



# How well are children and young people protected and their needs met?

Self-evaluation using quality indicators

# **HOW WELL ARE CHILDREN AND YOUNG PEOPLE PROTECTED AND THEIR NEEDS MET?**

Self-evaluation using quality indicators





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## Foreword

This document is designed to help to evaluate the quality of services to protect children and young people in Scotland. It outlines an approach to self-evaluation which can be used by senior managers, operational managers or practitioners who work directly with children, young people and families. It builds on ongoing work across all sectors to evaluate services and plan for improvement. At the heart of the document is a set of quality indicators, which will help professionals identify the strengths in their practice and where further development is required. The same set of quality indicators is used by inspectors in external evaluation of services thus developing a partnership approach to internal and external evaluation of services.

The structures, systems and local priorities of services for protecting children and young people across Scotland vary and are likely to change and evolve over time. These materials can be used flexibly in the context of the local situation in a way that ensures that key issues will be addressed. The approach to self-evaluation is generic enough to be used in, or customised to, different situations and across agencies.

Following the national audit and review of child protection and the publication of *It's Everyone's Job to Make Sure I'm Alright* (Scottish Executive 2002), the child protection reform programme was established. *Protecting Children and Young People: The Framework for Standards* (Scottish Executive, 2004) set out the commitment of the Scottish Executive to ensure improvement in services to protect children and young people. The *Children's Charter* (Scottish Executive, 2004) identified what children and young people thought services should do for them when they need help. It included a pledge to children and young people which described what professionals would do to help them.

These quality indicators, in line with the approach taken in the *Framework for Standards* and the *Children's Charter*, focus on evaluating the help children, young people and their families get and the impact services have on the lives of children, young people and their families, irrespective of who is delivering the service.

The quality indicators have also been developed within an overall structure for quality assurance. This overall structure is still being developed to provide coherence to the range of quality models used by different public services in any sector. The structure encourages those providing services to consider the quality of their work in relation to six key areas as follows:

- the key performance outcomes achieved;
- the impact of services on meeting the needs of stakeholders;
- the effectiveness of the delivery of key processes;
- the effectiveness of operational management;
- the effectiveness of strategic management; and
- capacity for improvement.

Using a common set of quality indicators for self-evaluation and inspection helps to provide a common language and agenda for all involved in the evaluation process and makes the inspection process more transparent. It facilitates an open dialogue about evaluations and promotes consistency across different areas and different evaluators.



## Introduction

The aim of this publication is to improve the help children and young people get when they need it by helping us to evaluate the work we do with children, young people and families. Self-evaluation helps us to:

- recognise the work we are doing which has a very positive impact on the lives of children, young people and families;
- identify levels of service which need to be maintained or where improvement is needed;
- identify what we can do to make things better for children, young people and families; and
- inform stakeholders about the quality of services in the area.

The process of using self-evaluation for improvement requires a cycle of activity based round three questions.

### How are we doing?

This is the key to knowing if we are doing the right things and that, as a result, the children and young people we are responsible for are safer and their lives are better.

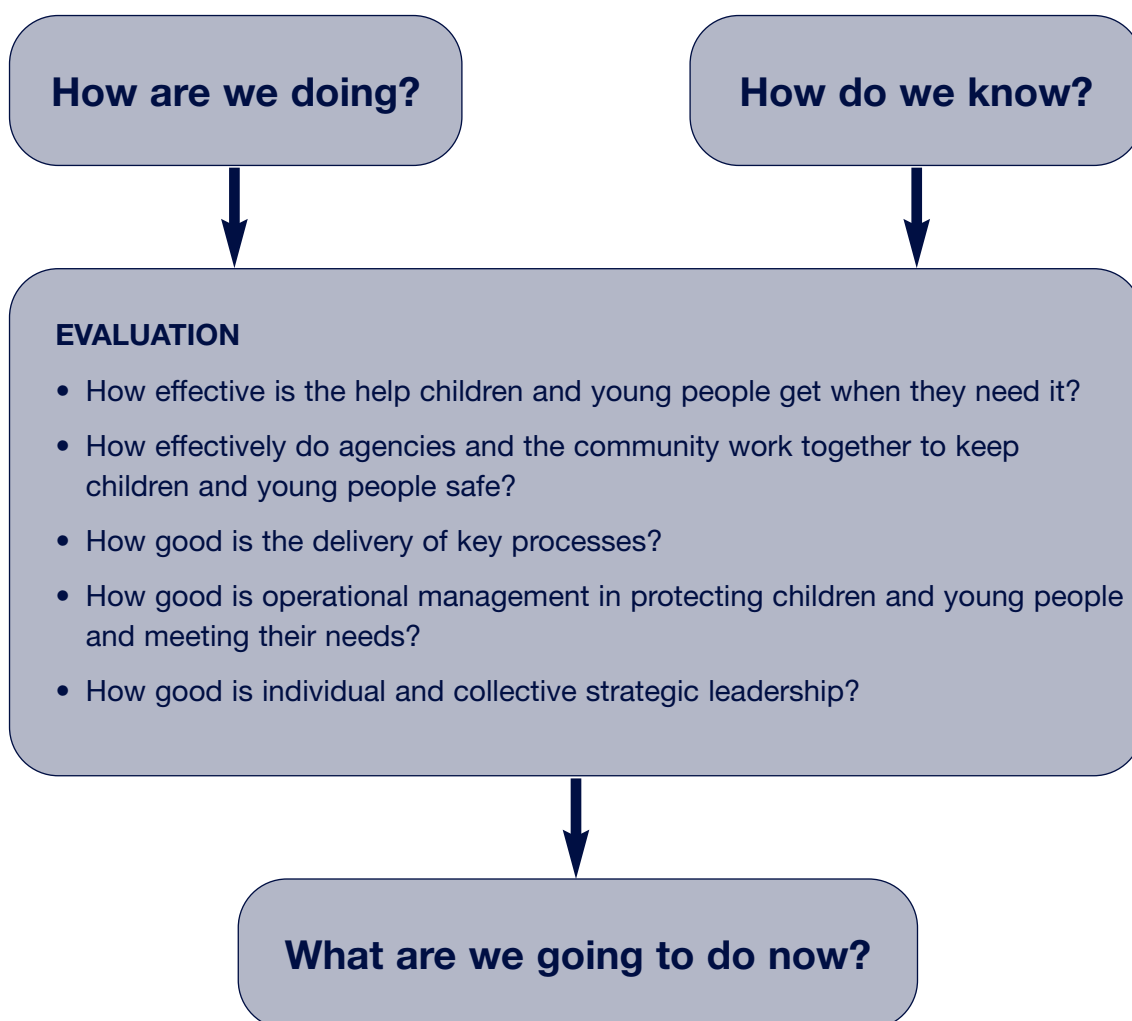
### How do we know?

It is essential that any judgements we make in answering the question above are based on evidence. The quality indicators in this document, along with surveys and other sources of stakeholders' views, help us to evaluate how we are doing. We can also use performance data collected nationally or within a local area or service.

### What are we going to do now?

The evaluation of the effectiveness of the work we do to protect children and young people and meet their needs should help us see what is working well and where we should be taking steps to improve. We should be able to develop effective plans for improvement based on robust evidence of what works well, from our own self-evaluation and, when appropriate, from research.

This self-evaluation guide gives advice on finding out the answers to these questions, and links self-evaluation to planning for improvement and reporting on our performance. The diagram overleaf sets out the process for self-evaluation and improvement and places questions about protecting children and young people at the heart of the process.



This publication is in four parts.

*Part 1* provides a step-by-step approach to self-evaluation based on the cycle of questions above.

*Part 2* contains the quality indicators.

*Part 3* provides examples of how the indicators can be used in a range of settings to evaluate how well children and young people are protected and their needs met.

*Part 4* gives information about other sources of advice, such as related Standards and Performance Indicators.





# Part 1

What is Self-Evaluation?



## What is Self-Evaluation?

### How are we doing?

Self-evaluation and external inspection of services to protect children will focus on the experiences of children and young people and their families and the impact services have on their lives.

In order to know how well we are doing, we need to know:

#### ***How well are children and young people protected and their needs met?***

To answer this overarching question and have a full understanding of the impact of services to protect children and young people, we need to gather information to answer the following key questions:

- **How effective is the help children and young people get when they need it?**
- **How effectively do agencies and the community work together to keep children and young people safe?**
- **How good is the delivery of key processes?**
- **How good is operational management in protecting children and young people and meeting their needs?**
- **How good is individual and collective strategic leadership?**

Professionals have always reflected on the quality of the services they provide. By working together to evaluate the impact of their services on children, young people and families, professionals can come to a shared view of how well they are doing and how they can make things better.

Making such evaluations is dependent on a shared understanding within and across service providers and stakeholders of what constitutes high quality processes and outcomes. The quality indicators in this document set out to support the development of a shared understanding for all those concerned with delivering or evaluating services to protect children and young people. The indicators are organised round the key questions above and taken together answer the overarching question, *How well are children and young people protected and their needs met?* Answering this question requires us to summarise the impact of services on children, young people and families and the quality of outcomes for them. To ensure services are maintained and improved, we also need to evaluate the effectiveness of how services are delivered and managed and the effectiveness of planning for improvement.

However, it is not always helpful or manageable to try to evaluate every aspect of practice in depth at the same time. We can answer *How are we doing?* by asking questions we choose such as:

- How well are we protecting children and young people in this neighbourhood?
- How effective are the team of professionals working together to support this family?
- How are we doing in this children and families team or in this general practice?

We could also focus on specific themes by asking such questions as:

- How well do we consult with children and young people and take account of their views in the area covered by this Child Protection Committee (CPC)?
- How effectively do professionals in this area work together to assess risk when working with vulnerable children, young people and families?

By encouraging professionals to structure their discussion and reflection on the work they are doing, the quality indicator framework can support improvement at the level of individuals and very small teams as well as at a range of operational and managerial levels.

### **Self-evaluation involves:**

- **a broad view** of performance across the key questions and a range of professionals; and
- **a closer look** at particular aspects of work.

Practitioners within a particular service or in multi-disciplinary groups such as the local CPC can form *a broad view* by scanning across all the quality indicators. Using evidence which has been gathered in the normal course of work, they can identify broad strengths and weaknesses. This will give an immediate impression of areas of major strength, or areas where more improvement is required.

In order to have a greater understanding of the effectiveness of particular aspects of practice, managers and practitioners can also *take a closer look* at aspects of the service. The stimulus to take a closer look could derive from a range of issues. The following are some examples:

- The wish of a small group of practitioners to find ways to evaluate and improve what they are doing;
- An issue identified during the broad view;
- An issue arising from a national priority or a local improvement objective;
- An issue arising from a survey of the views of children, young people and families in an area;



- A “near miss” when a child or young person has been found to have been left at risk in spite of the involvement of services;
- An inspection or inquiry; and
- Research findings which have implications for quality of the service.

### **Links between self-evaluation and inspection**

It is always useful to have an external measure of how we are doing. HMIE, while carrying out school inspections, evaluates the quality of care and protection within schools. The Care Commission inspects a range of services for children, including residential care, early education and childcare. Within these inspections the Care Standard related to Child Protection is considered. Information from these inspections can form part of the evidence for local self-evaluation. The Services for Children Unit (SFCU) within HMIE has a responsibility to evaluate how well children and young people are protected and their needs met across all areas of Scotland. Inspection by HMIE (SFCU) covers the same ground as local self-evaluation. Inspectors will gather evidence, make evaluations using the quality indicators and answer the key questions outlined above. They will write a report which will address the questions outlined, based on evaluations of what they see and summarise the key strengths and areas requiring further development in an area. Any self-evaluation which has recently been carried out locally will contribute to the inspection process.

## How do we know?

We have a number of sources of evidence which can tell us how well we are protecting children and young people and meeting their needs, or to answer questions we choose as a starting point for self-evaluation.

## Performance outcomes

We can see how we are doing by comparing our effectiveness with the vision, values and aims expressed through the Integrated Children's Services Plan and objectives set out in the plan. In addition, the CPC will have a set of objectives for improving and maintaining the standards of service they wish children, young people and families to experience in their area. Individual service development or improvement plans such as the local health improvement plan, the council's community plan and the local policing plan may also refer to specific objectives related to protecting children and young people.

