

<b>MEETING:</b>	Overview and Scrutiny Committee
<b>DATE:</b>	Tuesday, 9 January 2018
<b>TIME:</b>	3.00 pm
<b>VENUE:</b>	Council Chamber, Barnsley Town Hall

## AGENDA

### Administrative and Governance Issues for the Committee

#### **1 Apologies for Absence - Parent Governor Representatives**

To receive apologies for absence in accordance with Regulation 7 (6) of the Parent Governor Representatives (England) Regulations 2001.

#### **2 Declarations of Pecuniary and Non-Pecuniary Interest**

To invite Members of the Committee to make any declarations of pecuniary and non-pecuniary interest in connection with the items on this agenda.

#### **3 Minutes of the Previous Meeting (Pages 5 - 10)**

To approve the minutes of the previous meeting of the Committee held on 5<sup>th</sup> December, 2017 (Item 3 attached).

### Overview and Scrutiny Issues for the Committee

#### **4 Children's Social Care & Safeguarding Quality Assurance Framework (Pages 11 - 30)**

Following a video by young people in the Care4Us Council, to consider a report of the Executive Director Core Services and the Executive Director People (Item 4a attached) in respect of the Children's Social Care & Safeguarding Quality Assurance Framework (Item 4b attached) and the Continuous Service Improvement Framework (Item 4c attached).

#### **5 Barnsley Provisional Education outcomes for Looked After Children 2017 (To Follow)**

To consider a report of the Executive Director (People) (Item 5 to follow) in respect of Barnsley Provisional Education outcomes for Looked After Children 2017.

#### **6 Exclusion of the Public and Press**

The public and press will be excluded from this meeting during consideration of the items so marked because of the likely disclosure of exempt information as defined by the specific paragraphs of Part I of Schedule 12A of the Local Government Act 1972 as amended, subject to the public interest test.

#### **7 Children's Social Care Reports (Pages 31 - 70)**

Reason restricted:

Paragraph (2) Information which is likely to reveal the identity of an individual.

Enquiries to Anna Marshall, Scrutiny Officer

Phone 01226 775794 or email [annamarshall@barnsley.gov.uk](mailto:annamarshall@barnsley.gov.uk)

To: Chair and Members of Overview and Scrutiny Committee:-

Councillors W. Johnson (Chair), P. Birkinshaw, G. Carr, Charlesworth, Clarke, Clements, K. Dyson, Ennis, Franklin, Frost, Gollick, Daniel Griffin, Hampson, Hand-Davis, Hayward, Lofts, Makinson, Mitchell, Phillips, Pourali, Sheard, Sixsmith MBE, Tattersall, Unsworth, Williams and Wilson together with co-opted Members Ms P. Gould, Mr M. Hooton, Ms J. Whitaker and Mr J. Winter and Statutory Co-opted Member Ms K. Morritt (Parent Governor Representative)

Electronic Copies Circulated for Information

Diana Terris, Chief Executive  
Andrew Frostdick, Executive Director Core Services  
Rob Winter, Head of Internal Audit and Risk Management  
Michael Potter, Service Director, Business Improvement and Communications  
Ian Turner, Service Director, Council Governance  
Press

Paper Copies Circulated for Information

Majority Members Room  
Opposition Members Rooms, Town Hall – 2 copies

Witnesses

Item 4 (3.00pm)

Rachel Dickinson, Executive Director – People, BMBC  
Mel John-Ross, Service Director, Children’s Social Care & Safeguarding, BMBC  
Cllr Margaret Bruff, Cabinet Spokesperson – People Directorate, BMBC  
A number of Front Line Social Work Practitioners

Item 5 (3.45pm)

Rachel Dickinson, Executive Director – People  
Margaret Libreri, Service Director - Education, Early Start and Prevention, People Directorate  
Gary Kelly, Head of Service – Barnsley Schools’ Alliance, People Directorate  
Liz Gibson, Virtual Headteacher for Looked After Children, People Directorate  
Jon Banwell, Head of Children in Care Services, People Directorate  
Cllr Tim Cheetham, Cabinet Member, People (Achieving Potential)

Item 7 (4.15pm)

Mel John-Ross, Service Director, Children’s Social Care & Safeguarding, BMBC  
Cllr Margaret Bruff, Cabinet Spokesperson – People Directorate, BMBC

<b>MEETING:</b>	Overview and Scrutiny Committee
<b>DATE:</b>	Tuesday, 5 December 2017
<b>TIME:</b>	2.00 pm
<b>VENUE:</b>	Council Chamber, Barnsley Town Hall

## MINUTES

### Present

Councillors W. Johnson (Chair), P. Birkinshaw, G. Carr, Charlesworth, Clarke, K. Dyson, Frost, Daniel Griffin, Hampson, Hand-Davis, Hayward, Lofts, Mitchell, Pourali and Tattersall together with co-opted members Ms P. Gould and Mr J. Winter and Ms K. Morritt

### 40 Apologies for Absence - Parent Governor Representatives

No apologies for absence were received in accordance with Regulation 7(6) of the Parent Governor Representatives (England) Regulations 2001.

