



**A quality framework
for children and young
people in need of care
and protection**

November 2022



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1. Introduction

This quality improvement framework is for community planning partnerships to support self-evaluation of services for children and young people in need of care and protection and is designed to lead to improvement in services. It places the child at the centre of self-evaluation and looks at the impact that services can have on a child's life as well as the positive outcomes that they can lead to. It can be used by the full range of services that contribute to the health and wellbeing of children, young people and their families. It is used by the Care Inspectorate's strategic scrutiny children's team and their scrutiny partners: Education Scotland; Healthcare Improvement Scotland (HIS) and His Majesty's Inspectorate of Constabulary in Scotland (HMICS), for inspections of community planning partnerships.

Throughout this guide, we use the terms 'children and young people in need of care and protection', 'children and young people' and 'care experienced children and young people'. This includes children, young people and young adults for whom community planning partnerships have corporate parenting responsibilities.

'Partnerships' are defined as groups of services and organisations who have collective responsibility for improving services for children and young people in need of care and protection. Arrangements vary across local authority areas, but may include:

- community planning partnerships
- chief officers' groups
- health and social care partnerships
- children's services planning groups
- child protection committees
- corporate parenting champions boards
- community safety partnerships.

Policy background

There has been a concerted shift in focus towards early intervention and trauma informed practice in the context of greater integration of services in Scotland.

Complemented by the Early Years Framework and the UN Convention on the Rights of the Child, **Getting it Right for Every Child (GIRFEC)** underpins the Scottish Government's early intervention agenda and provides the overarching context for the development of a co-ordinated and common approach around child protection and supporting the wellbeing of children and young people. Wellbeing sits at the heart of the GIRFEC approach and reflects the need to tailor the support and help that children, young people and their parents are offered to support their wellbeing. **The Children and Young People (Scotland) Act 2014** furthers the Scottish Government's ambition for "Scotland to be the best place to grow up in

by putting children and young people at the heart of planning and services and ensuring their rights are respected across the public sector.” The provisions of the Act are designed to place children and young people at the heart of the way services are planned and delivered.

Implicit in the framework is the understanding that, with the implementation of GIRFEC, prevention and earlier intervention will be part of the continuum of key processes. By key processes, we mean the essential tasks and actions undertaken by staff in their professional relationship with children and young people that form the bedrock of practice. These may be single or multi-agency and include the first response to concerns of harm or risk, the identification or assessment of such concerns, the various stages of planning and review, as well as the interventions that deliver the help that children and their families need.

The Promise (2020) – the national root and branch review of Scotland’s care system – sets out how change will take place over a ten-year period to 2030. Scrutiny and assurance activity continues to be informed by the foundations within the Promise (voice, family, care, people and scaffolding) for how Scotland thinks, plans and prioritises for its children and young people. This quality improvement framework also acknowledges the activity in local areas to #keepthepromise.

The publication of revised national child protection guidance in 2021, as part of the Scottish Government’s child protection improvement programme, is a further, notable policy development within which inspection activity will take place. Preventative and protective practices are further reflected in collective commitments to implement the United Nations Convention on Rights of the Child (UNCRC).

The quality improvement framework

This quality improvement framework outlines the Care Inspectorate’s expectation for the quality of service provision for children in need of care and protection across community planning partnerships. The illustrations that are provided draw on and reflect the [Health and Social Care Standards](#) published by Scottish Government in 2017 as well as other important, sector-led practice. The illustrations indicate the quality levels that inspectors expect.

The framework is arranged under six high-level overarching domains that the Care Inspectorate and other scrutiny bodies have adopted for evaluative purposes, and that are based on the European Foundation for Quality Management ([EFQM](#)) model. These are:

- key outcomes
- stakeholder’s needs
- delivery of services
- management
- leadership
- capacity for improvement

Quality indicators

Within the framework's ten areas, the 22 quality indicators cover the key aspects of the work of community planning partnerships and key strategic planning groups in the delivery of services for children, young people in need of care and protection and their families, as well as a global indicator on the capacity for continued improvement.

The quality indicators have three inter-connected aspects:

- the impact that services have upon the lives of children and young people in need of care and protection and the outcomes achieved
- the processes that support them
- the individual and collective vision and leadership of those services.

Each indicator has related illustrations describing what very good and weak practice can look like that can be used as a gauge to the quality of services. The illustrations build upon those contained within previous self-evaluation guides and reflect a greater emphasis on impact, outcomes and the experiences of children, young people and their families. These are indicative and not designed to be used as checklists. Alongside each quality indicator are potential sources of evidence partners may consider to support their findings. Again, these are not intended as a checklist but are there to guide partners in considering the sources that will provide essential evidence or help to indicate gaps. Some of the sources of evidence, such as a policy document, will not by themselves demonstrate impact and this highlights the importance of triangulating evidence sources.

The six-point scale we use when evaluating the quality of performance across the quality indicators is included at **Appendix 1**.

Using self-evaluation for planning improvement

Self-evaluation is central to continuous improvement. It is a learning process by which community planning partnerships and strategic planning groups responsible for improving services for children and young people in need of care and protection get to know how well they are doing. It can also help to identify the best way to improve their services. Opportunities to undertake joint self-evaluation should be maximised and aligned to multi-agency corporate planning and reflected in the children's service plan as well as the child protection committee and corporate parenting plans. Self-evaluation helps to establish a baseline from which to plan to improve outcomes for children, young people and families. This supports a collective commitment to set priorities for improvement that can be aligned with local business planning and provide a robust evidence base.

Establishing how to make improvements in outcomes for children, young people and families, and how to measure these, is the central aim of self-evaluation. Whatever the planning structures for taking forward improvement, the focus should be those areas of most concern that have the most negative impact upon children and young people.

This framework of quality indicators is designed to help this process by:

- encouraging partners to scrutinise and reflect upon practice and identify strengths and areas for improvement
- recognising the work partners are doing that has a positive impact on the lives of children, young people and their families and where there might be gaps
- identifying where quality needs to be maintained, where improvement is needed and where partners should be working towards achieving excellence
- allowing partners to inform stakeholders about the quality of services for children, young people and families.

Vision is key to planning for improvement and will set out what outcomes services hope to achieve to improve the safety, health, wellbeing and life chances of children and young people. It should be reflected across the community planning partnership and all partner organisations. A shared vision - understood and owned by all services - should be the driver to improvement and those undertaking the self-evaluation should be able to see a clear thread connecting vision, strategy, practice and outcomes.

After undertaking a self-evaluation, the next stage of activity is making an action plan based on what is required for change and improvement that will lead to improved outcomes for children, young people and families. Self-evaluation will also help partnerships to focus on their areas of expertise and good practice and use the learning to help staff continue to develop services and celebrate success.

An action plan is most effective if it is not overly complicated and is based on joint professional analysis and reflection, challenge and support. It should also involve partners taking informed decisions about actions that result in clear benefits for children, young people and families. Rather than a one-off activity that is done in isolation or in preparation for inspection, self-evaluation is most useful when it is embedded in ongoing partnership activity. Used effectively, it helps partners to monitor progress and continue to strive for excellence.

Self-evaluation for improvement broadly focuses on answering three key questions.

1. How good are we now?

This is the starting point in self-evaluation and is the baseline for any further development and improvement. By using performance management information, intelligence gathered from quality assurance and feedback from children, young people, families and staff, partnerships will be able to assess, analyse and evaluate how good they are currently. The use of the quality indicators will enable benchmarking of current practice alongside progress against local and national targets. Here are some examples.

- What direct impact do services have upon outcomes for children, young people and their families? Remember to differentiate between impact and outcomes. Impact is the effect or influence that actions have resulting in an outcome.
- How effective are key processes in achieving improved outcomes for children, young people and their families?
- Are we providing appropriate, accessible, high-quality services, activities or opportunities?
- Are we setting and achieving ambitious targets?
- Are we systematically improving the quality of what we offer?

Answering these questions should help partners identify strengths within and across service delivery and begin to consider areas that need to be improved or further developed.

2. How do we know?

In considering this question, services should be gathering evidence and developing auditing processes that illustrate how well the lives of children and young people are improving. There are a number of sources of evidence that can inform partners and services about the quality of their work.

Alongside each of the 22 quality indicators in this framework are potential sources of evidence partners may consider to support their findings. Self-evaluation can only be as reliable as the evidence supporting it.

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- Conclusions should be based on a range of evidence sources. It is important to test out the strength of evidence through 'triangulation' (for example, comparing one source of evidence with a second and third source). The key sources of evidence should include:
 - performance data collected nationally, locally or within a service
 - feedback from children, young people and families who have experienced services
 - direct observation and auditing of practice
 - review of a range of documentation that evidences decision-making and assessment of risk.
 - Consider evidence in context. For example, the relationship between impact and results is not always straightforward as there may be a time lag between identifying a problem, making changes and seeing results.
 - Reliable self-evaluation involves benchmarking inputs, outputs and outcomes with comparator areas.
 - Self-evaluation should be open to scrutiny and how evaluations are determined should be a transparent and credible process. For example, judgements should flow logically from the evidence. Ask such questions as 'Are we gathering evidence to assess how we are doing?', or 'Are we continuously measuring and evaluating the impact of the services, activities or opportunities that we provide on children and young people's lives?'.

3. What we plan to do next?

This question should help to take forward the learning from the self-evaluation and to develop a set of clear and tangible priorities for improvement.

- Are we using the evidence we have gathered to support our strong outcomes and change those that need more development?
- Are we using robust evidence to plan for future developments so they best meet the needs of those we work with and other stakeholders?

In taking this approach, partnerships will have the best possible opportunity to arrive at well thought out and robust conclusions. This then allows identification of the most appropriate course of action to ensure improvement is realistic, achievable and likely to impact positively upon outcomes for children and young people.

The improvement plan should be SMART (Specific, Measurable, Achievable, Realistic and Timely). For example:

- a number of improvement priorities that focus on areas for development and improvement to improve the outcomes for children, young people and families;
- the impact that improvement actions may have should be measurable;
- clearly identified responsibilities for implementation should be linked to named individuals or partnerships;

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- clear timescales with milestones, deadlines and dates for reviewing of actions if necessary; and
 - measures of success that include performance data, quality measures and stakeholders' views.

2. The quality indicators

The following framework of indicators is designed to help with evaluating and improving the quality of services for children, young people and families. This approach enables professional reflection on practice within and across services. Where best practice is identified, it should be celebrated, and shared with others. If impacts and outcomes are not as good as expected, the source of the issues can be identified by 'taking a closer look' at a particular theme or topic using some selected indicators. This proportionate approach allows a focus on areas of priority, rather than routinely covering all aspects of work.

What key outcomes have we achieved?	How well do we meet the needs of our stakeholders?	How good is our delivery of services for children, young people and families?	How good is our operational management?	How good is our leadership?
1. Key performance outcomes	2. Impact on children, young people and families	5. Delivery of key processes	6. Policy, service development and legal measures	9. Leadership and direction
<p>1.1 Improvements in the safety, wellbeing and life chances of vulnerable children and young people.</p>	<p>2.1 Impact on children and young people.</p> <p>2.2 Impact on families.</p> <p>3. Impact on staff</p> <p>3.1 Impact on staff</p> <p>4. Impact on the community</p> <p>4.1 Impact on the community</p>	<p>5.1 Recognition and response to initial concerns.</p> <p>5.2 Assessing risk and need.</p> <p>5.3 Care planning, managing risk and effective intervention.</p> <p>5.4 Involving individual children, young people and families.</p>	<p>6.1 Policies, procedures and legal measures.</p> <p>6.2 Planning and improving services.</p> <p>6.3 Participation of children, young people, families and other stakeholders.</p> <p>6.4 Performance management and quality assurance.</p> <p>6.5 Securing improvement through self-evaluation</p> <p>7. Management and support to staff</p> <p>7.1 Recruitment, deployment and joint working.</p> <p>7.2 Workforce development and support.</p> <p>8. Resources and capacity building</p> <p>8.1 Management of resources.</p> <p>8.2 Commissioning arrangements.</p>	<p>9.1 Vision, values and aims.</p> <p>9.2 Leadership of strategy and direction.</p> <p>9.3 Leadership of people and partnerships.</p> <p>9.4 Leadership of improvement and change.</p>
<p>10: What is our capacity for improvement?</p> <p>Global judgement based on an evaluation of the framework of quality indicators</p>				

What key outcomes have we achieved?

Key area 1: Performance outcomes

This section is about the real difference and benefits that services are making to the lives of children, young people and families. It focuses on the tangible results partners are achieving in relation to making and keeping children safe. It specifically looks at how well partners can demonstrate they are improving the wellbeing and life chances of children looked after at home, away from home, or in kinship care, as well as those in continuing care and care experienced young people.

