

Has the Help Helped?

Camden Family Support & Complex Families Service
Quality Assurance Framework
(incorporating the Early Intervention and Prevention QA policy statement)

Last Review: November 2020

Next Review: November 2021

Review to be conducted by: Service Manager Early Help
and Community Practice

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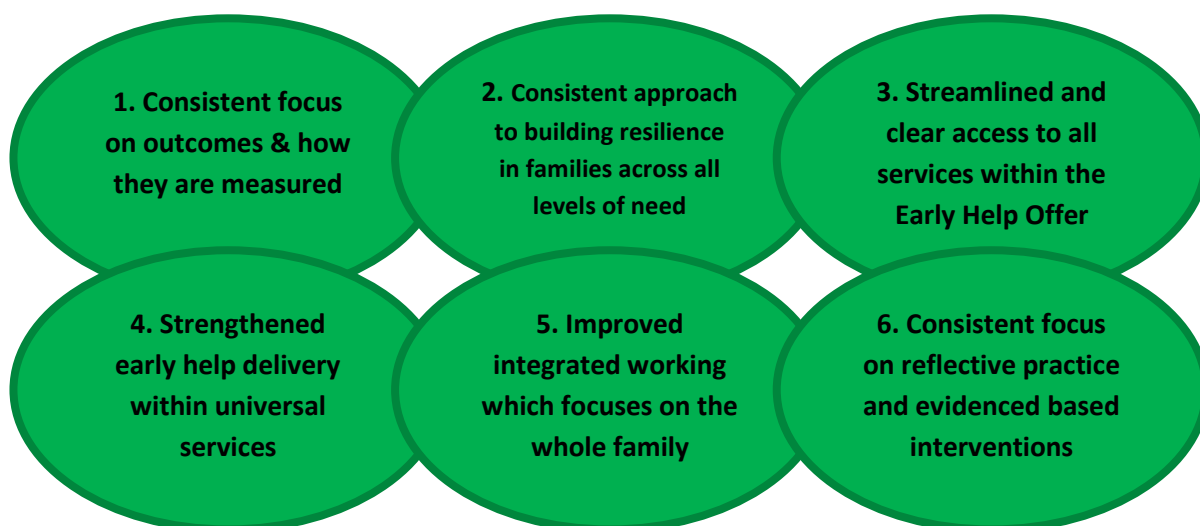
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Introduction

In line with Camden’s vision of a “place where everyone has a chance to succeed and nobody gets left behind” and guided by the Resilient Families Framework, Camden early help services identify children, young people and families requiring additional support at the earliest opportunity.

Early help staff hold the whole family in mind, using a partnership and strengths-based approach and evidenced-informed interventions to improve outcomes. Early help teams across services work to the same core principles, using the Resilient Families Framework as our foundation, providing the right help at the right time to prevent problems escalating and help families become more resilient.

The focus of this Quality Assurance policy statement is on the quality of practice in line with the six key principle of the Resilience Families programme:



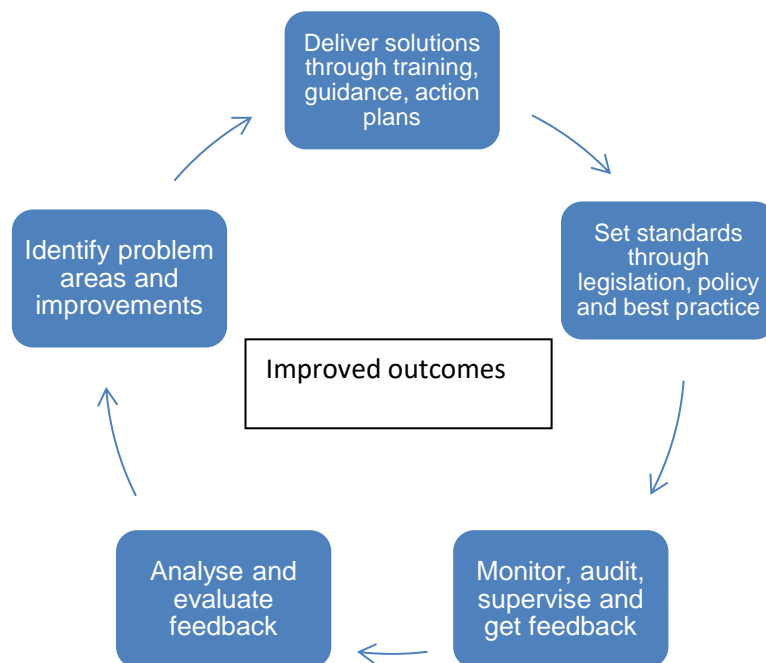
This policy statement also mirrors the QA policy in Children’s Safeguarding and Social Work service, to ensure a seamless approach across Camden’s services for children and families, and to ensure learning can be shared to improve our systemic practice wherever possible, regardless of discipline or profession.