### 41 Declarations of Pecuniary and Non-Pecuniary Interest

Councillors G. Carr, Charlesworth and Tattersall each declared a non-pecuniary interest in relation to minute 44 in so far as discussion related to their positions on the Corporate Parenting Panel.

### 42 Minutes of the Previous Meeting

The minutes of the meeting held on 17<sup>th</sup> October 2017 were approved as a true and accurate record.

### 43 Suicide Prevention in Barnsley

The following witnesses were welcomed to the meeting:

Julia Burrows, Director of Public Health, BMBC  
Phil Ainsworth, Health and Wellbeing Officer, Public Health, BMBC  
Rebecca Clarke, Public Health Principal, BMBC  
Clare Foster, Public Health Specialty Registrar, BMBC  
Councillor Jim Andrews, Cabinet Spokesperson for Public Health  
Michael Potter, Service Director, Business Improvement and Communications

The item was introduced by Julia Burrows, Director of Public Health, BMBC. Suicide prevention is one of the indicators in the Public Health Outcomes Framework and falls under the strategic responsibility of the Director of Public Health. The first national suicide prevention strategy was published in 2012. Following this, Councils were given the responsibility for developing local suicide action plans through their work with Health and Wellbeing Boards (HWBs). Barnsley has been working on developing our suicide prevention work through the development of our multi-agency suicide prevention group, audit and local action plan. This work was presented to the

Barnsley Health and Wellbeing Board in January 2017 and has been recognised as an exemplar of good practice by Public Health England.

The Barnsley suicide audit gives an insight into the characteristics of people who took their own lives in Barnsley between 2010 and 2015, the circumstances of their suicide and the services they had been in contact with. It was highlighted that 85% of suicides in Barnsley between 2010 and 2015 were male. There are a number of risk factors associated with suicide, including debt, social isolation, unemployment, inadequate housing, family and relationship problems and drug and alcohol abuse, which are being addressed within the action plan.

Questions were asked in response to the report and introductory presentation, which included the following points:

- Members were concerned about a perceived lack of availability and access to mental health services within the wider community and particularly at weekends, which it was felt may contribute to the large number of suicides on Mondays. It was felt that this is a key issue and should be raised at the Mental Health workshop on 12<sup>th</sup> December;
- Negative effects of diminishing resources are mitigated through effective multi-agency partnership working. The suicide prevention group is multi-agency, meets every 6 weeks and is always well attended by partners;
- One third of those who committed suicide had contact with primary care in the month before their death (mainly for a mental health condition), indicating a need to raise awareness and promote self help and national campaigns more widely. A successful Suicide Prevention Day social media campaign #AlrightPal reached over 31,000 people with a view to reducing the stigma attached to mental health and suicide. Locally, work is underway with Barnsley Football Club to address the stigma issue.
- Members were reassured that the needs of children and young people are taken care of. Mindspace and Chilypep support and enhance the emotional wellbeing of children of secondary school age and TADS (based at the Core) provides tools and techniques to help them manage mental health issues such as anxiety, stress and depression. Primary school children are able to access the THRIVE programme. The availability of services in schools is currently being mapped to identify gaps and ensure all children can access help and support.
- There is a need to improve veterans' access to mental health support services, which will be achieved by creating more posts for therapists in NHS trusts.
- Although 52% of people who took their own lives were known to have relationship problems, there is no mechanism in place to offer help and support to every resident who experiences a relationship breakdown. However, work is underway with schools around healthy relationships and building resilience.
- Work with those bereaved by suicide is limited, although consultation with the Barnsley Mental Health Forum, a service user led group, did provide valuable feedback on the action plan. Work is underway across the Yorkshire and Humberside region to scope the potential to commission regional services for those bereaved by suicide. Members felt that more work should be done with

those who have been bereaved as a result of suicide to learn from their experiences.

**RESOLVED** that:

- (i) Representatives be thanked for their attendance and contribution.
- (ii) The report be noted and the points raised in the discussion be fed into the forthcoming Mental Health Workshop; and that
- (iii) Further information be provided to the Committee regarding:
  - waiting times to access Mental Health services in Barnsley (including both NHS and 3<sup>rd</sup> sector);
  - the extent of service provision over the 6 week summer holidays (including how many children are accessing these);
  - a breakdown of where people who commit suicide originate from (when not born in Barnsley) and finally
  - how many therapists have been recruited by the NHS to work specifically with veterans.

#### **44 Barnsley Provisional Education Outcomes 2017**

The following witnesses were welcomed to the meeting:

Nick Bowen, Executive Principal of Horizon Community College and Joint Chair of Barnsley Schools' Alliance Board

Margaret Libreri, Service Director, Education, Early Start and Prevention, People Directorate

Gary Kelly, Head of Service-Barnsley Schools' Alliance, People Directorate  
Councillor Tim Cheetham, Cabinet Member, People (Achieving Potential)

The item was introduced by the Service Director, Education, Early Start and Prevention. Members were updated with regard to the provisional education outcomes for children and young people in Barnsley, broken down by pupil group, from assessments taken in 2017 together with an overview from the Early Years Foundation Stage (EYFS) to Key Stage 5 (A-Level).

