessary to achieve the objectives. Results for the two quarters illustrate some improved practice in this area, leading to better assessments of the child's needs and risks.

2) Care Plans:

Quarter 1	Quarter 2
Planning that reflects current work and progress was seen in 83% of cases; the care plan was up-to-date or being updated (78%); the care plan showed evidence of being multi-agency (78%); and the care plan was shared with the child/ family/carer (78%).	Up-to-date planning was seen in 80% of cases audited; 77% of the care plans involved partnership working and were multi-agency; care plans being shared with child/family carer was at 76%; 74% of the care plans addressed the required outcome for the child to improve on their future safety and wellbeing.
<i>However, lack of SMART (specific, measurable, achievable, relevant and time-bound) plans was noted in almost 50% of cases.</i>	Lack of SMART plans continued to be noted in almost 51% of cases. There is currently a practice action plan in place to improve on the quality of SMART plans.

Comment: Assessments and Care Plans bring clarity and ownership to the intervention. The Assessment seeks to explain the current situation of the child; the Care Plan aims to identify the objectives, in order to bring about beneficial change for the child. Working with families and partner agencies through sharing assessments and care plans is fundamental to social work practice - otherwise the service runs the risk of a disjointed approach to the main objectives and there is the propensity for drift. It can be seen that

further improvements are needed in this area, which will be closely monitored.

3) Intervention:

Quarter 1	Quarter 2
97% of children had been seen as part of the social work intervention: this helped the social worker to understand their lived experience; 89% of social workers actively engaged with the child and family during a visit; 87% of case records were considered to be recorded appropriately.	93% of children were seen as part of the social work intervention; 81% of visits helped in achieving planned outcomes, and 77% of visits addressed an action from the care plan.
<i>However, 62% of cases lacked evidence of direct work tools.</i>	49% lacked evidence of direct work tools, which are known to support improved wellbeing and behavioural change: this is an improvement on the previous quarter but still requires further intervention.

Comment: Visiting children and understanding their lived experience is fundamental to social work practice; positive change through the care they receive is often reflected in the child's improved presentation and behaviour.

Direct work and specific tools can be used in a number of situations and can include: exploring children's memories of events; helping children to process traumatic experiences; helping children move into another family; helping with social aspects of the child's life. Through the use of direct work tools and developing trusting relationships, social workers are enabled to gain an understanding of the child's internal world and a more developed sense of their wishes and feelings.

These areas of practice are showing a trajectory of gradual improvement, and children's lived experience and voice is being captured to a greater extent; however, social workers are not yet consistently using enough of the different techniques available to engage children. There is still a single-lens approach of 'resolving the presenting issue', without broadening out and hypothesising what else could be contributing to the family dynamics. Re-referral rates will provide greater assurance that cases are closing at the right time and that a fair degree of parental sustainability is present; further monitoring and analysis are therefore required.

4) Child Intervention Review

Quarter 1	Quarter 2
Reviews of all kinds taking place in timescale were present in 93% of the	Reviews of all kinds, child protection, child in need and children looked

Quarter 1	Quarter 2
cases; 76% of cases evidenced that the review was recorded on the child's record as having taken place.	after, taking place in timescale was present in 79% of cases; 13% of children did not have a review in timescale and 8% of the children audited did not require a review. 68% of reviews were based on an updated assessment – an improvement in this area. Recording has also improved with 80% of cases having the reviews recorded on the child's file.
<i>However</i> , 50% of children who could have contributed to their review, did not, although this might have been either due to non-attendance, or to not having their views sought.	33% of children did not contribute to their review: again, this might have been either due to non-attendance or to not having their views sought.
71% of cases demonstrated professionals contributing to the child's review.	60% of professionals contributed to the reviews, which was slightly down on the previous quarter. 49% of reviews had clear (SMART) actions set.

Comment: The absence of children's contributions is a concern, since children are the measures of change: how they are, how they react and what they say informs the service if the care planning and assessment is making a positive change in their lives. The service also needs to improve the participation of professionals in reviews. These issues will require continued scrutiny and advocacy through the QA Framework.