Because Early Intervention and Prevention (EIP) is a diverse service group, with a range of connected but unique services and teams within it, each Head of Service will compliment this policy statement with QA tools and recording systems that are pertinent and relevant to that service. Every service group in EIP subscribes to the ethos of this policy statement. EIP will use its fortnightly managers meeting to share learning from QA processes, and identify where teams and services have strengths or areas for improvement in common.

1. Definition of quality assurance

Quality assurance is a dynamic process that sets standards, monitors achievements and uses information from this process to make improvements across the service that can translate into better outcomes for children and families.

A quality assurance framework sets out how this is achieved by providing a consistent set of standards against which service performance is measured. The information is then fed back into the system to produce a “virtuous cycle” of improvement.



Early help quality assurance achieves this through:

- Measuring and monitoring performance against required standards for individuals as well as service as a whole
- Identifies strength and shortfalls in practice at all levels
- Adopting a whole system approach, linking individual supervision training, planning to the findings of quality assurance activities
- Helping staff understand their quality assurance role and responsibilities, and that everyone has a role to play in improving quality

- Providing a feedback cycle that drives a learning culture where problem areas addressed openly and honestly.

2 Purpose of quality assurance

The early help quality assurance policy has been designed to ensure that information about service delivery, practice standards, outcomes and service user's experiences is collected at regular intervals by a wide variety of means. This information is then used to make improvements to practice and service delivery to ensure services can meet the needs of children, young people and families, are delivered in an efficient and effective manner, and enable staff to learn and develop.

The main outcomes of quality assurance are to enable managers and staff to:

- measure outcomes and consider whether the Service actively “makes a difference” to children, young people and families lives
- understand and quantify the impact of our Resilient Families systemic approach on children and families
- set appropriate standards and benchmarks and model excellence
- recognise the strengths and weaknesses in service provision and identify actions to develop and improve services
- reflect critically on the quality of work practice and services
- encourage and inform debate, discussion and challenge so the division can address issues, find solutions and ultimately improve services and outcomes
- become a learning organisation where staff are aware of expectations and feel supported to work to a high standard of practice
- provide ownership for standards and a shared common purpose so that all staff know what is expected of them and can take responsibility.

3 Standards we work to

- Legislation and guidance such as the Children Act 2004 and Crime and Disorder Act, the Equality Act etc. provide the framework for Camden's powers and duties relating to children and families and that set out important procedural processes and timescales.
- Ofsted publication – 'Early help, whose responsibility' provide guidance on standards of practice and best practice evidence and findings from research that inform Early help services work practice.
- National Occupational Standard (NOS) for Children and young people's workforce and NOS for work with parent that set out professional standards of practice for work with children and families.
- Camden's corporate standards of behaviour for council staff and service delivery.
- Ofsted inspection frameworks that contain evaluation statements for children's services.

Camden's own standards for children and families services are:

- The welfare of the child is paramount, and the child will be central to all our activity
- We will work in partnership with parents to support them in caring for their child at home where this is consistent with the child's welfare
- We will work to the legislative framework using evidence of best practice and current research to inform our decision-making
- Decisions on interventions will be proportionate and timely, and informed by high quality assessments based on the most up to date research available
- We will work with families in a respectful and non-judgemental way and will empower families to find their own solutions to difficulties
- We will remain professionally curious at all times, keeping an open mind and constantly reviewing our professional judgements

- We will ensure our professional knowledge and skills are continually developed and that we keep up to date with new research, using all available resources and taking opportunities to reflect critically on our practice so that there is a culture of learning in all EH services
- We will work closely with the professional network to ensure good information sharing and a high quality of multi-agency working that can deliver integrated services
- When working with service users we will promote equality and embrace diversity and ensure that all service users have equal access to services and do not experience discrimination or inequality

4 How we quality assure

Every EIP service will consider:

- **Feedback and comments from children and families** about their journey with us, what they found helpful and what could have been better
- **Service specifics:** information from teams around workloads, staffing levels and how teams are coping, including any external pressures on the service and how these may be affecting standards of practice and levels of efficiency
- **Early help processes:** information on key work tasks such as assessment, timescales and caseloads and review, and other processes relevant to individual services and teams, to find out how efficiently we carry out these processes and whether we need to change our procedures to improve the way we work
- **vulnerable children:** information on groups (for example repeat young offenders) so that we are aware of how and why they are vulnerable, what we can do to reduce their vulnerability and how we can improve outcomes for them;
- **specific risks and issues:** information on issues impacting on children's welfare such as parental mental ill health, parental substance misuse and domestic violence, so that we have an understanding of how it affects children's welfare, how prevalent the risk is in the borough and how we can reduce associated risks
- **partnership working:** information on how we work with other agencies, including feedback from partners, and how we can improve multi-agency working and joint agency responses

- **staff and the working environment;** information that allows us to plan for the development of the workforce and ensure we can provide a safe working environment and a high quality service that keeps children safe
- **outcomes;** information on how we are making a difference to children's lives, including direct feedback from service users
- **specific feedback and QA pertinent to each service group** in Early Intervention and Prevention

4.1 What we measure

The following are all sources of information about standards of practice and service delivery and outcomes for children:

- Mosaic ***management information reports and performance and impact indicators*** that give quantitative information about levels of activity and whether key standards are being met, for example, timescales
- ***case practice audits*** looking at the quality of work practice and outcomes
- ***Practice observations*** that allows supervisors to observe work practice
- **Reflective practice** group supervision and 'thinking together' sessions
- ***service user surveys*** gathered information on their experiences of working with EARLY HELP and their views on the standard of service provided
- ***user voice via consultation forms*** to obtain children's feelings and wishes and ensure services remain child-focussed
- information about ***complaints*** and their outcome
- information from ***supervision*** on quality of decision-making and case management, reflective practices and staff and service development
- feedback on ***quality of training*** provided and its impact on practice

- outcomes of ***multi-agency case audits and serious case reviews***
- information from ***staff surveys***
- feedback from ***inspection reports***.

4.2 When we measure

Quality assurance information is collected and reported at various intervals. This allows us to build up a “snap-shot” picture of activity within the division as well as longer-term picture that enables us to spot trends and emerging issues. Data collection is linked to specific management needs so reporting will take place at the following frequencies:

- Weekly **reviews of timescale compliance, caseloads and data quality**
- Monthly ***management information reports for team or service area activity*** and headline performance indicators
- monthly programme of ***peer audits of cases*** carried out between teams within each early help service
- Regular review of casefile recording compliance carried out at assessment completion, each review and closure, undertaken by the worker and supervisor
- A bi annual programme of ***qualitative, themed case audits*** carried out across teams in early help with support from early help practice leads
- A bi-annual programme of ***multi-agency audits*** carried out by the Children’s Trust Partnership Board
- Monthly ***management information reports to Senior Management Team*** on service activity and trends, provided by the early help insight data team and early help practice leads
- ***Annual service reports*** from each service area setting out headline achievements for that year, service pressures and planned service development activity for the coming year to feed into the divisional service development planning process

- **Reports** to the Children’s Trust Partnership Board and Camden Safeguarding Children Board.

4.3 Reporting and analysing information

All the information captured on Mosaic is reported and analysed by managers in order to make improvements to services, address difficulties or challenge poor standards of practice.

Reporting and analysis take place at every level within the division so that issues are dealt with at the most appropriate level for action to be taken and escalated where required. Discussion takes place within a variety of forums so that the issues are fully considered, and all staff have an opportunity to contribute.

- **At individual level**, frontline staff are responsible for regularly considering their own practice and taking every opportunity to reflect and build on their practice
- **At Team level**, Team Managers are responsible for checking the performance of their service area and discussing this in team meetings
- **At Service level**, Service Managers are responsible for addressing quality assurance issues that are relevant to their service
- **At divisional level**, the Senior Management Team considers performance issues affecting the whole division using information and reports on divisional performance

Informal reporting should be used to address issues at an early stage and should involve early contact between workers and their supervisors. Informal reporting will be used to raise concerns about emerging problems or issues on cases in the first instance where there is no need to use more formal processes.

Formal reporting involves the production of formal reports and plans that are presented to specific groups or forums, for example SMT meetings, extended management meetings, councillors or the Safeguarding Children Board.