Quality indicator 1.1: Improvements in the safety, wellbeing and life chances of children and young people in need of care and protection

Key factors – the extent to which partnerships are achieving:

- Improvements in the safety and wellbeing of children and young people in need of protection.
- Improvements in the wellbeing of children and young people for whom community planning partners have corporate parenting responsibilities.
- Improvements in the life chances of care experienced young people up to 26 years of age.

To what extent can we demonstrate:

- Positive and sustained trends (three years or more) in improving outcomes for children and young people in need of care and protection.
- Good use of reliable data measures is providing results that demonstrate improving outcomes over time for children in need of care and protection.
- Improved outcomes as a result of carefully gathered and analysed trend data that has been well used to understand cause and effect.
- Effective segmentation of measures has enabled the identification of improving outcomes and greater impact upon different groups of children and young people who are care experienced (including those children and young people looked after at home, away from home, in kinship care and so on).
- Key measures demonstrate that children in need of protection are increasingly safer.
- The wellbeing of looked after children and young people is improving and the outcome gap between them and their peers is narrowing.
- Data shows that the life chances of care experienced young people are improving against a wide range of outcome indicators.

Possible evidence to consider:

- Evidence from local performance management systems.
- Reports on performance using the Minimum Dataset for Child Protection Committees.
- Systems and processes in place that produce reliable and robust data gathering and analysis.
- Trend data and benchmarking against comparators.
- Perceptual data gathered from children, young people, families and other stakeholders.

Quality illustrations

Very good	Weak
<p>The partnership:</p> <ul style="list-style-type: none"> • Can demonstrate a wide range of improving trends as a result of very effective approaches to prevention and early intervention. • Can confidently show that all partners contribute to and play a key role in the strong and sustained results for children and young people in need of care and protection. • Sets and consistently achieves targets that are aspirational and challenging and aims to improve the safety and wellbeing of children and young people in need of care and protection. • Uses performance measures that show children are safer as a result of high quality responses to child protection concerns. • Can demonstrate that children in the child protection system are being protected both initially and in the longer term. • Can demonstrate that it is successfully tackling protection concerns. • Is successfully improving the wellbeing, life chances and outcomes for all groups of looked after children. • Is able to demonstrate how, as corporate parents, they are prioritising particular groups of looked after children to ensure that their wellbeing is optimised. 	<p>The partnership:</p> <ul style="list-style-type: none"> • Is unable to demonstrate a wide range of improving trends as a result of very effective approaches to prevention and early intervention. • Is unable to demonstrate with confidence that children are being kept safer as a result of limited use of quality data. • Is unable to show they are tackling the range of protection issues to minimise the longer-term risks. • Has set targets that are either unachievable and not based upon a clear understanding of what can be achieved, or they lack aspiration to significantly improve the lives of children and young people in need of care and protection. • Is fragmented in its efforts to demonstrate how positive outcomes for children and young people in need of care and protection are being achieved. Partners may over-rely on the efforts of one single agency. • Is able to show little or no trend data that reflects progress. • Rarely measures what difference service improvement makes to the wellbeing of children and young people in need of care and protection.

Very good

- Can demonstrate how care experienced young people are successfully moving into adulthood and are flourishing as young adults.
- Sets challenging targets that are both realistic and aspirational.

Weak

How well do we meet the needs of our stakeholders?

Key area 2: Impact on children, young people and families

This section is about the experience and feelings of children and young people in need of care and protection and their parents and carers. It relates to the differences services are making to their lives and their life chances in the future. It includes the impact of services in optimising the wellbeing of individual children and young people across the wellbeing indicators. It takes into account how well care leavers feel they have been supported towards adulthood by their corporate parents. It considers how children, young people and families are helped through compassionate, supportive and empathetic engagement with staff. It focuses on the extent to which families are helped to build resilience and meet their own needs.

Quality indicator 2.1: Impact on children and young people

Key factors – – the extent to which children and young people in need of protection, those who are looked after at home or away from home, in continuing care and young people leaving care:

- Feel valued, loved, fulfilled and secure.
- Feel listened to, understood and respected.
- Experience sincere human contact and enduring relationships.
- Get the best start in life and are safe, healthy, achieving, nurtured, active, respected, responsible and included.
- Have improved life chances and feel their corporate parents have the highest ambitions and aspiration for their futures. In particular around health and wellbeing, housing and accommodation, education and training, employment, youth and community justice, rights and participation.

To what extent can we demonstrate:

- Children and young people feel listened to and that their views are taken seriously when decisions are being made.
- Children and young people feel that staff have taken the time to get to know them, the impact of their previous experiences and understand their strengths and needs.
- Children and young people enjoy good relationships, built up over time, with consistent adults who they trust enough to talk to when they need help.
- Children and young people feel that they are in the right place to experience the care and support that they need.
- Children and young people's wellbeing is improving across all the wellbeing indicators.
- Care experienced young people experience enduring relationships with staff built on empathy, respect and demonstrable, ongoing commitment to support the children and young people they work with.
- Care experienced young people are increasingly moving on to successful independent adulthood.

Possible evidence to consider:

- Feedback from children and young people in all forms, including digital communication.
- Focus groups.
- Use of the GIRFEC practice model and wellbeing web.
- Recording of children’s and young people’s views in case records.
- Contributions from children and young people to child protection case conferences, core groups and looked after child reviews.
- Use of independent advocacy services.
- Endorsement of the Scottish Care Leavers Covenant.

Quality illustrations

Very good	Weak
<p>Children and young people:</p> <ul style="list-style-type: none"> • Say that they are confident that staff listen to them and take seriously what they say. • Are supported to understand and uphold their rights. • Have their rights protected and promoted and they experience no discrimination. • 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 their views. • Feel that their cultural and spiritual needs are taken fully into account. • Who are very young, or whose disabilities mean they cannot easily communicate their feelings and views, benefit from careful observation to identify and understand any changes in their health and wellbeing. • Confirm that staff know them very well and understand their needs. 	<p>Children and young people:</p> <ul style="list-style-type: none"> • Feel that staff do not always respect, listen to, or understand their views. • Are unclear about their rights. • Whose first language is not English, or who have learning or communication needs, are not always clear what is happening and do not feel that they get enough support to take part in meetings or be involved in decisions. • Who are very young, or whose disabilities mean they cannot easily communicate their feelings and views, can have their needs overlooked because not enough attention is paid to changes in their presentation and behaviour. • Consider staff have not taken the time to get to know them and build a helpful relationship with them. • Report that frequent staff changes or shortages make it hard for them to build consistent relationships with staff. • Do not feel they are receiving the support they need to be able to help themselves.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • Are empowered and enabled to be as independent and in control of their life as they want or can be. • Say that they have been given opportunities to build positive and meaningful relationships. • Say they have been supported to maintain relationships with their brothers, sisters and wider family members in a way that enhances their wellbeing. • Enjoy trusting, stable and nurturing relationships with carers and staff who know them well and provide continuity in their lives. • Know that they have someone to turn to when they are upset or troubled. • Have the best start in life and are safe, healthy, achieving, nurtured, active, respected, responsible and included. • Care experienced young people feel well supported and encouraged to achieve their potential in education, including staying on in school if this is what they want to do. • Care experienced young people feel that concerns they have about their physical and mental health are identified early and addressed quickly. • Care experienced young people feel that they have been enabled to live in their own home, enabled to fully participate in training and secure employment through the consistent support of staff. 	<ul style="list-style-type: none"> • Say they have to speak to several different people and feel that no one person is there to help them. • Do not always have the best start in life and their wellbeing needs are not always met. • Care experienced young people consider that they are not given enough support to achieve their potential in education. • Many care experienced young people feel that there is little benefit in remaining in contact with their corporate parents. • Care experienced young people are not always managing to access health services when they need them. • Care experienced young people feel that they do not always benefit from the right support to enable them to build and sustain a stable home, participate in training, or secure employment.

Quality indicator 2.2: Impact on families

Key factors – the extent to which:

- Parents and carers experience supportive, trusting relationships with services.
- Parents and carers, who find it difficult to accept help, successfully build trusting relationships with staff.
- Parents and carers demonstrate improved capability and capacity for change.
- Parents and carers experience greater confidence in parenting and increased resilience.
- Parents of looked after children and young people in permanent placements, understand their role in terms of contact and planning and work alongside staff and carers.

To what extent can we demonstrate:

- Parents and carers consider staff communicate well and that they find it easy to understand what practitioners mean and what is expected of them.
- Parents and carers are confident that staff listen to, understand and take their views seriously.
- Skilled practitioners, in children's and adult's services, establish good working relationships with parents and carers.
- Relationships between practitioners and parents/carers are based on honesty about what needs to change and why, sensitivity, a willingness to listen, and the supportive use of power.
- If a decision is taken against a parent/carer's wishes, that they are supported to understand why.
- Parents and carers are supported to build their parenting confidence through access to a range of services, including parenting programmes.
- Parents and carers work in partnership with staff to develop the flexible support that they each need to build their resilience.
- Parents whose children and young people are looked after away from home feel that their rights are respected. They feel supported by staff and carers to retain involvement in their child's life.

Possible evidence to consider:

- Regular feedback from parents.
- Focus groups.
- Recording of parent's views in case records.
- Contributions of parents to child protection case conferences, core groups and looked after child reviews.
- Evaluation of family support services and programmes.

Quality illustrations

Very good	Weak
<p>Parents and carers:</p> <ul style="list-style-type: none"> • Feel that they are listened to and staff take what they say seriously. • With learning or communication needs, 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 their views. • Have ready access to the most appropriate communication tools and translation services. • Feel that their cultural and spiritual needs are taken fully into account. • Consider that they are kept well informed about what is happening and why. • Consider that they are working in partnership with practitioners who know them well and understand their needs. • Are motivated to make important changes in their behaviour. • Have become more confident parents as a result of effective parenting programmes that were chosen specifically to meet their particular needs. • Who have benefited from effective parenting support are able and willing to help other parents through involvement in a parenting group or becoming a mentor. • Demonstrate that as a result of the help that they have received, they have become much more confident, competent parents who no longer rely on services when they face difficulties. 	<p>Parents and carers:</p> <ul style="list-style-type: none"> • Do not always feel that they are listened to and taken seriously. • Who are unable or unwilling to accept help are sometimes not given enough help to engage with the services they need. • Whose first language is not English, or who have learning or communication needs, are not always clear what is happening and do not feel they get enough support to take part in meetings or be involved in decision making. • Do not always feel that their cultural and spiritual needs are acknowledged or understood. • Do not feel well informed about what is happening and why. • Report that frequent staff changes or shortages, make it hard for them to build consistent relationships with staff. • Do not consider practitioners understand their family's needs and remain unclear about what needs to change. • Are not always able to get the specialist support they need. • Find that the help they are offered is not always appropriate to their particular needs.

Key area 3: Impact on staff

This section is about how staff think and feel about working in this partnership. It considers the extent to which staff are motivated to achieve the best possible outcomes for children, young people and families. It relates to how well they are involved in the development of services. It focuses on how well staff feel that their contribution is recognised and valued. It looks at the extent to which staff feel professionally confident and that their practice is competent.

Quality indicator 3.1: Impact on staff

Key factors – the extent to which staff:

- Feel motivated and experience positive supportive leadership at all levels.
- Feel listened to and respected by staff from their own, and other agencies.
- Participate in multi-agency approaches to improve outcomes for children, young people and families.
- Consider that they routinely have the opportunity to input to service development, policies, guidance and so on.
- Can demonstrate professional confidence and competence in day-to-day delivery of services.

To what extent can we demonstrate:

- Staff feel motivated, involved and committed.
- Staff feel confident and valued.
- Staff feel that their work contributes to improved outcomes for children and young people.
- Staff enjoy working for their service and are active partners in a range of joint work with colleagues who work in adults' as well as children's services.
- Staff consider that they are meaningfully involved in developing and improving services for children, young people and families.
- Staff are motivated to improve the impact of their practice upon the lives of children, young people and families through their learning and development.
- Staff consider that they are routinely consulted on service improvements, change and redesigns.
- Staff are confident and competent in delivering services.
- Staff routinely benefit from support and high-quality reflective supervision, personal development planning and annual reviews.

Possible evidence to consider:

- Feedback from children, young people, families, staff, managers and leaders.
- Focus groups.
- Staff surveys.
- Policies and procedures.
- Absenteeism, sickness and turnover records.
- Internal consultations, exit interviews.
- Service inspection reports.

- Community strategy.
- Use of procedures for staff suggestions and complaints.
- Agendas and minutes of meetings.
- Speaking to union representatives.
- Communication strategy.
- Initiatives to disseminate learning and good practice.

