

Serious Case Review Quality Markers

Supporting dialogue about the principles of good practice

These 18 Quality Markers aim to support commissioners and reviewers to commission and conduct high quality reviews. Covering the whole process, the quality markers provide a consistent and robust approach to SCRs. They are based predominantly on established principles of effective reviews / investigation as well as SCR practice experience and expertise, and ethical considerations.

Setting up the review

QM 1	Referral	The case is referred for SCR consideration with an appropriate rationale and in a timely manner
QM 2	Decision making	Sufficient information is gathered on which to base a decision about whether to have a SCR, and to determine the nature of the SCR that is required. The rationale for these decisions is clear, defensible, and reached in a timely fashion.
QM 3	Advising board members	There is transparency among LSCB members about the decision making process and outcome.
QM 4	Informing the family	Family members are told what the SCR is for, how it will work, and the parameters, and are treated with respect.
QM 5	Clarity of purpose	The Board is clear and transparent, from the outset, that the purpose of the SCR is organisational learning and improvement, and acknowledges any factors that complicate this goal.

Running the review

QM 6	Commissioning	The decisions about the commissioning of the SCR take into account a range of relevant factors and are made with input from LSCB members and in conjunction with the lead reviewer(s).
QM 7	Governance	The SCR achieves the requirement for independence and ownership of the findings by the Board.
QM 8	SCR management	The SCR is effectively managed. It runs smoothly, is concluded in a timely manner and within budget.

QM 9	Parallel processes	Where there are parallel processes the SCR is managed to avoid as much as possible duplication of effort, prejudice to criminal trials, unnecessary delay and confusion for staff and families.
QM 10	Assembling information	The SCR gains sufficient information to understand professional practice in the case, its context and relevance today.
QM 11	Practitioner involvement	The SCR enables practitioners and managers to have a constructive experience of taking part in the review.
QM 12	Family involvement	The SCR is informed by “family” members’ knowledge and experiences relevant to the period under review
QM 13	Analysis	The SCR analysis is transparent and rigorous. It evaluates and explains professional practice in the case to illuminate routine challenges and constraints to practitioner efforts to safeguard children

Outputs and outcomes from the review

QM 14	The report	The report clearly identifies the analysis and findings of the SCR that are key to making improvement, while keeping details of the family to a minimum. Findings reflect the explanations for professional practice that the analysis has evidenced.
QM 15	Improvement action	The Board enables robust discussion by agencies of what action should be taken in response to the SCR report.
QM 16	Board written response	The Board agrees a written response ready for publication that explains, clearly and succinctly, what action should be taken in response to the SCR report.
QM 17	Publication	The Board considers the impact of publishing the SCR report and response, and decides how best this can be achieved.
QM 18	Implementation and evaluation	The LSCB integrates the learning from the SCR and its decisions about how it is going to respond into its business plan and monitors actions to test whether improvements in services are being made.

The SCR Quality Markers were produced as part of the Learning into Practice Project, a one-year DfE-funded project conducted by NSPCC and SCIE between April 2015 and March 2016. For more information see nspcc.org.uk/lipp or scie.org.uk/lipp