Monthly and quarterly report are produced for SMT setting out how EH services are meeting their respective service objectives.

These reports are normally produced annually and set out how the division has met its duties during the year and how services and performance will be improved in the year to come. These documents are often produced as part of the service planning process.

4.4 Taking action

Camden early help has an expectation of high standards of work practice and service delivery and poor practice that fails to meet requirements or meet the needs of service users will be challenged and action taken to address the issues.

Where quality assurance activity such as audits show evidence of any such failure there must be an action plan put in place that will lead to improvements in practice and service delivery.

Action under Camden's corporate procedures may be carried out by Managers in relation to staffing issues such as capabilities or disciplinary action.

An action plan may be drawn up by teams, practice leads or by SMT that sets out targets to be met, actions to achieve these targets and timescales, together with the workers involved

All actions taken under the quality assurance framework will be regularly reviewed to ensure any recommendations or actions are being implemented and that the desired outcomes are being achieved.

5 Who does what?

The quality framework supports the structure of accountability and decision-making in Camden, with oversight of quality assurance structures and processes by senior Managers and escalation policies for dealing with issues at the most appropriate level.

Quality assurance is everybody's responsibility, and everyone has a role to play in ensuring their own contribution to high standards of practice and service delivery.

- Frontline workers should;
 - work to the standards set out in the division's performance development objectives
 - quality assure their own work
 - use supervision sessions to reflect critically on practice
 - take up all opportunities to enhance their learning and development.

- Team Managers and supervisors should;
 - work to the standards set out in the division's performance development objectives for Managers
 - continually monitor team performance through performance indicators
 - check the quality of case recording and assessment through audits
 - monitor individual workers performance and learning through supervision

- deal effectively with complaints
 - give consideration to their team's learning and developmental objectives
 - report progress to and raise issues with the Service Manager on a regular basis
 - act on feedback from service users.
- Service Managers should;
 - work to the standards set out in the division's performance development objectives
 - monitor their service area performance through performance indicators
 - oversee the team Managers' quality assurance role
 - check the quality of case work and case decision making through audit
 - monitor the frequency and quality of supervision
 - have an overview of quality assurance in their service area including setting standards, ensuring resources and approving action to improve standards of practice and service.
- Heads of Service should:
 - work to the standards set out in the division's performance development objectives for Principal Officers
 - monitor their service area performance through performance indicators
 - oversee the team managers' quality assurance role
 - check the quality of case work and case decision making through audit
 - monitor the frequency and quality of supervision
 - have an overview of quality assurance in the division via SMT, including setting standards, ensuring resources and approving action to improve standards of practice and service
- Practice Leads
 - work to the standards set out in the division's performance development objectives for Practice Leads
 - ensure early help professional practice excellence through the provision of professional supervision and guidance, audit, quality assurance processes and casework monitoring, consultation, policy and workforce practice development in accordance with Directorate policy, statutory responsibilities, national directives, guidance and risk assessment
 - provide impartial and objective support and challenge to line managers, team managers and service managers to ensure practice excellence in their teams and services
 - responsible for developing and ensuring compliance with consistent and shared policy, procedures and ways of working across the directorate (e.g.

- quality assurance, auditing, measuring impact, compliance with local and national standards)
- embed the Resilient Framework Practice Training which underpins the whole family approach, across the Early Help workforce, providing opportunities for ongoing learning and professional development.

6 Auditing Framework

Early help uses a number of different methods in order to gain an extensive insight into different aspects of case management and outcomes and from differing perspectives. Management colleagues (peer audits) or a management colleague from another service may carry out audits or observations or moderation.

Case auditing is a key quality assurance mechanism as it is the main method for gathering direct evidence and information on the quality of work practice, decision making and interaction with children, families and the professional network.

Audits may be themed and designed to look at a wide range of issues such as compliance with guidance and policy frameworks, inter-agency working or the effectiveness of early help work/flow systems. Some audits may be more specialist such as audits of supervision practice.

All auditing activity will involve the auditor making a professional judgement on whether case records provide enough evidence of the work carried out and the quality of that work. Audit findings are reported back to Audit Reflection Group who will devise an action plan based on the findings, presented to the EIP SMT.

The framework for auditing in the EIP division can be found at appendix 1.

An **annual report** giving an overview of the QA carried out will be prepared by the EIP Practice Leads and presented to the Senior Management Team.

