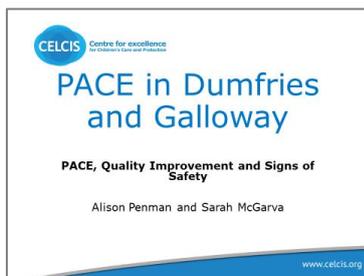


DATE: August 2020

TITLE: PACE in Dumfries and Galloway

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You are watching a webinar about the PACE programme from the delivery team in CELCIS at the University of Strathclyde. PACE is a Quality Improvement programme aiming to reduce drift and delay in permanence planning for looked after children. These webinars were recorded in the spring of so please be aware that key changes in legislation, guidance and practice may have occurred since this time.



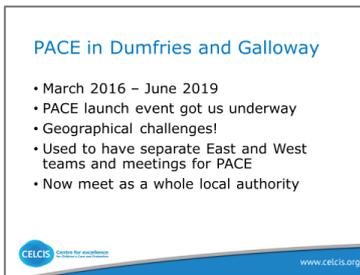
(JP) Welcome to this webinar which is about PACE in Dumfries and Galloway, with a special focus on Quality improvement and '[signs of safety](#)'. We have Allison Penman and Sarah McGarva from Dumfries and Galloway joining us. Alison would you like to introduce yourself?

(AP) Hi, my name is Alison Penman, I'm a locality social work manager in Dumfries and Galloway and, alongside Sarah, we've been co-chairing the PACE Champions Group and the PACE Implementation group, and have worked with Jimmy for the last couple of years.

(JP) That's great, thanks Alison, and Sarah, do you want to introduce yourself?

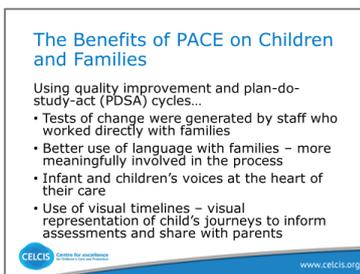
(SM) Hi I'm Sarah McGarva I'm a locality manager as well. But, whereas Alison's based in the central and east part of the region, I'm based in the west of Dumfries and Galloway.

(JP) Thank you very much, that's perfect and roughly when was it that we started PACE in Dumfries and Galloway?



(SM) We started in March 2016. We started off with an enthusiastic launch and we got going with things but we had a lot to learn, and we had lots of changes - we had management changes, we had structural changes - and it took some time before we worked out the best way to embed PACE within Dumfries and Galloway. Partly because of the geography and getting people together, and we didn't have the access to technology that we have now, which will make it much easier to get everybody together without people having a long drive to meet.

But gradually we evolved a structure that suited us the best and we worked from having east and west meetings to, now, where we were able to have the right people meeting all together, at the right sort of frequency which has enabled us to really develop our plan and make progress.



(JP) That's a really helpful summary of, first of all, some of the challenges and the geography of Dumfries and Galloway - which is so unique - as well as the 'how' we made and sustained changes that would have benefits in the system and therefore benefits for children and families. I wonder, if you're happy to talk about some of the benefits for children and families after our three years that we worked together?

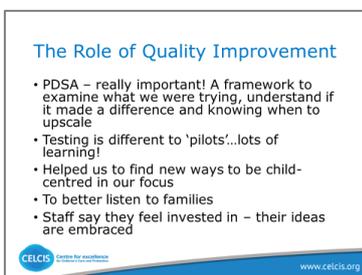
(AP) There were a few tests of change. So working with CELCIS allowed us to introduce some small tests of change using the PDSA methodology; what was really good about that was that the test of change came from practitioners - and practitioners are obviously closer to families than Sarah or I are - so there were some really good tests of change, it really allowed people to think about the language that they were using. So for example we worked with our chairing and reviewing officers - they chair looked after child reviews - and they were able to bring this concept of permanence much more into the forum of looked after children's reviews, they brought the children's

views right to the forefront. So it changed the way we were holding and managing our meetings.

One of the other small test of change that we did was in relation to developing timelines and that allowed us to get a visual representation of a child's journey to the point that we were at. So how many placements they'd been in, if they'd been at home then and to kinship care, then back home, then foster care, then back home and that was actually a really good pictorial representation of how much change and transition children had experienced. So whilst this was really good for informing our assessments, it was actually really good to share with parents as well, to help them understand their own children's experiences as they've been sort of working their way through they looked after children's processes. So those are just some of the things, Sarah do you want to add some?