It was highlighted that there is much to celebrate:

- for children in EYFS, the gap between Barnsley and national results has narrowed
- The percentage of KS2 achieving expected levels in reading writing and maths has increased from 53% to 59%
- Progress for pupils between KS1 and KS2 are above the national average in writing and maths.
- At KS4 the gap between Barnsley and national results is just 0.5% for the Attainment 8 measure, whilst 59.1% of Barnsley students achieve a grade 4 or above in both English and maths, which is above the national average of 58.5%.

However, there are some areas for improvement, including outcomes for boys in EYFS, reading in EYFS, outcomes for disadvantaged students and those with special educational needs.

Questions were asked and challenges were made in response to the report and introductory presentation, which included the following points:

- A regional project and work with the Children and Young People's Family Trust is ongoing to improve EYFS reading outcomes, as evidence suggests that children's capacity to do well in reading is influenced by early cultural experiences before they even start school. Programmes such as 'Bookstart' are in place to work with babies up to school age.
- There is a need to identify those children at risk of developmental delay early. Early Help is crucial. Although 75% of 2 year olds take up the free educational offer, 25% don't, which may be an indication of poverty and vulnerability.
- Where poor outcomes are identified in an individual school, governance arrangements are reviewed and strengthened through intensive work between governors and the Barnsley Schools' Alliance Board. 9/10 secondary schools had improved this year, with 6/10 now assessed as average or above. It is possible to move from 'special measures' to producing above average outcomes in a short space of time.
- Class sizes do not impact in KS1 as the Infant Class Size legislation limits classes to no more than 30, and 96% of pre-school provision is judged as 'good' or 'outstanding'.
- The 6 week summer break does not impact on learning, whereas children taking holidays in term time does have a negative impact. The last two weeks of term before the summer break are now focused on doing work for September so that the last two weeks count and are not viewed as 'winding down'. Area Councils could consider commissioning summer activities which promote continued academic learning in addition to the usual physical activities. A number of schools no longer have a 'non-uniform' day as evidence suggests this can be disruptive and affect the quality of work on those days.
- The reason for the 'dip' in performance when children move to secondary school remains unclear but is an area which the Barnsley Schools' Alliance Board is exploring in detail.
- A recent Ofsted inspection at Darton College was described as 'brutal' with very disappointing results. Nonetheless, a robust school improvement action plan is being developed, with strengthened leadership and governance arrangements. It is now almost impossible to achieve an 'outstanding' judgement under the new inspection regime and inconsistencies between inspectors were noted. Nevertheless, Barnsley's improvement journey is positive – Outwood Academy at Carlton has now achieved a 'good' judgement and is now in the top 10% of the country, with Horizon in the top 25%.
- Barnsley has a high level of fixed term exclusions but this figure is gradually improving and work is underway with individual academies to address this. Inclusion is a standing item on the Barnsley Schools' Alliance Board agenda.

**RESOLVED** that:

- (i) Representatives be thanked for their attendance and contribution

(ii) The report be noted

(iii) Area Councils consider commissioning summer activities which promote continued academic learning in addition to the usual physical activities.

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# Item 4a

**Report of the Executive Director Core Services  
and the Executive Director People,  
to the Overview & Scrutiny Committee (OSC)  
on Tuesday 9th January 2018**

## **Children's Social Care & Safeguarding Quality Assurance Framework 2017**

### **1.0 Introduction**

- 1.1 The purpose of this report is to provide an overview and update to the Overview & Scrutiny Committee (OSC) on the progress of the Children's Social Care (CSC) and Safeguarding Quality Assurance Framework (Item 4b).
- 1.2 The report should be considered together with the CSC and Safeguarding Quality Assurance Framework (Item 4b), the Continuous Service Improvement Framework (Item 4c) and the CSC Monthly Performance Report (Item 7 on today's agenda – not available to the public or press due to the content of sensitive information).

### **2.0 Background**

- 2.1 The framework adopted for driving improvement in CSC Services is The Continuous Service Improvement Framework (Item 4c).
- 2.2 Improvement within the service is measured by the CSC Monthly Performance Report, (Item 7), which provides quantitative performance management analysis, showing the monthly progress that the service is making against national and local performance indicators and targets.
- 2.3 The CSC and Safeguarding Quality Assurance Framework (Item 4b) provides a set of qualitative methods for assessing the service. The framework looks much more closely at the quality of practice that sits under the numerical performance indicators in the CSC Monthly Performance Reports, by examining how the service is experienced by children and their families; their daily life experiences; what are the outcomes and differences made for them.
- 2.4 Equally, the framework tests the operating environment for front line practitioners and front line managers who are delivering the service by looking at what assists them and what are the barriers; what parts of the system can be improved; how is performance and improvement experienced, understood and translated by front line practitioners, when directly delivering services.
- 2.5 Quality assurance methods and activity in Children's Social Care include:
  - A monthly, qualitative case file audit process
  - Thematic practice reviews and deep dives into cases
  - Service user feedback initiatives, e.g. through the 'Care4Us Council' (which comprises of children in care and care leavers)
  - A staff supervision audit process

