



# **Quarterly Quality Assurance Report**

## **Quarter 3 2016/17 – September to December 2016**

Executive 1 March 2017  
Children, Young People and Schools Scrutiny Commission –  
28 March 2017

Lead director: Frances Craven

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**Useful information**

■ Ward(s) affected: All

■ Report authors: Caroline Tote and Chris Batty

■ Author contact details: Caroline Tote, Director Social Care and Early Help

Chris Batty, Performance and quality assurance advisor

## 1. Purpose of report

1.1 This report summarises the key findings arising out of the collation of Children's Social Care and Early Help quality assurance activity undertaken during Quarter 3 of 2016/17 (October to December 2016) along with an update on actions being taken and progress being achieved to address identified issues and targets. The Quality Assurance report draws upon 18 individual quality assurance activities or reports undertaken during the quarter. This is the sixth report of its kind, prepared by the performance and quality assurance advisor to the Children, Young People and Families Service, as part of the implementation of the Performance Management and Quality Assurance Framework. The report needs to be read alongside the monthly performance book and dashboard which outline and report on related performance monitoring and data.

## 2. Summary of the QA report and its findings

2.1 During this quarter there have not been any external monitoring or audit activity and the emphasis within the report is on learning from the council's own audit and monitoring activity regarding the quality of practice. The improvements reported in the last quarterly report have been maintained and in some cases built upon and overall there has been significant improvements in compliance with procedures and expectations over the last year. This has led to more robust assessments and processes for care planning and an overall improvement in the timeliness and effectiveness of practice.

2.2 Improvements identified by QA activity and performance monitoring include:

- Consolidation and impact of a management and change culture which has emphasised improvement, performance management, a focus on the child and an aspiration to provide high quality services and practice
- Consolidation of many aspects of compliance with statutory requirements, procedures and expectations, timeliness and processes.
- Significant improvements in the timescales for completing single assessments, Section 47 enquiries and holding initial case conferences within timescales
- Improvements in the frequency of seeing and speaking to children and young people and capturing the voice of the child and their lived experiences within assessments and planning meetings
- Although there is still work to do to improve the quality of assessments (see paragraph 3.4 of the main report) there has been a consolidation of the recent improvements to practice
- Improvements in the frequency and quality of case work and individual staff supervision
- Improved attendance and involvement of partner agencies in a range of key meetings

2.3 However the QA activity this quarter shows that there remains deficits in the quality of our care planning for children. It is recommended that the priority for the council is to improve the overall quality of care planning (CIN, Child Protection and LAC) and effectiveness of reviews by ensuring that:

- Plans are informed by up to date chronologies and assessments that capture the voice of the child and address their cultural and identity needs
- Invites to planning meetings are sent in good time and that families have an opportunity to read conference reports at least the day before the meeting

- Partner agencies contribute to assessments and plans and take responsibility for actions arising out of conferences and reviews.
- Pre-birth conferences are held within LSCB expected timescales with an emphasis on speeding up the time between referral and strategy meeting
- Management oversight of the assessments and preparation for meetings and the implementation of agreed actions is more consistent
- Monitoring and intervention by Independent Chairs and IROs continues to become more robust
- The work of the CSE Hub is closely monitored to ensure the required improvements to practice and planning for children at risk of CSE are put in place.

2.4 A range of targets were agreed by the Improvement Board following the Quarter 1 (2016/17) QA report and progress has been made on most of these as illustrated by the RAG rating in the grid below. Work still needs to be done to improve the timescales for pre-birth assessments and ensure that the improvements in the use of chronologies are consolidated and further improved. Although the increase in the proportion of good quality assessments and decline in the number of poor assessments reflects the current improvements in practice this is yet to run through as much into the quality of overall practice and care planning which are still more dependent on the legacy (and in some cases continuation) of previous poorer practice. Further work is needed to ensure an improved and consistent practice with planning for children in all categories – CIN, LAC and CP.