(SM) I think it helped by trying out changes to plans by helping us be really aware of the time that it was taking - I suppose which you've already covered - for children: how that affected them, how they understood what permanence was, and how we gave them the right information, involved them in the process and helped us to be clear and helped to avoid any drift that that we had.

(JP) Absolutely, and you've alluded to lots of the key tests of change, and there were certainly more that we did, and some that we scaled up, some we abandoned because they weren't working ever so well and that is that is the ethos of quality improvement. I just wondered, because both of you did a course in quality improvement during the time that we were working together on PACE, I wondered if you might say a bit about quality improvement, and the role of quality improvement, in these tests of change. So Alison, you alluded to PDSA, for example - the plan, do, study, act cycles - and that was really important?



The Role of Quality Improvement

- PDSA – really important! A framework to examine what we were trying, understand if it made a difference and knowing when to upscale
- Testing is different to 'pilots'...lots of learning!
- Helped us to find new ways to be child-centred in our focus
- To better listen to families
- Staff say they feel invested in – their ideas are embraced

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(AP) it was really important because it gave a focus to the different things we were trying to introduce. It provided a framework for us to examine whether - actually what were we trying, did it make a difference, was there any point in continuing it or upscaling it, as you said, and you know and linking back to your previous question was about the impact on families.

I think what it did, and the quality improvement helped us with this, was to actually really see things from the child's point of view; was to really see it from through their eyes, through the child's lens in terms of what does this mean. Whilst we' were all getting caught up in processes and writing reports, and courts and Children's Hearings. Actually, what that allowed us to do was really come back to the most important thing, which was what does this feel like and look like for the child. So sorry that's a bit of a deviation from quality improvement but I wanted to make that point.

(SM) When we go on to talk about '[signs of safety](#)', it was really that learning about quality improvement and skills that we needed. We continued to use that because when we've had to develop plans, we've had to bring in different ways that we've chaired conferences, that with everything that we've done. Rather than having the traditional pilot, that brings everything in and everyone's got to try it at once, it it's enabled us - and we were we took forward a few things in the west where I said 'Well can I just try this?' Can we do this for a while and see how it works and make changes?' - so that when we were bringing things in all together, we'd been able to try and see what worked, try different things. We were able to use what we've learned in other things as well as with the PACE work that we've done.

(AP) Staff loved that because it was almost like opening up the doors to them, wasn't it? So previously, policy had been developed and written by people who were no longer frontline practitioners, but we really opened up to them in terms of bring us your best ideas, there's no daft idea, let's try something. Sarah's right, it was actually really freeing and liberating because it was like- it doesn't have to be perfect before you try it, just try it and then develop it each time you try it again. Rather than doing all this work to try and get things perfect before you actually implement them. And I think Sarah's right - and we'll come on and talk about '[signs of safety](#)' - but we've carried that through into the way we implement 'signs of safety' and the way we support practitioners at the front line to try new things. I actually think the work we did around PACE was a really good precursor to 'signs of safety', and I'm not sure if we'd have been able to embrace it as well if we hadn't done that work around PACE before that.

Signs of Safety

- All staff have been trained in signs of safety
- Some partner agencies have been involved
- It is a way of enabling families to understand the things that social work are worried about, and to take responsibility and ownership for those things
- Feels like 'traditional' social work – it feels more like we are working *alongside* families now
- Gives us tools to use with children and with families which moves things forward
- CP figures have reduced significantly

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(JP) That's a really nice segue way into '[signs of safety](#)', a core part of this webinar. I really hear you talking about the importance of just starting where you are, and that might be starting with something that doesn't feel perfect - but there's lots of learning in doing that - and also using quality improvement to enable us to be more child-centred, to see through their eyes and also to listen to our infants, children and young people (and there are various tests of change that we had around that). But you know John Swinney, in terms of quality improvement, often says 'proceed until apprehended', we want you to test things and learn, and it's people that are working directly with children and families that have lots of those solutions. So it's nice to hear this, and also being a part of that journey as well, it was lovely to be a part of how much you embraced quality improvement to make a difference to children and families lives. That does lead us on really nicely to 'signs of safety', so I just wondered if you might, first of all, introduce what 'signs of safety' is just for those that don't know it.

(SM) We had some preparation, obviously, but we started training staff from May last year and we trained all of our staff on 'signs of safety', and to a lesser degree, our partner agencies as well.