Some of these objectives may include such things as:

- ensuring all referrals related to children and young people who may need protection have been the subject of interagency discussion within a given time frame;
- reducing the time taken for reports to be completed for Child Protection Case Conferences;
- reducing the time taken for new referrals to children and families services to be allocated a social worker; or
- ensuring that the views of children and young people are recorded before any decisions are made about them.

Information on progress towards objectives such as these can be collated as part of the self-evaluation process and will give a clear indication of progress being made. Any difficulties in achieving targets set can be followed up by *taking a closer look* to find out what the barriers to achieving the objectives are.

Other objectives will refer to improving the quality of the services and will not lend themselves easily to the collation of performance data. The quality indicators will help us evaluate progress in these areas.

## Information gathered from stakeholders

This would be information primarily gathered from children, young people and their families along with any safe-guarders or advocates on behalf of children and young people. It may also include information from surveys of the general public or voluntary organisations working in the area.



Information can be collected systematically when children, young people and families are using a service, or when they end their involvement with a service. We may also, from time to time, specifically survey service users or meet groups of service users to find out their views.

Whatever approach we decide to use, gathering information from users is an essential part of the self-evaluation process. Without it, it is very difficult to understand the impact of our work on children, young people and families and to know if we are doing the right things. It is almost impossible to answer the key questions effectively without including the views of service users.

## Using the quality indicators in Part 2

Quality indicators help us evaluate the quality of service experienced by children, young people and their families in our area.

The *Framework for Standards* and the *Children's Charter* describe the expectations of the service each child or young person should receive and the practice and processes required to meet those expectations. The quality indicators will provide valuable tools in deciding whether these expectations are being met.

The quality indicators are organised around the set of key questions:

- How effective is the help children and young people get when they need it?
- How effectively do agencies and the community work together to keep children and young people safe?
- How good is the delivery of key processes?
- How good is operational management in protecting children and young people and meeting their needs?
- How good is individual and collective strategic leadership?

Each quality indicator contains illustrations which describe practice which is *very good* and practice which is *weak*. The *very good* illustrations are largely based on the advice in the *Framework for Standards*. Illustrations are intended to provide examples, not to be fully comprehensive. The illustrations help us make a judgement about the strengths and weaknesses in that aspect of practice. The process of discussing our practice and relating it to the illustrations is key when using the indicators for self-evaluation. Identifying and describing the strengths and weaknesses will help us focus on what we need to do.

The indicators can also be used to help us to form a view on the level of effectiveness in a particular aspect of practice. During inspection, HMIE (SFCU) evaluate quality indicators against six levels of effectiveness. Awarding levels is a professional skill rather than a technical process and there are many ways in which provision can merit a particular evaluation. However, the following describe key characteristics at each of six levels.

## Excellent

An evaluation of *excellent* will apply to performance which is a model of its type. The outcomes for children, young people and their families along with their experience of services will be of a very high quality. An evaluation of *excellent* will represent an outstanding standard of performance, which will exemplify very best practice and will be worth disseminating beyond the service or area. It will imply these very high levels of performance are sustainable and will be maintained.

## Very Good

An evaluation of *very good* will apply to performance characterised by major strengths. There will be very few areas for improvement and any that do exist will not significantly diminish the experience of children, young people and their families. While an evaluation of *very good* will represent a high standard of performance, it is a standard that should be achievable by all. It will imply that it is fully appropriate to continue the delivery of service without significant adjustment. However, there will be an expectation that professionals will take opportunities to improve and strive to raise performance to excellent.

## Good

An evaluation of *good* will apply to performance characterised by important strengths, which taken together clearly outweigh any areas for improvement. An evaluation of *good* will represent a standard of performance in which the strengths have a significant positive impact. However, the quality of outcomes and experiences of children, young people and their families will be diminished in some way by aspects where improvement is required. It will imply that the services should seek to improve further the areas of important strength, but take action to address the areas for improvement.

## Adequate

An evaluation of *adequate* will apply to performance characterised by strengths, which just outweigh weaknesses. An evaluation of *adequate* will indicate that children, young people and their families have access to a basic level of service. It represents a standard where the strengths have a positive impact on the experiences of children, young people and their families. However, while the weaknesses will not be important enough to have a substantially adverse impact, they will constrain the overall quality of outcomes and experiences. It will imply that professionals should take action to address areas of weakness while building on its strengths.

## Weak

An evaluation of *weak* will apply to performance, which has some strengths, but where there will be important weaknesses. In general, an evaluation of *weak* may be arrived at in a number of circumstances. While there may be some strengths, the important weaknesses, either individually or collectively, are sufficient to diminish the experiences of children young people and their families in substantial ways. It may imply that some children and young people may be left at risk or their needs not met unless action is taken. It will imply the need for structured and planned action on the part of the agencies involved.



## Unsatisfactory

An evaluation of *unsatisfactory* will apply when there are major weaknesses in performance in critical aspects requiring immediate remedial action. The outcomes and experiences of children, young people and their families will be at risk in significant respects. In almost all cases, professionals responsible for provision evaluated as unsatisfactory will require support from senior managers in planning and carrying out the necessary actions to effect improvement. This may involve working alongside other staff or agencies. Urgent action will be required to ensure that children and young people are protected and their needs met.

The illustrations provided in the indicators describe two of these levels, namely, *very good* and *weak*. We can identify whether our practice fits best with one of these levels. If it has several of the features of very good practice and some weaknesses, provision is likely to be good.

Evaluations against the quality indicators are not an end in themselves. They indicate aspects of good or weak practice, which need to be looked at more closely. Evaluations should not be aggregated across different indicators or turned into percentages. In such cases, percentages can be at best meaningless and at worst deceptive. We are not trying to add up evaluations and give our area a “score” or a clean bill of health.

Although all the areas of practice described in the indicators are important, there are some that are more crucial than others. For example, finding that our practice in risk assessment or meeting children’s and young people’s needs is weak may alert us to possible very serious consequences for children, young people and families.

It can be very useful to look at patterns of evaluations across particular indicators, particularly if we are using the quality indicator to evaluate across services. This can help identify whether a particular strength or weakness is within one service, or one locality or replicated across the area. This can help focus on the underlying causes of weaknesses and identify appropriate development priorities, or resource allocations. Over time, trends in evaluations can indicate whether the implementation of particular processes or new guidance has brought about the improvements sought.



## What are we going to do now?

At whatever level we are using the quality indicators to look at our practice, we should now be in a position to plan for improvement or report on how well we are doing. It is important when undertaking any form of self-evaluation to keep focused on the end purpose, which is to make things better for vulnerable children and young people and to reduce the possibility of them experiencing harm. The answer to *What are we going to do now?* must therefore always be action which will make a difference for children, young people and their families.

## Reporting on self-evaluation

Whether and how the outcomes of self-evaluation are reported or written depends on the purpose and the level at which the work was done. The purpose of reporting is primarily to help decision-making about how to make improvements, but in some cases may also be necessary to inform stakeholders, such as children, young people and families, the CPC, Children's Panel Advisory Committee, the public, elected members of councils, and police and health boards.

The following types of reports may be the outcome of a self-evaluation activity.

- A group of health visitors in a GP practice decide to evaluate the effectiveness of their support to families of children and young people who are either on the Child Protection Register, or identified as being vulnerable. As a result of this exercise, they may not need to write an extensive report. The important activity would be sharing their practice through collating evidence against the selected QIs. Through professional discussion, they would identify some aspects of their work which they decide to take a closer look at, or identify a small number of points for action. They may wish to share the points of action they have identified with their managers and other professionals. In this case, writing an extensive report on the self-evaluation exercise would not be necessary.
- The CPC in an area wishes to take a broad look at how well children and young people are protected across all services in their area. Each of the key services in the area, the police, health professionals, social services, education and the local Children's Reporter undertakes to do a broad brush evaluation across all the quality indicators in their own services. The senior managers who have led the self-evaluation exercises have a day together to share the results across the services. As a result they produce a detailed written report for the CPC and the senior managers in each service, which highlights the strengths and weaknesses in relation to protecting children and identifies some priorities for development. The priorities identified are then fed into the Integrated Children's Services Plan.



Whoever the report is addressed to it should:

- recognise key strengths;
- identify levels of service to be maintained; and
- identify areas for development, identify priorities and set targets.

### **Improving services**

As protecting children and young people and meeting their needs is “*everyone’s job*”<sup>1</sup>, developments to make things better for children and young people can involve a wide range of professionals in a range of organisations, including voluntary organisations. It is important therefore that the outcomes of self-evaluation and plans for improvement feed into the appropriate planning structures and are shared across services. Depending on the work undertaken the outcomes may result in priorities being included in a number of planning structures. The following list gives some examples.

- A school development plan, if an individual school has evaluated its processes for care and welfare of children.
- A local health improvement plan, if specific priorities identified relate to how health professionals carry out their work, or resourcing issues for the health service.
- A CPC action plan, when an issue has been identified for all agencies involved in protecting children and young people.
- An Integrated Children’s Services Plan. As this is the vehicle for improving all services for children and young people in an area, most priorities which are beyond individual teams or groups of practitioners would feature in the Integrated Children’s Services Plan.
- An education improvement plan, where an issue across all education establishments has been identified, for example, the need to ensure all children and young people have the opportunity to develop personal safety skills.
- A policing business plan, when a specific priority has been identified for practice across the local force area.
- A Community Plan/Community Safety Plan, when an issue has been identified which relates to planning partners including adult services, for example, related to the management of known sex offenders in an area.

Whatever the planning structure(s) for taking forward improvement, it will help if we select a manageable number of priorities for which we can identify specific, achievable targets.

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<sup>1</sup> See *It’s everyone’s job to make sure I’m alright*, (Scottish Executive 2002)

# Part 1

## What is Self-Evaluation?

There may be occasions when, for some aspects, the answer to the question *What are we are going to do now?* may be “*nothing at present*”. Even where we can see how improvements can be made across a number of aspects, we may wish to focus on those of greater concern. It will make more impact on services if a manageable number of priorities are taken forward, with a notable impact on the experiences of children, young people and their families. In some cases small changes in practice identified by a group of practitioners in an area can have a significant positive impact. It is not always necessary for self-evaluation to result in major changes or reviews of practice.



# Part 2

The Quality Indicators



## The Quality Indicators

The quality indicators are organised around five key questions about the quality of services provided. The five key questions are as follows:

- 1. How effective is the help children and young people get when they need it?**
- 2. How effectively do agencies and the community work together to keep children and young people safe?**
- 3. How good is the delivery of key processes?**
- 4. How good is operational management in protecting children and young people and meeting their needs?**
- 5. How good is individual and collective strategic leadership?**

The quality indicators have been developed to help us evaluate our practice so that we can answer these questions. Answering these key questions will then help us to answer the overarching question, *How well are children and young people protected and their needs met?* taking into account the quality of the service currently being delivered, the quality of leadership and direction and the capacity for services to maintain and improve quality.

These five key questions sit well under an overall structure for quality assurance across a wider range of services for children and young people which is being developed. The overall structure under development encourages those providing services to consider the quality of their work in relation to six key areas as follows:

- the key performance outcomes achieved;
- the impact of services on meeting the needs of stakeholders;
- the effectiveness of the delivery of key processes;
- the effectiveness of operational management;
- the effectiveness of strategic management; and
- capacity for improvement.

## **Relationship between the quality indicators and *The Framework for Standards***

There is a very close relationship between *The Framework for Standards* and the *Children's Charter* and the quality indicators. Those who have used *The Framework for Standards* as a basis for self evaluation will have taken useful and significant steps towards self-evaluation. The two sets of materials are designed to be consistent and to complement each other.

Key points from more than one Standard are sometimes drawn together to illustrate a specific quality indicator. Each of the key questions relates broadly to specific Standards. The quality indicators and their illustrations draw heavily on these specific Standards. In designing the quality indicators, a careful check has been made to ensure that all of the 'bullet points' within the Standards are included within the set of quality indicators and their illustrations.



Broadly the Standards match across the key questions as follows:

**1. How effective is the help children and young people get when they need it?**

Standard 1: Children get the help they need when they need it.

