

**A guide to evaluating
services for children and young people
using
quality indicators**

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Foreword

The consultation paper *A Common Approach to Inspecting Services for Children and Young People*, published in November 2005, set out proposals for developing and implementing an outcome-focused, intelligence-led and proportionate approach to the inspection of services for children and young people. It included a development and implementation timetable leading to the introduction of a coherent system of inspection by the end of 2008. That timetable gave a commitment to publish generic indicators for self-evaluation and inspection of services for children and young people by Autumn 2006. The publication of this guide fulfils that commitment.

The guide is the outcome of an extended process of discussion and consultation with providers of services for children and young people and with those inspectorates and quality assurance organisations that are involved in the evaluation of aspects of services for children and young people.

The approach to evaluation taken in this guide underlines the complementary roles of self-evaluation and inspection in quality improvement. At the heart of the guide is a set of generic quality indicators that can be drawn on for both self-evaluation and inspection. The indicators are designed to help providers of services to identify the strengths in their provision and to identify where further development or improvement is required.

The guide is not intended to replace existing approaches to evaluation in the different sectors which provide services to children and young people, but it will:

- help systematise and give greater coherence to the efforts which organisations are already making to improve quality within the context of increasing inter-agency provision of services for children and young people;
- make a major contribution to the development of a common language across service sectors for discussing issues of quality improvement;
- contribute to the development of a better common understanding of quality issues; and
- give greater coherence to self-evaluation and inspection of services for children and young people.

The generic quality indicators have been developed to help individual organisations and partners in service provision answer six high-level questions:

- 1 *What key outcomes have we achieved?*
- 2 *How well do we meet the needs of our stakeholders?*
- 3 *How good is our delivery of services for children and young people?*
- 4 *How good is our management?*
- 5 *How good is our leadership?*
- 6 *What is our capacity for improvement?*

These six questions are also central to the Scottish Executive's *Quality Improvement Framework for Integrated Services for Children, Young People and their Families*, and to other evaluation frameworks in the fields of education and social work. Inspectorates¹

¹ In this guide, for the purposes of economy of language, the term "inspectorates" is used to refer to inspectorates, regulatory agencies and commissions that carry out external evaluations or audits of the quality of service provision, or who perform a regulatory function in respect of services for children and young people. Similarly, "inspection" is used in a

involved in the evaluation of services for children and young people have given a commitment that the evaluations which they carry out will contribute information which will enable these questions to be answered. The six questions will lie at the core of the coherent system of inspection of services for children and young people that will be introduced from the end of 2008.

The guide emphasises the importance of having a clear focus on impact and outcomes when evaluating services. Self-evaluation should lead to the maintenance of high standards, to targeted action on areas needing to be improved, and to continuous improvement in pursuit of excellence. Rigorous examination of impact and of outcomes for children, young people and their families is an essential component of self-evaluation designed to achieve such improvements in service.

We commend this guide to the attention of all organisations and partnerships involved in the provision and evaluation of services for children and young people.

A handwritten signature in black ink, appearing to read 'Graham Donaldson', with a horizontal line underneath it.

Graham Donaldson
HM Senior Chief Inspector

On behalf of the Children's Services Group

generic sense to refer to the activities of such organisations. The guidance refers to the inspection functions, but not to any registration/licensing, complaint or enforcement regimes of regulatory bodies.

Acknowledgements

This guide is the product of consultation and partnership working involving a wide range of organisations and individuals.

Particular thanks are due to John McDonald and Ian McMurdo, who acted as consultants to the project, and to Len McConnell, Depute Director of Education and Children's Services, Perth and Kinross Council. Production of the guide was assisted further by feedback from personnel in a number of organisations involved in providing services to children and young people. Thanks are due to these individuals and to other colleagues who gave of their time in reading and commenting on successive drafts.

Part 1

The role of generic quality indicators

1.1 Background

The consultation paper *A Common Approach to Inspecting Services for Children and Young People*² made it clear that the generic quality indicators should contribute both to inspection and to self-evaluation processes. The paper proposed that:

- robust self-evaluation and independent inspection would complement one another as means of evaluating and improving the quality of services for children and young people;
- inspection should moderate and verify self-evaluation as part of the quality improvement cycle;
- self-evaluation should address the same high level questions as inspection, and that inspection should make use of the same set of indicators as self-evaluation; and
- inspectorates would take as inputs to their evaluations, evidence supplied by service providers of their self-evaluation processes, the outcomes from such processes and the subsequent improvements made by the service providers.

This guide is intended to contribute to the development and implementation of a coherent approach to self-evaluation and inspection within the context of inter-agency provision of services for children and young people. The structures, systems and local priorities for providing services to children and young people across Scotland differ and are likely to evolve over time. The processes and indicators described in this guide can be used flexibly according to the context of each local situation. The approach is generic enough to be customised to suit different situations and organisational structures.

The content of this guide is relevant to the wide range of organisations in the public, private and voluntary sectors that provide universal, targeted or specialist services for children and young people in areas which include: care, community safety, education, health, housing, justice, police, protection, youth, and social work.

The term “organisation” is used throughout in a broad generic sense to refer to entities which commission, manage or provide services to children and young people. These range from large corporate organisations such as NHS Boards, local authorities and police services, through departments within such organisations, to smaller private or voluntary sector organisations which provide very specialist services. Of course, these organisations do not necessarily provide services exclusively for children and young people. In such cases, the guidance relates only to those aspects of their work with children and young people. Increasingly, organisations are working together to provide well integrated services for children and young people. Organisations working in this way are referred to as “partner organisations”.

The processes and generic quality indicators described in this guide will be of most relevance to staff in organisations who have the strategic and operational management responsibilities for ensuring that services provided for children and young people are relevant to their needs, are well integrated and of the highest quality.

² Scottish Executive, October 2005

1.2 A coherent and sustained approach to improving quality

Generic guidance on developing a coherent and sustained approach to improving quality across all services for children by partner organisations is contained in the Scottish Executive publication *A Quality Improvement Framework for Integrated Services for Children, Young People and their Families*³. This framework consists of six essential elements which should characterise both the quality improvement systems of individual organisations and the processes which they use when working together to raise the quality of the services they provide in partnership.

The six elements seek to ensure that, whatever approach to quality improvement organisations use, that approach will:

- 1 articulate clearly the desired outcomes for children and young people;
- 2 set challenging targets and improvement objectives for achieving successful outcomes for all children and young people;
- 3 have, within and across services, effective arrangements for evaluating systematically and rigorously whether successful outcomes are being achieved;
- 4 ask demanding questions about the performance of services for children and young people;
- 5 use the information from evaluation to make continuous and sustained improvements to achieve successful outcomes; and
- 6 determine leadership and accountability roles for achieving improved outcomes.

Formulating and implementing the Integrated Children's Services Plan for an area is the means through which partner organisations come together to clarify intended outcomes, agree measures of performance, evaluate their performance, set improvement objectives, and devise clear strategies and timescales for delivery of these objectives. This involves each partner organisation in having individual self-evaluation processes in place through which it knows how to improve the quality of the services it provides. It also involves the partner organisations in coming together to carry out the collective self-evaluation which is necessary to agree improvement objectives and the procedures through which they will achieve these objectives. This guide is intended to help these processes. It concentrates particularly on the ways in which the use of generic quality indicators can support the implementation of elements 2, 3 and 4, above, of the *Quality Improvement Framework*.

This guidance is not intended to replace specific approaches to self-evaluation and quality improvement. Rather, it is intended to help systematise and give greater coherence to the efforts which organisations are already making to improve quality within the context of increasing inter-agency provision of services for children and young people.

³ SEED August 2005

1.3 Evaluation questions

Organisations providing services for children and young people are asked, individually and collectively, to answer **six high-level questions** (c.f. Element 4 of *A Quality Improvement Framework for Integrated Services for Children, Young People and their Families*)

- 1 ***What key outcomes have we achieved?***
- 2 ***How well do we meet the needs of our stakeholders?***
- 3 ***How good is our delivery of services for children and young people?***
- 4 ***How good is our management?***
- 5 ***How good is our leadership?***
- 6 ***What is our capacity for improvement?***

Inspectorates concerned with services for children and young people have agreed that, within the coherent system of inspection which will be introduced from the end of 2008, inspection processes should contribute information which will enable the same six questions to be answered. Answering these questions will also be at the core of the joint inspections of services for children which will be introduced as part of the coherent system of inspection.

The six high-level questions are consistent with other well-established quality improvement models currently in use in the public, private and voluntary sectors, including: Charter Mark, Investors in People, the Excellence Model of the European Foundation for Quality Management (EFQM) and aspects of ISO9000. The approach is also consistent with the principles of Best Value, the statutory framework for which is provided in the *Local Government in Scotland Act 2003*.

1.4 Indicators

A Common Approach to Inspecting Services for Children and Young People explained how three types of indicator or standards would be used in both the inspection and self-evaluation of services for children and young people. These three categories of indicator are:

- Generic quality indicators;
- Specific indicators and standards; and
- National targets and key performance improvement indicators.

Figure 1, below, shows the relationship among these three categories of indicator.

As the figure shows, in carrying out both service-specific and generic evaluations of services for children and young people, evaluators will refer to the national targets and key performance indicators when examining quantitative data on the performance of services. These indicators are particularly relevant when addressing the first two of the six high-level questions – those concerned with outcomes and impact, respectively. The figure also illustrates the fact that evaluators may wish to refer to specific indicators or standards when applying the generic quality indicators.

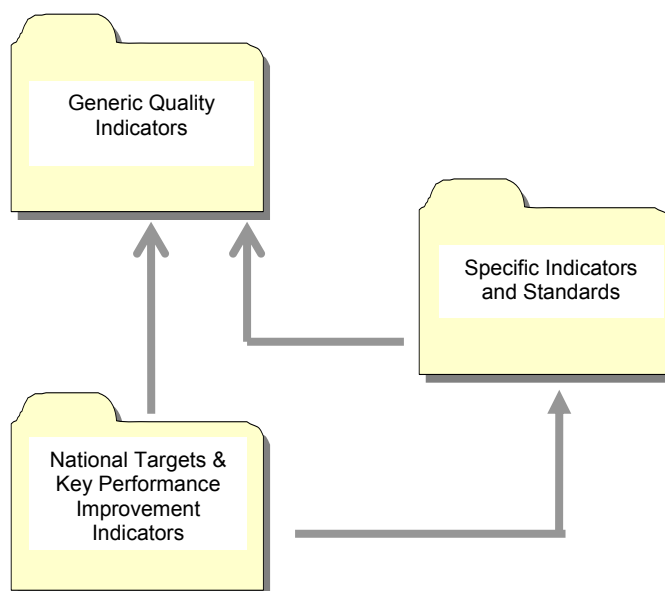


Figure 1: Relationship amongst indicators

Generic quality indicators

Generic quality indicators give focus to the collection and evaluation of evidence required to answer each of the six high-level questions. As Figure 2 on page 18 shows, the indicators are linked to key areas and the six high-level questions. The structure and design of the indicators are explained in more detail in Part 2 of this guide. The high-level questions and indicators are consistent with other widely used quality improvement models. Figure 3 on page 19 shows the links between some of these models and the six high-level questions and generic quality indicators.

Like the six high-level questions, the generic quality indicators are strategic in character. They are designed to help both internal and external evaluators inter-relate fundamental aspects of provision of services for children and young people:

- the outcomes from, and impact of, services;
- the processes used in delivering services; and
- the leadership and direction shown in providing and continually improving services.

By examining the links between these fundamental aspects, evaluators can create a holistic picture of the quality of services for children and young people and can assess the capacity of service providers to improve the quality of services.

The indicators are also designed to be used within the context of the coherent system of inspection of services for children and young people outlined in the consultation paper *A Common Approach to Inspecting Services for Children and Young People*.

They might, therefore, be used in the following ways:

- by a group of partner organisations in a given area to carry out the strategic self-evaluation as part of the process of developing an Integrated Children's Services Plan;
- by individual organisations or groups of organisations in a given sector (e.g. care, health, or youth justice) in evaluating their particular contribution to the delivery of services for children and young people in their areas of responsibility;
- by a multi disciplinary team of inspectors carrying out joint inspection of services for children and young people;
- by a single inspectorate in providing contributions to the information base which will be used to enable an intelligence-led and proportionate approach to inspection.

Used systematically by all organisations and across groups of organisations, the generic indicators will contribute to the development of a common language and shared understanding of quality issues across sectors, and will give greater coherence to both self-evaluation and inspection of services for children and young people. Part 4 explains how the generic quality indicators can be used in integrated children's services planning.

Specific indicators and standards

While the generic quality indicators should be applied by all organisations in answering the six high-level questions, there will be situations in which evaluations will have to be informed by use of specific indicators, standards or other protocols. These include indicators which are used in a specific sector such as care or health, or which have been developed to allow a particular focus, such as child protection. Use of specific indicators is most likely when answering the high-level question "How good is our delivery of services for children and young people?" The following are examples of specific indicators currently in use that have relevance to services for children and young people:

- *National Care Standards*⁴ and relevant legal regulations
- *How well are children and young people protected and their needs met? – Self-evaluation using quality indicators*⁵
- *Safe and Effective Patient Care – Generic Clinical Governance Standards*⁶
- *A Scottish Framework for Nursing in Schools*⁷
- *How good is our school? - Self-evaluation using quality indicators*⁸
- *How good is our school? – The Journey to Excellence*⁹

Where indicators or standards do not exist, other forms of guidance can indicate directions in which services can be improved, for example: *Delivering a Healthy Future – An Action Framework for Children and Young People's Health in Scotland*¹⁰.

⁴ A range of care standards published by the Scottish Executive

⁵ Published by HM Inspectorate of Education

⁶ Published by NHS Quality Improvement Scotland

⁷ Published by NHS Scotland

⁸ Published by HM Inspectorate of Education

⁹ Part 1 *Aiming for Excellence* and Part 2 *Exploring Excellence* Published by HM Inspectorate of Education, March 2006

¹⁰ A consultation paper by the Scottish Executive, April 2006

As Figure 1 on page 10 indicates, evidence collected using specific indicators can contribute to overall evaluations using the generic quality indicators. For example, in carrying out the evaluations leading to the formulation of an Integrated Children's Services Plan, partners in a local area may focus on care and health issues as part of a wider holistic review of services. If issues of care of children or young people in residential settings needed to be examined in more detail, relevant National Care Standards would be used. Alternatively, if the issues were related to care and welfare of children in schools, relevant indicators from *How good is our school?* would be used. The application of Clinical Governance Standards may be relevant to some of the health issues which arise. In a similar way, in the scoping phase of a joint inspection, inspectors will be able to draw on evidence already gathered by individual inspectorates through the application of specific indicators. Part 3.5 exemplifies in more detail how this process can work in practice.

National targets and key performance improvement indicators

It is essential that in both self-evaluation and inspection of services for children and young people the quality of outcomes and the impact of services are rigorously evaluated. This is recognised in the generic quality indicators, where indicators related to high-level questions 1 and 2 are concerned with outcomes and impact respectively. While the use of local targets should play an important part in such evaluations, the use of national indicators in answering these questions will support a fair, objective and consistent approach to the evaluation of the impact of services across Scotland. Equally, as indicated in Figure 1, data related to national indicators should feed into evaluations made using specific indicators. The Annex to the Scottish Executive's paper *A Quality Improvement Framework for Integrated Services for Children, Young People and Families*, maps relevant performance improvement indicators onto the seven-point vision for children and young people – that they should be *nurtured, safe, active, healthy, achieving, respected and responsible, and included*. This mapping helps to put the focus on what it is that services should achieve for children and young people or help them to achieve.

Part 2

The structure of generic quality indicators

2.1 Structure and design of generic quality indicators

The structure of the generic quality indicators has been developed in accordance with the principles of the Excellence Model of the European Foundation for Quality Management and can be used in conjunction with other quality models, for example, Investors in People, Charter Mark and ISO 9000. Evidence produced through the use of these or other evaluation models, and through the use of specific indicators, can be used in evaluations based on the generic quality indicators.

As Figure 2 on page 18 illustrates, the structure of the indicators is based on the six high-level questions listed in Part 1. Associated with the six questions are ten key areas, one or more of these being linked to each question. One or more quality indicators further map out each key area. Answers to the questions are found through examination of each key area using the indicators to ensure that the evaluation is both rigorous and comprehensive.

This is an analytical process designed to identify strengths and weakness in service provision. It should not, however, get in the way of building up an overall picture of how services work to meet the needs of stakeholders. Key areas are inter-related. The quality of delivery of services clearly influences their impact and, in turn, the quality of outcomes achieved for children and young people. To complete the quality assurance circle, effective leaders need to monitor outcomes continuously in order to identify aspects of service provision that need to be improved.

2.2 High-level questions and key areas

The relationship between high-level questions and key areas can be seen by considering each high-level question in turn:

What key outcomes have we achieved?

The associated key area is:

Key Area 1 Key performance outcomes

This Key Area focuses on the overall performance of organisations in relation to their aims and objectives, and the extent to which they achieve continuous improvements in performance. The Key Area helps organisations to evaluate their success in delivering measurable outcomes as specified in legislation and programmes for development. The Key Performance Improvement Indicators contained in the Annex to *A Quality Improvement Framework for Integrated Services for Children, Young People and their Families* provide national quantitative measures which can be used, along with local measures, to assess the achievement of outcomes and the extent to which improvements in outcomes have been achieved. Key Area 1 also focuses on the extent to which organisations fulfil their statutory duties. Evidence includes trends over time and other aggregated data which provide indications of successes in improving the quality of services, both overall and in comparison with other service providers.

How well do we meet the needs of our stakeholders?

The associated key areas are:

- Key Area 2 Impact on users of services for children and young people
- Key Area 3 Impact on staff
- Key Area 4 Impact on the community

Key Areas 2, 3 and 4 focus on the impact on important groups of stakeholders of the services provided by a single organisation or a group of partner organisations. They consider the benefits that stakeholders derive from the services provided. Evaluation in these key areas take into account direct observation and quantitative data, together with evidence of stakeholders' views, to arrive at overall judgements of impact of the services on stakeholders. Where evidence from these sources conflicts or indicates significant weaknesses, organisations should follow audit trails to identify and address the possible causes, using indicators from other key areas or relevant specific indicators. This investigation and analysis could, for example, focus on a number of issues, such as the quality of services provided, processes for communicating with, and involving, stakeholders, and/or the management of information.

How good is our delivery of services for children and young people?

The associated key area is:

- Key Area 5 Delivery of services for children and young people

Key Area 5 focuses on the delivery of services by individual organisations and/or partnerships. It provides indicators to evaluate the quality of processes for delivering services. These include the processes for identifying and communicating the needs of children, young people and families; and the ways in which organisations work, individually and in partnership, to deliver the seven-point vision for Scotland's children and young people. Key Area 5 also considers the effectiveness of processes for improving the quality of work of service providers and establishments.

How good is our management?

The associated key areas are:

- Key Area 6 Policy development and planning
- Key Area 7 Management and support of staff
- Key Area 8 Partnerships and resources

Key Areas 6, 7 and 8 focus on the management activities necessary to ensure effective service delivery and deliver best value. These activities include processes for developing and updating policies, for involving stakeholders, for operational planning, for managing staff, finance and resources and for developing productive partnerships. Strengths and weaknesses in these areas will affect the quality of services delivered (Key Area 5), their impact on stakeholders (Key Areas 2, 3 and 4) and the performance of an organisation or partnership in achieving key outcomes (Key Area 1).

How good is our leadership?

