



Social Services Improvement Agency

# **Social Services Peer Review Guide**

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# 1 Introduction

This guidance manual is designed to help councils and their partners in preparing for a peer review. It is part of a sector led improvement process. It is not intended to be prescriptive, but to build on the experience of the Welsh Local Government Association and the Social Services Improvement Agency.

A peer review is a constructive and supportive process with the central aim of helping councils improve. It is not an inspection nor does it award any form of rating judgement or score. It is delivered from the position of a 'critical friend' to promote sector led improvement. Peer inspections do however have the potential to help authorities recognise and address areas for improvement before they are identified through formal inspection procedures.

The peer review is a learning process and will help a council to assess its current achievements and to identify those areas where it could improve. Peers learn as much as the reviewed services.

Peer reviews in social services intend to help local government help itself to respond to the changing agenda for Children's and Adults' Services. The review involves exploring an authority's ambitions, performance and delivery structures against the WLGA's Standards for Children's and Adults Services. A review will work from either the Children's Services or Adults Services Standards. The Children's Services Standards were developed and piloted in Neath Port Talbot. The Standards are built around the following key themes, which are also divided into sub-themes (set out in the Standards):

- Outcomes for and the experiences of, the children, young people and families or the adults who use services.
- Leadership, strategy and working together.
- Service delivery, effective practice and commissioning.
- Performance, quality and resource management.

The Standards reflect wider issues such as community leadership, performance management and partnership that need to be probed to obtain a rounded view of the effectiveness of social services. They take account of the equality duties as set out in the Equality Act 2010, outlined at Appendix 3, and the Welsh Language Standards. In seeking to define the 'ideal authority' they can also be used in other contexts as the sector seeks to define and develop excellence from within.

Peer reviews are a unique, and privileged, opportunity to challenge authorities, and support improvement in local government.

Good luck and enjoy your review.

## 2 Options for a review

A peer review can be as broad or narrow as a council wishes. However, the information below sets out the basic stages in a review, and this Guidance Manual provides more detailed information regarding individual roles, logistics etc.

**The experience of WLGA is that it is necessary to allow a lead-in time of at least three months and preferably more to prepare for a peer review.**

- 1 Council indicates that it may wish to have a review. WLGA responds and appoints a review manager. An initial discussion is held with the council to discuss why a review may be appropriate. Council discusses with relevant partners (for example, health, education, housing, the police etc) and agrees participation.



- 2 Council confirms it wishes to have a review. The Review Manager meets with the council (and any partners it wishes to invite) to discuss any particular focus, dates, the format and length of the review, the self-assessment, case records audit, peer team requirements and any necessary background information and issues this Guidance Manual to the council. Council decision is made about whether the review will include a written report or a final feedback and action planning workshop. It is also for the Council to decide whether any post review feedback to the Safeguarding Board is required. The council appoints a sponsor (usually the Director of Social Services).



- 3 A proposal is then produced by WLGA (including any relevant charges) and sent to the council. Once the council agrees the proposal a contract is issued. The council appoints a review organiser.



- 4 WLGA sources proposed review team, in consultation with Review Manager. Council consulted and team agreed. The council is engaged in the preparations for the peer review, including: writing the self-assessment; compiling evidence for the self-assessment and background documentation requested for the review; preparing the review interview schedule, booking rooms and people for interview etc.

- 5 Four weeks before on site work, Council produces documents requested in the Guidance Manual, a self-assessment, an audit file log and draft interview programme. Council also agrees final arrangements for case records audit with Review Manager.



- 6 Review Manager meets with the review team, briefs them on the process, agrees programme of interviews, focus groups, practice observation and any workshop with the council. This meeting also identifies main issues likely to arise during review (based on documents and self-assessment), key lines of enquiry and any requests for additional documents or people to see during the on-site period.



- 7 Final review programme agreed two weeks before on site work.



- 8 Team meets either the evening before the review and/or has team meeting on morning of the first day on-site. Collects evidence throughout first to final day on-site. If the council and its partners have elected to have an action planning workshop rather than a report then at the end of the penultimate day planning for this commences.



- 9 On final day on-site the team puts together a presentation outlining findings, against the Standards then presents findings to council and whomsoever they invite. The action planning workshop takes place immediately following this if it is being undertaken.



- 10 Review Manager produces a full report if the council has commissioned this, consults team and sends to council for comment within 4 weeks of the conclusion of the review. The peer review team are invited to comment on the draft report and clarify any areas of uncertainty. At this point there will be an internal Quality Assurance review of the draft report; once this has been completed the Review Manager sends the draft report to the council for comment.



- 11 Final report issued.



- 12 Any additional feedback activity (as agreed) is undertaken. The council and its partners are encouraged to share the final report with key staff, members and partners and are encouraged to make the report public. However, the report belongs to the council, who have the final decision about whether to publish.

### **3 The peer review team**

A Social Services peer review team will have a mix of skills and experience and is likely to be made up of 4-6 people:

- The team will be led by a Review Manager with experience of having been a Director of Social Services.
- Current Director of Social Services.
- A further senior manager with responsibility for either Children's or Adults Services generally or in a specialism appropriate to the review.
- An expert practitioner peer.
- An education, NHS senior manager or a senior police manager peer, or other public sector representative with appropriate knowledge and experience
- A local government member peer with knowledge and experience of Social Services.

The Review Manager will act as the first point of contact for the authority. Team members will be recruited through WLGA. In addition a Project Co-ordinator will be appointed to assist with logistical arrangements, payment of expenses etc. The Project Co-ordinator will not normally attend the on-site work.

