

IMPROVING LIVES SELECT COMMISSION

**Venue: Town Hall, Moorgate
Street, ROTHERHAM.
S60 2TH**

Date: Tuesday, 25th July, 2017

Time: 5.30 p.m.

A G E N D A

There will be a pre-briefing for all members of the Improving Lives Select Commission between 4.00- 5.30 pm.

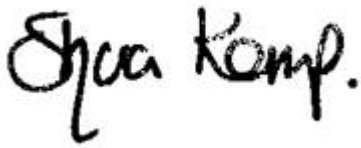
1. To consider whether the press and public should be excluded from the meeting during consideration of any part of the agenda.
2. To determine any item(s) the Chairperson is of the opinion should be considered later in the agenda as a matter of urgency.
3. Apologies for absence.
4. Declarations of Interest.
5. Questions from members of the public and the press.
6. Communications.
7. Minutes of the previous meeting held on 4th July, 2017 (herewith) (Pages 1 - 9)
8. Membership of the Health, Welfare and Safety Panel 2017/2018
To nominate one Member to represent the Select Commission on the above Panel for the 2017/18 Municipal Year
9. Domestic Abuse Update (report herewith) (Pages 10 - 24)
10. Children & Young People's Services (CYPS) 2016/2017 Year End Performance Report (report herewith) (Pages 25 - 95)
11. Date and time of the next meeting - Tuesday, 12th September, 2017 at 5.30 p.m.

Improving Lives Select Commission membership:-

Chair – Councillor Clark
Vice-Chair – Councillor Cusworth

Councillors Allcock, Beaumont, Brookes, Cooksey, Elliot, Fenwick-Green, Hague, Jarvis, Khan, Marles Marriott, Napper, Pitchley, Sansome, Senior and Short (18).

Co-opted members:- Ms. Jones (Voluntary Sector Consortium), Mrs. Clough (ROPF: Rotherham Older Peoples Forum) for agenda items relating to older peoples' issues.

A handwritten signature in black ink that reads "Sharon Kemp." The signature is written in a cursive, flowing style.

Sharon Kemp,
Chief Executive.

IMPROVING LIVES SELECT COMMISSION
Tuesday, 4th July, 2017

Present:- Councillor Clark (in the Chair); Councillors Allcock, Beaumont, Cooksey, Cusworth, Elliot, Jarvis, Keenan, Marriott, Napper, Senior and Short.

Co-opted Member: Ms Jones (Children's Voluntary Sector Consortium).

Also in attendance: Councillor Steele

Apologies for absence:- Apologies were received from Councillors Allcock, Cooksey, Elliot, Pitchley and Watson (Cabinet Member for Children and Young People Services).

1 DECLARATIONS OF INTEREST

Councillor Jarvis declared a personal interest in Minute No. 08 (CSE Post Abuse Services Update) as she was an unpaid trustee for Rotherham Rise.

Councillor Senior declared a disclosable pecuniary interest - Minute No. 08 (CSE Post Abuse Services Update) on the grounds of being a provider of practical, emotional support, advocacy and signposting for individuals and families.

Ms Jones – Co-opted Members declared a personal interest - Minute No. 08 (CSE Post Abuse Services Update) on the grounds of being a provider of practical, emotional support, advocacy and signposting for individuals and families.

2 QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no members of the press or public present at the meeting.

3 COMMUNICATIONS

Corporate Parenting Panel

Councillor Cusworth had provided Members of the Select Commission with a written summary of the last meeting of the CPP which was circulated by email.

Councillor Napper

Councillor Napper announced that he would no longer be a member of the Select Commission. The Chair thanked him for his contribution to date.

4 **MINUTES OF THE PREVIOUS MEETING HELD ON 22 MARCH, 2017**

Resolved:- (1) That the minutes of the previous meeting of the Improving Lives Select Commission, held on 22nd March, 2017, be approved as a correct record for signature by the Chairman.

(2) That an update be provided to the next meeting with regard to social worker and team manager vacancies (Minute No. 54 – Children and Young People’s Service Performance Report January 2016/17).

(3) That an update be provided to the next meeting on the Liquid Logic Case Management System (Minute No. 54 – Children and Young People’s Service Performance Report January 2016/17).

5 **THE INTRODUCTION OF A CASE MANAGEMENT SYSTEM (RAS) FOR CHILDREN AND YOUNG PEOPLE (REFERRED TO IMPROVING LIVES SELECT COMMISSION FOR PRE-DECISION SCRUTINY)**

Ms M Jarrett, Service Manager, Children with Disabilities, presented a report to support the implementation over the next year of a Children and Young People’s Resource Allocation System (RAS) to promote financial transparency and to deliver person-centred outcomes for children and young people with Special Educational Needs and Disabilities (SEND).

The Children and Families Act (2014) and subsequent Special Educational Need and Disabilities (SEND) Code of Practice makes it mandatory for Local Authorities to have a Personal Budgets policy and to consider, upon request from parents, any instance where a Personal Budget could contribute in part or full towards a young person’s Education, Health and Care Plan (EHCP).

Children’s Disability Services has worked with the leading national personalisation charity ‘In-Control’ to develop a RAS which will enable, in the first instance, social workers and disability family support workers to develop an outcome-based, person-centred plan which is costed to match the level of need of the young person. A RAS therefore creates equity of provision and an understanding of the resource required to deliver social care.

Discussion ensued on the report with the following issues raised/clarified:-

- The scheme offers clarity and rationale for decisions made about resource allocation for disabled children.
- As part of the implementation of the RAS, each personal budget would be reviewed initially on a three monthly, six monthly and then, annual cycle to ensure that the package is delivered according to plan. Staffing was sufficient to undertake these assessments. Should a child’s circumstances change, a swift re-assessment could be undertaken as required.
- What happens if families don’t have access to bank accounts –

exploring pre-payment cards and other mechanisms to support families, including giving administration of the direct payment to a third party agency who would manage it on the parent's behalf

- Work was underway with the transition teams in Adult Services to ensure that transition was as 'seamless' as possible.
- Would RAS apply to care-leaver? Depending on their assessed needs, care leavers would be entitled to a full package of support.
- Direct payment are not part of household income and can be recovered if used for other purposes or if child/young person's circumstances change
- How would over-payments be addressed? These would be dealt with promptly and sensitively.
- Appeals process – the Council's complaints process was the route to progress complaints.
- Feedback from parents forum – the Parents/Carers Fora gave helpful feedback including examples from other authorities; suggestions about how to work with vulnerable families, how to measure outcomes etc. These suggestions have been included in the Personal Budget Policy (attached as Appendix 1)
- How was the voice of child reflected in this work? Direct feedback from children and young has been limited. Some work had taken place but further work was planned particularly with young people approaching transition but recognised that this was an area for development
- Are there any issues emerging from other local authorities who are implementing this scheme.
- Adult Services have own RAS system and lessons have been applied from adults to ensure that the implementation is smooth. There is close liaison but have Adults have a different system for resources allocation. Have also consulted with Clinical Commissioning Group (CCG) as they have adopted a similar outcome based support plan.

The Chair thanked Ms Jarrett for her thorough and comprehensive report.

Resolved:- (1) That the Cabinet be advised that the recommendations be supported.

(2.) That further work be undertaken to ensure that the 'voice of the child' is captured in the ongoing monitoring of the implementation of the RAS.

6 **EARLY HELP STRATEGY: PHASE 2, WHOLE SERVICE REVIEW (REFERRED TO IMPROVING LIVES SELECT COMMISSION FOR PRE-DECISION SCRUTINY)**

Mr D McWilliams, Assistant Director: Early Help, presented a report which sought approval for a Whole Service Review for Early Help Service to commence, for implementation by April 1, 2018.

What is early help ?

Early Help is concerned with identifying needs within families early, and providing support before problems become complex and more costly.

Effective early help relies upon local agencies working together to;

- identify children and families who would benefit from early help
- undertake an assessment of the need for early help and
- provide targeted early help services to address the assessed needs of a child and their family which focuses on activity to significantly improve the outcomes for the child.

Local authorities, under **Section 10 of the Children Act 2004**, have a responsibility to promote inter-agency cooperation to improve the welfare of children.

Guiding Principles

1. Build on what's working well

- Integrated locality working
- **Whole family working:** One Family, One Worker, One Plan
- Work restoratively (Work 'with,' not 'done too.')
- Continuous improvement
- Value For Money
- Culture of excellence

2. Whole service review & re-design

- All staff and managers in scope
- Reduced Management structure
- New (fewer) Job roles
- Clear progression routes
- Workforce Development: Investing in training, professional development
- **Equity and Parity in pay across roles and responsibilities**
- Affordable and sustainable fit for purpose structure: Low cost / High quality
- Agile workforce, flexible working, responsive to needs and expectations of families
- **High quality delivery points, staff bases and negotiated space**

3. Achieve our savings target for 2018/19

- Whole Service Review: Timescales
- Potential structure / operating model
- Potential Savings through service redesign
- Draft structure suggests a 20% saving based on reduction in management costs (Head of Service to Band I)
- A further £150k will be achieved through smarter use of fit for purpose buildings and decommissioning or closure of some

Discussion ensued on the report with the following issues raised/clarified:-

- A number of centres currently have historical opening hours. Have you reviewed the impact that the reduction in opening hours may have in provision? Proposals will be based on footfall and participation levels – some provision, included targeted work, may be expanded. The redesign proposals will be informed by an impact analysis.
- The Children’s Commissioner for England recent report suggested that 670,000 children are living in families that have vulnerabilities and 800,000 children and young people suffer mental health disorders. Reassurances were sought that this report would be considered as part of the review.
- What linkages are there between early help provision and community involvement teams based in localities?
- If buildings are closed, savings would be released to the ‘corporate pot’ however, there was the potential to utilise school sites more efficiently. Potential closure of a building does not mean a reductions or loss of the ‘offer,’ just that the provision will be targeted. The Early help strategy describes delivery points and negotiated space. This will ensure provision is delivered from the most appropriate and fit for purpose venues in a locality.
- Reduced management cost- how will workers be supported? It was not proposed to reduce management oversight and supervision of frontline workers and their cases.
- Risk about losing provision? There would be detailed consultations about roles and development – need to build skills confident and competent workers. Detached work was an area of development to ensure that ‘hard-to-reach’ individuals are supported in their families. A guarantee was sought that that detached youth workers would be part of the consultation.
- What is the response of partners to these proposals? Partners were coproduced the early help strategy and were consulted at the start of the year. They are committed to this process and securing better outcomes for children and young people.
- Assurances were sought that the timescales for consultation and implementation were achievable. However, further details on the proposals were requested at an early stage in order that the implications of these proposals be fully understood.

Resolved:- (1) That Cabinet be advised that the recommendations be supported.

(2) That Improving Lives Select Commission be involved in pre-decision scrutiny of the proposals at an early stage

7

EVALUATION OF BARNARDO’S REACHOUT SERVICE

Mr S Hill, Commissioning Officer, CYPS, introduced a briefing paper outlining the Council and Barnardo’s partnership with the DFE and KPMG. This has led to the successful creation and implementation of an outreach service called Reach Out. This project strives to support and protect

children and young people who at risk of CSE in Rotherham, with shared funding from all partners.

The Reach Out project is funded for a period of three years 2016 - 18 with Rotherham Council contributing £234,000 per annum alongside partners KPMG Foundation Trust (£1,0229), DfE (£500,000) and Barnardo's (£425,000).

Most young people referred to the Reach Out service are identified as at risk of CSE because of concerns about their ability to identify abusive, exploitative behaviour and/or concerns about their ability to keep safe on-line. However, there is often a range of other issues underlying these concerns, including emotional health/mental wellbeing issues, worries about relationships with friends/peers and family as well as unhealthy personal and sexual relationships.

The Reach Out Project has delivered the following key areas of work up to present:

- Preventative education in schools and other settings (primarily delivering the healthy relationship education package 'Real Love Rocks');
- Targeted outreach to young people at risk;
- Direct support to individual young people and their parents.

Barnardo's is currently forward planning and developing the ReachOut Service to ensure sustainability into the future.

The Reach Out service commenced in January 2016 and has now been operational for over a year.

Evaluation of the service has been separately funded and is being undertaken by Bedfordshire University.

Discussion ensued on the report with the following issues raised/clarified:-

- The Barnardo's review and independent evaluation of programme by University of indicated high levels of activities with good outcomes.
- How were schools engaged? Is this activity proactive or responding to particular issues or concerns?
- Are all schools signed-up?
- How is the 'training-the-trainer' activity being evaluated to ensure that training is high standard?

Resolved:- (1) That the briefing be noted.

- (2) That a further update be provided in six months' time outlining:
- Work underway to evaluate the impact of the training package;
 - A detailed account of work with schools and levels of engagement.

8 CSE POST ABUSE SERVICE UPDATE

Mr S Hill, Commissioning Officer, CYPS, introduced a briefing paper outlining the current position of RMBC in relation to the provision of Post Abuse Support in Rotherham.

Long term post CSE support services for victims, survivors and their families in Rotherham that have been commissioned from the 1 July, 2016 for 3 years, with an option to extend for a further 2 years.

There are two main service areas that have been commissioned which provide a range of services to meet the levels of needs identified and also to offer a choice to individuals. These services include:-

- i. Practical, emotional support and advocacy and
- ii. Evidence based therapeutic interventions.

The demand for post CSE support services from July was estimated based on above needs analyses and the number of victims, survivors and family members that are currently receiving services including those supported by the former BASE Project, funded by Minister of Justice (MoJ). The service specification was been developed with direct input from people affected by CSE.

A transition plan for victims and survivors currently accessing services through organisations that were not re-commissioned was developed in line with the arrangements described for step down. Additional capacity has been factored into the first year of the long term post CSE contract to enable victims and survivors currently receiving support to continue to receive support.

Discussion ensued on the report with the following issues raised/clarified:-

- Given the last needs analysis was undertaken in 2015, are there plans to refresh?
- How long do survivors have to wait to access services? Waiting times are an issue for some services however, it is hoped that this will be addressed should the NCA 'Fusion Bid' be approved. There is a good level of joint working between adult services and health partners.
- What contingencies are in place if the 'Fusion Bid' is not successful?
- This briefing focuses on services commissioned by the Council, but there a number of third sector organisations who provide related services which are not reported on. Are all related services mapped in Rotherham? How are non-RMBC commissioned services

- monitored and evaluated?
- Reassurance was sought that survivors are being supported post trial as required, particularly as the number of prosecutions have increased.
 - The current services were originally commissioned in 2015 on an assumption that demand would decrease, with a corresponding reduction in year-by-year funding to reflect this assumption. What has been the impact on the funding reductions on voluntary sector provision and service users?
 - Once a contract is coming to an end but there is still a requirement to provide a service, is the service recommissioned fully or the contract extended?

Resolved:- (1) That the briefing be noted.

(2) That a further update be provided in six months' time outlining:

- A map of all provision across Rotherham, with an outline of how provision is being quality assured;
- The impact of funding reductions on voluntary sector provision and service users;
- What contingency is in place if funding bids are unsuccessful;
- Evidence of post-trial support to survivors;
- An assessment of the needs analysis to establish if it requires refreshing.

9

IMPROVING LIVES SELECT COMMISSION WORK PROGRAMME AND PRIORITISATION 2017/18

Ms C Webb Senior Adviser (Scrutiny and Member Development) reported that Members of the Improving Lives Select Committee held an informal work planning session on May 17, 2017 to consider what items to include in the commission's work programme for the 2017/18 municipal year. In doing so, Members gave consideration to the following items which have been prioritised:

- CSE Evaluation of ReachOut Project
Post-abuse support - Focus on recovery.
- Domestic Abuse: update
- Local Children's Safeguarding Board Annual Report
- Adult Safeguarding Annual Report
- Home-to-School Transport
- Missing from Home and Education
- Early Help
- Improving outcomes for Looked After Children

Resolved (1) That approval be given to the prioritised items within the Improving Lives Select Commission's work programme 2017/18

(2) That the Commission agrees to undertake a scrutiny review on improving outcomes for looked-after children (LAC) and care leavers.

10

DATE AND TIME OF THE NEXT MEETING

Resolved:- (1) That the next schedule meeting be held on Tuesday, 25th July, 2017 at 5.30 p.m.

BRIEFING PAPER FOR IMPROVING PLACES SELECT COMMISSION
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1.	Date of meeting:	19th July 2017
2.	Title:	Domestic Abuse Update
3.	Directorate:	Regeneration and Environment

1. Background

- 1.1 Domestic abuse continues to be a priority for the Safer Rotherham Partnership (SRP) and as such partners continue to work collectively to address these issues and improve services.
- 1.2 During 2016 there were 6,503 incidents of domestic abuse reported to South Yorkshire Police, 2,079 of which were domestic abuse related criminal offences. This represents a 28% increase in domestic abuse reports which is a trend that is reflected nationally, with the office for national statistics recently stating that domestic abuse accounts for one in ten calls to Police nationally.
- 1.3 Elected members have taken a keen interest in this area, as has this committee, and in 2013 this committee undertook a scrutiny review in to domestic abuse and held a subsequent meeting in December 2016. Both the initial and subsequent reviews produced a number of recommendations and this report will provide and update focussed upon the recommendations made in 2016.

2. Previous Scrutiny Review

- 2.1 During the second meeting held in 2016, along with the production of this report, members resolved the following;
 - (2) That the recommendations agreed by the Safer Rotherham Partnership Board on 5th December, 2016, be supported i.e.:-
 - The commissioning of a full review and refresh of the Safer Rotherham Partnership Domestic and Sexual Abuse Strategy 2013/17;
 - That an action plan is developed to underpin the partnership delivery of the refreshed Strategy which includes input from partners working in the field of domestic and sexual abuse;
 - Reconvene the SRP multi-agency Domestic and Sexual Abuse Priority Group chaired by Assistant Director (Council) or equivalent level senior Police Officer or senior officer from one of the partnerships responsible authorities;

- Commission an independent peer review of the Partnership's domestic and sexual abuse offer to include governance arrangements, identification of gaps in service, pathways, funding arrangements and support networks;
 - Approve funding of up to £10,000 from the Community Safety Fund 2016/17 to facilitate the above.
- (3) That, in light of the discussions, that the recommendations from the 2013 Scrutiny Review be reconsidered.
 - (4) That there be a cost benefit analysis of the Perpetrator Programme and that this be used to inform the future commissioning of Services.
 - (5) That the Rotherham Safeguarding Adults and Safeguarding Children's Boards be involved in the development of the Strategy and Pathways.
 - (6) That domestic abuse be included in the future refresh of the Joint Strategic Needs Assessment.
 - (7) That the Chair of the Safer Rotherham Partnership submit a further report in 6 months outlining progress made in respect of tackling domestic and sexual abuse in Rotherham.

3. Progress Against Safer Rotherham Partnership (SRP) Actions

- 3.1 Unfortunately despite not yet having a completed strategy in place, work has been ongoing with partners and a significant level of information and feedback has been provided and this is informing the drafting process. There is a current deadline which coincides with the SRP Board meeting on 7th August 2017. A verbal update will be provided during the committee as progress is accelerating.
- 3.2 Despite the lack of a strategy partners have committed to various actions through the domestic abuse priority theme group, which reports to the SRP board, and an action plan has been formed. It is anticipated that this will receive significant revision in order to coincide with the refreshed strategy, its vision, aims and objectives. The current action plan is attached as appendix A, for information.
- 3.3 The Domestic Abuse Priority theme group has reconvened as is chaired by the Assistant Director for Community Safety and Street Scene. This meeting is well attended and partners are working hard in their respective areas. Further work needs to be done, through the strategy and subsequent action plan, in order to deliver a focussed approach to collectively improving services.
- 3.4 In respect of a peer review, some early discussions have taken place with a partner authority as to what this could look like though again further work is required. Consideration may need to be given as to the timing of this. Presently we are well informed by statistical data and various inspections in respect of our weaknesses and gaps and this will mean we have a well-informed strategy. A

peer review may be more appropriate following a short period of delivery and renewed focus, brought about by the development of the strategy. Further discussion is required both in respect of the scope and timing of the review.

- 3.4 The recommendation made in respect of funding was not utilised. A further request will be made following discussion as highlighted above.

4. Progress Against Other Recommendations

- 4.1 In principal, Rotherham has committed to work with partners across South Yorkshire to jointly procure a service that delivers a perpetrator programme, which seeks to address the early presentation of domestic abuse for the Borough has not yet been identified and the cost benefit not yet fully analysed and understood. The current position and next steps will be identified in a report for the attention of the SRP board. This report will be offered for Scrutiny prior to its submission to the SRP board.
- 4.2 Partners have been involved extensively in the development of the strategy to date and this has produced a range of opportunities. Partners involved in both Children's and Adults safeguarding boards have been consulted as a part of the development to date and will be consulted on the final version as a part of the SRP approval process. All partners will help to form the action plan.
- 4.3 Domestic abuse is now considered as a part of the Joint Strategic Needs Assessment, as recommended by this committee. The JSNA was subject to a review during 2015/16.

5. Focus of the Partnership

- 5.1 A significant amount of work has been undertaken to understand how the 'system' operates and identify any strengths and weaknesses. Not only has this been delivered through statutory functions such as domestic homicide reviews but also by way of commissioned audits and additional reviews. This work has been analysed by partners, alongside the data, and has suggested some clear themes, which have informed the development of the strategy and the current action plan. The main four themes are discussed in the following paragraphs.
- 5.2 Work with perpetrators has been identified as an area where our collective response could be improved, both in respect of early intervention and our collective use of tools and powers. This is an area that is identified in the current action plan and will also receive focus through the actions derived as a part of the revised strategy. A bid for approval in respect of a perpetrator programme is being progressed through the SRP ahead of its board meeting on the 7th August 2017.
- 5.3 Whilst in a number of areas the collective 'system' for tackling domestic abuse has clear strengths, there are also a number of areas where further work could be done. Information sharing for victims not deemed high risk can still present gaps and commissioning is still carried out separately. More work is also needed to strengthen the Multi-Agency Risk Assessment Conference (MARAC).
- 5.4 Domestic abuse continues to present in a variety of ways and it must therefore continue to be a priority of partners to ensure that all agencies and staff within

know how to respond. Work continues to develop the Multi-Agency Safeguarding Hub (MASH) as a single front door for victims of domestic abuse. Further training is required to ensure everyone understands domestic abuse, knows how to spot the signs and what to do next.

- 5.5 The need to engage victims both in terms of their own journey through services, alongside more generally being able to inform how services work, is embraced by partners. Again it is recognised that we could do more to learn from both victims and our own processes, statutory or otherwise. The actions of the partners, captured in the strategy, will continue to respond to learning wherever available. We will adopt any learning and take responsibility for delivering this as a partnership.

6. Key Issues

- 6.1 It is clear that, whilst partners continue to work hard to tackle domestic abuse, the partnership has lacked some clear focus that enables it to tackle issues that exist across agencies, or at a tactical level. Unfortunately this lack of clear focus means that the partnership has not addressed all of the recommendation made by this committee in 2013.
- 6.2 Critical to our work in this area is the development of the Domestic Abuse Strategy, which will guide our work and provide the focus required in order to collectively achieve improvements to service and therefore reduction in harm to victims. This strategy is in the latter stages of development and it is anticipated that by the date of this committee, a more specific verbal update can be provided as to its progress. Whilst the strategy is only a document, it will serve to engage the partners and harness delivery. It also highlights clearly where the gaps are and what action is needed to address them and will therefore allow partners to be more effective in continuing to improve delivery.

7. Progress made by Partners

- 7.1 Whilst it is noted that progress against the recommendations made in 2016 has been slow in places, it is worthy to note the following success, in respect of the original recommendations of the committee during 2013;
- IDVA service now permanent
 - DA is now a part of the strategic needs assessment
 - There have been a number of Audits, Deep-dive and general inspections, the learning from which will inform the strategy
 - The SRP has been through a period of change and has now received a favourable peer review as a result of this change
 - Specification for perpetrator programme agreed across the county
 - Work is progressing on both joint commissioning and a single front door access to services
- 7.2 Further detail is provided against the individual recommendations made in 2013 in appendix B however; those items covered within the body of this report in detail (such as the perpetrator programme) do not appear in the attachment.

8. Next Steps

- 8.1 As referenced above, the strategy will be complete by August 2017. This will then require the development of an action plan, clearly linked to the strategy, which will commit the partners to the actions developed as a result of this and other processes which support this work.
- 8.2 The strategy sets out to provide a platform to deliver the improvements highlighted by the various reports, data and assurance processes. Delivery will be through the collective efforts of partners and driven in partnership. A framework to monitor performance against the strategy and associated actions will be established to drive the improvements needed.

9. Names of accountable officers:

Sam Barstow, Head of Service, Community Safety, Resilience and Emergency Planning

Karen Hanson, Assistant Director, Community Safety and Street Scene

**Safer Rotherham Partnership
Domestic Abuse Priority Group - Action Plan 2017
June 2017**

Action No	Action	Action Owner	Milestones	Update	status
2	Provide an overview of the performance of commissioned services for domestic abuse services by Adult Social Care and highlight any current and future issues for funding of services	Nathan Atkinson	Update at April DAPG end of July	Rotherham Rise – additional short term funding Restructure proposal for tiered approach Meeting update 06.06.17: work continues looking at future reporting – action ongoing	Ongoing
3	Carry out a full review and refresh of the Safer Rotherham Partnership Domestic and Sexual Abuse Strategy and Action Plan Ensure the full involvement of both Adult and Children’s Safeguarding Boards in the development of the new domestic abuse strategy including audits of selected cases Task and Finish group to progress the development of the strategy Clarity has been given to what are required, actions to be taken on how the new strategy is to be progressed and developed at a strategic level A meeting is to be set up outside this meeting to agree the framework Nathan Atkinson and Susan Claydon offered to assist with this	Amanda Raven Strategy task and finish group Amanda Raven Nathan Atkinson/ Susan Clayton	1 st draft by 31 st March 2017 Comments taken on board and 2 nd draft to be circulated April 2017 Comments taken on board v8 June 2017	Ongoing with 1 st draft developed for discussion at the task and finish group on 8 th March Revised 2 nd draft to be circulated April 2017 Meeting 06.06.17: amendments completed Discharged Meeting 06.06.17: Different versions of the domestic abuse strategy have been circulated. The Chief Executive, Sharon Kemp and Councillor Emma Hoddinott requested a further re development to the new Partnership domestic abuse strategy	Ongoing

	Head of Service, Community Safety Unit for Doncaster Services negotiate funding				
8	Ensure domestic abuse is considered within the refreshed 2017/18 Joint Strategic Intelligence Assessment (JSIA) for the Safer Rotherham Partnership	Jessica Waring Partnership Analyst	SRP Board 24 th April 2017	The Initial findings of the JSIA document were presented to the SRP Board on 13.02.17 where domestic abuse remains identified as a high priority. Going back to Board April 2017 Meeting 06.06.17: Complete	Complete
10	NHS England to send out a flow chart which includes pathways for dentists, pharmacies and opticians. (ILSC recommendation) Working with CCG DA task and finish group –they have meet twice To discuss pathways further Consultation taking place with Adults and Children’s Safeguarding to confirm information is still correct Chair questioned do we need to roll out with other partners	Amanda Raven	31 st March 2017 –	Pathway to be updated and agreed, small training team put together to work outreach to ensure pathways are working Meeting 06.06.17: GP training has commenced - complete Pathways up and running – complete Meeting 06.06.17: Flowchart updated presentations and consultations set up by CCG task and finish group – Complete	Ongoing Complete Complete
11	Explore pooled budget for domestic abuse in Rotherham (ILSC recommendation) Request for Adult Services to report back	Steve Parry Nathan Atkinson	31 st March 2017 –	Meeting update 25.1.17: Information received from Barnsley. Mandy Raven looking to find another service that matches Barnsley vision Meeting update 15.2.17: Amanda to continue further research Figures for each area now collated and to be presented to next DAPG Meeting 06.06.17: Ongoing action for Adult Services who are to discuss further pulling	Ongoing

				services together	
13	<p>Discussion around Multi-Agency domestic abuse (MADA) all agencies agreed that this has been successful within Children's Services</p> <p>Adult Services are now looking to replicate for Adult only victims</p> <p>Request for Adult Services to response at the next DAPG meeting on 22nd March 2017</p> <p>Adult Services to look at gaps for adult services and front door services</p> <p>Request for Adult Services to set up a Task and Finish Group, include Andrew Wells and Susan Clayton. Both were happy to look at front door services</p>	<p>Adult Services</p> <p>Andrew Wells</p> <p>Andrew Wells/ Susan Clayton</p>	Update AR**	<p>Meeting update 25.1.17: It was agreed Adult Services to increase participation of Adult Multi-Agency Domestic Abuse (MADA)</p> <p>Andrew Wells provides information at Multi-Agency Domestic Abuse to Multi-Agency Risk Assessment Conference</p> <p>Meeting Update 06.06.17: Pathways in place through adult services, children's services and NHS received, in non-specialised domestic abuse services</p>	Ongoing
15	<p>Domestic Abuse Pathways</p> <p>An overview of the domestic abuse Pathways had been circulated to members prior to the meeting for information</p> <p>Amanda Raven to provide this at the meeting (22.03.17); an email has been sent out to all agencies requesting current pathways and protocol</p>	Amanda Raven		<p>Meeting update 25.1.17: Amanda to collect more information around Adults and Children Pathways and names of providers. A request has been sent out to all agencies requesting current pathways and protocol</p> <p>Meeting update 15.2.17: Children Service Pathways and NHS Pathways have been Received</p> <p>Meeting Update 06.06.17: refer to above Item number 13 as combined with this Item – completed</p>	<p>Complete</p> <p>Complete</p> <p>Complete</p>
16	Explore the development of a 'single front door' approach to completing assessments (potentially the MASH to	DAPTG			

	provide a joined up, multi-agency provision of domestic abuse services) Including the provision of a domestic abuse helpline Susan Clayton was tasked with development of single door approach			Meeting Update 06.06.17: refer to item number 15 and 13	
17	SYP to query the accuracy of the Peel Report (HMIC Inspection) regarding the MASH	Act Insp Helen Lewis		Meeting Update 06.06.17: outcome of discussion is not to have gaps/duplication - ongoing action	Ongoing
18	DASH forms to be recorded on Liquid Logic by Adults and Children's Services to enable reports to be developed Request for Amanda Raven to discuss further with Michaela Cox regarding progress	Michaela Cox (Adults) Tracy Yates (CYPS)		Meeting Update 06.06.17: Ongoing action	Ongoing
20	Map all domestic abuse services across the Borough. Review, and assess the capacity within services and funding arrangements to provide a holistic picture of service provision. Amanda Raven to pass the above over to Susan Claydon	Amanda Raven Susan Claydon		Meeting Update 06.06.17: Susan Clayton was happy to assist	
21	Establish whether further support can be provided to Rotherham Rise to deal with the current backlog (Housing) Home office agreed to release funding	Jill Jones (Housing)		Meeting Update 06.06.17: The project is funded through the Government for 1 year, the application for this funding of £18,000.00 was led by RMBC (Housing) in partnership with Rotherham Rise - complete	Complete
22	Multi Agency Risk Assessment (MARAC) Amanda Raven to work with colleagues in Adult Care to assess the current situation	Michaela Cox		All other areas in South Yorkshire have brought own MARAC administration in house Update 26.4.17: Karen question capacity/administration of bringing this in house	Ongoing

	Amanda Raven to speak with Michaela Cox, Adults Safeguarding Manager about MARAC capacity/administration of bringing in house Request for Michaela Cox to report back at July meeting	Amanda Raven/ Michaela Cox Michaela Cox		Save lives research at MARAC found Probation services do not participate Update 06.06.17: Currently police administer Rotherham	
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COMPLETED ACTIONS

1	Provide a full presentation to the Safer Rotherham Partnership (SRP) regarding domestic abuse services across Rotherham	Karen Hanson / Steve Parry	December 2016	Full presentation given with comprehensive discussion and debate	Complete
4	Reconvene the SRP multi-agency Domestic and Sexual Abuse Priority Theme group	Steve Parry	First meeting to take place before end of January 2017 - completed	First meeting commenced on 25.01.2017, Proposal for group to initially meet monthly with a decision on frequency of meetings to be made at a when date when the group is more established. Further meetings scheduled to date: <ul style="list-style-type: none"> • 15 February 2017 • 22 March 2017 • 19 April 2017 	Complete
6	Review and revisit the recommendations of Improving Lives Select Commission report into Domestic Abuse 2013 and the recommendations of the latest meeting which took place in Dec 2016	Amanda Raven	31 st March 2017	All outstanding actions included within the theme group action plan	Complete
9	Consider developing a sexual abuse strategy and pilot sexual abuse multi-agency risk assessment conference (ILSC recommendation)	Amanda Raven	31 st March 2017	Review has discovered these were disbanded several years ago and are no longer considered appropriate locally or nationally	Complete

12	One stop shop telephone number for domestic abuse advice (ILSC recommendation)		31 st March 2017	Meeting update 25.1.17: Freephone 24hr National Domestic Violence Helpline Number 0808 2000 247 Meeting update 15.2.17: Completed	Complete
14	Review the location of the Independent Sexual Violence Advocate (ISVA) service	Amanda Raven	31 st March 2017	Meeting update 25.1.17: On Wednesday 8 th February 2017 Amanda met with the Sexual Assault Referral Centre (SARC) Manager to discuss the placing of the Independent Sexual Violence Advocate (ISVA) service Meeting update 15.2.17: Confirmation ISVA will be sitting with Rotherham Abuse Counselling Service, Moorgate Road, Rotherham from 31 March 2017 Victim support are now located at Hackenthorpe Police Station Sheffield	Complete

Appendix B - Domestic Abuse (2013 ILSC Recommendations) Update Paper

Area of Recommendation	Specific Recommendation	Update	Additional Info
Commissioning and Funding	Mainstream Independent Domestic Violence Advocates Funding	Complete	<ul style="list-style-type: none"> - Staff are now in permanent positions within Adult services with long term funding allocated.
	Audit of Need – Domestic Abuse	Complete	<ul style="list-style-type: none"> - Joint Strategic Intelligence Assessment, Audit and ‘deep-dive’ reviews have taken place which have provided new insight - Learning from these pieces of work have informed the strategy and will inform the action plan
	Joint funding/commissioning	On-Going	<ul style="list-style-type: none"> - Work undertaken by children’s services to review commissioning
	One stop shop – single access	On-Going	<ul style="list-style-type: none"> - Work has been undertaken to review points of access – how people get involved with services for domestic abuse
Strategy	Develop a strategy	Currently in draft format, to be signed off August SRP	<ul style="list-style-type: none"> - Vision and aims agreed. Objectives under development
Roles and Responsibilities	Review governance of the Safer Rotherham Partnership	Complete	<ul style="list-style-type: none"> - Structural review completed and embedded within the partnership - Peer health-check complete for SRP

			with a successful outcome
Protocol and Process	Embed Association of Chief Police Officers Domestic Abuse Stalking and Harassment (DASH) assessment	Complete	<ul style="list-style-type: none"> - Training on use of DASH and referral pathways held monthly, GP, Pharmacy training on asking the question completed (talking about DA), with support from Rotherham Rise to complete DASH. - DASH embedded within liquid logic (a computer system)
	Develop multi-agency protocol	Not yet started	<ul style="list-style-type: none"> - This work will be informed by the review of access points
Prevention and Early Intervention	Prevent escalation of risk from standard/medium to high	On-going	<ul style="list-style-type: none"> - Work progressing for RMBC to have one front door for domestic abuse; this will help to highlight risk earlier and put prevention measures in place to stop escalation. - Reduce duplication of work and ensure support for the whole family is in place.
	Continue to raise awareness re DA to young people	On-going	<p>Early Help service now well established</p> <ul style="list-style-type: none"> - Rotherham Bringing in Pause (work with women at risk of losing children) - Operation Encompass informs Education providers of children in families where abuse has occurred. - Youth Offending Team working with victims and perpetrators.