The associated key area is:

Key Area 9 Leadership and direction

Key area 9 focuses on the strategic leadership and direction of individual organisations and/or partnerships in delivering services for children and young people. It considers their corporate purpose and the expression and delivery of their aim through strategic planning with partner agencies and the community. It considers the quality of leadership at the strategic level, and within teams and organisational units.

What is our capacity for improvement?

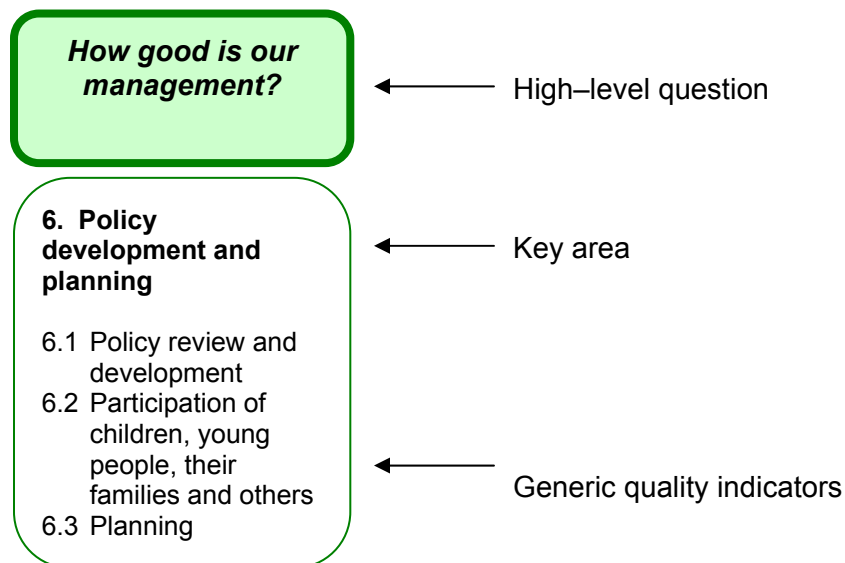
The associated key area is:

Key Area 10 Capacity for improvement

The final high-level questions requires a global judgement to be made, based on evidence and evaluations from all other key areas. This judgement is a forward-looking assessment, based on a review of past practice in leadership, planning and improvement, but also taking account of contextual factors which might influence the capacity of an organisation or group of partner organisations to improve the quality of services in the future. Such factors might include changes of senior staff, plans to restructure, or significant changes in funding.

2.3 Key areas and generic quality indicators

Each key area is further elaborated into a number of generic quality indicators. These help evaluators to take a comprehensive and rigorous look at that key area. This is illustrated schematically below. One of the three key areas linked to the high-level question “How good is our management?” is Key Area 6 - Policy development and planning. This, in turn, has three indicators associated with it 6.1, 6.2 and 6.3.



The complete structure is shown in Figure 2, overleaf.

Figure 2: High-level questions, key areas and generic quality indicators

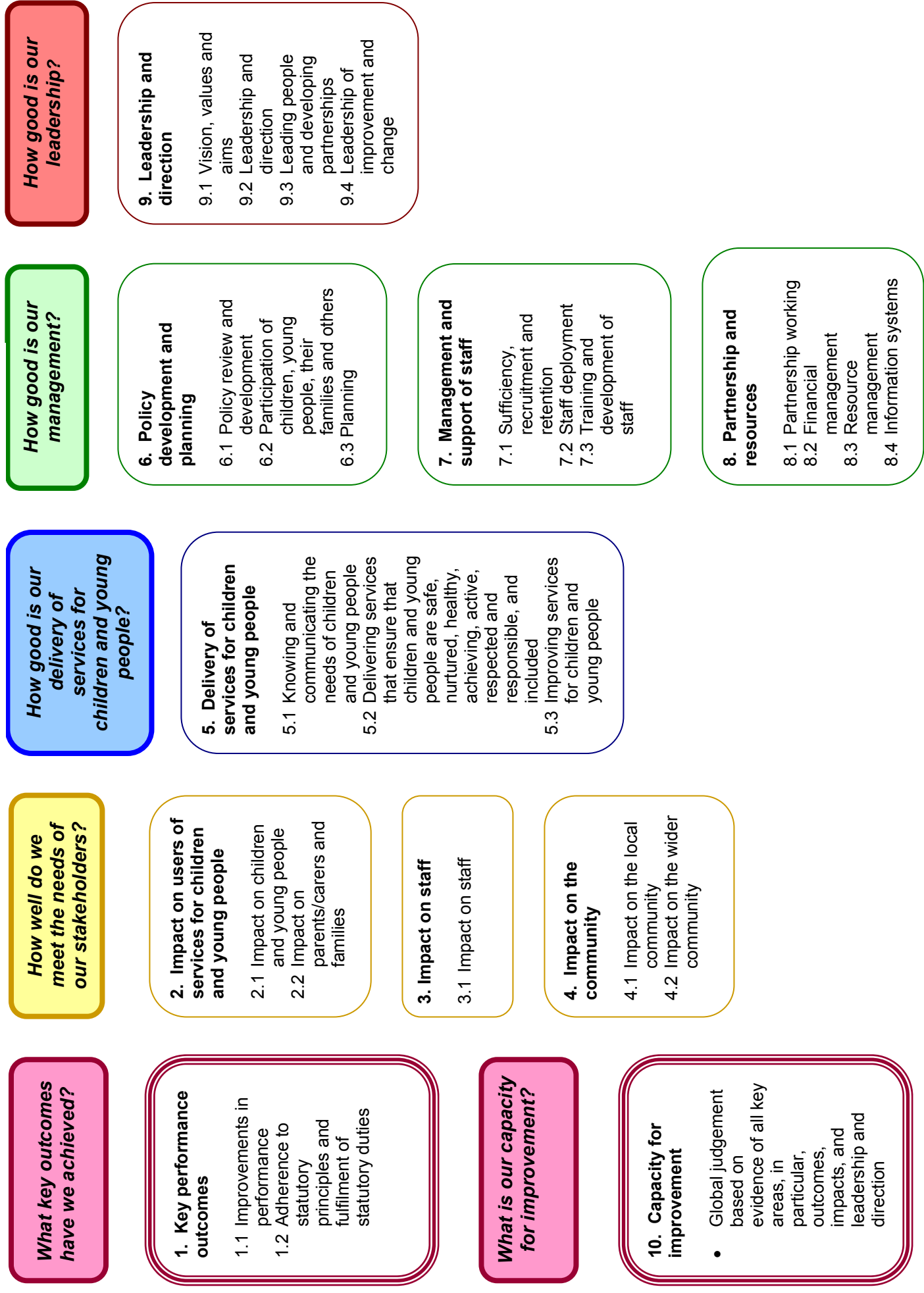
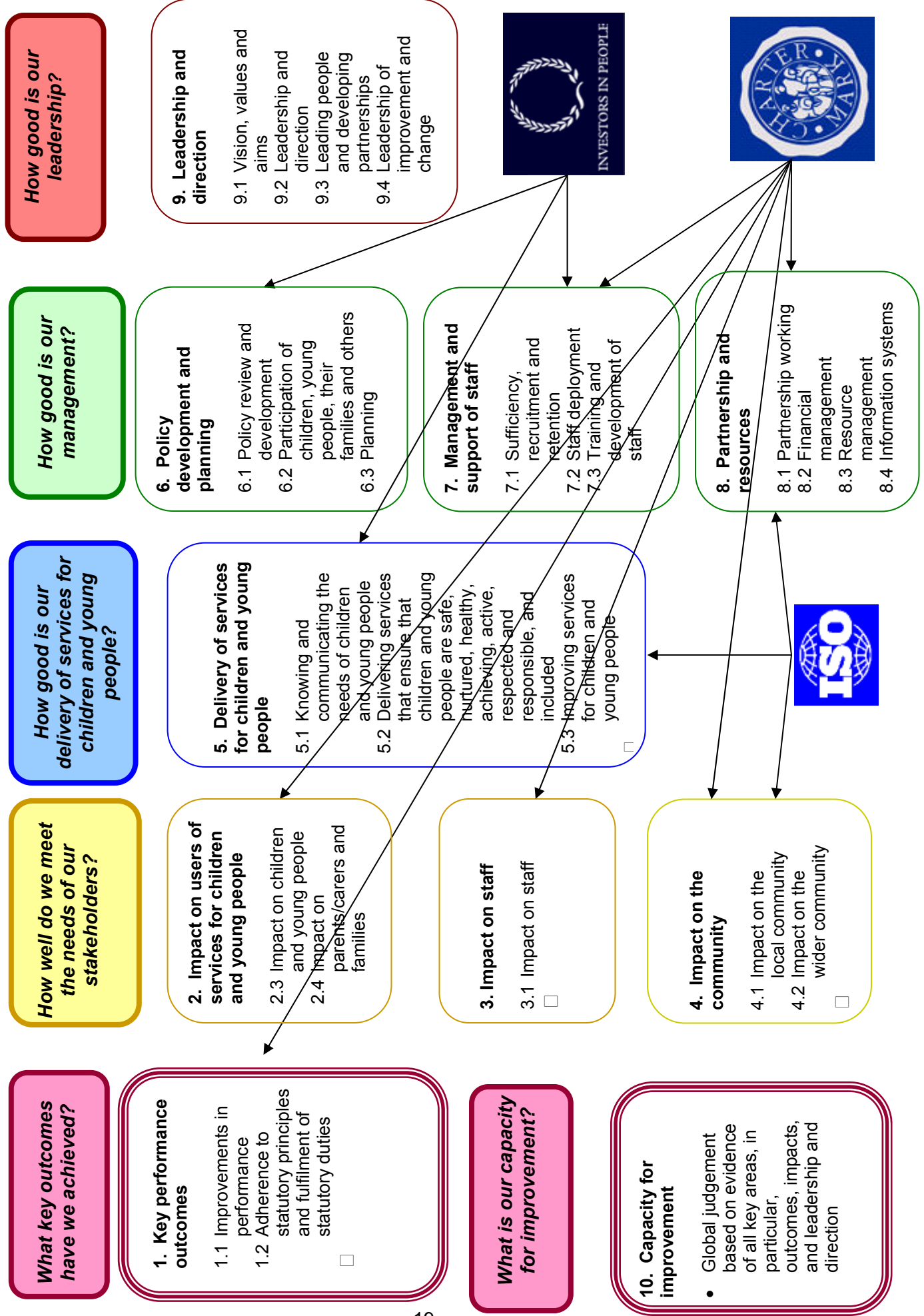


Figure 3: Relationship between the generic quality indicator framework and other quality frameworks



2.4 Generic quality indicators and themes

Each quality indicator is, in turn, broken down into a number of themes that identify which may merit closer examination. For example, the indicator 6.1, Policy review and development, has three themes. The relationship between the high-level question, key area, generic quality indicator and themes is shown below.

Key Area 6. Policy development and planning

No	Quality Indicator	Themes
HOW GOOD IS OUR MANAGEMENT?		
6.1	Policy review and development	<ul style="list-style-type: none">• Range and appropriateness of policies for integrated service delivery• Coherence of policies• Formulating, disseminating, evaluating and updating policies

Gathering and evaluating evidence on these three themes will help evaluators to draw conclusions about indicator 6.1, Policy review and development. When they link the evidence and evaluations for indicator 6.1 with those compiled in a similar way for indicators 6.2 and 6.3, they can draw conclusions about Key Area 6. By carrying out a similar process for Key Areas 7 and 8, and combining the evidence and evaluations with those for Key Area 6, evaluators can answer the high-level question: “How good is our management?”

The structure of all the high-level questions, key areas, generic quality indicators and themes, is laid out in the following pages.

Key Area 1. Key performance outcomes

No.	Quality Indicator	Themes
WHAT KEY OUTCOMES HAVE WE ACHIEVED?		
1.1	Improvements in performance	<ul style="list-style-type: none">• Performance data and measures showing trends over time• Overall quality of services delivered by service providers, individually and in partnership• Performance against aims, objectives and targets
1.2	Adherence to statutory principles and fulfilment of statutory duties	<ul style="list-style-type: none">• Compliance with legislation, and responsiveness to guidance and codes of practice

Key Area 2. Impact on users of services for children and young people

No.	Quality Indicator	Themes
HOW WELL DO WE MEET THE NEEDS OF OUR STAKEHOLDERS?		
2.1	Impact on children and young people	<ul style="list-style-type: none"> • The extent to which children and young people are safe, nurtured, healthy, achieving, active, respected and responsible, and included. • The extent to which children, young people and their families report¹¹ that services are enabling children and young people to become safe, nurtured, healthy, achieving, active, respected and responsible, and included.
2.2	Impact on parents/carers and families	<ul style="list-style-type: none"> • The extent to which parents/carers and families are: <ul style="list-style-type: none"> ➤ treated equally and fairly ➤ satisfied with the quality of services provided ➤ receiving services that are well integrated at the point of delivery ➤ involved and engaged in their children's development and learning • The extent to which parents/carers and families report that they are: <ul style="list-style-type: none"> ➤ treated equally and fairly ➤ satisfied with the quality of services provided ➤ receiving services that are well integrated at the point of delivery ➤ involved and engaged in their children's development and learning

¹¹ Each of the indicators 2.1, 2.2, 3.1 and 4.1 has two themes dealing with the impact of services. The first theme in each case relates to the nature and extent of impact as indicated by quantitative and qualitative data and direct observation. The second theme examines what the relevant stakeholders in each case report about their experiences of services received.

Key Area 3. Impact on staff

No.	Quality Indicator	Themes
HOW WELL DO WE MEET THE NEEDS OF OUR STAKEHOLDERS?		
3.1	Impact on staff	<ul style="list-style-type: none"> • The extent to which staff: <ul style="list-style-type: none"> ➤ are motivated, committed, confident and valued ➤ improve their practice through training and development activities, including joint multi-disciplinary training ➤ have positive experiences of the quality of corporate services and partner organisations ➤ work effectively in teams, including multi-disciplinary teams, to deliver well integrated services • The extent to which staff report that they: <ul style="list-style-type: none"> ➤ are motivated, committed, confident and valued ➤ improve their practice through training and development activities, including joint multi-disciplinary training ➤ have positive experiences of the quality of corporate services and partner organisations ➤ work effectively in teams, including multi-disciplinary teams, to deliver well integrated services

Key Area 4. Impact on the community

No.	Quality Indicator	Themes
HOW WELL DO WE MEET THE NEEDS OF OUR STAKEHOLDERS?		
4.1	Impact on the local community	<ul style="list-style-type: none"> • The extent to which, as a result of provision of services for children and young people in the area: <ul style="list-style-type: none"> ➤ communities are safer ➤ social wellbeing within communities is improved ➤ communities are healthier and more active ➤ individuals, families and communities have increased capacities to meet their own needs ➤ nuisance and harm is reduced ➤ social inclusion is improved • The extent to which communities report that, as a result of provision of services for children and young people in the area: <ul style="list-style-type: none"> ➤ communities are safer ➤ social wellbeing within communities is improved ➤ communities are healthier and more active ➤ individuals, families and communities have increased capacities to meet

		<ul style="list-style-type: none"> their own needs ➤ nuisance and harm is reduced ➤ social inclusion is improved
4.2	Impact on the wider community	<ul style="list-style-type: none"> • The extent to which providers of services for children and young people in the area: <ul style="list-style-type: none"> ➤ encourage and support creativity and innovation in service provision ➤ learn from and adopt leading-edge practice ➤ influence wider policy and practice

Key Area 5. Delivery of services for children and young people

No	Quality Indicator	Themes
HOW GOOD IS OUR DELIVERY OF SERVICES FOR CHILDREN AND YOUNG PEOPLE?		
5.1	Knowing and communicating the needs of children and young people	<ul style="list-style-type: none"> • Identification, recording and communication of the needs of children and young people • Communication and information sharing across partner organisations and with children, young people and their families
5.2	Provision of services that ensure that children and young people are: safe, nurtured, healthy, achieving, active respected and responsible, and included	<ul style="list-style-type: none"> • Range and level of services provided • Implementation of policies, strategies and plans • Realising the vision of safe, nurtured, healthy, achieving, active, respected and responsible, and included children and young people • Integration of services to support children, young people and families
5.3	Improving services for children and young people	<ul style="list-style-type: none"> • Arrangements for quality assurance and improvement within and across organisations • Support, challenge and collaboration amongst service providers • Evaluating outcomes, impact and information from stakeholders • Reporting progress to stakeholders

Key Area 6. Policy development and planning

No	Quality Indicator	Themes
HOW GOOD IS OUR MANAGEMENT?		
6.1	Policy review and development	<ul style="list-style-type: none"> • Range and appropriateness of policies for integrated service delivery • Coherence of policies • Formulating, disseminating, evaluating and updating policies
6.2	Participation of children, young people, their families and others	<ul style="list-style-type: none"> • Involvement in policy development • Communication and consultation • Active participation in the work of service providers
6.3	Planning	<ul style="list-style-type: none"> • Developing and implementing the Integrated Children's Services Plan and plans of partner organisations • Structure and content of plans of partner organisations • Use of management information • Risk management • Planning for sustained improvement of services for children and young people

Key Area 7. Management and support of staff

No	Quality Indicator	Themes
HOW GOOD IS OUR MANAGEMENT?		
7.1	Sufficiency, recruitment and retention	<ul style="list-style-type: none"> • Identifying and meeting human resource needs • Recruitment, appointment and induction procedures • Care and welfare • Equality and fairness • Recognition and parity of esteem across partner organisations
7.2	Staff deployment	<ul style="list-style-type: none"> • Appropriateness and clarity of remits • Understanding of respective remits and responsibilities across sector boundaries • Deployment to achieve planned priorities • Communication and involvement in decision making
7.3	Training, development and support of staff	<ul style="list-style-type: none"> • Professional competence and confidence • Processes for staff review and support • Training and development • Joint multi-disciplinary training

Key Area 8. Partnership and resources

No	Quality Indicator	Themes
HOW GOOD IS OUR MANAGEMENT?		
8.1	Partnership working	<ul style="list-style-type: none"> • Service level agreements, roles and remits • Working across agencies and disciplines • Staff role in partnerships and teamwork
8.2	Financial management	<ul style="list-style-type: none"> • Budget management • Range and implementation of financial procedures and controls • Processes for collecting, analysing and evaluating financial information • Managing funding streams to achieve objectives agreed in the Integrated Children's Services Plan • Providing Best Value
8.3	Resource management	<ul style="list-style-type: none"> • Strategic resource planning • Resource deployment • Efficiency and effectiveness in use of resources • Health and safety
8.4	Information systems	<ul style="list-style-type: none"> • Data collection, storage and retrieval • Sharing of information • Access to information • Processes for analysing, evaluating and using information

Key Area 9. Leadership and direction

No	Quality Indicator	Themes
HOW GOOD IS OUR LEADERSHIP?		
9.1	Vision, values and aims	<ul style="list-style-type: none"> • Coherence of vision, values and aims for services for children and young people • Sharing and sustaining the vision • Promotion of positive attitudes to social and cultural diversity
9.2	Leadership and direction	<ul style="list-style-type: none"> • Shared leadership of services • Strategic planning and communication
9.3	Leading people and developing partnerships	<ul style="list-style-type: none"> • Developing leadership capacity • Building and sustaining relationships
9.4	Leadership of improvement and change	<ul style="list-style-type: none"> • Continuous improvement • Creativity, innovation and step change

WHAT IS OUR CAPACITY FOR IMPROVEMENT?

This high-level question requires a global judgement based on evidence and evaluations of all key areas. In answering this question partner organisations should take into account contextual issues such as impending retirements of senior staff, plans to restructure, and significant changes in funding. They should also consider their ability to respond quickly to change and to be creative and innovative in the pursuit of excellence.