Quality illustrations

Very good	Weak
<p>Staff:</p> <ul style="list-style-type: none"> • Experience consistent levels of consultation, feel well informed and are confident that their views are listened to. • Are engaged meaningfully in the ongoing planning and development of services for children, young people and families. • Have a strong and shared commitment to protecting children, improving the wellbeing of children, young people and families and to promoting equalities. • Experience effective communication between staff across all levels of the partnership. • Routinely receive support, high quality reflective supervision and take part in a performance review process. • Are confident and competent practitioners with access to learning and education opportunities to meet their identified needs. • Have a shared understanding of the needs of children and are confidently able to apply this to their work. 	<p>Staff:</p> <ul style="list-style-type: none"> • Consider that their views are not listened to and that there is insufficient opportunity to contribute meaningfully to service development. • Are not clear about the rationale for change and are unclear about what is expected of them. • Are not confident about joint working with colleagues from other services and, as a result, partnership working is not well developed. • Are not engaged in promoting good practice or identifying areas for improvement. • Working in adults' services are not confident about their role and the role of others in the protection of children and young people in need of care and protection. • Experience varying levels of job satisfaction and their morale is low. • Feel isolated and unsupported by managers. • Have limited access to support, supervision and performance review.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • Have a clear understanding about their roles and responsibilities as well as those of their colleagues. • Are highly motivated to work together to achieve the best possible outcomes for children and young people. • Are engaged purposefully in promoting good practice and identifying areas for improvement. • Are encouraged and supported to test out new and improved ways of working and take pride in the contribution that they make. • Understand fully what they need to do within their own service and with colleagues across other services to further improve the quality and effectiveness of their work. • Experience a high level of satisfaction in working together to deliver services and are confident that they are making a difference to the lives of children, young people and families. • Feel respected, valued and that their contribution is recognised. 	<ul style="list-style-type: none"> • Experience barriers to joint working with colleagues across the partnership. • Experience difficulties in accessing education and learning opportunities and have limited scope for improving practice. • Feel that they are not deployed effectively. • Feel that they are under-valued and that their contribution is unrecognised. • Feel that ineffective or poor practice is not sufficiently challenged.

Key area 4: Impact on the community

This section is about how well the community understands, values and assists the partnership in planning and providing services to children, young people and families. It focuses on the extent to which there is public confidence in services for children, young people and families.

Quality indicator 4.1: Impact on the community

Key factor – the extent to which:

- Communities are empowered to actively participate in planning and service development.
- Communities are co-producers of local services.
- Communities are involved in a wide range of activities to support children, young people and families, such as befriending, mentoring, independent advocacy, the children's panel, fostering, kinship care and supported independent living arrangements for care experienced young people.
- Communities are confident in public services available to support families and protect children and young people in need of care and protection.

To what extent can we demonstrate:

- The views of communities are sought, heard and taken on board to inform policies, planning and service development.
- A range of approaches and mechanisms are available to support community engagement. For example, digital, written and verbal communication, including access to translation, and specialist communications tools.
- Children, young people and families are involved as co-producers of community services.
- Community members and service providers work together in an equal partnership to deliver local solutions to meet local need and tackle health and social inequalities.
- Communities have developed the capacity to successfully meet their own needs.
- Communities have an awareness and confidence in their public role to protect children from harm, neglect, abuse, bullying and exploitation.
- Suggestions, feedback and complaints procedures are readily available for the public to share their experiences of services and they are used to inform service delivery and improvements.
- The views of communities are reflected in policies, procedures and strategic documentation.
- Communities demonstrate their awareness of their role in protecting children and young people.

Possible evidence to consider:

- Local outcome improvement plan (LOIP) and locality plans.
- Children’s services plan.
- Participation or communication strategy.
- Volunteering strategy and progress reports.
- Data on the recruitment and retention of foster carers and other similar roles undertaken by community members.
- Support for self-help strategies and projects for children, young people and families.
- Support of local voluntary organisations that promote community capacity.
- Strategic consultation framework and service implementation.
- Citizen surveys.
- Action taken by services to increase social inclusion and reduce discrimination.
- Inspection reports of, for example, children’s houses
- Children’s houses relationship with their local community and community learning.

Quality illustrations

Very good	Weak
<p>In local communities:</p> <ul style="list-style-type: none"> • There are high levels of public participation in the design and delivery of local services for children, young people and families. • Children, young people and families, particularly those with protected characteristics and communities of interest, are empowered to be involved fully in co-producing services to meet their particular needs. • The delivery of local services for children, young people and families, includes opportunities for volunteers and there is a good level of volunteer retention. • Strong community capacity ensures that there are enough foster carers, independent advocates and supported carers to provide a wide range of local services to looked after children and care experienced young people. 	<p>In local communities:</p> <ul style="list-style-type: none"> • There is insufficient engagement of the community in the co-production of service development and delivery. • There is little evidence of communities of interest and minority groups being engaged in service development. The groups are not always identified or involved meaningfully in the planning of services to meet their needs. • Community groups and local voluntary organisations are not well enough supported to enable them to play a key role in building community capacity. • Crime and anti-social behaviour continue to have a detrimental impact on local communities. • There is a lack of public confidence in services for children, young people and families. Services are not viewed as matching the needs of communities.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • The public has a high degree of confidence in the effectiveness of services to meet the needs of children and young people and families. • Members of the public are alert to signs of risk and harm to children and young people and are confident in sharing their concerns with services. • Members of the public have a high degree of awareness about how to report concerns and are confident that children and young people will get the help that they need as a result. • Children, young people and families feel safe, supported and cared for in the community. They live in increasingly safer communities and young people are viewed positively. • Parents and carers have very positive experiences of bringing up children and young people in their local area. • There are positive relationships with young people living in kinship care, fostering and adoptive families and children's houses. 	<ul style="list-style-type: none"> • Members of the public are unclear about their role in the protection of children, including when and how to report their concerns about the signs of risk and harm to children and young people. • Members of the public lack confidence that any concerns they raise will be taken seriously. • Many families do not rate their local area as a good place to bring up children and help young people flourish. • Families report that they do not feel that their community provides a safe environment for children and young people. • There remain barriers to inclusion and community involvement of young people living in foster care, supported lodgings and children's houses.

How good is our delivery of key processes?

Key area 5: Delivery of key processes

This section is about processes for service delivery. It considers the effectiveness of the recognition and initial response to children and young people when there are concerns about their safety. It focuses on the timelines and quality of decision making when a child or young person needs to become looked after. It looks at how assessments of risk and need are kept up to date and relevant to changing circumstances and children and young people's development. It considers the quality of plans to reduce risk, meet needs and improve wellbeing. It takes account of the effectiveness of arrangements for reviewing progress. It looks at timely and effective intervention. It considers the extent to which children, young people and families are informed, included and enabled to take part meaningfully in assessment, planning and intervention according to their individual needs and life experience.

Quality indicator 5.1: Recognition and response to initial concerns

Key factors – the extent to which effective processes are in place to:

- Recognise and respond promptly to concerns about a child or young person's safety or wellbeing.
- Enable initial information gathering and investigation.
- Ensure appropriate consideration of legal measures.
- Support timely decision making about children and young people who need additional support or protection.

To what extent can we demonstrate:

- Systems are in place for receiving and recording information from anybody who is concerned about the safety or wellbeing of a child (including outside office hours).
- Staff, including those who work with adults, are alert to and recognise the signs that children and young people may need help or protection from harm. This includes patterns of concern over time and cumulative harm.
- If a concern is raised about a child or young person that requires further exploration, staff have the skills to gather relevant information, know what the other sources of information are and how to get them.
- Staff confidently analyse the information gathered to reach an initial assessment.
- Appropriate consideration is always given to arranging inter-agency referral discussions (IRDs) involving, as a minimum, police, health and social work.
- Inter-agency referral discussions (IRDs) always take place in response to child protection concerns including when new concerns arise for children or young people already receiving a service.
- A clear system for recording IRDs is used by partners and clearly outlines the rationale for decision making.
- Appropriate consideration is always given to conducting a forensic medical examination.
- Staff take appropriate action to ensure that no child or young person is exposed to continuing risk of harm.
- Early referral to the Children's Reporter for consideration of grounds is always considered.
- Decisions to look after children and young people are timely and made only when it is in their best interests.
- Children and families are appropriately involved and included in, and informed of, planning and decisions about their care.

Possible evidence to consider:

- Feedback from children, young people and families.
- Results of previous scrutiny.
- Relevant plans and policies.
- Information sharing guidance and protocols.
- Child protection procedures.
- Looked after children and young people procedures.
- Public information.
- Relevant performance management data.
- Review of records for individual children and young people.
- Audit of inter-agency referral discussion minutes.
- Audit and review of medical examinations.
- Observed practice.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • All staff recognise signs that a child may be at risk of harm, abuse or neglect and report any concerns promptly and appropriately. This includes concerns of risk to an unborn baby. Harm, abuse and neglect includes self-harm and forms of exploitation. • Similarly, staff recognise signs that a child or young person may present a risk to others and share concerns promptly and appropriately, clearly identifying what the concerns and risks are. They use agreed multi-agency procedures in accordance with national guidance where applicable, such as Care and Risk Management (CARM). • All staff receiving these concerns respond without delay, whether concerns are made within or outside office hours. They gather information from all relevant sources to make an initial assessment of risk. 	<ul style="list-style-type: none"> • Although staff have some knowledge about how to respond when a child needs help, they do not consistently recognise when they should further assess the situation. • Staff within a service that does not have direct responsibility for children, do not always take appropriate action when they see children in the course of their work. • Staff pass on concerns if a child seems at immediate risk, but sometimes overlook signs of neglect or harm, and are less clear about the impact of cumulative harm. • Staff are sometimes unsure about how to respond when they are concerned that a child or young person may be at risk of harm and do not always consider the risks to other children who are not the subject of the referral.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • Staff share information with others as needed to agree how to ensure public safety and the safety of the child or young person. • IRDs, involve, as a minimum, police, health and social work and include education/ELC and other services working together to ensure child safety as appropriate. • IRDs ensure that all relevant information is available and address all priority considerations. • IRDs ensure that all of the child’s needs are properly considered and appropriate decisions taken about subsequent actions. • Staff are sufficiently trained, skilled and supported to make appropriate decisions on how to proceed, based on all the available information. • Investigations are planned and conducted effectively by staff with appropriate skills and training. Advice is sought from appropriate health staff when making decisions about the need for medical examinations. • Where required, medical examinations are carried out by appropriately trained staff in a suitable child-friendly environment that meets clinical and evidential standards. Medical examinations pay attention to the child’s wider welfare and health needs, including trauma recovery, as well as forensic evidence. 	<ul style="list-style-type: none"> • Staff do not always carry out immediate risk assessments after initial referrals are made to police and social work. • Information is not consistently secured from all relevant agencies at the time of the initial referral. For example, key information may be omitted reducing the effectiveness of decision making. • Although investigations are usually planned jointly, there are occasions when a single service takes a course of action without fully considering the holistic needs of the child. • Children and families do not always receive enough helpful information about any concerns or action taken. • Early referral to the Children’s Reporter for consideration of grounds is not always considered. • There can be some delay in making decisions about whether a child or young person needs to become looked after. Poorer quality initial assessments sometimes delay decision making. • Staff raising the initial concern do not always receive feedback on the outcome of this.

Quality illustrations

Very good

- Appropriate action is taken to ensure the child's safety. There is a clear process, including recording of decision-making about the actions required during, and as a consequence of, any investigations.
- Children and families are given helpful information about any concerns and actions taken, where appropriate.
- Initial assessments always include consideration of a referral to the Children's Reporter.
- Timely decisions about children and young people becoming looked after are made using high-quality assessments about the risk of harm, or actual harm, to them and the likelihood of change in their family.

Weak

Quality indicator 5.2: Assessing risk and need

Key factors – the extent to which effective processes are in place to:

- Ensure purposeful risk assessments are completed within appropriate timescales.
- Enable thorough needs assessments.
- Support effective assessment of future needs to inform pathway planning for care experienced young people.

To what extent can we demonstrate:

- Staff properly understand the nature and assessment of risk and make sound judgements.
- Staff have a good understanding of their need to finely balance risk and need. They carefully quantify risk and identify how to best meet assessed needs.
- Assessments are based on up-to-date, recognised frameworks such as the national practice model and the risk assessment framework.
- Chronologies are used to identify patterns of significant events or experiences.
- Children, young people and parents get a good quality assessment within an appropriate timescale.
- All relevant staff, including those who work primarily with adults fully contribute to assessments.
- Assessments are used to make informed judgements about the risk to and needs of each child or young person. This includes assessment of parental capability and capacity to change.
- When comprehensive or specialist assessments are required, they are arranged and completed without delay.
- Assessments are kept up-to-date in response to any significant changes.
- Dynamic assessments with a focus on future needs are ensuring appropriate pathway plans are in place for care experienced young people.

Possible evidence to consider:

- Results of previous scrutiny.
- Review and audit of case records including scrutiny of risk assessment practice.
- Relevant performance management information.
- Feedback from children and families.
- Staff surveys.
- Observed practice.