It's a way of enabling families to understand the things that we're worried about - whether they're risks, whether they're unmet needs for children, whether they're concerns about wellbeing - it helps them to understand and be able to take responsibility and ownership for those things. So it really it's kind of traditional social work that we're doing - working really closely with families, building up relationships with them - but it gives us tools to use to help our staff with that. Tools to use with children with families.

There's lots of names for things that you have to get used to, and processes, and the way that things happen. But it enables areas to be flexible about how they use them. But to use them in a way that moves things forward, and I think that's the way that you have to look at, it rather than a system - it gives you what you need to be able to build a relationship with families and help them make progress. That's where it fits really well with PACE because it helps us to move things forward in a planned way; you have a trajectory or timeline that you work with with a family, they get to see where there is going to be a point where social work is not part of their lives because we're going to help them and their families manage that.

It does mean that we have less children where we're looking for permanence orders and adoption, by traditional permanence roots, but the ones that we do we'll have the clear evidence for that because we - by using the tools that we're using and working with families - we will show where we've tried everything we can and they haven't been able to make the changes. But for other families, I think we're enabling them to build their networks and to take responsibility. So that in the future if something happens again or there's more problems, they pick them up, they know who's going to help the family and whether a child remains with their parents - which hopefully they can - or they remain within their extended family network - that's a better outcome for them and we anticipate therefore that we'll have less coming back to us.

(JP) That's a really good introduction and I think anyone listening to that will get a really good feel for what '[signs of safety](#)' is as a result, so thank you. You alluded to the different tools and different ways of working, so I just wondered, what some of the key things that you do differently now, as a result of 'signs of safety', what are some of the things you do differently?

PACE and Signs of Safety

- Doing PACE prepared Dumfries and Galloway for signs of safety
- We used quality improvement to test changes through signs of safety
- We captured learning, adapted and tested again
- We now use different language when working with families
- **"Danger statements"**: sum up analysis of what you're most worried about - we know write a clear statement to families in plain language
- This is coupled with a **"safety goal"**
- We then develop a **"scaling question"** - how do we get closer to our safety goal?
- Addressing **"complicating factors"** with families

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(AP) So I think Sarah had talked about the trajectory or the timeline, so that means that from the very beginning we're agreeing with family what needs to be done, what do we need to be working towards for social work to no longer be involved.

So we have a 'signs of safety' road map and that sets out the different tools that you might want to use at different stages. What I think it has really allowed us to develop on, that we started with PACE, is about the language that we use with families; so one of the key things is about how we talk to families and how we discuss things with them but the language that we use. So now when we're compiling - we do 'danger statements' and 'safety goals' - and danger statements is where you sum up your analysis about what you're most worried about or what you think the danger is, and it allows us to write a statement to the parents to say this is exactly what we're worried about and very plain language 'this is what we're worried about', 'this is how we're worried about it's affecting your children' and 'this is what we're worried about will happen if things don't change'.

We then team that up with a safety goal, which is about 'this is what we want things to look like' and then we can develop a scaling question - that allows us to make the link between the danger statement and the safety goal -

which tells us well where are we, now between the danger statement and the safety goal, what do we need to do to move closer to the safety goal, and that then gives you your next step. That helps you write your plan but you're doing that with the family all the time and I think the biggest challenge for practitioners has been around the language, and how they use professional language so much, and how actually we need to be able to tell families this 'this is what we're worried about' in a way that doesn't talk about interventions and rehabilitation, and substance misuse, and it's about actually say what it is and talk to families in a way where we're not hiding behind language. I think that's been key. The other, probably one of the most successful and effective things that we've done, is it helps us with our analysis. It's a really good model of assessment because it allows you to separate out danger from complicating factors; so in the past we would list twenty risk factors and twenty protective factors but actually they weren't based on what the family thought were risk factors. Whereas now, we can separate those out, we can look at the things, complicating factors or things that might be in a family's background - or it might be about mental health or substance misuse - these are things that are in a family's life but they can't necessarily change but they make things more complicated.

So it feels like, for a long time, we've sort of held these over families as risk factors but actually our focus needs to be on where are we now and what do we need to do to move forward- instead of constantly going back. So that allows us to separate things out and really focus on what are the actual dangers, what are the things that we need to address more than anything, and that can then be reflected in our plans because we don't have generic actions within plans, the actions and plans or the tasks within plans, relate directly to what it is we're most worried about. So we prioritise the work that we do with families.