Standard 2: Professionals take timely and effective action to protect children.

Standard 3: Professionals ensure children are listened to and respected.

**2. How effectively do agencies and the community work together to keep children and young people safe?**

Standard 7: Agencies work in partnership with members of the community to protect children.

**3. How good is the delivery of key processes?**

Standard 4: Agencies and professionals share information about children where this is necessary to protect them.

Standard 5: Agencies and professionals work together to assess needs and risks and develop effective plans.

**4. How good is operational management in protecting children and young people and meeting their needs?**

Standard 6: Professionals are competent and confident.

**5. How good is individual and collective strategic leadership?**

Standard 8: Agencies, individually and collectively demonstrate leadership and accountability for their work and its effectiveness.

## Summary of the Quality Indicators

No.	Quality indicator	Themes
<b>1) How effective is the help children and young people get when they need it?</b>		
1.1	Children and young people are listened to, understood and respected	<ul style="list-style-type: none"> <li>• Communication</li> <li>• Trust</li> </ul>
1.2	Children and young people benefit from strategies to minimise harm	<ul style="list-style-type: none"> <li>• Support for vulnerable children, young people and families</li> <li>• Children's and young people's awareness of keeping themselves safe</li> </ul>
1.3	Children and young people are helped by the actions taken in immediate response to concerns	<ul style="list-style-type: none"> <li>• Professionals' initial response to children, young people and families who need help</li> </ul>
1.4	Children's and young people's needs are met	<ul style="list-style-type: none"> <li>• Meeting needs</li> <li>• Reducing the longer term effects of abuse or neglect</li> </ul>
<b>2) How effectively do agencies and the community work together to keep children and young people safe?</b>		
2.1	Public awareness of the safety and protection of children and young people	<ul style="list-style-type: none"> <li>• Confidence of the public in services</li> <li>• Responses to concerns raised by members of the public about a child's or young person's safety or welfare</li> </ul>
<b>3) How good is the delivery of key processes?</b>		
3.1	Involving children, young people and their families in key processes	<ul style="list-style-type: none"> <li>• Keeping children, young people and their families informed and involved</li> <li>• Addressing dissatisfaction and complaints</li> </ul>
3.2	Information sharing and recording	<ul style="list-style-type: none"> <li>• Appropriate sharing of information</li> <li>• Joint understanding of information</li> <li>• Management and recording of information</li> </ul>
3.3	Recognising and assessing risks and needs	<ul style="list-style-type: none"> <li>• Recognising a child or young person needs help</li> <li>• Initial information gathering and investigation</li> <li>• Assessment of risks and needs</li> </ul>
3.4	Effectiveness of planning to meet needs	<ul style="list-style-type: none"> <li>• Decision making, identifying responsibilities and meeting needs</li> <li>• Taking account of changing circumstances</li> </ul>





No.	Quality indicator	Themes
<b>4) How good is operational management in protecting children and young people and meeting their needs?</b>		
4.1	Policies and procedures	<ul style="list-style-type: none"> <li>• Range and framework of policies and link to vision, values and aims.</li> <li>• Managing, disseminating, evaluating and updating policies</li> </ul>
4.2	Operational Planning	<ul style="list-style-type: none"> <li>• Performance management and the planning framework</li> <li>• Development and use of management information</li> </ul>
4.3	Participation of children, young people, families and other relevant people in policy development	<ul style="list-style-type: none"> <li>• Seeking views of children, young people and families</li> <li>• Involving children, young people and families in developing services.</li> </ul>
4.4	Recruitment and retention of staff	<ul style="list-style-type: none"> <li>• Identifying and meeting human resource needs</li> <li>• Safe recruitment and retention practice</li> </ul>
4.5	Development of staff	<ul style="list-style-type: none"> <li>• Professional competence and confidence</li> <li>• Staff development and training</li> </ul>
<b>5) How good is individual and collective strategic leadership?</b>		
5.1	Values, vision and aims	<ul style="list-style-type: none"> <li>• Clarity of vision and values</li> <li>• Appropriateness and clarity of aims</li> <li>• Promotion of positive attitudes to social and cultural diversity</li> </ul>
5.2	Leadership and direction	<ul style="list-style-type: none"> <li>• Joint leadership within and across agencies</li> <li>• Strategic deployment of resources</li> </ul>
5.3	Leadership of people and partnerships	<ul style="list-style-type: none"> <li>• Relationships with staff and development of teamwork across agencies</li> <li>• Promotion of collaborative ethos</li> </ul>
5.4	Leadership of change and improvement	<ul style="list-style-type: none"> <li>• Monitoring and development</li> <li>• Building capacity for improvement</li> </ul>

## The Quality Indicators with Illustrations

### 1 How effective is the help children and young people get when they need it?

#### 1.1 Children and young people are listened to, understood and respected

Themes

- Communication
- Trust

*Illustrations*

#### **Very good**

- Children, young people and families<sup>2</sup> have good communication with professionals who know them well. They are listened to, understood and respected and their views are taken into account when decisions are made about their lives. Children, young people or family members with learning or communication difficulties, or for whom English is not their first language are helped to understand as much as possible about what is happening to them and to communicate with professionals. Professionals respect children's and young people's need for emotional continuity and security. Where children are too young or too disabled to communicate their feelings and views, professionals are sensitive to and seek to understand any changes in their health, behaviour or emotional well-being.
- Children and young people talk to professionals when they need help. Generally they can identify an adult outwith their own family that they can go to with a problem. They have a named person to help them and can see that person regularly if they choose. They can discuss issues in private when they want to. Children, young people and families trust the professionals who are helping them. Children's and young people's needs are understood by professionals. Children and young people feel that the professionals involved in their lives are using their power to help keep them safe. Professionals have taken the time to find out about what the family think are their strengths. Even where they disagree with the actions taken by professionals, children, young people and families understand the reasons for those actions. They know what actions they can take if they want to challenge decisions.

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<sup>2</sup> The words "family" or "families" are used throughout this document to include parents, carers with whom a child or young person lives and other family members who have a major involvement in the life of the child.



### **Weak**

- Some children, young people and families have had to speak to a lot of different professionals and feel that no one person is there to help them. A child, young person or family has built up a relationship with a practitioner but staff shortages or turnover means that it is hard for them to contact specific professionals. Practitioners in some of the agencies do not make sufficient efforts to understand the emotional state and feelings of babies, very young children and children or young people with severe communication difficulties. Practitioners do not consistently ensure that a child, young person or family member, whose first language is not English or who has communication difficulties, has the appropriate support at meetings or interviews.
- Some professionals do not take sufficient time or have sufficient skill to get to know a child or young person and build a relationship. Whilst some children and young people have a named person, a number state that there are no professionals in whom they feel confident to talk about personal issues. Children, young people and family members sometimes feel marginalised or judged by professionals. They know professionals are trying to help them but they are concerned that the decisions made do not take sufficient account of their wishes, or empower them to help themselves.

## 1.2 Children and young people benefit from strategies to minimise harm

### Themes

- Support for vulnerable children, young people and families
- Children's and young people's awareness of keeping themselves safe

### Illustrations

#### **Very good**

- When a child or young person needs help, there is generally an adult who knows them well, who recognises their need and takes steps to help them. Children and young people normally have access to someone to talk to about any worries or concerns, for example, a teacher in school, or another adult they trust. Practical and emotional support, to reduce the likelihood of children and young people experiencing harm, is provided. Support is provided frequently enough and at times, in places and in ways that are acceptable to children, young people and families. Professionals act to ensure that children and young people receive help even if family members are unable or unwilling to accept help on their behalf. Children, young people and families benefit from the help provided and are less at risk. They play an active role in reviewing the effectiveness of help. Help is available for as long as children, young people and families need it.
- Children and young people demonstrate good awareness of personal safety and their right to be free from harm. They understand their right to be safe and have positive relationships. They know who to contact if they need help. They understand the risks involved in using communications technology, for example the internet and chatrooms. They talk to trusted adults about keeping themselves safe and, where relevant, coping with the effects of neglect or difficult living circumstances.



### **Weak**

- Professionals recognise when children or young people are vulnerable, but do not have sufficient or appropriate services to help some of them until they are perceived to be at serious risk. Children, young people and families sometimes do not get help early enough and difficulties become entrenched by the time help becomes available. There are some services available, but families find them difficult to take up because they are not provided at a suitable time or place. Families are not always committed to services or motivated to participate fully because they are unclear of the benefits for them. Effectiveness of services is not reviewed or evaluated and professionals are unable to demonstrate that they have reduced vulnerability or prevented harm.
- Children and young people show some important weaknesses in their awareness of personal safety. They are uncertain about who to contact or speak to if they have concerns about themselves or another child. There are posters and telephone numbers of who to contact for help, but these are not widely available to all children and young people or in alternative languages and formats. Some children and young people are not able to talk about their worries or difficulties or seek help from professionals.

### 1.3 Children and young people are helped by the actions taken in immediate response to concerns

Theme

- Professionals' initial response to children, young people and families who need help

*Illustrations*

#### **Very good**

- All children and young people's concerns are treated seriously and respectfully by the person hearing them. Children and young people know what is going to happen next and why. They are aware of any immediate help that will be provided and they do not feel that help has been delayed inappropriately. When concerns have been raised by another person, either a professional or another adult who knows the child or young person's circumstances, the child or young person concerned knows the nature of the concerns and is given a suitable opportunity to respond. Children and young people are kept informed about any further enquiries, investigations or criminal proceedings and they understand the reasons and implications for themselves and others. They receive helpful advice and support when these processes are taking place. Actions taken to help children and young people are proportionate to the risks and needs identified.

#### **Weak**

- Children or young people raising concerns do not feel confident that their concern has been taken seriously or that action has been taken. They have often had to raise their concern with a number of different professionals before someone has taken action. Where a professional is the person who identified the concern, the child, young person or family does not feel that the concern has been discussed fully with them or that they have had any or enough say about whether and how it is taken further. Children, young people and families receive some feedback from professionals but do not feel they are always consulted or kept fully informed about any actions that are taken. It is not always clear to them how and why decisions have been made. They do not feel that they received sufficient advice and support concerning the processes that are taking place, nor have they felt able to challenge them. Professionals who have raised a concern about a child or young person do not get clear feedback on what action has been taken as a result of this concern. As a result, they feel unsure about the best ways of continuing to work with the child, young person or family concerned which affects their relationship with them.



## 1.4 Children's and young people's needs are met

### Themes

- Meeting needs
- Reducing the longer term effects of abuse or neglect

### Illustrations

#### **Very good**

- Children and young people are generally protected from risk or harm by the actions taken by professionals. Children and young people are supported through any processes of assessment, investigation and provision of longer term services. They understand the reasons for actions taken or not taken and continue to receive support with any feelings or fears about this. Their short and long term needs have been well identified and met. Their lives have been improved both immediately and in the longer term. Where children and young people are too young or too disabled to express a view about their welfare and safety, there is tangible evidence that their welfare and safety have improved. Families have received sufficient, timely help to keep their children safe and meet their needs.
- Children and young people receive services for as long as they need them. Where children, young people or families have been referred to specialist services to help them overcome the effects of abuse, these services are available quickly and have been helpful. As a result of services to support recovery, children and young people have made progress towards good physical and mental health and towards developing their full potential and skills for adulthood.

#### **Weak**

- A number of children and young people are unclear about the reasons for action taken or not taken. They are left feeling unsupported, insecure or still at risk. Some children's and young people's needs have not been met. Help has not been provided for long enough and as a result there has been no marked improvement in their lives. Where children and young people are too young or too disabled to express a view, professionals have not fully evaluated both the short and longer term advantages and risks for the child or young person of any actions taken. For some families, the help provided was insufficient or concerns were not responded to early enough.
- Whilst children and young people have been referred to specialist services they felt that this was not done quickly enough. Some children and young people have found it difficult to sustain attendance at specialist services. They do not always feel positive about the outcomes of intervention by services.