Additional Items		
Task	Update	Additional Info
Domestic abuse to be included in Joint Strategic Needs Assessment	Complete	A part of Joint Strategic Needs Assessment under 'Staying Safe' heading
Deep Dive and Case Audits	Completed June 2017	Deep dive and audits complete. Learning will be used to inform strategy and action plan.
Review of Partnership	Completed May 2017	Completed by Blackburn and Darwin Council who state, in summary; <i>'Overall there is strong strategic commitment to partnership working. There has been real progress on strategic governance and accountability. The political and managerial leadership is strong, visible, approachable and accountable. They understand the local context and are clear on the vision, priorities and objectives which will ensure a safer and progressive Rotherham. There is sufficient capacity and resources to deliver the ambition of the Safer Rotherham Partnership.'</i>

Summary Sheet

Committee Name and Date of Committee Meeting

Improving Lives Select Committee – Date: 25 July 2017

Report Title

Children & Young People's Services (CYPS) 2016/2017 Year End Performance

Is this a Key Decision and has it been included on the Forward Plan?

No

Strategic Director Approving Submission of the Report

Ian Thomas, Children and Young People's Services

Report Author(s)

Anne Hawke (Performance Assurance Manager – Early Help)

Deborah Johnson (Performance Assurance Manager – Social Care)

Lynsey Sylvester (Performance and Data Officer – Education and Skills)

Ward(s) Affected

All

Summary

- 1.1 This report is an annual report being presented to Improving Lives Select Committee. It provides a summary of performance under key themes for Children's and Young Peoples Service at the end of the 2016/17 reporting year. It should be read in conjunction with the accompanying performance data reports (Appendix A) which provides trend data, graphical analysis and benchmarking data against national and statistical neighbour averages.

Recommendations

- 2.1 Members are asked to receive the report and accompanying dataset (Appendix A) and consider issues arising.

List of Appendices Included

Background Papers

Early Help Monthly Performance Report – March 2017

Safeguarding Children & Families Monthly Performance Report – March 2017

Consideration by any other Council Committee, Scrutiny or Advisory Panel

No

Council Approval Required

No

Exempt from the Press and Public

No

Children & Young People's Services 2016/2017 Year End Performance

1 Recommendations

- 1.1 That members receive the report and accompanying dataset and consider issues arising.

2 Background

- 2.1 This report evidences the council's commitment to improvement and providing performance information to enable scrutiny of the improvements and the impact on the outcomes for children and young people. It provides a summary of performance under key themes for Children & Young Peoples Services at the end of the 2016/17 reporting year and also represents the monthly report for March 2017. It should be read in conjunction with the accompanying performance data reports which provides trend data, graphical analysis and benchmarking data against national and statistical neighbour averages.
- 2.2 Targets, including associated 'RAG' (red, amber, green rating) tolerances, were introduced in September 2015 against appropriate measures for Social Care and in January 2016 for Early Help and Family Engagement. These have been set in consideration of available national and statistical neighbour benchmarking data, recent performance levels and, importantly, Rotherham's improvement journey.
- 2.3 Targets are reviewed revised annually along with any associated tolerances and that appropriate adjustments or additions are made for 2017/18. This will ensure continued retention of the right focus on the effectiveness of services and achieving good outcomes for children and young people in relation to local priority areas for improvement.

3 Key Issues

3.1 Good and improved performance in the last 12 months

- Overall, during 2016/2017 there were 3914 contacts into the Early Help service indicating effective arrangements are in place to ensure that families get the right support at the right time.
- Timeliness performance for Initial Contacts in Early Help has continued to increase during the year reaching 53.7% engagement within three working days compared with 18.4% in April 2016.
- During the period (May 16-March 17) 222 voluntary exit surveys were completed with 98% of people who completed the survey rating their overall experience of the help and support they received from the worker(s) within the Early Help Team as good or excellent service.

- Performance against the annual target for young people not in Education, Employment or Training (NEET's) was 3.1% against a target of 3.2%.
- The final absence statistics for Persistent Absence in academic year 2015/2016 were published during March 2017 with pleasing results for Rotherham. Both primary and secondary schools made an improvement on 2014/2015 with primary schools performing at 10.4% (nat ave 8.2%) compared to 11.2% in 14/15 and secondary schools at 15.8% (nat ave 13.1%) compared with 16.4% the previous year.
- The percentage of social care referrals progressing to an assessment has increased considerably to 90.0% compared to 77.6% in 2015/16. There were 5660 assessments completed in 2016/17 compared to 4064 in 2015/16 (39% increase).
- Following this increase in demand the year the Duty and Assessment service was reconfigured to create a fifth team to create more flexibility and resilience in the system. The impact of this new team is evident with the percentage of assessments completed within 45 days further improving in March 2017 to 92.9% from 85.9% in February 2017.
- The proportion of Children in Need (CIN) with an up-to-date plan has improved further from 92.7% in February to 93.8% in March 2017 which is now above the target of 90%.
- The percentage of initial child protection conferences (ICPC) which were completed within 15 days of the S47 is above national and statistical neighbour averages, and within top quartile. Overall performance for 2016/17 is 91.0% compared to 88.3% in 2015/16.
- Performance in relation to Child Protection cases reviewed within timescales continues to be good (98.6% 2016/17), and maintaining 100% for eight months.
- At the end of March 2017 there remains only one child with a long term Child Protection Plan (CPP) (over two years). This equates to 0.3% compared to 0.8% at the end of March 2016.
- During 2016/7 there were 17 convictions for Child Sexual Exploitation and 327 referrals to the Post Abuse Support Services.
- The percentage of LAC visits within the local standard has improved in 2016/17 by 6.2% to 86.4% compared to 80.2% in 2015/16.
- Early Years Foundation Stage Profile (EYFSP) - Rotherham's performance for a Good Level of Development (GLD) has increased by 3.0% to 70.4% in 2016. This is 1.1% above the national average at 69.3%.
- For Key Stage 2 (KS2) in 2016, the percentage of pupils working at the EXS+ in Reading, writing and mathematics combined was 54%, this was 1% above the national average and ranked 1st against other LA's in the Yorkshire and Humber region.
- At Key Stage 4 'Progress 8' aims to capture the progress a pupil makes from the end of primary school to the end of secondary school. The progress 8 score for Rotherham in 2016 was +0.04, this is above the national average progress score of -0.03 and above the Yorkshire and Humber aggregated regional average of -0.03. Rotherham is one of only 3

local authorities in our statistical neighbour comparative group that has a score above 0.

3.2 Areas for further improvement

- Overall performance for the number of partners completing an Early Help assessment during 2016/2017 was lower than hoped at 6.5%, which equates to 75 out of 1150 of completed Early Help Assessments.
- The year concluded with 39.4% of Early Help Assessments being completed (March 2017) in 35 working days.
- In the Families for Change programme the total figure of payment by result outcome claims for this financial year was 80 or 29% of the total targeted range of 280-350.
- Year-end data shows that 52% of children aged 0-5 across Rotherham had engaged with activities in a children's centre, which is below the target of 66%.
- The Section 47 rate per 10,000 population has improved from 262.1 in 2015/16 to 251.8. However it remains significantly higher than the statistical neighbour average of 149.2
- Although the rate of children becoming subject to a CPP has decreased, the proportion of these who are subject to their second or subsequent plan has been increasing month on month from 4.7% in 2015/16 to 8.4% in 2016/17.
- The percentage of children on a CPP who have up-to-date visits has seen month on month decreases. At the end of March 2017 this was 88.4% compared to 99% at the end of March 2016.
- The percentage of LAC who have ceased to be looked after across the year due to permanence, (special guardianship orders, adoption, residence order), in 2016/17 was 28.3% compared to the 2015/16 outturn of 40.1%
- Performance for LAC with up-to-date dental assessments is well below target and monthly data remains fairly static. Outturn performance is at 62.7% 2016/17 which compares negatively against last year's position of 95.0% 2015/16.
- 97% of LAC have a Personal Education Plan (PEP) however, the proportion with a PEP which is up-to-date at year-end was 68.2%
- Percentage of children adopted currently stands at 14.4% for 2016/17 compared with a target of 22.7% and an outturn of 22.9% in 2015/16. This equates to 31 adoptions in the current year compared to 43 in 2015/16.
- The number of looked after children (LAC) who have had three or more placements in the year has improved on the previous outturn of 13% to 11.3 in 2016/17. However this remains higher than all other benchmarks and our local target of 9.6%.
- The proportion of current long-term LAC who have experienced a stable placement for over two years has fallen this year from 72.7% to 67.6% which now places Rotherham below statistical neighbours and the national average.

3.3 Early Help & Family Engagement

3.3.1 Weekly operational performance meetings were introduced in Early Help during February 2017 to support the further embedding of a performance culture across all levels of the service and to address issues identified through the implementation of a new system (Liquid Logic EHM). These meetings ensure timely access to live data in order to address performance issues swiftly and as they arrive, rather than waiting until the reporting period is over. This forum is proving successful and is having a marked impact on performance and issues related to recording that have affected performance. The forums have enabled operational managers to look at live data and communicate back with staff on recording issues and/or drift. As a result there is enhanced operational grip on performance (see below) which is a positive achievement.

3.4 Initial Contacts

3.4.1 There was positive performance in relation to Initial Contacts at year end, despite the sharp increase in cases that require an Early Help Assessment. Of the 136 cases received, 88.3% were successfully engaged during the month, indicating a 5% increase on engagement for last month, with 53.7% of these engaged within three days and a further 34.6% engaged after three days.

3.5 Early Help Assessments

3.5.1 Of the 127 Early Help Assessments (EHA's) in scope for completion in March 2017, 39.4% were completed within the target timeframe of 35 days which highlights a 4.6% increase in performance from the previous month and therefore continuing the trend during the final quarter of the year. A further 19.7% of the EHA's required in March 2017 were completed outside of the 35 day time frame which results in a 59.1% rate of completion overall which is an overall 4.3% increase on the previous month. Work continues at the weekly performance meetings to ensure that the data is analysed and learning taken to enable further improvement in the future.

3.5.2 The undertaking of Early Help Assessments by partners remained consistently low in Rotherham at the end of March 2017 and this was reinforced by a recent Ofsted monitoring visit as a key area for development. Overall performance for 2016/2017 was 6.5% which equates to 75 out of 1150 of completed Early Help Assessments.

3.5.3 There was agreement by Health and School colleagues at a recent Improvement Board that support in this area will be forthcoming and that there is commitment to increase engagement in the Early Help Assessment.

3.6 Children's Centres

- 3.6.1 Children's Centres year-end data (Qtr4) around registration rates is now available and shows that all Centres have been focussing on targeted work which is evidenced in the 30% Lower Super Output Areas (LSOA's) and have met the 95% target overall, with South and North areas performing above target, and Central area improving from 92% last quarter to 93% this quarter, demonstrating that those families living in the areas with the highest needs have been a priority and a key focus which is positive. The funding allocated for 2017/2018 has been distributed using a revised formula to focus on need which will benefit those areas with higher numbers of children residing in 30% LSOA's.
- 3.6.2 Year-end data also shows that 52% of children aged 0-5 had engaged with activities in a children's centre, which is below the target of 66%. However, of those living in the 30% LSOA's, 62% had engaged which is much nearer the target, with North and Central localities only just missing the target at 64%.

3.7 Step Downs

- 3.7.1 Since April 16 (this financial year) cases stepped down total 391 families and 909 children (up to 31 March 2017) to Early Help Locality Teams, along with making recommendations for 54 families and 100 children to be worked with by partners.
- 3.7.2 The step down process is now changing focus and will be managed in localities rather than in a central panel approach (NB: the last panel took place on 9 May 2017). Team Managers from Childrens Social Care and Early Help Locality Managers are now agreeing a planned step down through dialogue in localities that enhances integrated working and shared operational practice. Step Down in localities is an important development for the service as it supports better integrated working across front line staff and managers. Locality step downs will be monitored and reviewed on a regular basis to ensure that it becomes seamless and also enables 'step up' dialogue to take place.

3.8 Families for Change

- 3.8.1 In 2016/17 Rotherham committed to identifying and engaging 882 families in the Troubled Families Programme (known locally as Families for Change). The target engagement figure for this financial year was achieved in March 2017 when 97 new families were attached to the programme. The increased rate of identification was maintained in March because the flow of information from Liquid Logic continued to provide sufficient new families. The improved identification process is embedded.

3.8.2 Within the Families for Change programme, the 2016/17 target number of families for whom Rotherham claims a payment by results outcome was set in the range of 280-350. The total figure for this financial year was 80 or 29% of the total. It is unclear whether funding for unclaimed outcomes will be available to draw down in future years. On 4th April a series of reports were published, including national and local datasets. This shows the number of claims by all local authorities. Rotherham is one of the lowest performers. Our figure of 3.4% against the 5 year target lags behind Doncaster (5.4%) that also entered the expanded programme in Wave 3.

3.8.3 In order to develop a solution focused action plan which will address performance in this area a deep dive is being planned by the Directorate Leadership Team (DLT) and is taking place on the 27th July 2017..

3.9 Persistent Absence

3.9.1 The final absence statistics for PA in academic year 2015/2016 were published during March with pleasing results for Rotherham. Both primary and secondary schools made an improvement on 2014/2015 with primary schools performing at 10.4% (nat ave 8.2%) compared to 11.2% in 14/15 and secondary schools at 15.8% (nat ave 13.1%) compared with 16.4% the previous year.

3.10 NEET's

3.10.1 The position at the end of March 2017 showed a NEET figure of 3.5% (against a local target of 3.7%) and a Not Known figure of 2.8% (against a local target of 3.0%). Data sharing exercises and follow up will continue, as will work to re-engage the NEET cohort, both centrally and across all localities to ensure we continue to meet our local targets.

3.10.2 Latest comparison data available for February 2017 return show that in respect of NEET figures Rotherham are better than both statistical neighbours and region, whilst being in line with the national return.

3.10.3 The annual performance measure for NEET's is an average taken across November 2016, December 2016 and January 2017. This year the target was 3.2% and our performance was 3.1% therefore exceeding the target.

3.11 Youth Offending

3.11.1 Based on the latest released YJB data (Dec 2016) which covers period October 2015 to September 2016, First Time Entrants into the youth Justice System in Rotherham have decreased to 414 which is 11.2% lower than the same period last year. The actual decrease in numbers for Rotherham relates to 14 young people. This continues the downward trend from the previous

quarter but remains above National and Regional trends (334 equating to a 12% decrease). The decrease is attributable to work undertaken with the police for the YOT to assess and intervene with young people prior to charge, should this trend continue it is likely to have a perverse impact on reoffending rates.

3.12 Customer feedback

3.12.1 In Early Help and Family Engagement during Quarter 4, 51 voluntary exit surveys were completed, bringing the total at year end (31 March 17) to 222 since implementation in May 2016.

3.13 Children's Social Care - Contact and Referral

3.13.1 In 2016/17 there was a 23% increase in the volume of contacts to children's social care, 14,959 compared to 12,165 in 2015/16. This increase in volume has had an impact upon the timeliness of decision making which was 86.5% compared to 96.5% in the previous year. However monthly data towards the end of the year shows performance is now back above 90%.

3.13.2 Month on month social care referral numbers have been consistent with an average of 420 per month, representing a 26.6% progression rate from contact. In total there have been 5066 referrals in 2016/17, a 3% increase on the 4915 in 2015/16.

3.13.3 The rate of re-referrals within 12 months of last referral has seen incremental month on month improvements from the 2015/16 position of 30.7% to 27.6% for 2016/17. However this remains high when compared to the national average of 24% and the corporate plan priority target of 23% has not been met. This indicates that children's needs may not be being met in a sustained way and reinforces the findings of the audit programme which is trying to help the service move beyond compliance. Re-referrals is usually a reflection of the quality of the practice and as this improves the indicator should reduce. As improvement strategies are implemented and embed, a further continued downward trend is expected

3.13.4 The percentage of referrals moving on to an assessment has increased considerably to 90.0% compared to 77.6% 15/16. This indicator is now placed above the statistical and national averages and above the latest national top quartile threshold. This could be reflective of the impact of the improved screening work which is now undertaken at 'contact' stage rather than referral. The assessment resulting in 'no further action' (NFA) rate and audit outcomes will be monitored alongside this figure.

3.14 Assessments

- 3.14.1 The increase in referrals moving onto an assessment has resulted in a 54.5% increase in the number of assessments started in 2016/17 (2015/16 (3996), 2016/17 (6182). Assessment outcomes are being monitored to ensure assessments are not being undertaken unnecessarily which for the year has been 33.7%.
- 3.14.2 Following this increase in demand the year on the Duty and Assessment service (35% over the year) and the subsequent impact on completion times, the service was reconfigured to create a fifth team to create more system flexibility and greater resilience in resources. The impact of this new team is evident with the percentage of assessments completed within 45 days further improving in March 2017 to 92.9% from 85.9% in February 2017. However the capacity issues is reflected in the overall year's performance which fell from 92.8% in 2015/16 to 85.4% in 2016/17. Compliance continues to be monitored at fortnightly performance meetings where team managers address any remedial action for those out of time and supporting data by worker and child is available on a daily basis .
- 3.14.3 The overall trend of the proportion of assessments resulting in 'No Further Action' is downwards, which is a positive reflection of the improvement in quality of decision making and application of thresholds. The downward trend of repeat referrals supports this view. Whilst it has been positive to see an increase in step down decisions as opposed to closure of cases it is better for families to be directed straight into early help wherever possible rather than be routed through social care in the first instance.
- 3.14.4 Although the above performance information is important, an emphasis on quality in Children and Young People's Services remains a priority and this will continue to be monitored and tested to ensure that the drive to improve timeliness is not at the cost of achieving best practice.

3.15 Plans

- 3.15.1 The implementation of the new Social Care System, Liquid Logic, allows for the child's plan to be input in full direct into the system. This is a far more intensive piece of work than on the previous system as it now contains the full content of the plan and not just the date. Performance was impacted by this change as social workers were required to enter their entire caseload of plans rather than just 'new' plans. However, once the first plan is created any subsequent plans are much easier to update.
- 3.15.2 At the end of 2015/16 98.6% of eligible Children in Need (CIN) had an up-to-date plan, at the end of 2016/17 this has now declined to 93.9%. Similarly the percentage of LAC with an up-to-date plan has also declined to 79.1% from

98.4% in 2015/16 (the definition for this is currently being reviewed to be more in line with national standards)

3.15.3 Pathway plans for care leavers have seen a further 2% improvement to 99.3% when compared to last year's outturn of 97.5%.

3.15.4 It is well understood that the quality of plans is crucial in terms of securing good outcomes for children and this will continue to be the focus of the 'Beyond Auditing' work that is underway across the localities.

3.16 Visits

3.16.1 At the end of March 2017, 88.4% of children subject to a CPP had been seen within timescale, compared to 99% at the end of March 2016. Visits are monitored using current data and by reviewing exceptions at the weekly performance meetings. The regular performance meetings will continue to review progress in this area and where visits are late then the reasons are fully understood and that there are clear measures in place to ensure that each child is seen in an appropriate timescale and that they are safe.

3.16.2 In relation to children in care, performance in LAC visits within the national minimum standards has decreased to 94.7% from last year's outturn of 98.1%. But over the year there has been a steady rate of improvement achieved against a more stretching from 80.2% to 86.4%. This improvement needs to continue as this is still not considered good enough so it will remain an area of focus with sustained management attention.

3.17 Section 47

3.17.1 As reported throughout the year, Section 47 investigation numbers are very high. A total of 1428 S47's were started in the year compared to 954 in 2015/16. This equates to a rate of 251.8 per 10,000 population which is significantly higher than the statistical neighbour average of 149.2.

3.17.2 Trend data in relation to the outcome of Section 47 investigations, shows 55.8% of overall outcomes in 2016/17 were substantiated with a continuing risk of significant harm. This suggests that the original decision to initiate the strategy discussion/section 47 investigation was right for the majority of children/families even though, for some, there is no continuing risk of harm.

3.17.3 In 2016/17, 91.4% of the total Initial Child Protection Conferences (ICPCs) were carried out within 15 days which is an improvement on last year's position of 88.3% and better than the latest statistical neighbour and national averages (85.7% and 74.7% respectively). Monthly data demonstrates that current performance is now regularly higher than 90%. Where conferences are not meeting timescales the reasons are reported to senior managers and recorded on each case.

3.18 Children in Need

- 3.18.1 There is no good or bad performance in relation to the number of Children in Need (CIN), although it is important to monitor against statistical neighbour and national averages as numbers considerably higher or lower than average can be an indicator of other performance issues. At the end of March 2017 there were 1656 CIN, when combined with those subject to child protection plans (CPP) this equates to a rate of 360.1 per 10k population; sustaining our position below the statistical neighbour average (372.4), but above the national average (337.3).
- 3.18.2 A gradual reduction in numbers is due to Duty and Assessment managers rigorously applying the threshold to step down when appropriate to Early Help rather than ongoing social care involvement and clear locality processes for regularly reviewing CIN to ensure timely progression and avoid drift. One of the measures of success of our Early Help offer will be, over time, a reduction in the numbers of CIN as families are offered support at an earlier point before concerns escalate. As the service starts to embed it may in the short term increase demand as it uncovers unmet need.

3.19 Children on Child Protection Plans

- 3.19.1 At the end of March 2017 there were 375 children subject to a CPP, which is a slight increase on March 2016 when there were 369. However, the rate per 10,000 population of 65.6 demonstrates that this is still high when compared to statistical neighbours and the national average of 46.1 and 42.9 respectively.
- 3.19.2 The number of children becoming subject to a Child Protection Plan (CPP) in the last 12 months has decreased from 528 in 2015/16 to 452 in 2016/17. However the proportion of these children who are subject to their second or subsequent plan within 24 months has been increasing month on month from 4.7% in 2015/16 to 8.4% in 2016/17 and remains higher than the target of 4%. This may indicate that children are ceasing their plan before all significant risks have been addressed. The figures behind the percentages show that the lower overall CPP cohort is producing a higher percentage increase; there has been an actual increase of 19 children (22 in April 2016 to 41 in March 2017). This however still requires improvement and work continues in the service to assess the quality of plans and to ensure that plans are only ceased when children and young people are no longer at risk or are supported appropriately at a lower level of intervention. It is clear that some of the reasons for repeat child protection planning relates to 'legacy' issues in relation to previous social work planning and intervention.

3.19.3 Of the children subject to a CPP plan at the end of the year, 98.6% of their reviews over the entire year were completed in time which is an increase on the previous year which was 94.2%. In month performance for August 2016 to March 2017 was consistently 100% each month.

3.20 Looked After Children (LAC) (also known as children in care)

3.20.1 At the end of March 2017 there were 487 children in care which is an increase of 55 on March 2016 and equates to 86.4 per 10,000 population. This places Rotherham above statistical neighbours (75.8) and national average (60.0) and there is an upward trajectory as admissions to care continues to increase as predicted.

3.20.2 It is not unusual for numbers of children in care in an authority in intervention to rise as action is taken to address cases which have been drifting previously. The rise in the numbers of care proceedings in Rotherham is testimony to this happening locally. There is no feedback from the courts to suggest that any children are being brought before them unnecessarily.

3.20.3 94.7% of completed LAC reviews over the entire year were completed in time which is an improvement on the previous year which was 83.3%. The reasons for any late reviews are fed back to managers and action taken to address any practice issues.

3.21 Looked After Children - Placements

3.21.1 The Placement Sufficiency Strategy 2017-20 was approved by the Corporate Parenting Panel in February 2017 which sets out the plan to increase in-house and family based care and actions have already been taken;

- Work has been undertaken to reduce the number of 'dormant' in-house placements which stood at 47 in January 2017 and by April 2017 this is now down to 22.
- Recruitment continues to be strong with 23 new carers approved over 2016/17, against a target of 15 and this target has been reset at 25 for each of the 3 years of the Strategy.
- A marketing post has been approved and is in the midst of recruitment in order to improve the foster care recruitment via social media.
- Reports have been presented to DLT in respect of a 'Refer a Friend', Virtual Assessment Team and Council Tax Discounts for Foster Carers to further support recruitment.
- The Fostering Service are progressing the implementation of the Mockingbird Project which aims to significantly increase the support available to carers.
- There will be a concerted media strategy with the Communications team ensuring 'good news' stories appear in the local media including achievements of LAC, long service awards for carers, Fostering Fortnight events held 8th - 21st May 2017.

- 3.21.2 Both within Rotherham and on a national level the numbers of children in care continues to rise. This places significant pressure on the availability of foster placements, both in-house and within the private/independent fostering sector (IFAs). As a result these agencies can afford to 'pick and choose' their placements, therefore several young people who may have been in foster care previously have had to be placed in residential care. Competition for foster carers remains strong from the IFAs, as a result RMBC needs to maintain a visible profile, and remain competitive in respect of finances, support and training.
- 3.21.3 At the end of 2016/17 98 of the 145 long-term LAC (67.6%) had been in the same placement for at least two years. This is only slightly below that of our statistical neighbours (68.2%) and the national average (68%) but is below the 2015/16 position of 72.7%.
- 3.21.4 Following highs of 14.7 in August, the proportion of all LAC who had three or more placements in 12 months improved and at the end of 2016/17 it stood at 11.3%. Whilst this is an improvement the 11.9% for 2016/17 it continues to be higher than all other benchmarks. Our target of reducing to less than 10% remains and is still achievable in the next financial year.
- 3.21.5 These two placement measures suggest that we need to improve our preventative work to reduce initial placement disruption. If a child experiences a disruption they are more likely to disrupt again. It will also be important to consider the impact of our return home programme our wish to return children to live in Rotherham which will increase the number of children experiencing placement moves.

3.22 Looked After Children – Health & Dental

- 3.22.1 Performance in relation to health and dental assessments was very poor in previous years and has been the focus of concerted joint effort and has continued to show improvement however performance in 2016/17 has fallen from 92.8% (2015/16) to 87.1% (2016/17) for Health Assessments and from 95% (2015/16) to 62.7% (2016/17) for Dental Assessments. The overall number of health assessments completed remains at a good level and the number of initial health assessments has risen. This is due to the access health services have to the new case management system that has improved the administration of the process. Performance will continue to be very closely monitored.
- 3.22.2 From our reviews we know that in the main, those not having health or dental checks are the older young people who are recorded as 'refusers'. This is no longer going to be accepted on face value and we will be actively exploring with health colleagues how we can promote the reviews as something useful and 'young person friendly'. This will focus on the things that interest most young people such as weight, hair and skin as well as other aspects of health.

We will also make sure that we are creative in thinking about how we can actively engage young people and 'reach out' to them rather than expecting them to attend a standard clinic appointment.

3.22.3 Of the LAC initial health assessments completed in 2016/17 17.7% were within 20 working days of entering care. This is low performance but its an improvement on the previous year's 8.4%. In-month performance shows a recent improvement of 37.5% in February 2017 and to 42.9% in March 2017 but this is still not good enough. Health colleagues have identified that early contact in a non-clinical setting may prove to be the best way to sustain young people engagement in the process. As a result they will be running a pilot whereby they visit newly admitted young people in their placement to support them to attend their health assessment. Joint intervention between Health and LAC Head of Service to support locality teams to better performance in respect of Initial Health Assessments.

3.23 Looked After Children – Personal Education Plans (PEP)

3.23.1 Although there is an increasing profile in the number of LAC performance regarding PEPs has been consistent throughout the year with 97.0% of children now having a PEP in place, although there is more to do to ensure that every child and young person has a plan in place.

3.23.2 In 2016/17 the virtual school introduced a new standard for timeliness. Rather than annual PEPs with 6 monthly reviews it is now expected that every child will have a updated PEP every term. Therefore caution should be taken when comparing performance against previous years. At outturn the proportion of children with an up-to-date PEP was 87.9% 2016/17. This is lower than expected, a solution has now been put in place to rectify this and performance should begin to increase in 2017/18.

3.23.3 The focus is now shifting to quality to address the numbers of children and young people who are not in full time education and those whose school place is known to be fragile. The virtual school governing body will take responsibility for driving this improvement area. Exception reporting has been provided for the children who are without an up to date PEP.

3.24 Care Leavers

3.24.1 The number of care leavers has increased in the last 12 months from 197 ar March 2016 to 223 young people at the end of March 2017.

3.24.2 A total of 96.9% of these young people are in suitable accommodation, a slight increase on the previous year of 96.5%, and is still above the statistical neighbour and national averages. This equates to seven young people not in suitable accommodation, of these six are in custody, and one (aged over 18) has made himself intentionally homeless.

3.24.3 A total of 63.2% of young people are in education employment or training, above the national average (48%) but a drop on the previous year of 68.0% and disappointing in terms of the aspirations for Rotherham young people. This equates to 60 care leavers not being in education, employment or training (NEET).

3.25 Adoptions

3.25.1 In 2016/17 there were 31 children adopted which is a decrease on the previous year's 43. 38.7% of these were made within 12 months of the decision that the child 'Should Be Placed for Adoption' (SHOPBA) which is low when compared to previous years at 53.5%.

3.25.2 In respect of 'Average number of days between child becoming LAC and having an adoption placement (A1)' Rotherham is performing well with a reduction from an average of 661 days in 2013/14 to 404 in 2016/17. Similarly for 'Average number of days between placement order and being matched with adoptive family (A2)' it has reduced from an average of 315 days in 2013/14 to 232.9 in 2016/17; however this is an increase on 2015/16 (136 days).

3.26 Child Sexual Exploitation (CSE)

3.26.1 In early 2017 the operating guidance for the Evolve Team, (the Rotherham CSE specialist team), was further developed and amended. These amendments mean that team no longer 'key work' cases but co-work cases alongside the child's main key worker providing specific support and guidance in reducing risk to CSE and engaging and supporting the child through any prosecution processes where appropriate.

3.26.2 The number of new referrals where CSE is the presenting issue has seen an increase from 200 in 2015/16 to 231 in 2016/17. However this increase may not be indicative of an increasing risk profile but instead reflective of improved identification and awareness in agencies and greater confidence in local services in tackling CSE in the public and the young people.

3.26.3 There has significant work has been done to move the quality of social work and multi-agency practice in the Evolve Team as shown in audit outcomes. A multi-agency Governance Group is now in place and is establishing the means to collectively oversee the quality, nature and impact of the work of the team. A work plan is emerging which will drive forward future further developments.

3.26.4 All elements of work relating to CSE is also routinely scrutinised by the RLSCB under the auspices of the CSE Strategic Sub Group.

3.26.5 The one year independent Evaluation Report (Feb 2017) concluded that during its first six months, ReachOut established itself with remarkable speed, not only undertaking plenty of outward-facing activity, but also ensuring the essential building blocks of a healthy organisation were in place to underpin that activity. At the end of year one, ReachOut has sustained that momentum. The project has maintained a stable staff team which has retained its enthusiasm and developed a strong, supportive culture. The direct work seems to have reached the 'right' children and young people i.e. those at risk of CSE at the 'right' level i.e. targeted prevention. Evidence so far suggests that positive outcomes are being achieved, both in terms of reducing immediate risk and in positively impacting on resilience factors in young people's lives.

3.27 Caseloads

3.27.1 Although, as demonstrated throughout this report, there has been an increase demand across the service the average number of cases across the key safeguarding teams has been consistent throughout the year and has been below the target of 22 (ranging from 13.3 to 18.3 across the teams). Average number of cases held by LAC social workers was 11.6. Ensuring that social workers have manageable caseloads was a key priority for Rotherham and the current performance is testimony to what has been achieved in this regard.

3.27.2 The average caseload of key safeguarding teams continues to be monitored for every social worker in detail. All those over 22 are examined and the reasons explained. For example, some senior social workers have students allocated to them and the student caseload shows under the supervisor's name.

3.28 Education – Early Years

3.28.1 The number of two-year-olds taking up an early education place in Rotherham continues to remain high, with 83% of Rotherham's eligible two-year-olds taking up a place in spring 2017 which is currently above expectations.

3.28.2 95.6% of all Rotherham's Ofsted-registered Early Years and Childcare providers are judged to be good or outstanding, which is above the national average.

3.29 Education – Schools

3.29.1 The proportion of children and young people attending a good or better school in Rotherham increased by 20% to 86.2% as at 31 August 2016. However, the Rotherham average has decreased. The latest comparison to the national

average is 87% as at 31 December 2016. The proportion of LAC attending a Good or Outstanding school is 84%.

3.29.2 The Department for Education (DfE) academy conversion programme has affected the aggregated Ofsted profile for schools. The first inspection for all new schools, including academies, will usually take place within three years of opening.