- Relevant policy and procedures.
- Learning reviews/Significant case reviews.
- Evidence of learning from adverse outcomes and 'near misses'.
- Feedback from quality assurance activity.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • When reviewing records most assessments are evaluated as good or better. • Services share an agreed approach to assessment, which is child-centred, and ensures that all aspects of risk and need are covered. • Assessments consistently contain full, concise, relevant and accurate information. They include a chronology of family and social history. They make good use of information from different services and sources. They include analysis that makes clear links between the recorded information and plans for intervention or decisions to take further action. • Chronologies are regularly reviewed and analysed to identify concerns, or an accumulation of experiences, that may adversely affect the child or young person. • Staff consistently use clear risk assessment methods. This includes recognised, evidence-based frameworks. 	<ul style="list-style-type: none"> • When reviewing records most records are evaluated as weak or unsatisfactory. There is no agreed approach to assessment across services, or assessments are not sufficiently collaborative between professionals, children, young people and families when they should be. • There is not a consistently high standard of assessments. Too many have gaps and inaccuracies in the information and consist largely of description rather than analysis of the information presented. • Too many assessments rely heavily on self-reporting, which is not explored thoroughly enough to inform accurate assessment. • Chronologies for individual children and young people are not helpful enough in identifying events or an accumulation of experiences that may adversely affect the child or young person's wellbeing. • Pathway planning for care experienced young people is not properly addressing all the young person's needs.

Quality illustrations

Very good

- Pathway planning, including transition planning for looked after children with learning difficulties and/or disabilities, is informed by a thorough assessment addressing all the young person's needs and this is updated as circumstances change.
- Managers regularly scrutinise assessments of risk and need and review procedures and protocols and learning and development needs as a result of this.

Weak

- Managers do not regularly scrutinise assessments of risk and need.
 - There are no agreed practice standards from which to measure the quality of assessments.
-

Quality indicator 5.3: Care planning, managing risk and effective intervention

Key factors – the extent to which effective processes are in place to support practice in:

- Developing plans to meet needs and reduce risk.
- Reviewing progress, joint planning and decision-making.
- Providing timely and effective intervention to reduce risk, meet need and improve wellbeing.
- Securing stable and caring environments for children and young people.
- Enabling care experienced young people to succeed in their transition to greater independence and adulthood at a time that is right for them.

To what extent can we demonstrate:

- Comprehensive assessments are well used to develop plans that reduce risk and meet needs.
- Carefully compiled chronologies of significant events are supporting effective risk management.
- Care and risk management plans are reviewed at appropriate intervals.
- Children and young people receive help that is proportionate to risk and need.
- More specialist interventions are available for children and young people when they need them.
- Timely decision making in the lives of all looked after children and young people ensures that they live in a stable and caring environment and experience positive transitions.

Possible evidence to consider:

- Results of previous scrutiny.
- Review and audit of case records including scrutiny of risk assessment practice.
- Relevant performance management information.
- Feedback from children and families.
- Staff surveys.
- Observed practice.
- Relevant policy and procedures.
- Learning reviews.
- Evidence of learning from adverse outcomes and 'near misses'.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • The child or young person’s voice is always heard and acted on appropriately to the circumstances, in all planning processes. • Plans are of a consistently high quality and there is an individual and unique plan for every child in a family. • Plans are carefully linked to assessments of risk and need. • Staff have a very clear focus on risk of significant harm as central to effective management of risk and this is evident in the quality of the plans. • Plans clearly set out what difference the identified actions are expected to make to the child or young person’s circumstances in both the short and longer term. • Plans appropriately reflect the child or young person’s wishes about maintaining relationships with their brothers and sisters • There are clear goals and outcomes for the intervention provided. • Statutory guidance on planning and review is always adhered to. • There is sufficient independent challenge to drive progress forward within timescales appropriate to the individual child or young person. • Meetings and decisions are recorded appropriately and the record made available to all relevant staff. This ensures that they are well informed about progress and any significant changes. 	<ul style="list-style-type: none"> • The quality of plans is variable and there is not always an individual and unique plan for every child in a family. • Many care plans do not thoroughly address risk, need or the wishes of the child or young person. • Most risk assessments do not meaningfully inform risk management plans. • There are weak case recording standards in high risk cases. For example, many case records lack useful chronologies. • Plans often include actions that are too vague and timescales can be left open ended. Plans are not always explicit about what needs to change to improve the child or young person’s circumstances and wellbeing • Plans are not always clear about what will happen if the circumstances of children and young people do not improve quickly enough. • Timescales for reviewing plans are often not met. Meetings do not always take place on time or involve all relevant staff. They are frequently cancelled or re-arranged at short notice. • Staff are not held to account when actions have not been carried out as agreed, timescales have not been met, or there has been insufficient progress. • Meetings are not always recorded well or communicated promptly to all relevant staff.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • Relevant staff take responsibility and contribute effectively to planning for the child or young person. Each service has a clear understanding of their role in the plan and provides up to date information if the plan requires to be changed or amended. • Timely and effective intervention, including therapeutic help, is available for children and young people when they need them for as long as they need them. • Plans for children and young people who are looked after have a strong focus on securing nurturing and stable environments. Plans are effective in minimising periods of uncertainty for children and young people placed in temporary care placements. • Appropriate and timely support is provided to reduce the risk of placement breakdown including post-adoption support services. • Plans for care experienced young people reflect the highest ambitions and aspirations for their futures. In particular, thoroughly addressing all the six pillars of the Care Leavers Covenant namely: health and wellbeing, housing and accommodation, education and training, employment, youth and criminal justice, and rights and participation. 	<ul style="list-style-type: none"> • Appropriate interventions are not always available for children and young people when they need them. • Plans do not focus enough on securing nurturing and stable environments for individual children and young people. • There are occasions when a child or young person’s plan continues to be managed in an environment that is no longer conducive to their safety or wellbeing. • Some children experience poorer outcomes because they are accommodated too far away from their families, schools and communities. • Plans are not always effective in minimising periods of uncertainty, or in reducing the length of time children and young people live in temporary care arrangements. • There is not always an appropriate and prompt response to prevent placement breakdown. • Plans for care experienced young people are not always ambitious and aspirational and do not adequately cover the range of areas that address their identified needs. • Full and meaningful implementation of continuing care has not yet been realised resulting in few opportunities for looked after young people to plan extended and graduated transitions.

Quality illustrations

Very good

- Care experienced young people are enabled to stay in positive care placements until they are ready to move on.
- Partners actively promote and facilitate extended and graduated transitions to give looked after young people the opportunity and support to prepare for greater levels of independence whilst remaining in their care setting.

Weak

Quality indicator 5.4: Involving individual children, young people and families

The extent to which:

- The views, wishes and expectations of children, young people and families are sought, listened to and taken into account.
 - Children, young people and families participate in the key processes.
 - Information sharing procedures are in place.
 - Systems are in place to enable and support children, young people and families to give feedback and make formal complaints.
- **To what extent can we demonstrate:**
 - All children, young people and families' views are recorded and taken into account in their assessments, plans and decision making.
 - All children, young people and families are given the opportunity regularly to update their views.
 - All children, young people and families are treated in a fair and inclusive manner.
 - Information that is provided about services is helpful and transparent.
 - Children, young people and families know what information is held about them and understand that some information will need to be shared without their consent if it concerns safety.
 - Children and young people are offered independent advocacy and any supports that they need to fully participate in processes about their lives.
 - Complaints and feedback are encouraged and welcomed by the service and are acted upon within agreed timescales with the outcome being shared.

Possible evidence to consider:

- Children and young people's records.
- Policies and procedures.
- Participation strategy and annual report.
- Complaints policy and communication of the procedures.
- Records of complaints and responses.
- Information and leaflets for children, young people and families including accessible online content.
- Buildings: how does the layout, interview rooms facilities and available technology help to provide an inclusive environment and how do staff give a welcome?

- Service-level agreements with advocacy services.
- Feedback from children and young people to advocacy services.
- Advocacy annual reports.
- Inspection reports

Quality illustrations

Very good	Weak
<p>The Partnership:</p> <ul style="list-style-type: none"> • Staff across the partnership listen carefully to children, young people and families and have a thorough understanding of their views, wishes and expectations in line with health and social care standards. • Feedback on outcomes of decision-making about the lives of children and young people are appropriately communicated to the child, young person and their family. • Families, friends and wider protective networks are able to contribute effectively to decision making and have a clear understanding of the plan and their role in it. • Provides helpful information about services that is transparent and easy to understand. • Makes available an information-sharing protocol that is promoted by staff and easy to understand. • Ensures that systems are in a format and language that is right for the individual. • Views of children, young people and families are recorded and are taken into account in assessments. 	<p>The Partnership:</p> <ul style="list-style-type: none"> • Staff across the partnership listen to the views of children, young people and families, but the understanding of views, wishes and expectations are limited. • Does not give enough support to those with communication needs. • Does not accurately record what children, young people and families say, or take their views into account when decisions are made. • Does not revisit the views of children, young people and families to check that they are still accurate and relevant for their current needs. • Does not always work in an inclusive way and respect differences. • Is not consistent in how it gathers consent to share information. • Does not consider the needs of children, young people and families in planning venues for meetings. • Does not take full account of the need to involve children, young people and families in assessments. • The contribution of independent advocacy is not valued and is not routinely offered to children, young people and families.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • Revises and updates the views and expectations of children, young people and families. • Children, young people and families are treated fairly and inclusively with a respect for difference. • Children and young people are as involved as they can be in agreeing and reviewing restrictions to their independence, control and choice. • If a decision is taken against their wishes, children and young people are supported to understand why. • Information is shared by consent and is managed and recorded to reflect discussions that have taken place to explain this and any exceptions. • Includes children, young people and families in processes and in decisions about their lives. • Provides timely information about independent advocacy services in a manner that enables participation. • Actively encourages children, young people and families to share their views about the services that they receive. • Acts on information received from children, young people and families to improve their individual experiences and experiences for others. • Creates an environment where children, young people and families feel enabled to provide feedback and make a complaint where necessary. • Responds quickly to complaints and provides feedback on the outcome and any actions that have been taken. • The organisation takes responsibility for its actions and children, young people and families receive an apology if things go wrong. 	<ul style="list-style-type: none"> • Does not use feedback in a systematic way to gather views from children, young people and families. • Provides limited information about how to express dissatisfaction, making complaints or representations. • Does not respond in a timely way to children, young people or families when they have made a complaint, or they experience negative consequences as a result.

How good is our management?

Key area 6: Policy, service development and legal measures

This section is about operational and strategic management of services for children, young people and families. It considers the extent to which child protection and corporate parenting policies, procedures and the use of legal measures link to the community planning partnership's vision, values and aims and support effective joint working. It looks at the effectiveness of children's services planning, the corporate parenting arrangements and the child protection committee, in improving outcomes for children and young people. It focuses on how well children, young people, families and other stakeholders are involved in service planning and development. It gives attention to how well children's rights are promoted. It relates to the effectiveness of performance management and quality assurance in ensuring high standards of service delivery. It takes account of how well self-evaluation is informing improvement and service development.

Quality indicator 6.1: Policies, procedures and legal measures

Key factors – the extent to which:

- Shared policies reflect the vision, values and aims of the partnership, making them visible in day-to-day practice.
- Policies and procedures reflect national standards and guidance.
- Coherent policies and procedures reflect the strategic objectives and operational requirements.
- Legal measures to protect children and young people, keep them safe and secure their future are appropriately considered and promptly pursued.
- All policies comply with current equality and human rights legislation including UNCRC.

To what extent can we demonstrate:

- Policies and procedures are consistent with the strategic vision.
- Policies and procedures carefully consider and reflect local partnership arrangements to ensure cohesion across structural boundaries.
- Policies and procedures are subject to appropriate impact assessments, effectively implemented and regularly evaluated and reviewed.
- A cohesive suite of policies is in place to ensure we have no significant gaps.
- Policies and procedures reflect a focus on outcomes.
- Effective communication and management systems are in place to ensure that employees understand and implement policies and procedures.
- Single and multi-agency policies and procedures fit well together and enhance partnership working.
- Best practice is promoted through the development of new policies and procedures.
- Legal measures are always appropriately considered when making decisions about the care of children and young people.

Possible evidence to consider:

- Strategic and operational plans.
- Committee reports and board papers.
- Single and multi-agency procedure manuals.
- Guidance for employees.
- Guidance or handbooks for carers.
- Employee newsletters, bulletins and other communications.

- Individual records of children and young people subject to legal measures.
- Minutes of case conferences, reviews and other decision-making meetings for children and young people.
- Appropriate impact assessments.
- Disability equality duty policy.
- Other equality policies.

