

Improving: Services to protect children

How good are we at
assessing risks and needs
to help children and families?

How good can we be?



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INTRODUCTION

This guide to self-evaluation and improvement builds upon the advice given in the publication *How well are children and young people protected and their needs met?*¹ (A summary of the quality indicators from that publication is reproduced in Appendix I). Services and staff working within a local authority area who have responsibilities for protecting children² from abuse and neglect can use this guide to help self-evaluate and improve the services provided. The guide helps users to recognise *How good are we now?* and identify what needs to be done to decide *How good can we be?*.

All staff who come into contact with children hold a responsibility for recognising when they are suffering or may be at risk of suffering harm. This guide should be used to help evaluate how well risks and needs are assessed. It is designed to be used by front-line practitioners such as social workers, public health nurses, police officers, teachers and other people working with children and families. In child protection, the process of self-evaluation and improvement requires both an assessment of how well each service is doing and an assessment of how effectively services are working together to protect children. This guide can be used within a single service as well as at inter-agency level across services, for example, by a local child protection committee.

The guide focuses on the importance of effective communication and information sharing between staff in individual services and between services to **improve the arrangements for assessing risks and needs**. It stresses the importance of partnership with parents, carers, and children. Quality partnerships between staff, services, and with families can help to effectively assess the risks to and the needs of children. The guide is aimed at staff with varied levels of experience in self-evaluation including those who are not yet familiar with self-evaluation processes. Self-evaluation, within the overall process of planning for improvement and excellence helps identify current good practice and positive areas of impact, and identify areas for further development. The self-evaluation questions contained later in this guide have been prepared to assist in recording the assessment of strengths and areas for improvement.

Assessing risks and needs of children can be difficult and can involve many services. This guide aims to support staff to look at their practice when they need to:

- ✧ be alert to signs of abuse and **recognise** that a child needs help;
- ✧ **gather information** from all relevant services; and
- ✧ **assess** the risks to and needs of children who may be in need of protection.

1 'How well are children and young people protected and their needs met?' Self-evaluation using quality indicators, HM Inspectorate of Education 2005. <http://www.hmie.gov.uk/documents/publication/hwcpnm.pdf>

2 The term 'children' is used throughout this guide to refer to children under the age of 16 years or for young people between the ages of 16 and 18 years for whom services hold a statutory responsibility.

2. SELF-EVALUATION FOR IMPROVEMENT

- ✦ encourages staff, at all levels, to reflect upon practice and identify the strengths and areas for improvement;
- ✦ recognises the work of staff which has a positive effect on the lives of children, young people and their families;
- ✦ identifies processes and systems which need to be maintained or where improvement is needed; and
- ✦ allows services to inform stakeholders about the quality of services to protect children in the area.

When we self-evaluate, we look honestly but critically at our practice and at the services we provide with a view to improvement. Put simply, self-evaluation for improvement broadly focuses on answering two key questions about our practice:

How good are we now?

This helps us to identify our strengths and development needs in key aspects of our work and the impact our work has on children's lives.

and

How good can we be?

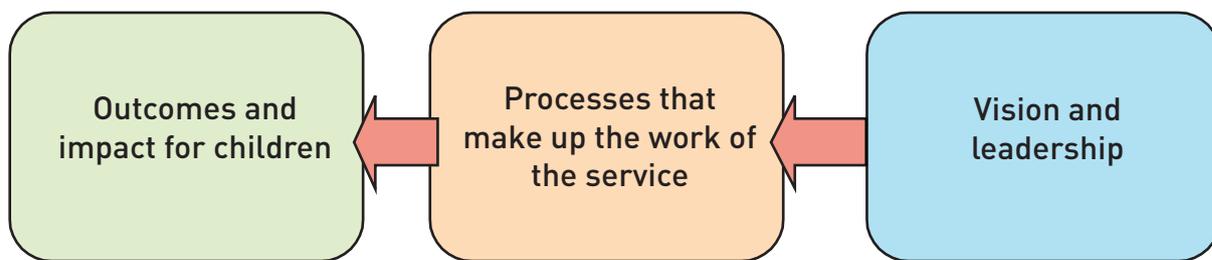
We ask this question to help us set priorities for improvement.