3.29.3 A framework for supporting and challenging the leadership of schools of concern is in place to ensure that schools have the capacity to secure and sustain high standards in pupil outcomes.

3.30 Early Years Foundation Stage Profile (EYFSP)

3.30.1 From 2013 to 2016 Rotherham has achieved better than nationally for a 'good level of development' (GLD), with an upward trajectory each year. Rotherham's performance for a GLD has increased by 3.0% to 70.4% in 2016. This is 1.1% above the national average at 69.3%. 2016 outcomes are ranked joint 3rd against other LA's in the Yorkshire and Humber region. Average Total Points (ATPS) has remained at 34.4 and in line with the national average.

3.31 Phonics Screening Checks

3.31.1 78.8% of pupils in year 1 achieved the standard mark in the national phonics screening check in 2016; this is an increase of 4.4%. This compares to the national figure of 80.6%, an increase of 3.7%. The gap to the national average is reduced to 1.8% and shows that results in Rotherham have improved at a faster rate than national.

3.32 Key Stage 1 Assessments

3.32.1 There were significant changes in KS1 TA for 2016. The levels have gone and have been replaced by a range of performance categories for each subject, namely reading, writing, maths and science. These are described as "*interim*" performance categories for 2016 while the government decides the future of assessment for this Key Stage. KS1 assessments in 2016 can therefore only be compared with previous years through the gap against the national average.

3.32.2 2016 assessments are reported as working at the expected standard (EXS+), working at greater depth (GDS), and working lower than the expected standard.

3.32.3 In Rotherham, the gap the between LA and National averages has reduced every year in all subjects, with the exception of GDS writing (2016).

- 3.32.4 Attainment in reading is 3.1% below the national average at the EXS+ and 1.9% below at GDS. Reading is the widest gap to the national average.
- 3.32.5 The attainment in writing is in line with the national average at the EXS+ and 1% below in at GDS.
- 3.32.6 Attainment in maths is 1.3% below with the national average at the EXS+ and 0.6% below in at GDS.
- 3.32.7 Attainment in reading, writing and maths combined is in line with the national average at both the EXS+ and GDS.

3.33 Key Stage 2

- 3.33.1 In 2016, teacher assessments and tests were revised to reflect the new and more challenging curriculum. New accountability measures were introduced for the statutory assessments at the end of KS2. KS2 TA and tests prior to 2016 can therefore only be compared with previous years through the gap against the national average.
- 3.33.2 Rotherham's 2016 results at the end of KS2 represent the strongest outcomes so far in terms of exceeding, meeting and reducing the gap between Local and National Averages.
- 3.33.3 In 2016, the percentage of pupils working at the EXS+ in reading, writing and mathematics combined was 54%, this was 1% above the national average and ranked 1st against other LA's in the Yorkshire and Humber region. This is the first time this indicator has been above the national average. The percentage of pupils reaching a higher standard was 4.4%; this was 1% below the national average.
- 3.33.4 The percentage of pupils working at the EXS+ in reading was 64% in 2016; this was 2% below the national average. The percentage of pupils reaching a higher standard was 15%; this was 4% below the national average.
- 3.33.5 The percentage of pupils working at the EXS+ in the writing teacher assessment was 78% in 2016; this was 4% above the national average and highest performing subject in 2016. The percentage of pupils working at GDS in the writing teacher assessment was 14%; this was 1% below the national average.
- 3.33.6 The percentage of pupils working at the EXS+ in mathematics was 72%; this was 2% above the national average. The percentage of pupils reaching a higher standard was 15%; this was 2% below the national average.
- 3.33.7 KS2 Floor Standards - In 2016 schools will be above the Department for Education (DfE) floor standard measure if pupils make sufficient progress across all of the reading, writing and mathematics measures or if more than 65% of pupils achieve the expected standard in reading, writing and

mathematics combined. The level of sufficient progress in 2016 is -5.0 in reading and mathematics and -7.0 in mathematics. Schools will be above the floor standard if they meet either the progress or the attainment threshold.

3.33.8 There were three schools below the KS2 floor standard in 2016.

3.34 Key Stage 4

3.34.1 At Key Stage 4 'Progress 8' aims to capture the progress a pupil makes from the end of primary school to the end of secondary school. The progress 8 score for Rotherham in 2016 was +0.04, this is above the national average progress score of -0.03 and above the Yorkshire and Humber aggregated regional average of -0.03. Rotherham is one of only 3 local authorities in our statistical neighbour comparative group that has a score above 0.

3.34.2 3.24.2 The percentage of pupils achieving A*- C in English and maths is 61.8%. This is 2.5% above the national average (all schools) and 1.5% below the national average (state-funded schools).

3.34.3 There are no secondary schools below the DfE floor standard or the DfE 'coasting definition'.

3.34.4 The percentage of pupils who achieved Ebacc performance measure has increased by 2.5% to 19.8%. This is 3.3% below the national average (all schools) and 5.0% below the national average (state-funded schools).

3.35 Exclusions

3.35.1 The Council set challenging but realistic targets to address the rising number of exclusions, both fixed-term and permanent. This last academic year (2015/16) had initially 53 permanent exclusions but 6 were overturned or rescinded, with the actual recorded number 47. This is a slight fall overall but, more significantly; it shows a halt in the trajectory of previously rising exclusions. From September 2016 to April 2017 the current number of permanent exclusions in secondary schools is 24 which indicate a promising fall (with one term to go before final numbers). It is significant that one secondary school is responsible for over a third of this number and measures are being taken to work with this school to address their response prior to exclusion. They are now beginning to engage with the new partnership model advocated by the local authority.

3.36 Education Health and Care Plan – EHCP

3.36.1 All Education Health and Care Plan (EHCP) completions and conversions are measured nationally on an annual basis as a cumulative target for how many have been completed within timescale from the beginning of the SEND reform in September 2014.

- 3.36.2 The monitoring of these two targets has improved dramatically recently with the fortnightly involvement of the Performance and Quality team, which has both challenged and supported the development of greater accuracy and scrutiny of data. The cumulative % for timeliness of completion for new EHCPs remains static overall at 52% but within the quarter performance has risen significantly since December 2016 where compliance and conversions of Learning Difficulty Assessments (LDAs) to EHCPs, completed by 31st December 2016, was the focus of the team.
- 3.36.3 The cumulative percentage of conversions from statements to EHCPs completed in a timely manner has risen from 52% to 58%. Within the quarter performance has been varied with a high of as much as 82% of conversions completed within 20 weeks during February 2017. Rotherham continues to have the lowest level of SEND tribunals nationally, with one being taken beyond the mediation stage since the reforms began.

4 Options considered and recommended proposal

- 4.1 The full service performance reports attached at Appendix A represents a summary of performance across a range of key national and local indicators with detailed commentary provided by the service. Elected members are therefore recommended to consider and review this information.

5 Consultation

- 5.1 Not applicable

6 Timetable and Accountability for Implementing this Decision

- 6.1 Not applicable

7 Financial and Procurement Implications

- 7.1 There are no direct financial implications to this report. The relevant Service Director and Budget Holder will identify any implications arising from associated improvement actions and Members and Commissioners will be consulted where appropriate.

8 Legal Implications

- 8.1 There are no direct legal implications to this report.

9 Human Resources Implications

- 9.1 There are no direct human resource implications to this report. The relevant Service Director and Managers will identify any implications arising from associated improvement actions and Members and Commissioners will be consulted where appropriate.

10 Implications for Children and Young People and Vulnerable Adults

10.1 The performance report relates to safeguarding services for children and young people.

11 Equalities and Human Rights Implications

11.1 There are no direct implications within this report.

12 Implications for Partners and Other Directorates

12.1 Partners and other directorates are engaged in improving the performance and quality of services to children, young people and their families via the Rotherham Local Children's Safeguarding Board (RLSCB), the CYPS Improvement Board, the CYPS Performance Board, the Corporate Parenting Panel and the Early Help Review Board. All the Boards receive performance reports on a regular basis.

13 Risks and Mitigation

13.1 Inability and lack of engagement in performance management arrangements by managers and staff could lead to poor and deteriorating services for children and young people. Strong management oversight by Directorship Leadership Team and the ongoing performance meetings mitigate this risk by holding managers and workers to account for any dips in performance both at a team and at an individual child level.

14 Accountable Officer(s)

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Head of Procurement <i>(if appropriate)</i>	N/A	
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Children & Young People Services



Early Help and Family Engagement

Monthly Performance Report

As at Month End: March 2017

Please note: Data reports are not dynamic. Although care is taken to ensure data is as accurate as possible every month, delays in data input can result in changes in figures when reports are re-run retrospectively.

Data items which have been subject to change during the reporting month are highlighted in yellow. Yellow highlights will then be removed (along with obsolete measures) in subsequent months.

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*"DOT" - Direction of travel represents the direction of 'performance' since the previous month with reference to the polarity of 'good' performance for that measure. Colours have been added to help distinguish better and worse performance. Key Below:-

Data Note: Measured indicated by * are where new reporting arrangements are in place following implementation of liquid logic. Note: there may be some areas where the figures have changed.

	NO.	INDICATORS - EARLY HELP BOROUGH WIDE PERFORMANCE	GOOD PERF IS	DATA NOTE (Monthly)	2016/17				DOT (Month on Month)	RAG (in month)	Target and Tolerances			YR ON YR TREND		LATEST BENCHMARKING - 2014/15				
					Jan-17	Feb-17	Mar-17	Year End 2016/17			DATA NOTE	Red	Amber	Target Green	2014/15	2015/16	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTL THRESHOLD
TRIAGE	1.1	*Early Help Contacts during the reporting month (including Step downs) See Note 1 on EH Contacts tab	Info	Number	403	407	392	3914	Financial Year	↓										
	1.2	*Number and % of Early Help Contacts with an Early Help recommendation that were Triaged during the reporting month within Five working days of receipt (excluding Step downs) see note 2 on Triage Tab.	Info	Number	330	344	340	3337	Financial Year (Cumulative)	↓										
			High	%	94.5%	98.3%	98.6%	85.3%	Financial Year (Cumulative)	↑	A	>90% <100%	100%							
INITIAL CONTACTS	2.1 OLD	*Initial contacts made measured against open Early Help Assessment cases	Info	Number				1071	Financial Year (Cumulative)											
	2.1 NEW	*Number of Initial Contact cases that reached timeliness scope within the reporting month. See note 3 on EH Assessment Tab	Info	Number	90	66	136	209	Financial Year (Cumulative)	↑										
	2.2	*Number and % of Initial Contacts made within Three working days of allocation	Info	Number	28	26	73	616	Financial Year (Cumulative)	↑										
			High	%	31.1%	39.4%	53.0%	Financial Year (Cumulative)	↑	R	>65% <75%	75%								
EARLY HELP ASSESSMENTS	3.1 OLD	*Number of Early Help Assessments completed within the reporting month.	Info	Number				536	Financial Year (Cumulative)											
	3.1 NEW	*Number of Early Help Assessments that reached timeliness scope within the reporting month. See note 4 on EH Assessment Tab	Info	Number	121	115	127	193	Financial Year (Cumulative)	↑										
	3.2	*Number and % of Early Help assessments completed within 35 working days. NB Timeliness is defined as Early Help Assessment being completed in 38 days from Triage Decision date (3 days IC plus 35 days for EHA)	Info	Number	22	40	50	481	Financial Year (Cumulative)	↑										
			High	%	18.2%	34.8%	39.4%	Financial Year (Cumulative)	↑	R	>90% <100%	100%								
	3.3	Number and % of Early Help Assessments made by Partners (as a proportion of the total number of EHA's in the reporting month)	Info	Number	7	6	7	75	Financial Year (Cumulative)	↑										
			High	%	8.1%	5.4%	5.3%	6.5%	Financial Year (Cumulative)	↑										
CASELOAD	4.1	Number of Open cases at the end of the reporting period	Info	Number	1285	1399	1424	1424	Month end position	↑										
	4.2	Number of Closed cases in the reporting period	Info	Number	169	212	222	1679	Financial Year (Cumulative)	↑										
STEP DOWNS	5.1	Number of cases (Families) submitted to Step Down Panel.	Info	Number	76	66	50	559	Financial Year (Cumulative)	↓										
	5.2	Number and % of Families where Step Down Allocation was agreed during the reporting period	Info	Number	62	55	39	445	Financial Year (Cumulative)	↓										
			Info	%	81.6%	83.3%	78.0%	79.6%	Financial Year (Cumulative)	↓										
CHILDREN'S CENTRES	6.1	% of children aged 0-5 living in the Rotherham area who are registered with a Children's Centre	High	% (Quarterly)			94%	94%	Financial Year	↑	R		95%	98%	91%					
	6.2	% of children aged 0-5 living in the Rotherham area who have accessed Children's Centre activities	High	% (Quarterly)			52%	52%	Financial Year	↑	R		66%	66%	54%					
EDUCATION WELFARE	7.1	% of Persistently Absent (PA) Children and Young People	Low	Primary % (Termly)		10.3%		10.3%	Academic Year	↑	A		8.4%	11.4% (Autumn/Spring 14/15)	10.3% (Autumn/Spring 15/16)	9.2% (Autumn/Spring 15/16)	7.4% (Autumn/Spring 15/16)	8.8% (Autumn/Spring 15/16)		
			Low	Secondary % (Termly)		14.8%		14.8%	Academic Year	↑	A		13.8%	16.1% (Autumn/Spring 14/15)	14.4% (Autumn/Spring 15/16)	13.8% (Autumn/Spring 15/16)	10.9% (Autumn/Spring 15/16)	12.3% (Autumn/Spring 15/16)		
	7.2	% of children attending School	High	Primary % (One month in arrears)	95.6%	95.5%		95.7%	Academic Year	↓	A		96.0%	95.6% (Autumn/Spring 14/15)	95.9% (Autumn/Spring 15/16)	96% (Autumn/Spring 15/16)	96.3% (Autumn/Spring 15/16)	96.1% (Autumn/Spring 15/16)		
			High	Secondary % (One month in arrears)	93.7%	93.8%		94.3%	Academic Year	↑	A		94.7%	94.1% (Autumn/Spring 14/15)	94.5% (Autumn/Spring 15/16)	94.7% (Autumn/Spring 15/16)	95.2% (Autumn/Spring 15/16)	95% (Autumn/Spring 15/16)		

Performance Summary

As at Month End March 2017
Quarter 4 covering January - March 2017

"DOT" - Direction of travel represents the direction of 'performance' since the previous month with reference to the polarity of 'good' performance for that measure. Colours have been added to help distinguish better and worse performance. Key Below:-

Data Note: Measured indicated by * are where new reporting arrangements are in place following implementation of liquid logic. Note: there may be some areas where the figures have changed.

- ↑ - increase in numbers (no good/bad performance)
- - stable with last month (no good/bad performance)
- ↓ - decrease in numbers (no good/bad performance)
- ↑ (green) - improvement in performance
- ↓ (orange) - decline in performance but still within limits of target
- ↓ (red) - decline in performance, not on target

NO.	INDICATORS - EARLY HELP BOROUGH WIDE PERFORMANCE	GOOD PERF IS	DATA NOTE (Monthly)	2016/17				DOT (Month on Month)	RAG (in month)	Target and Tolerances			YR ON YR TREND		LATEST BENCHMARKING - 2014/15				
				Jan-17	Feb-17	Mar-17	Year End 2016/17			DATA NOTE	Red	Amber	Target Green	2014/15	2015/16	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTILE THRESHOLD
FAMILIES FOR CHANGE	8.1 Number and % of families engaged as a percentage of annual target Families For Change (FFC) Year 2	High	No	77	105	97	882	Monthly	↓	G			882 Families	117%	100%				
		High	Cumulative %	77%	89%	100%	100%	Monthly	↑	G									
	8.2 Number of FFC PbR outcomes claimed (evidence of employment outcome)	High	Number	27	27	37	37	Claims subject to confirmation of claim windows by TFU	↑	R			Between the range of 280-350		5				
8.3 Number of FFC PbR outcomes claimed (evidence of significant & sustained progress)	High	Number	28	28	43	43		↑	R					0					
NEETS	9.1 Young people aged 16-17 (academic age) whose current activity is not known	Low	%	2.8%			2.8%	Annual		G			2.8%	N/A	N/A				
				2.8%	2.4%	2.8%	2.8%	Monthly	↓	G			3.0%						
	9.2 Young people aged 16-17 (academic age) who are NEET	Low	%	3.2%			3.1%	Annual		G			3.1%	N/A	N/A				
				3.2%	3.2%	3.5%	3.2%	Monthly	↓	G			3.7%						
	9.3 % of Academic Age 16,17,18 Corporate Responsibility LAC/CL EET	High	%	70.1%	71.5%	68.5%		Monthly	↓	R			80.0%	70.9% (Nov, Dec, Jan ave)	74.7% (Nov, Dec, Jan ave)				
	9.4 % of Academic Age 16,17,18 Corporate Responsibility LAC/CL NEET	Low	%	29.2%	27.8%	30.1%		Monthly	↓	R			20.0%	25.8% (Nov, Dec, Jan ave)	22.3% (Nov, Dec, Jan ave)				
9.5 Young people aged 16-17 (academic age) meeting the duty to participate	Info	%	92.4%	92.6%	92.2%	92.4%	Monthly	↓					90.8% (Nov, Dec, Jan ave)	91.9% (Nov, Dec, Jan ave)					
9.6 No of Youth sessions undertaken in the reporting month	Centre Based	Info	Number	95	92	86	1434	Annual	↓										
	Non-centre based	Info	Number	44	36	39	450	Annual	↑										
YOT	10.1 Numbers of young people first time entrants (FTE) into the criminal justice system	Low	Rate per 100,000 of 10-17 population				414 (period Oct15 - Sep16)	Annual					564 (Data published Dec14 relating to Oct13 to Sep14)	519 (Period April 14 to March 15)	439.76		409.1		
	10.2 Use of Custody	Low	Rate per 100 of 10-17 population				0.41 (period Jan 16 - Dec 16)	Annual				Lower than same quarter previous year and comparable with national trends	0.36 (Data published Dec14 relating to Jan to Dec14)	0.24					
	10.3 Rate of re-offending by young offenders	Low	Binary Rate				29.9% (Apr 14 - Mar 15)	Annual					37.1% (Data published Dec14 relating to Apr12 to Mar13)	Data not available until early 2017	36.28		37.95		
	10.4 Frequency of re-offending by young offenders	Low	Frequency Rate				0.68 (Apr 14 - Mar 15)	Annual					1.04 (Data published Dec14 relating to Apr12 to Mar13)						
CUSTOMER FEEDBACK	11.1 No of Exit Surveys returned	Info	Number	10	14	27	222	Monthly	↑										
	11.2 Number of formal complaints received during the reporting month	Info	Number	1	0	0	4	Monthly	→										
	11.3 Number of formal complaints upheld in the reporting month	Info	Number	1	0	0	2	Monthly	→										
	11.4 Number of formal complaints closed during the month which were dealt with in timescales	High	Number	1	0	0	2	Monthly	→				100%						
	11.5 Number of compliments received during the reporting month	Info	Number	0	1	0	9	Monthly	↓										
QUALITY ASSURANCE	12.1 Number of Team Manager Audits completed in the reporting month	Info	Number	14	14	15	151	Monthly	↑										
ESTABLISHMENT INFORMATION	13.1 Number of staff	Contract Count	Info	Number	325	328	328			→									
		FTE	Info	Number	236.2	238.0	239.4			↑									
	13.2 Number of starters	Info	Number	1	2	2	11	Monthly	→										
	13.3 Number of leavers	Info	Number	1	0	1	34			↑									
	13.4 Staff Vacancies	Info	Number	31	33	30			↓										
	13.5 Percentage of PDR's completed	High	%				100%	Annual		G			98%		98%				
	13.6 Number of Formal Capability processes in progress	Info	Number	0	1	1	1	Monthly	→										
13.7 Sickness	Annual FTE sick days	Low	Cumulative No.	10.73	10.91	11.2	11.2	Annual	↓	R			10.2		10.46				

"DOT" - Direction of travel represents the direction of 'performance' since the previous month with reference to the polarity of 'good' performance for that measure. Colours have been added to help distinguish better and worse performance. Key Below:-

- increase in numbers (no good/bad performance)

 - improvement in performance

 - no movement but within limits of target
- stable with last month (no good/bad performance)

 - decline in performance but still within limits of target

 - no movement, not on target
- decrease in numbers (no good/bad performance)

 - decline in performance, not on target

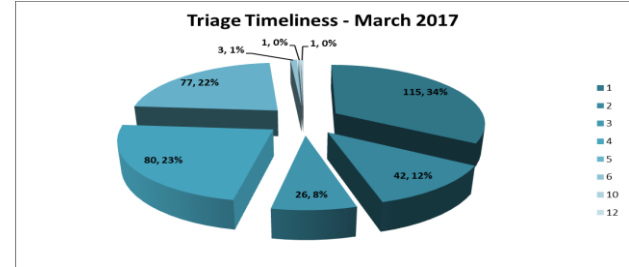
	NO.	INDICATORS - EARLY HELP BOROUGH WIDE PERFORMANCE		Data Source	Frequency	GOOD PERF IS	DATA NOTE (Monthly)	2016/17				YTD	Direction of Travel	Sparkline
								Quarter 1 April - June 2016	Quarter 2 July - September 2016	Quarter 3 October - December 2016	Quarter 4 January - March 2017			
PRE BIRTH	1.1	Number of Teenage mothers who have received support through the programme	No of open cases at the last day of the quarter	Family Nurse Partnership	Quarterly	Info	Number	15				15	To be reported in Quarter 2	
	1.2	Number of Teenage mothers who have received support through the programme and were breastfeeding at:	Initiation			Info	Number	23.0%				23.0%		
	1.3		6-8 Weeks			Info	Number	0.0%				0.0%		
EARLY YEARS DEVELOPMENT	2.1	Percentage of mothers initiating breastfeeding		Family Nurse Partnership	Quarterly	High	%	58%				58%	To be reported in Quarter 2	
	2.2	Percentage of mothers continuing to breastfeed at 6 - 8 weeks				High	Number	31%				31%		
	3	Percentage of births that receive a face to face new birth visit within 14 days by a Health Visitor		Family Nurse Partnership	Quarterly	High	%	91.0%				91.0%	To be reported in Quarter 2	
	4.1	Immunisation of 1 year olds - Diphtheria, Tetanus and Whooping Cough - DTaP		Family Nurse Partnership	Quarterly	High	%	96.0%				96.0%	To be reported in Quarter 2	
	4.2	Immunisation of 2 year olds - Measles Mumps and Rubella - MMR				High	%	95.0%				95.0%		
	4.3	Percentage of children who received a 2 - 2.5 year review				High	%	92.0%				92.0%		
5	Number and Percentage of Eligible 2 years olds accessing their Early Years take-up		RMBC Early Years	Termly	High	%	86%	79.5%	87.20%	83.0%	83.0%	↓		
EDUCATION	6.1	Number of Fixed Term Exclusions	Primary	RMBC Inclusion Department	Available Termly	Low	Number	124	35	84	106	349	↑	
			Secondary			Low	Number	813	379	808	1064	3064	↑	
	6.2	Number of Permanent Exclusions	Primary			Low	Number	6	2	3	1	12	↓	
			Secondary			Low	Number	11	4	7	12	34	↑	
EARLY HELP	7.1	Number of re-referrals where original referral was Early Help	from Step Down Panel From MASH	RMBC Early Help Performance			Data in Development							
SOCIAL CARE	8.1	Number of Children on a CiN Plan		RMBC Performance and Quality Team	Quarterly	Info	Number	1683	1897	1812	1656		↓	
	8.2	Number of Children who are on a child protection plan (CPP)				Info	Number	325	305	331	375		↑	
	8.3	Number of Children who are Looked after (LAC)				Info	Number	429	454	484	487		↑	

TRIAGE

DEFINITION	Timeliness of Triage	Owner	Susan Claydon
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Performance Analysis A high standard with regards to timeliness of screening contacts is maintained consistently within the Early Help Service and March 2017 data highlights a 98.6% success rate. This illustrates that the service maintains effective timeliness standards to enable swift engagement with families in localities, as problems begin to emerge and safeguards against drift and delay. This highlights positive practice particularly in light of the increasing number of cases being submitted to the service over recent months.

Mar-17	1.1		
	ROTHERHAM		
	ROTHERHAM TOTAL	Contacts Triaged in 5 working days	
		%	Number
Number of Contacts Triaged	345	98.6%	340



Past Performance 2016/17	April	May	June	July	August	September	October	November (New recording started)	December	January	February
Number of Contacts Triaged within 5 days	385	329	346	365	212	206	324	145	226	312	338
Percentage	90.1%	86.9%	68.5%	94.0%	100.0%	99.5%	99.4%	92.4%	93.0%	94.5%	98.3%

Note 2:
For March Triage Timeliness data has been taken from the Liquid Logic EHM system. We are now reporting in the same manner as previous scorecards. Please note the timeliness measure is based on the time between the contact date and the Triage decision date for all contacts other than Step Down from LCS.

INITIAL CONTACTS

DEFINITION	Timeliness of initial contacts	Owner	Susan Claydon
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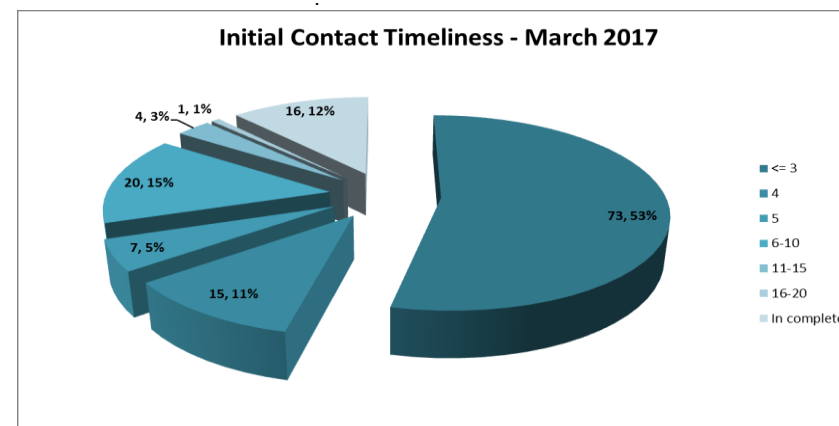
Performance Analysis	<p>In March there was a sharp increase in cases that required an Early Help Assessment; 136 cases received an EHA Recommendation in March compared with 66 in February and 90 in January. Of the Early Help cases that required contact in March 2017, 88.3% were successfully engaged within the month, which is an increase of 5% on last month. Of these, 53.7% were engaged within 3 working days and a further 34.6 % were engaged after the 3 working day timeframe. This highlights positive progress in this area as previously there have been some barriers to timely engagement. In order to address these barriers, Heads of Service agreed a weekly operational performance meeting, supported by performance and data colleagues and this forum is clearly having a marked impact on performance. Operational managers have been able to look at live data and communicate back with staff on any recording issues and drift. As a result we are seeing better operational grip on performance which is a positive achievement. The remainder of cases that did not meet timeliness are still subject to workers contacting the families and they will persist to enable engagement. There are several reasons why engagement can take longer than anticipated and this includes the fact that the family may need extra time to build trust in the worker before accepting support. The service is committed to applying a persistent approach and exhausting a range of strategies to facilitate engagement. Early Help has several examples of families that have taken long periods of time to engage and this illustrates a tenacious approach to engagement. Whilst keeping cases open and persisting can adversely affect performance data, the leadership team is clear that it is the right approach to improving outcomes for children and families in a long term, sustainable way. We are committed to further improvement of this measure in the coming months and hope to see a steady increase.</p>
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Mar-17	2.1 and 2.2							
	ROTHERHAM		NORTH		SOUTH		CENTRAL	
	Number	%	Number	%	Number	%	Number	%
Number of cases reaching scope in month	136		30		63		43	
ICs completed in time (meeting 3 days)	73	53.7%	20	66.7%	40	63.5%	13	30.2%
ICs completed in month outside 3 days timeliness	47	34.6%	7	23.3%	16	25.4%	24	55.8%
ICs in scope but not completed	16	11.8%	3	10.0%	7	11.1%	6	14.0%
Cases open at month end where no IC recorded	35		6		20		9	

Note 3:
 For March Initial Contact timeliness has been calculated using information from EHM. The measure is taken on any contacts with a recommendation of Early Help Assessment and is based on:
 • EHM – number of days between Triage decision date and Initial Contact recorded

 *NB: 'In scope' is defined as initial contact being made in 3 working days

Past Performance of Initial Contacts made within 3 working days 2016/17	Rotherham	North	South	Central
Apr-16	18.4%	16.4%	16.7%	21.2%
May-16	31.1%	45.2%	25.3%	28.8%
Jun-16	39.0%	45.0%	45.8%	27.7%
Jul-16	50.0%	56.3%	51.3%	43.6%
Aug-16	53.9%	30.8%	53.6%	62.9%
Sep-16	65.8%	64.3%	69.2%	61.5%
Oct-16	68.0%	79.2%	78.9%	48.6%
November-16 (New recording started)	25.3%	35.7%	22.6%	18.8%
Dec-16	23.7%	36.8%	7.0%	29.7%
Jan-17	31.1%	36.4%	37.0%	32.3%
Feb-17	39.4%	52.9%	35.5%	33.3%



EARLY HELP ASSESSMENT

DEFINITION	Early Help Assessments	Owner	Susan Claydon
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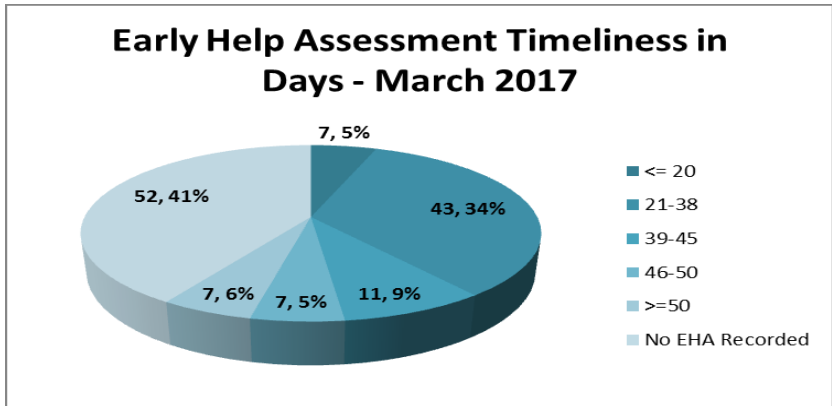
Performance Analysis

Of the 127 Early Help Assessments required in March 2017, 39.4% were completed within the target timeframe of 35 days which highlights a 4.6% increase in performance on last month. A further 19.7% of the EHAs required in March were completed, though outside of the 35 day time frame, which results in a 59.1% rate of completion which is an increase of 4.3% on last month. The reasons for delay in assessments recorded can be as a result of various issues such as; engagement being delayed because the worker was unable to secure consent for support and links to the initial contact data on the previous tab. Delayed contact has a knock on effect on assessment timeliness and as the support is offered on a non-statutory basis it is important to allow families to exercise their right to refuse support. In cases where this refusal creates safeguarding concerns there is subsequent dialog with Children's Social Care and consideration given to 'stepping the case up' as a result of non-engagement. This is being robustly managed at a local level and the introduction of weekly performance meetings with frontline managers is impacting positively in this area. Work is also being undertaken to increase the uptake of partner generation of Early Help Assessments so that the responsibility is shared across the wider children's workforce. this is a key priority for the directorate over the coming weeks and meetings with key stakeholders have been scheduled to discuss performance and actions required in this area. In March there was a sharp increase in cases that required an Early Help Assessment; 136 cases received an EHA Recommendation in March compared with 66 in February and 90 in January. NB given the increase of Early Help Assessment Recommendations made this month compared to previous months it is anticipated that April may see some issues with capacity to reach targets. Managers are aware of the rise in demand and this will be a key feature of the next performance meeting however it is noteworthy that we anticipate some issues when reviewing data at the end of next month.