5) Supervision & Management Oversight

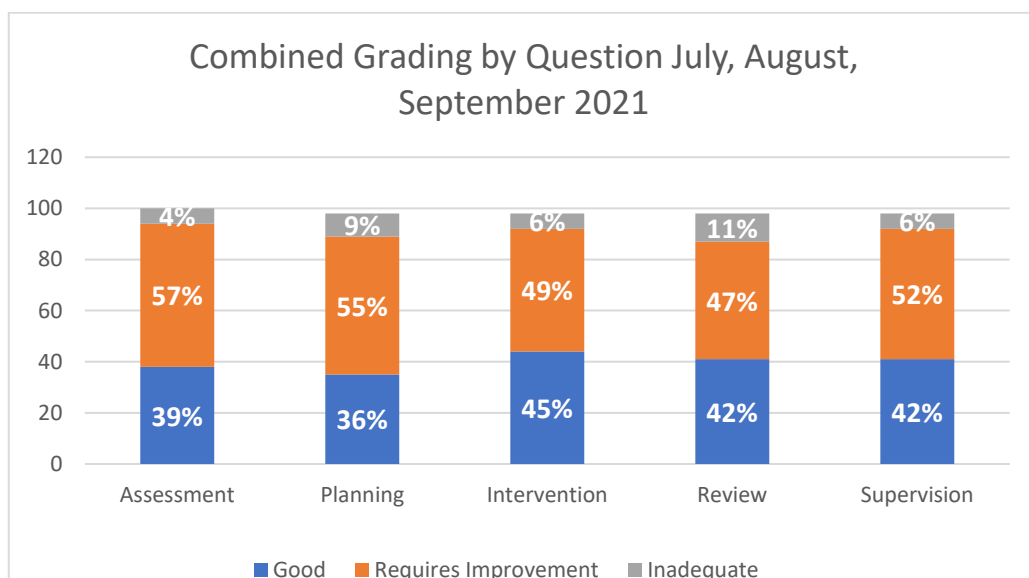
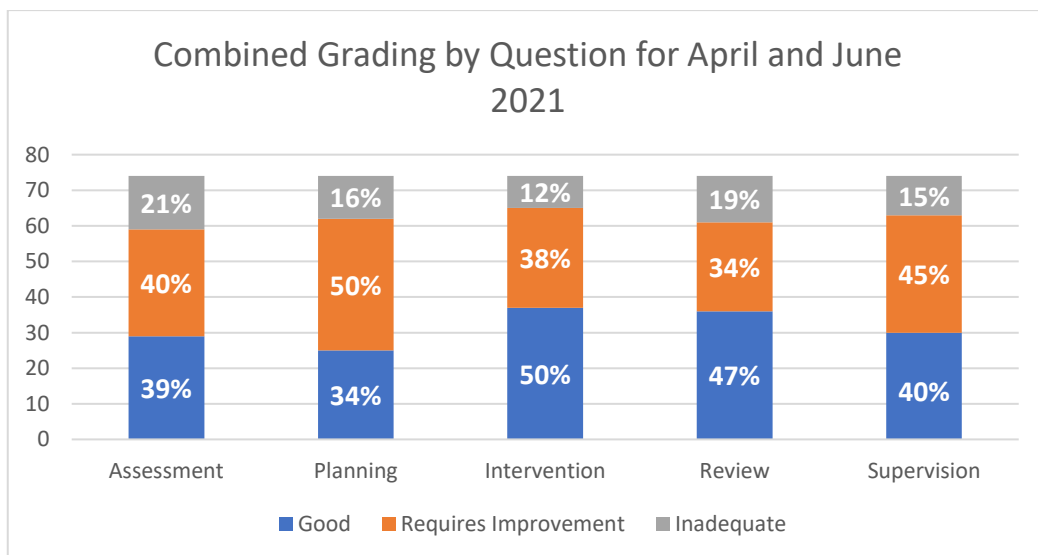
Quarter 1	Quarter 2
98% of the cases audited had a record of supervision taking place; <i>however</i> , further clarification is needed regarding its quality and frequency; only 65% of supervision in respect of the child could be confirmed as being in timescale, and therefore did not meet the expected standard.	99% of cases audited had a record of supervision taking place and recorded on a child's file; 92% of audits evidenced that the actions set by the supervisor related to the concerns discussed; 89% demonstrated regular management oversight at key points of the child's journey.

Comment: Supervision records provide evidence of a well-managed case, where both benefits to the child and support to the social worker are maximised. There are indications that the supervision documentation is not yet sufficiently embedded; however, there is an increase in managers ensuring that supervision does take place. Used as intended, the

documentation should prompt managers to ask the more searching questions, and to ensure that previously agreed actions are followed up. Further work in this area will be necessary.

Analysing change between Quarters 1 and 2

3.5 The preceding narrative has drawn out a selection of the kind of issues raised by audit activity, and recognised to be fundamental to the challenge of progressively driving up standards. While the commentary highlights areas that require further improvement, it is instructive to compare the overall audit gradings for each quarter, as represented by the following charts. The analysis, under the five case-working disciplines, shows that, while there is some variability in terms of work being graded 'good', there is a consistent and marked reduction in 'inadequate' work. This has tended to place more work in 'requires improvement', which is regarded as a necessary step in moving towards a situation in which quality becomes embedded and, through enhanced learning, better techniques and a clearer perception of the expected standards, casework routinely reaches a 'good' level.



Overall Summary

- 3.6 Having stable leadership and management has helped to model the principles and confirm auditing as a key service priority, thereby promoting a recognition of 'what good looks like' throughout the service. Notwithstanding the evidence of improvement generally, audit results in Quarters 1 and 2 show that the quality of practice across Children's Social Care has continued to be variable. This general view is consistent with the findings by Ofsted in its recent Monitoring Visit.