7 Supervision and performance development

Supervision and performance development are both mechanisms for monitoring work practice and both play a central role in assuring quality of individual staff performance and contributing to improving service delivery and development.

- Supervision is the mechanism for assessing the standards of practice of individual workers and identifying and addressing gaps in their professional knowledge and skills.
- Performance development links in with the overall service planning for the division and the early help work professional capabilities by focussing on the individual workers performance over the previous year and setting goals for the coming year, with individual and team plans contributing to the final divisional plan

All early help performance development records are based around the children and family work professional capabilities framework which has been mapped against the Camden ways of working so that it is possible to show evidence that the workers performance meets professional and corporate standards.

Supervision is the forum for case discussion and provides workers with an opportunity to reflect critically on their practice, whilst allowing supervisors to take stock of case progression and assess worker performance. This forum also allows for, case direction, consideration of risk, timescales for actions and follow up on performance. Early Help utilizes the **Helping Process of Supervision**. This is an essential part of the Resilient Families Framework adopted by early help. It is used to guide supervisors and supervisees through their supervision work. This framework helps ensure both parties contribute to discussions and expertise is shared.

Modelling the framework in supervision also provides an opportunity for supervisees to gain direct experience of the approach they are expected to use in their work with families. (Refer to Early Help supervision policy) The early help supervision policy sets out the framework for supervision and it is an expectation that supervision takes place at the following frequencies:

- One to one supervision with the designated supervisor must take place **at every 4-6 weeks** for all workers. However, the parties may agree to more frequent supervision where there is a clear need for this.
- Under Camden's **probation policy**, new workers must receive supervision on **a weekly basis for the first 4-6 weeks**.

The early help workforce are encouraged to make use of the "think together" opportunities to discuss cases with colleagues as and when required in order to find a solution to complex issues for example.

In addition, group and clinical supervision opportunities are available to early help workers to creatively think about cases with others.

Performance development for all staff should take place periodically with a subsequent review of the workers caseload and learning and development.

8 Training and development

Training is the method by which the division ensures high standards of practice and professional knowledge and the continuous improvement of services. Training is one of the key mechanisms for supporting staff in their role by enabling their professional development and allowing them to maintain high quality practice.

Supervision is the forum for discussion on workers learning and development needs, allowing Managers to assess individual workers training needs and development of their learning and development plan.

All Managers have a key role in identifying the training needs of their staff to identify suitable training in response to emerging issues and trends affecting the division.

It is an expectation that:

- all staff have a learning and development plan in place that is agreed during performance review meetings
- training addresses identified needs and enables the staff member to meet their performance development objectives, meets the needs of the service and allows the staff member to meet professional capabilities
- staff and supervisors regularly address training and development needs within supervision and continually update the learning and development plan
- staff attend any planned training and Managers enable them to do so in order that they have the knowledge and skills to fulfil their duties

9 Equality impact assessments

As a council, Camden has a duty under the Equality Act 2010 (known as the Public Sector Equality Duty) which means the council must have due regard to the following when developing policy or service development and making decisions with regard to the implementation of this or carrying out its legal duties:

- eliminating discrimination, harassment, victimisation or any other conduct prohibited by the Act
- advancing equality of opportunity
- fostering good relations.

The duty covers any form of discrimination based on the following characteristics (known as protected groups):

- age
- disability
- gender reassignment
- pregnancy and maternity
- race
- religion or belief
- sex and sexual orientation.

To ensure the duty is implemented, the council uses an equality impact assessment (EIA) to look at how any changes in policy or service delivery may impact on protected groups prior to implementation of the changes.

It is corporate policy that that individual service areas, through the service manager or responsible Principal Officer, carries out an EIA whenever changes to policy, service structure or delivery are proposed as a result of quality assurance activity.

Details of how to carry out the assessment are available at the link below. The Policy, Participation and Staff Development manager based in the Quality Assurance Unit can also advise on whether an assessment needs to be carried out and how to carry out the assessment.