Self-evaluation, to be meaningful, has to focus on on-going improvements to practice. It is not a one-off activity which is done for its own sake. It is a dynamic process which goes on throughout the year. We can use self-evaluation to establish a baseline from which to plan to improve outcomes for children. We can use self-evaluation as a means of ensuring stakeholders' commitment to set priorities and change. After we have taken planned action, on-going self-evaluation helps us to monitor our progress and determine impact.

The eighteen quality indicators (QIs) in *How well are children and young people protected and their needs met?* cover the key aspects of the work of services involved in protecting children from harm. Each indicator contains illustrations which describe very good and weak practice. We can use these illustrations to check the quality of our own services.

The QIs can be viewed as a three part model consisting of three inter-related areas:

- ✦ the vision and leadership of a service;
- ✦ the processes that make up the work of the service; and
- ✦ the outcomes and impacts the service wants to have on the lives of children.

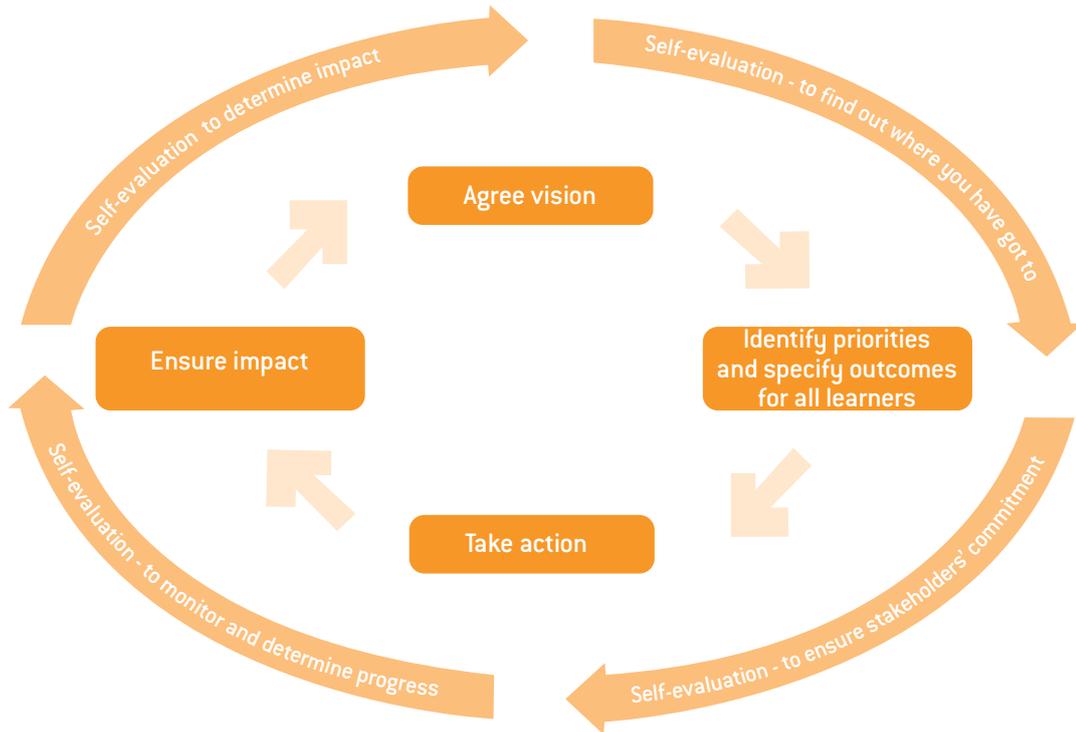


The **vision** which we have for our service should be a rounded and balanced view of what we hope to achieve for children. Our vision needs to link appropriately with the vision for Scotland's children that children should be *nurtured, safe, active, healthy, achieving, included, respected and responsible*. As part of self-evaluation, we need to be aware that our vision is the main driver for our work. However, it is not necessary to evaluate our vision on a regular basis. It should be sufficient to check annually that we have a shared vision of the kind of service we aim to provide to children and the wider community.

The starting point in self-evaluation is to ask *How good are we now?* and consider the **outcomes and impact** which our service has on children and their families. To do this we should look closely at the illustrations in selected QIs from *How well are children and young people protected and their needs met?* We need to evaluate the **direct** outcomes on children and families rather than indirect outcomes such as the policies, procedures or other materials which we have developed. Developing policies and procedures may be useful, but they are means to more important ends: improvements in keeping children safe and meeting their needs. We should then look at aspects of our work and the processes we use to achieve the outcomes and impacts we want for children and their families. In order to do this, we should select key QIs from the **processes that make up the work of our service** in the model above. By asking the question, *How good are we now?* we can begin to identify strengths and areas which we need to improve or develop further.