- An annual Social Work Health Check measuring how the working environment is perceived by Children's Social Workers, i.e. support, supervision, learning & development
- Direct observations of front line practice by managers, including the Director of Children's Services/Executive Director of People (ED); the Service Director (SD) of Children's Social Care Services and Lead Cabinet Member (LM) for Safeguarding
- Meetings with front line teams and practitioners by the ED, SD and LM
- Visits to the borough's Residential Children's Homes (both of which have a 'Good' Ofsted rating) by the ED, SD and LM

### 3.0 Quality Assurance Activity 2017 - Visits to the Front Line

- 3.1 As a means of checking the quality of services that sit beneath quantitative performance data, the ED, SD and LM meet every month with frontline social work teams and go out with practitioners to directly observe practice with children and families. This is in addition to a programme of single case file auditing in CSC.
- 3.2 The programme of visits to front line teams involve a meeting with a specific team for at least an hour, followed by the ED, SD and LM each accompanying a Social Worker/Practitioner to directly observe a home visit and/or meeting to a child and family. Following each visit the ED and SD record the visit and agree follow up actions arising from any issues that were raised by the teams, or by direct observation of practice and intervention during visits with Social Workers.
- 3.3 During 2017, the following direct observations of practice were undertaken for quality assurance purposes:-

<b>Team/Individuals Visited</b>	<b>Visit Date</b>
Adoption Team	1 February 17
Children in Care	9 <sup>th</sup> March 17
Fostering Team	10 <sup>th</sup> April 17
Independent Reviewing Officer (IRO)/Child Protection (CP) Co-ordinators for Children in Care and Children on formal CP Plans	18 <sup>th</sup> May 17
Disabled Children's Team	29 <sup>th</sup> June 17
Front Door & Assessment Team	7 <sup>th</sup> August 17
Safeguarding Teams	25 <sup>th</sup> August 17
Future Directions (Care Leavers)	27 <sup>th</sup> October 17
Intensive Adolescent Service Team (IAST)	November 17

#### 4.0 Quality Assurance Activity 2017 - Case File Auditing

- 4.1 The auditing of case files tests compliance against agreed procedures and professional standards, but more so, it also tests how well the child's experience and daily life is truly understood and responded to, at the right time, by the right agencies, along with the quality and impact of agency intervention. Audits have an agreed methodology but will all test whether sufficient progress is being made with pace and in a child's timeframe, and the measures of impact which improve outcomes for the child.
- 4.2 Audits are completed every month by the CSC Management Team. Themes are agreed, but cases are selected by the Quality Assurance Team, who collate and analyse the results. The objective of all quality assurance activities is to reflect, learn and improve.
- 4.3 Audit outcomes are shared and discussed by Managers, who agree improvement actions, which the Quality Assurance Team monitor and oversee.
- 4.4 During 2017, the following case file audits were undertaken for quality assurance purposes:-

Case File Audit Theme	Date	Action Plan Status
Looked after Children (LAC); Child Protection (CP); Children in Need (CIN). Thresholds and Pathways –Have the appropriate thresholds been applied at the transition from Early Help Assessments (EHA) to CIN to CP	January 17	Completed
Quality of Care Plans	February 17	Completed
Outcomes for Care Leavers - Safeguarding / safe accommodation / education / pathway planning	March 17	Completed
Children subject to a Child Protection Plan	April 17	Completed
Deep Dive - 'Children living with neglect'	May 17	Completed
Cases held in the Disabled Children Team (incorporate feedback from family and young person within the audit analysis)	June 17	Completed
CIN Cases. Focusing on the complexity of CIN cases and how Thresholds are used	July/August 17	Completed
Establishing and Evidencing Outcomes	September 17	Completed
Special Educational Needs & Disability (SEND)	October 2017	Audits completed, analysis in progress
Quality of planning for children (Stepdown/CP/Looked After Children (LAC)/Transitions/Pathway plans)	November 2017	Cases audited; analysis in progress
Managers Decision Making and Case Supervision - are decisions timely and effective based on clear reasoning. Is formal supervision at the appropriate frequency, is it reflective and challenging are decisions outside of formal supervision recorded?	December 2017	Audit in progress

## **5.0 Impact of the Quality Assurance Programme 2017**

- 5.1 The Continuous Service Improvement Framework and Plan has driven real improved progress for vulnerable children in Barnsley, as evidenced by the monthly performance information and data, which tracks performance and progress against key national and local performance indicators, as routinely presented to the OSC in private session.
- 5.2 Equally the quality assurance programme, involving audit and direct observation of practice, help validate the improved performance indicators, where practitioners articulate and demonstrate meaningful interventions and relationships with children and families, that are helping them to achieve improved and evidenced outcomes.
- 5.3 Staff are confident at the meetings to raise issues that concern them, which senior leaders have respond to. This demonstrates a culture of dialogue, visibility, learning and improvement. For example, office accommodation, IT equipment and caseloads are all issues that have been raised and responded to.
- 5.4 The Quality Assurance Programme in 2017 has concluded that practice is consistently good and delivered by a stable, supported, highly motivated and committed workforce.