Mar-17	3.1 and 3.2							
	ROTHERHAM		NORTH		SOUTH		CENTRAL	
	Number	%	Number	%	Number	%	Number	%
Number of cases falling into scope in month	127		26		57		44	
Early Help Assessments completed in time	50	39.4%	15	57.7%	18	31.6%	17	38.6%
Early Help Assessments completed in month outside timeliness	25	19.7%	7	26.9%	9	15.8%	9	20.5%
Early Help Assessments in scope but not completed	52	40.9%	4	15.4%	30	52.6%	18	40.9%
Cases open at month end where no Early Help Assessment recorded	143		13		84		46	

Note 4:
For March Early Help Assessment timeliness has been calculated using information from EHM. The measure is taken on any contacts with an outcome of Early Help Assessment or Step Down and is based on:
EHM records - number of days between Triage Decision date and EHA completion date (practitioner).
NB Timeliness is defined as Early Help Assessment being made in 38 days from Triage Decision date

Past Performance of Early Help Assessments completed in 35 working days 2016/17	Rotherham	North	South	Central
Apr-16	67.9%	46.4%	74.1%	75.9%
May-16	77.1%	72.2%	84.2%	75.8%
Jun-16	78.4%	61.5%	86.4%	81.3%
Jul-16	56.0%	59.1%	57.7%	53.8%
Aug-16	61.0%	71.9%	63.6%	48.6%
Sep-16	32.1%	37.5%	26.1%	35.3%
Oct-16	22.0%	28.6%	7.7%	26.1%
November-16 (New recording started)	26.0%	35.3%	10.7%	34.4%
Dec-16	30.2%	51.6%	14.9%	31.6%
Jan-17	18.2%	20.0%	8.0%	32.3%
Feb-17	34.8%	52.8%	24.3%	28.6%



EARLY HELP ASSESSMENT - COMPLETED BY PARTNERS

DEFINITION	Early Help Assessments - Completed by Partners	Owner	Susan Claydon
Performance Analysis	<p>The undertaking of Early Help Assessments by partners remains consistently low in Rotherham and this was reinforced by a recent Ofsted monitoring visit as a key area for development. There was agreement by Health and School colleagues at a recent Improvement Board that support in this area will be forthcoming and that there is commitment to increase engagement in the Early Help Assessment. This is also being challenged in localities, through the 0-19 mobilisation meetings and via the Early Help Steering Group, which reports to the Children and Families Strategic Partnership. It is vital to secure increased multi agency buy in to the Early Help Assessment process in order to ensure shared visibility of concerns across agencies and to reduce negative trajectories for children and families. This will be a major focus in the coming months.</p>		

Mar-17	3.3												Total to Date
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
Nursery Provision	0	1	0	0	0	0	0	0	0	0	0	0	1
Primary School	0	1	1	2	0	1	2	1	1	2	1	2	14
Secondary School	0	1	0	8	0	0	1	0	2	0	1	0	13
PRU	0	0	0	1	0	0	0	0	0	0	0	0	1
Rotherham Drug and Alcohol/RDaSH	0	0	0	0	1	0	0	0	0	0	0	0	1
Health	0	0	0	0	0	1	0	0	0	0	0	0	1
Work Based Learning Provider	0	1	0	0	0	0	0	0	0	0	0	0	1
YWCA	3	1	2	1	7	5	2	4	3	5	3	5	41
GROW	0	0	0	0	0	0	0	0	0	0	1	0	1
Other LA	0	0	1	0	0	0	0	0	0	0	0	0	1
Total Partner Early Help Assessments	3	5	4	12	8	7	5	5	6	7	6	7	75
Total Early Help Assessments completed	128	85	74	112	106	75	58	94	88	86	111	133	1150
Partner completion % against all completed EHA's	2.3%	5.9%	5.4%	10.7%	7.5%	9.3%	8.6%	5.3%	6.8%	8.1%	5.4%	5.3%	6.5%

OPEN CASES

DEFINITION	Open and Closed Early Help Cases - A case is defined as any case that came through EH Triage and were allocated to localities	Owner	Susan Claydon
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Performance Analysis	<p>There are 1424 open cases across the Rotherham Early Help Locality Teams and 222 case were successfully closed in the reporting month. Cases are counted by 'family' and so this represents a significantly higher number of children receiving support. This is an important element of the early help new ways of working and reflects one worker, one family, one plan. Whilst we are working on enabling a count of the total number of children in the system for analytical purposes, it is important for whole family working to be reflected in the overarching data so that we can understand family units and reduce duplication across in the way that we work with partners. The volume of throughput of cases is being monitored and is informing discussions related to partner uptake of Early Help Assessments.</p>
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Mar-17 Open Cases	4.1												Total (As at current month end)
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
North					333	323	261	269	263	281	326	349	349
South					470	468	425	454	444	482	511	522	522
Central					620	550	502	469	468	522	562	553	553
Total number of Open cases					1423	1341	1188	1192	1175	1285	1399	1424	1424

Mar - 17 Closed Cases	4.2												Total to Date
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
North					58	39	84	89	58	53	47	44	472
South					39	44	98	77	64	63	92	74	551
Central					53	81	104	117	71	53	73	104	656
Number of Cases Closed during the reporting month					150	164	286	283	193	169	212	222	1679

STEP DOWN PANEL

DEFINITION	The outcome of the step down panel	Owner	Karla Capstick
Monthly Performance Analysis	<p>In March 2017 the step down process has shifted focus to localities, this was agreed at a task and finish group meeting that met to progress a shift from the central panel approach. Team Managers from Childrens Social Care and Early Help Locality Managers are now agreeing a planned step down through dialogue in localities that enhances integrated working and shared operational practice. This approach has also been trialled with duty team 1 whilst other duty teams and Evolve continue to use the central panel for Step Down. In addition, Step Up has seen a change in practice over the last month with the First Response to accept cases from Early help that need to step up without a full MARF, reducing time and duplication for children and families already known to Children's Services.</p>		
	<p>Findings from this pilot activity will be fed back to the group on the 26th April, reported to CYP DLT and it is anticipated that by the summer the step up and step down process will operate seamlessly within localities and between Early Help, Social Care Locality Teams, First Response and Duty Teams removing the need for a central panel other than by exception.</p>		
	<p>Work has also commenced to ensure the ICT system is able to support this practice change and this is being led by the Liquid Logic Project Team. All Managers have been issued with guidance to support the pilot activity. March 2017 data is comparative to the previous month with a slightly lower volume of step down for 'families' received, but similar numbers accepted and rejected. The task and finish group reconvenes on the 26th April 2017 and will address any issues with volume, allocation to partners, reporting and continue the work to integrate the process.</p>		

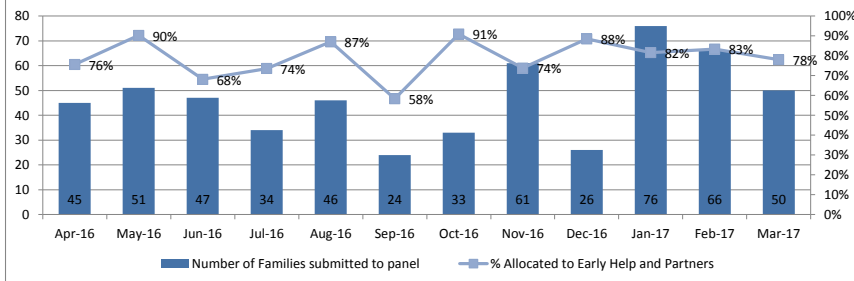
Outcomes - Number of Families - Monthly Data

	5.1				
	Number of Families submitted to panel	% Allocated to Early Help and Partners	Number Allocated to Early Help	Recommendation to Partners	Step Down Rejected
Apr-16	45	76%	27	7	11
May-16	51	90%	44	2	5
Jun-16	47	68%	29	3	15
Jul-16	34	74%	21	4	9
Aug-16	46	87%	37	3	6
Sep-16	24	58%	14	0	10
Oct-16	33	91%	27	3	3
Nov-16	61	74%	41	4	16
Dec-16	26	88%	19	4	3
Jan-17	76	82%	53	9	14
Feb-17	66	83%	46	9	11
Mar-17	50	78%	33	6	11
Total to Date	559	80%	391	54	114
			69.9%	9.7%	20.4%

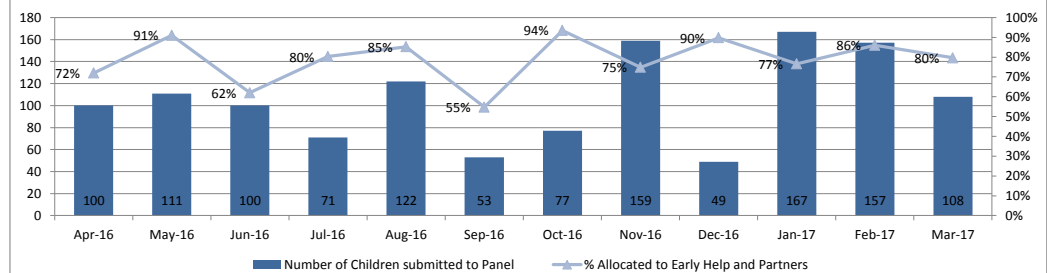
Outcomes - Number of Children - Monthly Data

	Number of Children submitted to Panel	% Allocated to Early Help and Partners	Number Allocated to Early Help	Recommendation to Partners	Step Down Rejected
Apr-16	100	72%	60	12	28
May-16	111	91%	98	3	10
Jun-16	100	62%	55	7	38
Jul-16	71	80%	51	6	14
Aug-16	122	85%	99	5	18
Sep-16	53	55%	29	0	24
Oct-16	77	94%	64	8	5
Nov-16	159	75%	110	9	40
Dec-16	49	90%	37	7	5
Jan-17	167	77%	115	13	39
Feb-17	157	86%	118	17	22
Mar-17	108	80%	73	13	22
Total to Date	1274	79%	909	100	265
			71.4%	7.8%	20.8%

Number of Families Submitted to Panel and the % of those allocated to EH and Partners



Number of Children Submitted to Panel and the % of those allocated to EH and Partners



CHILDREN'S CENTRES

DEFINITION	Children's Centres (only available Quarterly)	Owner	Karla Capstick
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Quarter 4 data is now available and included below; further data cleansing and analysis is planned to further validate numbers and to enable identification of issues and strengths at a centre level.

In Quarter 4 registration rates were 1% below the target of 95% with North and South localities now above target; with Central remaining slightly below. All Centres have been focussing on targeted work and this is evidenced in the 30% LSOA registration rates, which have met the 95% target overall with South and North areas performing above target, and Central area improving from 92% last quarter to 93% this quarter, demonstrating that those families living in the areas with the highest needs have been a priority and a key focus which is positive. The funding allocated for 2017/2018 has been distributed using a revised formula to focus on need which will benefit those areas with higher numbers of children residing in 30% LSOA's.

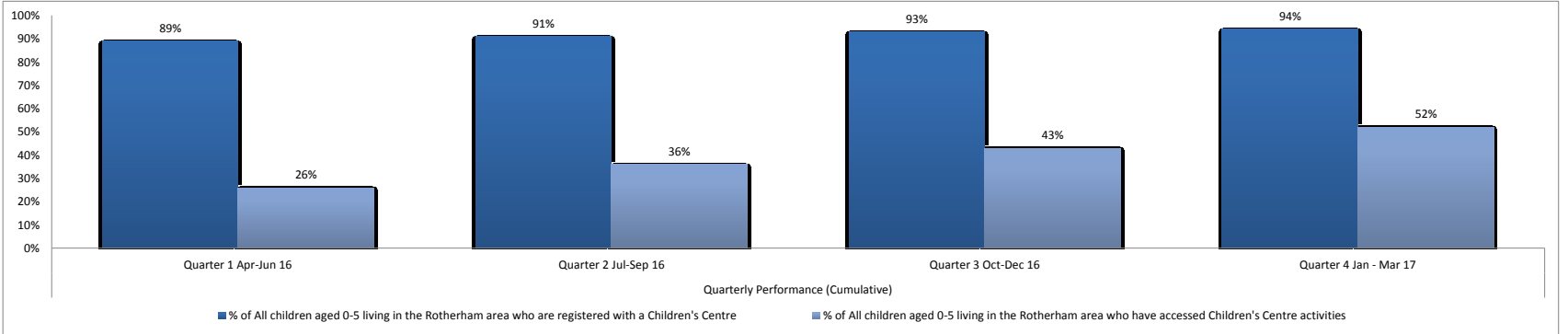
The engagement figures are cumulative with an end of year target of 66%. Continued positive progress has been made across the borough, with significant increases when compared with Quarter 3; however the target has not been achieved overall with the 30% LSOA areas falling short by 3% (this equates to approx. 274 children). All Centres will continue to focus on the 30% LSOA's and following additional data analysis any performance issues will be addressed through the scheduled Annual Challenge Conversations and performance meetings.

Staffing resources will be addressed as part of the wider wholesale review of Early Help; however as required, interim arrangements are being explored and utilised at a centre level through management discussions. Some staff are now working across centres and additional hours to mitigate effects of the vacancy freeze.

Data from health remains an issue; the DCS and DPH are aware and this is now being addressed through a planned event on the 19th April with colleagues from Childrens Services, Public Health and TRFT and the Practice Improvement Partner (Lincolnshire CC) to re visit the 0 -19 contract arrangements and to revise appropriately to include data sharing.

Scorecard Measure	6.1				6.2			
	% of All children aged 0-5 living in the Rotherham area who are registered with a Children's Centre				% of All children aged 0-5 living in the Rotherham area who have accessed Children's Centre activities			
	Rotherham Overall	North	South	Central	Rotherham Overall	North	South	Central
Quarter 1 Apr-Jun 16	89%	100%	85%	87%	26%	35%	19%	29%
Quarter 2 Jul-Sep 16	91%	100%	100%	87%	36%	44%	29%	38%
Quarter 3 Oct-Dec 16	93%	98%	95%	87%	43%	50%	36%	47%
Quarter 4 Jan - Mar 17	94%	98%	97%	88%	52%	57%	44%	58%

Quarterly Performance (Cumulative)	% of children aged 0-5 living in the 30% most deprived SOA's in Rotherham who are registered with a Children's Centre				% of children aged 0-5 living in the 30% most deprived SOA's in Rotherham who have engaged with Children's Centre activities			
	Rotherham Overall	North	South	Central	Rotherham Overall	North	South	Central
	Quarter 1 Apr-Jun 16	93%	100%	100%	89%	32%	36%	25%
Quarter 2 Jul-Sep 16	95%	100%	98%	89%	44%	48%	37%	44%
Quarter 3 Oct-Dec 16	98%	100%	100%	92%	52%	55%	46%	53%
Quarter 4 Jan - Mar 17	99%	100%	100%	93%	62%	64%	55%	64%



EDUCATION WELFARE

DEFINITION	Persistent Absence	Owner	David McWilliams
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Performance Analysis

The LA Primary School Persistent Absence (PA) for Half Term 1-3 is 10.3%
 90 (out of 95) Primary Schools submitted their PA Data, of those:
 37 Primary Schools had less PA than the current National Average (8.4%)

The average percentage PA in the North Locality area is 11.3%. Of the 27 primary schools in the North area, 7 schools had less PA than the National Average.
 The average percentage PA in the Central Locality area is 12.6%. Of the 23 primary schools in the Central area, 7 schools had less PA than the National Average.
 The average percentage PA in the South Locality area is 8.1%. Of the 45 primary schools in the South area, 23 schools had less PA than the National Average.

The 37 schools who have less PA than the National Average are:
 North Locality Area – Brampton Ellis Primary, High Greave Infant, Wath our Lady & St. Joseph, Rawmarsh Ashwood, Rosehill Junior, Thrybergh St. Gerards and Wath CE Primary.
 Central Locality Area – Blackburn Primary, Coleridge Primary, Sitwell Infant, Sitwell Junior, St. Bede's RC, St. Mary's RC Herringthorpe and Thorpe Hesley Primary.
 South Locality Area – Anston Greenlands Primary, Anston Hillcrest J&I, Anston Park Junior, Aston CE, Aston Fence, Aston Hall, Springwood Junior Academy, Bramley Sunnyside Infant, Bramley Sunnyside Junior, Brinsworth Manor Infant, Brinsworth Manor Junior, Brinsworth Whitehill, Listerdale Primary, Flanderwell Primary, Harthill Primary, Kiveton Park Infant, Ravenfield Primary, Wickersley St. Albans, Todwick Primary, Wales Primary, Whiston J&I, Whiston Worrygoose J&I and Wickersley Northfield Primary.

Unfortunately, the following schools were not able to share their Half Term 1-3 PA data with the Local Authority:
 Aughton Academy, Bramley Grange Primary, Dinnington Community Primary, Laughton J&I and Thurcroft Academy.

The LA Secondary School Persistent Absence (PA) for Half Term 1-3 is 14.8%
 13 (out of 16) Secondary Schools submitted their PA Data, of those:
 4 Secondary Schools had less PA than the National Average (13.8%)

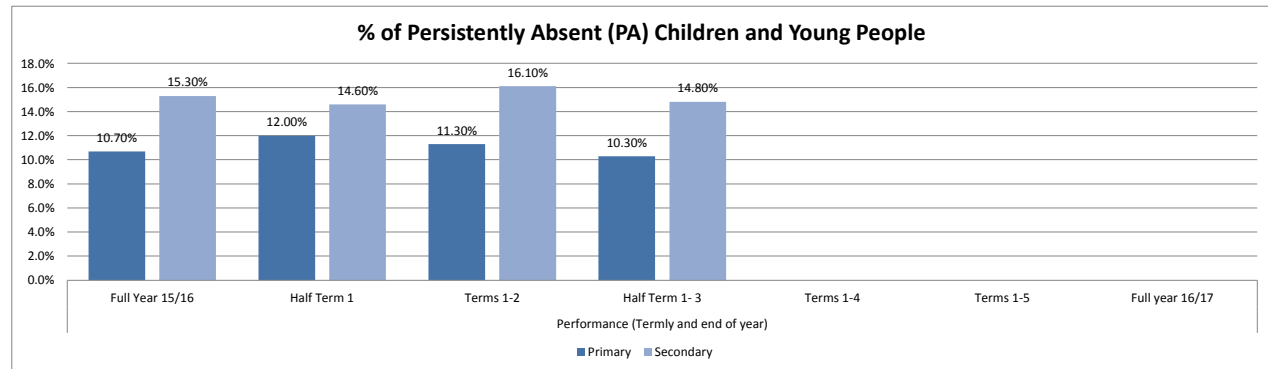
The average percentage PA in the North Locality area is 16.0%. Of the 5 secondary schools in the North area, 1 school had less PA than the National Average.
 The average percentage PA in the Central Locality area is 18.3%. Of the 5 secondary schools in the Central area, 0 schools had less PA than the National Average.
 The average percentage PA in the South Locality area is 11.8%. Of the 6 secondary schools in the South area, 3 schools had less PA than the National Average.

The 4 schools who have less PA than the National Average are:
 North Locality Area – Rawmarsh Community School
 South Locality Area – Brinsworth Academy, Wales High and Wickersley School and Sports College

Unfortunately, the following schools were not able to share their Half Term 1-3 PA data with the Local Authority:
 Aston Academy, St. Bernard's and St. Pius

Scorecard Measure	7.1	
	% of Persistently Absent (PA) Children and Young People	
	Primary	Secondary
Full Year 15/16	10.70%	15.30%
Half Term 1	12.00%	14.60%
Terms 1-2	11.30%	16.10%
Half Term 1-3	10.30%	14.80%
Terms 1-4		
Terms 1-5		
Full year 16/17		

Performance (Termly and end of year)



EDUCATION WELFARE

DEFINITION	Attendance (reported one month in arrears)	Owner	David McWilliams
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Performance Analysis

Primary Whole School Attendance for February 2017 is 95.5%
 93 (out of 95) primary schools submitted their attendance data for February to the Local Authority, of those:
 38 primary schools were in line or exceeded the latest published national average percentage attendance (96%)
 50 primary schools were in line or exceeded the latest published local average percentage attendance (95.6%)

The average percentage attendance for February in the North Area is 95.0%. Of the 27 primary schools in the North area, 8 schools were in line or exceeded the national average.
 The average percentage attendance for February in the South Area is 96.1%. Of the 45 primary schools in the South area, 24 schools were in line or exceeded the national average.
 The average percentage attendance for February in the Central Area is 95.1%. Of the 23 primary schools in the Central area, 6 schools were in line or exceeded the national average.

Unfortunately, due to either staffing or capacity issues the following schools were not able to share their February data with the LA:
 Bramley Grange Primary and Dinnington Community Primary

The Average Primary Whole School Attendance to date for the period September 2016 – February 2017 is 95.7%.
 39 schools (listed by locality area below) are currently on target to achieve or exceed the latest published national average percentage attendance (96%)
 55 schools are currently on target to achieve or exceed the latest published local average percentage attendance (95.6%)

North Area Locality: Brampton Ellis Primary, Our Lady & St. Joseph's Wath, Rawmarsh Ashwood, Rawmarsh Rosehill, Sandhill Academy, Swinton Fitzwilliam Primary, Trinity Croft CE and Wath CE
Central Area Locality: Blackburn Primary, Redscope Primary, Sitwell Infant, Sitwell Junior and St. Mary's Herringthorpe.
South Area Locality: Anston Greenlands, Anston Hillcrest, Anston Park Infant, Anston Park Junior, Aston CE, Aston Fence, Aston Hall, Springwood Academy, Bramley Sunnyside Infant, Bramley Sunnyside Junior, Brinsworth Howarth, Brinsworth Whitehill, Brinsworth Manor Junior, Listerdale Primary, Flanderwell Primary, Harthill Primary, Kiveton Park Infant, Kiveton Park Meadows Junior, Loughton J&I, Ravenfield Academy, Swallownest Primary, Thurcroft Junior Academy, Todwick Primary, Wales Primary, Whiston J&I and Wickersley Northfield Primary

Secondary Whole School Attendance for February 2017 is 93.8%
 15 (out of 16) secondary schools submitted their attendance data to the Local Authority, of those:
 3 secondary school was in line or exceeded the published national average percentage attendance (94.8%)
 4 secondary schools were in line or exceeded the published local average percentage attendance (94.2%)

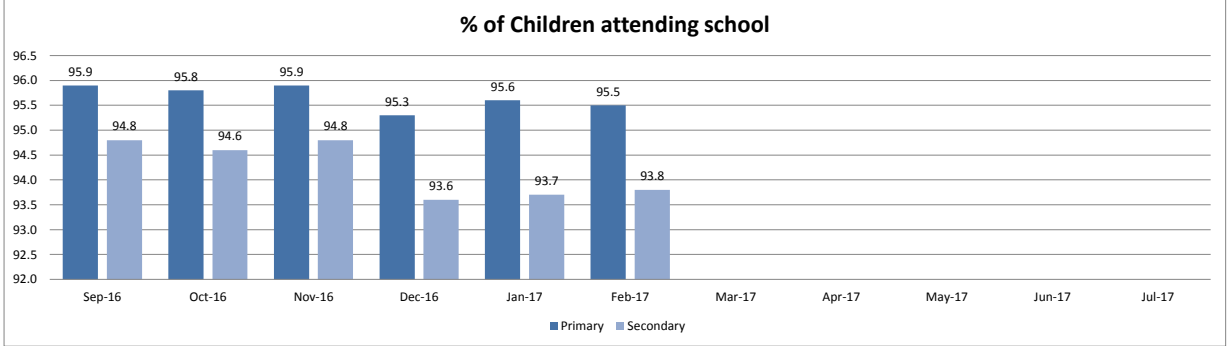
The average percentage attendance for February in the North area is 93.0%. Of the 5 secondary schools in the North area, 0 schools were in line or exceeded the national average.
 The average percentage attendance for February in the South area is 94.9%. Of the 6 secondary schools in the South area, 3 school was in line or exceeded the national average.
 The average percentage attendance for February in the Central area is 93.0%. Of the 5 secondary schools in the Central area, 0 schools were in line or exceeded the national average.

Unfortunately, Dinnington High School was not able to share their February data with the LA.

The Average Secondary Whole School Attendance to date for the period September 2016 – February 2017 is 94.2%.
 5 schools (listed by locality area below) are currently on target to achieve or exceed the latest published national average percentage attendance (94.8%)
 8 schools are currently on target to achieve or exceed the latest published local average percentage attendance (94.2%)

North Area Locality: Rawmarsh Community School
 South Area Locality: Aston Academy, Brinsworth Academy, Wales High and Wickersley School and Sports College

Scorecard Measure	7.2	
	% of Children attending school	
	Primary	Secondary
Sep-16	95.9	94.8
Oct-16	95.8	94.6
Nov-16	95.9	94.8
Dec-16	95.3	93.6
Jan-17	95.6	93.7
Feb-17	95.5	93.8
Mar-17		
Apr-17		
May-17		
Jun-17		
Jul-17		
Aug-17		



Monthly Performance

FAMILIES FOR CHANGE

DEFINITION	Families For Change	Owner	Jenny Lingrell
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Performance Analysis

In 2016/17 Rotherham committed to identifying and engaging 882 families in the Troubled Families Programme (known locally as Families for Change). The target engagement figure for this financial year was achieved in March when 97 new families were attached to the programme. The increased rate of identification was maintained in March because the flow of information from Liquid Logic continued to provide sufficient new families. The improved identification process is embedded.

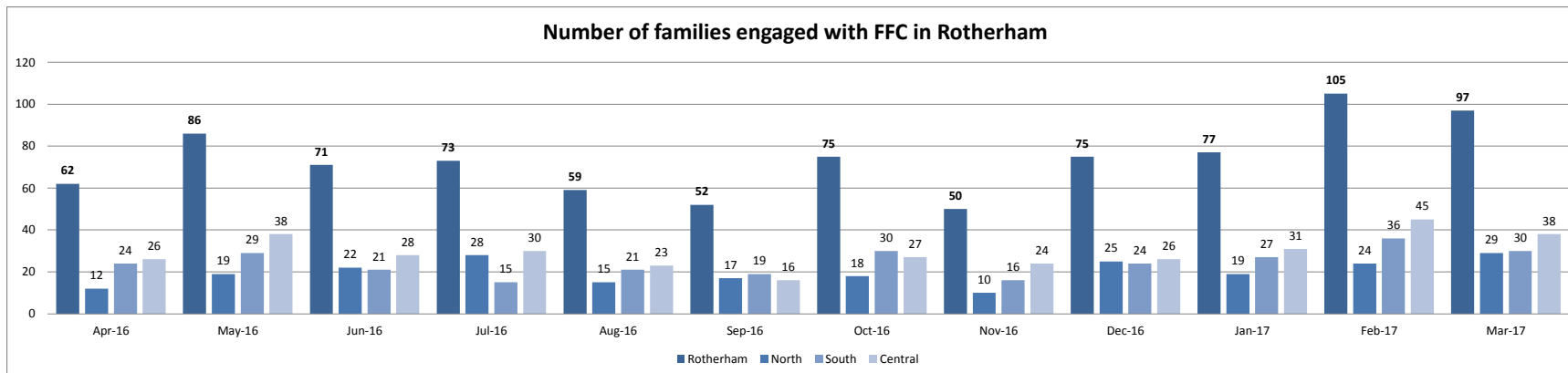
The 2016/17 target number of families for whom Rotherham claims a payment by results outcome was set in the range of 280-350. The total figure for this financial year was 80 or 29% of the total. It is unclear whether funding for unclaimed outcomes will be available to draw down in future years. On 4th April a series of reports were published, including national and local datasets. This shows the number of claims by all local authorities. Rotherham is one of the lowest performers. Our figure of 3.4% against the 5 year target lags behind Doncaster (5.4%) that also entered the expanded programme in Wave 3. A deep dive on payment by results performance will now be undertaken.

Scorecard Measure	8.1				8.1			
	Number of families engaged in Rotherham against a monthly target of 74	Number of families engaged in <u>North</u>	Number of families engaged in <u>South</u>	Number of families engaged in <u>Central</u>	Number of families engaged as percentage of annual target of 882 in Rotherham (Year 2)	Number of families engaged as percentage of annual target in <u>North</u>	Number of families engaged as percentage of annual target in <u>South</u>	Number of families engaged as percentage of annual target in <u>Central</u>
Apr-16	62	12	24	26	7%	1%	3%	3%
May-16	86	19	29	38	16%	3%	6%	7%
Jun-16	71	22	21	28	24%	6%	8%	10%
Jul-16	73	28	15	30	33%	9%	10%	14%
Aug-16	59	15	21	23	40%	11%	12%	16%
Sep-16	52	17	19	16	46%	13%	15%	18%
Oct-16	75	18	30	27	54%	15%	18%	21%
Nov-16	50	10	16	24	60%	16%	20%	24%
Dec-16	75	25	24	26	68%	19%	22%	27%
Jan-17	77	19	27	31	77%	21%	26%	30%
Feb-17	105	24	36	45	89%	24%	30%	35%
Mar-17	97	29	30	38	100%	27%	33%	40%
Year to Date	882	238	292	352				

Yearly Cumulative Performance	8.2	8.3
	Number of FFC PbR outcomes claimed (evidence of employment outcome)	Number of FFC PbR outcomes claimed (evidence of significant & sustained progress)
Year 1 to date	5	0
Year 2 to date	37	43
Year 3 to date		
Year 4 to date		
Year 5 to date		

Monthly Performance

Monthly Performance



NEETS AND NOT KNOWNS

DEFINITION	NEETS and NOT KNOWNS	Owner	Collette Bailey
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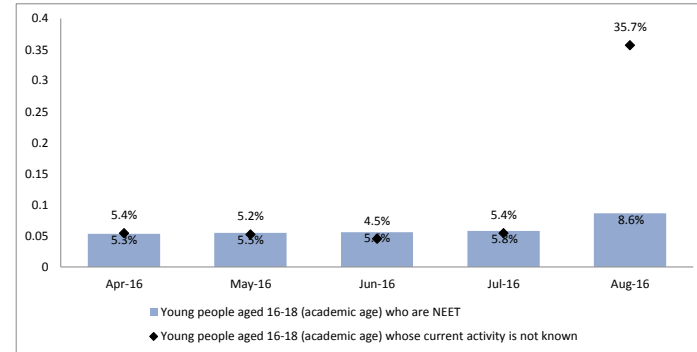
Performance Analysis

The position at the end of March shows a NEET figure of 3.5% (against a local target of 3.7%) and a Not Known figure of 2.8% (against a local target of 3.0%). Data sharing exercises and follow up will continue, as will work to re engage the NEET cohort, both centrally and across all localities to ensure we continue to meet our local targets.
 Latest comparison data available for February return show:
 In respect of Not Known Rotherham are stronger than both statistical neighbours and national, whilst being in line with region.
 In respect of NEET figures Rotherham are enjoying better results than both statistical neighbours and region, whilst being in line with the national return.

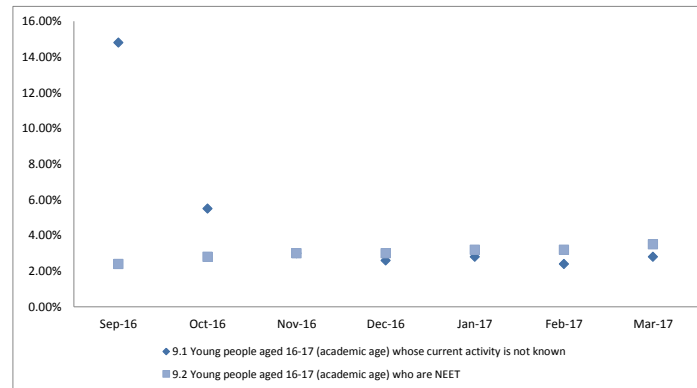
Old indicator

	9.1	9.2
	Young people aged 16-18 (academic age) whose current activity is not known	Young people aged 16-18 (academic age) who are NEET
Apr-16	5.4%	5.3%
May-16	5.2%	5.5%
Jun-16	4.5%	5.6%
Jul-16	5.4%	5.8%
Aug-16	35.7%	8.6%

	9.1	9.2
	Young people aged 16-17 (academic age) whose current activity is not known	Young people aged 16-17 (academic age) who are NEET
Sep-16	14.8%	2.4%
Oct-16	5.5%	2.8%
Nov-16	3.0%	3.0%
Dec-16	2.6%	3.0%
Jan-17	2.8%	3.2%
Feb-17	2.4%	3.2%
Mar-17	2.8%	3.5%



	North		South		Central	
	% of Young people aged 16-18 (academic age) whose current activity is not known	% of Young people aged 16-18 (academic age) who are NEET	% of Young people aged 16-18 (academic age) whose current activity is not known	% of Young people aged 16-18 (academic age) who are NEET	% of Young people aged 16-18 (academic age) whose current activity is not known	% of Young people aged 16-18 (academic age) who are NEET
Apr-16	5.7%	5.5%	3.4%	4.1%	7.9%	6.9%
May-16	5.6%	5.6%	3.3%	4.3%	7.6%	7.1%
Jun-16	5.7%	4.8%	4.5%	2.4%	7.1%	7.1%
Jul-16	5.8%	6.1%	2.7%	4.5%	8.2%	7.5%
Aug-16	37.5%	9.0%	31.8%	6.5%	39.7%	11.5%
	Young people aged 16-17 (academic age) whose current activity is not known	Young people aged 16-17 (academic age) who are NEET	Young people aged 16-17 (academic age) whose current activity is not known	Young people aged 16-17 (academic age) who are NEET	Young people aged 16-17 (academic age) whose current activity is not known	Young people aged 16-17 (academic age) who are NEET
Sep-16	14.0%	3.2%	13.7%	2.0%	17.0%	2.9%
Oct-16	5.6%	3.1%	3.6%	2.0%	7.4%	3.1%
Nov-16	1.9%	2.9%	1.7%	2.8%	5.4%	3.3%
Dec-16	2.0%	2.9%	1.7%	2.9%	4.2%	3.3%
Jan-17	2.4%	3.1%	1.7%	3.1%	4.4%	3.3%
Feb-17	2.0%	3.2%	1.4%	2.8%	4.2%	3.1%
Mar-17	2.3%	3.8%	2.0%	3.2%	4.2%	3.6%



YOUTH ACTIVITY AND LEARNING

DEFINITION	In Learning and Youth Activity	Owner	Collette Bailey
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Performance Analysis
 Rotherham performs well in terms of participation. Most recent data for comparators (February) evidences that Rotherham participation was better than both statistical neighbours (91.0%) and national (92.3%), and was in line with region (92.8%). Centre based Youth session activity increasingly has become more focussed on targeted group work. We are unable to give any comparison for Corporate LAC/Care Leaver data as this is not a published data set. However, most recent data (published Dec 16) at national level relating to resident Care Leavers in EET evidences that Rotherham's performance at 87.5% is above statistical neighbours (55.1%), regional (75.8%) and national (68.4%).