## **2 How effectively do agencies and the community work together to keep children and young people safe?**

### **2.1 Public awareness of the safety and protection of children and young people**

#### Themes

- Confidence of the public in services
- Responses to concerns raised by members of the public about a child's or young person's safety or welfare

#### *Illustrations*

##### **Very good**

- Agencies demonstrate that they have taken effective steps to promote the safety and protection of children and young people in their community, for example through local awareness raising campaigns. Members of the public are confident that services in the area protect children and young people and help them if they are at risk of harm. They know who to contact when they have concerns about a child or young person and are confident that necessary action will be taken as a result of their contact. Agencies with statutory responsibility for the protection of children have systems in place to ensure contact with a professional is available at all times.
- There is evidence that members of the public make referrals. The receiving agency or professional takes such referrals seriously, notes the details accurately and passes the information on to someone who can find out more about the situation and take any necessary action. Members of the public are given appropriate feedback to indicate what action has been taken.

##### **Weak**

- A considerable number of members of the public demonstrate uncertainty about who to contact and what to do if they have concerns about a child or young person. They are not always confident that services protect children and young people well. Agencies have undertaken some public awareness raising campaigns but have been inconsistent in their approaches to promoting safety.
- Some professionals are not clear about what to do if someone raises a concern about a child or young person with them, for example the parent of another child or a neighbour, and may fail to take appropriate action. Sometimes in responding to a concern raised by a member of the public, professionals may either intervene in such a way that the child or young person is put at further risk, or they may not follow through on the concern rigorously enough.





### 3. How good is the delivery of key processes?

#### 3.1 Involving children, young people and their families in key processes

##### Themes

- Keeping children, young people and their families informed and involved
- Addressing dissatisfaction and complaints

##### *Illustrations*

##### **Very Good**

- Professionals listen to children, young people and their families, take their views seriously and ensure their views are recorded. Professionals help children, young people and their families to express their views, particularly at meetings, if they require it. Professionals ensure that children, young people and their families are actively involved in making decisions about how they can be helped, unless this compromises the child or young person's safety or that of other children or young people. In circumstances where children, young people and families are not actively involved in decision making, professionals record this, with reasons.
- Easily understood information about how to express dissatisfaction or make a complaint is made available to all children, young people and families. When children, young people or families express dissatisfaction with any aspect of service their concerns are taken seriously and addressed quickly. Where children, young people or families choose to pursue their dissatisfaction formally through a complaints process, support and advocacy services are available to help them through the process. If a complaint concerns alleged abuse or neglect by a staff member, foster carer or volunteer, the links between the complaints procedure, child protection procedure and disciplinary procedure are clearly articulated and understood by the member of staff investigating the allegation. Complaints are investigated thoroughly and objectively, generally within specified timescales. Children, young people or families making complaints receive feedback about the result of any complaint and any action taken. Agencies regularly review and analyse the range and nature of complaints about services.

## **Weak**

- Professionals do not always make clear to children, young people and their families who to contact if they want information about what action is being taken to help them or who is taking action to help them. Some professionals have established good contact with children, young people and families, but overall the professionals involved with a family have not made clear their roles and responsibilities. Professionals do not consistently ensure that children, young people and families are able to express their views and that people listen to them. Professionals talk to children and young people about what they want but do not record what the child or young person has said or do not take sufficient account of these views when making decisions.
- On occasions children, young people and their families do not receive information about how to express dissatisfaction or make a complaint unless they ask for it. They receive written information but it is hard to follow and not suitable for children and young people. Expressions of dissatisfaction are often dealt with slowly and sometimes dismissed out of hand without necessary enquiries being made. Some children, young people and families find the formal complaints procedures daunting but are not provided with sufficient support to help them through the process or feedback afterwards. Some managers investigating complaints are not clear how relevant procedures link together. Whilst complaints about services are recorded, systematic review and analysis of complaints does not always take place.



## 3.2 Information sharing and recording

### Themes

- Appropriate sharing of information
- Joint understanding of information
- Management and recording of information

### *Illustrations*

#### **Very Good**

- Professionals clearly understand when they need to share information about children, young people and their families and they regularly share information in order to protect children and young people from harm. Professionals are aware of the need to share information about adults who may be a risk to children and young people. They share information which is relevant to the long and short term needs of children and young people. Professionals who are gathering information in order to assess the risks to and needs of a child or young person, ensure that they seek information from all relevant sources, including professionals who may be involved with other family members. Agencies identify what information parents, children and young people are content to share freely and take account of each child's or young person's and their parents' or carers' views when deciding to share information without their consent. Professionals ensure that parents, children and young people are aware of what information is held about them. Professionals provide reasons and explain to them when they have to share information without consent.
- When information is shared, the professional communicating the information ensures that the recipient has fully understood the significance of the information, makes clear what is fact and what is opinion and ensures there is agreement about expected actions. There is a record of what information has been shared, why and with whom.
- Individual professionals record the information they hold about children, young people and families accurately and succinctly in accordance with their agency's policies. Recording includes, in all agencies, a chronology of events and contacts which assist professionals to understand key events in children's and young people's lives. This record of events is reviewed and analysed regularly. Information is stored securely but is readily accessible to those who have a right of access. Where there are arrangements for sharing files or electronic systems, there are clear protocols in place which are understood by all staff, including staff who are managing data bases. These protocols are followed.

## **Weak**

- Professionals are not sure about what information they can and should share. They sometimes do not pass on information which may have important implications for the safety of a child or young person because they believe it to be confidential. Sometimes professionals lose the trust of children and young people and families because they have passed on information without consent or without explaining why it was necessary.
- Sometimes professionals pass on confidential information verbally to another professional, but they do not ensure that the information is used responsibly in the best interests of a child or young person. Professionals who have responsibility for gathering information seek information from some other professionals who have contact with the child or young person, but do not always ensure that they are aware of other services, including voluntary organisations, which may have had contact with the child or young person or other members of their family.
- Professionals keep records of their work but some records are incomplete and sometimes can be difficult to follow. Notes kept on files give broad outlines of the child's or young person's circumstances, but do not give sufficient detail to properly inform the professional decision making process. Information is stored in a variety of locations and professionals have difficulty in accessing it. Information is not always stored securely.



### 3.3 Recognising and assessing risks and needs

#### Themes

- Recognising a child or young person needs help
- Initial information gathering and investigation
- Assessment of risks and needs

#### *Illustrations*

#### **Very Good**

- All professionals who have contact with children, young people or families are alert to and recognise the signs that children or young people may need help or protection from harm. This includes professionals who do not have a direct responsibility for children, such as those working with the adults in a family. If a concern is raised about a child or young person that requires further exploration, all professionals involved have the skills to gather pertinent information. All professionals take immediate action to ensure that no child or young person is exposed to continued risk of harm. When a concern is raised about or by a child or young person, an appropriate professional, preferably someone known to the child, sees them, reassures them and establishes the nature of the concern and any immediate risks.
- When concerns about a child or young person are referred to the police or social work and/or the Children's Reporter, an immediate assessment of the risk of harm to that child and any other associated children and young people is carried out. There is a consistent response to calls about children at risk of harm whenever the call is made, and whether the call is from a professional or a member of the public. The person raising the concern is provided with feedback as appropriate. In appropriate circumstances, there is an initial referral discussion between social work, health and police and any other relevant professional to establish what is already known about the child, young person and their family and to come to a joint decision about what further action is required, in the best interests of the child or young person. Enquiries or investigations are planned jointly giving due weight to the welfare of the child or young person and the gathering of evidence, for example during joint forensic examination. As part of an assessment, professionals consider whether to make a referral about a child or young person to the Children's Reporter with the rationale for referral/non referral being recorded.

- Professionals follow up initial assessment, when relevant, with a more comprehensive assessment of risk and need in which they consider the child's or young person's circumstances and their emotional, social and developmental needs in a holistic way. They describe the matters of concern. They assess the child's or young person's resilience and how they are likely to respond to their circumstances. They assess the family's capacity to protect each child or young person and meet their needs. The professionals consider the implications of all of this information for the child or young person's well-being. They identify and quantify risk. In taking account of risks and needs, professionals can clearly identify the range of positive and negative outcomes of any action planned. Based on all available information, including the views of the child or young person and his/her family, professionals come to informed judgements about the needs of each child or young person. They do not delay taking action to help a child or young person while they are making their assessment. Professionals write assessment reports which clearly distinguish fact from opinion, identify personal and family strengths and support networks, and clearly describe the needs of the child or young person. All agencies who contribute to the assessment of a child's or young person's needs and risks share an agreed approach to assessment, which is child-centred and ensures that all aspects of risk and need are covered. They recognise that assessment is not a single action but an ongoing process and continue to assess each child or young person's needs and risk of harm as circumstances change.

### **Weak**

- All professionals have some knowledge about how to respond when they feel a child or young person needs help but they do not consistently recognise when it is necessary to seek further assessment of the situation. Some professionals who do not have direct responsibility for children or young people take no action when they see vulnerable children or young people in the course of their work. If a child or young person seems at immediate risk, they pass on their concerns but overlook signs of neglect or harm.
- Some professionals are unsure of how they should respond when they are concerned that a child or young person may be at risk of harm. Professionals do not always carry out immediate risk assessments after initial referrals are made to police and social work. They do not always consider the risks to other children who are not the subject of the referral. Professionals do not consistently secure information from all relevant agencies at the time of the initial referral, so, for example omission of information held by health professionals may reduce the effectiveness of the decision making process. Professionals normally plan investigations jointly but there are occasions when a single agency takes a unilateral course of action which is detrimental to the child or young person.



- When further assessment is undertaken, professionals make assessment of the child or young person's needs but focus only on the aspect with which they are directly concerned, for example, social work assessments do not take account of the child's or young person's educational needs. Professionals make their assessment separately, so that a child, young person and family may have to describe their concerns to several different professionals. When carrying out an assessment, professionals do not give sufficient attention to the relative impact of different courses of action. Written reports describe the child's or young person's and family's circumstances, but do not clearly reflect the judgements made on the current or future needs of the child or young person. Individual agencies have developed guidance which does not take account of practice in other agencies which may be involved in the assessment and there is no joint policy or guidance on assessment. Guidance to professionals focuses on bureaucratic requirements rather than promoting good professional practice.

### 3.4 Effectiveness of planning to meet needs

#### Themes

- Decision making, identifying responsibilities and meeting needs
- Taking account of changing circumstances

#### *Illustrations*

#### **Very Good**

- Professionals plan carefully together to protect each child or young person and meet their needs. In so doing, they take account of all assessment which has taken place. They consider the support networks and resources currently available, any gaps and the resources and options to fill these. They take account of the views of the child or young person and their family during the process of planning. They come to carefully considered decisions about children and young people which put their safety and needs first. They consider the child's or young person's long term and immediate needs. Decisions are clearly recorded in a plan which identifies roles, responsibilities and monitoring and review arrangements. The actions agreed are carried out and professionals provide any help or support to the child, young person or the family that has been identified in the plan for as long as it is needed. As a result of the action agreed in the plan there are improvements in the situation of the child or young person.
- As part of the planning process, professionals consider alternative actions which may help the child or young person if the decisions made in the plan do not continue to meet the child's or young person's needs. If the level of risk changes or there is lack of progress, professionals quickly review the arrangements made and take any actions necessary to help the child or young person.

#### **Weak**

- A general plan has been agreed but action to help the child or young person is delayed because the professionals involved have not clearly identified who will do what and when. Professionals meet together and agree a plan but do not take sufficient account of the views of the child or young person or their family. Professionals have made good arrangements for the safety of the child or young person to meet their immediate needs, but they have not taken sufficient account of their long term needs, for example, whether a placement can give long term stability to the child or young person.





- Occasionally a child or young person may be left in unsafe circumstances despite an agreed protection plan being in place, for example when there is a lack of an identified resource and no alternative option has been considered. While positive actions may have taken place, there are occasions when an action identified by a single professional to protect a child or young person has been delayed leaving a child or young person at risk, because of a procedural requirement for interagency agreement.