## **6.0 Invited Witnesses**

- 6.1 The following witnesses have been invited to today's meeting to answer questions on the Quality Assurance Framework from both a directorate and practitioner perspective:
  - Rachel Dickinson, Executive Director – People, BMBC
  - Mel John-Ross, Service Director, Children's Social Care & Safeguarding, BMBC
  - Cllr Margaret Bruff, Cabinet Spokesperson – People Directorate, BMBC
  - A number of Front Line Social Work Practitioners

## **7.0 Possible Areas for Investigation**

- 7.1 Members may wish to ask questions around the following areas:
  - On reflection, what have been the success stories from the quality assurance activities over the last 12 months and what could have gone better?
  - What do front line staff consider to be the main barriers to undertaking their work effectively and how are these addressed?
  - What impact has the Quality Assurance Programme had on front-line practitioners and their work and what input have they had into the development of the process?
  - Can you give an example of an improvement action identified during the last 12 months and how did this enhance outcomes for children and families?
  - Do front line staff know in advance when senior management are to accompany them on their visits and what input does the child/family have?
  - What evidence do you have to show that actions identified from the quality assurance visits are having the desired impact?

- Do you consider the frequency of visits to the front line sufficient given the number of teams or should some teams be visited more often? If so, why?
- What mechanisms are in place for front line staff to use if they feel that colleagues or senior management are not discharging their duties in a satisfactory way?
- Given that funding has been very recently granted to increase the number of social workers, when do you anticipate these posts to be filled and do you foresee any potential issues with the recruitment process?
- What can Members do to support the Quality Assurance Framework?

## 8.0 Background Papers & Links

- Item 4b - Children's Social Care and Safeguarding Quality Assurance Framework
- Item 4c - Continuous Service Improvement Framework
- Item 7 on today's agenda - CSC Monthly Performance Report (not available to the public or press due to the content of sensitive information)
- [Working together to safeguard children - GOV.UK](#)
- [Children Act 1989](#)
- [Children Act 2004](#)
- [Munro review of child protection: a child-centred system - GOV.UK](#)

## 9.0 Glossary

- CIN Children in Need
- CP Child Protection
- CSC Children's Social Care
- ED Executive Director of People/Director of Children's Social Care
- EHA Early Help Assessment
- IAST Intensive Adolescent Service Team
- IRO Independent Reviewing Officer
- LAC Looked After Children
- LM Lead Cabinet Member for Safeguarding
- OSC Overview and Scrutiny Committee
- SEND Special Educational Needs and Disability
- SD Service Director for Children's Social Care

## 10.0 Officer Contact

- Anna Marshall, Scrutiny Officer (01226 775794)
- Mel John-Ross, Service Director for Children's Social Care & Safeguarding (01226 773665)

22<sup>nd</sup> December 2017

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**Barnsley Metropolitan  
Borough Council  
Directorate for People**

**Children's Social Care and  
Safeguarding  
Quality Assurance Framework  
2017**



# Content

		<b>Page</b>
1	Definition	3
2	Our approach to quality assurance	3
3	National drivers	4
4	Local drivers	5
5	Learning self-assessment and action planning	5
6	Reporting and communicating findings	6
7	Governance	6
8	Review	6
9	Quality assurance schedule	7



# 1 Definition

Quality assurance involves the systematic monitoring and evaluation of practice, policies, and procedures, with the aim of improving our services to achieve better outcomes for children and their families and developing an understanding of their needs.

Quality assurance is not an additional activity, but an integral part of everyday practice within Social Care. Primarily, it can help us ensure and evidence that children are being kept safe from harm and are protected. It helps improve outcomes for children and families we work with by identifying gaps and problems within practice and services offered, which can be addressed through service planning, training, and commissioning. Crucially, it also helps us identify what interventions work for children and families and highlight good practice. It also assists the service in ensuring staff are supported in carrying out their jobs both safely and effectively.

The framework supports the effective delivery of the Barnsley Continuous Service Improvement Framework and Plan. It includes:

- a monthly qualitative case audit process
- thematic practice reviews & deep dives
- briefings to senior managers, leaders and elected members
- quantitative performance management analysis and reporting process
- service user feedback initiatives.
- a supervision audit process
- direct observations of front line practice

# 2 Our approach to quality assurance will be:

- **child centred** – we will follow the journey of the child through our services and keep our ambitions for our children at the centre of everything we do.
- **outcome based** – we will continually seek to improve performance and demonstrate the impact of help for children and their families in improving their outcomes. It is not enough to carry out quality assurance activity; the findings from all activity will drive service improvement and create better outcomes for our clients and workforce.
- **fair** – we will take equality and diversity issues into account when developing and undertaking quality assurance activity. We will use the results to promote equality of access.
- **learning** – our quality assurance activity is for the purpose of organisational learning and improving our practice.
- **participative** – our quality assurance activity will be carried out in partnership with service users and professionals; from the newly qualified social workers to senior managers. Measuring quality is something done with, and by, service users and professionals, rather than an exercise done to them. Everybody has a responsibility to quality assurance and everyone's views and feedback will be incorporated into service improvement.
- **consultative** – we will use a consultative approach which will encourage an awareness of quality issues and ownership of the findings.