Quality Assurance Targets - 2016	% by 30 Sept		% by 31 Dec	
	Target	Actual	Target	Actual
% of Inadequate Assessments via Case file audits	≤20	15	<10	5
% of Good Assessments via Case file audits	20	32	30	37
% of Inadequate Care planning via Case file audits	20	6	10	30
% of Good Care Plans via Case file audits	20	5	30	3
% of Chronologies available on cases	45	58	85	79
% of Single Assessments within timescales	95	93	95	92
% of Section 47 enquiries within timescales	95	100	95	100
% of Single Assessments resulting in NFA	≤40	38	≤25	21
% of ICPCs held within 15 days of start of S47 enquiry	95	100	95	90
% of Initial Health Assessments completed within timescales		84	95	100

There are two components to the target relating to pre-birth assessments:

Quality Assurance Targets - 2016	% by 30 Sept		% by 31 Dec	
	Target	Actual	Target	Actual
% of pre-birth assessments within timescales	50		85	
% of pre-birth assessments/conferences within timescales set by strategy meeting		75		90
% of pre-birth assessments within LSCB timescales		8		18

### 3. Addressing Quarter 3 findings

3.1 A comprehensive revised 12 week plan is currently being implemented and is aimed at addressing areas for improvement identified in this report, previous audit activity and through Ofsted's monitoring of the council. The key aspects and sub plans can be summarised as follows:

- Ongoing quality assurance and improvement work
- Improvements to the quality of casework and practice through the Casework Improvement Board
- Improving pre-birth assessments and child protection planning
- The Permanency Planning Task & Finish Group is implementing an action plan to improve permanency and all aspects of LAC Planning

- Improved response to CSE and children missing through the CSE Hub

3.2 A range of quality assurance and improvement work is being carried out across the service:

- Benchmarking with other authorities in relation to our own self-evaluation as part of the preparation for a future Ofsted inspection
- Exploration and development of a new methodology of practice
- The central audit team to work alongside all teams by reviewing, discussing and agreeing activity of 2 cases for each social worker. To include an emphasis on improving the focus on the child, diversity and learning from chronologies and the input of other agencies
- Case auditing and observations of practice by managers
- Strengthening of the raising concerns process operated by IROs and Independent Chairs.
- Learning from SCRs and complaints
- Launch of a revised supervision tool in March 2017
- Review and consolidation of the operation and work of the Single Assessment Team

3.3 The case work improvement board is overseeing a range of initiatives including:

- Tighter monitoring, management sign off and quality assurance of assessments by managers within each service
- Workshops and sessions for relevant staff and managers on the quality of assessments and planning
- All initial child protection plans being overseen and signed off by the service manager
- Reinforcement of the need for parents to have sight of the plan prior to the conference

3.4 In terms of pre-birth work the following has been put in place:

- All pregnancies referred to or known to children's social care are now identified by DAS and allocated to a CIN social worker
- All pre-birth cases are tracked and monitored by an Advanced Practitioner who also meets with the Care Proceedings Case Progression Manager on a weekly basis
- All pre-birth cases proceeding to legal planning are monitored by the Case Progression Manager
- Clear focus on compliance with timescales for those requiring strategy meetings and initial conferences

3.5 The work to improve permanency and LAC planning includes:

- Ongoing work by the Edge of Care Board to identify and divert young people from the care system
- All new entrants to care must be agreed by a Head of Service and go through the access to resources panel (LARP)
- All section 20 cases who are 16 and under go through to the Legal Planning Meeting Panel
- Close monitoring and tracking of timescales following Legal Planning Meetings by the Care Proceedings Case Progression Manager who follows up any delays or gaps
- Monthly monitoring of performance and timescales of all cases pre and during proceedings using the Case Proceedings Datasheet. This data is already showing signs of improvements in timescales
- Close tracking of all cases where permanency plans are required is to be established
- A new Permanency Progression Panel has been established chaired by the Divisional Director
- All current LAC cases to be examined by Service Managers and IRO service
- An extraordinary LMP panel to be set up to consider all cases where SGO, revocation or placement with parents is being considered or in the plan.
- An evaluation of how well procedures relating to refreshing assessments is embedded across the LAC service
- Tracking of the preparation and use chronologies

- Compliance with case recording requirements across all service areas

3.6 A range of work is being undertaken in relation to CSE:

- Council staff are now fully engaged and integrated within the CSE Hub
- The working of the CSE Hub to be reviewed in March to assess progress and address issues
- Reviewing of the capacity of the Hub team to ensure the quality and timeliness of children missing (and return interviews), CSE episodes, intelligence and information sharing is at required levels
- The CSE performance dashboard is to be further refined and developed
- An evaluation of whether there is consistent use of CSE tools and indicators across practitioners and agencies

#### **4. Recommendation**

4.1 The Executive and Scrutiny Commission members are asked to note the findings and recommendations within the Quality Assurance report and the progress on actions being taken to further improve services.

#### **5. Supporting Information**

5.1 The full QA report entitled Leicester City Children's Performance Management and Quality Assurance Framework – Q3 Quarterly Quality Assurance report 2016/17 – October to December 2016 is attached.