## 4. How good is operational management in protecting children and young people and meeting their needs?

### 4.1 Policies and procedures

#### Themes

- Range and framework of policies and link to vision, value and aims
- Managing, disseminating, evaluating and updating policies

#### *Illustrations*

#### **Very Good**

- Individual agencies, including statutory, voluntary and independent agencies have clear and appropriate policies, procedures and systems in place in relation to protecting children and young people and keeping them safe. Policies, procedures and guidelines link clearly to the CPC's vision, values and aims for protecting children and young people. Key agencies with responsibility for protecting children and young people have developed guidance and procedures for joint working, which make clear individual agency roles and responsibilities. These procedures help staff by guiding them towards making well considered decisions and to take prompt and effective action to protect children and young people. Procedures help to ensure consistency across all professionals working with children and young people in the area. All policies related to work with children and young people take account of the need to protect children and young people.
- Policies and procedures are effectively disseminated and all staff are familiar with them. Evaluations are made regularly on the effectiveness of policies and guidelines and these are systematically updated to take account of changing circumstances, staff views and national and local priorities. The views of children, young people and families are taken into account in developing policies and guidelines. A systematic approach to the monitoring and evaluation of the impact of policies ensures that policies are well understood and consistently implemented.



### **Weak**

- Individual agencies have some policies in relation to their responsibilities for protecting children and young people, but these policies do not cover all their relevant areas of activity and responsibility. Individual policies do not give a clear enough indication of their practical application and do not give sufficiently clear guidance for practitioners. Development of these policies has not taken fully into account important local and national priorities and improvement objectives. The vision, value and aims do not systematically inform the development of policies and the links between aims and policies may not always be clearly perceived. Agencies develop their aims to some extent in isolation from each other.
- There is a framework for the development and review of individual policies but it does not fully reflect the priorities of child protection. Agencies do not review and amend policies on a sufficiently regular basis and many policies lack the necessary updating to take account of changing circumstances and national and local priorities. Front line staff and stakeholders are not regularly involved in review and development of policies and guidance. Staff do not consistently follow procedures, which sometimes impedes their work with children and young people.

## 4.2 Operational Planning

### Themes

- Performance management and the planning framework
- Development and use of management information

### Illustrations

#### **Very Good**

- Managers at an operational level ensure that the staff they manage are aware of the implications of the Integrated Children's Services Plan for their work. Professional and service boundaries are innovative and flexible. Where demand for services outstrips available resources, relevant agencies agree on priorities which will achieve the maximum impact on protecting children and young people and meeting their needs. Operational managers ensure that staff understand and are supported to effectively implement operational plans, where relevant, in conjunction with other agencies. There are systems in place that encourage managers and staff to contribute to planning and their operational knowledge and skills are used effectively.
- Operational managers ensure that efficient management information systems are in place for operations that they manage. They ensure that management information systems are used as a dynamic tool to inform their work and that of the staff that they manage. For instance, they are aware of local trends in child protection referrals, have an understanding of the implications for their staff and for resource allocation of these trends and put in place systems and services which effectively respond to these trends.

#### **Weak**

- Agencies work together to develop plans but they often remain unread, or are viewed as something separate from day to day operations or are deemed too difficult to implement. Agencies implement their individual plans but there is insufficient focus on collaboration and co-ordination with other agencies. Where resources are insufficient to meet demand, managers and staff in individual agencies take narrow, restrictive views of professional remits. This potentially or actually creates dangers for children, young people and families, for example, child protection cases in one or more agencies remain unallocated. Staff are aware of agency plans but have little understanding of how they apply to their work. Because they have not been sufficiently involved, some staff are resistant to developments for improvement.
- Management information is collected but it is not analysed systematically. Its relevance to effectiveness of services to protect children and meet their needs is not fully appreciated and can sometimes be afforded a low priority. Trends are not always analysed or shared with other agencies.



### **4.3 Participation of children, young people, families and other relevant people in policy development**

#### Themes

- Seeking views of children, young people and families
- Involving children, young people and families in developing services

#### *Illustrations*

##### **Very Good**

- Agencies regularly seek the views of children, young people and their families on the effectiveness of the service with which they have had contact. They systematically collate these views within and across agencies and use the information to evaluate the overall service. They use advocacy services regularly to seek the views of children and young people about the service they have received. They also seek the views of children, young people and families who have not engaged with services.
- When designing new services, or planning to improve services, professionals take account of any information they have gathered on the views of stakeholders. They actively seek to involve children, young people and families when they design services, for example by having them on working groups, or holding focus groups to look at what kind of services are required. There is ongoing discussion between service users, or their representatives, and professionals about what children, young people and families want and need.

##### **Weak**

- Individual professionals or agencies seek information from children, young people and their families about the service they have received but this is not collated and analysed systematically at agency or inter-agency level. Agencies rely too heavily on users coming forward with their views, but are not sufficiently active in soliciting the views of hard to reach children, young people and their families.
- Professionals gather views from stakeholders, but do not respond consistently to the issues raised when designing or developing services. They invite users to contribute to planning but do not actively help them to participate fully, or ensure that their views are given due weight.

## 4.4 Recruitment and retention of staff

### Themes

- Identifying and meeting human resource needs
- Safe recruitment and retention practice

### Illustrations

#### **Very Good**

- Agencies, individually and collectively identify the staffing necessary to provide an effective service for children, young people and their families who may be at risk of harm. They plan together to identify key tasks and to ensure the right mix of professional skills is available. They effectively select and retain staff who are competent and responsive to the needs of children and young people. Agencies have strategies for retaining staff such as policies to promote good health and safety at work. Where there are staff shortages, they prioritise appropriately and in a way which makes clear to the workforce and other agencies how prioritisation has been carried out and how this affects areas of partnership work.
- All agencies have established safe recruitment arrangements. They ensure, in particular, that all staff that are likely to have contact with children have been suitably vetted. They ensure the safe recruitment arrangements are always carried through, for example, references are thoroughly checked. They have effective procedures for investigating alleged abuse by staff members, foster carers and volunteers and for taking any necessary disciplinary action.

#### **Weak**

- Agencies, individually and collectively have identified a deficiency in staffing required to provide an effective service for children, young people and their families, but this has not yet been addressed. Whilst positive professional relationships have been established, the managers from different agencies and organisations have not yet taken steps to plan together to identify key tasks and ensure the right mix of professional skills and expertise is available. Staff health and safety is not regularly monitored or reviewed. Recruitment or retention difficulties have not been fully explained to the wider workforce or partners resulting in a lack of prioritisation and unnecessary tension and difficulty. Strategies to address significant staff resourcing issues have not yet been fully developed.
- Agencies are aware of the requirements to ensure that they only recruit and retain people who are qualified and safe to work with children and young people. Some managers, however, are unaware of their wider responsibilities in relation to vetting or disciplinary procedures, which have been applied inconsistently.



## 4.5 Development of staff

### Themes

- Professional competence and confidence
- Staff development and training

### *Illustrations*

#### **Very Good**

- Managers ensure that staff are supported, supervised and accountable in their work. Help and advice are available when needed but they are allowed to exercise appropriate initiative and professional judgement. Managers in all agencies, through appropriate arrangements for staff appraisal, ensure that professionals working with children, young people and their families are competent and confident in carrying out their work. They ensure that professionals have appropriate knowledge, skills, experience and qualifications. In particular, they ensure that professionals are skilled and experienced in communication with children and young people and understand the impact of parents' behaviour on the well-being of their children. Managers ensure that their staff keep up to date with relevant legislation, research and good practice as appropriate. Managers ensure that staff are adequately protected from violence and aggression and that the risks to both professionals and children and young people are minimised. When professionals are involved in very complex cases over a period of time, they have access to independent counselling.
- Agencies, individually and jointly, audit the training needs of staff and plan a coherent and progressive training programme to meet the needs of the workforce and the organisation. The programme also takes account of local and national priorities for improving services for protecting children and young people and meeting their needs. This should take account of all staff, including those who do not work directly with children or young people but who need to know how to respond when they see a child or young person who may need help. Training is organised and delivered in a range of contexts, including multi-disciplinary courses. Induction processes and training for all staff address child protection issues and, following induction, staff are clear about their responsibilities in relation to protecting children. There is evidence that professionals have taken up training opportunities and have evaluated them positively. Professionals are clear about their own strengths and development needs and how to improve their knowledge and skills. Managers evaluate training and the effect it has on practice.

## **Weak**

- There are systems in place for regular review of staff and the identification of training needs. However they do not focus sufficiently on the specific skills required for the roles individual professionals carry out to protect children and young people from harm. Arrangements for supervision are in place, but are not always carried out. Arrangements tend to be ad hoc and in response to need, rather than ensuring that staff working with children, particularly when they are involved in difficult situations, have access to regular supervision and debriefing.
- Agencies individually and collectively make available some training in relation to child protection taking account of the local priorities for improvement. However, there is not a clear structure and system for monitoring training and the impact of training. Managers have not given sufficient guidance to staff in relation to their expectations of the levels of training they should undertake. Professionals working directly with children are made aware of their responsibilities in relation to protecting children at induction, but there are other staff groups who see children in the course of their work who do not have child protection in their induction.





## 5. How good is individual and collective strategic leadership?

### 5.1 Vision, values and aims

#### Themes

- Clarity of vision and values
- Appropriateness and clarity of aims
- Promotion of positive attitudes to social and cultural diversity

#### Illustrations

##### **Very good**

- Elected members, board members and senior managers with a responsibility for protecting children and young people have established a clear vision which they use to direct their work. The key organisations or agencies in the area share the same vision and values in relation to protecting children and young people. They have a clear understanding of their collective responsibility for this. This vision is communicated effectively to individuals at all levels in the organisation and with stakeholders.
- The aims of each organisation clearly reflect a commitment to protecting children and young people and the roles and responsibilities of staff in achieving this. Aims have been developed through involvement of a wide range of stakeholders and demonstrate a clear commitment to improvement.
- Elected members, board members and senior managers demonstrate a strong commitment to and take a very clear lead in emphasising issues of equality. They and their staff demonstrate that they are aware of diversity and ensure that no child or young person or family receives a less effective service to meet their needs due, for example, to ethnicity, disability or any individual's sexual orientation.

##### **Weak**

- There is insufficient clarity about where responsibility for services to protect children and young people and meet their needs sits within each agency or organisation. Senior managers have a vision which they use to direct their work but this vision has not been communicated or shared with others. There are statements relating to protecting children and young people in joint plans, for example in the Integrated Children's Services Plan, but individual agency improvement plans do not consistently articulate the agency's commitment to protecting children and young people. Specific agencies are clear about their responsibilities, but agencies working in an area have not yet achieved a clear understanding of their collective responsibilities and how they should work together in the best interests of children and young people and their families.

- Aims for protecting children and young people lack clarity and are not well understood by staff and stakeholders. The respective aims within the community, corporate and Integrated Children's Services Plans are insufficiently linked.
- The aims and vision set out expectations for equality and social justice. However, these are not yet evidenced in practice. Agencies take some account of the individual needs of children, young people and families, for example, through provision of interpreting or translating services. They have not yet ensured that all workers are aware of the complexities of cultural issues or the impact of disability.



## 5.2 Leadership and direction

### Themes

- Joint leadership within and across agencies
- Strategic deployment of resources

### *Illustrations*

#### **Very good**

- There is a clear line of accountability within and across organisations, including the CPC, for protecting children and young people and meeting their needs. Senior managers collectively promote key priorities and set high but realistic expectations for keeping children and young people safe from harm and neglect. Elected members, board members and senior managers provide strong leadership and direction and have a clear understanding of the national context. They take steps to ensure that the protection of children and young people is a priority in strategic planning. Senior managers and the CPC work together to ensure the delivery of effective services to protect children and young people and keep them safe. The CPC has taken full account of national guidance with regard to public information, continuous improvement and strategic planning.
- Senior managers ensure that resources are made available, managed effectively and targeted towards protecting children and young people and keeping them safe. When appropriate, they include voluntary and private organisations in planning, development and delivery of services. They identify and share resources to provide the most effective outcomes for children and young people. Senior managers have developed a clear best value approach to deliver continuous improvement. Children and young people are never left at risk because professionals cannot agree responsibility for providing a service or because bureaucratic systems prevent professionals being able to provide the service they need.