Partner organisations should make a statement about achievements to date and capacity for further improvement in relation to the following components:

- improvements to key outcomes and to impacts on stakeholders
- effectiveness of leadership and management
- effectiveness of quality improvement arrangements, and the capacity of partner organisations to continue improving.

Partner organisations should indicate the level of confidence they have in the evidence and evaluations that have led to the conclusions they have reached. The levels of confidence expressed for each component may be different and may include some reservations or caveats, but should lead to an overall statement of confidence in the capacity of partner organisations to improve the delivery of services for children and young people.

For example, the statement could say:

“Evaluation of evidence indicates that:

- improvements have been made in almost all key outcomes;
- overall improvements have been made to impacts on stakeholders but insufficient integration is inhibiting the impact of services affecting the nurture and health of children and young people;
- leadership and management are effective but pivotal posts will become vacant in the near future;
- staff in some sectors are having difficulty carrying out rigorous self-evaluation, but quality improvement arrangements are improving in all areas and the partner organisations have the capacity to continue improving.

We have a high degree of confidence in the evidence and evaluations that have led us to these conclusions. However, consistent with the statement in the final bullet point above, there were gaps in the evidence available in relation to some aspects of practice. In such cases we had access only to anecdotal statements rather than secure evidence. We are working to improve evidence collection and evaluation.”

Part 3

Applying generic quality indicators

3.1 Application of generic quality indicators

The generic indicators do not assume a particular organisational structure. They can be applied in a wide range of contexts, for example:

- by a single private or voluntary organisation in evaluating its contribution to the delivery of services for children in an area;
- by a large organisation such as an NHS Board, seeking to improve and integrate service provision and delivery for children and young people, where responsibility for provision and delivery of services is distributed across several departments;
- by a multi-sector group of organisations working together in an area to formulate and implement the Integrated Children's Services Plan for the area.

The generic quality indicators are designed to be applied at three related levels of service provision:

- at the level of **strategic** management across a range of services or organisations, for example in the formulation and implementation of an Integrated Children's Services Plan;
- at the level of **operational** management of services or organisations within a broader structure, for example where schools, social workers, primary health care professionals and police officers work together to deal with the operational management issues associated with providing an integrated service in a given area; or
- at the level of **delivery** of a specific service, for example where inputs from social work services and housing within a Council combine with police and the Children's Reporter to deal with children and young people involved in anti-social behaviour.

Evaluations made at one level can clearly influence evaluations at another.

For example, at a **strategic** level, the indicators can be used by individual organisations, or by a group of partner organisations, to evaluate quality across a range of their services. This might be in relation to a specific issue such as the extent to which they, individually and as a group, are making effective provision to ensure the nurture of children under six years old.

At an **operational** level, the indicators can be used to evaluate the quality of operational management of services provided by a single department, or by more than one department within an organisation. For example, by selecting appropriate indicators and themes, it is possible to look at how schools, social workers, primary health care professionals and police cooperate at the operational management level to establish communication systems which ensure that the needs of potentially vulnerable children and families are met.

The indicators can also be used to evaluate service **delivery** within a single organisational unit. For example, staff may wish to evaluate how social work services are delivered within a council, how that impacts on the services received by children and families, and the implications of working with other professions.

The indicators can be applied flexibly. For example, they could be used to carry out a comprehensive evaluation of the impact of the delivery of services for children in a given neighbourhood; or to evaluate provision for a particular group of children, for example children under six years old, looked after children, or the children of asylum seekers.

3.2 Using generic indicators in self-evaluation

Individual organisations and partners providing services for children and young people can use the indicators to give a systematic and rigorous structure to self-evaluation. Typically, they would choose to look first at the outcomes and impact of the services they provide and leadership (Key Areas 1-4 and 9) and, based on this, identify issues for further exploration, observation and analysis using the indicators within Key Areas 5-8. Alternatively they may choose to address a particular key area or to group key areas for evaluation as part of a specific review. Evaluations can be organised at the level of individual services or departments, or corporately across an organisation or a group of partner organisations. Local partnerships can, for example, use the generic indicators in this guide to organise the evaluation which is a necessary part of formulating Integrated Children's Services Plans.

Finally, individual organisations or partnerships are encouraged to arrive at an evaluation of their overall capacity for improvement, using the guidance on Key Area 10.

3.3 Using generic indicators in inspection

During inspections of services for children and young people, inspectors will focus on specific key areas and indicators selected from the overall structure. Some of these key areas and indicators may be used across all or most organisations being inspected, while others may be used only in particular contexts, depending on decisions taken during scoping activities. In some cases, inspectors may also choose to focus on those specific themes from individual indicators that provide the most appropriate tools for use in the context of a particular organisation. It will be the responsibility of the organisations being inspected to provide evidence to support the level of performance indicated in their self-evaluation records.

Inspectors will use the guidance in Key Area 10 to arrive at an evaluation of the capacity for improvement of an individual organisation or group of partner organisations.

3.4 Proportionality of evaluations

A Common Approach to Inspecting Services for Children and Young People proposed that inspections should be intelligence-led and proportionate. 'Intelligence-led' means that inspectors will start each inspection by analysing all of the available evidence, including evidence from self-evaluation, on the quality of services within the area being inspected. Taking a 'proportionate' approach means that they will tailor each phase of an inspection to the evidence already collected. The better the impact and quality of services for children and young people in a particular area, as indicated by pre-existing intelligence, the less intensive the inspection needs to be.

These principles of evaluation being intelligence-led and proportionate can apply equally to self-evaluation.

Self-evaluation of the outcomes achieved, and impact on stakeholders, using the indicators in Key Areas 1 and 2, together with an evaluation of leadership in Key Area 9 will indicate the extent to which it is necessary to look at other key areas. For example, if evidence indicates that the service providers are achieving the desired outcomes and impact, and that they have the capacity to maintain and continually improve the quality of services, there may be no need to look at indicators in Key Areas 3 to 8. On the other hand, consideration of Key Areas 1 and 2 might show up weaknesses in outcomes or impact relating to, say, nurture or inclusion. In such a case it would be necessary to look at other key areas to pinpoint the precise cause(s) of the weaknesses and identify what needs to be done to improve the relevant aspects of service. In such more detailed studies, indicators and themes should be used selectively rather than comprehensively. For example, evidence may suggest that the weaknesses relating to nurture and inclusion are associated with three main aspects of provision: staff deployment (indicator 7.2); knowing and communicating the needs of children and young people (indicator 5.1); and participation of children, young people and others in policy and planning (indicator 6.2). These areas would subsequently be looked at in detail.

Existing sources of evidence should be used wherever possible. For example, in evaluating the quality of early years provision, recent reports from inspectors on nursery provision will provide valuable sources of information; information from any recent in-house reviews, for example into joint training issues or use of accommodation, would also contribute to such an evaluation. Resources should be devoted to new evaluation activities in proportion to the value in knowledge and understanding that will be added by such activities.

3.5 Using specific indicators and standards in conjunction with generic indicators

Part 1.4 outlined how use of specific indicators and standards could be used in conjunction with generic indicators. The following example illustrates in more detail:

In a given area, the service-providing organisations are evaluating services for children under six years old. Using indicators 1.1 (Improvements in performance) and 2.1 (Impact on children and young people), they have compiled evidence that leads them to conclude that they need to look more closely at the nurture and health of children in the area.

Evidence from recent Care Commission inspection and integrated Care Commission and HMIE inspection reports on a number of pre-school providers in the area is available. These inspections would have been carried out with reference to *National Care Standards, Early Education and Childcare up to Age 16* and to *How good is our school – The Child at the Centre*¹². There is also a report on a recent Performance Inspection of Social Work Services that provides education on aspects on provision of services for children and families in the area.

These reports provide valuable evidence on some aspects of provision on the nurture and health of children. On the basis of this evidence, the evaluators wish to probe further and use the following specific standards and indicators to help organise their investigation:

¹² Published by HM Inspectorate of Education

- *National Care Standards, Early Education and Childcare up to Age 16*, with particular reference to the standard relating to Health and Well-being;
- *How good is our school – The Child at the Centre*, with particular reference to the indicator Support for Children and Families; and
- *The Performance Improvement Framework for Children and Families Social Work Services*¹³, with reference to the indicators relating to Nurture and Health.

In addition, the evaluators decide to refer to the consultation paper, *Delivering a Healthy Future – An Action Framework for Children and Young People’s Health in Scotland*, particularly the section ‘Health Services Fit for Children and Young People’.

By drawing on these various indicators, standards and sources of guidance, the evaluators are able to gather and evaluate evidence that allows them to make conclusions about levels of performance against generic indicators 1.1 and 1.2. In the course of gathering this evidence they gather useful evidence to help them in a subsequent consideration of performance in relation to the indicators in Key Area 5 (Delivery of services for children and young people). From this combined use of generic and specific indicators, they identify a number of areas for improvement.

In complementing generic indicators with the use of appropriate specific indicators and standards, it is important to ensure that:

- evidence-gathering and evaluation is focused and proportionate (see 3.4, above); and
- a clear strategic picture emerges of the operation, impact of, and outcomes from the services being evaluated.

3.6 Sources of evidence

Evaluation activity should be designed to collect relevant evidence in a systematic way. The principle of proportionality also applies when selecting sources of evidence. Evidence should only be collected when it has a direct and valuable input to the evaluation. It should be gathered economically and efficiently, and evidence already gathered for different but related purposes should be exploited as much as possible. For example, evidence collected from children, young people and their families on the extent to which they feel that services are well integrated at the point of delivery is clearly essential to the evaluation of Key Area 2 (Impact on users of services for children and young people) but it could also be useful when evaluating how well staff work in partnership across service boundaries (Indicator 8.1).

There are, essentially, four main sources of evidence, on which evaluations can ultimately be based. These are:

- performance data;
- relevant documentation;
- stakeholders’ views and feedback; and
- direct observation of practice.

¹³ Published by the Scottish Executive

These sources of evidence are complementary. No single source can provide sufficient evidence on its own to enable a reliable or robust evaluation to be made. The principle of triangulation should be applied. In essence, triangulation involves the scrutiny of one source of evidence, backed up by another and corroborated by a third line of enquiry. A good example would be an evaluation based on the examination of an influential policy document, the implementation of which was then discussed with senior staff and corroborated in further discussion with relevant stakeholders such as the children, young people and families affected by the policy. Through this process of triangulation, it should then be possible to observe the outcome of putting policy into practice and, through this, to evaluate the impact of policy in meeting the needs of stakeholders.

Where this approach is fully effective and reliable, it requires the involvement of stakeholders in full and meaningful discussion of the issues. These stakeholders might typically be drawn from:

- children and young people;
- parents, guardians, carers and families;
- parent associations;
- community groups, including voluntary organisations;
- relevant professional and support staff;
- centrally-deployed staff and those in direct provision or support services;
- staff from external partner agencies;
- elected members of councils and board members of organisations;
- the corporate management teams or equivalents of organisations; and
- trade unions and professional associations.

Each of the indicators 2.1, 2.2, 3.1 and 4.1 has two themes dealing with different aspects of the impact of services. Consideration of sources of evidence for these themes illustrates how evidence from different sources can combine to enable evaluation against a particular indicator. The following exemplifies this for indicators 2.1 and 2.2.

Indicator 2.1: Impact on children and young people

Sources of evidence related to the first theme include quantitative and qualitative data and evidence from direct observation, documentation, and discussions with stakeholders. Examples may include:

- levels of attendance, retention and progression in, and exclusion from, formal and informal activities;
- access to services, including approaches to encouraging involvement;
- the extent to which the needs of individuals are met, including those of lowest performing learners, looked after children, vulnerable and minority groups as indicated by rates of progression, achievement of individual targets for learning, social skills, active and healthy lifestyles;
- incidents of violence, bullying, anti-social and racially motivated behaviours; and
- evidence from inspections and self-evaluation activities relating to activities geared to meet the needs of children and young people.

The second theme deals with the views of children and young people given in responses to questionnaires, surveys, focus groups and in unsolicited comments. These responses provide evidence of the extent to which they feel that services support children and young people to achieve the seven outcomes. It may cover aspects such as:

- opportunities to participate and develop effectively as individuals, in groups and with staff and volunteers from services;
- the extent to which they feel involved and consulted and able to shape and influence service activities;
- opportunities to express their views on the quality and relevance of services and how service providers respond to these views; and
- the extent to which they feel valued and supported by services.

Evaluation should take into account evidence for both themes and result in a considered evaluation for Indicator 2.1: Impact of services on children and young people.

Indicator 2.2: Impact on parents/carers and families

Sources of evidence for the first theme of this indicator include quantitative and qualitative data and evidence from direct observation, documentation and discussions with other stakeholders. Examples may include:

- levels of participation in home-school and health activities, both formal and informal;
- rates of response to consultation;
- the extent to which the needs of all parents, carers and families are met, including those with children and young people with additional support needs, or from minority, ethnic and vulnerable groups;
- achievement of customer service awards such as Charter Mark;
- correspondence and contact with services and agencies, including responses to enquiries and complaints and the way these are handled;
- access to services, including approaches to encouraging involvement;
- evidence from inspections and self-evaluation activities relating to parents, carers and families; and
- information on parental choice of services, such as placing requests.

The second theme deals with the views of parents, carers and families as reported in responses to questionnaires, surveys, focus groups and in unsolicited comments. These responses provide evidence of the extent of their satisfaction with services for children and young people and may cover aspects such as:

- the quality and range of services provided for children and young people;
- opportunities for involvement in their children's activities both formal and informal;
- the extent to which they feel valued and supported, and are treated fairly, equally and with respect;

- ease of access to and contact with establishments, centrally deployed service and agency staff and community/locally based teams; and
- opportunities to express their views and influence the services provided for children and young people.

Evaluation should take into account evidence for both themes and result in a considered evaluation of Indicator 2.2: Impact on parents/carers and families.

Similar sources of evidence might be used in evaluating services in relation to indicator 4.1: Impact on the local community.

Evidence gathered in the course of evaluating impact indicators 2.1 and 2.2 may also be useful in considering other indicators. For example, evidence collected is likely to be relevant to indicator 5.1: Knowing and communicating the needs of children and young people, and to indicator 6.2: Participation of children, young people, their families and others (in policy development and planning).

It is important to ensure that the views of children and young people are fully represented in evidence gathered. Case studies which examine the experiences of samples of children and young people can provide valuable evidence. Among other things, such case studies can help to reveal the extent to which these children and young people have experienced properly integrated service provision. Such case studies need to be drawn up so that children's rights are respected, and with the aim of constructing a balanced sample of experiences.

In summary, the process of self-evaluation should, as a matter of course, generate management information which results in an evaluation of overall quality and improvement. This evaluation can then be used to create a set of agreed, targeted action points which, in turn, drive further improvement.

Part 4

Generic quality indicators in integrated children's services planning

4.1 Using generic quality indicators in integrated children's services planning

Self-evaluation lies at the centre of integrated children's services planning. Through self-evaluation, partner organisations can identify strengths and weaknesses of the services they provide, identify improvement objectives, and agree strategies for achieving them. Embedding the use of generic quality indicators in self-evaluation as part of the development, implementation and monitoring of the Integrated Children's Services Plan could involve the following processes.

- 1 Partner organisations in the area agree to adopt the six high-level questions and generic quality indicators as integral to the processes they use for improving services to children and young people.
- 2 Partner organisations link the generic quality indicators into their respective self-evaluation processes. These processes need not be the same across organisations but they should be capable of generating evidence which allows the high-level questions to be answered. Applying the generic quality indicators in the self-evaluation processes of partner organisations in this way brings the following benefits:
 - Partners begin to develop a common language and a common set of expectations regarding the improvement of services at the strategic, operational and delivery levels.
 - Evaluations across partner organisations become more consistent and coherent.
 - Partner organisations are able to share evaluation information against the common high-level framework provided by the generic quality indicators.
 - The approach does not dictate the use of any specific self-evaluation or quality improvement processes, and partners need only apply the generic quality indicators in relation to services they provide for children and young people.
- 3 When partner organisations come together as part of the Integrated Children's Services Planning process to evaluate service provision in their area and to make plans for improvement, they use the six high-level questions and the generic quality indicators as a means of organising that process. They are able to make holistic strategic evaluations based on coherent information from all partners because all have used the same framework of generic indicators.
- 4 Having identified improvement priorities and targets, partner organisations, collectively and individually, use the framework provided by the indicators to identify processes through which they can make improvements in performance.
- 5 Partner organisations use the generic quality indicators as part of their ongoing monitoring processes to check that progress is being maintained on the improvement objectives.

Part 5

The six-point scale and illustrations

5.1 The six-point scale

The generic quality indicators are designed to be used in conjunction with an evaluation scale in which the quality of provision can be evaluated against six levels of performance. The levels are:

Level 6	<i>excellent</i>	- outstanding, sector leading
Level 5	<i>very good</i>	- major strengths
Level 4	<i>good</i>	- important strengths with areas for improvement
Level 3	<i>adequate</i>	- strengths just outweigh weaknesses
Level 2	<i>weak</i>	- important weaknesses
Level 1	<i>unsatisfactory</i>	- major weaknesses

There are many ways in which provision can merit a particular evaluation. Awarding levels is more of a professional skill than a technical process. However, the following general guidelines should be applied consistently.

- An evaluation of **excellent** applies to provision which is a model of its type. The experiences of, and outcomes achieved by, children and young people are of very high quality. An evaluation of *excellent* represents an outstanding standard of provision which exemplifies very best practice and is worth disseminating beyond the organisations involved in providing the services. It implies these very high levels of performance are sustainable and will be maintained.
- An evaluation of **very good** applies to provision characterised by major strengths. There are very few areas for improvement and any that do exist do not significantly diminish the experiences of the children and young people. While an evaluation of *very good* represents a high standard of provision, it is a standard that should be achievable by all. It implies that it is fully appropriate to continue to make provision without significant adjustment. However, there is an expectation that the partners in service provision will take opportunities to improve and strive to raise performance to excellent.
- An evaluation of **good** applies to provision characterised by important strengths which, taken together, clearly outweigh any areas for improvement. An evaluation of *good* represents a standard of provision in which the strengths have a significant positive impact. However, the quality of the experiences of children and young people is diminished in some way by aspects in which improvement is required. It implies that the partners in service provision should seek to improve further the areas of important strength, but take action to address the areas for improvement.
- An evaluation of **adequate** applies to provision characterised by strengths which just outweigh weaknesses. An evaluation of *adequate* indicates that children and young people have access to basic levels of provision. It represents a standard where the strengths have a positive impact on the experiences of the children and young people. However, while the weaknesses will not be important enough to have a substantially adverse impact, they will constrain the overall quality of service experienced by children and young people. It implies that the partners in service provision should take action to address areas of weakness while building on strengths.

- An evaluation of **weak** applies to provision which has some strengths, but where there are 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 will, either individually or collectively, be sufficient to diminish the experiences of children and young people in substantial ways. It implies the need for structured and planned action on the part of the partners in service provision.
- An evaluation of **unsatisfactory** applies when there are major weaknesses in provision requiring immediate remedial action. The experience of children and young people is at risk in significant respects. In almost all cases, staff 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 from other departments or agencies.

5.2 Illustrations of levels of performance

There are many ways in which performance can merit a particular level of evaluation. The illustrations on the following pages exemplify performance at levels 5 (**very good**) and 2 (**weak**) for indicators in Key Areas 2 to 9¹⁴. These illustrations should not be regarded as criteria or checklists. Rather, they describe situations which would merit evaluations of **very good** or **weak**, respectively. By comparing given situations with these exemplifications, evaluators can reach secure evaluations on each indicator. Performance in a given context that is broadly equivalent to a level 5 illustration would merit an evaluation of **very good**, while that broadly equivalent to a level 2 illustration would be **weak**. Evaluations at other levels would be made by a process of extrapolation (better than 5, or worse than 2) or interpolation (between 5 and 2 – either 3 or 4).