9.3	
% of Academic Age 16,17,18 Corporate Responsibility LAC/CL EET	
ROTHERHAM	
Apr-16	74.5%
May-16	76.2%
Jun-16	74.2%
Jul-16	76.7%
Aug-16	59.5%
Sep-16	71.6%
Oct-16	71.8%
Nov-16	70.9%
Dec-16	72.7%
Jan-17	70.1%
Feb-17	71.5%
Mar-17	68.5%

9.5 (old indicator)				
% of Young people aged 16-18 (academic age) who are in Learning				
	ROTHERHAM	NORTH	SOUTH	CENTRAL
Apr-16	86.3%	85.2%	90.2%	81.8%
May-16	86.3%	84.8%	90.5%	81.8%
Jun-16	86.6%	85.3%	90.6%	82.1%
Jul-16	85.6%	84.0%	90.2%	80.6%
Aug-16	55.3%	52.5%	61.3%	49.4%

9.5				
Young people aged 16 - 17 (academic age) meeting the duty to participate				
	ROTHERHAM	NORTH	SOUTH	CENTRAL
Sep-16	82.0%	82.3%	83.8%	79.4%
Oct-16	90.3%	89.5%	92.3%	87.8%
Nov-16	92.4%	93.1%	94.1%	89.7%
Dec-16	92.8%	93.2%	94.2%	90.8%
Jan-17	92.4%	92.6%	93.9%	90.2%
Feb-17	92.6%	92.8%	94.1%	90.8%
Mar-17	92.2%	92.1%	93.7%	90.4%

9.6								
Number of Youth Activity sessions undertaken during the month								
	ROTHERHAM		NORTH		SOUTH		CENTRAL	
	Centre Based	Non-Centre Based	Centre Based	Non-Centre Based	Centre Based	Non-Centre Based	Centre Based	Non-Centre Based
Apr-16	134	35	54	10	35	20	45	5
May-16	128	32	49	8	36	20	43	4
Jun-16	131	15	46	2	35	13	40	0
Jul-16	93	37	37	0	27	23	29	14
Aug-16	68	26	32	0	18	16	18	10
Sep-16	56	22	14	1	18	10	24	11
Oct-16	109	56	24	10	38	32	47	14
Nov-16	116	43	23	9	50	12	50	12
Dec-16	71	17	14	2	31	4	26	11
Jan-17	95	44	22	19	33	20	45	0
Feb-17	92	36	14	18	33	18	34	0
Mar-17	86	39	13	20	36	11	37	8

Number of Unique Attendees at Youth Activities								
	ROTHERHAM		NORTH		SOUTH		CENTRAL	
	Centre Based	Non-Centre Based	Centre Based	Non-Centre Based	Centre Based	Non-Centre Based	Centre Based	Non-Centre Based
Apr-16	496	205	69	75	277	111	150	19
May-16	416	225	55	82	234	141	128	2
Jun-16	375	96	80	16	181	80	114	0
Jul-16	337	169	77	0	170	146	91	23
Aug-16	135	75	23	0	78	70	34	5
Sep-16	166	136	55	0	49	114	62	22
Oct-16	543	106	181	73	209	198	153	75
Nov-16	618	289	166	106	298	59	298	59
Dec-16	459	65	145	34	205	24	109	7
Jan-17	366	144	105	91	217	85	125	12
Feb-17	315	211	42	110	201	109	135	0
Mar-17	409	206	73	114	206	70	130	22

YOUTH OFFENDING TEAM

DEFINITION	Youth Offending Team (YOT)	Owner	Collette Bailey
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Performance Analysis

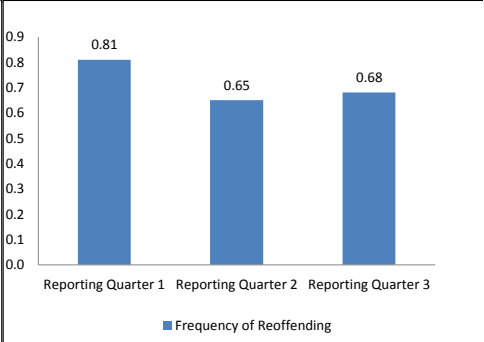
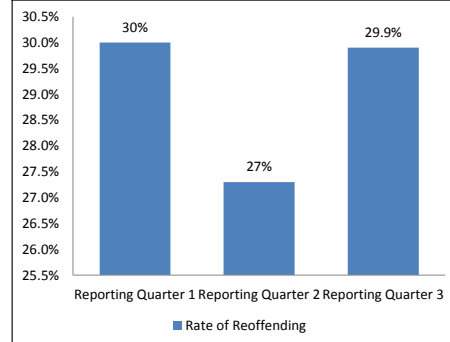
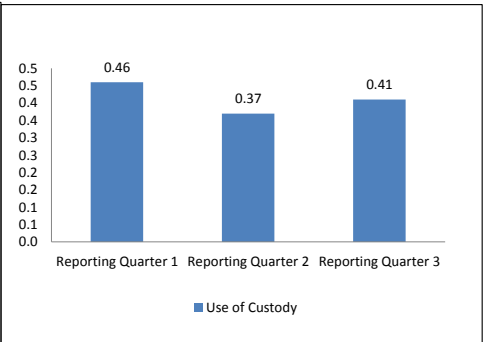
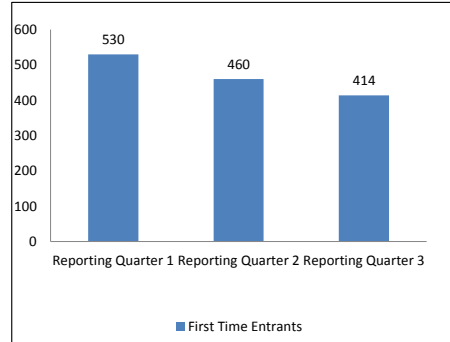
Latest available data;
 Numbers of young people first time entrants (FTE) into the criminal justice system :
 Figures based on latest released YJB data (Dec 2016) and covers period Oct 15 – Sep 16. Rotherham has shown a decrease of 11.2% from the same period last year, whilst national figures stand lower at 334 (decrease of 12.0% on same time last year). Comparison with the North East region gives a similar picture with the regional figure standing at 391 but with a decrease of 9.3%. The actual decrease in numbers for Rotherham relates to 14 young people. This continues the downward trend from the previous quarter but remains above National and Regional trends. The decrease is attributable to work undertaken with the police for the YOT to assess and intervene with young people prior to charge, should this trend continue it is likely to have a perverse impact on reoffending rates.

Use of Custody:
 Figures based on latest released YJB data (Dec 2016) and covers period Jan 16 to Dec 16. Yr on Yr data is shown as same period for previous year. Rotherham has shown a decrease of 0.12 % from the same period last year, now standing at 0.41. National figures stand lower at 0.37 (decrease of 0.08% on same time last year). North East figures stand at 0.38 with a decrease of 0.12 for the same period. Custody figures are generally stable, but subject to spikes in demand. The next two quarters are likely to see an increase as a number of Crown Court cases related to serious offences are resolved.

Rate of re-offending by young offenders:
 Figures based on latest released YJB data (Dec 2016) and covers period Apr 14 to Mar 15. Rotherham has shown a decrease in this measure of 4.1%, now standing at 29.9%. National figures have also shown a decrease of 0.2% and stands at 37.7%, whilst North East figures have shown a decrease of 0.5% standing at 39.6%. Reoffending is increasing generally in YOT cohorts across the country and this is attributed by the YJB and MoJ to a decrease in numbers in cohorts with those remaining being a smaller but more complex and challenging group more likely to reoffend having a greater history of offending behaviour. The data contained here is related to the MoJ "proven rate of offending" in which reoffending is tracked for 12 months with additional 3 months added to allow for conviction. The YOT therefore uses a live tracker to determine re-offending and this is based on current arrests, whilst not as accurate, it is nevertheless a useful proxy for looking at re-offending trends. Further decreases in the number of first time entrants are likely to lead to an increase in reoffending as those remaining in the system will be more entrenched in offending behaviour.

Frequency of re-offending by young offenders:
 Figures based on latest released YJB data (Dec 2016) and covers period Apr 14 to Mar 15. Rotherham now stands at 0.68, which is a decrease in this measure of 23.3%, and still stands lower than both North East (1.38) and National figures (1.23). North East has actually shown an increase of 9.2%, whilst national figures have shown an increase in their rate of 4.0%.

Scorecard Measure	10.1	10.2	10.3	10.4
	Numbers of young people first time entrants (FTE) into the criminal justice system	Use of Custody (Rate)	Binary Rate of re-offending by young offenders	Frequency of re-offending by young offenders
Reporting Quarter 1	530 (period Apr15 - Mar16)	0.46 (period Jul 15 - Jun 16)	30% (Oct 13 - Sep 14)	0.81 (Oct 13-Sep 14)
Reporting Quarter 2	460 (Jul15 - Jun 16)	0.37 (Oct 15 -Sep 16)	27% (Jan14 - Dec 14)	0.65 (Jan14 - Dec 14)
Reporting Quarter 3	414 (Oct 15 - Sep 16)	0.41 (Jan 16 - Dec 16)	29.9% (Apr 14 - Mar 15)	0.68 (Apr 14 - Mar 14)
Quarter 4				



CUSTOMER FEEDBACK

DEFINITION	Customer Feedback	Owner	David McWilliams
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Performance Analysis

Customer feedback is important for us as it helps us to improve our services and also to celebrate good practice.

Every case that closes or steps down to universal services should have an exit survey completed by at least one family member capturing their personal experience of receiving our services. It is the lead workers responsibility to ensure this happens, and encourage and support a child, young person or family in completing the questionnaire. During the reporting month Central had 20 exit surveys completed, North had four and South had one

There were no complaints or compliments centrally recorded in March.

Scorecard Measure	11.1						11.2	11.3	11.4	11.5
	Exit Surveys						Complaints			Compliments
	Completed exit surveys - North	Completed exit surveys - South	Completed exit surveys - Central	Completed exit surveys - Borough Wide	Exit surveys where no area was specified	Total Number of exit surveys received	Number of formal complaints received during the reporting month	Number of complaints upheld in the reporting month	Number of complaints closed during the month which were dealt with in timescales	Number of compliments received during the reporting month
Monthly Performance	Apr-16					0	0	0	0	2
	May-16					1	0	0	0	0
	Jun-16	2	4	26	0	2	1	1 (partial)	1	0
	Jul-16	4	3	14	0	1	0	0	0	0
	Aug-16	5	3	10	0	1	1	0	1	1
	Sep-16	5	7	8	0	2	1	0	1	1
	Oct-16	8	2	14	0	1	0	0	0	3
	Nov-16	17	5	9	0	0	0	0	0	0
	Dec-16	4	3	6	2	2	0	0	0	1
	Jan-17	1	1	7	0	1	1	1	1	0
	Feb-17	2	4	8	0	0	0	0	0	1
	Mar-17	4	1	20	2	0	0	0	0	0
	Year to Date	52	33	122	4	11	222	4	1	4

QUALITY ASSURANCE

DEFINITION	Team Manager Audits	Owner	David McWilliams
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Performance Analysis

Since the start of the financial year there have been 150 Locality manager audits completed that have been graded using the OFSTED judgements, in addition to this there were 9 Missing themed audits carried out in October (not shown below). 52% (79) of the audits carried out to date have been graded as Requires Improvement and 36% (55) graded as Good.

The key themes for areas for development from March audits are:-

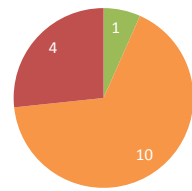
- More detailed cases notes needed
- Inclusion of Chronology and Genograms
- SMART targets in plans
- EH plans not to be so adult focussed
- Supervision notes to be more reflective

Team managers across the service were invited to attend a 'Team Manager Auditing and Applying Judgement' workshop during the month which was organised by the Quality Learning and Development Team in Childrens Social Care.

Scorecard Measure	12.1					
	Team Manager Audits					
	Outstanding	Good	Requires Improvement	Inadequate	Inadequate - Critical	Total
Apr-16	0	3	11	1	0	15
May-16	0	6	8	0	0	14
Jun-16	0	0	0	0	0	0
Jul-16	0	6	7	2	0	15
Aug-16	0	5	10	1	0	16
Sep-16	1	5	6	2	0	14
Oct-16	0	2	3	0	0	5
Nov-16	0	4	11	0	0	15
Dec-16	0	5	6	3	0	14
Jan-17	0	11	3	0	0	14
Feb-17	1	7	4	2	0	14
Mar-17	0	1	10	4	0	15
Total to date	2	55	79	15	0	151
% of total to date	1%	36%	52%	10%	0%	

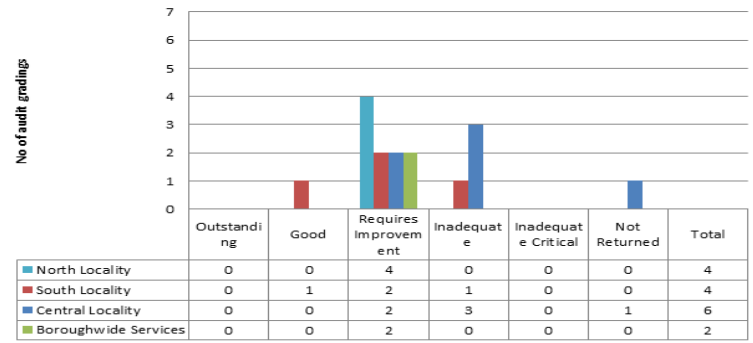
Scorecard Measure	Response Rates							
	North		South		Central		Borough Wide Services	
	Number	%	Number	%	Number	%	Number	%
Apr-16	4 out of 5	80%	2 out of 3	67%	6 out of 6	100%	3 out of 3	100%
May-16	3 out of 4	75%	4 out of 4	100%	4 out of 6	66%	3 out of 3	100%
Jun-16	-	-	-	-	-	-	-	-
Jul-16	4 out of 4	100%	2 out of 4	50%	6 out of 6	100%	3 out of 3	100%
Aug-16	4 out of 4	100%	3 out of 3	100%	6 out of 6	100%	3 out of 3	100%
Sep-16	4 out of 4	100%	3 out of 3	100%	6 out of 6	100%	1 out of 2	66%
Oct-16	2 out of 2	100%	0 out of 1	0%	2 out of 2	100%	1 out of 2	50%
Nov-16	3 out of 3	100%	4 out of 4	100%	6 out of 6	100%	2 out of 2	100%
Dec-16	4 out of 4	100%	2 out of 2	100%	6 out of 6	100%	2 out of 2	100%
Jan-17	4 out of 4	100%	2 out of 2	100%	6 out of 6	100%	2 out of 2	100%
Feb-17	4 out of 4	100%	3 out of 4	75%	6 out of 6	100%	1 out of 2	50%
Mar-17	4 out of 4	100%	4 out of 4	75%	5 out of 6	83%	2 out of 2	100%

Overall Grading's from EH Team Manager Audits for March 2017



■ Outstanding ■ Good ■ Requires Improvement ■ Inadequate ■ Inadequate - Critical

Team Manager's Monthly Grading by Locality - March 2017



EARLY HELP - HUMAN RESOURCES (HR)

DEFINITION	Establishment Information	Owner	David McWilliams
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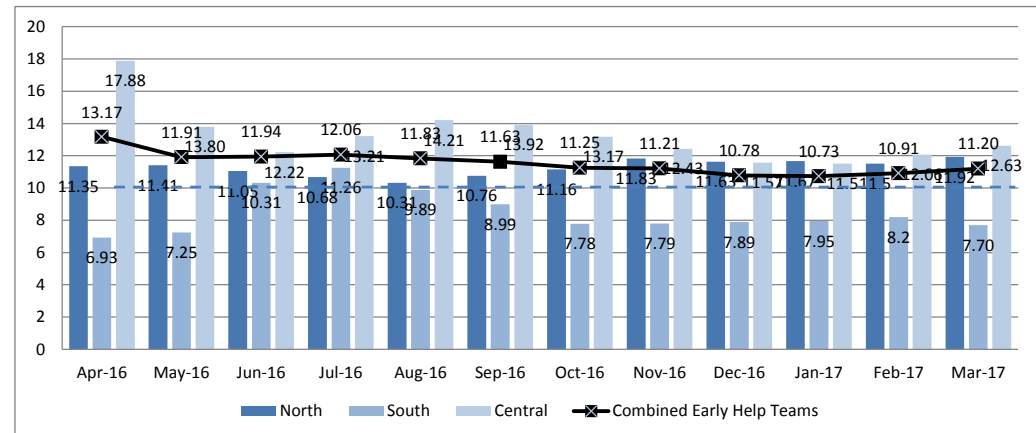
Performance Analysis

The target for RMBC is 10.2 annual FTE sick days and by the end of March (out-turn) overall performance against this measure was at 11.20 FTE days, therefore not meeting the annual corporate target.

Heads of Service and managers work closely with HR colleagues to provide support to staff whilst managing sickness across the service. There are currently some periods of long-term sickness and in addition seasonal illnesses may have also impacted on sickness levels during the period.

Please note, the sickness value is subject to change and is shown as a projected annual value based on year to date performance in line with the old best value definition.

Scorecard Measure	13.7			
	Sickness - Annual FTE sick days			
	North	South	Central	Combined Early Help Teams
Apr-16	11.35	6.93	17.88	13.17
May-16	11.41	7.25	13.80	11.91
Jun-16	11.05	10.31	12.22	11.94
Jul-16	10.68	11.26	13.21	12.06
Aug-16	10.31	9.89	14.21	11.83
Sep-16	10.76	8.99	13.92	11.63
Oct-16	11.16	7.78	13.17	11.25
Nov-16	11.83	7.79	12.43	11.21
Dec-16	11.67	7.89	11.57	10.78
Jan-17	11.5	7.95	11.5	10.73
Feb-17	11.5	8.2	12.06	10.91
Mar-17	11.92	7.70	12.63	11.20



Safeguarding Children & Families Monthly Performance Report

As at Month End: March 2017

*Please note: Data reports are not dynamic. Although care is taken to ensure data is as accurate as possible every month, delays in data input can result in changes in figures when reports are re-run retrospectively. To combat this at least two individual months data is rerun for each indicator. **In addition the data migration undertaken to facilitate the implementation of the new social care (LCS) and early help (EHM) systems at the end of October 2016 will have impacted on the data validity and recording processes. Therefore there may be data discrepancies present when comparing this report to that of the previous month.***

Document Details

Status: Issue 3

Date Created: 19th April 2017

Created by: Deborah Johnson, Performance Assurance Manager - Social Care

Performance Summary

As at Month End: March 2017

*"DOT" - Direction of travel represents the direction of 'performance' since the previous month with reference to the polarity of 'good' performance for that measure. Colours have been added to help distinguish better and worse performance. Key Below:-

- ↑ - increase in numbers (no good/bad performance)
- - stable with last month (no good/bad performance)
- ↓ - decrease in numbers (no good/bad performance)
- ↑ (green) - improvement in performance
- ↓ (orange) - decline in performance but still within limits of target
- ↓ (red) - decline in performance, not on target
- (green) - no movement but within limits of target
- (orange) - no movement, not on target

NO.	INDICATOR	GOOD PERF IS	DATA NOTE (Monthly)	2016 / 17					DOT (Month on Month)	RAG (in month)	Target and Tolerances			YR ON YR TREND			LATEST BENCHMARKING - 2014/15				
				Jan-17	Feb-17	Mar-17	Year End 2016/17	DATA NOTE			Red	Amber	Target Green	2013/14	2014/15	2015/16	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTILE THRESHOLD	
CONTACT & REFERRAL (MASH)	1.1	Number of contacts	Info	Count	1649	1373	1653	14959	Financial Year	↑			n/a		10517	12165					
	1.2	% Contacts with decision within 1 working day	High	Percentage	79.9%	93.3%	90.6%	86.0%	Financial Year	↓	Red	<92%	92%>	95%+			96.5%				
	1.3	Number of contacts going onto referral (including MASH referrals)	Info	Count	293	383	453	5066	Financial Year	↑				n/a		4513	4915				
	1.4	% of contacts going onto referral (including MASH referrals)	High	Percentage	18.7%	27.3%	26.6%	26.6%	Financial Year	↓		range to be set				42.9%	40.4%				
	1.5	Rate of referrals per 10,000 population aged under 18 - rolling 12 month performance	Info	Rate per 10,000	911.7	911.9	914.2	914.2	Rolling Year	↑				n/a	689.8	800.2	780.5	655.4	333.9	548.3	-
	1.6	% of referrals going onto assessment	High	Percentage	98.6%	94.8%	95.8%	not available	Financial Year	↑	Green	<83%	83%>	86%+	77.8%	69.6%	77.6%	85.9%	99.7%	87.1%	97.8%
	1.7	% Referral decision was made within 48 hours	High	Percentage	98.0%	99.0%	98.0%	not available	Financial Year	↓	Green	<92%	92%>	95%+	56.3%	71.2%	96.5%				
	1.8	% re-referral rate in the current month	Low	Percentage	22.5%	23.0%	25.2%			↓	Yellow	26%+	26%<	23%<							
	1.9	% re-referral rate in 12 months - Rolling year (Corporate Plan 2016 Indicator)	Low	Percentage	28.0%	27.7%	27.6%	27.6%	Rolling Year	↑	Yellow	30%+	28%<	26%<				23.6%	15.4%	24.0%	16.5%
	1.10	Number of CSE referrals in the current month (Corporate Plan 2016 Indicator)	Info	Count	18	26	29	231	Financial Year	↑				n/a			200				
ASSESSMENTS	2.1	Number of assessments started	Info	Count	520	645	698	6174	Financial Year	↑			n/a		3780	3996					
	2.2	% of assessments for children's social care completed in 45 working days of referral	High	Percentage	67.4%	85.9%	93.1%	85.4%	Financial Year	↑	Green	<83%	83%>	86%+		70.1%	92.8%	79.8%	98.3%	81.5%	91.2%
	2.3	Open assessments already past 45 working days	Low	Count	4	4	21			↓				n/a							
	2.4	Number of assessments completed in the current month	Info	Count	657	619	626	5660	Financial Year	↑				n/a		4064					
	2.5	% of completed assessments ending in - Ongoing Involvement	High	Percentage	41.7%	43.3%	37.9%	37.3%	Financial Year	↓	Red	<40%	40%>	45%+			43.6%				
	2.6	% of completed assessments ending in - No further action	Info	Percentage	42.5%	33.1%	41.9%	33.7%	Financial Year	↑				n/a		40.0%					
	2.7	% of completed assessments ending in - Step down to Early Help / Other Agency	Info	Percentage	15.2%	22.5%	20.3%	16.7%	Financial Year	↓				n/a		15.3%					
	2.8	% of completed assessments ending in - Out of area	Info	Percentage	0.0%	0.0%	0.0%	0.2%	Financial Year	→				n/a		1.0%					
	2.9	% of completed assessments ending in - Other/Not Recorded	Info	Percentage	0.6%	1.1%	0.0%	3.2%	Financial Year	↓				n/a		0.2%					
S47's	3.1	Number of S47 Investigations	Info	Count	142	148	158	1428	Financial Year	↑				n/a	752	909	1478				
	3.2	Number of S47 Investigations - rolling 12 month performance	Info	Count	1408	1426	1420			↓				n/a							
	3.3	Number of S47's per 10,000 population aged 0-17 - rolling 12 month performance	Info	Rate per 10,000	249.7	252.8	251.8	251.8	Financial Year	↓	Red	more than +/-15	+/-15	+/-5 of 158.8	141.3	156.1	262.1	149.2	75	138.2	-
	3.4	Number of S47 Investigations - Completed	Info	Count	168	152	157	1376	Financial Year	↑				n/a		1390					
	3.5	% of S47's with an outcome - Concerns are substantiated and child is judged to be at continuing risk of significant harm	High	Percentage	47.6%	61.2%	51.0%	55.8%	Financial Year	↓	Green			n/a		56.3%	58.3%				
	3.6	% of S47's with an outcome - Concerns are substantiated, but the child is not judged to be at continuing risk of significant harm	Info	Percentage	36.3%	21.7%	35.0%	27.0%	Financial Year	↑				n/a		19.8%	30.2%				
	3.7	% of S47's with an outcome - Concerns not substantiated	Low	Percentage	16.1%	13.8%	11.5%	11.0%	Financial Year	↑	Green			n/a		11.2%					
	3.8	% of S47's with an outcome - Not Recorded	Low	Percentage	0.0%	3.3%	2.5%	2.0%	Financial Year	↑	Green			n/a		9.5%	0.3%				

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NO.	INDICATOR	GOOD PERF IS	DATA NOTE (Monthly)	2016 / 17					DOT (Month on Month)	RAG (in month)	Target and Tolerances			YR ON YR TREND			LATEST BENCHMARKING - 2014/15				
				Jan-17	Feb-17	Mar-17	Year End 2016/17	DATA NOTE			Red	Amber	Target Green	2013/14	2014/15	2015/16	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTILE THRESHOLD	
CIN	4.1	Number of open CIN cases	Info	Count	1704	1652	1656	1656	As at mth end				n/a	1324	1526	1430					
	4.2	Number of CIN (inc. CPP as per DfE definition)	Info	Count	2026	2006	2031	2031	As at mth end				n/a		1947	1805					
	4.3	Number of CIN per 10,000 population aged 0-17 - inc. CPP as per DfE definition. (Corporate Plan 2016 Indicator)	Info	Rate per 10,000	359.2	355.7	360.1	360.1	As at mth end			more than +/-15	+/-15	+/-5 of 346.4		347.1	320	372.4	285.1	337.3	281.0
	4.4	% of CIN (open at least 45 days) with a plan	High	Percentage	90.9%	94.2%	95.5%	95.5%	As at mth end			<90%	90%>	95%+		91.4%	98.9%				
	4.5	% of CIN (open at least 45 days) with an up to date plan	High	Percentage	90.8%	92.6%	93.8%	82.7%	Financial Year			<85%	85%>	90%+	43.8%	65.1%	98.6%				
CHILD PROTECTION	5.1	Number of open CPP cases	Info	Count	322	354	375	375	Financial Year				n/a		423	369					
	5.2	Number of Initial CP Conferences (children) - rolling 12 month	Info	Count	450	454	490	490	Rolling Year				n/a	428	556	597					
	5.3	Number of Initial CP Conferences (children) per 10,000 population - rolling 12 month	Within limits (low)	Rate per 10,000	79.8	80.5	86.9	86.9	Rolling Year			79+	79<	74.1<	75.9	98.6	105.9	69.2	40	61.6	-
	5.4	Number of Initial CP Conferences (children) - in month	Info	Count	42	53	51					range to be set									
	5.5	% of initial child protection conference (ICPCs) completed within 15 days of S47 (based on number of children)	High	Percentage	97.6%	98.1%	90.2%	91.4%	Financial Year			<85%	85%>	90%+	81.5%	65.0%	88.3%	85.7%	100.0%	74.7%	88.5%
	5.6	Number of children with a CP plan per 10,000 population under 18	Low	Rate per 10,000	57.1	62.8	66.5	66.5	As at mth end			more than +/-10	+/-10	+/-5 of 52.3	69.2	74.7	65.4	46.1	26.4	42.9	-
	5.7	Number of children becoming subject to a CP plan per 10,000 population	Info	Rate per 10,000	73.1	74.0	80.2	80.2	Rolling Year					n/a	72.37	93.05	93.8				
	5.8	Number of discontinuations of a CP plan per 10,000 population - rolling 12 months performance	High	Rate per 10,000	81.4	80.4	79.5	79.5	Rolling Year			<55	55>	59.9+	62.7	85.4	105.0	67.8	39.0	52.1	-
	5.9	% of children becoming the subject of a CP plan for a second or subsequent time within 2 years - rolling 12 months (Corporate Plan 2016)	Low	Percentage	8.3%	8.4%	8.4%	8.4%	Rolling Year			6%+	6%<	4%<	4.4%	4.0%	4.7%				
	5.10	% of children becoming the subject of a CP plan for a second or subsequent time - ever - rolling 12 months	Low	Percentage	17.5%	19.4%	19.7%	19.7%	Rolling Year			16%+	16%<	14%<	11.1%	10.8%	12.7%	16.1%	7.7%	16.6%	13.3%
	5.11	% of open CP plans lasting 2 years or more	Low	Percentage	0.3%	0.3%	0.3%	0.3%	As at mth end			3.6%+	3.6%<	2.6%<	4.9%	4.2%	0.8%	1.6%	0.0%	2.3%	0.0%
	5.12	% of CP plans lasting 2 years or more - ceased within period	Low	Percentage	0.0%	0.0%	0.0%	1.8%	Financial Year			6.5%+	6.5%<	4.5%<	6.8%	4.2%	4.8%	3.4%	0.0%	3.7%	2.4%
	5.13	% of CP cases which were reviewed within timescales	High	Percentage	100.0%	100.0%	100.0%	98.6%	Financial Year			<95%	95%>	98%+	95.3%	96.4%	94.2%	97.6%	100.0%	94.0%	100.0%
	5.14	% CPP with an up to date plan	High	Percentage	96.9%	94.1%	96.3%					<93%	93%>	95%+							
	5.15	% of CPP with visits in the last 2 weeks	High	Percentage	94.4%	93.2%	88.4%					<90%	90%>	95%+							
LOOKED AFTER CHILDREN	6.1	Number of Looked After Children	Info	Count	471	484	487	487	As at mth end				n/a		407	432					
	6.2	Rate of Looked After Children per 10,000 population aged under 18	Info	Rate per 10,000	83.6	85.9	86.4	86.4	As at mth end			more than +/-5	+/-5	up to +/-2 of 73.5	70	70	76.6	75.8	56.0	60.0	-
	6.3	Admissions of Looked After Children	Info	Count	9	26	20	264	Financial Year				n/a	147	175	208					
	6.4	Number of children who have ceased to be Looked After Children	High	Count	21	14	15	210	Financial Year				n/a	136	160	192					
	6.5	Percentage of LAC who have ceased to be looked after due to permanence (Special Guardianship Order, Residence Order, Adoption)	High	Percentage	42.9%	28.6%	13.3%	28.3%	Financial Year			<33%	33%>	35%+	40.4%	37.5%	40.1%				
	6.6	Percentage of LAC who have ceased to be looked after due to a Special Guardianship Order	High	Percentage	0.0%	14.3%	0.0%					range to be set									
	6.7	LAC cases reviewed within timescales	High	Percentage	82.6%	87.1%	91.5%	94.7%	Financial Year			<90%	90%>	95%+	98.6%	94.9%	83.3%				
	6.8	% of children adopted	High	Percentage	42.9%	7.1%	13.3%	14.8%	Financial Year			<20%	20%>	22.7%+	26.5%	26.3%	22.9%	18.8%	27.0%	15.0%	21.0%
	6.9	Health of Looked After Children - up to date Health Assessments	High	Percentage	92.1%	88.4%	87.1%	87.1%	As at mth end			<90%	90%>	95%+	82.7%	81.4%	92.8%				
	6.10	Health of Looked After Children - up to date Dental Assessments	High	Percentage	63.8%	62.3%	62.7%	62.7%	As at mth end			<90%	90%>	95%+	42.5%	58.8%	94.5%				
	6.11	Health of Looked After Children - Initial Health Assessments carried out within 20 working days	High	Percentage	0.0%	37.5%	42.9%					range to be set									

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					Jan-17	Feb-17	Mar-17	Year End 2016/17			DATA NOTE	Red	Amber	Target Green	2013/14	2014/15	2015/16	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTLILE THRESHOLD
LAC	6.12	% of LAC with a PEP	High	Percentage	96.1%	94.2%	97.0%	97.0%	As at mth end	↑		<90%	90%>	95%+	65.7%	68.7%	97.8%				
	6.13	% of LAC with up to date PEPs	High	Percentage	77.6%	54.2%	68.2%	68.2%	As at mth end	↑		<90%	90%>	95%+	72.9%	71.4%	95.0%				
	6.14	% of eligible LAC with an up to date plan	High	Percentage	78.6%	77.7%	79.3%	64.1%	Financial Year	↑		<93%	93%>	95%+	67.0%	98.8%	98.4%				
	6.15	% of completed LAC visits which were completed within timescale - National Minimum standard	High	Percentage	87.7%	89.5%	94.5%	94.5%	Financial Year	↑		<95%	95%>	98%+		94.9%	98.1%				
	6.16	% of completed LAC visits which were completed within timescale - Rotherham standard	High	Percentage	81.5%	86.8%	86.4%	86.4%	Financial Year	↓		<85%	85%>	90%+		64.0%	80.2%				
	CARE LEAVERS	7.1	Number of care leavers	Info	Count	223	223	223	223	As at mth end	→				n/a		183	197			
7.2		% of eligible LAC with an up to date pathway plan	High	Percentage	-	-	54.0%	Not available	Financial Year	-		<93%	93%>	95%+		69.8%	97.5%				
7.3		% of care leavers in suitable accommodation	High	Percentage	95.1%	98.2%	96.9%	96.9%	Financial Year	↓		<95%	95%>	98%+	96.3%	97.8%	96.5%	85.1%	98.0%	81.0%	90.0%
7.4		% of care leavers in employment, education or training	High	Percentage	-	-	63.2%	not available	Financial Year	-		<70%	70%>	72%+	52.3%	71.0%	68.0%	50.4%	76.0%	48.0%	56.0%
PLACEMENTS	8.1	% of long term LAC in placements which have been stable for at least 2 years	High	Percentage	66.7%	65.5%	67.6%	67.6%	As at mth end	↑		<68%	68%>	70%+	68.8%	71.9%	72.7%	68.2%	79.0%	68.0%	72.0%
	8.2	% of LAC who have had 3 or more placements - rolling 12 months	Low	Percentage	13.0%	12.2%	11.3%	11.3%	Rolling Year	↑		12%+	12%<	9.6%<	11.2%	12.0%	11.9%	9.2%	6.0%	10.0%	8.0%
	8.3	% of LAC in a family Based setting (Corporate Plan 2016 Indicator)	High	Percentage	80.3%	81.6%	84.6%			↑		range to be set		87.5%>							
	8.4	% of LAC placed with parents or other with parental responsibility (P1)	Low	Percentage	4.9%	4.8%	6.0%			↓		range to be set									
ADOPTIONS	9.1	% of adoptions completed within 12 months of SHOBPA	High	Percentage	33.3%	0.0%	0.0%	38.7%	Financial Year	→		<83%	83%>	85%+	55.6%	84.6%	53.5%				
	9.2	Average number of days between a child becoming Looked After and having a adoption placement (A1) (Rolling 12 months)	Low	Rolling year ave count	368.8	374.7	404.0	404.0	Rolling Year	↓		511+	511<	487<	661	417.5	338.5	546.5	336.0	593.0	520.0
	9.3	Average number of days between a placement order and being matched with an adoptive family (A2) (Rolling 12 months)	Low	Rolling year ave count	211.0	208.4	232.9	232.9	Rolling Year	↓		127+	127<	121<	315	177.3	137.9	220.6	47.0	223.0	172.0
CASELOAD	10.1	Maximum caseload of social workers in key safeguarding teams (excluding children's disability team)	Low	Average count	36	25	30			↓		25+	24<	22<							
	10.2	Maximum caseload of social workers in LAC	Low	Average count	18	17	17			→		21+	20<	18<							
	10.3	Average number of cases per qualified social worker in LAC	Within Limits	Average count	12.9	11	11.6	11.6	As at mth end	↑		over 1% above range	1% above range	14-20							
	10.4	Average number of cases per qualified social worker in Duty Teams	Within Limits	Average count	15.8	13.7	13.3	13.3	As at mth end	↓		over 1% above range	1% above range	16-22		11.2	15.8				
	10.5	Average number of cases per qualified social worker in CIN North Teams	Within Limits	Average count	15.2	16.7	17.4	17.4	As at mth end	↑		over 1% above range	1% above range	16-22		18.2	16.8				
	10.6	Average number of cases per qualified social worker in CIN Central Teams	Within Limits	Average count	15.7	16.4	17.4	17.4	As at mth end	↑		over 1% above range	1% above range	16-22			18				
	10.7	Average number of cases per qualified social worker in CIN South Teams	Within Limits	Average count	17.9	18.1	18.3	18.3	As at mth end	↑		over 1% above range	1% above range	16-22		17.4	15.8				
	10.8	Average number of cases per qualified social worker in Children's Disability Team	Within Limits	Average count	16.9	16	15.4	15.4	As at mth end	↓		over 1% above range	1% above range	16-22		22.7	19.1				
	10.9	Average number of cases per qualified social worker in Child Sexual Exploitation team	Within Limits	Average count	2.8	2	1	1	As at mth end	↓		over 1% above range	1% above range	16-22		18	5.7				

CONTACTS

DEFINITION

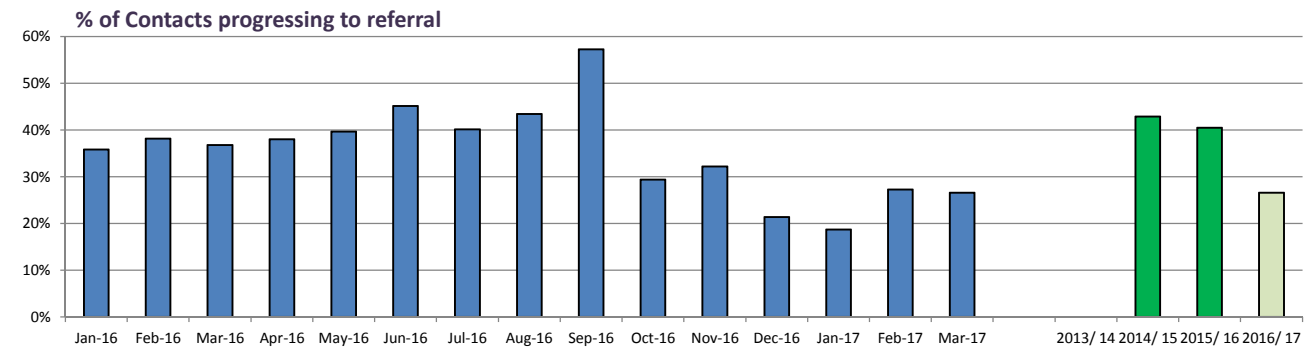
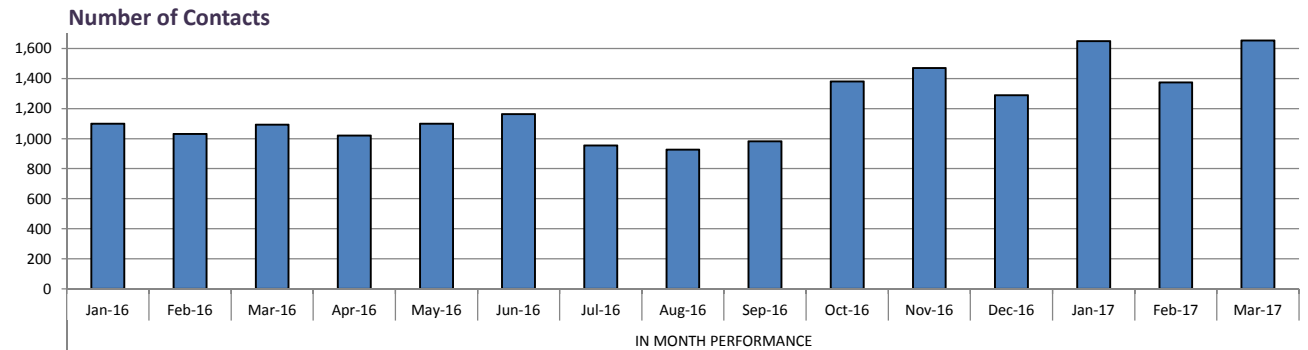
An initial contact is where a LA receives a contact about a child, and where there is a request for general advice, information or a social care service. Contacts received are screened against an agreed multi-agency threshold criteria for social care, where a manager agrees these thresholds have been met the contact progresses to a 'Referral' for consideration of an assessment and/or the services which may be required for a child.