Quality illustrations

Very good	Weak
<p>The partnership:</p> <ul style="list-style-type: none"> • Has shared policies which strongly reflect its vision, values and aims. • Has comprehensive policies setting high standards for all services, reflecting local and national guidance and enhancing effective joint working. • Ensures that every policy is clearly dated and unambiguous as to its status. • Develops policy and procedures from the basis of achieving good outcomes and does so taking full account of evidence based principles. • Has policies that reflect local and national priorities. • Has procedures that set expectations for effective service delivery and implementation of GIRFEC. • Has a readily accessible suite of multi-agency procedures to guide practitioners in working together, resulting in high levels of consistency in practice. • Routinely reviews and updates multi-agency policies and procedures. • Involves practitioners in the creation and revision of policies and procedures. 	<p>The partnership:</p> <ul style="list-style-type: none"> • Has policies of variable quality that do not always link well to its vision, values and aims. • Has out-of-date policies or policies where it is not clear about whether they are in draft or fully implemented. • Does not have policies that fully reflect local and national priorities. • Develops policies as a reaction to untoward events rather than as a planned process. • Does not have procedures that clearly set expectations for effective service delivery and implementation of Getting it Right for Every Child. • Does not have a systematic approach to reviewing and updating procedures and communicating changes effectively to staff resulting in inconsistent implementation. • Meets its statutory duties to a minimum standard. There are weaknesses and inconsistencies in the way legislation and guidance are implemented. • Is inconsistent in its application of legal measures to protect children and young people, keep them safe and secure their future.

Quality illustrations

Very good

- Achieves a high level of compliance with implementation of new procedures and ensures that all stakeholders are informed of any changes or updates.
- Monitors the timely and effective use of legal measures.
- Fully considers equality and human rights issues when developing policy and procedures.
- Examines in detail a range of legislative options when considering how best to meet the needs of children with significant mental health issues, or older young people.
- Involves children, young people and families in the development and revision of policies and procedures, where appropriate.

Weak

- Fails to properly consider equality and human rights issues in developing policy and procedure.
 - Does not give sufficient consideration to all relevant strands of legislation when considering complex cases.
-

Quality indicator 6.2: Planning and improving services

Key factors – the extent to which:

- Planning arrangements, including child protection committee business planning and corporate parenting planning, are leading to improved outcomes for children, young people and care experienced young people.
- Plans reflect the partnership's strategic priorities for child protection and corporate parenting and commitment to a rights-based approach.
- Partnerships manage and mitigate emerging or potential risks to children and young people.

To what extent can we demonstrate:

- Effective mechanisms are in place for developing, implementing, reviewing and evaluating strategic and operational plans.
- Governance and reporting arrangements are clear and reflect local partnership arrangements.
- A robust service planning process ensures that strategic and operational plans are coherent with each other.
- Plans are informed by a strategic assessment of need, comprehensive data and performance information.
- Plans reflect arrangements for corporate parenting and are produced with this assumption.
- Plans are fully reflective of the rights of children and young people.
- Plans are informed by consultation with the public, children, young people and families who use services, and staff and reflect principles of participation and inclusion.
- Plans are accessible to the public and are presented in a range of user-friendly formats.
- All plans have undergone appropriate impact assessments.
- Plans lead to tangible improvement in the lives of children, young people and care experienced young people.

Possible evidence to consider:

- Local outcome improvement plan.
- Strategic needs assessment.
- Local or community profiles.
- Children’s services plan and progress updates, including corporate parenting plan and children’s rights plan.
- Child protection committee annual report and business plan.
- Governance arrangements, or terms of reference from relevant strategic planning groups and committees.
- Minutes from strategic planning groups.
- Individual service action plans, minutes of team planning events.
- Risk registers.
- Performance reports and end of year reports.
- Council and child protection committee websites.
- Communication strategy.
- Participation/engagement strategy.
- Equality impact assessments.
- Key papers to child protection committee, chief officers, elected members.

Quality illustrations

Very good	Weak
<p>The partnership:</p> <ul style="list-style-type: none"> • Ensures that children, young people, families and partners from all relevant services are meaningfully involved in the co-ordination, development and implementation of children’s services plans. • Can demonstrate a systematic approach to the development of children’s services plans. • Develops plans based on comprehensive and dynamic assessment of need. It demonstrates a sound relationship between universal, targeted and specialist services. 	<p>The partnership:</p> <ul style="list-style-type: none"> • Commitment among the partners to children’s services planning is uneven. • Has not prioritised strategic needs assessment, and as a result, plans are not well-matched to the changing needs of children, young people and care experienced young people. • Has plans that do not reflect shared priority objectives and consist of mainly single service initiatives. • Is unclear about its progress in implementing key actions, making it difficult to report publicly on achievements.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • Takes account of the GIRFEC principles and the Health and Social Care Standards when developing plans, recognising fully the specific steps needed to implement these in practice. • Ensures plans specify SMART objectives and measurable success criteria, based on a manageable number of key priorities. • Has in place clear lines of accountability to ensure that actions are achieved and progress is reported publicly. • Effectively engages staff in the development and implementation of plans so that they understand fully how their work contributes to achievement of key strategic priorities. • Ensures that plans promote equalities and demonstrate commitment to narrow the outcome gap by addressing poverty and deprivation. • Demonstrates effective joint working to improve services to children and young people in need of care and protection. • Has in place robust systems for monitoring performance and measuring improvement, as well as for regular reporting of progress to strategic groups. • Reflects a learning environment to creatively develop and improve practice. • Has effective approaches in place to jointly identify emerging or potential risk and take timely, proportionate action to mitigate this. • Adheres to national guidance and legislative requirements. 	<ul style="list-style-type: none"> • Is unsure what measurable difference children’s services planning arrangements are making to the protection and wellbeing of children, and young people. • Is unable to demonstrate the impact and outcomes of improvements in performance for children. • Has not yet developed a level of maturity to enable effective challenge when the pace of progress against agreed actions is too slow. • Does not have a systematic approach to managing risk and is not sufficiently well informed about potential or emerging risks. • Does not comply fully with national guidance or legislative requirements.

Quality indicator 6.3: Participation of children, young people, families and other stakeholders

Key factors – the extent to which:

- The rights of children and young people are promoted, respected and guide all aspects of children's services planning and delivery.
- Children, young people, families and other stakeholders are involved in service planning and development, and their views influence policy and practice.
- Approaches to communication and consultation with children, young people and families and other stakeholders are effective.

To what extent can we demonstrate:

- The rights and involvement of children, young people, families and other stakeholders is central to planning and development.
- A children's rights plan is in place and informs the approach.
- Stakeholders know how they can share their views and the methods in which they can do so are easy to locate and use.
- Stakeholders' views are reflected in planning and policy.
- Feedback is gathered at all levels of stakeholder involvement and is used to inform the development of service delivery.
- Communication methods and information technology are appropriate to stakeholder's needs.
- Communication with children and young people, families and stakeholders is done in a way that enables their participation and engagement and elicits their trust.
- Children's and young people's rights are being promoted by services.
- Complaints are used to inform areas for service improvement.

Possible evidence to consider:

- Children's services plan.
- Children's rights plan.
- Participation strategy.
- Engagement with the third sector, faith groups and other communities of interest.
- Policies and procedures.
- Strategic consultation framework and service implementation. Feedback from children, young people, families and stakeholders.

- Information and data from engagement activities and consultations.
- Staff surveys.
- Agendas and minutes of meetings.
- Evidence of feedback from children, young people and families in performance reporting.
- Inspection reports.

Quality illustrations

Very good	Weak
<p>The partnership:</p> <ul style="list-style-type: none"> • Can demonstrate that policies, planning arrangements and service developments fully reflect the views of children, young people, care experienced young people and their families. • Engages in a meaningful way with a range of stakeholders to ensure that they are active participants in all aspects of children’s services planning. • Ensures that the voice of children, young people and families comes across strongly within the children’s services plan, corporate parenting strategy and all policy making and planning processes. • Ensures that care experienced children and young people have meaningful opportunities for engagement with their corporate parents and direct access to elected members, community planning partners and senior officers. • Develops creative approaches to engage children, young people and care experienced young people to help them inform and influence the way that services are designed and delivered. 	<p>The partnership:</p> <ul style="list-style-type: none"> • Does not have an agreed strategy or clear framework for consultation and involvement. • Does not routinely seek the views of all stakeholders on the range of services. • Does not include the views of children, young people and families in key strategic plans such as the children’s services plan and the corporate parenting strategy. • Provides few opportunities for children, young people and families to discuss plans, policies and services directly with corporate parents, or elected members, community planning partners and senior officers. • Is at an early stage of developing joint policies and strategies to communicate with children, young people and other stakeholders. • Makes varied and inconsistent attempts to reduce barriers to communication and involvement. • Is tokenistic in its approach to engagement and consultation with children, young people, care experienced young people and families.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • Engagement with children, young people and families and other stakeholders is used positively to shape policies and inform plans. • Has in place effective consultation and feedback methods that minimise duplication for stakeholders. • User-friendly, inclusive communication helps ensure meaningful engagement. • Recognises and compensates for power imbalances between different stakeholders and successfully engages with all groups. • Facilitates very effective participation of children with additional support needs, including communication needs. • Can demonstrate how the views of children, young people and care experienced young people have influenced policies and service developments. • Ensures that children’s rights guide and underpin all policies, planning and service development. • Establishes successful strategies for furthering understanding of children’s rights and human rights among children and young people, staff and communities. • Ensures that children, young people and families know and understand their rights, and are helped to exercise these. • Reports annually on progress in promoting children’s rights. 	<ul style="list-style-type: none"> • Too often consults with the same stakeholders to the detriment of other key groups. • Does not routinely provide feedback to those involved in the consultation process, leaving them unsure if their views were taken seriously or made a difference. • Raises awareness of children’s rights through a range of activities, but lacks a coherent strategy to underpin this. • Is unclear about what it is trying to achieve through promotion of children’s rights. • Does not have mechanisms in place to review or report on the effectiveness of approaches to embed children’s rights in its work.

Quality indicator 6.4: Performance management and quality assurance

Key factors – the extent to which:

- Performance management and quality assurance ensures high standards of service delivery and improved outcomes for children and young people in need of care and protection.
- Quality assurance arrangements enable staff at every level to take responsibility for the quality of services.
- Best practice is routinely identified and celebrated and inconsistent or poor practice is identified and addressed. Learning is identified from both.

To what extent can we demonstrate:

- Performance measures, outcome indicators and standards are established and regularly reviewed.
- Standards are set to reflect aspirations to deliver services of the highest quality.
- Baseline management information is reported, monitored and reviewed.
- Improvement targets are used against national, local and virtual comparators.
- Targets are reviewed regularly and used to monitor trends over time.
- Performance management systems are well established and used to inform service delivery and workforce requirements.
- Management information informs quality assurance and self-evaluation activities.
- Key processes are routinely quality assured and the findings are communicated with staff.
- Strategic groups oversee multi-agency performance and hold services accountable.
- Practice management and supervision is informed by the learning from activities such as quality assurance, audits, and learning reviews/significant case reviews.
- A robust supervision framework that quality assures practice and provides oversight of decision making.

Possible evidence to consider:

- Performance management framework.
- Quality assurance framework.
- Data sets and how they are used within the organisation.
- Data reports from a range of multi-agency groups.
- Processes and procedures for quality assurance.
- Reports to and from quality assurance groups.
- Case records.
- Supervision records.
- Performance appraisals.
- Team plans.
- Annual reports.

Quality illustrations

Very good	Weak
<p>The partnership:</p> <ul style="list-style-type: none"> • Has an up to date performance framework with an agreed set of standards and outcome indicators. Progress is overseen by accountable senior leaders and elected members who provide appropriate levels of scrutiny and challenge. • Analyses data from a range of sources and uses this effectively to inform planning and service development. • Regularly monitors performance against stretching targets, taking corrective action when necessary to achieve goals. • Reports publicly and transparently on the quality of services for children and young people in need of care and protection. • Achieves consistently high standards in the quality of operational practice as a result of robust quality assurance arrangements. 	<p>The partnership:</p> <ul style="list-style-type: none"> • Has yet to develop or implement a performance and quality assurance framework. • Lacks oversight of quality assurance and performance information and is not clear about how performance has improved over time. • Does not have efficient and reliable systems from which to gather timely and accurate performance data. • Reviews a limited range of data that does not provide the level of detail needed to identify where gaps or inconsistencies in performance exist. • Focuses too much on quantitative measures without giving sufficient consideration to the quality of work. • Monitors some key processes but the measures used are not collated systematically.

Quality illustrations

Very good

- Uses performance information and quality assurance approaches to continually strive to improve the quality of work and improve outcomes for children and young people in need of care and protection.
- Supports operational managers and staff to make effective use of performance data to support continuous improvement.
- Creates a safe learning culture that is enquiring and aspirational and based on performance and self-evaluation.
- Successfully communicates to staff expectations and aspirations to deliver services of the highest quality.
- Provides high-quality, reflective supervision that supports, challenges and quality assures practice and decision making.