- **transparent** – we will deliver clear messages about the purpose of the quality assurance and how it benefits the organisation and individuals to encourage openness and willingness to participate.
- **ethical** – we will always endeavour to:
  - respect participants' privacy and confidentiality
  - extend and develop our knowledge
  - use public resources in the most effective way possible
  - use the findings to create change, which leads to improved outcomes.

### 3 National drivers

- 'Working Together to Safeguard Children' HM Government 2015: 'in which a culture of audit is encouraged'.
- Guidance following the Children Act 1989 and the Children Act 2004.
- Munro Review of Child Protection made the following recommendations for quality assurance:
  - more emphasis on the journey of the child and whether the children have been helped
  - less emphasis on performance measures
  - more value placed on the use of professional judgment and research to reach appropriate decisions – baselines should not use procedures and performance measures only
  - qualitative audits of actual practice in consultation with social workers rather than an audit of recording
  - local multi-agency systems need to be monitored – use of a whole-systems learning approach.
- Ofsted inspection of services. Audit methodology and process is derived from Ofsted frameworks. Publication of a new Ofsted framework is expected in October 2017 and audit will align where appropriate.
- Social Work England is due for launch in 2017. This body will be responsible for
  - Social work standards
  - a social work accountability framework`
  - workforce planning systems
  - support for the workforce to do their job effectively and maintain professional registration
  - systems to provide regular and appropriate supervision

The 'Social Work Health Check' will be used to measure progress against the standards.

A system of social work accreditation is currently in national development. Audit will be adapted in line with the accreditation framework and will be able to contribute to the endorsement process.

## 4 Local drivers

### ■ Strategic plans:

- Corporate Plan
- Business Unit and Service Specific plans
- Continuous Service Improvement Plan
- Barnsley Council Practice Standards
- Children and Young Peoples Plan
- Barnsley LSCB Annual Report

### ■ Self-evaluation and reviews:

- Serious Case Reviews
- Child Death Reviews
- Multi Agency Audits
- Independent Reviews
- Internal Thematic and Case Specific audits

## 5 Learning, self-assessment and action planning

***Note: This should occur at each stage of the quality assurance process.***

The Children's Social Care Quality Assurance Framework and service action plan will be owned and monitored by the Service Director for Children's Social Care and Safeguarding and driven by the Head of Safeguarding and Quality Assurance and the Quality Assurance and Policy Officers.

It is imperative that learning from each quality assurance activity is shared with the right people and used meaningfully to change practice and improve outcomes for children, families, and employees. Learning should make evidenced links to the following areas:

- supervision
- training
- complaints and compliments
- workforce planning and development
- commissioning
- service plans and team plans
- BSCB and CYPP priorities and business plans.

There is a national expectation that the LSCB must lead and co-ordinate local learning and evidence the impact/difference learning from quality assurance has made to services provided to children and families across the partnership. Key learning points and themes from this framework will be reported to LSCB through the PAQA reporting arrangements.

The success of service delivery in Barnsley Social Care is measured by improving the outcomes for children and their families, achieving agreed targets and raising standards. It will need the commitment and support of all managers and their teams to ensure that quality assurance activity is embedded, with a clear feedback and remedial action process, and reported to the relevant bodies within specified timescales.

## **6 Reporting and communicating findings from quality assurance**

Monthly audit reports will pull together themes from audit and quality assurance activity. Findings and themes from quality assurance activity will be routinely communicated to all staff, from senior managers to frontline staff via the Social Care newsletter, performance management meetings, PAQA, email, team meetings and the social care forum. Themes from quality assurance will be incorporated within the BSCB annual report, available to the public.

Findings from consultations with service users will be communicated to service users, evidencing how the results from consultations have made an impact to services' improvement.

## **7 Governance**

Each aspect of the framework has a reporting line, ensuring that key reports are considered in a range of different contexts, such as the Children's Trust Executive Group (TED), Overview and Scrutiny Panel, Barnsley's Safeguarding Children Board and the Directorate for People Management Team meetings as appropriate.

Learning and action planning from the Quality Assurance Framework will link to the following activities.

1. Consultation and feedback from children, young people and their families
2. Learning from compliments and complaints
3. Learning from LSCB audits and Serious Case Reviews
4. Performance indicators and other management information
5. Independent Reviewing Officers' quality assurance activity
6. Independently commissioned audits
7. Continuous Service Improvement Plan

## **8 Review**

The framework will be reviewed and updated annually and signed off by the senior management team. It is proposed that the first review should be completed by the end of the given business year. It is recommended that the review process includes the following:

- Mapping of current quality assurance practice in the service, ie what is taking place and what is not against the proposed quality assurance schedule set out within this document.
- A consultation with social workers, team managers and the senior social care management team on the value of the current quality assurance processes in relation to how practice has been improved as a direct result; user-friendliness of the processes; drawbacks, barriers and limitations.