Should an authority's specific requirements make it necessary, the number of people on a review team can be increased or decreased, for example to focus on a specific area in more depth or an issue outside the Standards. This will affect the cost of the review. There may also be occasions when, for the purposes of gaining first-hand experience of a peer review, WLGA requests the permission of a council for an additional WLGA member of staff to participate. Where approval for this is given, all associated additional costs will be met by the WLGA.

#### **Review Manager**

The council will be assigned a Review Manager by the WLGA within a few days of the council commissioning a peer review. Their role is:

- To manage the overall review process and advise the team and council on it.
- To liaise with relevant people to ensure that practice and policy developments are incorporated and the peer team is appropriate for the review.
- To support the council in preparing for the review, including conducting the pre-review scoping meeting with the authority and liaising with them over the timetable and documents.
- To read the documentation and self-assessment sent in advance of the review.

- To agree specific arrangements for the interviewing of people using services, children and young people, carers and their families/ representatives.
- To agree arrangements for the case records audit **including confirmation that the appropriate DBS checks are in place for peers undertaking this role.**
- To source the peer team through the WLGA, ensuring that there is an appropriate balance of knowledge and experience and that appropriate contracts are in place.
- To liaise with the review team.
- To act as coordinator, facilitator and adviser to guide the team through the review
- To use their skills and experience to provide insights into how the council is performing over the whole standards.
- To lead the team during the on-site work, fronting the team to the council and building a positive and constructive relationship with them. The lead officer peer will normally lead the final presentation.
- To feedback key examples of good practice and learning issues to the WLGA/ SSIA.
- To deliver the final on-site presentation, led by the Review Manager.
- To draft the final report, process it through the relevant WLGA quality assurance procedures and liaise with the team and council to agree it.
- To manage any follow up work if agreed with the council.

## **Director Peer**

The role of the Director Peer is:

- To read the documentation and self-assessment sent in advance of the review.
- To undertake on site interviews and focus groups including the engagement of partners and assessing how well they are delivering their safeguarding responsibilities.
- To be one of the team undertaking the case records audit.
- To lead on any workshops for social workers and their managers in relation to national developments and good practice, or any action planning workshops as appropriate.
- To input specialist advice around the Social Services work generally and any specialist theme allocated to him or her.
- To comment on a draft of the final report.

- To use relevant skills and experience to provide insights into how the authority is performing over the whole of the Standards.

### **Other Specialist Peer**

The role of the other specialist peers is:

- To contribute specific areas of knowledge and experience, for peers from the NHS or police, or other agencies, to contribute a multi-agency perspective to the review team.
- To read the documentation and self-assessment sent in advance of the review.
- To undertake on site interviews and focus groups including the engagement of partners and how well they are delivering their safeguarding responsibilities.
- In most cases, to be one of the team undertaking the case records audit.
- To contribute to the final presentation.
- To contribute to the final report.
- To use skills and experience to provide insights into how the authority is performing over all the Standards.

### **Member Peer**

The role of the member peer is:

- To provide an elected member perspective to the review particularly as regards the policy, decision making and community leadership.
- To advise on specific areas of knowledge and experience.
- To read the documentation and self-assessment sent in advance of the review.
- To undertake on site interviews and focus groups.
- To contribute to the final presentation.
- To contribute to the final report.
- To use skills and experience to provide insights into how the authority is performing over the whole of the Standards.
- To make links with the lead councillor in the council being reviewed.

## Expert Practitioner Peer

The role of the expert practitioner peer is:

- To contribute specific areas of knowledge and experience as an expert social work practitioner.
- To read the documentation and self-assessment sent in advance of the review.
- To undertake on site interviews and focus groups including the engagement of partners and how well they are delivering their safeguarding responsibilities.
- In most cases, to be one of the team undertaking the case records audit and some of the interviews with people using services.
- To contribute to any workshops, supported by the lead peer.
- To contribute to the final presentation.
- To contribute to the final report.
- To use skills and experience to provide insights into how the authority is performing over all the Standards.

## Putting the team together

### The WLGA

The WLGA will work closely with the Review Manager in drawing together the review team. The WLGA is responsible for the recruitment and placement of peers across the local government sector. They will seek to allocate peers that have shown that they are competent in the areas required for peer work, namely: working with others, developing others, providing challenge, communicating, planning and political and organisational sensitivity. The Review Manager has proved to be a critical role in the process and appointing to this role will be a first priority.

### Liaison with you

The Review Manager will liaise regularly with the council and WLGA whilst the review team is being drawn up in order to ensure the team matches the council's requirements as closely as possible. **The aim is to have a complete team allocated at least six weeks prior to the review commencing.** This is a guideline, as circumstances may dictate otherwise and the main priority is to ensure suitability of team members.

The council will be consulted once the team has been drawn up to ensure acceptability. Acceptability is defined in terms of ensuring that particular team members do not have a current or previous relationship with the council, which could affect their ability to be impartial, for example previous employment, a close relationship with a senior officer or member within the authority to be reviewed, or a commercial interest.

Where grounds exist for non-acceptance of a team member, the WLGA will seek to replace the individual with someone with a similar experience and background.

## **4 The council team**

The Review Manager will ask the council to supply two people to fulfil the following roles:

### **Review Sponsor**

This should be a senior manager within the authority. Unless there is good reason otherwise, this would be expected to be the Director of Social Services. Their role is:

- To commission the review.
- To ensure there is high level commitment to the review process within the council and with appropriate partners.
- Where necessary, to ensure that people are available for interviews, focus groups and practice observation.
- To be the main link between the authority and WLGA on principal issues affecting the review.
- To receive and collate comments on the draft report.
- To provide oversight for the council's Review Organiser (see below).

