

Engagement and Participation with Parent Carers,
Children and Young People (Version 4 - April 2014)
Appendix 1 – Brighton and Hove Council and Amaze
Partnership Charter 2014

Partnership Charter evaluation March 2014

Introduction

Over the course of the last five years the Integrated Children's Disability Services senior management team and the Parent Carer Council (PaCC) in Brighton and Hove have developed a good working relationship between service providers and families of disabled children but there was no framework for a consistent approach and a common understanding between both parties. By working in partnership a team of parent carers and service providers devised the Partnership Charter in order to create a constructive process for ongoing improvement in the quality of this working relationship between both parties.

The function of the Partnership Charter Standards (see Appendix A), which were based on the Aiming High Core Offer, was to provide an agreed base line of good practice in partnership working and a constructive framework for ongoing service improvement.

We were all keen to see the outcomes for disabled children and young people and their families improve. We also wanted to build upon good practice so that for all of us, the experience of either being a service user and/or parent carer, or commissioner, manager or 'hands on' practitioner, became more constructive, positive and effective.

The standards included information, transparency, assessments, participation of parent carers in decisions about their own child's care, involvement of representative parent carers in decision-making and other processes, and responding to feedback. There was an additional key standard that related to how each organisation involved and included disabled children and young people.

Methodology

All of the statutory and non-statutory services within the Integrated Disabled Children's Services have now been assessed as part of the Partnership Charter and received their star rating. The purpose of this evaluation is to review the Charter at this stage to see what benefits it led to and what could be done differently. It is important to at the end of this phase to determine how the Charter could be further developed in light of these findings and how individual services could evidence that the initial assessment had improved their practice in working in partnership with parents. The evaluation was carried out by asking all the parents ambassadors by e mail to answer some simple questions.

1. What did you feel went well when you visited each of the services?
2. What did not go so well before, during or after the visit?
3. As we think about the next phase what suggestions do you have that will make the process easier?

4. How do you think services can demonstrate that they deserve to keep their star rating?
5. Do you have any thoughts about how the Charter could be developed in the future?

At the same time three of the service managers were interviewed and asked the same range of questions. In order to obtain a broad representation of managers the three were drawn from the charity sector, social care and health care services.

The responses were collated in the following report and recommendations made as to the future direction of the Charter.

Parent ambassador visits

Following training, experienced Parent Carer Ambassadors, working in pairs, made a short planned visit to different organisations and teams working with families of disabled children. The assessment evaluating all the standards resulted in a star rating.

These snap shot assessments gave an indication about how an organisation was working in partnership with parents both on an individual level and more strategically. One star indicated the organisation was achieving broadly a basic level; two stars indicated the organisation was broadly at the next development stage; and three stars indicated it had attained an advanced level of practice. The results are available on the amaze website.

Prior to each visit made by the parents the service managers were sent a copy of the Partnership Charter and a score sheet in order for them to carry out their own evaluation of the service. Visits were carried out at mutually convenient times and lasted on average a couple of hours. Before the visit it was expected that the parents would carry out some background research on the web to find out as much information about the service as available. It was also beneficial to the parents if the managers had prepared by self-evaluating their service.

The visit was seen not as an inspection but as a snapshot assessment of the service provided. It was hoped that the visit would help initiate an ongoing relationship between the two and be an opportunity for parents to understand how the service was delivered within the available resources and for the manager to think about how they engaged with parents both on an individual and strategic level. If required ongoing support could be offered by the PaCC and the Parent Participation Officer from Amaze.

The project was tested by running a pilot in which three services were assessed. Changes made as a result of the pilot included a complete revamp of the parent assessment score sheet which was considered to be too wordy and quite hard for both parents and managers to comprehend. The seven services assessed during this time frame included the services that took part in the pilot.

Evaluation by parents

Positive aspects of the visits

- Parents were made to feel welcome by the staff team
- Staff in turn did not make the parents feel awkward by the nature of the questions they needed to ask.
- It was good to build up a rapport with the managers of each of the services.
- It was felt that the visit was more successful if the parents met up beforehand to plan their visit.
- It gave the services the opportunity to reflect on how well they were working with parents and involving them. It is not something that they may have given much thought to but helped them to raise the importance they give to this and prioritise it for their practice.