## 9 Quality assurance schedule

Quality assurance process	Description of process	Responsible officer/elected member(s)/panel	Frequency of quality assurance activity	Intended outcome	Reporting arrangements
Barnsley Council Overview & Scrutiny Committee	Meetings focus on various aspects of national and local activity affecting Barnsley residents. The programme does include safeguarding activity. Agendas will be determined by the committee according to the particular line of enquiry they feel should be followed.	DCS, SD  Lead Cabinet Member	Monthly meetings	Ensuring that elected members and political leaders have a comprehensive and robust knowledge about the local delivery of services and challenge accordingly	Reports to Cabinet
Barnsley Council Overview & Scrutiny Committee - State Member Briefing - Children's Social Care	Regular attendance & presentation of CSC monthly performance report for scrutiny by elected members	SD	Monthly meetings	Ensuring that elected members and political leaders have a comprehensive and robust knowledge about CSC performance and challenge accordingly	Reports to Cabinet
DCS; SD, Lead Member and Support Member visits to front line services	DCS, SD and the Lead Member undertake separate visits to front line services in Children's Social Care and Safeguarding approximately every six weeks. This is particularly to teams that deliver a front line child protection service but also includes the LAC and fostering service. Visits include focus groups and shadowing visits. Each visit is written up including any actions for the service to follow up.	LM, DCS, SD	Six weekly	Ensuring that senior managers and political leaders have a comprehensive and robust knowledge about what is happening at the 'front line' and challenge accordingly	Reports outcomes to BSCB;TEG  Reports formally within the Annual Safeguarding & QA Performance Report

				To capture everyday issues, barriers and best practice in frontline social work practice by Senior Social Care Managers.	
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Lead Member Briefing	Lead Member attends the BSCB and TEG where they are presented with safeguarding and performance data. Additionally LMB and SD hold an additional monthly 1-1 meeting for clarification or challenge.	LM, DCS, SD	Monthly	Ensuring that senior managers and political leaders have a comprehensive and robust knowledge about what is happening at the 'front line' and challenge accordingly	Leader of the Council receive minutes of the meetings.  ED receives minutes of the 1-1 meetings.
DCS and SD visits to the children's homes	The DCS and SD each undertake separate visits to the Barnsley's children's homes throughout the year. In addition elected members volunteer to accompany twice yearly IROs twice yearly when they undertake the reg 33 inspection.	DCS; SD	Programme of visits planned throughout the year	Ensuring that senior managers meet regularly with children and young people who are looked after by the LA. To observe the quality of care and relationships.  To capture everyday issues, barriers and best practice in frontline residential care.	Reports formally within the Annual Safeguarding & QA Performance Report.
Care4Us - Children in Care Council	The Children in Care Council has a key role in monitoring the progress Barnsley makes against the promises outlined for looked after children in the Pledge, and holds senior officers and elected members to account for delivery against the pledge.  The CiC Council is developed to ensure that it	LM, DCS and SD	Aspects of the Pledge are reviewed at each CiCC and Corporate Parenting Forum, in addition to an Annual Review of	To work in partnership with CIC in developing our services. Give children in care a voice and opportunity to shape the services they receive.  To contribute to ensuring the	Reports formally to: Corporate Parenting Group, Scrutiny and Full Council

	represents the wider CiC population including disabled children and children and young people placed out of authority.		entire Pledge  Quarterly Meetings	child's voice and experience are reflected in learning and improved practice	
Quality Assurance and Performance Meetings	Quality Assurance and Performance Meetings take place on a monthly basis. The aim is to interrogate the findings from the full spectrum of quantitative and qualitative quality assurance activity carried out across the division, with a particular focus on what difference quality assurance activity has made to improving outcomes and agreeing the focus of future quality assurance activity. Meetings are monthly for both Group A - CIN/CP/LAC and Group B - CIC/Fostering/Adoption and Residential.	HOS with SMs and TMs	Monthly Performance Meetings	Monitor outputs and discuss / analyse the story behind the data. Monitor and disseminate learning from quality assurance activity.	Reports to: SD/HOS/SM Management Team
Managers monthly case file audit and themed audits	Managers complete monthly qualitative audits in discussion with case holders, and where possible, children and young people and their families. Auditors include the HOS, SM and TM's. The total number that can be completed range between 18 and 25 cases. Monthly audits will focus on a theme, area or cohort in which all cases are randomly selected.  The auditing process utilises a standardised template for recording and is shared directly with the social worker/manager involved.  The audits are compiled into a report with an associated action plan. The report is discussed at the monthly auditor meeting where the plan is finalised. Progress against previous action plans is reported at the	Head of Safeguarding & Quality Assurance; HOS	Monthly	Evaluation of the outcomes for children and the impact of our practice and its effectiveness. Identify possible trends, gaps, and issues that warrant further analysis and action. Improve practice through experienced (non-line) management input into cases.	Reports formally to: Reports to: SD/HOS/SM Management Team Meeting; Monthly Performance Meetings; Reports formally within the Annual Safeguarding & QA Performance Report