Improvement should be central to our self-evaluation. By asking *How good can we be?* we can set aspirational goals for improvement.

This diagram shows how self-evaluation contributes to planning for improvement.



Self-evaluation is a continuous process which we can use throughout improvement planning. We should use it to check our starting point and identify what we need to do. We should then use it to monitor our progress. And we can use self-evaluation to check out the impact of the action we have taken on the lives of children and young people.

An **improvement plan** will have:

- ✦ A small number of **improvement priorities** which focus improvements for children and young people and are **observable and measurable**.
- ✦ Clearly identified **responsibilities** for implementation linked to named individuals and/or teams.
- ✦ Clear **timescales** with milestones and deadlines.
- ✦ **Measures of success** which include performance data, quality indicators and stakeholders' views.

3. HOW TO USE THIS GUIDE

This guide uses a suite of QIs which have been selected from *How well are children and young people protected and their needs met?* to help us focus on, and improve how we **assess children's risks and needs**.

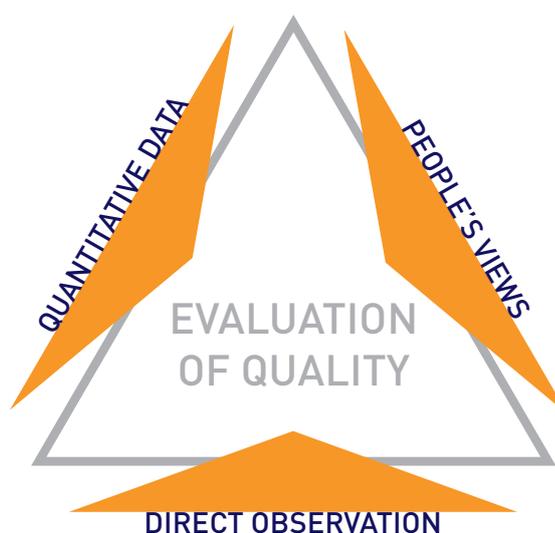
By answering the question *How good are we now?* and considering the illustrations in the chosen QIs we can identify our strengths and areas for improvement. This is key to knowing if we are doing the right things, at the right time, and, in the right way in order that the children we come into contact with are safe and their needs met. The answer to *How good are we now?* will help us to see what is working well and where we need to take steps to improve. We can then take action and monitor and determine our progress. The answer to the question *How good can we be?* will help us to check our vision in relation to the overall vision for Scotland's children and set achievable but aspirational priorities for improvement.

Effective self-evaluation is dependent upon gathering evidence from a range of sources. When gathering evidence about how well **children's risks and needs are assessed** we need to consider how well we:

- ✦ recognise a child needs help;
- ✦ gather initial information;
- ✦ jointly investigate the concern; and
- ✦ assess the risk to and needs of the child.

It is important that we have sound evidence to inform the judgements we make. We should use a wide range of evidence to help us to evaluate how we are doing. The evidence we use will include:

- ✦ **performance data** collected nationally, locally or within a service;
- ✦ surveys of **stakeholders' views**;
- ✦ direct **observation** of practice; and
- ✦ review of **a range of documentation**.



We should ask the questions *How good are we now?* and *How good can we be?* in relation to each of the QIs below.

First, we should identify our priorities and the specific key **outcomes** which we aim to achieve for children.

QI which is useful in evaluating the outcomes for children is:

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

Then, we should identify **areas of our work** in relation to **assessing risks and needs** which we need to look at more closely in order to improve the outcomes for children.

QIs which are useful to look at are:

**3.3 Recognising and assessing risks and needs; and
4.5 Development of staff.**

4 SELF-EVALUATION QUESTIONS

The following pages contain selected indicators from *How well are children and young people protected and their needs met?* This section consists of key questions which can be used to evaluate the quality of **assessing risks to and needs of children**. Each page sets out some questions, signposts to good practice and examples of good working practices in relation to the quality indicator. There is space to record strengths, areas for development and to set priorities for the future. After recording these strengths and areas for development, it is important that we prioritise the key aspects that need to be developed. These, and the actions taken to realise them, will form our **action plan** for improvement.