Aspects of the visits that did not work so well

- The form was too long and there was a lot of repetition where the same question was asked in more than one section.
- Some of the questions were not relevant to all the organisations. This was particularly apparent when the services not centrally managed were visited e.g. extra time and BHIP.
- It was evident during the assessment when staff had not prepared for their visit and read through the questions beforehand.
- On occasions the parents were made to feel awkward if the manager did not have a full understanding of the purpose of their visit.
- The visits were not attended by appropriate members of staff.

Evaluation by the managers

Positive aspects of the visits

- Partnership working means that you always have to consider the parents when you make any decisions.
- This partnership is embedded into the working practice and helps you focus on why you are doing something. It takes the focus away from staff needs and the bureaucratic processes. Priorities change to fit with the needs of families rather than the service.
- Partnership working means that parents have more of an understanding of how services function understand the limitations of the service and can act as a 'critical friend' helping to identify what could be done differently. It takes away the hostile, banner waving approach.
- Transparency of the services helps partnership working and the presence of the Charter helps to establish a framework on which to base it.
- It helped to have the assessment undertaken by a parent who had some understanding of the service.

- The assessment did not feel like an inspection and the parents were very good at establishing that at the beginning of the meeting.
- The discussion was open and honest. The parents did not judge and did not give feedback in an offensive way. This helped managers to receive the comments they were making in a positive way.
- The feedback was really helpful and was used to discuss service development in the management meetings. Future work was planned accordingly.
- The star rating gave the assessment a slightly competitive edge which was helpful
- The Charter helped to build relationships between parents and service providers.
- It was helpful for teams to be involved in the assessment rather than just the manager so that the whole team felt they owned the charter and it could be embedded into their work.

Aspects of the visits that did not work so well

- The assessment framework was quite rigid and it did not make allowances when questions might not be relevant to the service.
- It was difficult to meet the thresholds for the advanced sections in some of the standards as they were simply not relevant to the service
- It was not tailored to each service.
- Some of the services were quite small and therefore it was difficult to meet all the standard requirements.

In order for services to keep their star rating it was suggested by parents that they should:-

- Be able to demonstrate the ongoing contact they have with parents
- Be increasing and developing new ways of working that involve parents
- Develop a channel for 'service user parents' to be able to give feedback on the service to PaCC and evidence that they are using these to improve the service provided.
- Not be assessed on the whole charter again but have a 'mini' assessment done perhaps involving other members of the working team.
- Keep a log of the reasons why they were awarded the stars in the first assessment and in further visits if they can evidence they are still doing these then they will be able to keep their stars.
- Be able to set targets that are measureable to demonstrate that they are improving their service.

Suggestions for the future from managers and parents

- Simplify the questions and the scoring.
- Develop the Charter to be used in hospitals working with children and schools.
- Possibly introduce a checklist of requirements for each section rather than the rigid questions.
- Following the feedback letter there is no follow up from the ambassadors. This could be remedied by a follow up meeting with a named person in the service and one of the parent ambassadors, when an action plan is produced to address the areas for development. Parents are then given feedback on the implementation of the plan.
- The following assessments need to build on the previous ones looking specifically at the areas where work needed to be done but also identifying evidence that areas of success were still being implemented.
- It would be helpful to identify the areas in the assessment where services struggled more to reach the standards and for PaCC to help support services to meet those gaps identified.
- In light of limited resources it might be better to refer to a leaflet rather than a handbook that points parents to assessment process and thresholds in the advanced transparency section.
- Look at quality service markers that are already in place for each service and build on aspects of these e.g. Ofsted.
- Ideally there needs to be questions that all services must be able to answer (generic targets) and then there need to be more bespoke questions for different services which have differing purposes e.g. play schemes that provide a social, leisure service and advocacy services that provide an advice and signposting service.
- PaCC could identify how services have dealt with complaints and disseminate examples of good practice. Sometimes these complaints arise from misunderstandings from what services provider's roles are and what parents are expecting them to deliver. PaCC could help outline these roles so they are better communicated to parents.
- It would be really helpful for PaCC to help share and disseminate good practice guidelines – e.g. to facilitate sharing good practice from services who are good at getting feedback from families and particularly young people. This would help parents to see consistent practice across the services and would also mean that services could be measured more equally.
- PaCC could also help deliver training to services about the kind of information that parents would like from services.