	<p>monthly auditor meeting.</p> <p>Activity is independent of but aligned with the LSCB/PAQA, which the SD chairs. LSCB/PAQA are given the audit schedule, methodology and any multiagency actions are developed with PAQA. Full reports can be shared with PAQA with agreement. This is a reciprocal relationship with PAQA and has led to QA developing multiagency tools, assisting with case selection, helping with report writing etc for PAQA.</p>				
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Page 24	CSC Social Work Forum	An all service by-monthly forum where best practice is championed and cascaded. The forum brings the full range of CSC staff together presenting emerging national and local issues	Head of Safeguarding & Quality Assurance	6-8 weekly	Development for all staff in CSC	Reports formally within the Annual Safeguarding & QA Performance Report
	Regulation 44 Inspections	<p>The Local Authority is required to ensure that children's homes are subject to regular visits by officers independent of the residential service in order to undertake inspections regarding the quality of care provided to children living in children's homes. This includes speaking to staff, young people and scrutinising records held in the home.</p> <p>Officers support The Children in Care Forum, Care for Us may also undertake some of these visits with a particular focus on the views of young people in residential care.</p>	IRO's plus countersigned by Service Managers, Head of Service, SD and responsible individual	Monthly	Monitor the quality of children's homes.	Reports formally to: the SD/HOS Management Team; Corporate Parenting Panel; Annual Safeguarding & QA report
	Regulation 44 Inspections	It is the responsibility of the Residential Children's Home Manager as the registered manager to monitor the performance of the home. To assist in the operation of this the	Registered Children's Home Managers and Service Manager -	Minimum monthly	Monitor the quality of children's homes.	Reports formally to: the SD/HOS Management Team;



	Service Manager Barnsley Children in Care Provider Services makes unannounced visits regularly throughout the year, the purpose of which is to ensure that national minimum standards are met and exceeded, and to identify and implement necessary actions when standards are not evidenced. These visits are in addition to the registered manager's own monitoring tasks.	Children in Care			Corporate Parenting Panel; Annual Safeguarding & QA report
Supervision of front line staff & managers at all levels of the Division	Individual social work practice improvement through professional wellbeing supervision and annual P&DR process.  Supervision is regulated via the Supervision Policy. The frequency of supervisions and PDRs are monitored by senior managers  The service will carry out a supervision audit twice a year.	HOS	Twice a year	Monitor the quality of supervision and effectiveness of the supervision policy.	Feedback is given to practitioners and a record of supervision is made.  The quality of supervision is addressed in every case file audit and reported on.
25 m meetings	Team time to reflect and evaluate practice developments and initiatives at team and case level	SMs;TMs	Monthly	Team development, reflection, action planning	SM;HOS
Audits of the Independent Reviewing Officer (IRO) Service carried out by the Head of Safeguarding and Welfare	The Safeguarding Unit has a quality assurance programme scrutinising the work, performance and outcomes from the IRO service. This includes auditing: Use of consultation documents for LAC completed for LAC Reviews; analysis of performance indicators such as timeliness of reviews and how children in care participate in their review; audits of LAC Review minutes and Personal Education Plans	Head of Service Safeguarding & QA	Programme of audit throughout the year  Quarterly		Reports formally to: the SD/HOS Management Team; Corporate Parenting Panel; Annual Safeguarding & QA report to Children's Scrutiny Commission & Executive
Audits of the Child Protection Conference	The Safeguarding Unit has a quality assurance programme scrutinising the work,	Head of Service - Safeguarding & QA	Programme of audit throughout	Learning from allegations	Reports formally to: the SD/HOS

Service/Management of LADO	performance and outcomes from the Child Protection Conference and LADO Service. This includes auditing monitoring of all key CP performance indicators and CP processes; collating and auditing service user feedback (including young people) on their views of the CP Conferences and process; and ensuring the management of allegations process is managed robustly, including integrating the learning from audits/Serious Case Reviews.		the year  Quarterly		Management Team; BSCB ; Annual Safeguarding & QA report to Children's Scrutiny Commission & Executive
Complaints and Compliments monitoring	The Children's Complaints Manager reports quarterly to senior management team. Stage 1 complaints have an action plan associated which records learning points which result. These action plans are sent to the Complaints Officer at the same time as the written response is sent.  The DCS and SD track all elected member enquiries on behalf of their constituents. These enquiries allow for a deep dive of cases	Complaints Manager  SD	Monthly	Learning from complaints and compliments.  Learning from elected member enquiries and escalation.	DMT provide quarterly input into directorate wide Complaints monitoring report and action plans
Escalation of concerns	BMBC have agreed an Escalation Policy to promote escalation of any concerns regarding a child where there is a professional disagreement.	BSCM Manager	Reported to the BSCB	Concerns about children are resolved in live time	BSCB Annual Report and S11

Barnsley Children's Social Care Continuous Service Improvement Framework



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# Item 7a

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