

Practice Improvement framework

Introduction

This Practice improvement framework relates specifically to One Adoption West Yorkshire and its work as an Adoption Agency. One Adoption West Yorkshire aims to be “an outstanding adoption service achieving positive outcomes for children without delay & recruiting adopters for children, with an excellent adoption support service for all those affected by adoption.”

In One Adoption West Yorkshire we are committed to be an agency committed to an improvement culture of learning. The agency is committed to shared values, behaviours and priorities and we believe that intelligence and feedback information are viewed as integral to professional practice.

The principal sources of feedback are:

- Views of Children and Families: The views and experiences of children & young people, adoptive parents, birth parents, adopted adults.
- Performance Data: Any statistical data that helps us judge the quality and effectiveness of our professional practice.
- Practice Wisdom and Knowledge: The practice wisdom of those staff who work with children young people and families, adoption panels & learning from disruptions .
- The findings of external and internal inspections, audits and evaluations of our practice.

Included in the above are the findings of any research and evaluation projects in which we are participating.

We use this feedback to serve two important ends. First, as evidence in local and national accountability frameworks; and secondly to support the oversight and improvement of adoption practice.

Principles (For agreement)

The principles and purpose of this Quality Assurance Framework and practice improvement framework are:

- Child and Family Centred – the focus of quality assurance will be ensuring that adopters recruited can then meet the needs of children including the development of the child, adopter’s, birth parents and adopted adults experiences of the agency and specifically the outcomes for children.

- Restorative: quality assurance will be restorative, based on working with staff and managers building relationships and collective learning. As a restorative process case quality assurance will be characterised by both high support and high challenge.
- Outcomes Based: in line with the key behaviours for children’s services the focus of quality assurance will be on outcomes, rather than processes.
- Positive: our approach to quality assurance will be positive – looking at informing and encouraging improvement and supporting the development of staff and services.
- Reflective: our quality assurance framework is designed to be about promoting reflective practice and shared learning

The Outcome Based Accountability (OBA) approach that we use follow stresses the need to make a clear distinction between population accountability and performance accountability.

- Population accountability describes the arrangements for holding high-level partnerships collectively responsible for progress towards better outcomes for all children within a given population.
- Performance accountability describes the arrangements within partner agencies for holding individual agencies (or programmes) responsible for their contribution towards the desired outcomes of the partnership. The approach described here is largely concerned with performance accountability.

The Outcomes Based Accountability (OBA) suggests that performance accountability should be organised around three simple questions:

How much did we do?

How well did we do it?

Is anyone any better off?

We believe that this is a helpful convention and wherever it makes sense, we intend to structure feedback data around these three simple questions.

We believe that our staff want a way of assessing the quality and effect of their efforts in a way that is authentic and which resonates with their professional vocation – namely to ‘make a difference’ to the lives of vulnerable children and young people.

We believe that the approach described here does this by:

- Describing in a simple set of **desired outcomes** what that difference might look like.
- Encouraging an **evidence-informed approach** to the things that are likely to make that difference.
- Agreeing a way of using **feedback** data that helps us judge if we're making that difference.
- Being clear about the **team working and partnerships** that we rely on to help us make it.

The improvement feedback referenced below is focused on performance data. But all three types of feedback inform the improvement processes outlined.

Practice improvement systems will support the following activity:

1. Reactive – Use of the best available management information to identify potential concerns and to then either maintain an awareness, investigate further or take immediate action. For our internal management at all levels.
2. Reflective - A more considered view over the quarter. Used to identify areas of practice that requires action and/or further investigation. Used for both internal consideration and then external reporting providing assurance in both contexts. A quarterly meeting focussed on practice would be an example of this for use.
3. Evaluative - Regular opportunities to bring together a broader reflection on practice and progress. Focusing on lessons learnt and sharing opportunities for improvement. For internal and partner learning and for external openness on progress within the partnership and wider Yorkshire & Humber region. Journey of the child and adoptive/birth parent reports are an example of this.