#### **Weak**

- Elected members, board members and senior managers do not have a sufficiently clear view of the strategic role of their individual and collective agencies in planning services to protect children and young people. As a result the work is taken forward mainly at an operational level. Community, corporate and Integrated Children's Services Plans lack cohesion. Elected members, board members and managers do not always demonstrate mutual understanding of the national context, of local priorities and of child protection. There are some important gaps or weaknesses in the range and balance of the skills, abilities and experience of members which diminishes the overall effectiveness of the CPC.

- Resource allocation is not closely enough linked to key agreed objectives. The rationale for the strategic deployment of resources to child protection is not transparent nor does it match closely national guidance. Opportunities for appropriate joining of budgets or sharing resources have not always been taken and as a consequence there is insufficient resource to deliver effective outcomes for children and young people. There are unnecessary or historic patterns of budget allocation which sometimes prevent resources being directed towards best outcomes for children and young people. Professionals find it difficult to access resources for early intervention and support for families to prevent harm. Partnerships with voluntary and private organisations are not fully developed to maximise support for children, young people and families.



### 5.3 Leadership of people and partnerships

#### Themes

- Relationships with staff and development of teamwork across agencies
- Promotion of collaborative ethos

#### *Illustrations*

##### **Very good**

- Senior managers actively promote joint working through joint planning, training and monitoring arrangements. They ensure that their staff work with other professionals to achieve better outcomes for each child or young person. They give a high priority to building confidence and self-esteem in staff and partners and provide professional and personal support and encouragement where appropriate. Senior managers ensure that professionals are valued and their achievements recognised.
- Senior managers develop strong links with stakeholders, partners and other agencies who are well known to them and lead joint improvement activities. Stakeholders, partners, other agencies and services have a good opportunity to raise issues including proposals to improve quality and any concerns they might have. Senior managers promote a culture of collaboration at all levels within their organisations.

##### **Weak**

- Relationships and interaction with colleagues and partner organisations and the public can be inconsistent and punctuated by misunderstandings, lack of clarity and tensions. Whilst there are mechanisms for joint planning, the delivery of services to protect children and young people is not holistic. In general, teamwork is not well established and, where teams are in operation, objectives and targets are not focussed enough.
- Senior managers generally work hard and are dedicated to their specific responsibilities, but do not focus strongly enough on collaborative working and shared responsibility. Where opportunities do exist to engage with stakeholders and other agencies, they tend to be infrequent or reactive to prevailing circumstances and do not routinely involve partner organisations.

## 5.4 Leadership of change and improvement

### Themes

- Monitoring and development
- Building capacity for improvement

### *Illustrations*

#### **Very good**

- Senior managers and the CPC actively and systematically take a leading role in ensuring improvement both within and across services. A similar positive role is also undertaken by the CPC in the self-evaluation of joint working. They regularly seek information about how well children and young people are supported and their needs met in the area. They routinely take account of the views of children and young people in evaluating services. They have robust information systems that effectively account for the work of their staff and have systems to support the monitoring and review of outcomes for children and young people. They monitor assessments, decision making and outcomes for individual children and young people and give feedback to staff on their work. They commission critical case reviews when necessary and act on the outcomes. They use the review of cases to encourage open and honest discussion about practice in a safe, confidential environment. They use self evaluation to recognise good practice, make the most effective use of available resources, identify gaps and improve services.
- Senior managers constantly explore ways to create more capacity for improvement. They build capacity through developing talents and skills, providing opportunities for shared leadership and building expertise in their staff. They actively seek external examples of excellence and benchmark their services against them. Senior managers and the CPC build capacity through collaborative work across agencies and ensure commitment which will lead to sustainability.



## **Weak**

- Roles and responsibilities for senior managers do not focus sufficiently on setting targets and challenging staff to improve performance. Senior managers do not place sufficient emphasis on monitoring performance and outcomes and supporting continuous improvement. Managers carry out some evaluation of services but do not involve practitioners or service users. They do not have regular, current information about the impact of services based on sound evidence and reports on performance are not as comprehensive as they might be. There are new developments and initiatives to support children and young people but these are not always based on self-evaluation and an analysis of the needs of users. Agencies have internal systems for monitoring and evaluating services, but they have not yet established processes for looking at the collective impact of services and identifying how joint improvements can be taken forward.
- Senior managers are aware of a range of examples of good practice within the agency or organisation, but have not yet established a strategic overview. Existing self-evaluation approaches are not comprehensive and they do not consider inter-agency working. Changes in practice do not always result in significant qualitative improvements. Partnership working with other services, agencies and stakeholders focuses on implementation of current priorities rather than building capacity and ensuring commitment which will lead to sustainability.



# Part 3

Using the Quality Indicators for Self-Evaluation





### Using the Quality Indicators for Self-Evaluation

This section of the document provides advice about practical approaches to self-evaluation and some examples of using the quality indicators to evaluate aspects of practice.

It will help us to:

- focus on best practice in understanding how to protect and meet the need of children and young people;
- ask key questions to help agencies measure their current practice against a benchmark of chosen quality indicators;
- look at how agencies might collect evidence of their current practice in order to evaluate its effectiveness and identify areas in which improvements are necessary;
- weigh up these strengths and areas for improvement as part of overall evaluation of the quality of services; and
- use the results of evaluation to plan for improvement and to report on what has been found.

#### Taking a broad view: Self-evaluation across all key areas

It can be helpful to stand back and consider the overarching question *How well are children and young people protected and their needs met?* All those involved in the provision of services may have a role to play.

Our three basic questions can guide us through the process of evaluation, taking a broad view.

#### How are we doing?

We might scan across all agencies and assign one of the six levels to each quality indicator. The evaluations would be based on our professional judgements and refer to the evidence which has been gathered in the normal course of our work. We do not need to look in detail at everything that is going on. We can concentrate on the main areas of activity centred round the indicator. We can then record the evidence alongside the relevant quality indicator.

Recording evidence involves us identifying what we know is happening not what we think should be happening. For example, we cannot put down as evidence that practitioners have all had training in how to respond to children needing help. We need to know what they do in practice, as a result of that training.

This broad look can be undertaken at a variety of levels within agencies or across agencies.

### How do we know?

However we decide to work, the aim should be to promote objective and open discussion based on evidence. We can then assign one of the six levels to each quality indicator, perhaps using a grid similar to the example below.

No.	QI and Themes	Level	Evidence to support assigned level
1.3	<p>Children and young people are helped by the actions taken in immediate response to concerns</p> <p>Themes</p> <ul style="list-style-type: none"> <li>Professionals' initial response to children, young people and families who need help</li> </ul>		

When we have finished we can see at once which quality indicators have been evaluated as *good*, *very good* or *excellent*. These indicate key strengths and should be recognised as such.<sup>3</sup>

We can also immediately identify those assigned as *adequate*, *weak* or *unsatisfactory*. These are, or should be, priorities for improvement within our development plan. We can take a closer look at these areas using the method described in the next section in order to identify contributing factors. If there are several areas for improvement, we need to select the most pressing when agreeing priorities for development.

### What are we going to do now?

Once we have identified and prioritised the areas for improvement we need to identify what follow up action is required and whether that should be the responsibility of one particular agency or a collective responsibility that may require consultation with another agency or organisation or direction from the CPC.

<sup>3</sup> A copy of a blank table of the QIs in this format is available from HMIE/SFCU website



## Taking a closer look using the quality indicators

There are a range of reasons why practitioners or managers may wish to look at aspects of their practice in more detail. They may wish to focus on areas of weakness emerging from the broad look described above. An equally useful approach would be to evaluate how well agencies, singly or in partnership were meeting their own strategic aims in relation to protecting children and young people and meeting their needs. They could then select the appropriate quality indicators, which best related to that aim and collect evidence against these indicators.

Our three basic questions can guide us through the process of evaluation, taking a closer look.

### How are we doing?

- We need to agree what we are going to focus on. We need to decide at the outset what it is we want to find out. We may wish to use one of the key questions as a starting point. It may be more helpful to generate some questions directly related to the context of our work. Although all self-evaluation should contribute to answering the over-arching question *How well are children protected and their needs met?* it would be very difficult to look in detail at all the quality indicators at one time.
- We need to define the area of activity. This can range from aspects of a range of services in an area, to sampling of work across a small team or within a very local area. It may be about a voluntary organisation looking at their role in protecting children and young people and seeking help from other professionals. It is often useful to involve one or more partners in the evaluation process so that views about aspects of quality can be shared and challenged in order to reach an agreed view.
- We need to gather any evidence we have already related to the area we want to focus on, such as performance information, previous reports or audits, or the views of stakeholders.

### How do we know?

When we have decided what our focus will be, we need to take the following steps.

- Select the quality indicators which will give us most help.
- Use the illustrations to develop some questions to be answered during the evaluation process.
- Identify features to look for, referring to relevant national and local policies, and the vision statements within our own organisation.
- Decide what evidence we need to show that these features are present and effective.
- Collect the evidence and judge the quality of what we have observed.

We may wish to summarise strengths and weaknesses. We can also refer to the illustrations to come to a balanced judgement overall, about our performance. The quality indicators can be evaluated at all levels, jointly across all agencies within a local authority area, by single agency or by individual teams.

### **What are we going to do now?**

The next step is to promote improvement. The outcomes of self-evaluation should enable us to:

- Identify key strengths and areas for further development;
- Provide feedback to professionals involved and share good practice in relation to the impact of services on the lives of children, young people and their families;
- Report on our findings if appropriate;
- Identify priorities to be included in improvement planning within our agency, or in joint planning structures for our area; and
- Identify areas where further information is required in order to make meaningful evaluations of the impact of services.

### **How are we going to find the evidence?**

It is necessary to build up evidence from a range of sources about the practice related to a particular quality indicator. Each indicator will help us to define the kinds of evidence which might be helpful. For example, it may include a study of records of cases to examine information sharing across agencies or questionnaires. It may include interviews to find out what training or supervision arrangements are in place for practitioners.

In any approach to self-evaluation, we need to bear in mind the importance of relating processes to impact on or outcomes for children, young people and families. To assist in evaluating impact, it is very worthwhile for us to involve a range of stakeholders, including children, young people and their families in self-evaluation. Their views are a valuable source of evidence. This will be particularly important when we are reviewing across services and multi-disciplinary teams.

The following list suggests some sources of evidence.

- Review of case files of a range of children and young people.
- Interviews with key staff who have been involved with children or young people in a case sample.
- Interviews with parents/carers and/or children and young people in the case file sample, where possible and appropriate.
- Interviews with focus groups of staff from a range of relevant agencies.



- Interviews with focus groups of children in schools or other settings.
- Interviews with focus groups of parents, for example those with children in a family centre.
- Interviews with strategic and operational managers.
- Reading a range of documentation, including policies, procedures, improvement or service plans, self-evaluation documentation and training plans.
- Scanning information already available about the comparative levels of need, staffing and socio-economic need of the area.
- Information available from other inspections already in the public domain.
- Observations of practice, for example attending a sample of review meetings.
- Minutes of meetings.

Managers and practitioners working in a local area will be able to identify valuable sources of information in their own area.

For an evaluation to be robust, it needs more than one source of evidence so that judgements are confirmed by a variety of sources of evidence. For example, managers may report that they have clear guidance in place related to some aspect of work. However, the views of practitioners and evidence of whether the guidance is followed and its impact on practice would need to be taken into account before reaching a judgement about the impact of that guidance.

In undertaking self-evaluation in the complex area of protecting children and young people and meeting their needs, it is important to be aware of all the sensitivities involved. There are rarely right answers, and it is very important to develop a culture where professionals are confident to share views, successes and difficulties and learn from each other.

The following sections are practical examples of how the quality indicators can be used in a range of specific situations.

## Example 1: Reviewing the help children and young people get

### Introduction

The CPC in an area has had discussions about how well children and young people are protected in their area. They are aware that there are a significant number of children and young people they try to help who do not engage with services and that professional help has made little impact on their lives. They have recently become aware of research published by Edinburgh University and Childline Scotland which revealed that most children and young people would not tell an adult or seek help when they had difficulties.

*“Many children feel unable to ask adults for the help they need. That’s what comes through in this research – the fact that it’s a hidden problem”.*<sup>4</sup>

### How are we doing?

The CPC wants to look more closely at how they help children and young people. They want to find out if children and young people get the help they need when they need it and if services in their area help to reduce the likelihood of children and young people experiencing harm. They decide to use the quality indicators to plan an evaluation of the experiences of children and young people in their area.