¹⁴ Because of their nature, Key Area 1: Key performance outcomes and Key Area 10: Capacity for improvement do not lend themselves readily to exemplification and evaluation in this way.

What key outcomes have we achieved?

KEY AREA 1: KEY PERFORMANCE OUTCOMES

QI 1.1 Improvements in performance

Themes:

- Performance data and measures showing trends over time
- Overall quality of services given by service providers, individually and in partnership
- Performance against aims, objectives and targets

Key features

This indicator is concerned with the evaluation of outcomes from services for children, particularly the extent to which improvements in outcomes have been achieved over time.

Scottish Ministers have articulated a seven-point vision that all Scotland's children and young people should be safe, nurtured, healthy, achieving, active, respected and responsible, and included. The Annex to the *Quality Improvement Framework for Children, Young People and Families*¹ lists key performance improvement indicators under the safe, nurtured, healthy etc categories. Depending upon the focus of a particular evaluation activity, use of these indicators can be complemented by relevant sector-specific performance improvement indicators.

Inspection reports and reports of self-evaluation exercises can provide evidence of the overall quality of services for children, young people and their families. In particular, analyses of responses of organisations to inspection and internal review reports give evidence of the extent to which these organisations are maintaining and improving high standards of service. Evaluations carried out as part of the process of preparing the Integrated Children's Services Plan should furnish evidence of the quality of services provided through partnership working in the area.

Performance should be measured against objectives set in the Integrated Children's Services Plan and within individual service improvement plans or equivalent. Evaluation of performance will include assessment of progress in meeting local targets related to achieving the seven point vision for Scotland's children and young people. Such evidence should be found in progress reports and public performance reports.

What key outcomes have we achieved?

KEY AREA 1: KEY PERFORMANCE OUTCOMES

QI 1.2 Adherence to statutory principles and fulfilment of statutory duties

Theme:

- Compliance with legislation, and responsiveness to guidance and codes of practice

Key features

There is a wide range of legislation, guidance and codes of practice that has a bearing on services for children and young people. Legislation such as the Children (Scotland) Act 1995 and the Protection of Children (Scotland) Act 2003 is specifically concerned with the rights of the child and the responsibilities of individuals and organisations working with children. Other sector-specific legislation, for example, the Standards in Scotland's Schools etc Act 2000, or the National Health Services Reform (Scotland) Act 2004 bear directly or indirectly on the nature and quality of services provided for children and young people. There are also codes of practice and legislation on matters such as confidentiality of information, data protection and sharing of information.

The extent to which organisations, individually or in partnership, comply with legislation and are responsive to related guidance and codes of practice can be evaluated in terms of:

- their awareness of the legislation, guidance and codes of practice which apply in given situations;
- their knowledge and understanding of the relevant legislation, guidance and codes of practice;
- the quality of the systems for ensuring that staff comply with relevant legislation and act in accordance with relevant guidance and codes of practice;
- the extent of compliance and adherence that is evident in the course of providing services; and
- evidence from evaluation, feedback and complaints processes.

How well do we meet the needs of our stakeholders?

KEY AREA 2: IMPACT ON THE USERS OF SERVICES FOR CHILDREN AND YOUNG PEOPLE

QI 2.1 Impact on children and young people

Themes:

- The extent to which children and young people are safe, nurtured, healthy, achieving, active, respected and responsible, and included.
- The extent to which children, young people and their families report that services are enabling children and young people to become safe, nurtured, healthy, achieving, active, respected and responsible, and included.

Key features

This indicator relates to the impact of services from providers individually and collectively on the lives and life opportunities of all children and young people. It focuses particularly on their current experiences. It deals directly with evidence which demonstrates the extent to which children and young people are developing and achieving their full potential against the seven outcomes for children and young people in Scotland. The first theme relates to the extent of impact as indicated by quantitative and qualitative data and direct observation. The second theme examines what it is that children and young people report about their experiences of services.

Illustration QI Level 5

Almost all children and young people are included and actively participate in formal and informal activities related to the seven outcomes. There has been very good progress towards ensuring that children and young people are safe, nurtured, healthy, achieving, active, respected and responsible, and included as measured against relevant national outcomes, key performance improvement indicators, care standards and local measures. Particular groups of vulnerable children and young people, including the lowest performing 20%, looked-after children and pupils from black, ethnic and minority groups achieve or exceed targets set against the key performance improvement indicators. Almost all children and young people make very good progress from their prior levels of attainment and almost all participants are becoming more successful learners, confident individuals, responsible citizens and effective contributors to society and work. Participation rates and performance levels in sporting, cultural, enterprise, citizenship and youth work activities are high and include children and young people with disabilities and from vulnerable and minority groups.

Almost all children, young people and their families report that they are fully satisfied with the quality of services delivered. They report that they feel safe, secure and valued and have appropriate opportunities to express their views, and that these views influence planning of the future design and delivery of services. They are very positive about the support provided through formal and informal opportunities which enables them to achieve their full potential and to help keep them safe and healthy.

Illustration QI Level 2

A minority of children and young people are included and participate in formal and informal activities related to the seven outcomes. In consequence, children, young people and their families generally do not receive a well integrated service. There has been limited progress towards ensuring that children and young people are safe, nurtured, healthy, achieving, active, respected and responsible, and included as measured against relevant national outcomes, key performance improvement indicators, care standards and local measures. Particular groups of vulnerable children and young people such as the lowest performing 20%, looked-after children and pupils from black, ethnic and minority groups are underperforming and do not achieve the targets set for improvement. A minority of children and young people are making good progress from their prior levels of attainment and only a minority of participants are becoming more successful learners, confident individuals, responsible citizens and effective contributors to society and work. Participation rates and performance levels in sporting, cultural, enterprise, citizenship, and youth work activities are improving but are still low, and children and young people with disabilities and from vulnerable and minority groups are under represented.

Some children, young people and their families report that service providers are collaborating to provide better integrated services in line with the seven-point vision for children and young people. However, the majority of children, young people and their families indicate low levels of satisfaction with the quality of services delivered. The majority do not feel safe, secure and valued nor have sufficient opportunities to express their views. They do not feel that any views expressed are listened to or have any influence on the future design and delivery of services. They are not always positive about the support provided to help them achieve their full potential in some important areas.

How well do we meet the needs of our stakeholders?

KEY AREA 2: IMPACT ON THE USERS OF SERVICES FOR CHILDREN AND YOUNG PEOPLE

QI 2.2 Impact on parents/carers and families

Themes:

- The extent to which parents/carers and families are:
 - treated equally and fairly
 - satisfied with the quality of services provided
 - receiving services that are well integrated at the point of delivery
 - involved and engaged in their children's development and learning

- The extent to which parents/carers and families report that they are:
 - treated equally and fairly
 - satisfied with the quality of services provided
 - receiving services that are well integrated at the point of delivery
 - involved and engaged in their children's development and learning

Key features

This indicator relates to the impact of services on parents, carers and families themselves, as well as their views on the quality of the services received by their children, focusing in particular on their current experiences. The first theme relates to the extent of impact as indicated by quantitative and qualitative data and direct observation. The second theme examines what it is that parents, carers and families report about their experiences of services provided for children young people and families.

Illustration QI Level 5

Almost all parents, carers and families are respected, treated equally and fairly, and encouraged to become involved in the development of their children. They take part in their children's learning and development through attendance at appropriate meetings and forums. They take direct responsibility, where appropriate, for key aspects of their children's development, safety and health as a result of initiatives developed by services and partners. Parents, carers and families engage with confidence in informal and formal surroundings through, for example, home and community based activities and health initiatives. Service providers work collaboratively to ensure that parents, carers and families are referred to the most appropriate agencies according to need. Parents, carers and families of vulnerable children and young people and of those with additional support needs are supported by well integrated services. Parents, carers and families are able to access relevant adult learning opportunities and support when appropriate. They are kept well informed/up-to-date on issues affecting their children's development, health and safety. They are encouraged to contact services and agencies about relevant issues and to become involved in activities with services, agencies and in the community. Services are responsive to complaints and consistently achieve satisfactory resolutions.

Almost all parents, carers and families report that they are fully satisfied with the quality and range of services provided. They are very positive about their active involvement in their children's learning and development in both informal and formal contexts. Almost all parents, carers and families express confidence in the support they receive from services to ensure that their children are safe, nurtured, healthy, achieving, active, respected and responsible, and included and are confident in supporting their children in realising these outcomes. They say that they value the planned opportunities for multi-agency support such as attendance at family group conferences or joint assessment team meetings.

Illustration QI Level 2

Parents, carers and families are respected and treated equally and fairly. Parents, carers and families of vulnerable children and young people and of those with additional support needs are not well enough supported by services. They have to navigate their own way through the range of service-providing organisations to find those that best meet their needs. Parents, carers and families take direct responsibility, where appropriate, for some aspects of their children's development, safety and health but this is seldom as a result of initiatives developed by services and partners. They do not fully engage in informal and formal surroundings through, for example, home and community based activities and health initiatives. Parents, carers and families are given opportunities to participate in their children's learning and development through attendance at appropriate meetings and forums but attendance is low. They are encouraged to contact services and agencies about relevant issues but are less encouraged to become actively involved in activities with services, agencies and in the community. Services recognise the validity of complaints but are inconsistent in achieving satisfactory resolutions.

Some service providers are highly regarded, but the majority of parents, carers and families indicate low levels of satisfaction with the quality and range of services provided. They report that overall, there are too few opportunities for them to become actively involved in their children's learning and development. Some parents, carers and families express confidence in the support they receive from services to ensure that their children are safe, nurtured, healthy, achieving, active, respected and responsible, and included, but the majority are not sufficiently confident in supporting their children in realising these outcomes. They lack confidence in responding to planned opportunities for multi-agency support such as attendance at family group conferences or joint assessment team meetings. They also report that they often lack confidence in accessing relevant adult learning opportunities and support, or that there are too few relevant opportunities available. Parents, carers and families say they are kept informed on issues affecting their children's learning and progress but less so on issues affecting their wider development including health and safety.

How well do we meet the needs of our stakeholders?

KEY AREA 3: IMPACT ON STAFF

QI 3.1 Impact on staff

Themes:

- The extent to which staff:
 - are motivated, committed, confident and valued
 - improve their practice through training and development activities, including joint multi disciplinary training
 - have positive experiences of the quality of corporate services and partner organisations
 - work effectively in teams, including multi disciplinary teams, to deliver well integrated services

- The extent to which staff report that they:
 - are motivated, committed, confident and valued
 - improve their practice through training and development activities, including joint multi-disciplinary training
 - have positive experiences of the quality of corporate services and partner organisations
 - work effectively in teams, including multi disciplinary teams, to deliver well integrated services

Key features

This indicator relates to the impact of organisations on staff. Some organisations in an area will be exclusively involved in providing services for children and young people. In other cases, services to children and young people may be only part of an organisation's work. In such cases, impact on staff should be evaluated in the context of those aspects of their work concerned with services for children and young people. Because of the multi-disciplinary nature of services for children, decisions and methods of working within one organisation have the potential to impact on staff of partner organisations. A central consideration is the extent to which staff feel motivated, supported and empowered to work in multi disciplinary teams and across service-sector boundaries. The first theme relates to the extent of impact as indicated by quantitative and qualitative data and direct observation. The second theme examines what it is that staff have to say about their experiences of working in the field of services for children and young people.

Illustration QI Level 5

Almost all staff have well-developed levels of understanding of what is involved in providing high quality, well integrated services for children and young people. Almost all are highly motivated, meaningfully involved in the development of services, and are professionally satisfied. They have low levels of absence. Staff are clear about their respective areas of responsibility and about the roles and responsibilities of colleagues. They are supported and challenged. Staff are appropriately deployed, engaged and valued by their own organisation and by colleagues and managers in partner organisations. They benefit from opportunities to train with colleagues from other

disciplines and these opportunities help them to work effectively in multi-disciplinary teams. Levels of participation in training events are high, and staff from different disciplines cooperate well with one another both in training activities and in delivering services. Staff are well prepared for future leadership roles through effective training, consultation and involvement in service development activities.

Staff report that they are confident in their ability to carry out their duties, and that they value opportunities to work in multi-disciplinary teams. Almost all report that they have access to regular professional consultation and expertise. They have good opportunities for career development and clearly understood and accessible CPD programmes. They consider that professional development contributes to enhancing their competence, and supports their performance effectively. Staff report positively about the quality of support they receive from corporate services in their own organisations and value the support they receive when working with partner organisations. They are regularly consulted by managers and participate in multi-agency development groups.

Illustration QI Level 2

Staff have an incomplete picture of what is involved in delivering well integrated services for children and young people, and lack perspective on how their roles relate to those of others. They have opportunities for professional development but these are not always taken up. There are insufficient opportunities for multi-agency training and development. Staff are consulted by managers, but this is irregular and ad hoc, resulting in an inconsistent response to these consultations and a lack of ownership of the outcomes of consultation. Lines of communication from managers are not always clear, particularly when managers from different organisations are involved; this adds to the levels of uncertainty felt by staff. Staff are not always meaningfully involved in the development of services for children and young people.

Levels of staff satisfaction with the quality of the services they are delivering are low. Staff are personally motivated, but the majority feel undervalued. They report that while the support they receive from corporate services and from partner organisations is good when they ask for it, they feel that the support should be more proactive. They work conscientiously on their own and with their immediate colleagues, but the majority report that they are not confident about their own roles and those of others, particularly when required to work in inter-agency teams. They value the opportunities they have to contribute to the shaping and improvement of services and to prepare for future leadership roles, but feel that they do not have enough such opportunities.

How well do we meet the needs of our stakeholders?

KEY AREA 4: IMPACT ON THE COMMUNITY

QI 4.1 Impact on the local community

Themes:

- The extent to which, as a result of provision of services for children and young people in the area:
 - communities are safer
 - social wellbeing within communities is improved
 - communities are healthier and more active
 - individuals, families and communities have increased capacities to meet their own needs
 - nuisance and harm is reduced
 - social inclusion is improved

- The extent to which communities report that, as a result of provision of services for children and young people in the area:
 - communities are safer
 - social wellbeing within communities is improved
 - communities are healthier and more active
 - individuals, families and communities have increased capacities to meet their own needs
 - nuisance and harm is reduced
 - social inclusion is improved

Key features

This indicator focuses on the impact of services for children and young people on individuals and groups in the local community, focusing in particular on their current experiences. The first theme relates to the extent of impact as indicated by quantitative and qualitative data and direct observation. The second theme examines what it is that members of the community report about the impact of services for children and young people on the community.

Illustration QI Level 5

Services have shared objectives to improve the health and wellbeing of children, young people and their families in the area and these are shared with members of the local community. Children, young people and their families are encouraged to take part in and to initiate voluntary activities to support the local community. There is full community support for a range of activities to encourage children and young people to lead safer, healthier and more active lifestyles and to prevent them from engaging in anti-social and harmful behaviour. Almost all community members are included and have access to high quality services. Community representatives, including those from the voluntary sector, are fully informed about and able to influence the activities and services for children and young people in the area. The high quality services provided for children and young people have, in turn, a beneficial impact on the quality of life in the community, with indicators related to health, social inclusion and safety in the

community all showing improvement. Service providers effectively engage with and support members of the community in building capacity within the local community. Services engage members of the community, including the voluntary sector, appropriately in improving services directly to children, young people and their families. Members of the community are actively involved in the development, implementation, monitoring and evaluation of the shared objectives for services to children and young people in the area. Services work collaboratively with community organisations to ensure that priority needs are being met, particularly for socially excluded, ethnic, minority and vulnerable groups of children and young people. There is a high level of engagement from individuals, families and community groups in the area and services include members of the local community appropriately in decision making activities which affect individuals, families and communities.

Almost all members of the community have a consistently high level of satisfaction with the services provided for children and young people. There is confidence in the local community that overall children and young people are safer, healthier, more active, socially included and have a feeling of wellbeing and that there is evidence of progress in these areas within the community as a whole. Members of the local community consider that the provision offered by services has led to a positive impact on the motivation and engagement of children, young people and their families. They are confident that staff understand and have an awareness of the needs of their community. Relationships are trusting and friendly with a strong sense of community and shared values.

Illustration QI Level 2

Service providers are beginning to work in more integrated ways to improve inclusion and a sense of social wellbeing in the area. However quantitative data still show significant variations in important indicators of community wellbeing, particularly those related to health and the reduction of nuisance and harm. Service providers have some shared objectives to improve the health and wellbeing of children, young people and their families and to reduce levels of anti-social behaviour in the area, but these are not shared and taken forward with members of the local community. Children, young people and their families are rarely encouraged to take part in and to initiate voluntary activities to support the local community. There is community support for some of the activities which encourage children and young people to lead safer, healthier and more active lifestyles but it rarely prevents a number of them from engaging in anti-social and harmful behaviour. There is some collaborative work with community organisations but it is not clearly focused on ensuring that priority needs are being met, particularly for socially excluded, ethnic, minority and vulnerable groups of children and young people. Services do not effectively engage with and support members of the community in building capacity within the local community. A few members of the community are involved in the development, implementation, monitoring and evaluation of the shared objectives for services to children and young people in the area but, in general, service providers do not sufficiently include members of the local community in decision-making activities which affect individuals, families and communities.

Members of the local community report that they feel that children and young people are safer, healthier, more active, socially included and have a feeling of wellbeing. However a majority do not feel that these improvements have yet had a broader impact on the local community. A majority of members of the local community consider that

the provision offered by services does not do enough to make a positive impact on the motivation and engagement of children, young people and their families with the community. A majority of the members of the community say they have little confidence that staff understand the needs of their community. They feel excluded, and say they have few opportunities to access good quality services. Service providers engage members of the community, including the voluntary sector, in improving services directly to children, young people and their families but those involved feel that such opportunities are not always appropriate, effective or consistent. While there is some sense of community, relationships are strained and values are not shared and owned by key stakeholders in the community.

How well do we meet the needs of our stakeholders?

KEY AREA 4: IMPACT ON THE COMMUNITY

QI 4.2 Impact on the wider community

Themes:

- The extent to which providers of services for children and young people in the area:
 - encourage and support creativity and innovation in service provision
 - learn from and adopt leading-edge practice
 - influence wider policy and practice

Key features

This indicator focuses on the impact service providers have on the wider community. It deals with the culture of services, individually and collectively, in encouraging and supporting creativity and innovation and being open to new ideas. It is about the service organisations effectiveness in dealing with change. It also relates to the influence and impact of services on wider developments and practice.

Illustration QI Level 5

Service providers have initiated a range of innovative programmes, many in partnership with each other and with other public, charitable and commercial organisations. These are continuing to lead to major improvements for children, young people and their families. Staff are actively encouraged to innovate and any associated risks are managed well. There are many examples of leading-edge practice from other areas and countries being adopted and adapted to improve service delivery and meet needs. Managers at all levels in all services participate in a range of national advisory groups and committees. Some of these have had a major impact on national policy and practice. Providers place great emphasis on forecasting change, assessing probable impacts and responding swiftly to provide appropriate services to meet changing needs and circumstances. This ability to respond rapidly and creatively is keeping the services close to the leading-edge of national and international development, and ensuring that children, young people and their families receive consistently high quality services. In some cases service providers may be leading national and international practice.