### **Council Review Organiser**

The role of the Review Organiser is:

- To be the 'single point of contact' with the WLGA Review Manager and Project Co-ordinator on all logistical details e.g. base room, catering, transport, scheduling, access etc.
- To prepare the draft timetable in consultation with the Review Sponsor and ensure that people are available for interview and for practice to be observed.
- To supply the required documents to the review team including setting up the case records audit.
- To work with the council's managers to prepare and support any people using services or children and young people to participate in the peer review.
- To be available during the on-site review to guide the team to venues, for requests from the team additional documents, meetings etc. In practice the review manager will need to see the review organiser at frequent intervals during the review.

The authority should also be aware of its own obligations, which are set out in Appendix 4.

## 5 Ground Rules

The following are ground rules for the peer review team, which are replicated here for the council's information.

In bringing together a review team, which has not met before, it is important that everybody is clear about the parameters within which they will be operating. To aid this, a set of ground rules have been developed and the Review Manager will ensure that peers are familiar with these.

### **Ensure a positive experience for the council and its partners and the team**

It is important during the review to focus on the strengths of the council as much as the areas for possible improvement. Every council has some areas of excellence in Social Services (which they may not recognise themselves) and some areas with which they are struggling. It is important to share good practice as well as to highlight themes for development.

The impression that the team makes is very important and the council must always feel that their needs are being prioritised. The review team will maintain a professional approach throughout the peer review.

### **Confidentiality**

All of the information that a team gleans from discussions with people during the course of the peer review process is absolutely non-attributable to individuals. This will be emphasised at the start of every meeting and focus group and respected at all times; the only exception being where safeguarding concerns are raised. It is vital for the credibility of the review that the team establishes a climate of trust, in which people feel they can be open and honest.

One of the key motivations for people acting as a peer is the opportunity to learn from others, and participants are very much encouraged to return to their own authority at the end of the process and talk about their experiences. However, in doing so, they must respect the fact that some of the information the team acquires may be sensitive in nature, and it is important that it is not used in any way that may undermine the council or the integrity of the review process.

It is difficult to predict what issues will arise during the course of a review, but if a team member encounters anything in an interview or workshop that they are worried about, it is important that they share this with the team as a whole and with the Review Manager **before acting on it in any way**. In the unlikely event that unlawful activity is identified, established procedures are in place and should be covered in the contract between WLGA and the authority.

The Review Manager will need to make a judgement as to whether the matter raised is sufficiently serious to be escalated to the Director of Social Services and/ or the Chief Executive. The matter should be pursued where the issue is pertinent to the review or where there are serious concerns regarding the safety and welfare of people who are using services and/ or the wider community. Serious service or practice issues identified during the review should be shared with the Director of Social Services. If these issues relate to the Director, it may be necessary to report them to the Chief Executive.

When compiling the peer written feedback or feedback slides, every effort must be taken to ensure information is not presented which criticises individuals directly or in a way that enables them to be identified. However, the review team must report its general findings even if this involves delivering 'difficult' messages.

### **Guidance for interviews**

Wherever possible interviews will be conducted by two people. There may be circumstances, however, where the interview programme means that this is not possible or appropriate.

The Review Manager will stress the following points to the team at the first team meeting:

- At the start of each session, first introduce yourself, and then invite your colleague/s to do the same.
- The review is not an inspection. It is a supportive but challenging process to assist councils and their partners in celebrating their strengths and identifying their own areas for improvement. The key purpose of the review is to stimulate local discussion about how the council and its partners can become more effective in delivering improved outcomes for adult services.
- The peer review team are a team of peers supporting sector led improvement for local government and its partners.
- The peer review is an independent sector-led learning process in relation to Social Services and will highlight both areas where improvement might be gained and areas where effective practice might be shared more widely.
- The team is there at the request of the council and its partners - it is not being imposed upon the council.
- Team members are acting as 'critical friends', looking at both strengths and areas for further consideration.
- The views of a wide range of people both inside and outside the council are being gathered
- The process depends on people being open and honest about what the council is good at, and what issues need to be addressed.

- All the information that the team gleans is absolutely non-attributable to individuals.
- The team will not at any time act on 'hearsay' or unsubstantiated information. All evidence will be triangulated and robust.
- However, safeguarding concerns, if identified, will be communicated with appropriate staff or the Director or Chief Executive if they are serious, as above.

### **No surprises policy**

It is good practice to adopt a 'no surprises' policy. This means that before the final feedback the Review Manager and Director Peer will give the council's Project Sponsor a good idea as to what will be presented. This gives the chance to clear up any misunderstandings, extra crafting of wording etc. However, it is the review team's presentation and they should present what they have found although they should be sensitive to the council's situation.

It has been found to be helpful for the Review Manager and/or the Director Peer and the council's Director to have informal discussions about the progress of the review during the week on site. Additional informal feedback sessions on review progress (especially if significant issues have been found) are beneficial and should be built into the review timetable. This is consistent with the policy of 'no surprises'.

The review team presents its findings to an audience of the council's choosing. There will be opportunity for people to raise questions and discuss the findings.

## **6 Preparing for a review**

### **Initial visit**

As soon as the review has been commissioned, the Review Manager will visit the council to meet the Project Sponsor and, if possible, the council's own Review Organiser. If possible the director peer will also be present at this visit, but this may not always be achievable.