This table provides a summary of the quality indicators we want to consider. Next to each indicator there is a key question that we should consider in relation to **assessing risks and needs**. The table can be used to record a summary of our overall evaluation for each QI.³

Quality Indicator	Key question	Evaluation 1-6
1.3 Children are helped by the actions taken in immediate response to concerns	How confident are we that actions taken to help children are proportionate to the risks and needs identified?	
3.3 Recognising and assessing risks and needs	How alert are we to the signs that a child may need help or protection?	
3.3 Recognising and assessing risks and needs	How well do we involve all relevant services in initial discussions and decisions?	
3.3 Recognising and assessing risks and needs	How well do we follow up initial assessments with a comprehensive assessment of need and risk?	
4.5 Development of staff	How competent are we at assessing risks and needs?	

³ See appendix 2. The six-point self-evaluation scale.

Quality Indicator 1.3:

Children are helped by the actions taken in immediate response to concerns

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

Questions you should ask in relation to this QI:

- ✦ How confident are we that actions taken to help children are proportionate to the risks and needs identified?
- ✦ How effectively do we use emergency powers or orders when considering children's immediate needs, for example, where parents are unwilling or unable to accept help?

Signposts to very good practice

Actions taken to help children are proportionate to the risks and needs identified.

Children are aware of any immediate help that will be provided and they do not feel that help has been delayed inappropriately.

Families have received sufficient, timely help to keep their children safe and meet their needs.

<i>How good are we now?</i> What evidence do we have of our strengths and areas for development?	<i>How good can we be?</i> What action will we take to improve current practice?

Example of working practices which led to positive action:

A class teacher was alerted that a 13 year old girl was frequently seen in the company of older men. The class teacher discussed information with the girl's guidance teacher. Social work was contacted and immediately convened a meeting involving staff who knew the girl and were aware of her circumstances. It was agreed that the guidance teacher was the best person to sensitively bring the concerns to the girl's attention and allow her to respond. The guidance teacher subsequently supported the girl through the formal investigation by social work and the police.

Quality Indicator 3.3:

Recognising risks and needs

- ✧ Recognising a child or young person needs help

Questions you should ask in relation to this QI:

- ✧ How good is our immediate assessment of the risk of harm to children?
- ✧ How alert are all staff to the signs that children may be in need of protection from harm?

Signposts to very good practice

All staff who gather information in order to assess the risks to and needs of a child or young person ensure that they seek information from all relevant sources. This includes staff who may be involved with other family members.

All staff take immediate action to ensure that no child or young person is exposed to continued risk of harm.

When a concern is raised about or by a child or young person, an appropriate professional, preferably someone known to the child, sees them, reassures them and establishes the nature of the concern and any immediate risks.

<i>How good are we now?</i> What evidence do we have of our strengths and areas for development?	<i>How good can we be?</i> What action will we take to improve current practice?

Example of working practices which led to positive action:

Following child protection training for all Local Authority staff a council plumber visited a home and noticed that five children were living in very poor conditions. The plumber contacted social work who took prompt action to investigate and protect the children.

Quality Indicator 3.3

Recognising risks and needs

- ✦ Initial information gathering and investigation

Questions you should ask in relation to this QI:

- ✦ How well do we involve all relevant services in initial discussions and decisions?
- ✦ How well do we record the reasons for our decisions?
- ✦ How well do we consider the risks and needs of other children?
- ✦ How consistent is our response to calls about concerns across services?
- ✦ How well do we give feedback to referrers?

Signposts to very good practice

When concerns about a child are referred to the police or social work and/or the Children's Reporter, an immediate assessment of the risk of harm to that child and any other associated children is carried out.

In appropriate circumstances, there is an initial referral discussion between social work, health and police and any other relevant professional to establish what is already known about the child, young person and their family and to come to a joint decision about what further action is required.

Enquiries or joint investigations are planned jointly and these give due weight to the welfare of the child or young person and the gathering of evidence, for example during joint forensic examination.

As part of an assessment, staff consider whether to make a referral about a child or young person to the Children's Reporter with the rationale for referral/non referral being recorded.

There is a consistent response to calls about children at risk of harm whenever the call is made, and whether the call is from a professional or a member of the public.

The person raising the concern is provided with feedback as appropriate.

<p><i>How good are we now?</i> What evidence do we have of our strengths and areas for development?</p>	<p><i>How good can we be?</i> What action will we take to improve current practice?</p>

Example of working practices which led to positive action:

A member of the public phones social work concerned as she saw her next door neighbour punch his four year old child. The referrer is assured that her concerns are being taken seriously. Social work immediately contact the police and health to discuss concerns and any information already known about the family. Together they agree the appropriate action to be taken.