PERFORMANCE ANALYSIS

The data suggests that the number of contacts has significantly increased for March (280) and is higher than March 2016, There will be a number of factors that impact on the general volume of contacts . The number of contacts where a decision is achieved in 24 hours and that progress to referral have both slightly decreased however the level of variance may be due to the increase in overall volume of contacts. This will need to be closely monitored in the next quarter as the data transfer, cleansing and inputting stabilises.

Data Note: Contacts statistics relate to 'new' contacts only. Contacts on open cases and intended for Early Help services have been manually filtered however the configuration of the new system for contacts and referrals is under review as some data fields have unsuitable data options. It is also known that the number of these 'new contacts' progressing to referral and 'new referrals to social care' (reported on separate page) do not currently tally due to complications between the step-up routine between EHM and LCS parts of the system. Therefore the data below may be subject to change once developments are implemented and/or may not be comparable in the future.

		1.1	1.2	1.4
		No. Contacts	% Contacts with decision within 1 working day	% Contacts progressing to referral
IN MONTH PERFORMANCE	Jan-16	1100	98.4%	35.8%
	Feb-16	1030	98.7%	38.2%
	Mar-16	1092	96.5%	36.8%
	Apr-16	1021	96.2%	38.0%
	May-16	1099	98.6%	39.7%
	Jun-16	1163	96.2%	45.1%
	Jul-16	954	95.5%	40.1%
	Aug-16	926	97.1%	43.4%
	Sep-16	983	92.7%	57.3%
	Oct-16	1381	82.4%	29.4%
	Nov-16	1469	55.8%	32.2%
	Dec-16	1288	80.1%	21.4%
	Jan-17	1649	79.9%	18.7%
Feb-17	1373	93.3%	27.3%	
Mar-17	1653	90.6%	26.6%	
ANNUAL TREND	2013/ 14			
	2014/ 15	10517		42.9%
	2015/ 16	12165	96.5%	40.5%
	2016/ 17	14959	86.0%	26.6%

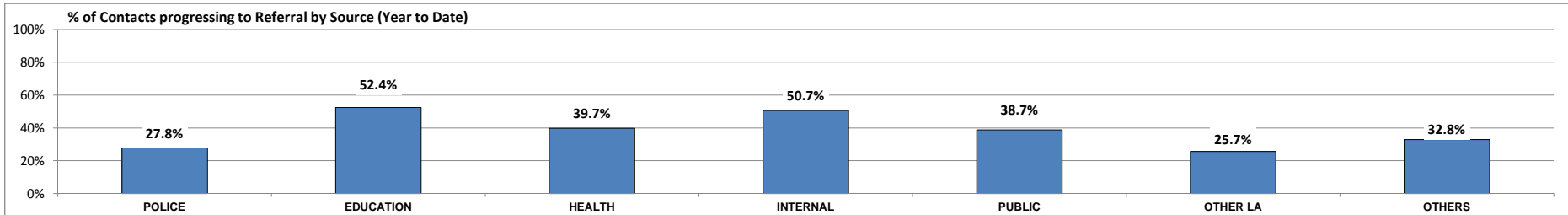


CONTACTS BY SOURCE

DEFINITION An initial contact is where a LA receives a contact about a child, and where there is a request for general advice, information or a social care service. Contacts received are screened against an agreed multi-agency threshold criteria for social care, where a manager agrees these thresholds have been met the contact progresses to a 'Referral' for consideration of an assessment and/or the services which may be required for a child. The analysis below provides a breakdown of numbers and progression rates to referral by the source of contact.

PERFORMANCE ANALYSIS Monitoring of contacts by source has been re-established following a review of the codesets in Liquid Logic, however due to the new coding options in the system this data should be analysed with caution. Further work is to be carried out within the performance team to ensure the codesets are being group correctly in Liquid Logic to ensure performance data is accurate. The number of contacts progressing to referrals is very low for some agencies, however it should be noted that police conversion rates are impacted by the high proportion of domestic abuse notifications received. It is a requirement that social care services are notified of all instances of domestic abuse when there is a child living in the household, even if the risk to the child is very low. Although this skews the performance rate the information allows for an analysis of risk to be formed and monitored over time on households to allow for consideration of intervention when there are repeated events (either Early Help or Social Care).

	(1) POLICE			(2) Education services (Inc. Schools)			(3) Health services			(4) Internal council services			(5) Members of public (Inc. self / parent)			(6) OTHER LOCAL AUTHORITIES			(7) Others (Inc. Children centres, Legal services, cafcass)			
	Total Contacts	Nc. prog to referral	% prog. to referral	Total Contacts	Nc. prog to referral	% prog. to referral	Total Contacts	Nc. prog to referral	% prog. to referral	Total Contacts	Nc. prog to referral	% prog. to referral	Total Contacts	Nc. prog to referral	% prog. to referral	Total Contacts	Nc. prog to referral	% prog. to referral	Total Contacts	Nc. prog to referral	% prog. to referral	
IN MONTH PERFORMANCE	Jan-16	408	86	21.1%	168	105	62.5%	121	52	43.0%	142	68	47.9%	142	53	37.3%	0	0	-	119	30	25.2%
	Feb-16	404	121	30.0%	133	79	59.4%	119	56	47.1%	167	81	48.5%	99	24	24.2%	0	0	-	108	32	29.6%
	Mar-16	360	97	26.9%	141	81	57.4%	129	53	41.1%	161	66	41.0%	164	56	34.1%	0	0	-	137	49	35.8%
	Apr-16	328	118	36.0%	167	109	65.3%	107	68	63.6%	182	111	61.0%	124	61	49.2%	0	0	-	113	40	35.4%
	May-16	404	156	38.6%	202	146	72.3%	132	73	55.3%	132	72	54.5%	120	60	50.0%	0	0	-	109	53	48.6%
	Jun-16	404	147	36.4%	169	133	78.7%	183	114	62.3%	137	83	60.6%	111	57	51.4%	0	0	-	159	61	38.4%
	Jul-16	405	177	43.7%	62	35	56.5%	114	67	58.8%	123	81	65.9%	105	59	56.2%	0	0	-	145	67	46.2%
	Aug-16	352	152	43.2%	2	1	50.0%	144	98	68.1%	150	91	60.7%	156	98	62.8%	0	0	-	122	61	50.0%
	Sep-16	360	177	49.2%	137	108	78.8%	134	93	69.4%	136	107	78.7%	109	72	66.1%	3	3	100.0%	104	52	50.0%
	Oct-16	443	107	24.2%	165	80	48.5%	208	56	26.9%	156	57	36.5%	125	36	28.8%	15	4	26.7%	153	32	20.9%
	Nov-16	541	136	25.1%	261	102	39.1%	177	47	26.6%	122	61	50.0%	146	56	38.4%	81	21	25.9%	141	50	35.5%
	Dec-16	512	88	17.2%	152	51	33.6%	161	41	25.5%	121	25	20.7%	150	49	32.7%	55	6	10.9%	137	16	11.7%
	Jan-17	687	83	12.1%	208	76	36.5%	195	22	11.3%	183	61	33.3%	185	26	14.1%	39	14	35.9%	152	27	17.8%
	Feb-17	535	103	19.3%	220	97	44.1%	164	26	15.9%	113	55	48.7%	136	34	25.0%	67	21	31.3%	138	39	28.3%
Mar-17	602	103	17.1%	254	109	42.9%	200	57	28.5%	226	99	43.8%	160	22	13.8%	51	11	21.6%	160	38	23.8%	
ANNUAL TREND	2013/14																					
	2014/15																					
	2015/16	4383	1321	30.1%	1586	909	57.3%	1636	789	48.2%	1735	866	49.9%	1303	513	39.4%	2	0.0%	0.0%	1520	517	34.0%
	2016/17	5573	1547	27.8%	1999	1047	52.4%	1919	762	39.7%	1781	903	50.7%	1627	630	38.7%	311	80	25.7%	1633	536	32.8%



REFERRALS

DEFINITION

An Initial Contact will be progressed to a 'referral' where the social worker or manager considers an assessment and/or services may be required for a child or further information is required to make an informed decision.

PERFORMANCE ANALYSIS

The data presented for the period October to March should be treated with caution due to the implementation of the new case management system. On this presentation the data suggests that the percentage of referrals moving on to an assessment remains within a good range, sustaining performance at above the statistical and national averages and placing performance in the national top quartile. This will be primarily linked to the MASH service now completing the full information screening process within the 'Contact' part of the child's pathway including any multi-agency work. Previously any multi-agency work was undertaken within 'Referral'. Timeliness standards have also been sustained at a good level with the expectation that all screening is now completed to allow referral to progress to assessment within one working day. Therefore it is expected that any referrals not progressing to assessment or responded to within the timescale below would be by exception. However we will need to see this performance sustained for a further quarter to have some confidence in its validity. Targets and measures may also be updated to reflect these new processes and standards.

The data suggests a small increase against an overall downward trajectory for re-referrals. This indicator is usually a reflection of the quality of the practice and as this improves so the indicator should reduce. Considering this data presentation for this month the service has increased to just above the locally set target (within the Corporate Plan) of 23% therefore indicating that less children's needs are being met in a sustained way. This reinforces the findings of our audit programme which is trying to help us move beyond compliance. As the improvement strategies are implemented we should expect to see a continued downward trend. The number of new CSE cases remains relatively stable.

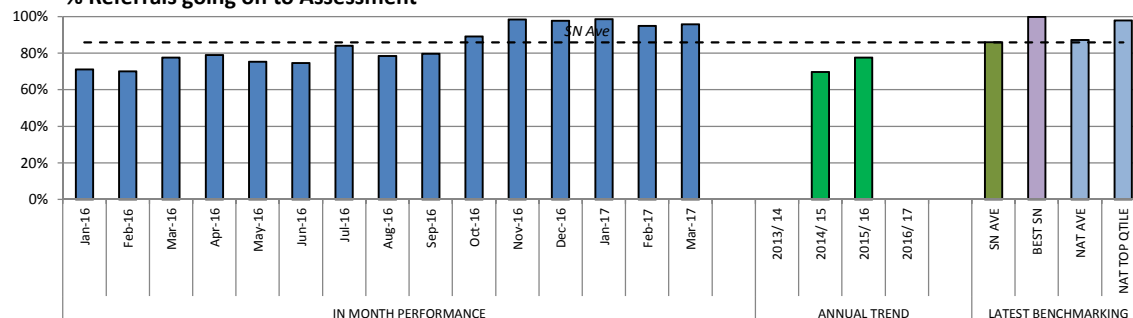
	1.3	1.10	1.7	1.6	1.8	1.9
No. of Referrals						
No. of CSE Referrals (Corporate Plan 2016/17 Indicator)						
% Referral decision was made within 48 hours						
% Referrals going on to Assessment						
% Re-referrals - had a referral in last 12 months - in month						
% Re-referrals - had a referral in last 12 months - rolling 12 months						

IN MONTH PERFORMANCE	Jan-16	394	17	96.4%	71.1%	29.4%	
	Feb-16	393	21	97.7%	70.0%	28.6%	
	Mar-16	402	40	99.0%	77.6%	27.7%	
	Apr-16	388	22	97.8%	78.9%	33.3%	30.7%
	May-16	436	18	96.4%	75.2%	26.5%	30.5%
	Jun-16	525	12	94.7%	74.5%	27.5%	29.9%
	Jul-16	383	14	96.3%	84.1%	32.3%	30.0%
	Aug-16	402	9	95.9%	78.4%	29.2%	29.7%
	Sep-16	563	12	91.1%	79.6%	34.3%	30.4%
	Oct-16	461	17	34.0%	89.0%	24.3%	28.7%
	Nov-16	478	23	98.0%	98.3%	28.2%	28.6%
	Dec-16	301	31	100.0%	97.7%	24.9%	28.3%
	Jan-17	293	18	98.0%	98.6%	22.5%	28.0%
	Feb-17	383	26	99.0%	94.8%	23.0%	27.7%
	Mar-17	453	29	98.0%	95.8%	25.2%	27.6%

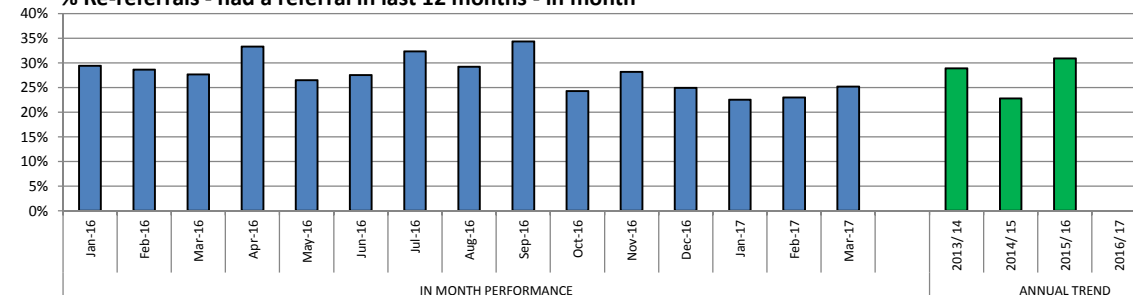
ANNUAL TREND	2013/ 14					28.9%	
	2014/ 15	4513			69.6%	22.8%	
	2015/ 16	4915	200	96.5%	77.6%	30.9%	
	2016/ 17	5066	231	not available	not available	not available	

LATEST BENCHMARKING	SN AVE				85.9%		23.6%
	BEST SN				99.7%		15.4%
	NAT AVE				87.1%		24.0%
	NAT TOP QTILE				97.8%		16.5%

% Referrals going on to Assessment



% Re-referrals - had a referral in last 12 months - in month

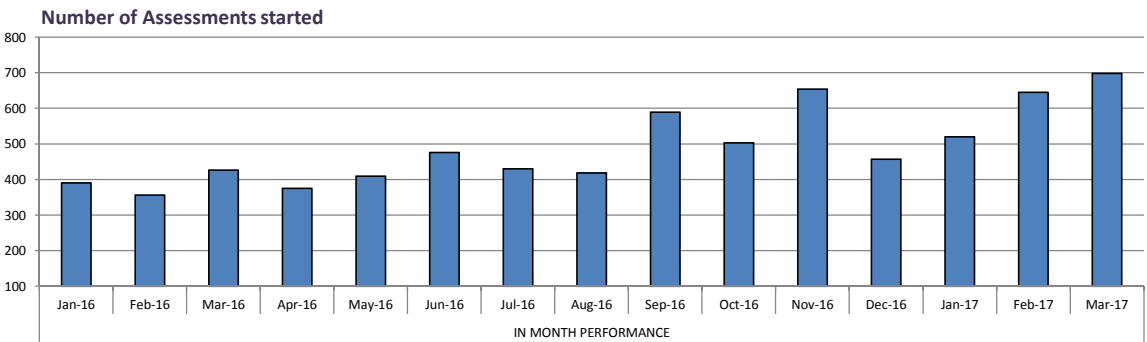


ASSESSMENTS - STARTED

DEFINITION If a child meets the Children's Act definition of 'Child in Need' or is likely to be at risk of significant harm, authorisation will be given for an assessment of needs to be started to determine which services to provide and what action to take.

PERFORMANCE ANALYSIS At the end of the financial year there has been a increase in the number of single social work assessments started, this is significantly above those started this time last year. This data should be treated with caution due to the implementation of the new case management system.

		2.1
		Number of Assessments started
IN MONTH PERFORMANCE	Jan-16	390
	Feb-16	356
	Mar-16	426
	Apr-16	375
	May-16	409
	Jun-16	476
	Jul-16	430
	Aug-16	418
	Sep-16	589
	Oct-16	503
	Nov-16	654
	Dec-16	457
	Jan-17	520
Feb-17	645	
Mar-17	698	
ANNUAL TREND	2013/ 14	
	2014/ 15	3929
	2015/ 16	3996
	2016/ 17	6174
LATEST BENCHMARKING	SN AVE	
	BEST SN	
	NAT AVE	
	NAT TOP QTILE	



ASSESSMENTS - COMPLETED

DEFINITION

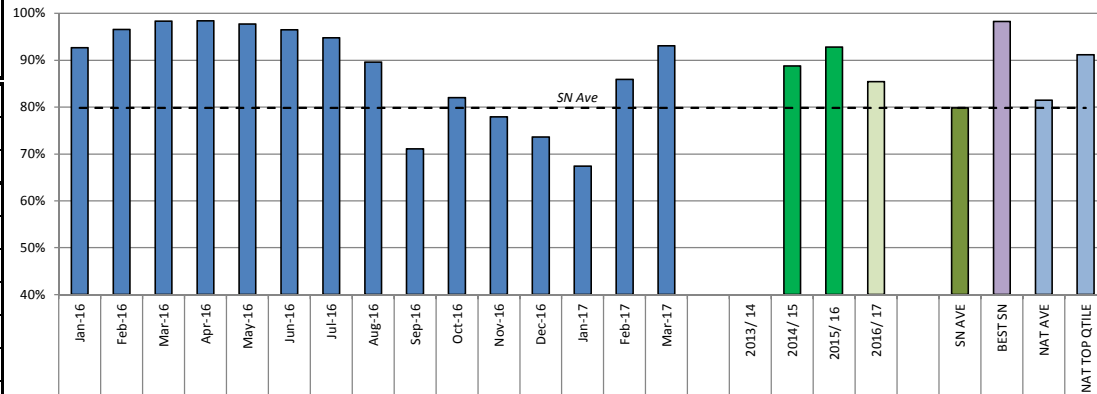
National Working Together guidelines state that the maximum timeframe for the assessment to be completed is 45 working days from the point of referral. If, in discussion with a child and their family and other professionals, an assessment exceeds 45 working days the social worker should record the reasons for

PERFORMANCE ANALYSIS

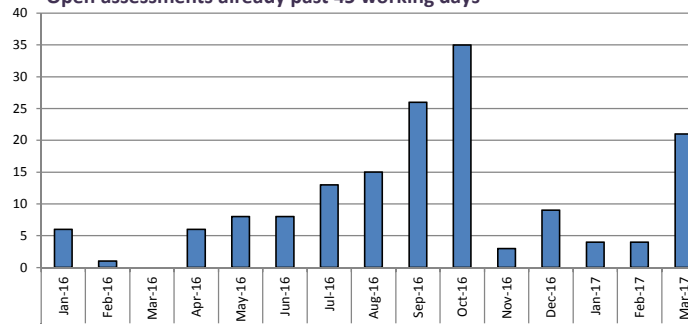
March sees performance of assessments completed in time has improved and remains better than the national and statistical neighbour average. However the number open past 45 days is significantly higher than the past 4 months this is likely to reflect a delay in input for those completed towards the end of the month but this will be reviewed by the head of service to ensure childrens outcomes are not being impacted by delay. Compliance continues to be monitored at fortnightly performance meetings where team managers address any remedial action for those out of time. Managers are receiving support from the Liquid Logic Project team in addressing validation issues caused by the data migration into the new system.

		2.4	2.2	2.3
		No. of Assessments completed in Month	% completed within 45 working days	Open assessments already past 45 working days
IN MONTH PERFORMANCE	Jan-16		92.7%	6
	Feb-16		96.6%	1
	Mar-16		98.4%	0
	Apr-16	332	98.4%	6
	May-16	339	97.7%	8
	Jun-16	354	96.5%	8
	Jul-16	330	94.8%	13
	Aug-16	468	89.6%	15
	Sep-16	382	71.1%	26
	Oct-16	401	82.0%	35
	Nov-16	561	77.9%	3
	Dec-16	591	73.6%	9
	Jan-17	657	67.4%	4
Feb-17	619	85.9%	4	
Mar-17	626	93.1%	21	
ANNUAL TREND	2013/ 14			
	2014/ 15		88.8%	
	2015/ 16		92.8%	
	2016/ 17	5660	85.4%	
LATEST BENCHMARKING	SN AVE		79.8%	
	BEST SN		98.3%	
	NAT AVE		81.5%	
	NAT TOP QTILE		91.2%	

% completed within 45 working days



Open assessments already past 45 working days



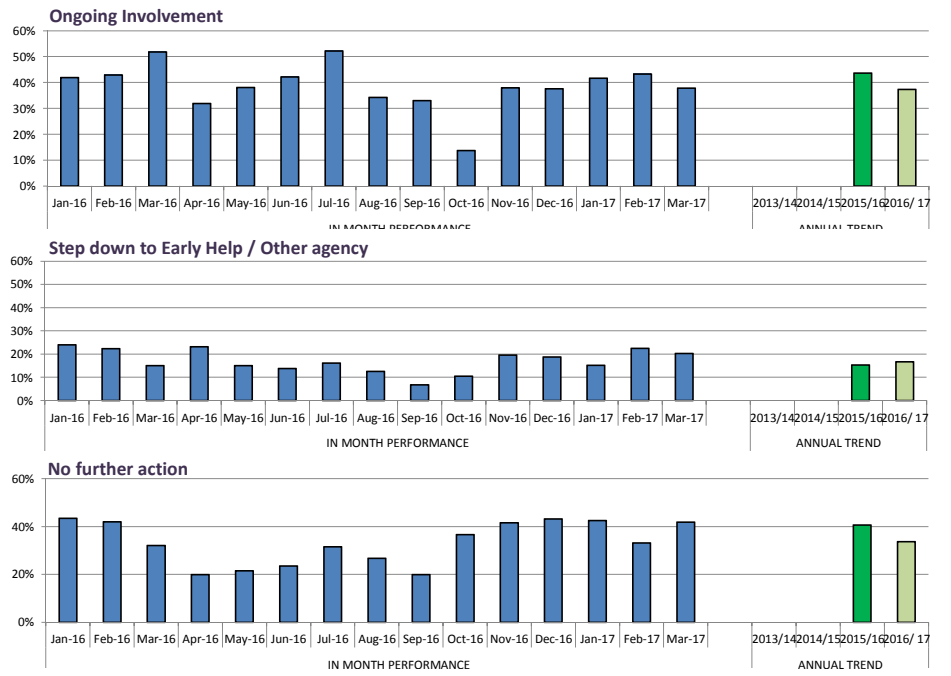
ASSESSMENTS - OUTCOMES

DEFINITION Every assessment should be focused on outcomes, deciding which services and support to provide to deliver improved welfare for the child and reflect the child's best interests. Local monitoring processes were reviewed and new outcome options established June 2015 therefore care should be taken when comparing trend data from before that time.

PERFORMANCE ANALYSIS Due to the new outcome coding options in the new system this data should be analysed with caution. March data suggests a decrease in the numbers of assessments resulting in ongoing involvement or a step down to early help. Further system adjustments will be made if 'outcome' options need to be added. This will continue to be monitored at performance meetings and through "No Further Action" (NFA) auditing to ensure the threshold is being appropriately and consistently applied both within the assessment and duty teams and by MASH managers transferring the referrals.

Data Note: The October figure for Not Recorded/Other is particularly high and following investigation it is due to how the data came across in migration.

	2.5		2.6		2.7		2.8		2.9	
	Ongoing Involvement	No further action	Step down to Early Help	Out of area	Not Recorded/Other					
IN MONTH PERFORMANCE										
Jan-16	206 of 492	41.9%	165 of 492	43.4%	118 of 492	24.0%	3 of 492	0.6%	0 of 492	0.0%
Feb-16	163 of 380	42.9%	128 of 380	42.0%	85 of 380	22.4%	2 of 380	0.5%	2 of 380	0.5%
Mar-16	158 of 305	51.8%	98 of 305	32.1%	46 of 305	15.1%	1 of 305	0.3%	2 of 305	0.7%
Apr-16	106 of 332	31.9%	66 of 332	19.9%	77 of 332	23.2%	3 of 332	0.9%	0 of 332	0.0%
May-16	129 of 339	38.1%	73 of 339	21.5%	51 of 339	15.0%	2 of 339	0.6%	1 of 339	0.3%
Jun-16	149 of 354	42.1%	83 of 354	23.4%	49 of 354	13.8%	2 of 354	0.6%	1 of 354	0.3%
Jul-16	172 of 330	52.1%	104 of 330	31.5%	53 of 330	16.1%	1 of 330	0.3%	0 of 330	0.0%
Aug-16	160 of 468	34.2%	125 of 468	26.7%	59 of 468	12.6%	0 of 468	0.0%	1 of 468	0.2%
Sep-16	126 of 382	33.0%	76 of 382	19.9%	26 of 382	6.8%	3 of 382	0.8%	1 of 382	0.3%
Oct-16	55 of 401	13.7%	147 of 401	36.7%	42 of 401	10.5%	0 of 401	0.0%	157 of 401	39.2%
Nov-16	213 of 561	38.0%	233 of 561	41.5%	110 of 561	19.6%	0 of 561	0.0%	5 of 561	0.9%
Dec-16	222 of 591	37.6%	255 of 591	43.1%	111 of 591	18.8%	0 of 591	0.0%	3 of 591	0.5%
Jan-17	274 of 657	41.7%	279 of 657	42.5%	100 of 657	15.2%	0 of 657	0.0%	4 of 657	0.6%
Feb-17	268 of 619	43.3%	205 of 619	33.1%	139 of 619	22.5%	0 of 619	0.0%	7 of 619	1.1%
Mar-17	237 of 626	37.9%	262 of 626	41.9%	127 of 626	20.3%	0 of 626	0.0%	0 of 626	0.0%
ANNUAL TREND										
2013/14										
2014/15										
2015/16	1772 of 4064	43.6%	1624 of 4064	40.7%	621 of 4064	15.4%	40 of 4064	1.0%	7 of 4064	0.2%
2016/17	2111 of 5660	37.3%	1908 of 5660	33.7%	944 of 5660	16.7%	11 of 5660	0.2%	180 of 5660	3.2%



PLANS - IN DATE

DEFINITION

A child's plan is to be developed for an individual child if they have a "wellbeing need" that requires a targeted intervention. Each type of plan has a completion target. When a Looked After Child reaches 16 years and 3 months they become eligible for a 'Pathway Plan' - this plan focuses on preparing a young person for adulthood and their future (For example; future accommodation, post 16 Education/Training and Employment)

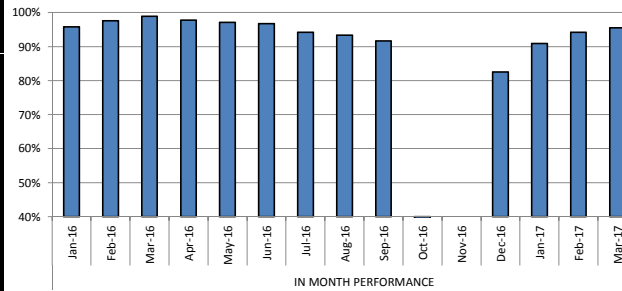
PERFORMANCE ANALYSIS

Performance data is starting to return to normal sustained levels after reaching a low in December. March sees another increase in performance across all plan types. Workers continue working through their caseloads to manually type plan information into the new system. This is a far more intensive piece of work than on the previous system as the new database will contain the full content of the plan and not just the date. However once the first plan is created any subsequent plans are much easier to update.

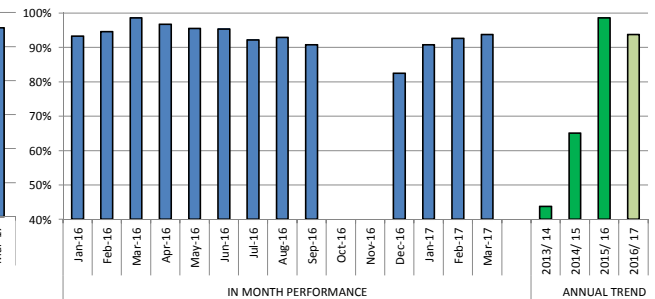
The LAC team performance continues to improve but still has some way to go to return to the performance pre new system implementation. It is known that this is being affected by a backlog of outstanding reviews which need completing before plans can start. This is still being monitored via operational performance meetings.

