# **QUALITY ASSURANCE FRAMEWORK**

# Sandwell Children's Safeguarding Partnership May 2022



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#### 1. Introduction

In line with Section 14 of the Children's Act 2004, the safeguarding partners have a duty to monitor and evaluate the effectiveness of what is done by partners individually and collectively to safeguard and promote the welfare of children and young people and advise on ways in which practice improvements can be made to improve outcomes for children and young people.

Sandwell Children's Safeguarding Partnership (SCSP) are determined to ensure that the services for children and young people are coordinated and the activities that safeguard all children are done so to enable them to grow up in circumstances consistent with safe and effective care; to meet the needs of particularly vulnerable groups; and be responsive in protecting children who are likely to suffer or are suffering significant harm.

SCSP are committed to achieving good outcomes for children, young people and their families and regular monitoring of multi-agency activities will be used to drive continual improvement in the services we provide and outcomes we deliver. In order to do this, a strong Performance and Quality Assurance Framework is required to monitor and evaluate that services are delivered effectively and most importantly, that they are making a difference.

#### 2. <u>Underlying principles</u>

SCSP has agreed that the following principles will underpin the implementation of this framework:

- A systematic approach is required with the needs and experiences of children and families at the centre.
- Effective governance arrangements should underpin quality assurance and performance management activity.
- Quality assurance and performance activity should be linked to business planning.
- A range of data/information and activity is required to understand quality of practice and performance
- Agencies and individuals are responsible for being open to challenge and challenging each other on local performance and quality of services.
- A learning culture needs to be nurtured to support practice learning and continuous improvement.
- SCSP will work to understand and address the impact of the global pandemic on outcomes for children and families; including any disadvantages linked to structural inequalities.

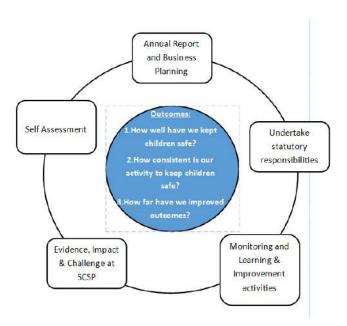
#### 3. What is Performance Management and Quality Assurance?

Performance management is the activity undertaken to answer the questions:

- How well have we kept children safe?
- How consistent is our activity to keep children safe?
- How far have we improved outcomes for children and their families?

Quality assurance is a term that embraces all the activity that contributes to continual service improvement. It is an improvement cycle by which we will monitor our impact, use information to improve services and undertake ongoing reviews to evaluate progress and identify areas for further improvement. It will be both systematic and themed and include single and multi-agency activities.

SCSP will operate a cycle of performance management and quality assurance and the SCSP Annual Report and business planning are essential components of this cycle as set out in the diagram below.



#### 4. Governance and Accountability

The contents of the Quality Assurance Framework (QAF) will be reviewed in April 2025, 3 years from the date of ratification and the implementation plan will be devised annually to ensure this aligns to the overarching work of the SCSP – the template used to devise this plan is shown in Appendix 1.

On the Partnership's behalf, the Quality of Practice, Performance and Assurance (QPPA) Subgroup will have responsibility to oversee the implementation of this framework. Dedicated officer support to coordinate and manage the Performance and Quality Assurance Framework is provided through the Business Unit. The successful implementation of the QAF is reliant upon partner agencies, both in terms of the collection of outcomes focused data and their contribution to quality assurance activities. Partner agencies will therefore need to ensure there is the required level of synergy between their internal performance and quality assurance arrangements and this framework.

The focus and remit of the QPPA subgroup is to gain assurance of the quality and effectiveness of multi agency safeguarding arrangements across the partnership.

The QPPA Subgroup will routinely report to the Chairs Consultation Forum (CCF) and to statutory partners on the implementation and findings of this framework at the SCSP Board meetings. The SCSP Annual Report will be used as the vehicle to publicly account for the delivery and impact of this framework.

#### 5. SCSP Performance and Quality Assurance Framework

The framework is based on an 'Outcomes Based Accountability' (OBA<sup>1</sup>) approach which will help organisations/partnerships to understand a given area of business/concern by considering:

- What we do
- How well we do it
- What difference we have made/is anyone better off?

The framework identifies the **content areas** to focus upon and it will use an appropriate balance of **performance and quality assurance information** to assess the quality of work undertaken to safeguard children and its effectiveness in helping to keep children and young people safe. Finally, it identifies where and how performance **information can be sourced** using a range of methods.

#### 5.1 Content Areas (also referred to as themes)

There are so many dimensions to safeguarding that if we tried to quality assure everything it would become unmanageable. There is a need therefore to focus on a discreet number of defined areas which the SCSP concludes are the most important. The areas of focus will be determined by local need following consultation with all partner agencies and informed by evidence such as findings from research, audits, management information and learning from serious child safeguarding incidents.