The purpose of this pre-review scoping visit is to:

- Discuss the council's motivation and aims for the review, and the thoughts of members and officers about it.
- Develop the Review Manager's understanding of the key issues facing the authority, including any sensitive issues they need to be aware of.
- Give initial consideration to the key areas for the review to focus on and the timing and timetabling of the review.
- Establish arrangements for the case review and practice observation process within the review.
- Reach decisions about the content of the review, including any workshops.
- Consider the peer review guidance, discuss the process and look at the arrangements that will need to be made by the council to facilitate the work of the review team including: base room, workshops rooms, documentation, timetable and publicity.

### **Documentation**

At least four weeks prior to the review start, the Review Manager must have ensured that all the team members have received background documentation on the council, and its activities, in either hard or electronic format. Obviously these will need to be supplied by the council.

The council should also make sure a hard copy of all the documentation is available in the team's base room while they are on-site.

The council should complete a self-assessment against the Standards for Children's or Adults Services as appropriate and supply up to 20 documents that provide supporting evidence for the self-assessment.

In addition, also ensure there are available in the base room any relevant newsletters, magazines or leaflets produced by the authority.

## **Timetable**

The council is asked to draw together a schedule for the week of the review that will enable the team to gather evidence against all the areas of the Standards that have been agreed. A draft should be sent to the Review Manager around four weeks before the review, with a view to agreeing a final version two weeks in advance of the on-site work. In practice it is recommended that work starts on this as soon as possible as it is vital to the review process. Experience has shown that pulling this together is one of the most time consuming and trickiest parts of the review process. In particular, we have found that engaging people using services or children and young people and their families can take time and care. The review team will be flexible to meet their needs, speaking with them face to face, on the telephone or even by e-mail if that assists them to be involved.

Care must be taken to ensure that the schedule covers all the relevant people but also allows time for team meetings. A sample schedule of what the programme might look like is included with this guidance at Appendix 1. Further guidance on putting this together is contained in section 7.

## **Publicity**

The council will need to think about how the council will make members, staff and partners aware of the review. WLGA can provide the council with a 'What's It All About' document that briefly describes the peer review process, the dates of the review, the review team members and where to obtain further information. This can be provided electronically and/or as hard copies.

At the end of the peer review WLGA may request permission to make the final peer review report public. This may include putting it on the SSIA website, but this will only be done with the council's explicit consent. The council should also consider how it will publicise the review findings.

## **Review team base**

The review team will require a room to use as a base for the time they are on site, which should be located in the main headquarters of the council. The room must be for the sole use of the team members, with all interviews and focus groups being held elsewhere. It needs to be private and lockable, with sets of keys for team members going in and out at different times. It also needs to be accessible to the team after hours.

The room will need to be equipped with the following:

- A telephone.
- Two computers - with access to the internet, the council's intranet and e-mail system. In practice it helps if review team members can bring their own lap tops as well and.
- A high speed, good quality black and white printer.
- Two flipcharts with marker pens and replacement paper (flip charts should be able to be hung on the walls).
- A central meeting table providing adequate room for each person on the review team.
- Facilities for modem dial in from the team's own computers.
- The team will require around 300 large-sized post-it notes, for use in the team base room and during workshops and focus groups.
- 'Blu-Tack' and an office stapler.
- Access to a nearby fax machine and photocopier are also needed.

## **Catering**

Tea, coffee, water, fruit juice, fruit, biscuits and other light snacks should be provided in the room or nearby and be accessible at any time throughout the day and evening. The team will need to be provided with lunch each day, either in the team base room or from a canteen. It is important that catering arrangements are planned in conjunction with the timetable for the week and in consultation with you, given different members of the team will, on occasion, take breaks at different times, whilst on other occasions the team will need to work together over lunch in the privacy of their base room.

The Review Organiser will liaise with each of the team members in advance and notify the authority in good time of any specific dietary requirements they may have.

## **7 The on-site review process**

The core of a standard review takes place for five days on-site at the council. SSIA/WLGA Standards for Children's or Adults Services provide the framework for the review. There may be additional areas or a particular focus agreed from the pre-review scoping meeting. The team will be seeking evidence that allows it to make a reasoned comparison against each of the themes, exploring current strengths or progress and areas for consideration. The process is a dynamic one and requires a high degree of flexibility throughout the review. The Review Manager will have discussed areas of focus for the review in advance with the council. In addition, each team member will have reviewed the documentation and identified areas to probe further, whether they are good practice examples, or areas for possible improvement.

Evidence is gathered from the documentation prepared by the council and its partners, from interviews, focus groups, file audits and practice observation.

Information gleaned on site is reviewed on a daily basis as a team. However, in practice it is often easier if each member of the review team has particular responsibility for one or more themes. This will help with pre-reading and with identifying who they wish to see during the review. It is helpful to agree these roles prior to the review, or at the team meeting the evening prior to the review.

Each team member writes the key points from their interviews on post-it notes. Ideally there should be one post-it which contains the point, where it came from and any supporting evidence. There should be one post-it for each point. These are discussed with the team during team meetings and placed on flip charts for the relevant Standard.

As the review progresses, review team sessions should move towards finding suggestions and recommendations rather than agreeing on basic issues. Gaps in information are identified and covered during the remainder of the time on-site. On the last days, the team reviews the information it has collected on the flipcharts then reports back its key messages and recommendations on the way forward via a presentation that the Review Manager will co-ordinate with the rest of the team.

### **Beginning the review**

The review team will meet prior to the review. This time is important for the team to get to know each other and share their initial thoughts on the review and the information contained in the background documentation provided by the council.