Relationship to other performance frameworks

This document focuses on One Adoption West Yorkshire practice however there is a key relationship and interplay between this and each partner local authority that also measure and monitor their performance. Therefore the feedback considered and the conclusions reached here are utilised within wider performance arrangements these include.

- Reporting to the Management Board for the 5 local authority partners in West Yorkshire Regional Adoption Agency
- Leeds City Council accountability arrangements at directorate, corporate and executive levels e.g.as host authority
- Reporting to the joint committee and partnering local authority corporate parenting boards
- Children Trust Boards in each LA

- Health and well-being boards in each LA.

Monthly information allows routine monitoring of what is important and the taking of action in response to this. The monthly reports are a key component of this focusing on important measures that underpin the quality of practice, they help managers to maintain the accuracy of the data and to focus in on emerging trends in the data. The measures used in these processes can be thought of as 'lead indicators' because they cover activities that are expected to 'lead to' desired outcomes. For example, the monthly alert would provide timely information about the number of enquires waiting because delays in responding to requests can compromise the ability to recruit adopters in a timely manner; in addition the number of children referred for early tracking can also alert the agency to rises in children requiring adoption to inform the recruitment strategy. By improving the visibility of the key features of the referral and assessment processes we are taking the first step towards understanding if these processes are working in the way that we expect. The information in these reports is invariably based on un-validated data that has been taken straight off the system. For this reason, the reports are only intended for use by managers within the service.

Quarterly processes are focused on a whole service practice improvement meetings with the management and across the 5 Local authorities as part of practice improvement meeting to drive up practice across the region with operational leads in each local authority. The meeting will reflect on progress against previously actions and from the new material highlight areas of success to be shared and areas of development for further focus and action. In addition to a standard quarterly report all timely feedback is collated with the key points distilled and shared at the meeting in relation to the appropriate stage of the child and adopter's journey and timeline. Producing a report of this sort on a quarterly basis inevitably means that there has to be compromises in terms of the quality of the data and the depth of analysis. For this reason, the report is seen an entry point for professional debate and understanding on key aspects of practice.

6 monthly reports on the Journey of the child and experiences of the adopters, birth parents and adopted adults. We should make time for reflection on our practice and on our impact on outcomes for children and young people. Taking the central key questions from the quarterly report of how much do we do, how well do we do it, and is anyone better off we will create space for reflection at regular intervals during the year. This will take the form of 6 monthly Journey of the Child & Adopters Reports. One of which will act as an annual report.

- a) The views of children, young people and their adoptive parents at different points in their journeys
- b) Feedback from practitioners gathered during training and professional development activities;
- c) Evaluative summaries of professional audits examples would include case file reviews & supervision
- d) Evaluative summaries of complaints, comments and compliments collected through the feedback system;
- e) Summaries of local research activity, analysis work and statistical returns; national research and policy releases

- f) Feedback from and progress against the recommendations of inspections and other forms of independent inquiry
- g) Progress against previously agreed actions including feedback from quarterly practice improvement workshops
- h) Data quality processes and data development priorities.

Supervision and appraisal

A key tool to ensure that we are delivering a quality service is ensuring that regular supervision of staff is undertaken. Formal supervision of staff will include case discussion, reflective practice and consideration of performance data, ensuring assessments are of good quality and undertaken in a timely manner and meet regulatory requirements. Supervision will also be used to consider the worker’s development and training needs in relation to their practice. All managers will have a quality assurance role and will read and sign all assessment reports, specifically prospective adopter’s reports, adoption placement reports, adoption placement plans and adoption support assessments and reviews. Direct observation of staff will also be undertaken as part of supervision and appraisal and staff development.

Annual appraisals will be undertaken on all staff where their practice and performance will be reviewed and any training and developmental needs will be identified and addressed.