#### Content Areas could include:

*Priority Service Areas* such as the front door and operation of children in need/child protection assessment or early help.

*Vulnerable Groups of Children and Young People* such as children out of education, children under 1 year, privately fostered children

Specific Risk Issues such as domestic abuse, poor parental mental health, child exploitation

Partnership Working such as practical working arrangements, information sharing and communication and not just between different organisations but also what happens between different services and professionals within a single organisation.

<sup>&</sup>lt;sup>1</sup> Mark Friedman, Trying Hard is Not Good Enough, 2005, Trafford Publishing

Organisational arrangements where the focus is on issues such as leadership, culture, workforce and capacity, learning and development, safeguarding wisdom, supervision and support, use of resources and evidence-based practice.

#### 6. Types of information

There are three types of performance information/measures as follows:

#### 6a) Quantitative information

This will help to inform how well we have kept children safe? It answers the questions: 'How much/how many?' For example, 'How many children were made subject to a child protection plan, how many assessments did we complete, how many days training did we provide, how many incidents of domestic violence were referred by the police?' etc.

#### 6b) Qualitative information

This will tell us more about how consistent is our activity to keep children safe? It is concerned with the functioning of the organisation and system and the quality of what was done; for example, 'What percentage of staff trained thought their skills had improved as a result, what percentage of assessments were analytical or kept a child focus, what percentage of parents felt that they were treated with respect?'

#### 6c) Outcome information

This tells us how far we have improved outcomes for children and families (through our services, strategies and interventions), namely 'Is anyone better off?' Examples include the percentage of families in which domestic violence has ceased, reduction in repeat missing episodes, the percentage of children who feel safer as a consequence of the intervention they received.

Traditionally, quality assurance information in safeguarding has focused largely on quantitative information with very little outcome information. The challenge is, over time, to increase the proportion and importance of outcome information as this constitutes what really matters, supported by qualitative information and then quantitative information.

#### 7. Sources of Information

By and large, two main sources of information have been used in safeguarding quality assurance: data from management information systems and children's/families' case records (for example through audits).

Whilst it is recognised that these are important and valuable sources, to get a full picture of what is really happening it is important to capture the experience of children and parents/carers, and the experience of frontline staff and managers. Therefore, the information will come from four main sources:

#### 7a) The experience of children, parents and carers

Obtaining the views of parents and children in safeguarding work is underdeveloped because it is hard to do, especially in what can be the fraught nature of safeguarding work. Yet it is clearly a rich

seam, not just in terms of understanding the quality and impact of services now, but as a source of learning and organisational development.

It is important to know how parents/carers and children feel they are treated by the professionals and agencies they interact with. If their experience of such interactions is negative, this is likely to have an adverse impact on outcomes. Understanding what matters in terms of engagement and interaction, and whether this is something they experience in reality (and therefore identifying what professionals and agencies need to get right) is something only parents, carers and children can tell us. The continuity and quality of relationships, whether people feel listened to, respected, valued and not judged, whether their personal stories are heard and the way in which interventions are explained and delivered are all examples of what matters to parents and children.

Where possible, partner organisations should use sustainable methods which are part-and-parcel of day-to-day business such as capturing the experience of children/parents at key points of involvement and activity e.g. assessment, review, closure.

In addition, other specific activities can be commissioned or utilised such as the following:

- service user surveys or interviews
- focus groups
- direct contact with senior managers

The messages from children and parents can be reported in two forms:

- aggregated reports of quality and outcomes statements, for example: the percentage of parents who reported that they had a good relationship with their health visitor
- more detailed account of the service users' 'story' so that the meaning of their experience is communicated

#### 7b) The experience of frontline staff and managers

Staff and frontline managers will often know about the quality and impact of their own services and those of partner agencies they work with. They will be able to advise of barriers and enablers to effective safeguarding practice. It is important to have a constant feedback loop from the frontline to keep senior management and those with governance responsibilities 'reality-based'; not just in terms of what is or is not working, but to assist with ideas for improvement so that changes can be made systematically.

It is important that organisations individually and collectively develop a culture which demonstrates that the views of staff are valued and taken seriously, and that should include being able to bring challenge.

Key activities will include:

- staff surveys and interviews
- focus groups
- staff evaluations of partnership working
- 'walking the floor' and observation of frontline practice by senior managers

The experience of frontline staff can be communicated in an aggregated form or through more interactive and dynamic means.

#### 7c) Parents and children's case records

The case records held by an organisation, in whatever format, will be a rich source of information.

Case record 'auditing' involves the systematic analysis of records by staff with relevant professional expertise in order to glean the required information from a sufficient sample of cases to provide a picture of what is going on through aggregating the case findings.