### **First day morning**

The Review Organiser should meet the team upon arrival to show them to their base room, inform them about the facilities that have been provided and address any immediate queries that they may have. The team will then prepare the room, including putting up the flip charts for each theme of the Standards on the wall. The team will then meet alone for a further session.

## **Remainder of first, to penultimate day**

The team will spend time gathering evidence to enable it to compare the council against all elements of the Standards. A peer review consists of taking into account the views of a wide range of stakeholders. To gain these views the review team will hold a series of one to one conversations, group/team discussions and focus groups with leaders, senior managers, staff, partners, service users and the community itself. There may also be observations of relevant meetings.

Workshops and focus groups will have two members to facilitate them.

In addition at least two members of the team will undertake the case records audit outlined in Appendix 5.

The first day morning should include a presentation by the council and whatever partners they consider appropriate to the review team. This should cover what the council considers to be the key issues they face, their achievements and further challenges.

The circumstances of the particular authority being reviewed will lead the review team as to who is actually seen. A programme should be agreed from the following suggestions:

## **Local Authority**

- Leader of the council.
- Lead member for Children's or Adults Services.
- Chair of relevant scrutiny committee(s).
- Leader of the opposition.
- Chief Executive and Chief Officers.
- Director of Social Services.
- Director of Education and/or Housing.
- Safeguarding lead if different from the above.
- Key heads of service.
- For Children's Services, the Chair of the Youth Offending Team Management Board.
- Head of Commissioning.
- Head of Legal Services/ council legal lead for safeguarding.
- Person with the Children's or Adults Services HR and Training Lead.
- Focus group - middle managers.
- Focus group – frontline staff.
- Focus group – social care initial contact/ information and advice team.

## **Health**

- Leads for children's services (if a Children's Services review) or those with responsibility for acute, mental health, primary and learning disability services (if an Adults review) and those with safeguarding leads from primary and secondary care.

## **Criminal Justice System**

- Borough/ Area Police Commander and also the senior management equivalent if specialist Safeguarding activity is dealt with in a specialist division.
- Courts and CPS staff with key safeguarding responsibilities/ experience.

## **Others**

- Chair of the Safeguarding Board if not the DSS.
- Safeguarding Board Members if not included otherwise.
- Focus group – carers.
- Focus group or interviews (can be telephone or by e-mail if individuals prefer more anonymity) with people using services, children and young people - with support and advocacy if needed.
- Focus group – voluntary and community sector representatives.
- Representative from the local organisations representing public/ user views.
- Key providers from the private sector and third sector.

Anyone else the authority considers it would be useful to see.

It will probably not be possible to 'capture' all of the above people. The council should work in partnership with the Review Manager to set the interview programme.

## **Other activities**

The team can undertake workshops, either with social workers and their managers to update them on national developments and good practice or, at the end of the review with partners and other stakeholders to undertake action planning.

## **Practical timetable pointers**

The review team will not operate as one single team during the review. Instead they will split into two or more smaller teams to ensure that between them they can see all the people required within a reasonable review period.

The membership of the teams will alter during the period of the review. This means that all interviews, focus groups etc. must end at the same time (although there may be occasions where this may not be possible), so that review team members can swap over.

If it is not possible for an interviewee to be on-site, you can arrange a phone interview. This should be agreed in advance and form part of the interview programme.

The review team will need to meet together at stages of the review to compare notes, ask for additional information etc. The Review Manager must ensure that such arrangements are included in the timetable. In order to cover as much ground as possible, the timetable may include evening sessions.

Workshop venues need to be big enough to divide into smaller groups.

One to ones should be shown as 1 hour on timetable (interview for 45 minutes leaving 15 minutes to record and get to next meeting).

Workshops (around 15 people in each, except if they involve children and young people who have used services, where 3-6 is more appropriate – 1 ½ hours). Members of the review team will facilitate these sessions and they need to be done by at least 2 members of the team.

**Interviews, workshops etc. must not be held in the team base room.** It is fine for them to be held in people's own offices provided this does not cause logistical difficulties.

Remember to include travelling time where necessary and transport arrangements.

### **Attending meetings and observing practice**

Whilst on-site the team should have the option to observe any additional relevant meetings already scheduled to take place e.g. Safeguarding Board, cabinet/executive, overview and scrutiny, corporate management board, meetings with partners or internal improvement planning meetings. These should be noted on the timetable. The team may only stay for part of these meetings.

Observing practice has been found to offer particularly useful insights. This could be through a number of means, including observing team practice meetings, handovers, strategy meetings or case conferences. With the consent of people concerned, an expert practitioner or specialist officer peer might observe assessment or subsequent work with families etc. Observing practice is a key test of the extent to which the council is regularly engaged with people using services and staff: the less this is normal, the more of a challenge it is likely to be.

**It is essential that the review manager explicitly agrees with the council any arrangements for observing practice and interviewing people using services, children and young people, their carers, and families/representatives during the review.**

### **Penultimate day**

The team will go into private session to assimilate the evidence gathered during the process and use this to start to prepare a presentation against the Standards for delivery to you and your partners the next day.

If the council and its partners have elected to undertake an action planning workshop then the findings of the review will inform how this will be undertaken and the peer team will give initial consideration to planning this workshop.

## **Final day**

During the morning of the fifth day the review team will finalise the presentation to be given. It will also capture the key points and evidence for the final report.

Time must be built into this morning to give a 'no surprises' feedback to the Review Sponsor.

Immediately after lunch the review team will present its findings. Time should be allowed for a short workshop after the presentation for you and your partners to give their feedback to the presentation and their views on what the key priorities for action are arising from the review.