Illustration QI Level 2

Services make provision that broadly meets the needs of children, young people and families, but it is seldom innovative. Services rarely learn from good practice in other areas or countries. Staff are not actively encouraged to be innovative or creative and change tends to be mostly evolutionary. A few managers from some service providers participate in national advisory groups and committees but generally there is not a culture which fosters this kind of activity. Consequently, services make little impact beyond their own area. Services respond slowly to change. The majority of providers do not attempt to forecast change or respond proactively and swiftly to the changing needs and aspirations of children, young people and their families.

How good is our delivery of services for children and young people?

KEY AREA 5: DELIVERY OF SERVICES FOR CHILDREN AND YOUNG PEOPLE

QI 5.1 Knowing and communicating the needs of children and young people

Themes:

- Identification, recording and communication of the needs of children and young people
- Communication and information sharing across partner organisations and with children, young people and their families

Key features

This indicator relates to the effectiveness of organisations in identifying the needs of children and young people and in using this information to plan and manage the next stages in their development. In a multi-agency approach to meeting the needs of children, young people and their families, it is critical that organisations use robust and consistent methods for identifying and recording the needs of children and young people, and for sharing information within and across organisations.

Illustration QI Level 5

All organisations working with children, young people and their families assess and record their needs on a consistent basis. Assessment and recording are used effectively to plan the next steps in learning and development. There are clear policies and procedures for the assessment and recording of needs, including how to recognise and record the signs that particular children and young people are in need help or protection from harm. There are clear systems and procedures for identifying development needs or any concerns and communicating them to appropriate managers, staff and partners. Effective feedback to people raising any concerns is a consistent feature of practice. Information on children, young people and their families is recorded accurately and succinctly in accordance with agreed policies. Recording includes a chronology of events and contacts with services which assists in the understanding of children's and young people's lives.

Services have clear and effective procedures for communicating with each other and with children, young people and their families. A clear protocol for information sharing is established across all partner organisations and services. They clearly understand when they need to share information about children, young people and their families with each other. They regularly share information in order to meet the needs of children and young people and particularly to protect them from harm and ensure that they are safe, secure and nurtured. Services readily share information which is relevant to the long and short term needs of children and young people. Information is sought from all relevant sources. Services readily share information with children, young people and their families. There is a record of what information has been shared, why and with whom. Account is taken of each child's, young person's or parents'/carers' views when deciding to share information without their consent and the reasons for sharing information without consent are clearly explained to them. Services ensure that children, young people and their parents/carers are aware of what information is held about them.

Illustration QI Level 2

Organisations working with children, young people and their families assess and record their needs, but do not do so consistently within and across organisations. Some use is made of assessment and recording to plan the next steps in learning and development for children and young people, but practice within and across organisations is inconsistent. There are no clear policies and procedures for the assessment and recording of needs, and staff do not consistently recognise the signs that particular children and young people are in need of help or protection from harm. Staff are unsure how to identify development needs or raise concerns and communication with appropriate managers, staff and partners is too ad hoc. Feedback to people raising concerns is inconsistent. Records are incomplete and do not give sufficient detail of events and contacts with services to assist in the understanding of children and young people's lives and their needs.

Services have procedures for communicating with each other and with children, young people and their families but they are not consistently implemented. There is no clear protocol for information sharing across partner organisations and services, and consequently the need to share information about children, young people and their families with each other is not a strong feature of practice. Information-sharing is ad hoc and informal and is not used effectively to meet the needs of children and young people. Children, young people and their families do not receive regular and consistent information. For the most part, there is no record of what information has been shared. Information is either rarely shared because children, young people or their parents/carers have not given consent, or is shared without their knowledge or consent. Where information is shared without consent there is no attempt to explain the reasons. Children, young people and their parents/carers are mostly unaware of what information is held about them.

How good is our delivery of services for children and young people?

KEY AREA 5: DELIVERY OF SERVICES FOR CHILDREN AND YOUNG PEOPLE

QI 5.2 Delivering services that ensure that children and young people are: safe, nurtured, healthy, achieving, active, respected and responsible, and included

Themes:

- Range and level of services provided
- Implementation of policies, strategies and plans
- Realising the vision of safe, nurtured, healthy, achieving, active, respected and responsible, and included children and young people
- Integration of services to support children, young people and families

Key features

This indicator is concerned with the effectiveness of delivery of a comprehensive range of well integrated services for children and young people. The expectation is that services should be delivered in line with the policies and plans of the partner organisations, including the Integrated Children's Services Plan. The focus in delivery of well integrated services should be on the effective realisation of the seven element vision for Scotland's children and young people. This requires organisations to work in close partnership to ensure that services are appropriately integrated at the point of delivery.

Illustration QI Level 5

Services are successful in sustaining the range and quality of provision at a high level and can demonstrate that they have clear strategies, based on the vision for Scotland's children and young people, and planned approaches for improvement. The structures for the delivery of services to children and young people across individual organisations are well planned and are geared to ensuring high quality front line delivery of services. Clear guidance and publicity is provided to stakeholders on the range of services available and how these can be accessed. There are regular revisions and adaptations to improve services as a result of stakeholders' views, national advice and quality improvement processes. Stakeholders are able to access flexible options and have some choice in the range of services on offer. Statutory services are delivered in a highly effective way.

There are clear systems in place for implementing the agreed policies and plans relating to children, young people and their families. Clear protocols and agreements are in place across the Community Planning partners and within individual organisations on lines of responsibility and accountability, with timescales and measurable targets. They take account of resource implications and include procedures for evaluation and review. Central to partners' implementation of their policies and plans is a clear focus on outcomes and impact on children, young people and their families.

Staff at all levels, making provision for children and young people, are fully committed to working together effectively to ensure that children and young people are safe, nurtured,

healthy, achieving, active, respected and responsible, and included. Realising this imperative is at the forefront of the work of all services. Very good support and guidance is given to staff in pursuit of this objective. There is a clear strategy to ensure that all children, young people and families are safe, secure and valued. Services actively promote health and wellbeing in communities, with a particular focus on children, young people and families in vulnerable and minority groups. Preventative and early intervention approaches are strong features of practice in delivering on outcomes for children, young people and their families. Almost all children, young people, their families and other stakeholders are fully aware of the priorities and are committed to working with services to achieve improvements. A culture of personalisation and choice for individuals and groups is a strong feature of effective service delivery. A strong ethos and practice of inclusion permeates the work of services. Children, young people and their families are encouraged to exercise their rights and accept their responsibilities. Effective services are available to vulnerable and minority groups. Services consistently demonstrate good practice in meeting the needs of all children and young people.

There are very clear and effective links between all the partners engaged in the delivery of services for children, young people and their families. Partnership and collaborative working is very effective and productive across all the services. It is clearly guided by a shared commitment to a common vision and shared responsibility for children and young people in need. Children and young people clearly benefit from better and more integrated service provision. All partners engage effectively in the implementation of the Integrated Children's Services plan and support each other in delivery of improvement targets. Across partnerships there is absolute clarity and mutual understanding of improvement priorities and the strategies for delivering on them. There are clear protocols and agreements to guide integrated and partnership working including the allocation of resources and responsibility for leading, implementing and delivering on priorities. There is a clear commitment to pursuing economies of scale in delivering effective and efficient services to people in need. A culture of trust and transparency is evident in all aspects of integrated working at all levels across partner services and agencies.

Illustration QI Level 2

The services delivered by organisations are too variable in range and inconsistent in quality. While some individual organisations deliver some good quality provision, it is developed and delivered in isolation rather than by means of a strategic approach and does not ensure a consistent impact on front line service delivery. Stakeholders are unclear on the range of services available and how these can be accessed. Access to some services is difficult in some neighbourhoods. Stakeholders' views, national advice and quality improvement processes are rarely used to revise, adapt and improve services. Stakeholders are presented with very few service delivery options and choices. Services are delivered in a way which only meets minimum statutory requirements.

Policies and plans relating to children, young people and their families are not implemented consistently. A few protocols and agreements are in place across the Community Planning partners and within individual services but they are not always implemented effectively. Lines of responsibility and accountability are blurred, timescales are not always adhered to and targets for improvement are too vague and imprecise. Resource implications and procedures for evaluation and review are also too

vague and imprecise. While there are some examples of good practice in some organisations, implementation of policies and plans generally lacks a clear focus on outcomes and impact on children, young people and their families.

Many staff across services are unclear about what is required of them to ensure that children and young people are safe, nurtured, healthy, achieving, active, respected and responsible, and included. This imperative has not been clearly enough articulated to them. Some support and guidance is given to staff in pursuit of this objective but it is uncoordinated and lacking in focus. There is a strategy which aims to ensure that all children, young people and families are safe, secure and valued but it is inconsistently implemented across the services. Insufficient attention is given to promoting the health and wellbeing of children and young people in communities. Services predominantly react to crises rather than adopting more preventative and early intervention approaches. Children, young people, their families and other stakeholders have only a limited awareness of priorities and have not been encouraged to work with services in achieving improvements. Services are not sufficiently equipped to meet the individual and personal needs of children and young people or offer them choice in the range and level of provision which adequately meets their needs. Services' policies and approaches to inclusion are unclear and do not always translate into practice. Children, young people and their families are unaware of the full extent of their rights and responsibilities and how to exercise them. Support services for vulnerable and minority groups are uneven. Whilst there are some examples of good practice in meeting the needs of children and young people, practice generally is too inconsistent and variable.

Links between partners engaged in the delivery of services for children, young people and their families are largely underdeveloped. As a result, partnership and collaborative working across all the services is not effective and productive. While there is evidence of a common vision, there is insufficient commitment to working together to meet the shared responsibility for children, and young people in need. There is some integrated working but it has little impact on improving outcomes for children and young people. There is a lack of commitment to ensuring the effective implementation of the Integrated Children's Services Plan. Partners have some shared understanding of improvement priorities but give insufficient support to each other in delivering on them. There are a few protocols and agreements to guide integrated and partnership working, but these are not comprehensive. In integrated working there is a lack of clarity in the allocation of resources and in determining responsibility for leading, implementing and delivering on priorities. The potential of economies of scale across the partnerships to deliver better services to children and young people in need has not been fully exploited. There is a lack of trust and transparency in integrated working which acts as a barrier to improvement.

How good is our delivery of services for children and young people?

KEY AREA 5: DELIVERY OF SERVICES FOR CHILDREN AND YOUNG PEOPLE

QI 5.3 Improving services for children and young people

Themes:

- Arrangements for quality assurance and improvement within and across organisations
- Support, challenge and collaboration amongst service providers
- Evaluating outcomes, impact and information from stakeholders
- Reporting progress to stakeholders

Key features

Improvement of services for children and young people should be a priority which is shared by all partner organisations. This requires all organisations to have robust, consistent and coherent arrangements for evaluating the quality of delivery of services, and for monitoring their impact on the quality of outcomes for children and young people. Engendering a culture of support and challenge within and across service providers is an essential element in quality improvement, so too is a commitment to involve stakeholders actively in the evaluation and improvement of services.

Illustration QI Level 5

Clear and consistent advice is provided to all services for children and young people on quality improvement, development planning, standards and quality reporting and professional review and development. An integrated approach to planning, self-evaluation and reporting is a strong feature of practice across partner organisations. The roles and responsibilities of key staff in ensuring quality improvement and monitoring and evaluating the work of individual services and across services are clearly understood. There is rigorous validation of self-evaluation within individual organisations and across organisations. Services, individually and collectively, rigorously evaluate the effectiveness of their improvement strategies in relation to their impact on meeting the needs of and improving outcomes for children, young people and their families and delivering value for money.

There is a well-developed culture of support, challenge and improvement within individual organisations and across organisations. Across the partner organisations, senior managers actively and systematically take leading roles in challenging and supporting their staff to improve quality. Collectively, they set demanding performance targets for services for children and young people. Peer support and challenge is a strong feature of practice. Strong advice and support is given to all staff across the integrated services to assist them in making improvements. Identified strengths are routinely celebrated and built upon by organisations. Equally, identification of areas of underperformance or those requiring attention result in the development of detailed integrated service action plans that impact positively on the quality of provision. Officers across the partner organisations provide strong support through direct input and targeted resources. The success and development of integrated and collaborative working itself is routinely challenged as part of the process.

Organisations regularly and collectively monitor, evaluate and review provision against the outcomes achieved for children, young people and their families. Service providers work collaboratively to evaluate the combined effect of their services on the quality of outcomes for children and young people. Effective procedures are in place for carrying out rigorous audits to inform the planning, design and delivery of services. These are based on a range of appropriate measurement and monitoring techniques which includes contributions from children, young people and families. Services have developed systematic approaches to gathering and analysing stakeholders' views. Results are used to identify issues for further investigation and action. Information is also gathered from regular visits to establishments and activities, and from standards and quality and inspection reports. Senior officers and managers across services are confident and accurate in their use and interpretation of a wide range of performance data.

There is an overarching strategy to record and report publicly on performance standards across services. The information is provided to key stakeholders in a form that is accessible, evaluative and well presented. The timing of reports informs decision making and leads to improvements in planning and provision. Reports are appropriately linked to agreed improvements priorities. Strengths and areas for further improvement are clearly identified. There are many examples of significant improvements to outcomes for children and young people that have resulted from services' arrangements for self-evaluation and quality improvement.

Illustration QI Level 2

A few organisations have well-developed arrangements for quality assurance and improvement. In most organisations insufficient advice is provided to services for children and young people on quality assurance and improvement. Quality assurance processes lack clarity and consistency within and across services. There is too much variation in the quality of development planning, standards and quality reporting, and professional review and development. Self-evaluation within most individual organisations and across organisations lacks rigour and there is no validation. There is some integrated working on planning, self-evaluation and reporting but it tends to be ad hoc and unstructured. Consequently, the good practice evident in some partner organisations has not yet had an influence on the work of the majority. The roles and responsibilities of key staff in monitoring and evaluating the work of individual services and across services are not clear. There is a lack of rigour in services' evaluation of the effectiveness of their improvement strategies and it does not focus sufficiently on their impact on meeting the needs of and improving outcomes for children, young people and their families and delivering value for money.

A culture of support and challenge within and across organisations has not been well developed. The senior management teams of the partner organisations do not consistently challenge and support their services, nor do they demonstrate a collaborative approach to so doing. Approaches to support and challenge within and across organisations are inconsistently applied. A culture of improvement has not been sufficiently embedded in practice. Insufficient advice and support is given to staff to assist them in making improvements. Some strengths are identified but are not used to celebrate achievement or to further improve services. Approaches do not allow officers and staff to identify clearly strengths and areas of underperformance or those requiring

attention. As a consequence plans are not well targeted or resourced and make little impact in terms of improvements to services. The nature and purpose of integrated and collaborative working is not sufficiently supported or challenged.

Monitoring, evaluating and reviewing provision for children, young people and their families is irregular and unsystematic. Service providers rarely work collaboratively to evaluate the combined effect of their services on the quality of outcomes for children and young people. Some procedures are in place for carrying out audits to inform the planning, design and delivery of services but they are too ad hoc and irregular. There are some measurement and monitoring techniques in place but these do not include contributions from children, young people and families. There are no systematic approaches to gathering and analysing stakeholders' views and fully involving them in evaluating the quality of services. Staff make insufficient use of some sources of evidence such as benchmarking or comparative data when planning for improvement. Information gathered from visits to establishments and activities and from standards and quality and inspection reports is not used effectively to evaluate and improve the performance of services. The rationale for the selection of Best Value service reviews is unclear. Senior officers and managers across services are not wholly confident and accurate in their use and interpretation of performance data.

Procedures for recording and reporting on performance standards are not rigorous or consistently in place. While the majority of organisations provide information to key stakeholders, it is insufficiently evaluative and is not always presented in a suitable form for the range of stakeholders. Reports rarely inform decision-making or lead to improvements in planning and provision. Reports are not fully linked to agreed improvement priorities. There are only a few examples of improvements to outcomes for children and young people as a result of services' quality improvements arrangements.

How good is our management?

KEY AREA 6: POLICY DEVELOPMENT AND PLANNING

QI 6.1 Policy review and development

Themes:

- Range and appropriateness of policies for integrated service delivery
- Coherence of policies
- Formulating, disseminating, evaluating and updating policies

Key features

Organisations contributing successfully to the provision of well integrated services for children and young people do so within the context of the Integrated Children's Services Plan. These organisations have systematic and well-documented approaches to management. These will be supported by a range of effective policies and advice that inform and impact on the practice of those delivering the services. These policies provide clear strategic direction and help to ensure consistency in practice within and across organisations, and help to deliver improved outcomes for children and young people.

Illustration QI Level 5

Organisations providing services for children and young people have clear policy frameworks that cover all of their main areas of activity and responsibility. These policy frameworks set clear expectations for effective service delivery, including delivery in partnership with other organisations. Policies reflect relevant national and local priorities and related improvement objectives. Policy advice is wide-ranging and well balanced in its coverage of strategic and operational matters. Individual policies give specific information about roles, responsibilities and procedures, expectations of quality, outcomes, and evaluation processes. The range of policies within a given organisation provides clear guidance to staff and helps to ensure consistency in practice and clarity about roles and responsibilities, including when working with staff from partner organisations.

The policy frameworks of individual service-providing organisations are consistent with their respective corporate policies. They are related to the Integrated Children's Services Plan and support the delivery of its objectives. Partner organisations communicate effectively with one another to ensure the coherence of their policies, thus contributing to consistency of practice within and across organisations.

Senior and operational managers within and across partner organisations are clear about their respective roles and responsibilities and those aspects of policy for which they are accountable. Clear lines of communication exist between the strategic decision-making process and implementation at operational level. Operational managers and their teams have in place fully-costed plans which detail all relevant strategies, targets, timescales and responsibilities in the discharge of their duties to provide integrated services for children and young people in line with the Integrated Children's Services Plan. There are clear procedures in place for the review of individual policies. Policies are regularly reviewed and updated, taking into account the views of stakeholders.

Illustration QI Level 2

In most partner organisations, the main areas of activity and responsibility are informed by policies. In a number of important partner organisations areas of service provision have been developed without due reference to these policies. In some cases, individual policies do not give a clear enough indication of their practical application. The attention given to specific elements such as roles, responsibilities, procedures, inter-agency collaboration, and expectations of quality is uneven. Operational practice occasionally develops separately from the policy itself, largely in response to individual situations, thus producing some inconsistency.

While most partner organisations have taken steps to relate their policy frameworks closely to the Integrated Children's Services Plan, some important partners have not. Consequently, there is a lack of coherence of policies across partner organisations, leading to duplication of effort in some cases and gaps in provision in others.

Mechanisms for disseminating policies have been put in place, but lines of communication between strategic and operational levels and between the partner organisations are not always clear, and this inhibits the effective management, evaluation and updating of policies. Service teams and individual staff are encouraged to play an active part in reviewing the impact of policies, but lack of perspective, clarity of purpose and understanding of their respective roles and responsibilities sometimes limits the extent and quality of their contributions. Some organisations do not review and amend policies sufficiently regularly. Many policies are not updated to take account of changing circumstances and relevant national and local priorities. Organisations take steps to monitor the implementation of their policies, but sometimes the mechanisms are too informal. The engagement of stakeholders in the process of reviewing and updating policies is at an early stage of development.

How good is our management?

KEY AREA 6: POLICY DEVELOPMENT AND PLANNING

QI 6.2 Participation of children, young people, their families and others

Themes:

- Involvement in policy development
- Communication and consultation
- Active participation in the work of service providers

Key features

Effective organisations offer all stakeholders a variety of opportunities to be actively involved in the development of services they provide. This requires individual organisations to have a range of approaches and mechanisms for participation that can be applied across their areas of activity. Also, when partner organisations come together within the context of the Integrated Children's Service Planning process to develop services, they need to have mechanisms for involving stakeholders in policy development and planning. Effective approaches to communication with stakeholders will recognise that there are a number of different audiences each with a right to be informed on provision and consulted on developments. There should also be a Public Performance Reporting (PPR) framework, or equivalent, to communicate clearly and simply with various stakeholders about the outcomes from and impact of relevant services.