Recommendations for the future of the Partnership Charter

The feedback received from both managers and parent ambassadors does lead to some clear recommendations for the project. The first phase of the project has

come to an end and all the services delivered directly and indirectly by Seaside View have now been assessed and received a star rating.

Assessment form

If the assessment form is to remain as the main method of evaluation all the comments received suggested that it was too long and complicated. Some of the sections were irrelevant and difficult to assess particularly for those services managed and run by the voluntary sector.

It would be difficult to completely change the form as this could lead to the framework for assessment being changed beyond recognition and leave no basis in which to establish a baseline from.

Recommendation 1:-

Simplify the form and remove some of the repeated questions. Services will be reassessed five years after the initial assessment.

Assessments

All the services have been given a star rating and feedback from the assessment carried out by the parent ambassadors. This outlines the areas identified as good and the areas that need strengthening.

Recommendation 2:-

All the services will be sent a letter from the Parent Participation Worker (PPW) and Integrated Disability Team Manager reminding of the feedback they received and asking them to identify an action plan that the team can work towards together. This will focus primarily on the areas that need to be strengthened but also look at their strengths to identifying ways that the service can improve their partnership working with parents.

Services need to then evidence that they have acted on all the actions identified in the plan. A copy of these action plans will be held by the PPW and team manager and be reviewed in six months from the time the plan is drawn up. Help in creating the action plan can be provided by a parent ambassador or requested by the service.

PaCC involvement with facilitating service development

It was suggested by both parent ambassadors and managers that PaCC could play a more central role in helping services to develop their partnership working and help services share examples of good practice with each other.

Recommendation 3:-

The PaCC to work with services to identify areas of good practice and facilitate the sharing of these with services who have identified these as areas that need development. The PaCC to develop training for services to build their skills of partnership working.

Conclusion

The Partnership Charter has been enormously successful in helping build positive relationships with services and families who use them. It has helped parents to understand how services work, how they are commissioned and the priorities and constraints that the services have to work under.

It has helped managers and service teams to focus more on the needs of families and to reprioritise their work to meet these needs. The areas of development identified by parents have helped services to move away from the bureaucratic processes that suit the staff and better meet the needs of the children and young people. Parents have been able to act as a 'critical friend' to services and helped them identify areas that needed improvement to make them more responsive to family's needs.

In order for the work to continue it needs to focus more on helping services to develop their partnership with families, to help them draw up action plans to meet the areas that need developing and to help services network together in order to share good practice.

**Brighton & Hove City Council and Parent Carer Partnership Charter
Standards of Best Practice
For Practitioners and Parent Carers of Disabled Children and Young
People**

In Brighton & Hove, disabled children, young people and their families, and practitioners working in all sectors, can expect:-

1. **Information** that is accessible, available, relevant and accurate, joined-up, and user-focussed; and that covers all services, all providers, access to services, and key transition points.
2. **Transparency** about how resources are decided and allocated; how services are commissioned, managed and work together to promote good outcomes; and how the Children and Young People's Plan and Commissioning Strategy include the needs of disabled children and their families.
3. **Transparency** about how services contribute to disability equality, meet legal requirements, and record and respond to user feedback and engagement.
4. **Assessments** that are holistic, proportionate to need, promote the wellbeing of the child and family, are undertaken by staff with the right skills, and are based on the sharing of agreed information.
5. **Individual participation** in the allocation and review of processes for a Parent Carer's own child and family, and choice over the design and delivery of support and care packages.
6. Resourced, supported and co-ordinated **participation in decision-making** about commissioning, development and monitoring of local services, with opportunities for a wide range of parents, disabled children and young people to become involved. There will also be representative participation in

agreed processes for relevant staff recruitment, induction and staff and/or parent training processes across all sectors.

7. **Feedback** from families to be routinely and systematically sought and acted upon. There will also be a clear and well publicised complaints process that enables complaints to be promptly and fairly addressed.

8. **Inclusion** in community activities and facilities, and involvement in further developing the range of opportunities for inclusive or specialist resources or activities.