## **The report**

If the council and its partners have elected to have a full report, then it is the Review Manager's task to write the team's report on the review. A standard WLGA format will be supplied for the report, and it will include the review team feedback given on the final day and expand upon it. The Review Manager will send a draft to the team within two weeks of the review for comment.

The Review Manager may ask for additional details, explanations, clarifications, etc., at this time as it is part of the team's role to supply this. The report then goes through the agreed WLGA quality assurance procedures. After this, the draft of the report will be sent to the council Project Sponsor four weeks after the review for comment and discussion before it is finalised.

The council and its partners are strongly encouraged to share the final report with key staff, members and partners and are encouraged to make the report public. However, the report belongs to the council.

If the council has elected to complete the review with an action planning workshop rather than having a full report, then the Review Manager should produce a letter outlining the key findings and agreed actions involving the same people and work to the same timescales as those set out above for the full report.

Participating authorities are strongly encouraged to develop a concise action plan which sets out how the authority will follow up/respond to the findings of the Review, with specific tasks and milestones for achieving the identified improvements. If the council has elected to make the report public, it is recommended that the action plan is published alongside the Peer Review findings. In some circumstances, a council may wish to commission additional external support to assist it in implementing its action plan.

## **Feedback and follow up**

If agreed with the council, the Review Manager and Director Peer will attend a meeting of the Safeguarding Board, or council to present the findings of the review.

Any additional follow up work will be agreed with the council and its partners.

## **Evaluation**

The WLGA is committed to evaluating the outcomes of peer reviews and will be conducting a robust evaluation. This will include the following stages:

- Pre peer review online questionnaire for the Director of Social Services.
- Post peer review telephone questionnaire with Director of Social Services.
- Post peer review telephone questionnaire with portfolio holder.
- Post peer review team feedback.

The identification of any best practice during the peer review will be captured and shared.

More details of the evaluation process can be found in Appendix 6.

## Appendix 1      Sample timetable

The timetable below is presented only as an indicative example (using a Peer Review of Children's Services) of how a programme for may look – it is only a guide and will be amended to suit the needs of the individual review. Each interview and workshop will generally be attended by two members of the review team.

**For each interview please show name, job title and location**

### Day 1 - Monday

TIME	A	B	C – other meetings or activities
08.30- 9.30	Team arrival, domestic arrangements, room set up, capturing of main issues etc.		
9.30 -10.30	Presentation by council and partners on main issues/ achievements/ areas for consideration.		
10.30 – 11.00	Team preparation/ discussion		Case file review
11.00 – 12.00	Director of Social Services	Council leader and lead member	
12.00 – 13.00	Safeguarding Lead Officer (if not Director)	Case file review	
13.00 – 14.00	Lunch and team meeting		
14.00 – 17.00	Focus group operational managers	Case file review	Practice observation
17.00 – 18.00	Team meeting/ Informal Feedback		

## Day 2 - Tuesday

TIME	A	B	Additional meetings
08.30 - 09.00	Team gathers in on-site room		
09.00 - 10.00	Leader of opposition or other councillors	Practice observation	Interviews/ t/c – with children and young people– their experiences and outcomes
10.00 – 11.00	Relevant Scrutiny Chair		
11.00 – 11.30	Break/ Team Meeting		
11.30 – 12.30	Borough/ Area Police Commander Police and Crime Commissioner	Head of Service	Interviews/ t/c – with children and young people– their experiences and outcomes
12.30 – 13.30	Lunch		
13.30 15.15	Head of Legal Services	Focus Group or interviews with children and young people and their families	Commissioning and contracts monitoring staff
	CPS and Courts		
15.15 – 15:30	Break/ Team Meeting		
15.30 – 17.00	Chief Executive NHS	Workshop with social workers and social work managers	
17.00 – 18.00	Team Meeting/ Informal Feedback		

### Day 3 – Wednesday

TIME	A	B	C
08.30 - 09.00	Team gathers in on-site room		
09.00 – 10.00	CSSIW link	Primary care lead	<b>File audit</b>
10.00 – 11.00	Voluntary and community sector representatives	Provider representatives	File audit
11.00 – 11.30	Break/ Team Meeting		
11.30 – 12.30	HR lead for training and development	Focus group – carers , advocates and/or public involvement leads	Practice observation
12.30 – 13.30	Lunch		
13.30 15.15	Lead Councillor/s	Focus Group – Front Line Staff	<b>Practice observation</b>
15.15 – 15:30	Break/ Team Meeting		
15.30 – 17.00	Focus Group middle managers	Council leads from other departments – e.g. adults services, housing, trading standards, libraries, leisure	<b>Practice observation</b>
17.00 – 18.00	Team Meeting/ Informal Feedback		

## Day 4 Thursday

TIME	A	B	Additional meetings
08.30 - 09.00	Team gathers in on-site room		
09.00 - 10.15	Chair of Safeguarding Board	Heads of Service	
10.30 – 11.45	Focus Group – Social Care Initial Contact Staff	Safeguarding specialist staff	
11.45 – 13.00	Break/ Team Meeting/ Lunch		
13.00 15.15	Voluntary and community sector representatives	Voluntary and community sector representatives	
15.15 – 15:30	Break/ Team Meeting		
15.30 – 17.00	Team Preparation		
17.30 – 18.00	Informal feedback session		

**Day 5 Friday**

<b>TIME</b>	<b>A</b>	<b>B</b>	<b>Additional meetings</b>
08:30-11.30	Team session		
11.30 – 12.00	Informal Feedback Session		
12:00 -14:00	Lunch and Final Preparation		
14:00 – 16:00	Final Presentation and feedback and/or Action Planning Workshop		

## **Appendix 2                      Council self-assessment**

The council should assess itself against the main Standards and sub themes. This should be an assessment that is a true reflection of the authority's position rather than simply putting forward a 'best case'. It should include both strengths and areas for consideration. If the council feels that it already has appropriate reports that fulfil the role of a self-assessment, this can be discussed with the Review Manger. However, it may be found that a short self-assessment is still useful for facilitating the review.