(JP) It's really helpful to hear, and it's quite obvious listening to both of you speak, that Dumfries and Galloway really embraced 'signs of safety'. I know the whole local authority have done the full works in terms of training and support, and this is shining through as very obvious in terms of just how much your practice has changed. Alison, you alluded to how working on PACE (and using quality improvement methodology) really helped prepare you for 'signs of safety' and I just wanted to give you both another opportunity to say how are some of the other ways in which working as part of PACE, working together bringing together multiagency teams - all of these things really- prepared you for this new way of working?

How PACE is crucial to how we work today

- The importance of baseline data – we had gathered all of this through PACE and we have regular means of gathering and reporting on this information
- We coupled this with the views of families – how did they feel? We now have tools to do this and a culture which welcomes this
- Very good relationships with partner agencies
- We have reviewed how we use the child protection register and use of section 25 rethinking risk.



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Well one of the first things we did was, we prepared a baseline of information. One of the difficulties we had when we brought PACE in, was that we didn't have baseline data that told us about our children's journeys. So we were having to gather that information manually and it made it much more difficult moving on. That was probably the biggest challenge I would think, in terms of our work with PACE, was getting our heads around what we needed to do with the data that would give us the information that we needed to tell us that we were meeting our aims, in the way that we wanted to meet our aims. So because we moved almost seamlessly from PACE into '[signs of safety](#)', we were much more familiar with what we needed to do and that's then been interesting.

So comparing with another local authority area, who's at a similar stage of implementation to us; they didn't do that baseline work, they didn't gather their information before they started to implement the change and they, on reflection, they have said 'oh well we wish we'd done what you did'. So we gathered lots of information about, obviously, all our statistical information in relation to the children and the families we work with, around child protection registration, looked after children, looked after away from home children, permanence orders, kinship, all of those - we already had all that information through the work that we've done with PACE and we have regular means of gathering that information and reporting on that information. So we had a good baseline. So then what we added to that was the views of families; how they felt about the work and the processes that they were involved with. I think that allowed us to be really clear about what we needed to do and what we wanted to know, and what the reports that we wanted to pull would look like. Sarah would you agree with that?

(SM) Yeah, I would agree and I think it's helped us with this current COVID period as well. To be really clear with our information, be really on top of knowing about the children we work with and what we need to achieve.

We've been quite challenged on it - during the period since we started to implement 'signs of safety' - our child protection register has the numbers of children on the register has decreased dramatically. We are still working with the children that we would have worked with but we've managed to do that using new 'signs of safety' processes.

We've used '[signs of safety](#)' to help work with and involve those, and I think a lot of that has been about families understanding the risks better and understanding the impact on children. Then therefore they've been able to be more involved in the plan, they've been able to build the relationships but it's helped us, we've already developed the relationships with other agencies - as you said- with PACE. That enabled us to think what do we want to achieve and it's made us think 'well, we want to get to this place, where are we now, how do we get there, what's the best way to do it?'. It's only the children where we really believe there's a significant risk of harm that are on the child protection register. I think it was all the same families that we were worried about but we've been able to separate that out, and I think being able to separate the harm and the complicating factors has helped us a lot with that. It's helped families too, it's always difficult when - and it's very much a barrier with families - when you raise things that happened in their own childhood, or happened when they were younger, and they feel like, or because they've got difficulties with mental health, those things they feel like are being held against them. Whereas now, they're being able to understand that we have to look at those things but they're not about where the harm is, if they're accepting the right supports to help them manage any difficulties. I think it helps us to be a lot clearer.

But other agencies, although it was difficult for them not having the same level of 'signs of safety' training, they know where we want to get to, they want to be involved and they're now starting to get a better understanding of that. I think, as well we, you know, whereas we're looking at children not being on CSOs at home for long periods of time, obviously that's in our first aim, and I think because we've got this clear timeline of what we're working to it helps to not have that and we hope we've seen numbers reduced, of looked after children, as well as children on the child protection register. And whilst there's always going to be the need for that, I think there's ... we're not seeing so many children being looked after for as long as we did previously.

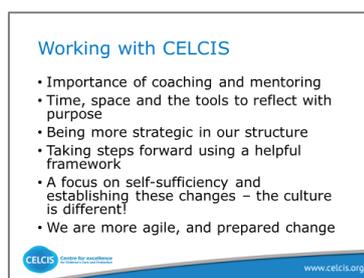
(AP) The other thing it's done is it's allowed us to really look at our own practice. In terms of how we were using the child protection register and how we were using Section 25 in terms of accommodating children and it's allowed us, I think as a management team, to have some quite challenging discussions about what that means. So there's almost been a little bit of recalibration in terms of how we use the register, and how we think about risk, and how we think about danger, and about the things that we can't help and we're never going to change -but actually what are we worried about now, what is it that we're worried is going to happen now and actually what do we need to do about that.