Illustration QI Level 5

A range of cost-effective consultation processes, involving a spectrum of stakeholders, shapes the policies of service providers and informs planning for improvement. Organisations providing services for children and young people have appropriate stakeholder representation on groups undertaking policy development. Such arrangements result in a high level of ownership of changes to policy and services, and have a clear impact on establishing improvement in performance and service quality. These positive features also characterise collective policy-making, in particular where it is linked to the development of the Integrated Children's Services Plan.

Service-providing organisations are committed to effective communication and full consultation with all service users, and interact regularly with a wide range of consultative groups. Individual organisations have planned frameworks for communication and consultation. They provide clear strategic and operational advice and identify main stakeholder groups. The approach to providing such guidance is consistent and coherent across partner organisations. Organisations have clear overall policy frameworks for communication with stakeholders and for public performance reporting. Where there is a legal requirement to consult, this is done effectively. Consultation services are efficiently run so that they give value for money. Full and consistent feedback is given to stakeholders on the outcomes of consultations.

Senior managers encourage and enable the active participation of stakeholders in the work of their organisations. Effective structures and systems are in place to support and encourage such participation. Staff at all levels engage well with children and young people and other stakeholders.

Illustration QI Level 2

The views of some stakeholders are sought but not on the full range of services provided by individual organisations or by organisations working in partnership. Identification of stakeholders omits some important groups. The process of involvement in service development is not sustained beyond the early stages or, conversely, is at too late a stage to have significant impact. Policy development and planning draws too heavily on the input of staff and does not sufficiently involve other stakeholders.

Some of the information given to stakeholders about the development of, and outcomes from, services is well thought out and appropriately presented. However, the provision of information is not consistently systematic or comprehensive. There is no clear overall policy framework for communication and for public performance reporting. Only a limited range of communication methods is used. While a number of consultation mechanisms are used, some of them are not well matched to the context or differentiated sufficiently to the needs of groups. Those being consulted have an incomplete understanding of the rationale, intended outcomes or processes of the exercise.

The active empowerment of participants does not feature strongly. Participants do not always feel consulted about the nature of the activity in which they are engaged. There are insufficient structures and systems in place to support and encourage participation. Although a majority of staff are committed to engaging with children and young people and other stakeholders, staff attitudes towards the participation of these stakeholders are not consistently positive.

How good is our management?

KEY AREA 6: POLICY DEVELOPMENT AND PLANNING

QI 6.3 Planning

Themes:

- Developing and implementing the Integrated Children's Services Plan and plans of partner organisations
- Structure and content of plans of partner organisations
- Use of management information
- Risk management
- Planning for sustained improvement of services for children and young people

Key features

Improvement of services for children and young people should be the explicit purpose of planning and should guide its focus, evaluation, reporting processes and future action. The planning and implementation processes of individual organisations should interface well with the processes for developing and implementing the Integrated Children's Services Plan, and vice-versa. The Integrated Children's Services Plan should be the driving force for a collaborative and sustained approach to improvement of services for children and young people in the area. The effective management of risk is an essential component of planning of services for children and young people.

Illustration QI Level 5

The development of the Integrated Children's Services Plan is led and managed by a group of senior managers from partner organisations who show a very high commitment to joint planning. They share responsibility for the implementation of the plan in their respective organisations and for monitoring its outcomes and impact. There is a clear and very effective framework for planning, implementation and monitoring of the Integrated Children's Services Plan. Clear lines of accountability for the success of the Integrated Children's Services Plan have been established between senior and operational managers within and across the partner organisations. The clear processes which characterise the development and implementation of the Integrated Children's Services Plan are reflected in planning processes of the partner organisations. The Integrated Children's Services Plan is based on rigorous and systematic evaluation of the quality of services provided by partner organisations, and of the outcomes from, and impact of, these services. It contains clear improvement objectives, and strategies for delivery of these objectives. The Integrated Children's Services Plan enjoys wide recognition and ownership.

Like the Integrated Children's Services Plan, the plans of partner organisations are focused on the improvement of the outcomes from, and the impact of, services for children and young people. Planning is structured so that it supports integrated working. Plans cover the full range of services for children and young people. The presentation and structure of plans are clear and precise and immediately accessible to the various users. The implementation of plans is taken forward very effectively through a series of action plans, drawn up by specific teams or individuals responsible for each major development.

The plans of partner organisations and the Integrated Children's Services Plan are informed by relevant national and local priorities for children and young people, analysis of development plans of operational units, Best Value reviews and quality audits. They are informed by an assessment carried out in their area which answers the questions: "*Who are our children?*", and "*What are their needs?*" Partner organisations have well-established and effective systems for monitoring, measuring and reporting on performance. They have databases which give managers a clear picture of the outcomes from, and impact of, services and for recording good practice in the delivery of services. Managers use this information effectively to take strategic and operational decisions regarding improvement of services. Partner organisations have developed efficient and effective means for sharing relevant management information, so that the Integrated Children's Services Plan is informed by high-quality information on the operation and effectiveness of services in the area.

Almost all partner organisations have policies and plans in place for the effective management of risk. The areas of risk covered are comprehensive, spanning a broad spectrum from financial risk through health and safety risks, risks of failing to deliver services to appropriate standards, through to risks associated with ensuring the care and protection of children and young people. Policies and plans on to risk management take full account of standards, guidance and policies at national and local level. They are appropriately tailored to the sector and context within which each organisation operates. They are proactive in character, recognising the need to find an appropriate balance between minimising risk and responding to opportunity. Policies and plans give guidance on the setting up of a risk management framework or frameworks that aim to reduce the risks of adverse events occurring by systematically assessing and reviewing the potential for such events to occur and then seeking ways to prevent their occurrence. Partner organisations work closely together to ensure that their policies and plans for risk management articulate well in areas affecting the delivery of services including the care and protection of children and young people.

Quality indicators and accreditation schemes are used as a sound basis of self-evaluation and planning for improvement across all services. The information from performance data and stakeholders' views are used to set priorities and targets for improvement. These targets for improvement are included in the Integrated Children's Services Plan and in service improvement plans. Action plans identify resources and indicate the links between planning and budget-setting procedures so that improvements are sustainable and achievable. Staff are clear about their roles in monitoring and evaluation processes. There is a clear, succinct format for each service to report on progress in addressing priorities and achieving outcomes. Senior managers make systematic use of the service-planning process to monitor and manage the work of the service as a whole through a regular cycle of evaluation and reporting. The organisations fulfil their statutory requirement to report annually on success in meeting improvement objectives as laid out in their improvement plans. These reporting processes are consistent with the requirements for public performance reporting under Best Value.

Illustration QI Level 2

The development of the Integrated Children's Services Plan is led and managed by a group of senior managers, not all of whom share the same level of commitment to joint planning of integrated services. Attendance at planning meetings is variable, with more junior staff sometimes substituting for senior managers. Agreement has been reached by senior managers on the processes to be used in formulating the Integrated Children's Services Plan but the processes are not well-documented or communicated to key operational managers within the partner organisations. While some of the partner organisations have well developed planning processes, others do not and this leads to difficulties in achieving consistency between the Integrated Children's Services Plan and the plans of partner organisations. Important improvement objectives in the Integrated Children's Services Plan lack credibility because they are not founded on a sufficiently thorough evaluation of practice, outcomes and impact. The degree of recognition and ownership of the Integrated Children's Services Plan is limited and it does not provide a secure basis for a partnership approach to sustained improvement of services for children and young people.

Partner organisations show a commitment to improving services for children and young people, but not all development plans are focused on achieving sustained improvements in outcomes and impact. In some organisations, the presentation and structure of plans are not clear or sufficiently detailed. Plans include too many or too few improvement objectives and they are not central to the quality improvement work of the organisation. Plans only take partial account of national priorities and agreed local priorities. They contain little explicit reference or relation to the aims, priorities and statements of planned action contained in the Integrated Children's Services Plan.

Some partner organisations have effective management information systems and put them to good use. In other organisations, however, a database of knowledge of the overall performance is available, but some sources of evidence are not used, or benchmarking is not always appropriate. Files are not up-to-date or knowledge is held mainly by one person, or is dispersed across too many members of staff. Operational managers' evaluations of performance are recorded but lack convincing detail, or their knowledge of aspects of service provision is patchy. There is a range of systems for monitoring and measuring performance but they do not always combine effectively to provide the audit information which is required to inform decision-making. Weaknesses in management information systems in some partner organisations results in integrated children's services planning in the area being constrained by gaps in information about service performance.

The majority of organisations delivering services to children and young people have policies and plans in place for the management of risk. The nature and quality of these plans is variable, with many failing to cover important areas of potential risk. In some partner organisations, policies and plans generally take account of standards, policies and guidance at national and local levels. However, even in these organisations, there is a tendency not to tailor the guidance to the specific contexts within which the organisations work. The resulting policies and plans on risk management are either too general to be useful or are inappropriate to the particular context of the organisation. In other organisations, there is a lack of awareness by some senior managers of sources of guidance on risk management. Within policies and plans there is insufficient specific guidance on setting up risk management frameworks. Some partner organisations have begun to cooperate with one another on the management of difficult cases but, overall,

there is a lack of a systematic approach across partner organisations to the management of risk.

Overall, partner organisations share a commitment to achieving sustained improvements in services for children and young people, but there are some exceptions. Some organisations have yet to establish a culture of commitment to sustained improvements; in others, there is a commitment but it is not yet matched by effective planning processes. Processes for setting improvement objectives are in place, but lack of rigorous evidence-based evaluation sometimes results in staff pursuing inappropriate improvement objectives. Insufficient use is made of quality indicators in self-evaluation activities and for planning for improvement across all partner organisations. Services have not clearly identified what should be measured in terms of outcomes for children and young people or set well defined targets for improvement. A few senior managers have a good understanding of the information available and how it contributes to planning, but a majority have little awareness. Resources are not always targeted appropriately towards the achievement of agreed priorities. In some cases, insufficient attention is given to fundamental structural issues such as staff training and development, which are necessary to achieve and sustain improvements in performance.

How good is our management?

KEY AREA 7: MANAGEMENT AND SUPPORT OF STAFF

QI 7.1 Sufficiency, recruitment and retention

Themes:

- Identifying and meeting human resource needs
- Recruitment, appointment and induction procedures
- Care and welfare
- Equality and fairness
- Recognition and parity of esteem across partner organisations

Key features

This indicator relates to the effectiveness of organisations in managing the recruitment, appointment, induction and care and welfare of their staff. To provide a high quality service to children, young people and their families, organisations need to have a clear understanding of their human resource requirements and effective procedures to recruit, retain, support and develop their staff to a high level. This entails the establishment of proactive and imaginative recruitment procedures and clear staffing standards. The principles of equality and fairness, together with a commitment to recognise and celebrate achievement, should underpin service-providing organisations' philosophy and practices in the recruitment and retention of staff.

Illustration QI Level 5

Service-providing organisations have sufficient staff to deliver their services. They have very effective human resource management frameworks, supported by a range of clear policies and procedures covering all key areas. Organisations have established clear and appropriate staffing standards for all areas, including centrally-deployed staff, professional and support staff under their management.

Organisations have established effective and safe recruitment procedures. All staff appointment procedures have been developed in partnership with the relevant trade unions/professional associations and are clearly stated and publicly available. When appointing members of staff, full regard is paid to the skills, aptitudes and experience of all applicants and of the relationship of these to the stated selection criteria, job outlines and person specifications for each post. Organisations have very effective induction policies and procedures for all new staff.

Organisations have clearly established a positive culture in which staff are aware of their rights and responsibilities. Every manager is aware of the organisation's duty of care to its employees and have an appreciation of what that entails. Within their human resources policy framework, organisations have a full range of policies and procedures which set out clearly the standards of conduct, care and welfare which all staff can expect and which are expected of them. Feedback from exit interviews informs these policies and procedures.

Organisations have well-established equal opportunities policies relevant to the needs of

those who work in and use their services. There are clearly defined principles and procedures which underpin organisations' approaches to recruitment and support of staff. Embedded in these, issues of equality and fairness including race, religion, ethnicity, disability and gender are fully addressed and effectively monitored, including through statistical methods. All children's services staff are supported in promoting anti-discriminatory practices.

Organisations have established a strong ethos of positive recognition and celebration of achievement, within which all staff are encouraged and supported to do their best. Senior managers regularly communicate with the workforce to identify staff successes, examples of best practice and innovative practice. Staff achievement and success are appropriately recognised. When staff work across sector boundaries in multi-disciplinary teams, their professional expertise is fully recognised by colleagues and managers in partner organisations.

Illustration QI Level 2

Some organisations providing services to children and young people have not recognised the need to fill and create important posts. Resulting staff shortages have increased workloads and have had a negative impact on the quality of aspects of service provision. Although personnel policies are in place, there are important gaps in staffing in essential areas. While staffing standards have been produced for some aspects of service provision, such standards do not exist for all areas of service provision or for all groups of staff.

The recruitment procedures of organisations generally operate satisfactorily, but tend to be reactive rather than planned and proactive. Appointment procedures are inconsistent, open to interpretation or fail to recognise or align the skills, aptitudes and experience of applicants to clearly defined selection criteria. Staff induction courses are available but senior managers have not systematically customised these to support the induction and development needs of different groups of staff.

Managers are conscious of their responsibilities relating to care and welfare of staff, but are sometimes uncertain about the scope of the organisations' duty of care to employees. Staff are not always fully aware of their rights and responsibilities. While there are personnel policies relating to care and welfare of staff, these do not adequately specify the standards of conduct, care and welfare which staff can expect or which are expected of them.

Organisations have produced written policies on equality and fairness, but these have not sufficiently influenced or been built into staff recruitment and appointment procedures. Job advertisement, recruitment and appointment procedures contain clear statements about commitment to equality and fairness, but they do not always meet the needs or expectations of minority groups. Relevant statistics are not routinely monitored to inform recruitment policies and outcomes. Staff with disabilities find it difficult to access and work in many locations.

Managers recognise and value the contributions of staff who report directly to them, but they have yet to establish a wider ethos of reward for success. Senior managers do not formally and systematically identify examples of best or innovative practice, nor are they, in the main, fully aware of staff achievements across establishments and services. In

some organisations there is a culture which does not value the contributions of staff from other organisations, particularly when they work in different disciplines.

How good is our management?

KEY AREA 7: MANAGEMENT AND SUPPORT OF STAFF

QI 7.2 Staff deployment

Themes:

- Appropriateness and clarity of remits
- Understanding of respective remits and responsibilities across sector boundaries
- Deployment to achieve planned priorities
- Communication and involvement in decision-making

Key features

This indicator is concerned with the effectiveness of individual and team contributions to the provision of high quality services. The main asset of any organisation is its people. In order to achieve the objectives agreed in the Integrated Children's Services Plan and in the service or improvement plans of partner organisations, staff require to be deployed effectively. Their work should be focused on the achievement of their organisation's planned priorities and improvement objectives, whilst also responding to stakeholders' needs. Managers in different partner organisations need to be conscious of the need to work together to achieve efficient and effective deployment of staff so as to avoid gaps in, or duplication of, services within the area.

Illustration QI Level 5

All members of staff providing services to children and young people have clear job descriptions and remits. Organisations have developed clear lines of communication and accountability for staff, in line with their schemes of delegation. Staff are appropriately empowered, challenged and supported.

Staff acknowledge that the provision of integrated services for children and young people is a multi-disciplinary endeavour. They are clear about the contributions to be made by the different partner organisations in delivering integrated services. They understand the particular roles which they are expected to play, where the boundaries of their responsibility begin and end, and how they should work and communicate with colleagues in partner agencies to ensure that children and young people benefit from integrated services.

Staff are effectively deployed in implementing their organisation's improvement plan or equivalent and understand how this relates to the Integrated Children's Services Plan for the area. They have a good understanding of the roles they are expected to play in providing and improving services for children and young people. Their job remits and activities articulate clearly with their organisation's statements of improvement objectives. Managers in partner organisations work closely together to ensure that staff are deployed so as to deliver efficient and effective services.

Staff are very positive about the frequency, sufficiency and quality of information they receive from managers. Effective arrangements have been made for exchanging management information across sector boundaries. In general, staff are actively involved in decision-making processes which affect their working practices. Senior

managers are visible and accessible to staff. Staff have good opportunities to raise concerns, or to make constructive suggestions to senior managers which are considered seriously. Decision-making responsibilities and budgets are appropriately devolved to teams.

Illustration QI Level 2

Most staff have detailed job descriptions and remits, but there are important gaps in the remits, or they do not always relate clearly to the stated improvement objectives of the organisation. As a result, some staff do not always carry out their duties in an appropriately focused fashion. While clear lines of communication and accountability have been established for most staff, some feel isolated or uncertain about their roles and responsibilities. Senior managers lack confidence or demonstrate a reluctance to empower staff to take decisions, and generally take such decisions themselves.

Staff are generally aware that the provision of fully integrated services for children and young people is a multi-disciplinary endeavour. They know in general terms about the commitments of their organisation in this respect, but are unsure about the details. They are unclear about the parts played by other organisations and how these relate one to another. When working in inter-service teams, they are uncertain about how their roles and responsibilities relate to those of staff from other organisations.

Managers deploy staff to achieve the planned priorities of the organisation. However, staff remits and job activities do not always align with the improvement objectives set by their organisation. While most staff are aware of their own organisation's improvement objectives, they are not always aware of how these relate to the Integrated Children's Services Plan. They are unclear as to how their work relates to this wider context, and of the importance of their contributions to achieving priorities, outcomes and targets set in the Integrated Children's Services Plan.

Ineffective communication or inadequate consultation on major issues sometimes give rise to complaints from staff. Communication across organisational boundaries is generally poor, resulting in staff being confused or uncertain about what they should be trying to achieve and how, when brought together to work in groups. Senior managers are seen to be distant or remote. There are few opportunities for staff to raise concerns or put forward constructive suggestions for service improvement. A good range of development groups (or equivalent) has been established but the criteria for participation in these groups are sometimes unclear. Staff sometimes perceive that few opportunities exist for them to become involved in the work of development groups.

How good is our management?

KEY AREA 7: MANAGEMENT AND SUPPORT OF STAFF

QI 7.3 Training, development and support of staff

Themes:

- Professional competence and confidence
- Processes for staff review and support
- Training and development
- Joint multi-disciplinary training

Key features

This indicator relates to the management of staff review processes and the provision of training and development opportunities for staff. This includes multi-disciplinary training and development for all staff involved in the delivery of integrated services for children and young people. Organisations should evaluate their effectiveness in monitoring and reviewing the performance of staff against agreed criteria, and in facilitating their personal and professional development. All staff must be given appropriate opportunity to develop their skills to maximum effect in order to achieve continuous improvement in the quality of services for children and young people. Staff should receive a formal programme and record of professional review and development (PRD) or continuous professional development (CPD).

Illustration QI Level 5

Managers ensure that all staff involved in delivering services for children and young people are supervised, supported as necessary, and demonstrate appropriate levels of professional competence. The confidence which staff show in carrying out their duties derives from having appropriate qualifications and experience, backed up by relevant CPD opportunities. Staff recognise situations in which they do not have the professional competence to meet particular needs of children and young people and have the confidence to refer these children and young people to colleagues or services that can meet these needs. They work well with colleagues from other disciplines, respecting and valuing the competences which they bring to teamworking.