Quality Indicator 3.3

Recognising risks and needs

- ✧ Assessment of risks and needs

Questions you should ask in relation to this QI:

- ✧ How well do we follow up initial assessments with a comprehensive assessment of need and risk?
- ✧ How well do we ensure that the assessment is informed by and understood by other services?
- ✧ How do we ensure that the child/parents views are taken into account when carrying out assessments?

Signposts to very good practice

Staff follow up initial assessment, when relevant, with a more comprehensive assessment of risk and need in which they consider the child's or young person's circumstances and their emotional, social and developmental needs in a holistic way.

Staff describe the matters of concern and in doing so they consider the child's resilience and any other protective factors.

They assess the family's capacity to protect each individual child and meet their needs.

Staff consider the implications of all this information for the child or young person's wellbeing.

Staff identify and quantify risk, outlining the range of positive and negative outcomes of any action planned.

Based on all available information, including the views of the child or young person and his/her family, staff come to informed judgements about the needs of each child or young person.

Assessment reports:

- ✧ distinguish fact from opinion;
- ✧ identify personal and family strengths and support networks; and
- ✧ describe the needs of the child or young person.

All services who contribute to the assessment share an agreed approach and take account of changing circumstances.

How good are we now?

What evidence do we have of our strengths and areas for development?

How good can we be?

What action will we take to improve current practice?

Example of working practices which led to positive action.

While undertaking a comprehensive assessment a lead professional had an in-depth discussion with the child and all relevant family members. Family interaction in different settings was observed. The lead professional sought information and views from all relevant staff involved with the family. The lead professional then analysed all the information gathered and weighed up the significance of the information received. The outcome of the assessment was shared with other staff and this was used to plan to meet the child's needs.

Quality Indicator 4.5

Development of staff

- ✦ Professional competence and confidence
- ✦ Staff development and training

Questions you should ask in relation to this QI:

- ✦ How competent are we at recognising and assessing needs and risks?
- ✦ How effective is the training we receive?
- ✦ How well do we understand the relevant legal framework for assessing risks and needs?
- ✦ How effective is the advice and support we get when we assess risks and needs?

Signposts to very good practice

Help and advice are available when needed and staff are allowed to exercise appropriate initiative and professional judgement.

Managers in all services, through appropriate arrangements for staff appraisal, ensure that staff working with young children are competent and confident in carrying out their work. They ensure that they have appropriate knowledge, skills, experience and qualifications.

Managers ensure that their staff keep up to date with relevant legislation, research and good practice as appropriate.

Services, individually and jointly, audit training needs and plan a suitable training programme.

Induction processes and training for all staff address child protection issues. Staff are clear about their responsibilities to protect children.

<i>How good are we now?</i> What evidence do we have of our strengths and areas for development?	<i>How good can we be?</i> What action will we take to improve current practice?

Example of working practices which led to positive action:

An evaluation of inter-agency training on the “Getting Our Priorities Right” protocol demonstrated an increased awareness of the impact of parental substance misuse on children. This led to an earlier and more effective identification of children at risk and improved assessment of their needs.

APPENDIX I

THE QUALITY INDICATORS

In *How well are children and young people protected and their needs met?* a suite of eighteen quality indicators are arranged around a set of five key questions:

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

Each quality indicator is accompanied by illustrations which describe practice which is *very good* and practice which is *weak*.

No	Quality indicator	Themes
<i>1) How effective is the help children and young people get when they need it?</i>		
1.1	Children and young people are listened to, understood and respected	<ul style="list-style-type: none"> • Communication • Trust
1.2	Children and young people benefit from strategies to minimise harm	<ul style="list-style-type: none"> • Support for vulnerable children, young people and families • Children's and young people's awareness of keeping themselves safe
1.3	Children and young people are helped by the actions taken in immediate response to concerns	<ul style="list-style-type: none"> • Professionals' initial response to children, young people and families who need help
1.4	Children's and young people's needs are met	<ul style="list-style-type: none"> • Meeting needs • Reducing the longer term effects of abuse or neglect
<i>2) How effectively do agencies and the community work together to keep children and young people safe?</i>		
2.1	Public awareness of the safety and protection of children and young people	<ul style="list-style-type: none"> • Confidence of the public in services • Responses to concerns raised by members of the public about a child's or young person's safety or welfare