[Camden Essentials: Equality impact assessments \(EIAs\)](#)

APPENDIX 1

FSCF Quality Assurance Schedule

QA method	Purpose	Frequency
Timescales compliance monitoring	<ul style="list-style-type: none"> To understand and monitor whether work is being delivered in a timely manner and swiftly correct issues 	Weekly Collated by data team and reviewed by Service Managers
Caseload and allocations monitoring	<ul style="list-style-type: none"> To understand overall caseloads being managed by workers and ensure manageable caseload sizes that allow for quality direct work that is relational and helpful 	Weekly Collated by data team and reviewed by Service Managers
Data quality monitoring	<ul style="list-style-type: none"> To ensure data input to the Mosaic system is accurate so that performance reports are robust and trustworthy 	Weekly Collated by data team and reviewed by Service Managers
RFP Audits	<ul style="list-style-type: none"> To deep dive cases to understand whether RFP principles learned during training are being applied to practice To evidence that RFP practice is having a positive impact for children and families To assess whether the helping process helped To identify areas of practice strength and areas to improve which can be shared and learned across all EIP services 	Bi-Monthly Selected at random by data team and Practice Leads <ul style="list-style-type: none"> Undertaken by Team Managers, Service Managers and Head of Service Minimum of 1 deep audit per supervisor in each team To include worker's own reflections on their practice
Step Up and Down Audits	<ul style="list-style-type: none"> To assess the decision making in relation to step downs and step ups between Early Help and Social Work To assess the implementation and effectiveness of our policy, procedures and guidance 	Monthly Includes all Step Ups and downs from the previous month <ul style="list-style-type: none"> Undertaken by Services Managers

QA method	Purpose	Frequency
	<ul style="list-style-type: none"> To evaluate the quality and impact of FSCF interventions in relation to step ups To identify areas of practice strength and areas to improve which can be shared and learned across all EIP services 	
Returning Cases Audits	<ul style="list-style-type: none"> To look at the factors which has led a family to return into the system To evaluate the quality and impact of FSCF interventions previously offered To identify areas of practice strength and areas to improve which can be shared and learned across all EIP services 	Monthly Includes all returning families from the previous month <ul style="list-style-type: none"> Undertaken by Services Managers
Multi-Agency Audits (including CSCP and EH/CSSW)	<ul style="list-style-type: none"> To explore a practice area or theme in order to use the learning from different services and perspectives to identify opportunities for learning and practice improvement 	Minimum 6 Monthly <ul style="list-style-type: none"> Undertaken by Head of Service, Service Managers, Team Managers & Practice Leads
Performance and impact reporting	<ul style="list-style-type: none"> To understand the overall impact of EIP services 	Monthly Collated by data team, reviewed by EIP SMT and managers group
Practice Mirror group	<ul style="list-style-type: none"> To enable consistent high-quality practice across early help services by sharing findings from QA activity, and identifying opportunities for learning and practice improvement 	Bi-Monthly To be chaired in rotation by Practice Lead: <ul style="list-style-type: none"> Membership includes Head of Service, Service Managers & Team Managers
Quality and Challenge Panel	<ul style="list-style-type: none"> To enable consistent high-quality practice across early help services by sharing findings from QA activity, and identifying opportunities for learning and practice improvement 	Monthly Chair by the Director of EIP <ul style="list-style-type: none"> Membership includes Head of Services across EIP, Service Managers across EIP & Practice and Data Leads
Practice observations (peer or supervisor)	<ul style="list-style-type: none"> To understand whether RFP principles learned during training are being applied to practice 	Every 3 months

QA method	Purpose	Frequency
NEW FOR 2021/22 (implementation plan to follow)	<ul style="list-style-type: none"> To evidence that RFP practice is having a positive impact for children and families To identify areas of practice strength and areas to improve which can be shared and learned across all EIP services 	Undertaken by Service Managers and Team Managers (and peers) 1 practice observation per supervisor
Recording Compliance Monitoring NEW FOR 2021 (implementation plan to follow)	<ul style="list-style-type: none"> To understand if casefile recording is being undertaken in a satisfactory and timely manner 	For each case at assessment completion, review and closure Completed by the worker and supervisor and reviewed at supervision
Supervision feedback from Workers NEW FOR 2021 (implementation plan to follow)	<ul style="list-style-type: none"> To understand if the supervisor role is helping workers through direct feedback from supervision recipients To understand if supervisory practice is being delivered in accordance with RFP systemic principles 	Bi-Monthly Collated by Practice Leads and presented to SMT

Appendix 2: FSCF Practice Audit Template

<https://ascpractice.camden.gov.uk/media/2056/rfp-practice-audit-template-july-2017-b.docx>

Appendix 3: FSCF Auditors Guide

<https://ascpractice.camden.gov.uk/media/2055/rfp-auditors-guide-july-2017.pdf>