The self-assessment should consist of two parts:

- 1) A table/ statement of key performance data (if not clearly available in Annual Report or other document).
- 2) A narrative self-assessment with a list of evidence.

The self-assessment should not be a long document. Instead it should provide a narrative that explains what achievements the council has realised, the challenges the council is facing, how it is responding to these and how well it is doing. Much of the required information and evidence should be contained within existing documents and reports. Instead of repeating these, the authority should merely cross reference to the existing documents. It is helpful to aid the review team if each document is numbered.

## **Appendix 3                      Equality and Diversity**

The Equality Act 2010 aims to ensure public authorities and those carrying out a public function consider how they can positively contribute to a fairer society in their day-to-day activities through paying due regard to eliminating unlawful discrimination, advancing equality of opportunity and fostering good relations. In addition, the Equality Act 2010 (Statutory Duties) (Wales) Regulations 2011 place duties on the devolved public sector, covering equality impact assessments, Strategic Equality Plans, engagement, pay differences, procurement, reporting arrangements and equality and employment information.

The Equality Act 2010 defines the characteristics which are protected, as follows:

- Age.
- Disability.
- Gender reassignment.
- Marriage and civil partnership.
- Pregnancy and maternity.
- Race.
- Religion or belief.
- Sex.
- Sexual orientation.

The Act also defines direct discrimination, discrimination arising from disability, indirect discrimination, harassment and victimisation.

For legal definitions of the equality strands, please see the [Equality and Human Rights Commission](http://www.equalityhumanrights.com/)'s website:-

<http://www.equalityhumanrights.com/>

More guidance on the Act can be found here:

<http://gov.wales/topics/people-and-communities/equality-diversity/?lang=en>

<https://www.gov.uk/equality-act-2010-guidance>

## **Appendix 4      Summary of host council's responsibilities and commitment**

When commissioning peer review the host council should be aware that it is entering into certain commitments. These can be summarised as follows:

Expectations of the receiving council and partners are as follows:

- Identification of a review sponsor and review organiser to undertake the roles outlined in section 4 of this guidance manual.
- Gaining commitment to the review within the council and with partner organisations.
- Attendance at the set-up meeting by the review sponsor and Director of services (if not the same person), review organiser and – if possible – the lead member for adult services.
- Assurance that key personnel will be available and participate as required in each element of the review.
- Data and documentation are provided to WLGA as outlined in the methodology, by the agreed deadline.
- The interviews and visits timetable is organised and finalised with WLGA two weeks before in the on-site week commences.
- A base room for the peer review team is provided, for the duration of the on-site week as outlined in the guidance manual.
- Suitable rooms for all interviews (people's individual offices are fine for these).
- Comments on WLGA's draft report are returned within two weeks.
- Commitment to ensuring that any agreed action plans are followed through and an appropriate monitoring mechanism put in place.

## Appendix 5: Children's Services Case Records Audit

The council that is having a peer review may regularly audit case records as part of its quality assurance processes. If that is the case, then records of those audits together with details of how they are conducted should be made available to the peer review team who will take them into account and may request access to some records to sample the audit process.

The following process will be undertaken in the challenge process.

### Selection

The authority should select four records from each of the following categories of people:

- a. Families who have not been previously known to social services prior to initial contact and where early intervention/ prevention needs have been identified during initial contact.
- b. Child protection referrals.
- c. Child protection re-referrals.
- d. Children with disabilities.
- e. Families First.
- f. Looked after children.
- g. Care leavers.
- h. Children and young people who offend or are at risk of offending.

Records should represent a mix of ages, disabilities, gender and other circumstances. There will be some crossover of these categories but a minimum total of 28 separate case record numbers should be made available to the peer review team. The **audit file log** (see below) should be completed by the council, identifying the category of each case record, age of the child or young person, their legal status and case record number and sent to the review manager prior to the review.

The records should be as recent as possible whilst still covering the above categories.

This is not an inspection, so SSIA encourages that records that selected are a cross section of quality in relation to practice, rather than those considered to be best practice only. However, this is a decision for the authority but it should be aware that it will need to reflect on the feedback in that context.

The SSIA team will select two case numbers from each of the above categories to review making sure that the sample includes people from all of the client groups as above. Any records or reports prepared by the review team should use the allocated audit file reference not the case record number to protect confidentiality.

The authority must ensure that secure access to these records is made available, either through electronic arrangements or locked facilities for paper records.

### **Members of the peer challenge team who will undertake the case records audit**

Only members of the peer challenge team who have significant social work (preferably, or social care) experience and enhanced CRB/DBS clearance will access client records.

### **Audit methodology**

The peer reviewers will audit files in the following order: one file will be audited from each of the above categories before auditing a second from each *if time permits*.

Each reviewer should spend approximately 45 minutes looking at each file (accepting that files vary in length significantly). Ideally each reviewer will carry out 7 file audits each, over the allocated sessions. There should be time for 2 reviewers to review a total of 14 files in the time allocated to this activity.

The **case records audit pro forma** should be completed for each file reviewed. The reviewer should aim to spend approximately 15 minutes reading through the overview of the file to get an overview of the history before making an assessment against each of the criteria in the remaining 30 minutes. It is likely that the first file will take significantly longer than subsequent ones as the reviewer will become familiar with the layout of files.