Weak

- Has yet to develop systems that enable staff to use performance data on a day-to-day basis to identify where improvement is needed.
 - Has made limited progress in developing a culture among all staff of high aspirations and continuous improvement.
 - Does not effectively challenge poor or inconsistent practice or engage staff sufficiently well to improve standards of practice.
 - Places limited value on the importance of robust quality assurance and supervision processes to improve standards of practice.
 - Has significant gaps in how quality assurance work is undertaken.
-

Quality indicator 6.5: Securing improvement through self-evaluation

Key factors – the extent to which self-evaluation:

- Is prioritised, planned and co-ordinated.
- Involves and takes account of the experiences of children, young people and their families.
- Informs and leads to improvement and service development.

To what extent can we demonstrate:

- Commitment to delivering excellence in services for children and their families.
- The approach to self-evaluation is guided by relevant and accredited frameworks.
- A programme of self-evaluation is in place and has been jointly agreed by partners.
- Self-evaluation priorities link to the local outcome improvement plan and identified priorities in the children's services plan.
- Performance information and quality assurance information is used to inform self-evaluation activity.
- Improved outcomes as a result of self-evaluation activity.
- Stakeholders are informed about the quality of services.
- We analyse evidence from a range of sources to support findings of self-evaluation.
- Peer reviews are undertaken and evaluations stand up to scrutiny.

Possible evidence to consider:

- Key documents such as the local outcome improvement plan, children's services plan, child protection committee plan and corporate parenting plan.
- Findings and reports arising from learning reviews and significant case reviews.
- Reports on analysis and findings of any self-evaluation activity.
- Reports on analysis and findings of any commissioned studies.
- Improvement plans and progress updates following self-evaluation.
- Committee or board reports.
- Self-evaluation framework.
- Benchmarking activity.
- Inspection and scrutiny reports.
- Learning from using the Model for Improvement and PDSA³ tests of change.

³ Plan, Do, Study, Act

Quality illustrations

Very good	Weak
<p>The partnership:</p> <ul style="list-style-type: none"> • Strives to deliver excellence in services for children, young people and their families. • Has a shared approach to self-evaluation and improvement, underpinned by relevant and accredited frameworks. • Uses accurate performance information to identify and agree key priority areas for self-evaluation. • Carefully plans and co-ordinates a cycle of single agency and joint self-evaluation based on a manageable number of priorities. • Gathers robust evidence by comparing findings from a number of different activities. • Supports and encourages staff to carry out self-evaluation as an integral part of their work, equipping them with the knowledge and skills to do this well. • Routinely gathers views and information about the experiences of children, young people and families to inform self-evaluation. • Has well-established and creative approaches that promote the involvement of children, young people and families in self-evaluation. 	<p>The partnership:</p> <ul style="list-style-type: none"> • Has low aspirations and is content for services to meet minimum standards. • Does not plan or co-ordinate self-evaluation together. • Has not developed a level of maturity in partnership working to enable a culture of support and challenge. • Does not have a good understanding of what is done well and what needs to improve. There is a reliance on external scrutiny to inform what improvements are required. • Improvement plans have an unrealistic and unmanageable number of actions and frequently changing priorities. • Performance information is of limited value in identifying areas where performance is poor or inconsistent. • Has made limited progress in developing a culture amongst all staff, of high aspirations and continuous improvement through self-evaluation. Staff are not involved in reviewing their work systematically. • Gathers the views of individual children, young people and families, but does not do this systematically enough, or as part of a self-evaluation. • Is unable to demonstrate a clear link between the views of children, young people and families and the improvements needed.

Quality illustrations

Very good

- Regularly provides feedback to children, young people and families when their views have been sought and can demonstrate how their views are influencing improvements.
- Self-evaluation focuses on outcomes and can demonstrate notable and tangible improvements in performance and the protection and wellbeing of children, young people and families.
- Communicates clear improvement priorities so that staff understand fully what they need to do to improve the quality of their work.
- Successfully builds capacity of staff to secure change and improvement through self-evaluation.

Weak

- Self-evaluation continually identifies the same areas for improvement and plans to move forward are generally ineffective.
 - Can demonstrate a few improvements in the quality and consistency of systems and processes but has limited evidence of improvements in the protection or wellbeing of children and their families.
-

Key area 7: Management and support of staff

This section is about how well partners support, manage and develop the workforce within the available resources. It focuses on the extent to which staff across services are deployed effectively to protect children and young people, keep them safe and secure their future, within the context of Getting it Right For Every Child. It looks at how well a workforce development strategy supports staff to carry out their duties competently and confidently.

Quality indicator 7.1: Recruitment, deployment and joint working

Key factors – the extent to which:

- Partners clearly identify their human resource requirements to provide a high quality service to children, young people and families.
- A joint workforce strategy is in place and takes account of current and future staffing, succession and absence planning.
- Principles of equality and fairness underpin recruitment and retention practices.
- Multi-disciplinary working and teamwork are thoroughly established in day-to-day practice with children and young people in need of care and protection.

To what extent can we demonstrate:

- There are sufficient numbers of appropriately qualified staff to deliver the agreed outcomes.
- The workforce plan addresses issues of recruitment and retention.
- Recruitment problems in specific areas are identified and addressed.
- Staffing levels are monitored and reviewed in line with changing needs over time.
- There are effective procedures in place to ensure equality and fairness in recruitment and promotion.
- Safer recruitment procedures are consistently followed.
- Staff in all settings are clear about their roles and responsibilities.
- Job descriptions are regularly reviewed and updated to support improving practice.
- Staff are effectively deployed to meet planned priorities.
- Staff across services work collaboratively to improve outcomes for children and young people in need of care and protection.
- Multi-disciplinary teams have the right mix of employees to deliver good quality services to children and young people in need of care and protection.

Possible evidence to consider:

- Recruitment and retention strategies.
- Reviews of HR policies, job descriptions, specifications.
- Training needs analyses.
- Training programmes.
- Workforce strategy.

- Staff surveys.
- Senior management meetings with staff.
- Policies for safer recruitment and their implementation.
- Grievance procedures and analysis of its use by staff.
- Evidence from relevant quality model.

Quality illustrations

Very good	Weak
<p data-bbox="165 607 416 651">The partnership:</p> <ul style="list-style-type: none"> • Has established a joint workforce strategy and has sufficient staff to provide consistently high quality services to children, young people and families. • Individually and collectively has established appropriate staffing standards to ensure the effective delivery of priorities identified for child protection and corporate parenting plans. • Has very effective human resource management frameworks. • Recruits in an open, fair and competitive manner aligning skills, aptitudes and experiences of applicants to clearly defined selection criteria. • Recruits staff with appropriate input from children, young people and families. • Within and across services, has safer recruitment procedures in place, including vetting of staff who have contact with children. There are robust arrangements in place to ensure that these are applied consistently. • Has effective procedures for investigating alleged abuse by staff and these link explicitly to disciplinary procedures. 	<p data-bbox="804 607 1050 651">The partnership:</p> <ul style="list-style-type: none"> • Does not have sufficient staffing levels, across services, to provide consistently high quality services to children, young people and families. • Has human resource policies and procedures in place, but there are gaps in staffing in key areas. • Individually and collectively has established some staffing standards, but these are not comprehensive enough to ensure the effective delivery of the priorities identified for child protection and corporate parenting plans. • Recruitment practice is variable and does not always recognise or align the skills, aptitudes and experience of applicants to clearly defined selection criteria. • Policies and practices are ineffective in recruiting and retaining staff leading to unfilled vacancies. • Is aware of the need to apply safer recruitment procedures but does not have arrangements in place to ensure that they do so consistently. • Has procedures in place for investigating alleged abuse by staff but these do not link explicitly to disciplinary procedures and are not applied consistently.

Quality illustrations

Very good

- Ensures that its multi-disciplinary teams have the necessary range of skills and professional expertise.
- Carefully deploys its staff and enables them to work well together in achieving priorities, targets and outcomes in the context of Getting it Right for Every Child.

Weak

- Has yet to develop a culture of mutual support and recognition of the contribution that staff make across services and in multi-disciplinary teams.
 - Has not given enough attention to ensuring multi-disciplinary teams have the necessary skills and professional expertise.
-

Quality indicator 7.2: Workforce development and support

Key factors – the extent to which:

- Staff are confident and can undertake their duties competently.
- A workforce planning and development strategy is in place that outlines a commitment to workforce planning, training and development for staff at all levels in line with national priorities and local targets.
- Staff are enabled to reflect upon and improve their practice through advice, guidance and supervision.

To what extent can we demonstrate:

- A sufficient, local, trauma-informed workforce that is skilled and appropriately trained to support a partnership approach to the delivery of local priorities. Learning opportunities are provided and designed to equip the workforce to undertake their roles safely and competently.
- The workforce has skills and confidence in the use of tools that promote common values, shared principles and integrated working practices to improve outcomes for children, young people and families.
- Staff training needs are audited, including those who do not work directly with children and young people.
- Appraisals are undertaken annually and are reviewed in order to ensure that staff development needs are addressed and align with local priorities.
- Staff are enabled to exercise appropriate initiative and professional judgement.
- Staff supervision at all levels enables them to reflect on their practice and to receive appropriate challenge to develop their skills and experience.

Possible evidence to consider:

- Workforce planning and development strategies across services in the partnership and commissioned services.
- Records of meetings at strategic and team level that reflect workforce planning and development.
- Training needs analyses.
- Training programmes.
- Training evaluations and evidence of using the learning they provide to review training delivery.

- Staff surveys.
- Communication strategies.
- Minutes of workforce planning and development sub-group of the child protection committee.
- Evidence of actively sourcing the best training available.
- Staff appraisal policy and procedure.
- Staff supervision policy and procedure.
- Staff training records.
- Audits of supervision records.

Quality illustrations

Very good	Weak
<p>The partnership:</p> <ul style="list-style-type: none"> • Demonstrates a clear strategy and commitment to developing and retaining staff. • New staff have a comprehensive induction, incorporating organisational and role-specific information. • Makes the workforce aware of the standards expected of them and is clear about lines of accountability in its work. • Training programmes are comprehensive and targeted to need and local priorities. • Multi-agency training is provided on a regular basis. • Ensures that training is delivered by competent trainers. • Evaluations show very positive impact and added value of training and development. • Can demonstrate that improvements in skills and working practices enhance the experiences of children, young people and their families. 	<p>The partnership:</p> <ul style="list-style-type: none"> • Does not have a strategic approach to workforce planning and development. • Does not have a robust training needs analysis. • The workforce has varying levels of confidence and competence that are not addressed or supported. • Is unclear about the impact of training and development on children, young people, families or staff. • Does not hold staff accountable for their work or equip them to fulfil their responsibilities. • Does not value or facilitate access to regular and effective support, challenge and appraisal. • Has no clear supervision policy or the frequency and quality of supervision is inconsistent. • Does not provide staff with appraisal or feedback on their performance. • Has difficulty retaining staff and working environments do not promote professional autonomy and accountability.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • Ensures that staff are supported, supervised and accountable in their work with children, young people and families. • Has supervision agreements in place and records of supervision are made and reviewed in each meeting. Supervision records are regularly audited. • Provides staff with help, advice and de-briefing when they need it and encourages staff to use their initiative and professional judgement. • Ensures staff appraisal is done systematically and is used effectively to develop the skills and competence of the workforce. • Provides a learning culture that is led and role-modelled by leaders. • Supports reflective practice-based learning and encourages staff to use innovative ways to support their learning. 	

Key area 8: Resources and capacity building

This section focuses on the joint planning and management of resources to deliver better outcomes for children and young people. It considers how effectively partners are working together to make joint decisions about the deployment of resources to meet agreed priorities. It relates to how well partners work together to commission services to improve outcomes for children and young people.

Quality indicator 8.1: Management of resources

Key factors – the extent to which:

- Partners ensure transparency of financial planning and spend.
- Partners make joint decisions about the deployment of finance and resources to meet agreed priorities.
- Partners maximise opportunities for achieving best value through sharing resources and integrating service delivery.
- Resources are deployed effectively to promote equalities and address outcome gaps.

To what extent can we demonstrate:

- Financial planning delivers statutory priorities and is based on a joint assessment of need.
- The partnership systematically shares up-to-date knowledge about financial resources.
- Financial planning and commissioning strategies are aligned.
- Priorities and long-term planning reflect a direction towards prevention and earlier intervention.
- Savings are quantified and the impact on service delivery has been assessed.
- Resources are balanced between reducing the need for specialist services and enabling existing specialist services to provide effective and efficient interventions.
- Resources are deployed effectively to promote equalities and address outcome gaps.
- The partnership deploys resources jointly and budgets are aligned where appropriate.
- Invest or spend to save opportunities are proactively sought.
- Partnerships appraise all possible options for change and demonstrate a rigorous and collaborative approach to implementing best value.