### How do we know?

In order to make evaluations of the effectiveness of help and the impact on children and young people, they select a small number of quality indicators and from these select the themes they wish to focus on as follows.

#### Q.I. 1.1 Children and young people are listened to, understood and respected

Theme: Communication

- Children and young people have good communication with professionals who know them well. They are listened to, understood and respected and their views are taken into account when decisions are made.

Theme: Trust

- Children and young people have a named person to help them and can see that person regularly if they choose. They can discuss issues in private when they want to. Children, young people and families trust the professionals who are helping them. Children and young people feel that the professionals involved in their lives are using their power to help keep them safe.

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<sup>4</sup> *Children’s Concern: Research briefing from Centre for Research on Families and Relationships, Edinburgh University and Childline Scotland. (April 2005)*



## **Q.I. 1.2 Children and young people benefit from strategies to minimise harm**

Theme: Support for vulnerable children, young people and families

- When a child or young person needs help, there is generally an adult who knows them well, recognises their need and takes steps to help them.
- Support is provided frequently enough and at times, in places and in ways that are acceptable to children, young people and families.
- Children, young people and families benefit from help provided and are less at risk.

From these illustrations the CPC generates questions which they want answered, draw up a list of sources of evidence to help find out the answers to the questions and describe what they are looking for. These are shown on pages 56-57.

An important aspect of this example is the engagement of a range of professionals in talking honestly about their work, the risks they feel they sometimes have to take and the decisions they feel concerned about. It will require an atmosphere of trust and confidentiality to help a process of genuine self-evaluation. Professionals involved will need to decide how many children, young people and families they are going to consider closely to get the necessary evidence. They will need to address the issue of finding out from some children and young people why they do not engage with services.

In order to carry out this work, the managers of services, including any voluntary organisations involved, may need to free up some operational time for reviewing case files and talking to children and young people. They may wish to involve a voluntary organisation, to talk to children and young people, including children and young people who are at risk but not using services.

### **What are we going to do now?**

This piece of work would result in a report to the CPC. The professionals involved may decide to write a report which describes practice and highlights its strengths and weaknesses with or without making specific evaluations. The report should identify suggested ways of improving services where weaknesses were found. It is likely that management teams in individual agencies would also find the report useful.

The CPC could use the report to plan improvements where they were clearly required. This may include redesigning resources and services to meet more closely what children and young people want. It may involve staff training and development or increasing resourcing in certain areas or types of the services.

## Q.I. 1.1 Children and young people are listened to, understood and respected

<i>What do we want to know?</i>	<i>How do we find out?</i>	<i>What to look for</i>
<p>Do children and young people feel:</p> <ul style="list-style-type: none"> <li>• listened to;</li> <li>• understood;</li> <li>• respected;</li> <li>• that professionals know them; and</li> <li>• there is someone to help them when they need it?</li> </ul>	<ul style="list-style-type: none"> <li>• Review a selection of children's and young people's records, selecting some that are known to have engaged well with services and some that have not.</li> <li>• Look at records from all agencies which have had contact.</li> <li>• Trace, through descriptions of contact, reports and minutes of meetings, the kind of interactions that have taken place.</li> <li>• Engage people who have advocacy roles, e.g. from voluntary organisations, to talk to older children and young people about their experiences of services.</li> </ul>	<ul style="list-style-type: none"> <li>• Evidence that all professionals have regularly sought and recorded in files the views of children and young people.</li> <li>• Evidence that children and young people have sought professionals, e.g. social workers and guidance teachers, to talk to.</li> <li>• Evidence that they have at least one professional that they like and who they want to talk to.</li> </ul>
<p>Do children and young people:</p> <ul style="list-style-type: none"> <li>• have a named person; and</li> <li>• see that named person regularly, in private and at time and place to suit them?</li> </ul>	<ul style="list-style-type: none"> <li>• Information about what stops children and young people from seeking help.</li> <li>• Evidence from files and from children and young people about whether they feel they have been helped by services and if not why not.</li> </ul>	<ul style="list-style-type: none"> <li>• Evidence that decisions have taken account of children's and young people's views and if not, the reasons are recorded.</li> </ul>
<p>Do children and young people:</p> <ul style="list-style-type: none"> <li>• trust professionals;</li> <li>• feel they are helped by them; and</li> <li>• their views affect the decisions made?</li> </ul>		
<p>What kind of help do children and young people want?</p>		



## Q.I. 1.2 Children and young people benefit from strategies to minimise harm

<i>What do we want to know?</i>	<i>How do we find out?</i>	<i>What to look for</i>
<ul style="list-style-type: none"> <li>• Are all vulnerable children and young people in this area identified and known to professionals?</li> <li>• Are they all being supported by professionals?</li> <li>• Is help provided frequently and at times, in places and in ways that are acceptable to children, young people and families?</li> <li>• Have the actions taken helped children, young people and their families?</li> <li>• Do children and young people feel positive about the help they get and do they feel it has made their lives better?</li> </ul>	<ul style="list-style-type: none"> <li>• Look at records and files from a range of agencies.</li> <li>• Check other records held by drug support agencies or GPs on parents who are substance misusers or are known to mental health services.</li> <li>• Find out from records, which services, if any, these families use and what other help or support they are getting.</li> <li>• Check a sample of recent domestic abuse reports, audit trail outcomes and check whether children were known to other services.</li> <li>• Map the range of services available in the area across all agencies and voluntary organisations and identify service gaps or duplication.</li> <li>• Interview children and young people or arrange for appropriate interviews through advocacy or voluntary organisation.</li> </ul>	<ul style="list-style-type: none"> <li>• Evidence that professionals are aware when children may need help, for example from their behaviour in school, or through observations from detached youth workers.</li> <li>• Evidence that children, whose parents are known to services because of issues which could affect their capacity to parent, are getting help if they need it.</li> <li>• Evidence that services are used and valued by the groups they are intended to support.</li> <li>• Evidence about any children and young people who need help but are not using services.</li> <li>• Evidence of children's and young people's views of the services available, whether they use them or find they get appropriate help from them.</li> <li>• Evidence of any gaps in meeting children's and young people's needs.</li> </ul>

## Example 2: Sharing information to help children and families

### Introduction

The professionals who work together with families of young children in an area meet regularly to share information, and discuss the development of services for vulnerable families in their area. They include the health visitor, the manager and family support worker from the local children's centre, the head teacher of the nursery school, the community liaison officer from the local police, the team leader from the local children and families social work team and voluntary organisations working with families. They want to use their meetings in a more focussed way to improve the quality of services they are providing in the area. The group is aware of the findings of a number of inquiry reports that highlighted information sharing as an issue when children were not adequately protected.

### How are we doing?

The group decides to use the quality indicators to take a closer look at how effective information sharing is within the local area and how the information is recorded. The group members get on very well and feel that they share information with each other but they want to check that information is shared across a variety of different professional disciplines and it is not dependant on relationships. They decide to review the records of five children that are known to be supported by a number of professionals.

### How do we know?

They decide to use a range of quality indicators to evaluate whether relevant information is shared with other practitioners or not and how the information is recorded. They select the following themes from illustrations.

#### Q.I. 3.2 Information sharing and recording

Theme: Appropriate sharing of information

- Professionals clearly understand when they need to share information about children, their families or other adults who may have contact with children in order to protect children from harm.
- Professionals who are gathering information in order to assess the risks to and need of a child, ensure that they seek information from all relevant sources, including professionals who may be involved with other members of the family.



Theme: Joint understanding of information

- When information is shared, the professional communicating the information ensures that the recipient has fully understood the information, makes clear what is fact and what is opinion and ensures the expected actions. There is a record of what information has been shared, why and with whom.

Theme: Management and recording of information

- Information is recorded accurately, succinctly and is stored securely but is accessible to those who have a right of access. Where there are arrangements for sharing files or electronic systems, there are clear protocols in place which are understood by all staff, including staff who are managing databases. These protocols are followed.

The group decide on a number of questions they wish to answer and they draw up a list of possible sources of evidence to assist them to answer the questions. These are shown on pages 60-61.

This piece of work will involve a number of different professionals and will need commitment and engagement from all involved. The group need to decide who will review the records and who will co-ordinate the collection of the records in each agency. This may involve getting access to electronic files as well as paper files in some cases. Managers may need to free up time for staff to participate in the exercise.

### **What are we going to do now?**

This piece of work would not necessarily result in a formal report being written by the group but would involve reporting the findings, both strengths and any weaknesses, to managers in each agency and providing feedback to staff involved in the exercise. If any weaknesses were found then recommendations would be made and implemented by all the agencies concerned. Good practice or any concerns found while undertaking the review would also be highlighted and shared with other practitioners and managers.

The CPC may also be interested in the findings of the review.

Any training issues identified while undertaking this exercise would be highlighted and addressed.

## Q.I. 3.2 Information sharing and recording

<i>What do we want to know?</i>	<i>How do we find out?</i>	<i>What to look for</i>
<ul style="list-style-type: none"> <li>• Do we<sup>5</sup> clearly understand when we need to share information about the children we work with and their families to keep children safe from harm?</li> <li>• When a child we know is being assessed do we make sure that information from all relevant services is included?</li> <li>• When we share information with each other, at our meetings or more informally, do we make sure that the information is understood, that we are clear what is fact and what is opinion, and that we record what we have shared?</li> <li>• Do we make clear what we expect when we tell someone something about a family we know, for example, if a nursery teacher tells the social worker that a child has been talking about her daddy when the father should not have access to her?</li> <li>• To what extent do our records give a clear summary of key events, key people and the help the child is receiving from services?</li> </ul>	<ul style="list-style-type: none"> <li>• Speak to all staff involved with each child in the sample.</li> <li>• Review the files from all agencies involved with each child in the sample and their families, including any adults who have significant contact with the child.</li> <li>• Examine case notes, such as minutes of meetings, contact records and reports.</li> <li>• Speak to staff who may be delivering a service to the parents or carers of the child such as mental health staff or addiction staff.</li> <li>• Speak to the family or other carers for each child in the sample.</li> <li>• Check records on sharing of files and how we have been using our electronic database.</li> <li>• Speak to the children and families involved to seek their views about any information which has been shared.</li> </ul>	<ul style="list-style-type: none"> <li>• All staff have had basic child protection training. They have acted appropriately when they have had concerns about a child and they have shared information when it is necessary to help a child.</li> <li>• When a concern has been raised about a child, more information is always sought from other professionals and family involved with the child.</li> <li>• Information has been shared across agencies that are involved in protecting each child.</li> <li>• For each family decisions have been made on the basis of fullest information and there is not information in any file which, if shared, could have helped practitioners do more to protect a child and meet their needs.</li> <li>• Evidence of feedback from other agencies which demonstrates that the information shared has been understood, and acted on when necessary.</li> </ul>

<sup>5</sup> We in this example refers to the group of practitioners undertaking the self-evaluation activity

### Q.I. 3.2 Information sharing and recording (continued)

<i>What do we want to know?</i>	<i>How do we find out?</i>	<i>What to look for</i>
<ul style="list-style-type: none"> <li>To what extent do we all understand and follow the protocols for sharing our files and accessing our electronic database?</li> <li>To what extent can we see benefits to sharing information about our children and families?</li> <li>To what extent do our regular meetings make a good use of our professional time, and help us protect children?</li> </ul>	<ul style="list-style-type: none"> <li>Ask families about their experience of professionals working together, and in particular to what extent the range of professional interactions is assisted by professionals meeting together and sharing information.</li> </ul>	<ul style="list-style-type: none"> <li>Families feel comfortable about information shared, and do not feel as if they have to keep repeating information to different professionals, or that information has been shared behind their backs.</li> <li>Files are stored securely, records are readable and ensure that practitioners can access the information they need quickly and effectively.</li> <li>Arrangements for access to electronic files help us in our work and we use them appropriately.</li> <li>Evidence that our meetings and our regular sharing of information has made things better for families we work with.</li> </ul>



## Example 3: Submitting referral reports

### Introduction

The police area commander and the local Children’s Reporter have had a discussion about the quality of “compulsory measures of supervision” referral reports submitted by the police to the Reporter. They both feel that police officers are not always clear about the purpose of such referrals, the type of information required by the Reporter and what the officers expect to happen following submission. They think it likely that police officers who have contact with children and young people, but who do not specialise in child protection, are not always effectively assessing the risks to, and needs of, children and young people prior to submitting referrals.