Recording and Quality

It is the responsibility of all staff to ensure that records are accurate and up-to-date. All recording should take place within two working days of visits or events occurring. However in emergency and child protection situations recording should be completed on the same day as the event or early next morning as it is crucial that events are clearly recorded in case others need to access the records. The table below details expectations about recording and the electronic case recording system that captures the work of the agency in regard to individual children and adopters.

Role	Responsibility
Business Support Staff	Data input (what do business support staff input??) quality checks/record upkeep; extracting and sharing with teams directly from electronic reporting system. Use of validation reports to prompt follow up on data quality
Social worker	Individual caseload management; ensure all records are updated within two days of the event
Team manager	Team management; use of reports from mosaic; accurate and timely record upkeep of team; address performance in their team
Service delivery manager	Management of multiple teams; use of reports in mosaic; accurate and timely record upkeep of teams; embed use of management information within

	their teams;
Head of Service	Accurate and timely record upkeep of teams; embed performance management and the use of management within the agency;

Quantitative Data

The table below summarises the purposes of all of our proposed arrangements for reporting and summarising quantitative data. They are largely based on statistical counts and as such they answer the question “How much did we do?” By reporting on the changing status and/or destination of children and young people and adopters, some of the reports also begin to answer the question “Is anyone better off?”

Products	Status	Frequency	Purpose & use	Operational Lead	Products audience & distribution / Processes outputs
Live – Operational management information. This enables service managers to accurately brief their managers and their staff on any significant demand, recording or practice issues that relate to their team and to initiate appropriate action in response to this.					
Product – Mosaic reports	Suite of reports to be developed from the system.	Live based on information from the end of the previous working day.	Allows users to view performance statistics, drill down to detailed information, including case level. Ensures a day to day awareness of performance by operational managers.	Technical – IMT Content – CPS	Live in the system, dependent on access rights to Mosaic.
Quarterly – a combination of Leadership and management evaluation of performance and progress AND improvement processes: Practice Improvement Report: Reflects how much was done, how well it was done and what difference is made at each stage of the child and adopter’s journey. The report is an entry point for professional debate and understanding on key aspects of practice. It is supplemented by LA scorecards and data detailing LA actual and comparative performance against key indicators.					
Process – Teams performance	Development needed	Quarterly	Performance staff attend management meetings to both promote performance information and to initiate discussion on practice	HoS	As agreed with HoS
Product – Quarterly Improvement Report	Development needed	Quarterly	1.Quarterly report reflecting adopters in the assessment process; those not yet matched;	Performance team	Available for the quarterly management board To be circulated to SLT

			those linked but not matched; those matched but with no placement; those with placements awaiting order; 2.Quarterly from early tracking to ADM & then Placement order; those not yet placed – linked but not matched; those matched and not yet placed; those placed and not yet adopted with key adoption scorecard indicators and summary narrative.		prior to Management board. For wider circulation to Joint Committee & LA's
<p>Evaluation: Taking the central key questions from the quarterly report of how much did we do, how well do we do it, and is anyone better off we will create space for reflection on our practice and on our impact on outcomes for children and young people at regular intervals during the year across the region. Journey of the Child & adopters reports six monthly reports on the experience of children and families within the adoption system, based on evaluation of all sources of feedback. One of which will act as an annual report. Quarterly, Termly, six-monthly and annual – combination of Leadership and management evaluation of performance and progress AND evaluative information around trends and needs</p>					
Product – ALB & Statutory Return analysis	When required,	When required	Initial analysis of data returns made to ALB & Ofsted	Performance Service	SLT and management board
Product - Product – Journey of the Child/Adopter Report Proposed					
Product – Journey of the Child/Adopter Report	Proposed	Six Monthly	Six monthly reports on the experience of children and families within the adoption system, reflecting quality, performance and improvements.	Performance and service	SLT, management board and Joint committee

Using feedback to map, manage and measure our progress

Qualitative Data

This summarises the purposes of all of our current arrangements for gathering qualitative data and information.