Possible evidence to consider:

- Overarching plans and governance strategies.
- Reports to key partnership strategic groups.
- Joint strategic needs assessment.
- Public and internal consultations on financial and budgetary reductions.
- Service delivery plans.
- Departmental budgetary management records.

- Public communication.
- Staff communication.

Quality illustrations

Very good	Weak
<p>The partnership:</p> <ul style="list-style-type: none"> • Has a competent overview of all financial spend in services across the partnership for children and young people. • Is fully cognisant of the capital and revenue budgets, pooled budgets, asset management and human resources. • Targets current and projected spend effectively to meet agreed priorities. • Has a framework that promotes equalities within financial planning and can demonstrate connectivity to an equalities policy. • Financial management is reported in the children’s service plan and all relevant plans and reports. • The balance of short-term and long-term planning is clearly demonstrated and is linked to service improvement and transformational change. • Is able to demonstrate a clear link to prevention and early intervention services and projected contingency savings in budget and human resources. • Can demonstrate a sustainability strategy that anticipates any changes in policy and local priorities. 	<p>The partnership:</p> <ul style="list-style-type: none"> • Cannot demonstrate an overview of spend and how it relates to planning for services for children and young people. • Strategic planning and allocation of resources are not systematically or sufficiently linked. • Limited information about financial planning is available to partners, staff or the public. • Budgets are not aligned. • Budget managers at strategic level are not well enough informed to make best use of resources. • The deployment of resources has not positively impacted upon the quality and effectiveness of services to children and young people. • Services are not reviewed regularly in order to ensure that best value is being achieved. • Does not consult with the public, or if it does, the feedback is not taken into account. • Financial planning is not visionary regarding efficiencies and focuses overly on ticking along. • Does not consider workforce planning as part of financial management and is not proactively planning contingencies.

Quality illustrations

Very good

- Has aligned its workforce planning strategy to financial planning and has an eye on succession and redundancy planning.
- Demonstrates a rigorous and collaborative approach, including consultation, to implementing best value.
- Reviews and maximises opportunities to reduce costs and avoid duplication.

Weak

Quality indicator 8.2: Commissioning arrangements

Key factors – the extent to which:

- Joint commissioning strategies are coherent with the partnership’s vision for keeping children safe and meeting their corporate parenting responsibilities.
- Commissioning analysis is supported by a joint strategic needs assessment.
- Implementation plans clearly outline how the strategic commissioning plan will be delivered in line with the Health and Social Care Standards.
- Partners review and evaluate the quality of commissioned services in partnership with providers and children, young people and families.

• To what extent can we demonstrate:

- Strategic commissioning planning across the partnership is collated and presented in one plan that is aligned to the children’s service plan.
- Legislation and guidance are used to underpin a joint commissioning analysis.
- Current service provision is reviewed to provide a gap analysis.
- Business case options have been appraised and procurement channels have been used appropriately to ensure quality assurance of the application process and equality of opportunity.
- Work has been carried out to influence the market to ensure the right providers have been made aware of the commissioning opportunity.
- Capacity has been built to provide the service and to manage the contract.
- Capacity is in place to manage provider relationships.
- Commissioned services are assessed against the initial outcomes contained in the service level agreement, including performance against agreed indicators.
- Services are evaluated and feedback is provided in a systematic way within the timeframe of annual commissioning cycles, including commissioning standards and guidance.

Possible evidence to consider:

- Resource allocation exercises and rationale for decisions to alternative providers.
- Joint strategic needs assessment.
- Provider analysis.
- Strategic commissioning plan.

- Specifications, contracts and service level agreements, purchasing plans and procurement processes.
- Contracts and contract management procedures.
- Reviews, meeting with contract manager and recording of outcomes against indicators.

Quality illustrations

Very good	Weak
<p>The partnership:</p> <ul style="list-style-type: none"> • Can provide a coherent link between commissioning strategies and planning and overall financial planning across the partnership. • Analyses current and future needs routinely across the partnership. • Takes an evidence based approach to inform selection of the range of service provision. • Can demonstrate a clear rationale behind commissioning decisions that meets the need to deliver universal, targeted and specialist services with a focus on prevention and early intervention. • Ensures commissioning processes are open and transparent and has a shared set of commissioning standards and guidelines reflecting the Health and Social Care Standards. • Can demonstrate that commissioning is increasingly done on a joint basis within the partnership. • Ensures that commissioned services are able to demonstrate effectiveness against appropriate priorities and targets in our children’s service plan and that this information is used in the contract management process. 	<p>The partnership:</p> <ul style="list-style-type: none"> • Is at an early stage of developing a commissioning approach to service delivery and does not have a strategic approach to commissioning. • Is not sufficiently informed about needs, resources, gaps and capacity. • Does not yet have a joint strategic needs assessment. • Demonstrates inconsistent approaches to commissioning and provides limited quality assurance of the commissioning process. • Undertakes commissioning to fill current gaps without undertaking a thorough gap analysis. • Cannot evidence how services align with the priorities set out in the children’s services plan. • Has not prioritised relationships with providers and as a result these relationships are under-developed. • Focuses too heavily on commissioning costs and this is detracting from whether outcomes for children and young people are being delivered. • Is slow to take appropriate action when commissioned services fail to perform well.

Quality illustrations

Very good

- Works closely with children, young people, families and providers to ensure that commissioned services are delivered effectively, safely and efficiently.
- Has high expectations about the quality of services and have systems for quality assurance to provide confidence that the needs of children and young people are met.
- Ensures that services are monitored and evaluated and necessary changes are made accordingly.
- Has an open and transparent commissioning process that takes into account views of children, young people and families and while market-based, provides equal opportunities across the relevant sector.
- Monitors and evaluates how well commissioned services are improving the safety and wellbeing of children and young people in need of care and protection.

Weak

How good is our leadership?

Key area 9: Leadership and direction

This section is about the commitment and effectiveness of leaders in striving for excellence in the quality of services to keep children safe and achieve sustained improvements in the lives of children, young people and families in need of care and protection. It focuses on collaborative leadership to plan and direct the delivery of services for children and young people linked to the shared vision, values and aims. It also examines how well leaders are driving forward improvement and change. It takes account of how well leaders are adapting to new environments and negotiating complex partnerships.

Quality indicator 9.1: Vision, values and aims

Key factors – the extent to which:

- Partners share a coherent vision to achieve the best possible outcomes for children and young people in need of care and protection.
- Partners ensure that children, young people, families and other stakeholders have been involved in developing the vision, values and aims.
- Equality and inclusion are promoted.

To what extent can we demonstrate:

- Partners place improving outcomes for people using services at the heart of their vision.
- There is a shared vision and sense of purpose for protecting children that is ambitious and challenging.
- Partners are fulfilling their corporate parenting responsibilities. They are active, strong and committed parents.
- Corporate parents have the highest ambitions and aspirations for care experienced young people's futures.
- Leaders demonstrate collective ownership of the ambitions and aspirations of the partnership.
- Partners understand and demonstrate their commitment to equalities and diversities.

Possible evidence to consider:

- Plans including the local outcome improvement plan, children's services plan, corporate parenting plan, child protection committee plan, equalities impact assessments.
- Senior managers' communication with the workforce about professional standards.
- Examples of how senior managers have communicated their vision for children and young people in need of care and protection.
- Employee surveys that demonstrate employees understand the vision.
- Communication from children, young people and families demonstrating that they have been involved in developing the vision, values and aims.
- Feedback from engagement with children, young people, families, staff and community members.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • There are clear links between the vision, values and aims of the partnership and national priorities and aspirations. • A shared vision connects key plans including the local outcome improvement plan, children’s services plan and corporate parenting plan. • Vision, values and aims in relation to protecting children are shared and clearly stated. • Leaders promote an open learning culture in which staff feel safe to challenge and are supported to raise serious concerns through whistleblowing or other procedures. • Corporate parents share high aspirations for all care experienced children and young people and are successfully fulfilling their parenting responsibilities. • Leaders ensure that children, young people, families and other stakeholders are fully involved in developing the vision and shaping the values of partners. • Partners have a strong collective ownership of ambitions and aspirations. • Partners regularly re-visit and take action to reinforce their vision, values and aims. • The work of the partnership is underpinned by a common purpose, shared values and high expectations. 	<ul style="list-style-type: none"> • The partnership’s vision for children and young people in need of care and protection lacks collective ownership and does not focus sufficiently on improving outcomes. • Key plans are not well enough connected to an overall vision. The separate aims of partners are reflected in the local outcome improvement plan and children’s services plan but there is not yet agreement about shared aims. • Joint operational plans, policies and procedures are not yet developed. • Partners do not always demonstrate the same level of commitment to agreed priorities in relation to keeping children safe. • Partners are still at an early stage in determining how best to meet their responsibilities as corporate parents. • Vision, values and aims have limited relevance to practice. • Leaders provide too few opportunities for children, young people, families and staff to become involved in developing the vision and shaping the values of the partnership. • Partners seldom refer to the vision, values and aims, or refresh these to ensure that they remain central to the overall purpose.

Quality illustrations

Very good

- All relevant plans set out clear expectations for promoting equality and inclusion.
- Leaders ensure that staff promote equality and inclusion in their day-to-day practice.

Weak

- Partners recognise the importance of their role in leading on equality and inclusion. However, this is not reflected clearly enough in an appropriate range of plans, policies and procedures.
- While leaders are committed to promoting equality and inclusion, this is not always evident in day-to-day practice across services.

Quality indicator 9.2: Leadership of strategy and direction

Key factors – the extent to which:

- Leaders collaborate to plan and direct service delivery for children and young people in need of care and protection linked to their vision, values and aims.
- Leaders set demanding but realistic targets and provide a high level of support to achieve these.
- Leaders sustain services that deliver positive outcomes at the same time as securing ongoing improvement through transforming children's services.
- Leaders jointly deploy resources to the areas of greatest need.

To what extent can we demonstrate:

- Partnerships include all the right people to meet the identified objectives of protecting children and meeting corporate parenting responsibilities.
- Working in partnership with others is actively considered where this could add value to existing or planned services.
- Leaders have a clear understanding of the local and national priorities that drive child protection and corporate parenting services.
- Leaders take a long-term view in setting the strategic direction.
- There has been consultation about future options and risks and the best way forward for child protection and corporate parenting services.
- Plans contain a proper analysis of needs and gaps and what needs to change.
- There is purposeful leadership of strategy and commissioning with sound implementation and monitoring arrangements.
- There is clarity about the resource contribution that each partner makes to the partnership and about governance.

Possible evidence to consider:

- Plans including the local outcome improvement plan, children's services plan, corporate parenting plan, child protection committee plan.
- Staff surveys.
- Committee reports and board papers.
- Minutes of partnership planning meetings.
- Stakeholder surveys.
- Third sector feedback.

- Independent sector feedback.
- Focus groups.
- Consultations.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • There is a coherent strategy and clear direction for child protection and corporate parenting services. • All relevant partners are involved in setting the direction of children's services with shared responsibility and accountability. • Partners jointly monitor the effectiveness of the approach and prioritise activities that are successful in delivering and sustaining measurable outcomes. • Leaders, senior managers, elected members and board members have a clear understanding of the local and national context and provide strong leadership and direction in developing child protection and corporate parenting services. • There are clear lines of accountability within and across organisations and planning arrangements give high priority to the most vulnerable children. • Partners identify and share resources and make transparent and evidence-based decisions on the allocation of resources to protect children and fulfil corporate parenting responsibilities. • Third sector organisations, including those who work with adults, are fully involved in the planning, development and delivery of services. 	<ul style="list-style-type: none"> • The current strategy lacks clarity and focus and is not fully representative of all relevant interests. • Accountability for leading and directing work does not represent the full range of relevant partners. • Collective accountability and responsibility for leading child protection and corporate parenting services is not well developed. • Partners have not achieved levels of trust that allow for quick and binding decision making that undermines shared determination and approach to drive improvement. • Leaders emphasise the need to protect children and fulfil their corporate parenting responsibilities in their strategic and operational plans. However, resources are still not targeted well enough to support work in this area. • Decisions about strategic deployment of resources are not transparent and do not match national guidance. • Partners do not always take opportunities to share budgets and as a result do not always have sufficient resources to deliver positive outcomes for children and young people in need of care and protection.

Quality illustrations

Very good

- Partners demonstrate sound cost benefit analysis alongside a clear rationale for what needs to change and what should remain the same.
- Leaders successfully steer services through the challenges associated with achieving the right balance between stability and change.
- Partners sustain what is working well for children, young people and families whilst leading change for improvement.