### How are we doing?

The area commander and the detective inspector in charge of the police family protection unit decide to take a closer look at the police process for the submission of “compulsory measures of supervision” referral reports to the Reporter. In particular, they want to know how officers decide that children and young people need help and whether the referrals that are being made are appropriate and likely to help achieve best outcomes for children and young people.

### How do we know?

In order to assess the quality of assessments of risks and needs and the appropriateness and likely effectiveness of referrals to the Reporter, they select one quality indicator and from this select the themes they wish to focus on as follows:

#### Q.I 3.3 Recognising and assessing risks and needs

Theme: Recognising a child or young person needs help

- Police officers who have contact with children, young people or families are alert to and recognise signs that children may need help or protection from harm.
- When a concern is raised with the police about a child or young person, a police officer or other relevant professional sees the child or young person, reassures them and establishes the nature of the concern and any immediate risks.



Theme: Initial information gathering and investigation

- When concerns about a child or young person are referred to the police, an immediate assessment of the risk of harm to that child or young person and any other associated children and young people, for example siblings, is carried out.
- In appropriate circumstances there is an initial referral discussion between the police, social work and health and any other relevant professionals to establish what is already known about the child or young person and their family and to come to a joint decision about what further action is required in the best interests of the child or young person.
- As part of their assessment, police officers consider, in conjunction with other relevant professionals, whether to make a referral about a child or young person to the Children's Reporter with the rationale for referral/non-referral being recorded.

From these illustrations, the area commander and the detective inspector in charge of the police family protection unit generate questions which they want answered, draw up a list of sources of evidence to help find out the answers to the questions and describe what they are looking for. These are shown on pages 64-65. They decide this should be a readily manageable piece of work that addresses a range of issues related to the quality indicator and selected themes. An important aspect of this example will be the engagement of staff, particularly the non-specialist front line officers, in talking openly and honestly about their work and how they make these decisions in an operational setting.

In order to carry out this work, the area commander and the detective inspector in charge of the police family protection unit recognise that they may have to dedicate staff time in order to carry out the necessary audits and interviews.

### **What are we going to do now?**

This piece of work would result in a report to the area commander who will almost certainly wish to share and discuss findings with the Reporter prior to developing proposals for change or improvement. Whilst this exercise was conducted in order to address issues in one particular agency, namely the police, the findings and any proposed changes or improvements may well impact upon other agencies.

The CPC may be able to use the report as a basis for planning improvements over a range of issues which may be raised in the report and which may affect more than one agency. An example of this might be the need for a risk assessment tool which could be used by all the agencies.

## Q.I. 3.3 Recognising and assessing risks and needs

What do we want to know?	How do we find out?	What to look for
<ul style="list-style-type: none"> <li>• Are we satisfied that all our staff who have contact with children and young people or families are alert to, and able to, recognise the signs that children may need help or protection from harm?</li> <li>• When a concern is raised about a child or young person, do our staff make sure that the child is seen and the nature of the concern established?</li> <li>• Do our staff demonstrate ability to gather relevant information for the purpose of assessing risks and needs?</li> <li>• When a situation arises which involves a child at risk or in need, do our staff take immediate action to keep them safe and protect them from harm?</li> <li>• How exactly do our staff carry out risk assessments, which other professionals do they consult, how are they recorded and do they address risks to all children involved, for example siblings?</li> </ul>	<ul style="list-style-type: none"> <li>• Speak to a range of staff and their supervisors, including those in specialist departments, for example the drugs squad.</li> <li>• Review a sample of referral reports to the Reporter.</li> <li>• Review a sample of case files, including any contact sheets or other records, for example records of initial referral discussions or entries on computerised systems.</li> <li>• Speak to the Reporter to ascertain more detailed information about his/her concerns about the quality of referrals.</li> <li>• Speak to children, young people and their families or carers.</li> </ul>	<ul style="list-style-type: none"> <li>• Evidence that all staff who have contact with children, young people and their families have an appropriate level of awareness in relation to child protection. In particular, they have the ability to recognise signs that children and young people may need help or protection from harm and that they take appropriate action. This should include officers in specialist departments whose primary responsibility is not necessarily focussed on child protection, but who regularly come into contact with children, young people and their families.</li> <li>• Evidence that when a concern is raised about a child or young person or where it is apparent that a child or young person may be at risk or in need, arrangements are made for the child or young person to be seen without delay, either by a police officer or another relevant professional.</li> <li>• Evidence that staff have gathered all relevant information available to them from both internal and external sources and have consulted with other relevant professionals before making a referral to the Reporter.</li> <li>• Where there is more than one child or young person for whom there is concern or identified needs or risks, separate risk assessments and records are maintained for each child or young person.</li> </ul>



### Q.I. 3.3 Recognising and assessing risks and needs (continued)

<i>What do we want to know?</i>	<i>How do we find out?</i>	<i>What to look for</i>
<ul style="list-style-type: none"> <li>• Are there clear and comprehensive records which detail the actions taken by our staff when a concern is raised about a child or young person or when a risk or need is identified?</li> <li>• Do the records include contacts and discussions with the child or young person and with other professionals and are decisions and outcomes resulting from those contacts and discussions also recorded?</li> <li>• Are the children and young people referred to the Reporter ones who are likely to be in need of compulsory measures of supervision? Are the risks to, and needs of, the child clearly identified and recorded in the referrals made? Are any children and young people not referred who should be?</li> </ul>	<ul style="list-style-type: none"> <li>• Consult with professionals from other agencies, for example social work or health, to gain their perspectives on the effectiveness of joint decision making and on the appropriateness of referrals by the police to the Reporter and to their agency.</li> <li>• Audit command and control incident logs.</li> <li>• Review content of awareness raising/training courses, attendance at training and evaluations of quality and relevance of training/awareness raising.</li> <li>• Review force and local procedures and other guidance, for example inter-agency child protection guidelines.</li> </ul>	<ul style="list-style-type: none"> <li>• Evidence that comprehensive information collected in the course of assessment is recorded accurately and succinctly in either a manual file or on a computerised data base. The record contains details of all contacts with the child, young person or family and with other professionals and includes the decisions and outcomes resulting from those contacts. There is a chronology of events.</li> <li>• Evidence that all relevant factors have been taken into consideration by staff when making an assessment of risks and needs, preferably using a recognised risk assessment tool, or approach which has been agreed with partner agencies.</li> <li>• Evidence that all staff requiring child protection training/awareness raising have received it and that the content has had an impact on their day-to-day work.</li> <li>• Evidence that there is good communication between professionals including police, health, social work, education and the Children's Reporter and that key decisions are made jointly.</li> </ul>





# Part 4

Sources of Advice and Other Related Documents



### Sources of Advice and Other Related Documents

To support your work on self evaluation you may wish to refer to the following national guidance documents and other sources of information. Child protection guidance and protocols will be found in local inter-agency and single agency child protection guidelines. Further information can be found in local Integrated Children's Services Plans.

#### Protecting Children and Young People: The Charter (2004)

The Children's Charter sets out what children and young people feel they have a right to expect from those with responsibilities to protect them.

[www.scotland.gov.uk/library5/education/ccel.pdf](http://www.scotland.gov.uk/library5/education/ccel.pdf)

ISBN 0-7559-4087-3

#### Protecting Children and Young People: Framework for Standards (2004)

Builds on the Children's Charter. A framework for all agencies to progress effective measures to protect children and young people.

[www.scotland.gov.uk/childprotection](http://www.scotland.gov.uk/childprotection)

ISBN 0-7559-4087-3

#### Protecting Children and Young People: Child Protection Committees (2005)

Guidance and direction for Chief Officers concerning their responsibilities for the protection of children and young people.

[www.scotland.gov.uk/library5/education/pcypcpc.pdf](http://www.scotland.gov.uk/library5/education/pcypcpc.pdf)

ISBN 0-7559-4429-1

#### Supporting Child Witnesses Guidance Pack (2004)

A series of guidance documents on child witness support which set standards of practice in investigative interviews of child witnesses.

[www.scotland.gov.uk/library5/justice/cwis.pdf](http://www.scotland.gov.uk/library5/justice/cwis.pdf)

ISBN 0-7559-0968-2

#### Hidden Harm (2004)

The Scottish Executive response to the Report of the Inquiry by the Advisory Council on the Misuse of Drugs

[www.scotland.gov.uk/library5/health/hhser.pdf](http://www.scotland.gov.uk/library5/health/hhser.pdf)

ISBN 0-7559-4226-4

#### Getting Our Priorities Right (2003)

Good practice guidance for working with children & families affected by substance misuse.

[www.scotland.gov.uk/library5/education/gopr.pdf](http://www.scotland.gov.uk/library5/education/gopr.pdf)

ISBN 0-7559-0716-7

#### It's Everyone's Job to Make Sure I'm Alright (2002)

Report of the Child Protection Audit & Review.

[www.scotland.gov.uk/childprotection](http://www.scotland.gov.uk/childprotection)

ISBN 0-7559-0585-7

#### How Good is Our School? (2003)

Self Evaluation for schools using Quality Indicators. Section on Ethos is of particular relevance.

[www.hmie.gov.uk/documents/publication/HGIOS.pdf](http://www.hmie.gov.uk/documents/publication/HGIOS.pdf)

ISBN 0-11-497299-0

# Part 4

## Sources of Advice and Other Related Documents

### Protecting Children – A Shared Responsibility (2000)

Guidance for Health Professionals in Scotland on roles and responsibilities in Child Protection.

[www.scotland.gov.uk/library2/doc11/pcsr-00.asp](http://www.scotland.gov.uk/library2/doc11/pcsr-00.asp)

ISBN 0-7480-8272-7

### Protecting children – A Shared Responsibility (1998)

Guidance on inter-agency co-operation.

[www.scotland.gov.uk/library/documents-w3/pch-00.htm](http://www.scotland.gov.uk/library/documents-w3/pch-00.htm)

ISBN 0-11-495908-0

### ACPOS Youth Strategy (undated)

Sets out the Scottish Police Service's principles for engagement with children and young people.

[www.scottish.police.uk/main/acpos/ACPOS\\_Youth\\_Strategy.pdf](http://www.scottish.police.uk/main/acpos/ACPOS_Youth_Strategy.pdf)

### National Care Standards – Services to Children and Young People (2002)

A series of documents setting out national standards and explaining what can be expected from various care services in Scotland.

[www.carecommission.com](http://www.carecommission.com)

### Safe and Well (2005)

ISBN 0-7559-4740-1

A handbook for staff, schools and education authorities for the care and welfare of children and child protection.

[www.scotland.gov.uk](http://www.scotland.gov.uk)

### Children and Young People Experiencing Domestic Abuse (2004)

ISBN 0-7559-4306-6

Guidance Notes for Planners

[www.scotland.gov.uk](http://www.scotland.gov.uk)

## Legislation

Children (Scotland) Act 1995

[www.opsi.gov.uk/acts/acts1995/Ukpga\\_19950036\\_en\\_1.htm](http://www.opsi.gov.uk/acts/acts1995/Ukpga_19950036_en_1.htm)

Protection of Children (Scotland) Act 2003

[www.opsi.gov.uk/legislation/scotland/acts2003/20030005.htm](http://www.opsi.gov.uk/legislation/scotland/acts2003/20030005.htm)

Criminal Law (Consolidation) (Scotland) Act 1995

[www.opsi.gov.uk/acts/acts1995/Ukpga\\_19950039\\_en\\_1.htm](http://www.opsi.gov.uk/acts/acts1995/Ukpga_19950039_en_1.htm)

Vulnerable Witnesses (Scotland) Act 2004

[www.opsi.gov.uk/legislation/scotland/acts2004/20040003.htm](http://www.opsi.gov.uk/legislation/scotland/acts2004/20040003.htm)

Children & Young Persons (Scotland) Act 1937

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