Organisations have developed formal CPD/PRD frameworks for all groups of staff. Senior managers have translated these frameworks into clear and user-friendly procedures and processes, all of which are well supported by relevant documentation and training for staff at all levels. The review processes lead to the identification of staff strengths, skills and development needs.

Organisations demonstrate a clear commitment to developing all their staff. Training and development programmes arise from formal identification of staff development needs through the PRD/CPD processes, and from the needs of the organisation's own development programme aimed at achieving national or local priorities. Organisations have produced well-considered catalogues of staff development opportunities, based on an audit of development needs arising from the staff review process and from the organisation's priorities. Senior managers monitor the uptake of training opportunities by

staff and evaluate the impact of training on the capacity of staff to achieve the organisation's improvement objectives.

Partner organisations have worked together to identify the staff development needs associated with implementation of the Integrated Children's Services Plan, and senior managers from the partners have established a joint forum which meets on a regular basis to discuss the provision of joint/inter-agency training. Senior managers from partner organisations create opportunities to bring their respective staff together, on a regular and planned basis, to provide joint training and development on shared priorities and multi-disciplinary practices. Evidence is available to demonstrate that joint training and development have led to quantifiable improvements in identified, stated and measurable aspects of services for children and young people.

Illustration QI Level 2

Most staff show satisfactory levels of professional competence and confidence. However, due to recruitment difficulties they sometimes find themselves working in situations which stretch their levels of professional competence. Occasionally, some staff have misplaced confidence and do not recognise that they do not have the qualifications and skills to deal with a given situation and fail to refer children or young people to appropriate colleagues or services. Due to a lack of confidence in their own professional competence, some staff have difficulty in working with professionals from other disciplines. Frameworks for management supervision of staff exist but are not always adhered to, so that some staff lack adequate supervision and support.

Not all organisations have adequate frameworks for ensuring CPD/PRD in relation to delivery of services for children and young people. Most staff participate in a CPD/PRD programme, but the processes can sometimes be open to misinterpretation and their application varies in quality and rigour within and across partner organisations. A significant number of staff are not reviewed on a regular basis. Associated documentation is not always clear or user-friendly and some staff may not have received initial PRD training. The review processes do not clearly identify individuals' strengths, skills and development needs. Senior managers monitor the uptake of courses by staff but do not assess the impact of these on the achievement of the organisation's improvement objectives.

Organisations provide a limited range of in-service courses and development opportunities for staff. Senior managers have produced in-service catalogues but these do not systematically take account of identified staff development needs or service priorities. As such, they are limited in their use or usefulness. Take up of training opportunities by staff is patchy, and groups of staff have needs which are sometimes not recognised or are ignored.

Meetings take place involving senior managers from partner organisations, but these are neither programmed regularly nor characterised by agreed agendas. Joint training is seldom discussed or viewed as a priority. Senior managers of partner organisations have created few opportunities to bring their respective staff together for training and development purposes. There is no discernible evidence available to demonstrate that joint training and development has led to quantifiable improvements in the provision of services for children and young people.

How good is our management?

KEY AREA 8: PARTNERSHIP AND RESOURCES

QI 8.1 Partnership working

Themes:

- Service level agreements, roles and remits
- Working across agencies and disciplines
- Staff roles in partnerships and teamwork

Key features

This indicator refers to the complementary roles played by organisations involved in the provision of services for children and young people, in promoting and encouraging effective partnership working. To fulfil the requirements of Best Value and to conform to accepted good practice, there must be mechanisms in place to link leadership and management decisions to the needs of children and young people. Involving all partners and stakeholders actively in the development of services for children and young people will require a range of approaches to consultation and communication that can be applied across the services' areas of activity. There should also be in place a Public Performance Reporting (PPR) framework to communicate clearly with the full range of partner organisations and stakeholders.

Illustration QI Level 5

All partner organisations have developed a collaborative, strategic framework for services for children and young people within which joint working can be established and can flourish. To achieve sustainability and measurable impact, meaningful partnership working is built into strategic planning at the highest levels. This is monitored rigorously through the services' complementary structures for accountability. A culture is established which encourages all staff employed by the partner organisations, children, young people, their families and other stakeholders to be involved. Joint service level agreements are established at strategic level and are monitored and evaluated at operational level across all partner organisations, to ensure that each has a positive impact. Consultation and communication with and between the partners are regular, structured, mutually supportive and effective.

Multi-disciplinary partnerships, which have been fostered to deliver integrated services for children and young people, work very effectively. Productive partnerships operate between partner organisations, voluntary and community organisations, and other public and private sector bodies. The partner organisations successfully promote a clear commitment to multi-disciplinary working. They engage jointly and routinely in the planning, delivery, monitoring and evaluation of a range of collaborative initiatives and multi-disciplinary working. This contributes effectively to the achievement of the shared vision, values and aims of the partners involved in delivering high quality services to children, young people and their families.

Managers show a high level of commitment to fostering partnership working and multi-disciplinary team development. Leaders are proactive in establishing strong links

with establishments and services, children and young people, their families and other stakeholders. They lead joint improvement activities willingly and enthusiastically. They are successful in mobilising and focusing the shared commitment and enthusiasm of staff in establishments and services and of their partners and stakeholders, to promote and deliver continuous improvement. Staff consistently seek opportunities for improvement and development in all partnerships. An ethos of teamworking exists within and across organisations. Clear remits, lines of communication and accountability characterise the approach to teamworking. Each team leader regularly monitors team and individual performance against achievement of agreed priorities, outcomes or targets. Senior managers meet regularly with team leaders to monitor and evaluate team performance. A systematic network of working teams (or equivalent) has been established. To take forward a range of developments, initiatives and innovations.

Illustration QI Level 2

The partner organisations involved in delivering services for children and young people have made little progress in establishing a strategic framework within which joint working can be established and flourish. Insufficient effort is made to encourage all partners to be involved routinely in meaningful joint working. Service level agreements, where these exist, tend to be established at operational level instead of flowing from the strategic planning process. There is little evidence of a systematic approach to monitoring and evaluation of impact and outcomes relative to children's and young people's experience. Consultation and communication with and between the main partner organisations is not always effective or supportive in nature.

The culture of partnership working amongst organisations providing services for children and young people is underdeveloped. Some organisations value partnership working more than others but their efforts are thwarted by a lack of response to their overtures to set up more integrated working arrangements. Some productive partnerships operate between partner organisations but these have arisen largely on an ad hoc basis, as a result of the drive and determination of a few committed individuals rather than a result of a strong policy lead from senior managers in their respective organisations. As a consequence, children, young people and their families experience services which are fragmented in nature.

Some senior managers have built up and sustained effective working relationships with a narrow range of partners. There is evidence of effective partnership working but the overall picture is patchy and inconsistent. Many front-line staff intuitively recognise the need to work in partnership with colleagues in other organisations. Their efforts at partnership working are, however, hampered by the lack of a clear drive and commitment to partnership and multi-disciplinary working from senior managers in a number of partner organisations. Within this generally negative environment some individual staff members have set up effective working arrangements with colleagues from other disciplines in order to improve the integration of the services they provide. While staff are, in the main, deployed in teams, some individuals do not relate to a specific team, or teamworking is generally not well developed. Deployment of teams and of individual team members is not always linked to agreed priorities. Multi-disciplinary teamworking is at an early stage of development. While staff are committed to working in multi-disciplinary teams, they are uncertain about their roles and responsibilities and about to whom they are accountable. Performance monitoring within some teams, and of teams by senior management, is lacking in focus, consistency and rigour.

How good is our management?

KEY AREA 8: PARTNERSHIP AND RESOURCES

QI 8.2 Financial management

Themes:

- Budget management
- Range and implementation of financial procedures and controls
- Processes for collecting, analysing and evaluating financial information
- Managing funding streams to achieve objectives agreed in the Integrated Children's Services Plan
- Providing Best Value

Key features

This indicator relates to the capacity of partner organisations providing services for children and young people to deliver planned national and local priorities and, in particular, the Integrated Children's Services Plan, whilst, at the same time, delivering Best Value. This requires all services to have rigorous and thorough approaches to financial management. The working relationships among organisations, including their respective finance departments (or equivalent), are critically important.

Illustration QI Level 5

The budget process for services for children and young people is driven collaboratively and corporately by elected or board members and by the chief executives of all partner organisations, based on a three-year budget cycle which takes account of national priorities. It has clear links to the joint service planning process. Budgets and financial systems and processes are regularly and rigorously scrutinised at corporate and all management levels, both within and across organisations. There are procedures to identify and deal rigorously and effectively with budgetary variances. Elected or board members are kept well informed about budgetary matters.

Elected or board members and chief executives of all the partner organisations regularly receive high quality financial reports, and actively monitor budgetary performance at all levels across all organisations, making well informed judgements as appropriate. Appropriate committees regularly consider high quality financial reports, and make clear financial decisions in line with their delegated powers. There is a systematic, inter-service approach to budgetary administration which provides senior staff with easily interpreted, accurate and reliable data to allow well-informed decisions to be taken. This includes regular budget reports which monitor committed expenditure. Arrangements for financial planning and expenditure are comprehensive, transparent, and dynamic in nature. Service-specific and inter-agency financial procedures are well known to budget holders. Staff with financial responsibilities are supported by clear and comprehensive written procedures. Where appropriate, the partners have developed, or are in the process of establishing, very effective devolved management procedures.

Senior managers in partner organisations have developed, at both service-specific and inter-agency levels, fully effective working practices with their finance colleagues. This has resulted in a two-way flow of reliable, accurate and timely financial information to allow the partners to take decisions as appropriate. Fully effective financial and

administrative procedures and processes have been developed jointly between the main partners to plan and manage both mainline and non-mainline (core budget and specific grant) budgets. These procedures and processes allow for committed expenditure to be tracked regularly.

Elected or board members and chief executives of the main partner organisations have established clear collaborative procedures to link the budget construction and monitoring procedures to the priorities identified jointly within the Integrated Children's Services Plan. As a result, senior officers of the partner organisations have a good knowledge of the inter-agency procedures which govern both budget construction and expenditure linked to policy priorities. The partners have, or are in the process of establishing, joint aligned budgets across all appropriate areas of the provision of services for children and young people, supported by clear processes and documentation for staff, both departmentally and in partnership with each other. All the relevant service-specific and shared funding streams are clearly articulated with the policy and priority objectives outlined in the Integrated Children's Services Plan. Where appropriate, the partners have consulted fully with stakeholders, including children and young people, in the construction of aligned budgets and in expenditure towards achieving fundamental objectives. In addition, they have communicated all relevant financial information to stakeholders through Public Performance Reporting (PPR) procedures.

The main partners have jointly established a clear policy on Best Value. They have set out a comprehensive programme of service-specific and inter-agency Best Value reviews (or equivalent) covering all aspects of the delivery of services for children and young people. Their financial planning and management regimes are characterised by efficiency, effectiveness, elimination of duplication and the provision of high quality services and value for money. All budgets, systems and procedures are regularly and formally reviewed, with the aim of securing continuous improvement and Best Value. Financial planning and decision-making are governed by the principles of option appraisal and Best Value.

Illustration QI Level 2

The partner organisations' budget processes are driven almost exclusively by the current financial year's budget and limited account of national and local priorities. Links to the service planning process are tenuous. There is regular discussion of financial matters by senior management but such discussions tend to be departmental or service-specific rather than collegiate. Elected or board members receive reports from senior managers in a number of the partner organisations, but these tend to be service driven rather than geared towards holistic provision for children and young people. They are often general in nature and frequently lack reliable, issue-specific information on which to base decisions. They are not always presented in a user-friendly format which is easily interpreted and understood by elected or board members.

Elected or board members and chief executives of the partner organisations receive reports of a financial nature, but these are limited in frequency, detail, specificity or reliability. As a result, elected or board members are not always well enough briefed to make informed decisions. Likewise relevant committees sometimes lack the quality of financial information and advice necessary to arrive at informed decisions. Each of the service organisations has established financial procedures. However, they have not been fully integrated within their organisation's corporate financial systems, or articulated

with those of their partner organisations. They tend not to be well supported by clear, user-friendly and accurate documentation and by staff development and training. Arrangements for financial planning lack coherence and rigour and are not flexible enough to accommodate financial trends or a range of management and performance information. There is no effective system in place to monitor, review and improve financial management and performance across services for children and young people. Some services have begun to develop a more devolved approach to financial management, but the picture is patchy and not well understood by staff in the partner organisations.

Although liaison does take place between service staff within individual organisations and their finance colleagues, no clear, consistent or inter-agency working practices have been agreed. The transfer of information tends to be reactive and issue-specific rather than planned and proactive, or it lacks reliability, accuracy and rigour. Financial and administrative procedures do not make sufficient provision for the collaborative planning and management of non-mainline (specific grant) budgets, with the result that expenditure in this area is reactive, creating potential for underspend or overspend.

Elected or board members and chief executives of the main partner organisations have yet to establish clear collaborative procedures to link the budget construction and monitoring procedures to the priorities outlined in the Integrated Children's Services Plan. Consequently, senior officers across the partner organisations have only a patchy understanding of the potential of establishing inter-service procedures for budget construction and expenditure or link these to policy priorities. The partners have not yet established a process for developing aligned budgets. Staff are not well supported by clear written processes and customised documentation to guide their work. The Integrated Children's Services Plan makes frequent reference to budgets and funding streams but these are, in the main, service-specific and departmentally orientated rather than inter-service and honed towards integration of services for children and young people. There is some evidence of consultation with stakeholders in the budget construction process, but such tends to be service-specific and reactive rather than geared towards articulation of services or built into the service planning cycle. A number of the partner organisations have established individual Public Performance Reporting (PPR) procedures and, on that basis, communicate a range of financial information to stakeholders. However, articulation of reporting procedures across the organisations is still at an early stage.

Each partner organisation has a policy on Best Value, but these have not yet been articulated to any significant degree. Each has established a series of service-specific Best Value reviews (or equivalent) but these have tended to be reactive rather than planned in a proactive and collaborative fashion. As yet, the various reviews have not encompassed the full range of services for children and young people. While some aspects of the partner organisations' financial systems and management regimes are efficient in themselves, they do not cohere significantly enough to add clear value to the quality of services for children and young people. Financial documentation used within some or all of the organisations espouses the principles of Best Value, option appraisal and value for money, but there is only limited evidence to demonstrate that such are being translated into routine operational practice.

How good is our management?

KEY AREA 8: PARTNERSHIP AND RESOURCES

QI 8.3 Resource management

Themes:

- Strategic resource planning
- Resource deployment
- Efficiency and effectiveness in use of resources
- Health and safety

Key features

The management of finances is closely linked to the wider management of resources. This indicator sets out to evaluate the effectiveness of the partner organisations' individual and collective approaches to the management of resources in the widest sense, including the provision of healthy and safe environments. The organisations will need to demonstrate that they are fully aware of the range of resources at their disposal, from both internal and external sources and that they have developed a collaborative, planned and proactive approach to resource management, which provides a firm base from which to promote service development and continuous improvement.

Illustration QI Level 5

Senior elected representatives or board members and managers of all partner organisations work closely together to make transparent, evidence-based decisions on the provision and allocation of resources to services for children and young people. They have developed, in line with relevant national advice and organisational priorities, comprehensive asset management strategies/plans and are producing an inter-agency strategy and estate portfolio, which will promote further integration of services for children and young people. The partners have agreed a clear strategic planning framework which takes account of capital and revenue budgets, asset management, human and other resources and which articulates clearly with their agreed service planning cycle. Clear evidence exists to demonstrate that this approach has yielded significant improvements in the quality of services for children and young people.

The collaborative approach by the main partner organisations to resource management ensures that resources are allocated to meet national and local improvement objectives and priorities. Senior managers of the organisations provide strong leadership in targeting resources towards the delivery of essential priorities and objectives and in pursuit of Best Value and continuous improvement. Senior managers across the partner organisations review, on a regular basis, resource management information, performance and proposals for improving quality.

Senior managers clearly demonstrate a collaborative approach to monitoring the efficiency and effectiveness of the deployment of the collective resources at their disposal. This approach is reinforced through a regular inter-agency focus on quality assurance. It is underpinned by a systematic approach to scrutinising all relevant aspects of use of resources. The efficiency and effectiveness of resource deployment

and use are monitored through a shared and rigorous inter-agency approach to self-evaluation, based on an agreed set of quality indicators. In monitoring the effectiveness of the use of shared resources, senior managers clearly demonstrate a commitment to the principles of Best Value and continuous improvement in performance. Such a commitment is reflected at all levels of operation across the partner organisations and evidenced by effective collaborative practice and the avoidance of duplication in the use of public resources.

All partner organisations involved in delivering services for children and young people clearly demonstrate a commitment to the health, safety and wellbeing of children, staff and other users of public premises and resources. The partners each has in place a comprehensive Health and Safety manual (or equivalent) providing staff with clear and accessible documentation governing the use of premises, the deployment of resources and all relevant aspects of operations. Staff at all levels in each of the organisations have received appropriate Health and Safety training, including generic aspects arising from legislation and established best practice, including specific areas such as child protection procedures. Senior managers in all organisations, heads of establishments and other key staff are very well versed in European and national legislation governing Health and Safety, and there are clear hierarchical structures in place in each of the organisations governing the line management responsibilities for all staff. Regular high-level, inter-service discussion takes place on all relevant aspects of Health and Safety. A systematic and collaborative approach to risk management is adopted by the partner organisations, in developing, managing and evaluating the deployment of resources. In planning and allocating both capital and revenue funding to the organisations involved in delivering services for children, elected or board members and senior managers clearly demonstrate an awareness of, and commitment to, the health, safety and wellbeing of children, young people, staff and all others using premises and other resources.

Illustration QI Level 2

Resource provision and allocation is not strategically planned between the main partner organisations, nor is it linked closely enough to agreed objectives. Elected or board members and senior managers representing the main partner organisations have only made provision for resource allocation in the short term, and such decisions provide only limited evidence of adherence to the principles of option appraisal and Best Value. Some of the partners have developed an asset management strategy/plan but such are neither comprehensive in their coverage of their estates nor sufficiently detailed, and they have not been discussed at inter-agency level by senior managers, with a view to taking a collaborative approach to estate management. While a strategic planning framework between the main partners is in place, this does not routinely guide their work practices, nor does it take full account of capital and revenue budgets, asset management, human or other resources and it only articulates to a limited extent with the service planning cycle. Decision-making on the provision of resources pays insufficient attention to sustainability. There is limited evidence of the organisations' approach to resource management yielding discernible improvements in the quality of services for children and young people.

The rationale for the strategic deployment of resources to the range of services for children and young people lacks transparency and does not match closely with relevant national guidance. Senior managers have a generalised view, of the resources which

are at the disposal of the various services but this is lacking in detail and specificity. This partial view may derive from incomplete or unreliable information, or from informal systems and sources. Links between resource management and the service planning and budget processes are tenuous in nature. The range of resource management techniques and tools used by the partners is inconsistent and variable.

While some discussion takes place between senior managers on the sharing and deployment of resources for children's services, there is no systematic, inter-agency approach to scrutinising resource performance, or monitoring the effectiveness and efficiency of deployment of resources. Some or all of the partner organisations have developed, and operate, quality assurance systems customised for their respective services. However, there is no systematic, collaborative approach to quality assurance or use of agreed performance measures, such as shared quality indicators, against which to evaluate the effectiveness of the deployment and use of resources. Senior managers in some or all of the partner organisations are clearly committed to improving the quality of provision and to the principles of Best Value, but that commitment is not easily recognised at different levels across the organisations. There are some examples of effective working between agencies, but these tend to be the product of specific groups of staff demonstrating their own initiative and are project-based, rather than deriving from a dynamic, shared inter-agency commitment to maximise the collective use of resources for the benefit of children and young people. There is evidence of unnecessary duplication, within or across agencies, in the provision of services for children and young people.