The key process Quality Assurance include:

- Professional Audit: using case files and direct observation with practitioners to assess the quality of practice
- Voice and Influence: using feedback from children, families and staff to define and assess the quality of practice, services and management. Evaluation forms are made available for completion by participants after each component of the preparation training group with comments made analysed and used to make adjustments to the training where needed. The adoption preparation training will be managed by a staff group with adoptive parents who meet at regular intervals to consider the training programme for the year and use the opportunity to consider any amendments and additions to the training programme; Additional information will be collected from prospective adopters following their attendance at the Adoption Panel and also from social workers. This will capture the views of prospective adopters and social workers and how they experience the process of attending panel. Evaluation of this information will be used to make any necessary improvements to the functioning of the adoption panel and also to the adoption agency administration. An exit questionnaire will be sent to adoptive parents once the adoption order has been granted. This information will consider different parts of the adoption process and identify where there are shortfalls and where improvements can be made. An Adoption Support questionnaire will be sent to all users of the Adoption Support Service on completion and closure of the work undertaken with the family. Services provided to birth parents and other parties through commissioned services are subject to user evaluation as part of the contractual arrangements.
- Adoption Panel Quality assurance process: using feedback to assess practice and inform learning. Adoption Panel members will complete an evaluation form on each item presented to Panel, assessing the quality of the information provided and the social workers' presentation at panel. This will be collated by the panel chair and a copy of the form will be sent to the social workers' and team manager and where necessary to the service delivery manager so that feedback can be given to the social worker and inform any training or development needs. Copies of the evaluation sheets will be kept by the Panel Administrator and these will be evaluated by

on a six monthly/annual basis. The evaluation and analysis will be made available to the Adoption Panel and will be included in future annual reports.

- **Agency Decision Maker:** The role of the agency decision maker is an active one with a critical challenge of the quality of work presented to Adoption Panel and the quality of decision making by the panel itself. Regular meetings also take place between the agency decision makers across the region and panel chairs to monitor progress.
- **Wider Quality Assurance processes:** using research and other work to better use external expertise and challenge to understand quality of practice.
- **Shared Reflection and Learning:** how the information and intelligence learned through Quality Assurance are analysed, summarised, shared and used to inform improvement. For example, disruption Meetings are held as a matter of course and resulting reports are used to look at the need for any practice improvement measures with recommendations referred back for consideration by the senior management team and further discussions across the local authorities. Disruption meeting reports will also be made available to the relevant panel which agreed the original match in order for panel to consider whether there are any learning points or changes required for Adoption Panel process.

What this document outlines is common principles and expectations. These do not diminish professional needs but rather encourage that learning is shared both within the service undertaking practice improvement activity and with the wider professional community.

Audit activity

Professional Audit activity:

This will be shared at the Management Board and will be summarised in the annual report.

Professional Audit Activity Title + Aims and objectives	Service Lead & Completed by	Audit Process	Last Audit Period & Numbers Undertaken	Summary Key Findings Reports Good Practice Areas for Improvement Learning for multi-agency working	Summary Key Findings Reports Good Practice Areas for Improvement Learning for multi-

					agency working
Recruitment & assessment files; Family Finding Files; Adoption Support cases; Assess quality of practice; quality of outcome focussed plans; voice of the child and engagement of the family; reviews quality of reflective supervision & management oversight used to inform practice improvement work	Head of Service Service Delivery Managers Team Managers	Quarterly summary report (5 audits per person per quarter) (case file audit to be developed)			
Disruption Reports	Service Delivery manager Family finding	Annually for the Adoption Agency Report			
Complaints & compliments: Information from the Customer Care teams will be brought to the adoption service management meeting on a six monthly basis for consideration and evaluation. An annual collation/overview exercise will be undertaken to identify any underlying trends and practice		Annually for the Adoption agency report			

improvement recommendations.					
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