And with 'signs of safety', one of the fundamental aspects is about recognising that, generally, families have the solutions to their own challenges and their own difficulties. We're much, much better at that now

in terms of not taking on, I suppose, responsibility for the whole family and all the problems and the difficulties of the family, but actually bringing the family together in terms of, 'okay well you know, this is what we're worried about. What do you think we can do to make a difference here, what can you do to make a difference here?' and the family lead on that - and that then empowers them. As Sarah said at the very beginning in her introduction about 'signs of safety', by doing that, it's going to have a much more effective and longer term impact than anything that social work could do, coming in and out of a family's experience.

Do you think that's fair Sarah that we've sort of rethought some of the things that we've been doing?

(SM) Yeah definitely we have, and in addition to that, we have also looked at our referrals coming in and what social work should be doing and what families do we need to be involved with, and we've challenged other agencies to think about that. So when they make a referral, this question is asked that they have to consider what they've done already, what other things they know about the family. We needed to have capacity to work - because this is intensive work with families - we needed capacity to do it. So we couldn't be working with families that didn't really need us to be involved with. So we needed to - at both ends of our work - not have become involved with families we didn't need to and to end our involvement when we could. So that we could concentrate on the families where that work really needed to be done with them, and we needed to make the space for that because we couldn't overload our workers and if they had too many 'cases' then they just weren't able to progress the work, and that was the same with progressing for permanence and avoiding drift. Workers need realistic caseloads in order to be able to make these achievements and work closely with families.



(JP) So you've spoken a bit about how you have become more of a learning organisation and the importance of quality improvement and coaching and mentoring, and I wonder if you might say a bit about how working together with me and with CELCIS really aided that?

(AP) So I don't think we would be where we are now, if we hadn't had the opportunity to work with you on PACE, or to do the SCLIP (Scottish Coaching and Leading for Improvement) course.

What that's allowed us to do, it's allowed Sarah and I to look at our individual management styles, how we work together, how we support practitioners. But by working with you, and you coaching and mentoring us, mainly it's allowed us to stop and think - because Sarah and I are both very busy and always flying about the countryside to meetings - and working with you made sure that we actually had dedicated time to really stop, pause, reflect, think about what we were doing. I think that's allowed us to develop our working relationship at a different level because we've learned from you and I think we use that with our own staff now as well. I'm probably not explaining it very well, Sarah do you want to add?

(SM) Well, I think it has, as we were saying in discussion that we had before, it's helping us as we're looking at our structure and we needed to be more strategic in what we did and because we tended to be very operational - which is it's good to support our staff - but we needed to enable them to develop as well. But it's helped us to look at how we're going to plan for the future, how we're going to take forward what we've learned, to improve the organisation. You've helped us to stop and plan better and reflect as well. Obviously that goes back to how tests of change work as well, because it's about that reflection and taking steps forward. I think it is, therefore, what we, how we've worked together, will improve how we work with the other people in our organisation and our partner agencies as well.

(AP) I think that's established now because of the work we did with Jimmy around PACE. I think that's become quite established, I don't know if we noticed it was happening but I suppose talking now gives us an opportunity to reflect on that. I think about the way we work together now, and how we work together around '[signs of safety](#)', and developing our senior social workers. We do do that, we do take time out to stop and think about what we want to achieve and how we're going to get there and I think that's been all around that that process of working with yourself. I think you talked about, you know, things are constantly evolving and changing - and through COVID we've had to change again - but actually I'm more confident about taking that forward, I'm more confident that we will find the solutions within ourselves, to work out how we need to do that, what we need to do for our families and what we need to do for our staff as well. So that that's been a really, really positive experience I think for us both.

(JP) Thank you that's been great to hear, and very kind of you both to say as well. And you know the analogy we often use at CELCIS as well, when we work with areas is, it's not about kind of running faster in the hamster wheel, it's about taking a step off, and looking and seeing what we can do differently and be more effective and I'm really glad to hear that that has helped you guys with your work.

What people say about children's services in Dumfries and Galloway now?