Each of the partner organisations involved in delivering services for children has produced, for the guidance of staff, Health and Safety documentation governing the use of premises and resources, but these are neither systematic nor comprehensive, and important information or advice is either unclear or missing. Some key staff are unclear about certain procedures or how to access important information relating to the use of premises and resources or regarding certain operations involving services to children. Senior managers across the partner organisations do not discuss Health and Safety matters on a planned or regular basis. Procedures across the organisations neither cohere well, nor are they consistent in guiding the work of staff who work on an inter-service basis. A range of staff have had access to Health and Safety training, but some key staff have not received training on important aspects related to their work. There is little evidence, from some or all of the partner organisations, of a systematic risk management approach in the use of premises and resources or in relation to operations governing services for children. While each of the agencies has allocations of capital funds and discrete revenue budgets available to address aspects of Health and Safety, these have not been planned or allocated systematically, collaboratively or adequately to address the relevant issues requiring attention across the services.

How good is our management?

KEY AREA 8: PARTNERSHIP AND RESOURCES

QI 8.4 Information systems

Themes:

- Data collection, storage and retrieval
- Sharing of information
- Access to information
- Processes for analysing, evaluating and using information

Key features

A Management Information System (MIS) is a system used to enter, store, manipulate and retrieve information about services for children and young people. A well run, computerised MIS supports the central business processes of modern organisations and provides the means of monitoring provision and improving effectiveness. A MIS should be seen in the context of helping all partner organisations to deliver services for children and young people and achieve their shared improvement objectives. Analyses of the data can give managers, located centrally and within the range of services, staff and other stakeholders a more informed view of current practice and quality across services for children and young people.

Illustration QI Level 5

A well structured and rigorously observed system is in place for central and coordinated collection, analysis and evaluation of data relating to the full range of services for children and young people. The MIS provides the full range of establishments and services with access to robust information, to inform planning for improvement and to target support and resources more effectively. The services work closely to promote the effective and shared use of the MIS through agreeing and defining core sets of data and providing training in the use of the system as a management tool. The use of the MIS is a major contributor to the effective delivery of integrated services for children and young people and to the achievement of the partners' agreed improvement objectives.

At individual service level, the MIS articulates with the corporate information communications technology (ICT) strategy (or equivalent). There are good links in place between service staff and those performing corporate ICT tasks. There are clear ICT linkages in place or under development across and between all the main partner organisations. As a result, information is communicated electronically and routinely to the MIS systems operated by component services and establishments. The MIS enables managers to have a comprehensive view of the work of establishments and services and allows them to focus on agreed outcomes for children and young people. Each service provides clear procedures and purposeful support to staff in the systematic collection, collation and analysis of data on budgets, staffing, learning, care and support for children, young people and their families.

The system of access controls is tailored to meet the needs of users across the partner organisations, allowing quick and consistent access to information to address the needs of children and young people. The full range of establishments and services make

effective use of shared information generated for administration, planning and monitoring. Storage, filing and retrieval of information comply fully with both the Data Protection and Freedom of Information Acts. The main partner organisations have developed, agreed and internalised clear agreements and protocols regarding the confidentiality of data and legislative requirements. In addition, clear protocols for data exchange have been agreed with and across all establishments and services.

Central coordination and interpretation of data characterise the management of services for children and young people. A wide range of data is collated and analysed to monitor and demonstrate improvements in performance. The MIS is used to identify trends and to provide benchmark and comparative information for establishments, services and their staff to use in planning for improvement. Well established and very effective reporting formats facilitate identification of areas of services for children and young people in which performance is exceptionally high or low, so that support and challenge can be targeted accordingly. Effective joint practices and systems are in place to track all relevant aspects of services for children and young people, including those pertaining to vulnerable children and young people, such as those who are looked-after. The system enables high performance to be recognised and under-performance to be identified quickly and addressed. Senior managers and appropriate staff have access to effective inter-service training in the use and analysis of performance data.

Illustration QI Level 2

Management Information Systems (MIS) are in place in most of the main partner organisations, for central collection of performance data, but these have not yet been meaningfully aligned and they only provide for limited analysis of data. They provide establishments and services with access to information but have limited impact on planning for improvement or in assisting towards targeting support and resources more effectively. The main partner organisations have not yet reached agreement on the core sets of data, nor have staff been trained sufficiently. The range of data which is maintained is limited and this prevents the use of the MIS from impacting positively on the achievement of agreed improvement objectives.

Links between the main partner organisations' service staff and their corporate ICT colleagues are patchy and not always conducive to coherent working. There are no clear systems in place to develop linkages between systems across and between the organisations. As a result, there are delays in the electronic communication of information such as budgets and administrative returns. The system is not yet sufficiently developed or coordinated across the range of services to give managers a comprehensive overview of the work of establishments and services. The procedures and support provided to staff, in the collection, collation and analysis of data, is not sufficient to provide consistency in working practices.

The system of access controls is cumbersome and inconsistent across organisations, often not meeting the needs of users. Establishments and services make limited use of the information generated for administration, planning and monitoring. The data held by the partner organisations does not meet the full range of information requested, nor is this information always readily available in an appropriate form. Written protocols on the exchange and confidentiality of data and legislative requirements, where these exist, are not generally well understood by staff or other stakeholders.

Central coordination and interpretation of data is limited. A range of data is analysed but this is insufficient for partners or individual organisations to monitor or demonstrate improvements in performance. Some important information is not included in the collation and analysis. The MIS does not play a major role in identifying trends and improving benchmark and comparative information for establishments, services and officers to use in planning for improvement. Systems to track performance are largely paper-based rather than electronic and they do not provide reliable enough evidence to identify high or under-performance. Analysis and evaluation of statistical data held within the MIS does not play a significant role in self-evaluation or in driving continuous improvement. Senior officers and relevant staff across the partner organisations have limited access to training in the analysis and use of performance data.

How good is our leadership?

KEY AREA 9: LEADERSHIP AND DIRECTION

QI 9.1 Vision, values and aims

Themes:

- Coherence of vision, values and aims for services for children and young people
- Sharing and sustaining the vision
- Promotion of positive attitudes to social and cultural diversity

Key features

This indicator relates to the way in which the corporate leadership of those organisations that provide services for children and young people exercise their functions through shared vision and unity of purpose. A commitment to promoting social and cultural diversity should be embedded within that vision and unity of purpose. To demonstrate best practice, partners need to ensure that their shared vision actively influences practice at the point of delivery. The indicator focuses on the extent to which the shared vision, values and aims guide planning for and impact on maintaining and improving the quality of services for children and young people.

Illustration QI Level 5

There are clear links between the vision, values and aims contained within the Integrated Children's Services Plan and each organisation's particular contribution to providing services for children and young people. The vision, values and aims are clearly shared and owned by the main partner organisations and convey a picture of the organisations' aspirations for, and expectations of, services for children and young people. Clear and comprehensive statements of the shared vision, along with values and expectations, direct the work of all partner organisations. These statements encompass the purposes of services for children and young people, as well as national priorities and expectations for children and young people.

The leadership of partner organisations are strong advocates for the shared vision and associated values and aims, so that these command a high degree of ownership among all stakeholders. They have been developed through involving a wide range of stakeholders and clearly set out the partner organisations' commitment to a homogenous culture of empowerment, improvement, innovation and service excellence. Leaders ensure that the vision, values and aims are reflected in each organisation's operational and improvement plans. Services and all partners have a very good awareness of the shared vision, values and aims and of their own specific roles in their delivery. Leaders ensure that the shared vision, values and aims are regularly revisited and reinforced in events and activities which themselves generate a strong sense of shared purpose.

The partners' shared vision, values and aims set out clear expectations for equality, tolerance and social justice. Elected or board members and senior officers of all partner organisations demonstrate commitment to equality issues and provide a clear lead in emphasising their importance. Managers of services for children and young people are strongly committed to the values and aims for equality and they promote social and cultural diversity. Operational plans at all levels in each organisation address the promotion of equality, diversity and inclusion.

Illustration QI Level 2

Leaders in some of the partner organisations have established a vision which directs the work of their service, but which is not shared perceptively across the spectrum of services for children and young people. Neither does that vision significantly impact on processes or outcomes for children and young people. The respective aims of each organisation are referred to within the Integrated Children's Services Plan, but these are insufficiently linked or not significantly shared and owned across the various services. Managers of services do not always demonstrate the same level of commitment to agreed priorities. The purposes of services for children and young people and national expectations and priorities are insufficiently emphasised or not fully and clearly explained. The vision, values and aims across the services for children and young people are not sufficiently linked or shared and have only limited relevance to the main activities of the partner organisations, their establishments and services.

Where leaders of some partner organisations have developed a vision that directs the work of their service, this has not been communicated sufficiently well to, or shared with, political leaders or leaders of the other services. In developing the aims for services for children and young people in the area, involvement of stakeholders has been limited and, consequently, their understanding and ownership of these is limited. The aims are not sufficiently well embedded in the work of the services and do not convey or emphasise a shared culture of empowerment, improvement, innovation and service excellence.

The aims and vision of the partner organisations set out expectations for equality and social justice. However, these are not fully shared across or owned by the main partners, nor are they yet fully embedded in an appropriate range of operational policies and procedures. Service managers are committed to promoting social and cultural diversity, but this commitment is patchy across services for children and young people or is not always translated into action.

How good is our leadership?

KEY AREA 9: LEADERSHIP AND DIRECTION

QI 9.2 Leadership and direction

Themes:

- Shared leadership of services
- Strategic planning and communication

Key areas

This indicator is about collaborative leadership and strategic planning of future sustainable development within a climate of continuous improvement of services. It relates to the success of senior managers across the services for children and young people in steering strategic planning of services in a way that empowers and galvanises staff at all levels to commit to the practical realisation of the organisations' and stakeholders' aspirations for services for children and young people.

Illustration QI Level 5

Political leaders, board members and senior managers in the partner organisations demonstrate very high levels of commitment to corporate leadership of, and direction to, all services. That commitment is reflected in their personal involvement in high level meetings and activities which influence future service direction and delivery. It is characterised by a shared determination to develop services of the highest quality and to drive continuous improvement within a culture of robust self-evaluation of service quality, which leads routinely to agreed priorities and actions to secure further improvements. Their shared vision, expectations and commitment are clearly demonstrated by their joint leadership of, and involvement in, high profile events which guide future direction and celebrate success.

Senior elected representatives or board members provide officers of the partner organisations with strong political leadership and direction towards meeting or exceeding national and local expectations and aspirations, and demonstrate a commitment to continuous improvement. Working together, they provide a clear, shared view of what the partners are aiming to achieve. Senior managers of the partner organisations develop effective and strategic business plans and identify important actions, intended outcomes and major targets. Planning documents, which are accessible, succinct and set out essential priorities within a well-managed planning cycle, are shared between the partner organisations. Joint planning leads, demonstrably, to sustainable change and improvement. Channels of communication between the main partners and with establishments, services, children and stakeholders are effective. There is strong corporate leadership and direction from and across the partner organisations on agreed priorities for children and young people. Staff across the services take full account of the need for succession planning, securing accountability, making appropriate use of data for informed decision-making and evaluating impact and outcomes. Strong corporate leadership steers teams and individuals successfully through the challenges and difficulties associated with strategic planning, by a range of organisations and cultures.

Illustration QI Level 2

Political leaders, board members and senior managers of the partner organisations have not fully developed a strong commitment to corporate leadership of, or direction to, all services for children and young people. Their personal involvement in high level meetings and activities is patchy and their contributions are not always well articulated. While on an individual basis, they demonstrate a commitment to improving service quality, there is only a limited shared determination to drive improvement, and processes for evaluating and improving quality are neither well developed nor effective.

Senior political leaders, board members and senior managers of the partner organisations do not always demonstrate a consistently clear or shared view of the strategic role of services for children and young people in planning for improvement. As a result, the work of the various services is taken forward mainly at an operational level and change is often not sustainable. Politicians or board members and managers do not always demonstrate a clear or shared understanding of the national context or of national and local priorities. Officers are sometimes unclear about political priorities while elected representatives feel that they are not always provided with consistently high quality advice and support. This lack of understanding is often transmitted to senior management teams and beyond, with the result that teams and individuals sometimes operate with a degree of isolation from senior management. Insufficient account is taken of the need for careful succession planning, securing accountability, making appropriate use of data for informed decision-making and evaluating impact and outcomes.

How good is our leadership?

KEY AREA 9: LEADERSHIP AND DIRECTION

QI 9.3 Leading people and developing partnerships

Themes:

- Developing leadership capacity
- Building and sustaining relationships

Key features

This indicator relates to the effectiveness of the partner organisations in building capacity for leadership at all levels and securing positive working relationships and successful outcomes for children and young people. The effectiveness of the partner organisations' senior managers, their deployment, responsibilities and collaborative working in relation to service requirements and important strengths are clearly relevant. Delegation to and empowerment of staff across partner organisations are important features.

Illustration QI Level 5

Leaders across the main partner organisations demonstrate a wide range of effective leadership skills and motivate each other, and others, to give of their best. The range and balance of skills, personal qualities and experience within and across the organisations make for very effective senior management teams, which work closely and effectively with each other. Senior managers exemplify their organisations' collaborative approach to quality improvement through active leadership and personal involvement in improvement strategies and activities. There is in place an empowering culture of improvement and an understanding that all staff at all levels have an important role to play in taking forward the work of the partner organisations in delivering high quality services for children and young people. Staff feel empowered, able and confident to exercise initiative, share responsibility and adopt lead roles in their own areas. They understand their own leadership roles and those of colleagues within and across the partner services. The structures and processes in place draw upon the collective knowledge, experience and personal interests of a wide and diverse range of staff and create opportunities for them to take a lead role in initiatives. Effective systems are in place to evaluate the impact of leadership programmes and to promote leadership, sustainable developments and succession planning.

Leaders across the partner organisations have developed a supportive working environment in which people share a sense of responsibility to improve the quality of services. Talents are identified, promoted and used to best effect. Working relationships are built on trust and reflect a genuine regard and concern between colleagues within and between organisations. Systems are in place to support staff to share information, tackle challenging situations and address difficulties. Staff across the organisations have regular opportunities to review their work, share ideas, learn from each other and give and receive constructive feedback. Staff are encouraged and supported to do their personal best and their achievements are recognised and celebrated.

Illustration QI Level 2

Within individual service teams, a range of leadership skills is in evidence, but there are important weaknesses in others, which affect the overall effectiveness of corporate leadership of services for children and young people. There are important gaps or weaknesses in the range and balance of skills, abilities and experience within and across the organisations' senior management teams, impacting on their overall effectiveness. The culture across services for children and young people, although positive, does not convey a full sense of challenge and support, change or progress. Senior elected representatives and senior officers do not demonstrate a consistently clear view of their own leadership roles and those of others. The heads of each service and their respective senior management teams are not always successful in gaining the full commitment of staff in establishments and services and stakeholders. As a result, there is sometimes confusion about who is leading what, and a consequential lack of ownership of important initiatives. There exists a dependency culture in which staff feel inhibited about taking the initiative and are overly dependent on others. Insufficient account is taken of the need for leadership development and training and succession planning.

Leaders emphasise the importance of effective working relationships in the delivery of well integrated services. However, they have not yet done enough to ensure consistency in the quality of relationships and the culture of the working environment within and across partner organisations. In some teams, staff are not fully supported in their work or development and their contributions and successes go unrecognised. Relationships between staff and senior managers vary considerably and interactions between the staff of organisations sometimes inhibit the delivery of quality services for children and young people. Although some opportunities do exist for partner organisations to meet and discuss their work, such are relatively infrequent. Managers have not taken the lead in creating an atmosphere which is conducive to open, robust and honest dialogue and feedback on performance. Consequently, such meetings lack focus and tend to have very limited impact on services for children and young people. The achievements of staff within and across organisations are not regularly or routinely recognised or celebrated.

How good is our leadership?

KEY AREA 9: LEADERSHIP AND DIRECTION

QI 9.4 Leadership of improvement and change

Themes:

- Continuous improvement
- Creativity, innovation and step change

Key features

This indicator is concerned with the effectiveness of the corporate leadership of services for children and young people to maintain high levels of quality, deliver continuous improvement and work towards achieving excellence in the quality of provision for children and young people. It also relates to the ability and success of senior managers across services, to systematically encourage and support self-evaluation innovative and effective practices which bring about positive changes in experiences of children and young people.

Illustration QI Level 5

Each head of the partner organisations plays a very strong and focused role in leading their own specific service's and the multi-disciplinary services for children's commitment to continuous improvement and in delivering high quality outcomes and impact. They are well supported by their senior management teams, all of whom have clearly defined and well focused quality improvement roles and responsibilities within their specific service areas and, crucially, in the more holistic delivery of services for children and young people. Managers in services clearly replicate that commitment and focus on improving quality. As a matter of routine, partner organisations constantly explore ways of driving up their capacity for improvement, through self-evaluation and providing opportunities for developing shared and distributed leadership and expertise. Managers at establishment and service level, within and across the partner organisations, act as a collective, collaborative group in support of the multi-agency vision, values and aims of services for children and young people and work purposefully and constructively with senior management teams to enhance capacity for improvement.

Senior managers demonstrate a very good strategic overview of what constitutes best practice, collaboratively across services for children and young people and within their specific service areas. They regularly explore, research and adopt innovative practice being taken forward in other organisations. As a matter of course, they use the results of self-evaluations and Best Value and other relevant service reviews to consider new and innovative methods of integrated service delivery and imaginative approaches aimed towards challenging staff at all levels and in all areas of service provision to promote and secure improvement. Senior managers at central and service level routinely apply the principles and practices of risk management when considering changes and innovations. The culture also requires successes, excellence and innovative practices to be recognised and celebrated widely. Such innovative practices have led to qualitative improvements in services for children and young people. Senior managers across the main partner organisations lead and manage change strategically and effectively through prioritising and focusing on a manageable number of high priority initiatives and communicating them to staff at all levels, in all partner organisations.

Illustration QI Level 2

Senior management teams in the partner organisations discuss quality and continuous improvement on a fairly regular basis, but seldom on an inter-agency context. In the execution of their individual remits, they tend to focus on systems, functions and processes rather than on the more strategic vision of quality improvement or on driving improved outcomes and impact. While individual partner organisations have a plan for improvement and support its implementation, they tend not to drive this collaboratively, nor do they individually or collectively have a strategic approach to developing and enhancing capacity for improvement. Staff within and across partner organisations generally work hard, but their skills and achievements tend not to be recognised, celebrated or disseminated widely. While managers of services for children and young people generally work hard and demonstrate a commitment to their own specific area of provision, they tend not to see themselves as senior officers of the partnership and, as such, they make only a limited contribution to collaborative working.

Senior managers across the partner organisations are generally aware of a number of examples of good practice within their own specific service areas, but tend not to be aware of such examples within other partner services for children and young people. They have not developed a strategic overview of best practice. They seldom look externally to identify or consider new or innovative approaches, nor do they look more holistically at ways of enhancing integrated approaches to services for children and young people, often preferring to take a service specific approach. Successful or innovative practice is not systematically identified, supported, celebrated, evaluated or disseminated across the partner service areas. Senior managers tend to take an operational and service specific approach to change management, rather than an inter-agency, collaborative and strategic approach. As a consequence, the focus tends to be on a series of unrelated projects and initiatives which present as having unclear and inconsistent priority or importance. Communication to staff on the reasons for, and approaches to, the management of change is ineffective, with the result that they are unable to understand or strive towards potential benefits or to share the vision.