No	Quality indicator	Themes
3) How good is the delivery of key processes?		
3.1	Involving children, young people and their families in key processes	<ul style="list-style-type: none"> • Keeping children, young people and their families informed and involved • Addressing dissatisfaction and complaints
3.2	Information sharing and recording	<ul style="list-style-type: none"> • Appropriate sharing of information • Joint understanding of information • Management and recording of information
3.3	Recognising and assessing risks and needs	<ul style="list-style-type: none"> • Recognising a child or young person needs help • Initial information gathering and investigation • Assessment of risks and needs
3.4	Effectiveness of planning to meet needs	<ul style="list-style-type: none"> • Decision making, identifying responsibilities and meeting needs • Taking account of changing circumstances
4) How good is operational management in protecting children and young people and meeting their needs?		
4.1	Policies and procedures	<ul style="list-style-type: none"> • Range and framework of policies and link to vision, values and aims. • Managing, disseminating, evaluating and updating policies
4.2	Operational Planning	<ul style="list-style-type: none"> • Performance management and the planning framework • Development and use of management information
4.3	Participation of children, young people, families and other relevant people in policy development	<ul style="list-style-type: none"> • Seeking views of children, young people and families • Involving children, young people and families in developing services.
4.4	Recruitment and retention of staff	<ul style="list-style-type: none"> • Identifying and meeting human resource needs • Safe recruitment and retention practice
4.5	Development of staff	<ul style="list-style-type: none"> • Professional competence and confidence • Staff development and training

No	Quality indicator	Themes
5) How good is individual and collective strategic leadership?		
5.1	Values, vision and aims	<ul style="list-style-type: none"> • Clarity of vision and values • Appropriateness and clarity of aims • Promotion of positive attitudes to social and cultural diversity
5.2	Leadership and direction	<ul style="list-style-type: none"> • Joint leadership within and across agencies • Strategic deployment of resources
5.3	Leadership of people and partnerships	<ul style="list-style-type: none"> • Relationships with staff and development of teamwork across agencies • Promotion of collaborative ethos
5.4	Leadership of change and improvement	<ul style="list-style-type: none"> • Monitoring and development • Building capacity for improvement

APPENDIX II

THE SIX-POINT SELF-EVALUATION SCALE

Excellent

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

Very good

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

Good

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

Adequate

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

Weak

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

Unsatisfactory

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

APPENDIX III

LEGISLATIVE FRAMEWORK

1. **Children and Young Persons (Scotland) Act 1937**
<http://www.statutelaw.gov.uk/legResults.aspx?LegType=All%20Primary&PageNumber=3&BrowseLetter=C&NavFrom=1&activeTextDocId=1111220>
2. **Children (Scotland) Act 1995**
http://www.opsi.gov.uk/acts/acts1995/ukpga_19950036_en_1.htm
3. **Criminal Law (Consolidation) (Scotland) Act 1995**
http://www.opsi.gov.uk/acts/acts1995/Ukpga_19950039_en_1.htm
4. **European Convention on Human Rights**
<http://www.opsi.gov.uk/acts/acts1998/19980042.htm>
5. **Commissioner for Children and Young Persons (Scotland) Act 2003**
<http://www.opsi.gov.uk/legislation/scotland/acts2003/20030017.htm>
6. **Protection of Children (Scotland) Act 2003**
http://www.opsi.gov.uk/legislation/scotland/acts2003/asp_20030005_en_1
7. **Sexual Offences Act 2003**
<http://www.opsi.gov.uk/acts/acts2003/20030042.htm>
8. **Vulnerable Witnesses (Scotland) Act 2004**
<http://www.opsi.gov.uk/legislation/scotland/acts2004/20040003.htm>
9. **Protection of Children and Prevention of Sexual Offences (Scotland) Act 2005**
<http://www.opsi.gov.uk/legislation/scotland/acts2005/20050009.htm>
10. **Family Law (Scotland) Act 2006**
<http://www.opsi.gov.uk/legislation/scotland/acts2006/20060002.htm>
11. **Protection of Vulnerable Groups (Scotland) Act 2007**
<http://www.opsi.gov.uk/legislation/scotland/acts2007/20070014.htm>
12. **The Education (Additional Support for Learning) (Scotland) Act 2004**
<http://www.opsi.gov.uk/legislation/scotland/acts2004/20040004.htm>

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