Key activities include:

- Continuous (regular) auditing as part of management oversight arrangements e.g. at key transition points
- Specific or thematic audits as part of an organisation's or the Partnership's quality assurance programme
- Management information about safeguarding e.g. quantitative or qualitative measures

#### 7d) Other activities

Organisations have a range of information within their systems which can be used to inform safeguarding quality assurance, for example: staff training, vacancy rates or staff turnover.

In addition, there are a number of other organisational activities that will contribute directly to quality assurance of safeguarding, such as:

- Internal Peer 'Deep Dive' Review a team of reviewers comprising of partner representatives focusing on a particular service area
- External Peer Review a team comprising of external reviewers focusing on pre or post-inspection or specific areas of safeguarding
- Independent Scrutiny as required by statutory guidance, the Partnership will commission its independent scrutineer to review specific areas of work linked to their agreed priorities
- Sector Support an organisation commissioned to provide safeguarding sector specialist support to undertake a specifically tailored assignment
- Rapid Reviews and Child Safeguarding Practice Reviews identification of learning in respect of organisational or partnership working arising from serious child safeguarding incidents

#### 8. Local Context and the Five Stages of applying the Framework

There are so many dimensions to safeguarding that if we tried to quality assure everything it would become unmanageable. There is a need therefore to focus on a discreet number of defined priority areas which the SCSP concludes are the most important. The priority areas have been determined by local need following consultation with all partner agencies and informed by evidence such as findings from research, audits, management information and learning from serious child safeguarding incidents.

#### 8a) Stage One - Agreeing the Content Areas

The Partnership has agreed the following priority areas which are used in the content of the Framework:

- Exploitation
- Neglect
- Early Help
- Core safeguarding

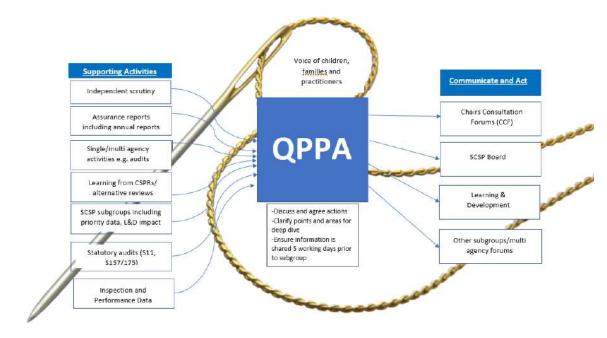
#### 8b) Stage Two - Defining 'what good looks like'

The partner agencies who make up the QPPA Subgroup have defined 'what good looks like' for the 4 content areas, which can be found in Appendix 2.

#### 8c) Stage Three - Sources of information and methods for gathering it

The QPPA Subgroup has agreed a range of sources of information to inform learning and improvement activity. The main sources are listed below:

- Walk the floor activity
- Service user feedback/surveys
- Practitioner forums/questionnaires
- Impact evaluations from single and multi agency training
- Findings from single and multi agency audits
- Quarterly multi agency performance data and information from service specific dashboards
- Evaluation of impact of specific interventions



# <u>8d) Stage Four – Agreeing a planned Performance and Quality Assurance programme</u>

Each year the QPPA Subgroup will agree a Performance and Quality Assurance Programme. Appendix 1 contains a template that will be used to develop the planned programme of activity. As stated earlier, particular emphasis will be given to the experiences of children, parents/carers and those of front-line staff as well as practice observation. Quantitative data will also play a role in the agreed programme and this will be used to provide a line of sight on services provided to children and families as well as partnership working.

#### 8e) Stage Five - Learning and Improvement

What we do with the information collated is as important as the quality of information we collect. Therefore, the learning from quality assurance will be formally shared with partners and used meaningfully to change practice and improve outcomes for children, parents and carers.

The Partnership will also evaluate the impact of learning from its Performance and Quality Assurance Framework in order to seek assurance that improvements are being made in accordance with its ambition to operate a cycle of continuous improvement.

## <u>Appendix 1 – Implementation Plan: Performance and Quality Assurance Annual Programme template example</u>

To illustrate to the reader how the QAF will operate, a small number of examples are outlined below:

Content area:			
<b>Quantity:</b> How well we keep children safe	<b>Quality:</b> How consistently we do so?	Outcome: Is Anyone Better Off?	Sources of Information and reporting schedule
<ul> <li>Number of children being exploited/at risk of exploitation</li> <li>Number of National Referral Mechanisms submitted</li> <li>Number of 'reachable moment' interventions offered</li> <li>Core Safeguarding</li> </ul>	<ul> <li>Children who are being exploited/at risk of exploitation attend full time education</li> <li>Intelligence is shared by partner agencies to identify children who are vulnerable to being exploited</li> </ul>	<ul> <li>Reduction in repeat missing episodes</li> <li>Increase in children who say they feel safe in their school/community</li> <li>Perpetrators are disrupted/held to account/prosecuted</li> </ul>	<ul> <li>Young people's survey</li> <li>Performance data</li> <li>Horizons Team annual report</li> </ul>
<ul> <li>Contact to referral conversion rate</li> <li>Child Protection numbers/rate</li> </ul>	<ul> <li>Partner agencies analyse and share information to inform decisions about a child's level of need</li> <li>Professionals engage and build effective relationships with mothers, fathers and other relevant adults involved in the child's life</li> </ul>	<ul> <li>Children and families receive help at the earliest point of need</li> <li>Reduced numbers of children in care</li> </ul>	<ul> <li>Parental feedback/survey</li> <li>Performance data</li> <li>Audit findings</li> </ul>

## Appendix 2 – Defining 'what good looks like' in Sandwell

SCSP have defined 'what good looks like' for each of the 4 agreed content areas, with this being detailed below:

Child Exploitation	<u>Neglect</u>	Core Safeguarding	Early Help
1. All children and parents in Sandwell know what exploitation looks like  2. Practitioners have a good understanding of child development, CE and its impact and can identify the need for and provide support at the earliest opportunity to prevent children	1. Frontline practitioners understand what factors impact the most on children being neglected in their family  2. Individual citizens and local communities can identify when they, or others, may need support to meet the needs of children	1. Data and information is openly and transparently shared to ensure that children are safeguarded and protected, and cross agency cooperation is promoted  2. Shared and consistent understanding and application of all levels of need to ensure the right child is in the right service at the right time	1. Children and families have the opportunity to be part of an Early Help Assessment and Team Around the Family (TAF) at the earliest point of need  2. Through Early Help Assessments, children and families identify what support will work best for them
being exploited  3. A range of practitioners, including health and education, provide timely, enduring and coordinated support to child victims of exploitation and their families	3. Practitioners identify the need for and provide support at the earliest opportunity to prevent children's health and development needs from escalating and becoming significantly impaired through neglect	3. Practitioners understand the profile of children who receive early help through to statutory safeguarding intervention	3. Services provide an individualised response to the child and family through the TAF
4. Perpetrators are disrupted and held to account for the harm caused/crimes committed	4. All professionals have a good understanding of child development and can identify the cumulative impact of the various forms of neglect on children's health and development	4. Pregnant women are routinely asked about whether they experience domestic abuse	4. Multi agency practitioners act as Lead Professionals and coordinate the involvement of the right people through the TAF
5. Safer spaces for children in the local communities	5. Practitioners adopt a relationship and strengths based approach that	5. Frontline practitioners have access to regular and reflective supervision	5. Early Help prevents an escalation to acute level of need that requires statutory intervention

to the constitution of the		
is trauma informed when working		
with children and their families		
6. A range of practitioners	6. Assessments routinely explore	6. Coordinated help is provided to
coordinate support from services	the impact of culture, ethnicity,	children and families who 'step
that work with parents/carers and	identify and family traditions, as	down' from statutory intervention
those that work with	well as structural inequalities, on	so that the child's and family's
children/families	parenting and outcomes for	needs continue to be met and
	children and young people	improve
	7. All agencies working with the	7. Children, parents/carers and
	child and family contribute to	families know how to access help
	CPCs/Child in Need meetings, child	and support in their local area
	protection and Child in Need plans	
	and core groups/child in need	
	reviews; core groups and child in	
	need reviews routinely take place	
	8. Child and family plans are simple,	8. Information is shared to identify
	family friendly and outcome	and support children and young
	focussed	people at risk of
		exploitation/serious youth violence
	9. Multi agency practitioners engage	9. Unmet need is identified and
	equally with both parents and other	addressed by commissioners/
	relevant adults, so that children are	services
	safely cared for in their family	Services
	wherever possible	
	10. Children and parents/carers	10. Practitioners use the pre birth
	report they have a positive and	period to identify need and provide
	enabling relationship with a lead	timely and coordinated support to
	professional	
	·	parents/families
	11. Children and parents/carers	
	report they know how to access	
	additional support for them/their	
	child and that when they do, it is a	
	straightforward process	

12. All services have in place an
appropriate organisational
safeguarding measure as required
by S11, S175/157, Working
Together 2018
13. Children and young people live
in a permanent, secure, loving and
caring alternative family if they
cannot remain with their own and
are supported to live independently
into adulthood
14. Children and young people are
supported to improve and maintain
good emotional health and
wellbeing
15. The health and education needs
of children looked after and care
leavers are identified and met
16. Practitioners are clear about
how to resolve professional
differences and report that there is
a culture of listening and shared
accountability that enables them to
work together to do so
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