- Previously, it felt like there was a 'them' and 'us' with families and social work
- Children's hearings were less confident in making decisions
- Social work are better at providing information to allow for decisions
- Families say that things now feel very different, they feel listened to and supported at every stage
- It's not about the paperwork, it's all about the direct work with families



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(JP) Everything you've just explained, I saw in the Children Looked after Scotland (CLAS) Statistics, the stark drop in the number of children on the Child Protection register. You've alluded to drops through Aim 1, and the focus on Aim 1, in children who are on a CSO when looked after at home (a compulsory supervision order) and you're really bringing to light some of these statistics and how you are doing it and it's really helpful to hear as well. And again without even realising it, I think what you're doing is talking to the component parts of quality improvement - the 'appreciation of a system', knowing how our system works - and making sure that we build changes into that system when we're looking at making changes, when we've tested and scaled them up, the 'understanding of variation', having baseline data - which Alison was talking about - but also understanding what data we want to collect, what allows us to understand how we're performing and regularly reviewing that data. Our 'theory of knowledge' and our views on what will guide and aid change, and really sustain that. As well as 'human behaviour', and Sarah your last point really alludes to that as well. I think my final question for you both, for this webinar then, would be this: what are what are children and families saying about their experiences now that they wouldn't have said before [signs of safety](#), or before PACE? What are you hearing that's different now?

(AP) I think one of the things that's most different now, is that previously it felt very much like it was us against families or families against us. It was a 'them and us', almost adversarial culture that we seemed to have; in particular when we were going into Children's Hearings. Children's Hearings were not always confident about making decisions but when we reflect on that we can see that that's quite often because we weren't presenting them with the information that they needed. You would be going into a Children's Hearing and have family saying one thing and social work, and quite often partners, saying something different. What I hear back from families now is this feels very different. So, you know, sometimes we're working with families who have come back to us time and time again and what we're sometimes saying to them is 'look, we need to find a way to work differently with you', we think the way we've done it in the past hasn't probably been the best way - so we need to find different ways of doing that. From a staff perspective - and certainly the more experienced practitioners - they are saying 'oh, this is what we used to do, this is proper social work, this is old social work'. It's not about the paperwork and the forms and everything else, it's about that direct support with families. The feedback - they get really

passionate about, it it's really lovely to hear our staff talking in development sessions about how much they enjoy 'signs of safety' and what they've tried, and what they've done.

Families come back and they say it feels different, those that have worked with us before, it feels different: "I feel listened to, I feel respected, I feel that people are actually interested in what I have to say. In the past, I didn't bother saying anything because I knew I wouldn't be listened to anyway. But now I feel like my social worker really wants to know, and I feel my family are able to be involved now - in a way that they weren't before - and I feel more in control of things. It doesn't feel like, you know, you're just telling us what to do and expecting us to do it, it feels like you really ask us and you really want to know what we think we can do to make things better".

(JP) And, you know, I think the most important thing really is people's experiences, children's experiences, family's experiences but also the staff that you work with in line manage and support and multiagency partners. It sounds like people's experiences have improved significantly as a result of working differently which was always the aim of PACE, and it's clearly the aim of '[signs of safety](#)' too, which is just brilliant. As well as that I'm really hearing how you guys, the local authority especially, but you guys too, are really ready for future changes, you've adapted very quickly too.

We're recording this in the time of the Coronavirus/COVID-19 pandemic and we're still in stage one at this at this time - and you've adapted very quickly and you understand how you can still meet children's needs and families' needs, and work alongside them to do so, as well, which is just brilliant. That kind of ability to adapt is going to be crucial because we live in constant times of change and we have things like the [Independent Care Review](#) recommendations - which will have far reaching impact on every local authority area, every agency - and I just feel confident that you will be able to adapt to that and anything else that comes up. It's great.

I think just to start to close this webinar then; I just want to say thanks to you both, it was a pleasure to work with you in Dumfries and Galloway, for the course of a few years. I really, really enjoyed it. It was great to record this webinar as well; this is a discussion we've wanted to have for a while and it's nice to capture this and be able to share this with others.

This webinar, and other legacy resources, can be found on the CELCIS website (www.celcis.org).

If you have any questions, you can get in touch with us the email address will also be on that website to contact us.

The final thing to say then is thank you for listening.

Other resources:

CELCIS Knowledge Bank:

<https://www.celcis.org/knowledge-bank/>

Independent Care Review and The Promise:

<https://www.carereview.scot/>

Signs of Safety:

<https://www.SignsofSafety.net/>