Future Work

- 3.7 Across the next 12 months the Quality Assurance Team is planning a range of further improvements:
- Maintaining as standard the Senior Management involvement in auditing and demonstrating a shared ambition to improve 'putting children first'.
 - Development of a dashboard, to increase understanding, improve analysis and move away from manually reporting the audit cycle: to be launched in December 2021.
 - Enhancing existing practice learning mechanisms to ensure that all staff have a shared understanding of the role and value of audit, and to promote wider discussions of issues raised.
 - Refreshing 'what good looks like' guidance to align with the refreshed Practice Standards. The Practice Standards will now form the basis of the 'what good looks like' audit guidance.

4. Working with Customers

Customer feedback

- 4.1 While all activity is explicitly geared towards improving outcomes for children and young people, this report has focused on the Audit activity under the Quality Assurance Framework. The child and family have not hitherto been specifically involved in audit, although they contribute to other review activity. However, work is underway to develop strategies of participation for both children and adults, and introducing children into the audit process is expected to commence in the early part of 2022. In a broader sense customer feedback is of immense value to organisational learning, as well as an understanding of service impacts and customer satisfaction. A reference to the value of complaints was made at 2.5 above; equally the service needs to understand from compliments and other feedback where it is achieving success, and receiving such appreciation is also motivational for staff.

Engagement with Children and Young People

- 4.2 Putting the child at the centre of practice includes hearing and responding to the voice of the child and securing the participation of young people, both within casework, and more broadly in terms of seeking their views and involving them in the design of services and facilities. This agenda is a cornerstone of the Children First Improvement programme, and of good

practice in general. The Committee has requested an update on this work, and a summary of the activities currently being undertaken by the Voice and Participation Team is given at Appendix 1: 'The Voice of the Child in West Sussex'.

5. Performance Update

5.1 In line with previous reports, the most recent summary of performance information (to the end of October 2021) is given at Appendix 2.

6. Issues for consideration by the Scrutiny Committee

6.1 The Committee is invited to note the efficacy of the arrangements described in this report, to build a quality service that recognises 'what good looks like', to apply these principles in daily practice as the expression of a transformed culture, and thereby to improve the lives of vulnerable children and young people in West Sussex. The Committee will note that, as indicated by the variability of practice currently being identified, a mature and developed quality of practice will take a longer period to achieve.

7. Consultation

7.1 Not applicable – this is a report for information.

8. Risk Implications and Mitigations

8.1 A summary of the risk areas identified in the current risk log specific to the Quality Assurance function, and the associated mitigating factors, are given in the table below:

Risk	Mitigating Action (in place or planned)
The risk that the vision for continuous improvement is stalled by inertia, resistance, or other negative factors.	<p>This risk is deemed unlikely to arise due to the emphasis being placed by senior management on staff development and motivating staff to raise standards. Key factors contributing to this include:</p> <ul style="list-style-type: none"> • The QA Framework and continuing audit programme. • General verified levels of improved staff retention, engagement and motivation, supported by an open and inclusive senior management communication style. • Refreshed Practice Standards to be promoted through a strong communication programme. • The impacts of the management development programme, and the cultural and professional benefits of managers

Risk	Mitigating Action (in place or planned)
	<p>becoming more supportive to working practice, especially through supervision.</p> <ul style="list-style-type: none"> • The introduction of the Family Safeguarding Model, which has been shown elsewhere to improve practice and increase staff motivation and service coherence.
<p>The risk that Ofsted and the Children’s Commissioner are not sufficiently convinced that practice has, or can be permanently improved to a satisfactory level.</p>	<p>This risk is being managed through the provisions mentioned above, and also through the dialogue arising from the cycle of Ofsted Monitoring Visits. The internal audit programme within the Quality Assurance Framework allows management to have an insightful view of the service, which is shared by Ofsted. The service also has a developed sense of the Commissioner’s expectations, and with support from Hampshire CC is responsive to these, taking the necessary action to ensure a continuous trajectory of improvement.</p>

9. Other Options Considered

9.1 Not applicable – this is a report for information.

10. Equality Duty

10.1 The service recognises the primary importance of child safeguarding, sound family relationships, good parenting, and the nurture of children to fulfil their potential. 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.

10.2 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.

11. Social Value

11.1 The Children First agenda and measures for service recovery 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.

12. Crime and Disorder Implications

- 12.1 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.

13. Human Rights Implications

- 13.1 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 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 Council's Data Protection Act policies and procedures in relation to discharging the Council's and its partners' legal responsibilities.
- 13.2 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 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.

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Appendix 1 - The Voice of the Child in West Sussex

Appendix 2 - Performance Summary Report (October 2021)

Background Papers - None