		4.4	4.5	5.14	6.14
		CIN with a recorded plan (open at least 45 days)	CIN with an up-to-date plan (open at least 45 days)	CPP with an up to date plan	LAC with an up to date plan
IN MONTH PERFORMANCE	Jan-16	95.8%	93.3%	98.9%	98.6%
	Feb-16	97.6%	94.6%	98.5%	97.7%
	Mar-16	98.9%	98.6%	100.0%	98.4%
	Apr-16	97.8%	96.7%	99.4%	96.0%
	May-16	97.1%	95.5%	99.7%	98.4%
	Jun-16	96.7%	95.3%	99.7%	99.5%
	Jul-16	94.2%	92.2%	99.7%	98.4%
	Aug-16	93.3%	92.9%	99.7%	96.4%
	Sep-16	91.6%	90.8%	99.3%	95.3%
	Oct-16	Plans information could not be migrated from CCM into LCS. October & November data is unavailable due to information not being in the system.			
	Nov-16	Plans information could not be migrated from CCM into LCS. October & November data is unavailable due to information not being in the system.			
	Dec-16	82.5%	82.5%	78.5%	55.7%
	Jan-17	90.9%	90.8%	96.9%	78.6%
Feb-17	94.2%	92.6%	94.1%	77.7%	
Mar-17	95.5%	93.8%	96.3%	79.3%	
ANNUAL TREND	2013/ 14		43.8%	82.8%	67.0%
	2014/ 15		65.1%	97.6%	98.8%
	2015/ 16		98.6%	100.0%	98.4%
	2016/ 17	95.5%	93.8%	96.3%	79.3%
LATEST BENCHMARKING	SN AVE				
	BEST SN				
	NAT AVE				
	NAT TOP				
	Q TILE				

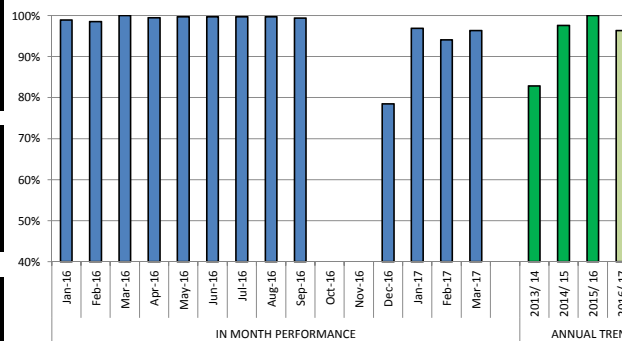
CIN with a recorded plan - open at least 45 days



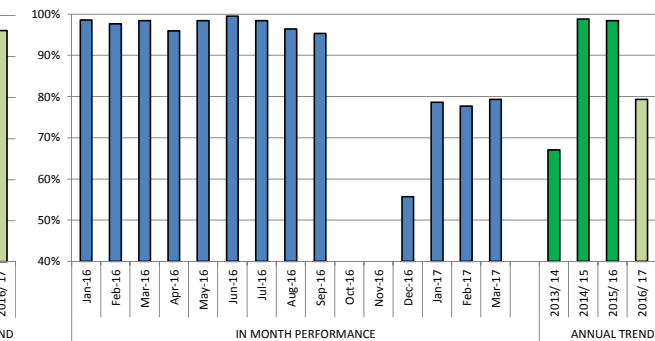
CIN with an up-to-date plan - open at least 45 days



CPP with an up to date plan



LAC with an up to date plan



SECTION 47 INVESTIGATIONS - STARTED

DEFINITION

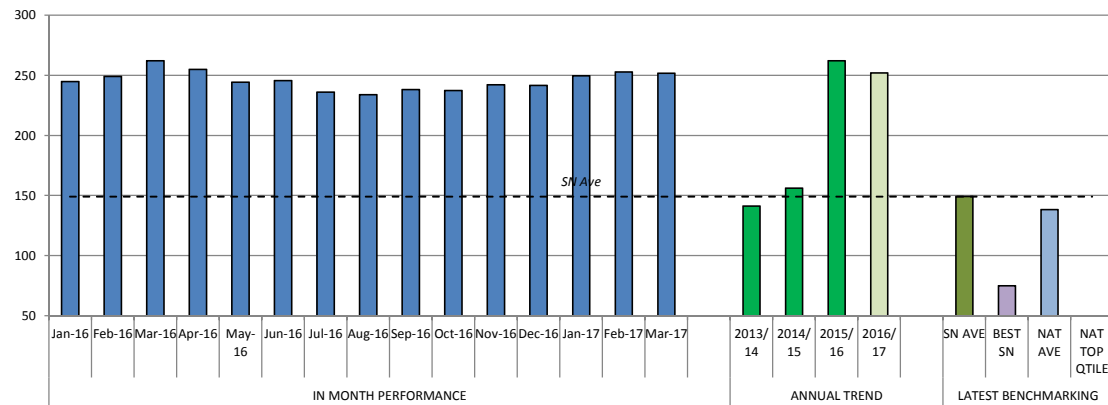
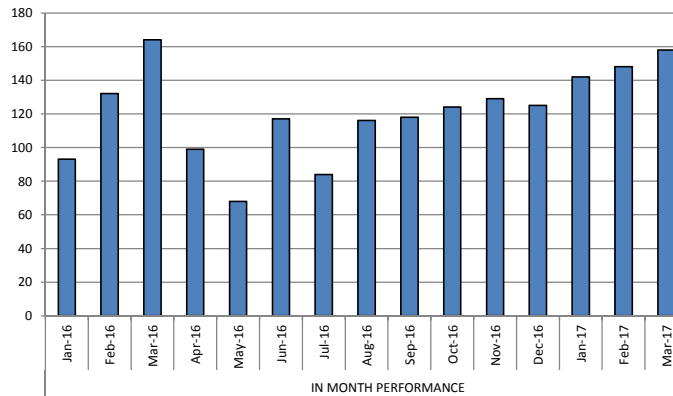
If there is reasonable cause to suspect a child is suffering or likely to be suffering significant harm a Strategy Discussion will be convened between child protection staff and other relevant bodies. The Strategy Discussion may then decide to launch a Section 47 enquiry. This means the local authority must investigate the case further.

PERFORMANCE ANALYSIS

The numbers of Section 47 (S47) investigations has remained relatively stable and still represents a fall from a peak in March 2016 against an increase in overall demand for social care intervention in other first response services. This performance still remains significantly higher than the statistical and national averages. Managers have continued to increase the rigour with which they apply the threshold for S47 and to ensure that the reasons for their decisions are fully justified. This applies as much to the decisions not to instigate S47 as to commence one. This is an area where challenge needs to be sustained to ensure that the right children are subject of S47 investigations and that those investigations are of sufficient quality to properly prove or disprove significant harm to a child. Performance is expected to improve with the implementation of the new operating methodology.

		3.1	3.2	3.3
		Number of S47's Investigations - Started	Number of S47's Investigations started 12 month rolling	Rate of S47's per 10K pop. -12 month rolling
IN MONTH PERFORMANCE	Jan-16	93	1380	244.7
	Feb-16	132	1404	248.9
	Mar-16	164	1478	262.1
	Apr-16	99	1438	255.0
	May-16	68	1377	244.3
	Jun-16	117	1384	245.6
	Jul-16	84	1330	236.0
	Aug-16	116	1318	233.9
	Sep-16	118	1342	238.1
	Oct-16	124	1339	237.4
	Nov-16	129	1365	242.0
	Dec-16	125	1363	241.7
	Jan-17	142	1408	249.7
	Feb-17	148	1426	252.8
Mar-17	158	1420	251.8	
ANNUAL TREND	2013/ 14			141.3
	2014/ 15	752		156.1
	2015/ 16	954		262.1
	2016/ 17	1428		251.8
LATEST BENCHMARKING	SN AVE			149.2
	BEST SN			75.0
	NAT AVE			138.2
	NAT TOP QTILE			-

Number of S47's Investigations



SECTION 47 INVESTIGATIONS - COMPLETED

DEFINITION

Section 47 enquiries are conducted through a Child's Assessment. Depending on the outcome of a Section 47 enquiry, it may range from 'no further action necessary' through 'further monitoring needed' to the convening of a Child Protection Conference.

PERFORMANCE ANALYSIS

Trend data in relation to the outcome of Section 47 investigations, suggests an increase this month in overall outcomes that were substantiated. This suggests that the original decision to initiate the strategy discussion/section 47 investigation was right for the majority of children/families even though, for some, there is no continuing risk of harm.

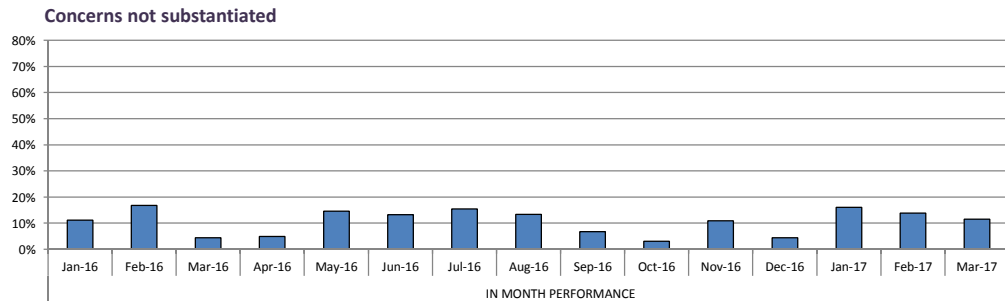
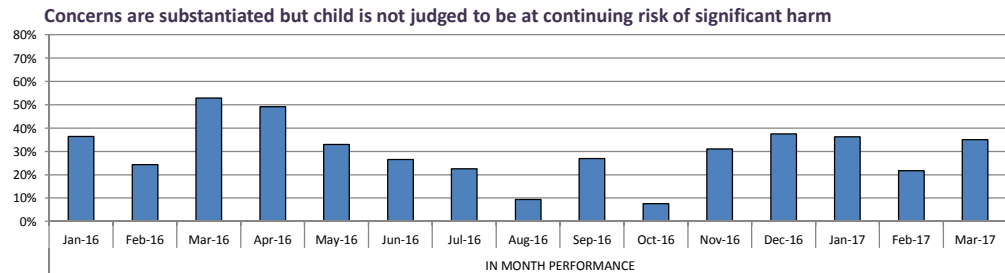
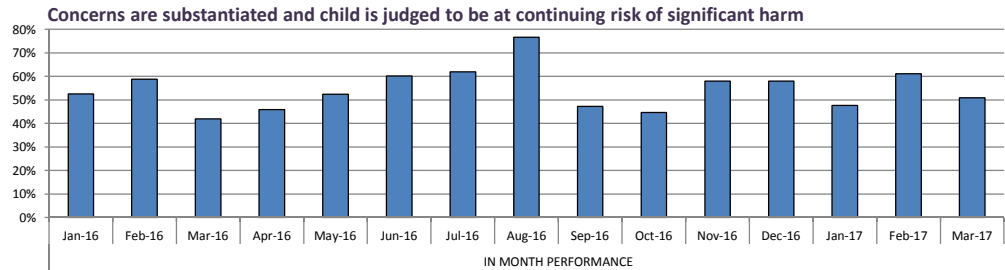
In March 18 (11.5%) conclusions at the end of the activity were not in line with the "significant harm" threshold. This low level could indicate continued improvement however this level would need to be sustained for another two quarters as a minimum to be statistically significant. As indicated in the previous section, this activity is subject to continued scrutiny and the subject of ongoing workforce development activity.

	3.4	3.5	3.6	3.7	3.8
	Completed S47's by outcome -				
	Number of S47's Investigations - Completed	Concerns are substantiated - continuing risk of significant harm	Concerns are substantiated - no continuing risk of significant harm	Concerns not substantiated	Not recorded

IN MONTH PERFORMANCE	Jan-16	99	52	52.5%	36	36.4%	11	11.1%	0	0.0%
	Feb-16	119	70	58.8%	29	24.4%	20	16.8%	0	0.0%
	Mar-16	136	57	41.9%	72	52.9%	6	4.4%	1	0.7%
	Apr-16	61	28	45.9%	30	49.2%	3	4.9%	0	0.0%
	May-16	82	43	52.4%	27	32.9%	12	14.6%	0	0.0%
	Jun-16	83	50	60.2%	22	26.5%	11	13.3%	0	0.0%
	Jul-16	71	44	62.0%	16	22.5%	11	15.5%	0	0.0%
	Aug-16	150	115	76.7%	14	9.3%	20	13.3%	1	0.7%
	Sep-16	89	42	47.2%	24	27.0%	6	6.7%	4	4.5%
	Oct-16	132	59	44.7%	10	7.6%	4	3.0%	14	10.6%
	Nov-16	119	69	58.0%	37	31.1%	13	10.9%	0	0.0%
	Dec-16	112	65	58.0%	42	37.5%	5	4.5%	0	0.0%
	Jan-17	168	80	47.6%	61	36.3%	27	16.1%	0	0.0%
	Feb-17	152	93	61.2%	33	21.7%	21	13.8%	5	3.3%
	Mar-17	157	80	51.0%	55	35.0%	18	11.5%	4	2.5%

ANNUAL TREND	2013/ 14									
	2014/ 15	876								
	2015/ 16	1390	810	58.3%	420	30.2%	156	11.2%	4	0.3%
	2016/ 17	1376	768	55.8%	371	27.0%	151	11.0%	28	2.0%

LATEST BENCHMARKING	SN AVE							
	BEST SN							
	NAT AVE							
	NAT TOP QTILE							



CHILDREN IN NEED (CIN)

DEFINITION

If the child is found to be disabled or the assessment finds that their health and development is likely to suffer without local authority intervention, the child will be classed as 'in need', as defined by Section 17 of the Children Act 1989. This means that the local authority is now legally obliged to provide the necessary services and support.

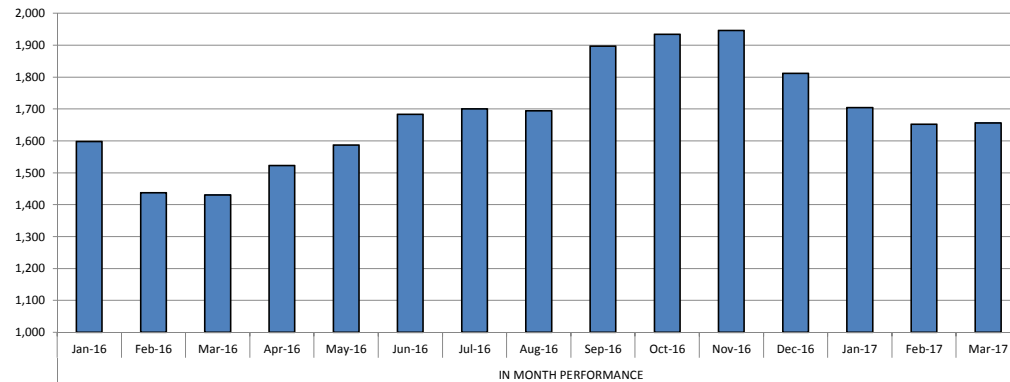
PERFORMANCE ANALYSIS

There is no good or bad performance in relation to numbers of CIN although it is important to monitor against statistical neighbour and national averages as numbers considerably higher or lower than average can be an indicator of other performance issues. The numbers continue to show a significant reduction of children that sustains our position below the statistical neighbour average, but above the national average. This reduction is due to Duty and Assessment managers rigorously applying the threshold to step down when appropriate to Early Help rather than ongoing social care involvement and clear locality processes for regularly reviewing CIN to ensure timely progression and avoid drift. The review work happens on a rolling basis and ensures that workers and team managers are challenged where appropriate in respect of the effectiveness of CIN planning.

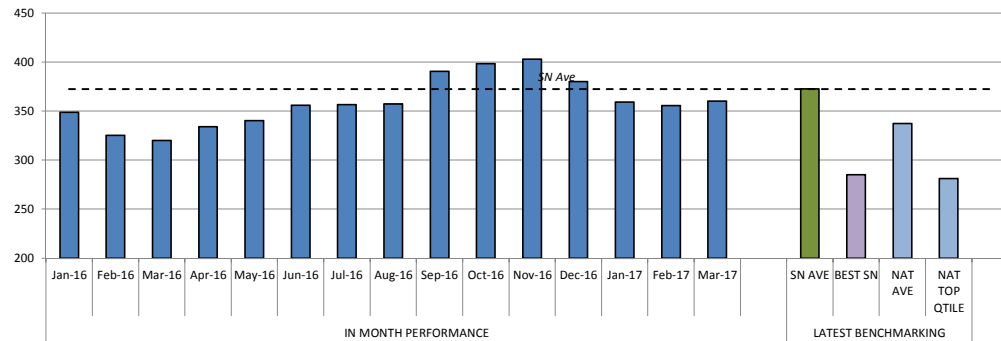
One of the measures of success of our Early Help offer will be, over time, a reduction in the numbers of CIN as families are offered support at an earlier point before concerns escalate. As the service starts to embed it may in the short term increase demand as it uncovers unmet need.

		4.1	4.2	4.3
		Number of open CIN cases	Number of CIN (Inc. CPP as per DfE definition)	Number of CIN per 10K pop. (Inc. CPP as per DfE definition)
IN MONTH PERFORMANCE	Jan-16	1598	1966	348.6
	Feb-16	1437	1835	325.4
	Mar-16	1430	1805	320.0
	Apr-16	1523	1883	333.9
	May-16	1587	1919	340.3
	Jun-16	1683	2008	356.0
	Jul-16	1700	2010	356.4
	Aug-16	1694	2014	357.1
	Sep-16	1897	2202	390.4
	Oct-16	1934	2246	398.2
	Nov-16	1946	2272	402.9
	Dec-16	1812	2143	380.0
	Jan-17	1704	2026	359.2
Feb-17	1652	2006	355.7	
Mar-17	1656	2031	360.1	
ANNUAL TREND	2013/14	1324		
	2014/15	1526	1947	347.1
	2015/16	1430	1805	320.0
	2016/17	1656	2031	360.1
LATEST BENCHMARKING	SN AVE			372.4
	BEST SN			285.1
	NAT AVE			337.3
	NAT TOP Q TILE			281.0

Number of open CIN cases



Number of CIN per 10K population (Inc. CPP)



CHILD PROTECTION

DEFINITION

Following a S47 investigation a child protection conference may be convened to consider all the information obtained under the Section 47 enquiry and to determine the best course of action. One of the things the child protection conference considers is whether the child should become subject to a Child Protection Plan. The aim of a child protection plan is to ensure the child is safe from harm and remains that way. As long as it is in the best interests of the child, this will involve offering support and services to the family.

PERFORMANCE ANALYSIS

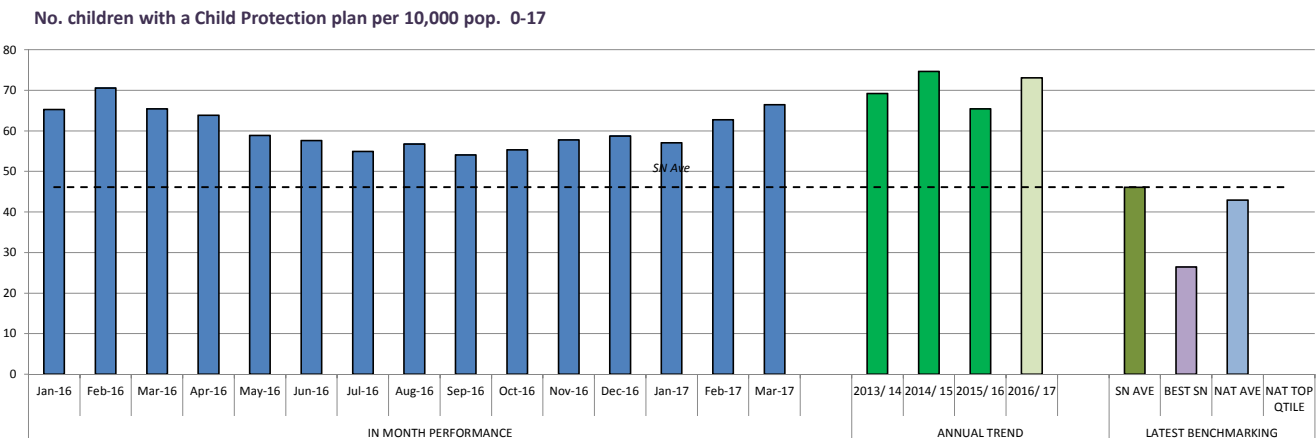
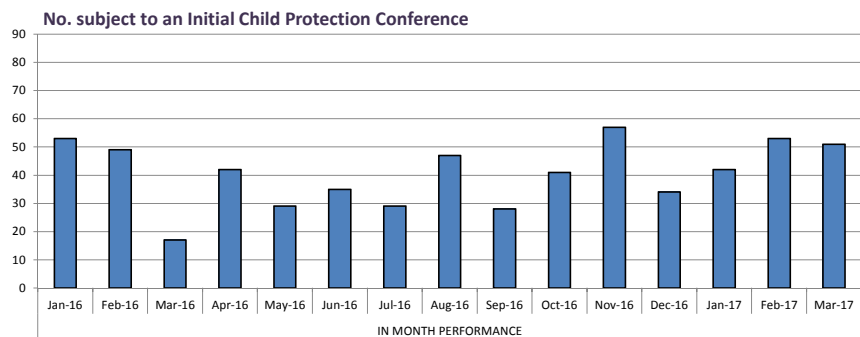
The trend for the number of children with a child protection plan (CPP) has increased and remains higher than that of statistical neighbours and the national average. We would expect the numbers to fall as CP plans are worked more effectively, however the number of additional plans could be as a result of a complex abuse enquiry identifying additional children at risk of significant harm due to long term neglect. Additional resources are in place to manage the additional workload ensuring that all children are effectively protected. An application to pilot a new intervention model has been submitted to help improve effectiveness in this area. More generally practice will improve with the implementation of the new operating methodology. Long-term the figures should then stabilise closer to the benchmarking averages. However the number of plans alone cannot offer assurance that we have identified the right children at risk of or experiencing significant harm are supported by a plan.

	5.4	5.1	
	No of children subject to an initial CP Conferences (in month)	No. of open CPP cases	No. of open CPP cases per 10K pop under 18

IN MONTH PERFORMANCE	5.4			5.1		
		No of children subject to an initial CP Conferences (in month)	No. of open CPP cases		No. of open CPP cases per 10K pop under 18	
	Jan-16	53	368	65.3		
	Feb-16	49	398	70.6		
	Mar-16	17	369	65.4		
	Apr-16	42	360	63.8		
	May-16	29	332	58.9		
	Jun-16	35	325	57.6		
	Jul-16	29	310	55.0		
	Aug-16	47	320	56.7		
	Sep-16	28	305	54.1		
	Oct-16	41	312	55.3		
	Nov-16	57	326	57.8		
	Dec-16	34	331	58.7		
Jan-17	42	322	57.1			
Feb-17	53	354	62.8			
Mar-17	51	375	66.5			

ANNUAL TREND	5.4			5.1		
		No of children subject to an initial CP Conferences (in month)	No. of open CPP cases		No. of open CPP cases per 10K pop under 18	
	2013/ 14	427		69.2		
	2014/ 15	556		74.7		
2015/ 16	427		65.4			
2016/ 17	488		73.1			

LATEST BENCHMARKING	5.4			5.1		
		No of children subject to an initial CP Conferences (in month)	No. of open CPP cases		No. of open CPP cases per 10K pop under 18	
	SN AVE			46.1		
	BEST SN			26.4		
NAT AVE			42.9			
NAT TOP QTILE			-			



INITIAL CHILD PROTECTION CONFERENCES

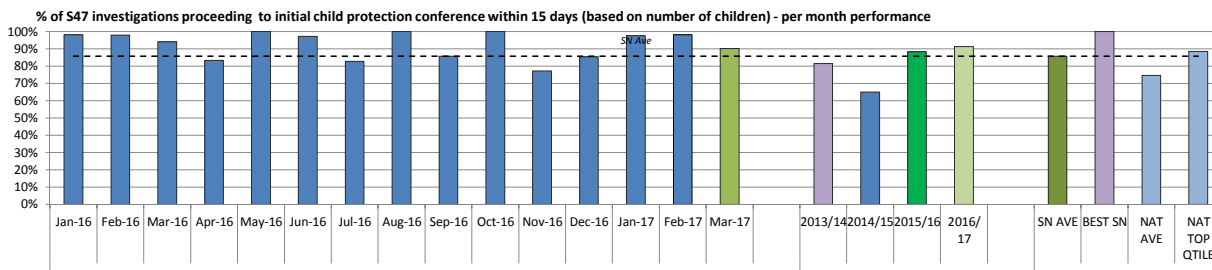
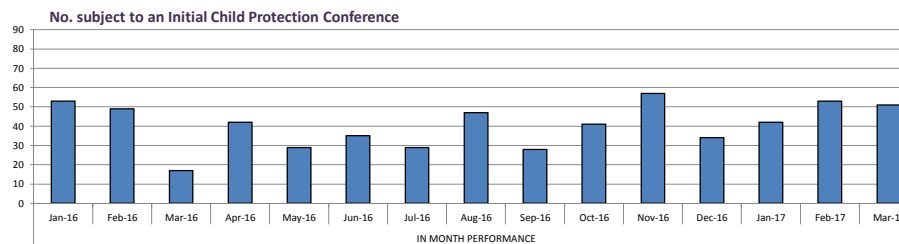
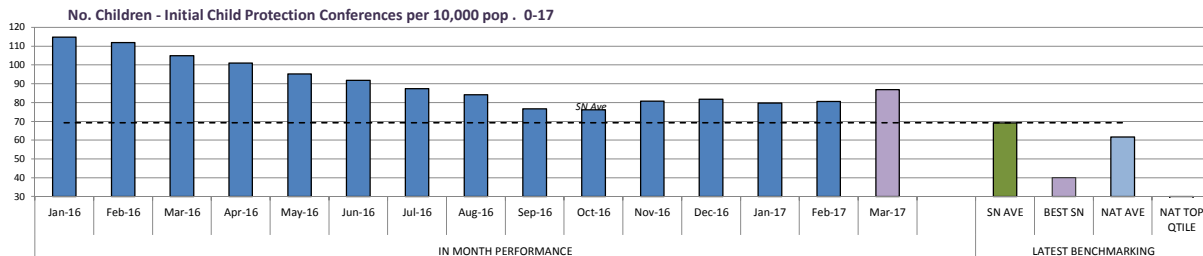
DEFINITION

Following a S47 investigation a child protection conference may be convened to consider all the information obtained under the Section 47 enquiry and to determine the best course of action. One of the things the child protection conference considers is whether the child should become subject to a Child Protection Plan. The aim of a child protection plan is to ensure the child is safe from harm and remains that way. As long as it is in the best interests of the child, this will involve offering support and services to the family.

PERFORMANCE ANALYSIS

51 children were subject to an Initial Child Protection Case Conferences held in March which is inline with the overall current trend. The journey from strategy discussion outcome to ICPC is clear in the data - the number of conferences in month relates to the numbers of strategy discussions out-turning as "substantiated, continuing harm". The timeliness of Initial Case Protection Conferences in month was lower than the previous two months but at 90.2% remains good and better than the national and statistical neighbour average, placing Rotherham in the top quartile. For any children experiencing a delay (5 for March) the reasons for these delays are known and understood by the conference chair manager to help mitigate and improve future practice.

		5.2	5.3	5.4	5.5	
		No of children with initial CP Conference (rolling 12mth)	No. of children with Initial CP Confs per 10K pop (rolling 12mth)	No of children with initial CP Conference (in month)	No. of initial CP confs (children) in 15 days (in month)	% of initial CP confs in 15 days (in month)
IN MONTH PERFORMANCE	Jan-16	647	114.7	54	53	98.1%
	Feb-16	631	111.9	49	48	98.0%
	Mar-16	592	105.0	17	16	94.1%
	Apr-16	570	101.1	42	35	83.3%
	May-16	537	95.2	29	29	100.0%
	Jun-16	518	91.8	35	34	97.1%
	Jul-16	493	87.4	29	24	82.8%
	Aug-16	475	84.2	47	47	100.0%
	Sep-16	432	76.6	28	24	85.7%
	Oct-16	429	76.1	41	41	100.0%
	Nov-16	455	80.7	57	44	77.2%
	Dec-16	461	81.7	34	29	85.3%
	Jan-17	450	79.8	42	41	97.6%
Feb-17	454	80.5	53	52	98.1%	
Mar-17	490	86.9	51	46	90.2%	
ANNUAL TREND	2013/14					81.5%
	2014/15					65.0%
	2015/16			597		88.3%
	2016/ 17			488	446	91.4%
LATEST BENCHMARKING	SN AVE		69.2			85.7%
	BEST SN		40			100.0%
	NAT AVE		61.6			74.7%
	NAT TOP QTILE		-			88.5%



CHILD PROTECTION - TIME PERIODS

DEFINITION

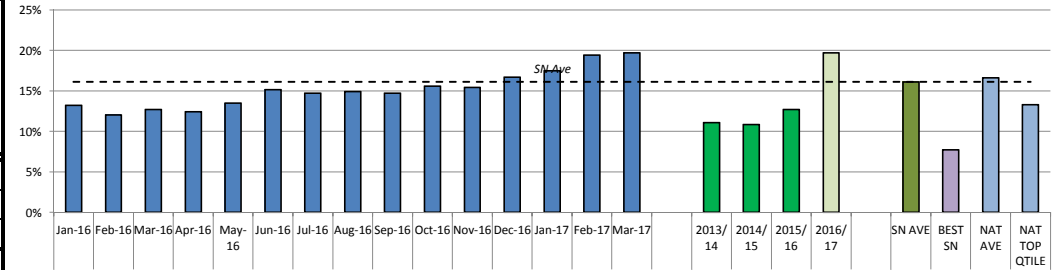
Child protection plans remain in force until the child is no longer considered at risk, moves out of the local authority area (in which case the receiving authority should convene its own child protection conference) or reaches the age of 18.

PERFORMANCE ANALYSIS

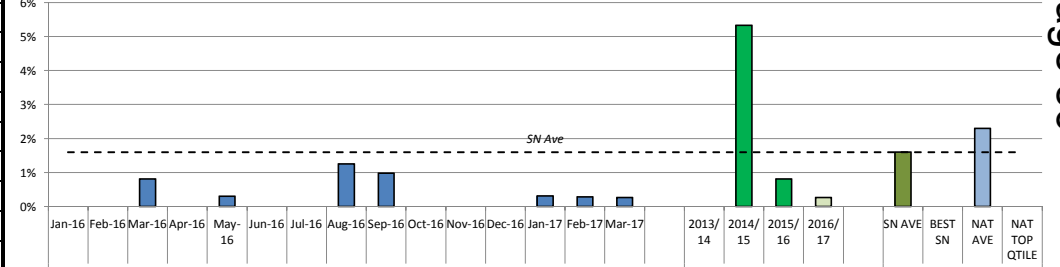
The data suggests that the services ability to reach a timely resolution for children at issue of risk continues to be good. This is likely to relate in large part to increasing numbers of children in care and subject of a legal proceeding. As last month, children on plans for a second and subsequent time, are relatively high (as compared to earlier this year). However those children supported through a plan for more than 2 years remains very low.

		5.9		5.1		5.11		5.12	
		No. of children becoming the subject of a CP plan for a 2nd or subsequent time -in 24 months (Rolling)	% children becoming the subject of a CP plan for a 2nd or subsequent time - in 24 months	No. of children becoming the subject of a CP plan for a 2nd or subsequent time - Ever (Rolling)	% children becoming the subject of a CP plan for a 2nd or subsequent time - Ever	No. of open CP plans lasting 2 years or more	% of open CP plans lasting 2 years or more	No. of CP plans lasting 2 years or more - ceased in period	% of CP plans lasting 2 years or more - ceased in period
IN MONTH PERFORMANCE	Jan-16			76 of 576	13.2%	0 of 369	0.0%	1 of 46	2.2%
	Feb-16			69 of 574	12.0%	0 of 398	0.0%	0 of 27	0.0%
	Mar-16			67 of 528	12.7%	3 of 369	0.8%	1 of 38	2.6%
	Apr-16	22 of 516	4.3%	64 of 516	12.4%	0 of 360	0.0%	3 of 44	6.8%
	May-16	25 of 494	5.1%	67 of 494	13.5%	1 of 332	0.3%	0 of 58	0.0%
	Jun-16	30 of 488	6.1%	74 of 488	15.2%	0 of 325	0.0%	1 of 44	2.3%
	Jul-16	33 of 469	7.0%	69 of 469	14.7%	0 of 310	0.0%	0 of 40	0.0%
	Aug-16	32 of 449	7.1%	67 of 449	14.9%	4 of 320	1.3%	0 of 30	0.0%
	Sep-16	27 of 408	6.6%	60 of 408	14.7%	3 of 305	1.0%	1 of 42	2.4%
	Oct-16	26 of 411	6.3%	64 of 411	15.6%	0 of 309	0.0%	3 of 34	8.8%
	Nov-16	28 of 435	6.4%	67 of 435	15.4%	0 of 326	0.0%	0 of 35	0.0%
	Dec-16	29 of 431	6.7%	72 of 431	16.7%	0 of 331	0.0%	0 of 25	0.0%
	Jan-17	34 of 412	8.3%	72 of 412	17.5%	1 of 322	0.3%	0 of 43	0.0%
Feb-17	35 of 417	8.4%	81 of 417	19.4%	1 of 354	0.3%	0 of 21	0.0%	
Mar-17	38 of 452	8.4%	89 of 452	19.7%	1 of 375	0.3%	0 of 30	0.0%	
ANNUAL TREND	2013/ 14		4.4%	45 of 406	11.1%				
	2014/ 15		4.0%	54 of 499	10.8%	23 of 432	5.3%	20 of 478	4.2%
	2015/ 16		4.7%	67 of 528	12.7%	3 of 369	0.8%	28 of 588	4.8%
	2016/ 17	38 of 452	8.4%	89 of 452	19.7%	1 of 375	0.3%	8 of 446	1.8%
LATEST BENCHMARKING	SN AVE				16.1%		1.6%		3.4%
	BEST SN				7.7%		0.0%		0.0%
	NAT AVE				16.6%		2.3%		3.7%
	NAT TOP QTILE				13.3%		0.0%		2.4%

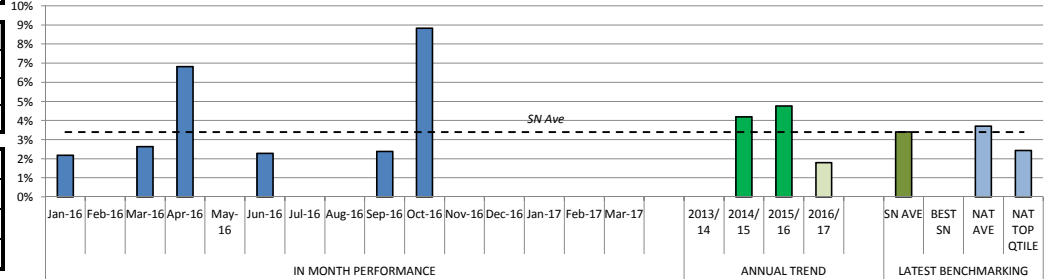
% children becoming the subject of a CP plan for a 2nd or subsequent time - Ever



% of open CP plans lasting 2 years or more



% CP plans lasting 2 years or more - ceased within period



CHILD PROTECTION - REVIEWS & VISITS

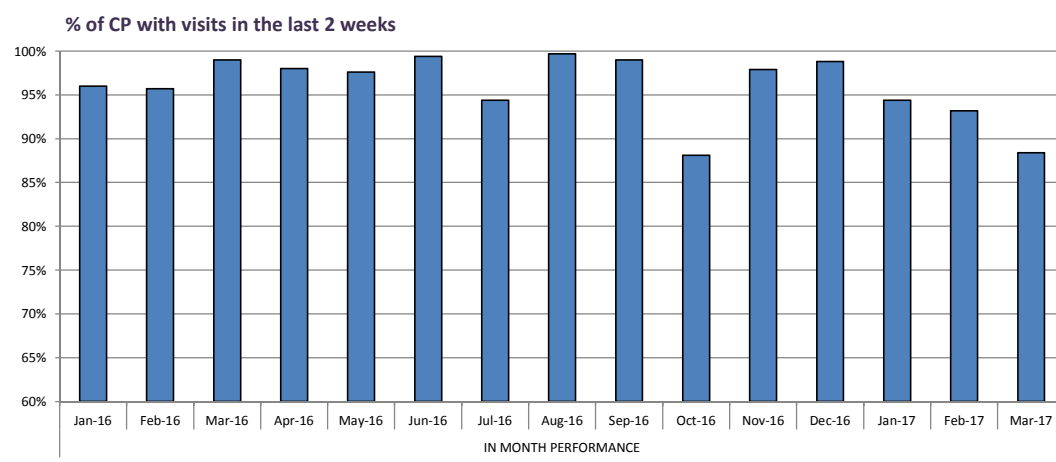
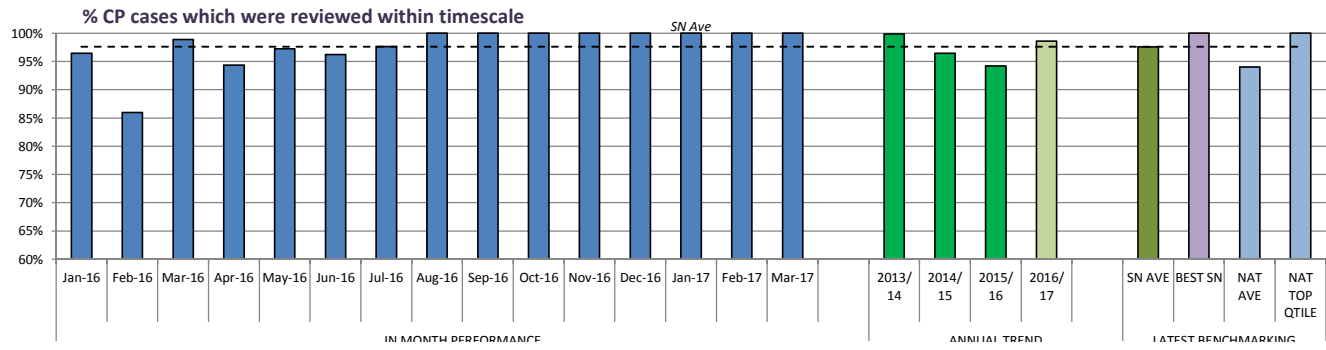
DEFINITION A child protection plan is reviewed after three months and at intervals of no more than six months thereafter. Local standards state that any child subject to a child protection plan should be visited at least every two weeks (this excludes children registered on a CPP for less than a week).