Weak

- Partnerships with third sector organisations are not well enough developed to maximise the support available to children and families.
 - There is limited analysis of the risks and benefits of change.
 - Leaders lose focus on improving outcomes when faced with difficult decisions about reducing costs.
 - Leadership is focused more on making changes within individual organisations than on delivering change through working together.
-

Quality indicator 9.3: Leadership of people and partnerships

Key factors – the extent to which:

- Services have built leadership capacity across the workforce, secured positive working relationships and developed successful partnerships.
- A positive ethos and culture enhances key partnerships and enhances a supportive working environment for all staff.
- Work is appropriately delegated and staff are successfully empowered to work effectively together to improve outcomes for children and young people in need of care and protection.
- Collaborative working is promoted to achieve high levels of performance.

To what extent can we demonstrate:

- Partners model an effective approach to developing leaders and future leaders.
- Leaders help people to retain their focus on delivering key objectives and targets.
- Leaders regularly review the 'health' of their partnerships and how well they are working.
- Leaders promote shared responsibility for outcomes at all levels.
- Leaders, senior managers, elected members and board members are visible to the workforce.
- Leaders communicate well with stakeholders and staff at all levels.
- Managers identify and promote talent.
- Managers empower practitioners to work creatively to improve the outcomes of the children and young people most in need of care and protection.
- Decision making is carefully delegated and managers understand the limits of their delegated authority.
- Leaders ensure that staff at all levels are successfully supported to work collaboratively across services, sharing their knowledge and skills for the benefit of children and young people in need of care and protection.

Possible evidence to consider:

- Communication with staff and stakeholders.
- Staff surveys.
- Stakeholder surveys.
- Staff focus groups.

- Quality and standards reports.
- Inspection reports.
- Partnership improvement objectives.
- Progress reports on improvement objectives.
- Learning and development plans.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • Leaders adopt appropriate leadership styles and demonstrate strong leadership across partner organisations to motivate staff to provide the best child protection and corporate parenting services. • Leaders foster a culture of collaborative working where management teams work closely and purposefully with each other. • Leaders promote an empowering culture where staff at all levels, in all partner organisations, understand their contribution to protecting children and to fulfilling their corporate parenting responsibilities. • Leaders make very good use of their collective knowledge and skills to make a positive impact for the children and young people in need of care and protection. • Leaders enable staff to be confident in exercising their initiative, taking responsibility and adopting lead roles. • Leaders are visible and have a high personal profile with staff across services. • Leaders employ a range of very effective methods to communicate directly with staff. 	<ul style="list-style-type: none"> • There are gaps in the range of skills within leadership teams that impact on their overall effectiveness. • Leaders, senior managers, elected members and board members do not demonstrate a consistently clear view of their leadership role. • Leaders are not always successful in gaining the full commitment of stakeholders to protect children and fulfil their corporate parenting responsibilities. • There is an insufficient commitment to collaborative working despite an emphasis on the importance of effective working relationships. • There are important gaps in leadership to motivate others and there is a culture of dependency that inhibits staff at all levels from exercising initiative. • Leaders are reluctant to be open about the challenges that they face and to problem solve together. • Leaders have very limited direct contact with staff. • Leaders' communication methods fail to engage staff or energise them to take on new ways of working together. • Leaders are seen as distant and resistant to challenge.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • Leaders are accessible and responsive when challenged and held in high regard by stakeholders. • Leaders ensure that staff have opportunities to jointly develop skills and learn from each other. • Leaders value and encourage staff and recognise and celebrate their achievements. • Leaders exemplify the high performance expected from staff in delivering high quality services through strong and purposeful teamwork. • Leaders promote an ethos of teamwork and have established a climate of professional collaboration at all levels. • Leaders ensure that staff understand the positive benefits of multi-agency team working and demonstrate this in their practice. • Leaders recognise achievements and celebrate success. 	<ul style="list-style-type: none"> • Leaders have not done enough to emphasise the importance of effective working relationships, or to promote collective responsibility for protecting children and fulfilling their corporate parenting responsibilities. • Although leaders emphasise the importance of team working, they have not yet done enough to ensure consistency in the quality of collaborative working. • The effectiveness of working relationships at all levels is variable. • Team working often lacks focus and has limited impact upon improving outcomes for children and young people in need of care and protection. • Leaders have not yet established a culture that is conducive to feedback on performance. • Leaders do not fully recognise and celebrate the achievements of staff.

Quality indicator 9.4: Leadership of improvement and change

Key factors – the extent to which:

- Partners are maintaining high levels of quality and promoting continuous improvement and excellence in child protection and corporate parenting services.
- Partners use a wide range of learning opportunities to drive change and improvement.
- Partners embrace whole system change to redesign services in response to the rapidly changing external environment.
- Partners are adapting to new environments and skilfully negotiating complex partnerships in order to deliver better outcomes for the children, young people and families in need of care and protection.

To what extent can we demonstrate:

- Reliable evidence about performance, outcomes and that effective practice guides strategic direction.
- Chief officers, senior managers, elected members and board members drive change for improvement in service quality and efficiency.
- Senior managers ensure that change and improvement are supported by sufficient resources.
- Change is managed well across services.
- Managers properly scrutinise performance and provide challenge.
- Local and national evidence about effective practice drives change for improvement.
- Practice is sustainably improved by feedback.
- Radical change in service models, structure, culture and management is delivering improvements in outcomes for children, young people and families in need of care and protection.

Possible evidence to consider:

- Meeting with leaders, senior managers, elected members and board members.
- Inspection reports.
- Learning from complaints.
- Service progress reviews on improvement objectives.
- Action plans following inspections, learning reviews and significant case reviews.
- Quality assurance policy.

- Standards and quality reports.
- Nationally and locally reported statistics.
- Stakeholder questionnaires.
- Staff surveys.
- Staff focus groups.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • Leaders demonstrate a commitment to and focus on improving the quality of child protection and corporate parenting services. • Leaders make very effective use of an appropriate range of relevant structured improvement models. • Leaders have created a culture of reviewing services and planning improvements. • Leaders constantly explore ways of driving up capacity for improvement through self-evaluation. • Leaders have an acute awareness of how well services are performing. • Leaders conscientiously evaluate whether or not changes to systems and practices are delivering the required results. • Leaders make sure successes act as a catalyst to implement further improvements in the quality of services and outcomes for the children and young people most in need of care and protection. • Leaders explore new ways of working through applying findings from research, service redesign, scrutiny reports, recommendations from learning reviews/significant case reviews and deaths of looked after children. 	<ul style="list-style-type: none"> • Leaders do not demonstrate a sufficiently strong focus on improving the quality of child protection and corporate parenting services. • Self-evaluation is of limited value in helping partners know how well their services are performing. • Leaders approach to improvement is insufficiently detailed or systematic to demonstrate whether planned improvements are achieved. • Partners do not readily understand when systems and practices need to be adjusted or changed. • Partners are slow to take corrective action. • Leaders and managers are aware of good practice in individual services but are not fully sighted on good practice through integrated or partnership working. • Partners rarely look outside their own services to learn from elsewhere. • Partners do not ensure the identification and dissemination of good practice. • Leaders have put in place a number of successful but time-limited initiatives. However, the learning from these is not embedded in practice change more widely.

Quality illustrations

Very good	Weak
<ul style="list-style-type: none"> • Partners are confident in adapting and embedding good practice from elsewhere. • Partners use proven improvement models and promote evidence-based approaches to change management. • Partners continually challenge themselves about traditional ways of delivering services and use their collective resources effectively. • Partners have applied recognised outcome-focused models of service redesign with success. • Partners have made notable leaps forward and are escalating the pace of change as their success in improving the lives of children and young people in need of care and protection becomes more evident. • Ambitious but achievable targets form the basis of close collaboration and joint effort between leaders across the various partnerships. • Where necessary, partners make financial savings on the basis of agreed priorities, evidence, strategic needs assessment and best value. 	<ul style="list-style-type: none"> • Changes made through joint working absorb a great deal of time and effort yet result in limited progress. • Leaders do not have an agreed joint approach to successfully delivering change. • Often, the primary focus for leaders is on the need to make financial savings rather than on improving outcomes for children and young people. • Partners do not always clearly communicate the rationale for change and do not ensure that they take staff with them. • Leaders across services do not work closely together to enhance capacity for improvement. • The pace of change is slow and progress is not always sustained.

Key area 10: What is our capacity for improvement?

This section presents an opportunity to assess a partnership's capacity for improvement. It can be used as part of a self-evaluation, or as a basis for an improvement plan, including following an inspection. Central to this indicator is the confidence with which a partnership's capacity for change can be reliably demonstrated based on the evidence and evaluations across the quality indicator framework. In reaching a judgement, partners will need to take account of enablers of improvement in children's services: strategic approach; leadership and governance; engaging and supporting the workforce; engaging partners; creating the right environment; encouraging innovation; and managing resources.

Partners will also need to consider their collective ability to anticipate change, to manage risk and contingency plans and to maintain their commitment to delivering excellent outcomes for children, young people and families. Issues that will influence this will include: national drivers; budgetary pressures; political, structural and policy changes, as well as organisational culture. What each partnership is able to demonstrate will vary across the key factors and this will be useful in establishing a baseline for improvement and also in identifying the level of support that the partnership may need to secure the improvements.

Quality indicator 10: Capacity for improvement

Key factors – the extent to which:

Partnerships are able to:

- self-assess accurately.
- self-evaluate to secure improvement.
- develop strategic priorities.
- implement strategic priorities.
- evaluate progress towards achieving improvement.

Possible evidence to consider:

- Effective approaches to quality improvement and previous responses to scrutiny findings and evaluations.
- Self-evaluation is rigorous and robust, involves all partners, staff and stakeholders and drives long term plans to improve outcomes for children and families.
- The voice of children, young people and families is heard and their views and participation are central to improvement planning.
- Strategic priorities are developed together with local partners, staff and stakeholders.
- Plans contain clear and robust measurable actions.
- Partners have a clear vision for implementing change and the capacity and resources to implement required improvements.
- Performance data captures improved outcomes for children, young people and families.
- Service users support tangible improvements

To what extent can we demonstrate:

- Plans, including local outcome improvement plan, children's services plan, child / public protection committee plan.
- Improvement plans and responses to scrutiny and inspection.
- Research studies, reviews and reports.
- Performance and audit reports.
- Self-evaluation and quality assurance processes.
- Surveys, including staff, stakeholder and service users.

Appendix 1: The six-point scale

The six-point scale is used when evaluating the quality of performance across quality indicators.

6 Excellent	Outstanding or sector leading
5 Very good	Major strengths
4 Good	Important strengths, with some areas for improvement
3 Adequate	Strengths just outweigh weaknesses
2 Weak	Important weaknesses – priority action required
1 Unsatisfactory	Major weaknesses – urgent remedial action required

An evaluation of **excellent** describes performance which is sector leading and supports experiences and outcomes for children, young people and their families that are of outstandingly high quality. There is a demonstrable track record of innovative, effective practice and/or very high-quality performance across a wide range of its activities and from which others could learn. We can be confident that excellent performance is sustainable and that it will be maintained.

An evaluation of **very good** will apply to performance that demonstrates major strengths in supporting positive outcomes for children, young people and their families. There are very few areas for improvement. Those that do exist will have minimal adverse impact on their experiences and outcomes. While opportunities are taken to strive for excellence within a culture of continuous improvement, performance evaluated as very good does not require significant adjustment.

An evaluation of **good** applies to performance where there is a number of important strengths which, taken together, clearly outweigh areas for improvement. The strengths will have a significant positive impact on children, young people and their families' experiences and outcomes. However, improvements are required to maximise wellbeing and ensure that people consistently have experiences and outcomes which are as positive as possible.

An evaluation of **adequate** applies where there are some strengths, but these just outweigh weaknesses. Strengths may still have a positive impact but the likelihood of achieving positive experiences and outcomes for children, young people and their families is reduced significantly because key areas of performance need to improve. Performance which is evaluated as adequate may be tolerable in particular circumstances, such as where a service or partnership is not yet fully established, or in the midst of major transition. However, continued performance at adequate level is not acceptable. Improvements must be made by building on strengths while addressing those elements that are not contributing to positive experiences and outcomes for children, young people and their families.

An evaluation of **weak** will apply to performance in which strengths can be identified but these are outweighed or compromised by significant weaknesses. The weaknesses, either individually or when added together, substantially affect children, young people and their families' experiences or outcomes. Without improvement as a matter of priority, the welfare or safety of children, young people and their families may be compromised, or their critical needs not met. Weak performance requires action in the form of structured and planned improvement by the provider or partnership with a mechanism to demonstrate clearly that sustainable improvements have been made.

An evaluation of **unsatisfactory** will apply when there are major weaknesses in critical aspects of performance which require immediate remedial action to improve experiences and outcomes for children, young people and their families. It is likely that their welfare or safety will be compromised by risks which cannot be tolerated. Those accountable for carrying out the necessary actions for improvement must do so as a matter of urgency, to ensure that children, young people and their families are protected, and their wellbeing improves without delay.

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