### **Summary of audit review**

When all of the records have been reviewed and the case record audit proformas completed, the reviewers should complete the **Summary report of case records** (see below).

The number of files reviewed should be entered into the table. The review manager will make efforts to ensure that there is a spreadsheet available to automatically do the calculation. In this case the number of files reviewed should be entered into cell C25. This entry is used to calculate the percentages.

The total number of files with a yes against the criteria should be entered in column C (positive responses) for each criteria. The percentage of files reviewed with a positive against each criteria will be calculated in column D in the spreadsheet.

The reviewers should consider the comments on each of the proformas and the overall scores to identify key messages from the audit of files and report these in the summary box. Obviously it should be stressed that this is only a small sample.

In addition to the criteria identified on the proformas, the reviewers may also consider whether collectively the records provided evidence of a skilled and confident workforce and whether the partnership demonstrates that it is learning from experience (sub theme 7 performance and resource management).

### **Audit File Log**

The authority should identify four records for review from each of the following categories:

- a. Families who have not been previously known to social services prior to initial contact and where early intervention/ prevention needs have been identified during initial contact.
- b. Child protection referrals.
- c. Child protection re-referrals.
- d. Children with disabilities.
- e. Families First.
- f. Looked after children.
- g. Care leavers.
- h. Children and young people who offend or are at risk of offending.

To be completed by review team				
Category	Age	Case record no.	Audit file ref	Selected Y/N
A			A1	
A			A2	
A			A3	
A			A4	
B			B1	
B			B2	
B			B3	
B			B4	
C			C1	
C			C2	
C			C3	
C			C4	
D			D1	
D			D2	
D			D3	
D			D4	
E			E1	
E			E2	
E			E3	
E			E4	
F			F1	

To be completed by review team				
Category	Age	Case record no.	Audit file ref	Selected Y/N
F			F2	
F			F3	
F			F4	
G			G1	
G			G2	
G			G3	
G			G4	
H				
H				
H				
H				

## Case records audit pro forma

Reviewer		Date		Audit ref. no	
Element	Criteria	Y/P/N	Comment		
1	The desired outcomes for the child, young person and their family have been clearly stated and progress is being monitored.				
	Positive outcomes have been recorded as achieved.				
2	The child or young person has been seen on their own, their views and feelings sought, recorded and wherever possible acted on.				
	The child or young person has been represented by appropriate advocacy.				
6	The child or young person experiences timely and effective multi-agency help and protection through risk-based assessment, authoritative practice, planning and review that secures change.				
	Care/protection plans are regularly reviewed to ensure that the child or young person's current and developing needs continue to be met.				

Reviewer		Date		Audit ref. no	
Element	Criteria	Y/P/ N	Comment		
	Help is provided early in the emergence of a problem and is well coordinated and recorded through multi-agency arrangements.				
	Records of action and decisions are clear and up to date.				
	Judgements/ decisions are sound.				
7	There is evidence that services commissioned are of good quality and improve outcomes.				
8	There is evidence of effective management oversight of the case.				

The table below shows the spreadsheet layout into which the summary information must be entered.

	<b>Summary report of audit of case records</b>		
	<i>Positive count is 1 for met and 0.5 for partially met</i>	<b>Positive</b>	<b>%</b>
1	<b>Outcomes</b>		
	The desired outcomes for the child, young person and their family have been clearly stated and progress is being monitored		0%
	Positive outcomes have been recorded as achieved		0%
2	The child or young person has been seen on their own, their views and feelings sought, recorded and wherever possible acted on		0%
	The child or young person has been represented by appropriate advocacy		0%
6	The child or young person experiences timely and effective multi-agency help and protection through risk-based assessment, authoritative practice, planning and review that secures change.		0%
	Care/protection plans are regularly reviewed to ensure that the child or young person's current and developing needs continue to be met.		0%
	Help is provided early in the emergence of a problem and is well coordinated and recorded through multi-agency arrangements.		0%
	Records of action and decisions are clear and up to date.		0%
	Judgements/ decisions are sound.		0%
7	There is evidence that services commissioned are of good quality and improve outcomes.		0%
8	There is evidence of effective management oversight of the case.		0%

			0%
			0%
			0%
	<b>Number of records reviewed</b>		0%
	<b>Summary total</b>		0%

## **Appendix 6: Review and evaluation**

WLGA is committed to improving the effectiveness of its work and will undertake a robust evaluation of the peer review.

The evaluation of the Peer Review will include the following stages:

### **Stage 1 – Post Peer Review**

Following agreement of the final report WLGA will undertake a telephone interview with the Review Sponsor to capture their views on the effectiveness of the peer

review, the ability of the team to constructively challenge and the quality of the outputs.

A telephone interview will also be conducted with the Portfolio Holder/Cabinet Member responsible for Adult Safeguarding to assess their views, particularly from a political perspective.

Feedback will be sought from the peer review team to assess their views on the overall peer review process.

This information will be collated to evaluate the Children's or Adults Services peer review against the objectives initially specified by the council and its partners and the extent to which these were met. It will also be important to assess the impact that the peer review has on the future provision of Social Services.

## **Stage 2 – Best Practice Case Studies**

WLGA is committed to sharing notable and best practice and innovative working. If during the peer review the team identify areas of work perceived to be best practice or showing innovation, these will be flagged and WLGA will work with the local authority to capture and share this work for the benefit of the sector.

The Review Manager and Director peer are responsible for identifying best practice and an allocated Improvement Advisor will develop this.