PERFORMANCE ANALYSIS

Performance in relation to both the timeliness of Review Case Conferences continues to be good maintaining 100% for eight months for reviews being achieved within timescale. This is reflective of increased management oversight and the embedding of these processes in practice.

CP visits are monitored using current data and by reviewing exceptions at the weekly performance meetings. Over the last 12 months performance has improved and has been maintained. The regular performance meetings will continue to review progress in this area to ensure that the positive progress made can be sustained and where visits are late then the reasons are fully understood and that there are clear measures in place to ensure that each child is seen in an appropriate timescale and that they are safe. The Head of Service will review the March data to ensure capacity is not impacting on childrens safety a report on the issues and action taken will be provided to the Deputy Director.

	5.13		5.15	
	No. of CP cases reviewed within timescale	% CP cases which were reviewed within timescale	No. of CP cases reviewed within timescale	% CP cases which were reviewed within timescale
IN MONTH PERFORMANCE	Jan-16	81 of 84	96.4%	96.0%
	Feb-16	49 of 57	86.0%	95.7%
	Mar-16	90 of 91	98.9%	99.0%
	Apr-16	100 of 106	94.3%	98.0%
	May-16	105 of 108	97.2%	97.6%
	Jun-16	76 of 79	96.2%	99.4%
	Jul-16	83 of 85	97.6%	94.4%
	Aug-16	57 of 57	100.0%	99.7%
	Sep-16	119 of 119	100.0%	99.0%
	Oct-16	60 of 60	100.0%	88.1%
	Nov-16	85 of 85	100.0%	97.9%
	Dec-16	43 of 43	100.0%	98.8%
	Jan-17	100 of 100	100.0%	94.4%
Feb-17	73 of 73	100.0%	93.2%	
Mar-17	95 of 95	100.0%	88.4%	
ANNUAL TREND	2013/ 14		99.8%	
	2014/ 15		96.5%	
	2015/ 16		94.2%	
	2016/ 17		98.6%	
LATEST BENCHMARKING	SN AVE		97.6%	
	BEST SN		100.0%	
	NAT AVE		94.0%	
	NAT TOP Q TILE		100.0%	



LOOKED AFTER CHILDREN

DEFINITION

Children in care or 'looked after children' are children who have become the responsibility of the local authority. This can happen voluntarily by parents struggling to cope or through an intervention by children's services because a child is at risk of significant harm.

PERFORMANCE ANALYSIS

The overall trend of admissions to care continues to rise. In the last five months we have seen a significant rise of children (stock) with the number of children leaving care being lower than those being admitted to care (flow). The overall rate for Rotherham remains significantly higher than that of our statistical neighbours. Outcomes are rarely improved for young people coming into care in adolescence who make up the most significant proportion of our care population. Work has commenced to develop a range of services that will address this such as an Edge of Care intervention team, Family Group Conferencing and an expanded Therapeutic Team. This will enable more adolescents to remain and/or return home. It is not unusual for numbers of LAC in an authority in intervention to rise as action is taken to address cases which have been drifting previously. The rise in the numbers of care proceedings in Rotherham is testimony to this happening locally. There is no feedback from the courts to suggest that any children are being brought before them unnecessarily.

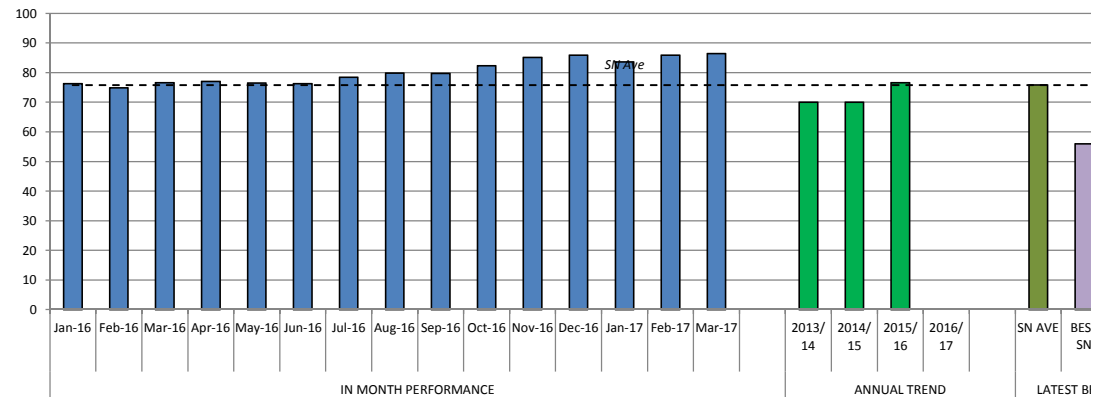
6.2	6.1	6.3	6.4
Rate of children looked after per 10K pop	Number of LAC	Admissions of children looked after	No. of children who have ceased to be LAC

IN MONTH PERFORMANCE	Jan-16	76.2	430	10	15
	Feb-16	74.8	422	19	9
	Mar-16	76.6	432	20	13
	Apr-16	77.0	434	17	17
	May-16	76.5	431	18	21
	Jun-16	76.3	430	18	19
	Jul-16	78.4	442	21	9
	Aug-16	79.8	450	30	22
	Sep-16	79.7	449	24	25
	Oct-16	82.3	464	30	15
	Nov-16	85.2	480	30	15
	Dec-16	85.9	484	21	17
	Jan-17	83.6	471	9	21
	Feb-17	85.9	484	26	14
	Mar-17	86.4	487	20	15

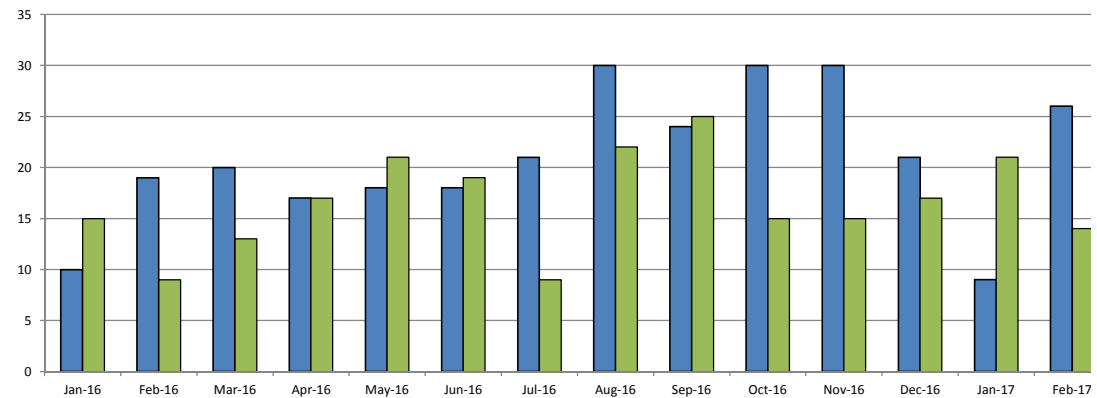
ANNUAL TREND	2013/ 14	70.0		147	136
	2014/ 15	70.0		175	160
	2015/ 16	76.6	432	208	192
	2016/ 17		484	264	210

LATEST BENCHMARKING	SN AVE	75.8			
	BEST SN	56.0			
	NAT AVE	60.0			
	NAT TOP Q TILE	-			

Rate of Looked After Children per 10K pop



Admissions and discharges from care



LOOKED AFTER CHILDREN - PLACEMENTS

DEFINITION A LAC placement is where a child has become the responsibility of the local authority (LAC) and is placed with foster carers, in residential homes or with parents or other relatives.

PERFORMANCE ANALYSIS

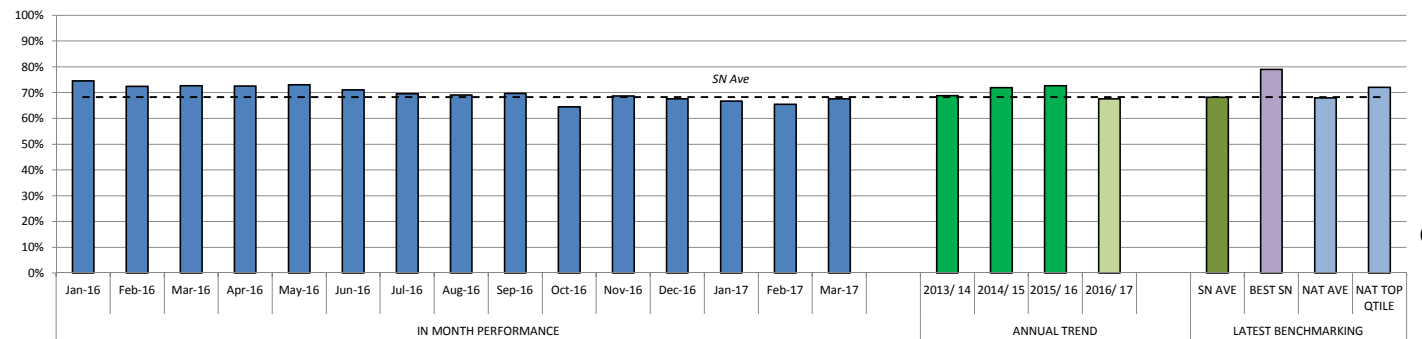
The March performance for children who have had three or more placement moves continues to improve, reducing to 11.3%, whilst it has reduced, it continues to be higher than all other benchmarks. Our target of reducing to less than 10% remains and is still achievable in the next financial year.

The number of children who experience a stable placement for over two years is just below that of our statistical neighbours and the national average. These two statistics could suggest that we need to improve our preventative work to reduce initial placement disruption. If a child experiences a disruption they are more likely to disrupt again. It will also be important to consider the impact of our return home programme our wish to return children to live in rotherham which will increase the number of children experiencing placement moves. There is good progress being made in reducing the numbers of children placed in residential care. While the change for them signifies a disruption, and will have some impact on these performance measures, they are only being moved if the new arrangement is demonstrably in their best long term interests. The Fostering Allowance and Support Scheme has recently been approved which should increase the growth of in-house foster carers. This in turn will support placement stability - a recent audit evidenced that over the past six months 18 Independent Fostering Agency placements disrupted whilst only four in-house placements disrupted over the same period. Whilst there can be no direct correlation more in-house placements should support placement stability. In addition the proposed expansion of the in-house LAC therapy team should also ensure greater support to carers and intern the stability of the placement.

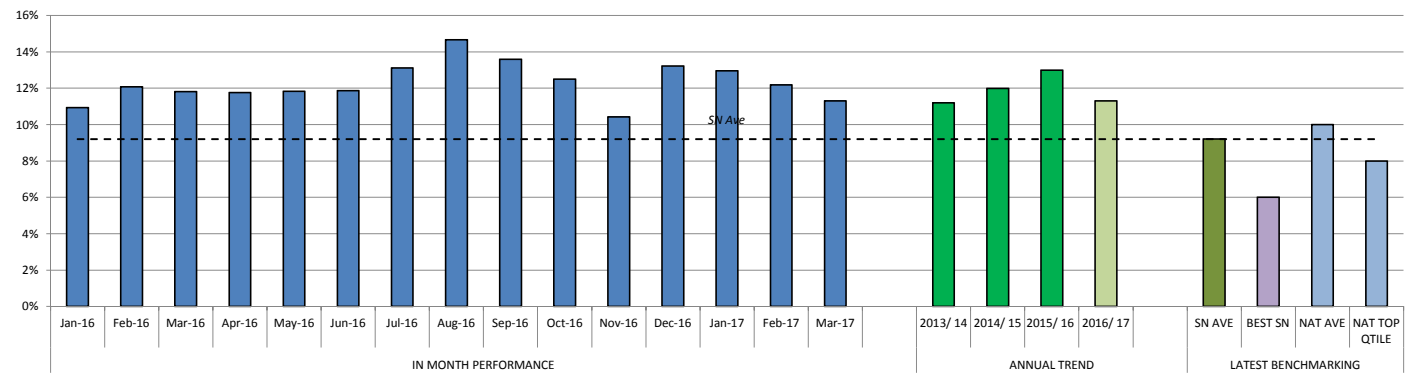
Data Note: March percentage for 'long term LAC placements stable for at least 2 years' shows as lower than expected, due to some data cleansing which has taken place. The system shows in some cases that a placement has ended and then re-started when in fact the child is still in the same placement in the system.

	8.1		8.2		
	No. of long term LAC placements stable for at least 2 years	% long term LAC placements stable for at least 2 years	No. of LAC who have had 3 or more placements - rolling 12 months	% LAC who have had 3 or more placements - rolling 12 months	
IN MONTH PERFORMANCE	Jan-16	108 of 145	74.5%	47 of 430	10.9%
	Feb-16	108 of 149	72.5%	51 of 422	12.1%
	Mar-16	109 of 150	72.7%	51 of 432	11.8%
	Apr-16	103 of 142	72.5%	51 of 434	11.8%
	May-16	103 of 141	73.0%	51 of 431	11.8%
	Jun-16	98 of 138	71.0%	51 of 430	11.9%
	Jul-16	98 of 141	69.5%	58 of 442	13.1%
	Aug-16	98 of 142	69.0%	66 of 450	14.7%
	Sep-16	99 of 142	69.7%	61 of 449	13.6%
	Oct-16	136 of 211	64.5%	58 of 464	12.5%
	Nov-16	101 of 147	68.7%	50 of 480	10.4%
	Dec-16	98 of 145	67.6%	64 of 484	13.2%
	Jan-17	94 of 141	66.7%	61 of 471	13.0%
Feb-17	93 of 142	65.5%	59 of 484	12.2%	
Mar-17	98 of 145	67.6%	55 of 487	11.3%	
ANNUAL TREND	2013/ 14	108 of 157	68.8%	44 of 393	11.2%
	2014/ 15	110 of 153	71.9%	49 of 409	12.0%
	2015/ 16	109 of 150	72.7%	56 of 431	13.0%
	2016/ 17	98 of 145	67.6%	55 of 487	11.3%
LATEST BENCHMARKING	SN AVE		68.2%		9.2%
	BEST SN		79.0%		6.0%
	NAT AVE		68.0%		10.0%
	NAT TOP QTILE		72.0%		8.0%

% long term LAC placements stable for at least 2 years



% LAC who have had 3 or more placements - rolling 12 months



LOOKED AFTER CHILDREN - REVIEWS & VISITS

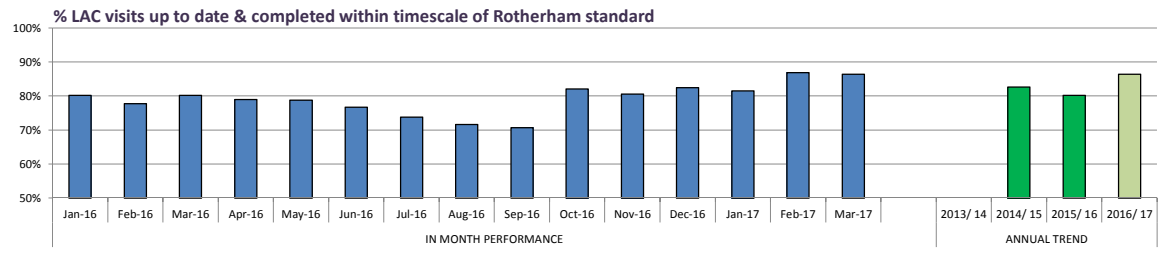
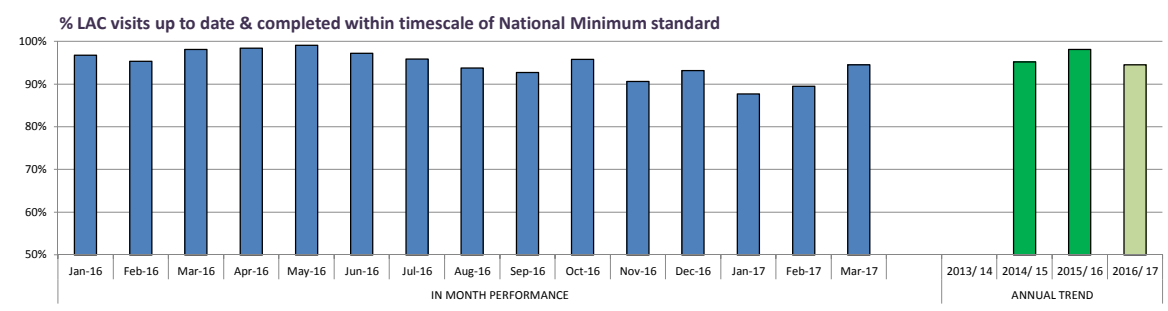
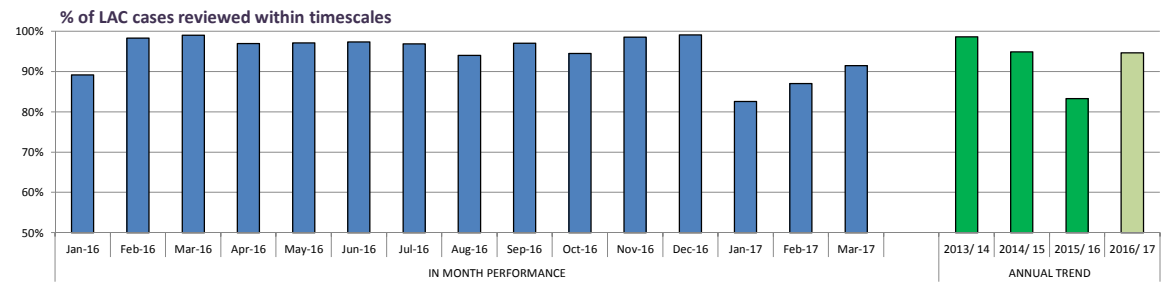
DEFINITION The purpose of LAC review meeting is to consider the plan for the welfare of the looked after child and achieve Permanence for them within a timescale that meets their needs. The review is chaired by an Independent Reviewing Officer (IRO)

The LA is also responsible for appointing a representative to visit the child wherever he or she is living to ensure that his/her welfare continues to be safeguarded and promoted. The minimum national timescales for visits is within one week of placement, then six weekly until the child has been in placement for a year and the 12 weekly thereafter. Rotherham have set a higher standard of within first week then four weekly thereafter until the child has been permanently matched to the placement.

PERFORMANCE ANALYSIS Current performance on LAC visits are monitored by the Head of Service daily and at weekly performance meetings. Any visit exceeding statutory minimum timescales is examined on a child by child basis to ensure they have been subsequently visited and to ensure the reason for lateness is understood. In addition to statutory minimum standards, Rotherham has set a local standard that exceeds the National one, performance in relation to local standard is still not good enough and will continue to be the focus of sustained management attention. There are some children in care however who are visited more often than the Rotherham standard according to their need at any particular time. There is now a clear process in place for social workers to ensure the Rotherham standard is proportionate to need but remains within the national standard. This will ensure that those LAC in greatest need receive appropriate levels of social workers support. LAC cases reviewed on time remains good.

LAC visits on time remain an area of concern due to the high turnover of staff. This should improve after this latest round of recruitment which is starting to see a move to increase the ratio of permanent staff

		6.7		6.15		6.16			
		No. LAC cases reviewed within timescales		% of LAC cases reviewed within timescales		% LAC visits up to date & completed within timescale of National Minimum standard		% LAC visits up to date & completed within timescale of Rotherham standard	
IN MONTH PERFORMANCE	Jan-16	74	of 83	89.2%	96.8%	80.2%			
	Feb-16	114	of 116	98.3%	95.3%	77.8%			
	Mar-16	104	of 105	99.0%	98.1%	80.2%			
	Apr-16	96	of 99	97.0%	98.4%	78.9%			
	May-16	101	of 104	97.1%	99.1%	78.8%			
	Jun-16	111	of 114	97.4%	97.2%	76.7%			
	Jul-16	93	of 96	96.9%	95.9%	73.8%			
	Aug-16	79	of 84	94.0%	93.8%	71.6%			
	Sep-16	98	of 101	97.0%	92.7%	70.7%			
	Oct-16	188	of 199	94.5%	95.8%	82.0%			
	Nov-16	133	of 135	98.5%	90.6%	80.5%			
	Dec-16	107	of 108	99.1%	93.2%	82.4%			
	Jan-17	76	of 92	82.6%	87.7%	81.5%			
Feb-17	74	of 85	87.1%	89.5%	86.8%				
Mar-17	118	of 129	91.5%	94.5%	86.4%				
ANNUAL TREND	2013/ 14			98.6%					
	2014/ 15			94.9%	95.2%	82.6%			
	2015/ 16			83.3%	98.1%	80.2%			
	2016/ 17			94.7%	94.5%	86.4%			



LOOKED AFTER CHILDREN - HEALTH

DEFINITION

Local authorities have a duty to safeguard and to promote the welfare of the children they look after, therefore the local authority should make arrangements to ensure that every child who is looked after has his/her health needs fully assessed and a health plan clearly set out.

PERFORMANCE ANALYSIS

Performance in relation to health and dental assessments was poor and has been the focus of concerted joint effort and has continued to show improvement. (care is needed in considering month on month performance as the cohort numbers are low). Close monitoring means that any dips in performance are understood. The overall number of health assessments completed remains at a good level and the number of initial health assessments has risen. This is due to the access health services have to the new case management system that has improved the administration of the process. From our reviews we know that in the main, those not having health or dental checks are the older young people who are recorded as 'refuses'. This is no longer going to be accepted on face value and we will be actively exploring with health colleagues how we can promote the reviews as something useful and 'young person friendly'. This will focus on the things that interest most young people such as weight, hair and skin as well as other aspects of health. We will also make sure that we are creative in thinking about how we can actively engage young people and 'reach out' to them rather than expecting them to attend a standard clinic appointment. Performance will continue to be very closely monitored. Health colleagues have identified that early contact in a non-clinical setting may prove to be the best way to sustain young people engagement in the process. As a result they will be running a pilot whereby they visit newly admitted young people in their placement to support them to attend their health assessment. Joint intervention between Health and LAC Head of Service to support locality teams to better performance in respect of Initial Health Assessments.

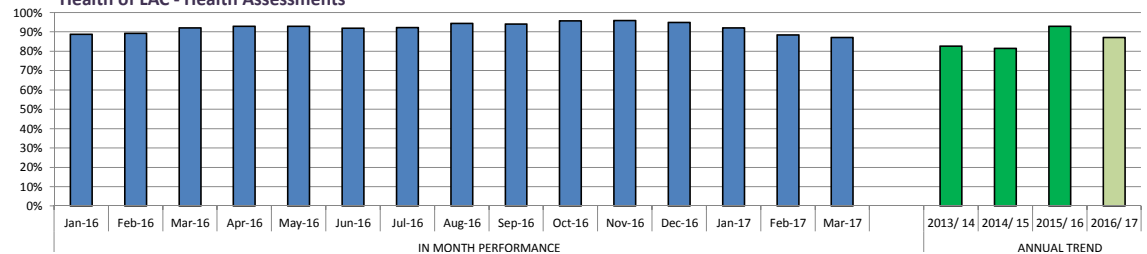
	6.9	6.1	6.11	
	Health of LAC - Health Assessments	Health of LAC - Dental Assessments	Health of LAC - No. Initial Health Assessments In Time	Health of LAC - % Initial Health Assessments In Time

IN MONTH PERFORMANCE		6.9	6.1	6.11	
		Health of LAC - Health Assessments	Health of LAC - Dental Assessments	Health of LAC - No. Initial Health Assessments In Time	Health of LAC - % Initial Health Assessments In Time
	Jan-16	88.7%	70.5%	0 of 12	0.0%
	Feb-16	89.3%	64.7%	4 of 18	22.2%
	Mar-16	92.1%	86.6%	3 of 10	30.0%
	Apr-16	92.9%	65.3%	0 of 14	0.0%
	May-16	92.8%	67.2%	3 of 15	20.0%
	Jun-16	91.8%	69.9%	4 of 10	40.0%
	Jul-16	92.2%	71.4%	6 of 16	37.5%
	Aug-16	94.3%	71.3%	2 of 10	20.0%
	Sep-16	94.0%	70.6%	2 of 10	20.0%
	Oct-16	95.7%	69.5%	1 of 11	9.1%
	Nov-16	95.9%	69.1%	2 of 20	10.0%
	Dec-16	94.8%	68.6%	3 of 24	12.5%
Jan-17	92.1%	63.8%	0 of 28	0.0%	
Feb-17	88.4%	62.3%	6 of 16	37.5%	
Mar-17	87.1%	62.7%	3 of 7	42.9%	

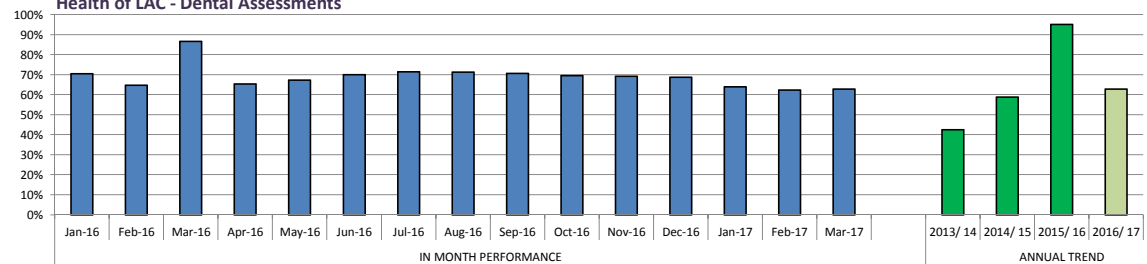
ANNUAL TREND		6.9	6.1	6.11	
	2013/ 14	82.7%	42.5%		19.2%
	2014/ 15	81.4%	58.8%		20.0%
	2015/ 16	92.8%	95.0%		8.4%
2016/ 17	87.1%	62.7%		17.7%	

LATEST BENCHMARKING		6.9	6.1	6.11	
	SN AVE				
	BEST SN				
	NAT AVE				
NAT TOP QTILE					

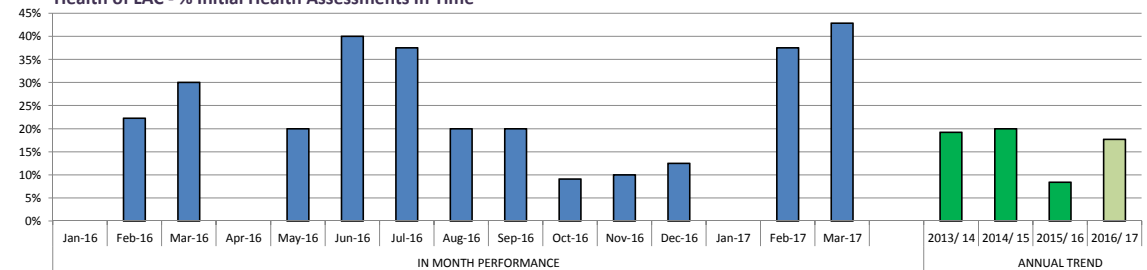
Health of LAC - Health Assessments



Health of LAC - Dental Assessments



Health of LAC - % Initial Health Assessments In Time

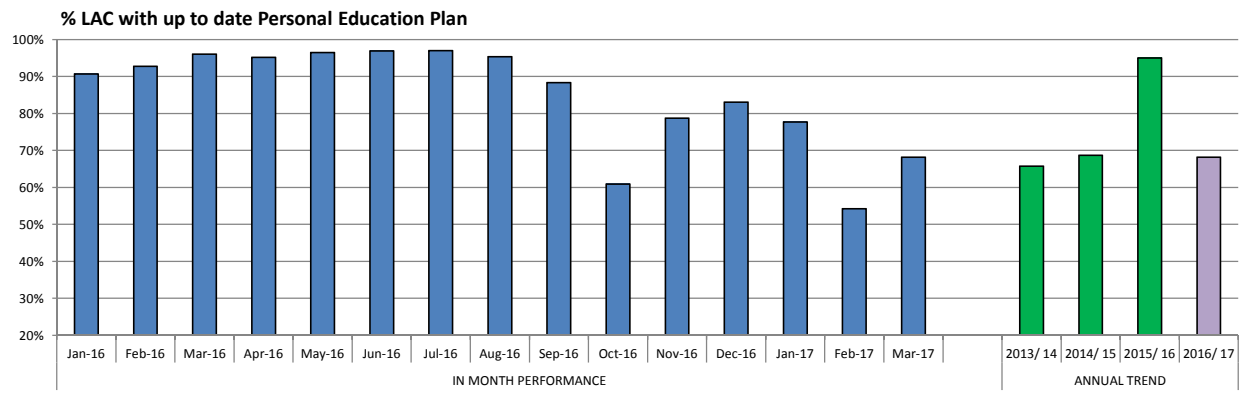
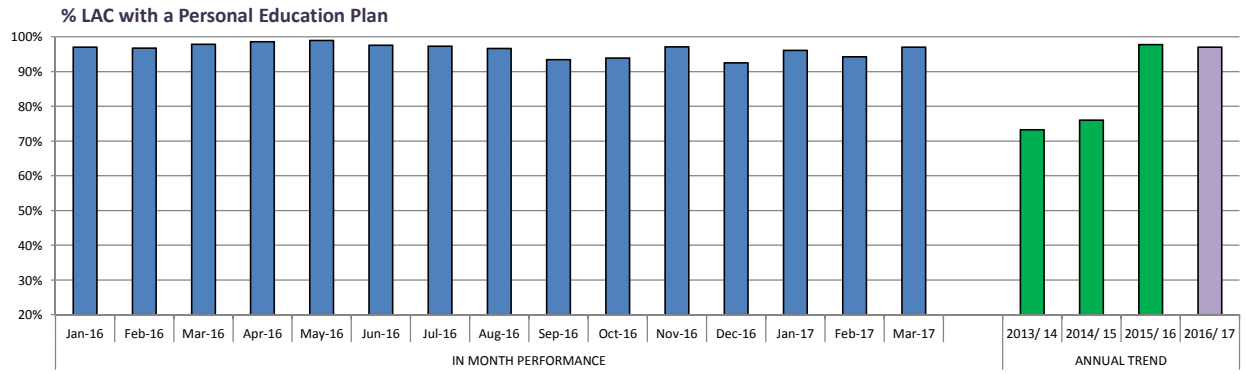


LOOKED AFTER CHILDREN - PERSONAL EDUCATION PLANS

DEFINITION A personal education plan (PEP) is a school based meeting to plan for the education of a child in care. The government have made PEPs a statutory requirement for children in care to help track and promote their achievements.

PERFORMANCE ANALYSIS Prior to September 2015 PEPs were in place for compulsory school-age children only. PEPs are now in place for LAC aged two to their 18th birthday. The proportion of children with an up-to-date PEP is still low. This has been caused by authorisation delays due to long term sickness absence of the Virtual Head, a solution has now been put in place this is now been rectified. The focus is now shifting to quality to address the numbers of children and young people who are not in full time education and those whose school place is known to be fragile. The virtual school governing body will take responsibility for driving this improvement area. Exception reporting has been provided for the children who are without an up to date PEP.

		6.12		6.13	
		Number of Eligible LAC with a Personal Education Plan	% LAC with a Personal Education Plan	Number of LAC with up to date Personal Education Plan	% LAC with up to date Personal Education Plan
IN MONTH PERFORMANCE	Jan-16	260 of 268	97.0%	243 of 268	90.7%
	Feb-16	267 of 276	96.7%	256 of 276	92.8%
	Mar-16	272 of 278	97.8%	267 of 278	96.0%
	Apr-16	283 of 287	98.6%	273 of 287	95.1%
	May-16	282 of 285	98.9%	275 of 285	96.5%
	Jun-16	282 of 289	97.6%	280 of 289	96.9%
	Jul-16	287 of 295	97.3%	286 of 295	96.9%
	Aug-16	287 of 297	96.6%	283 of 297	95.3%
	Sep-16	255 of 273	93.4%	241 of 273	88.3%
	Oct-16	216 of 230	93.9%	140 of 230	60.9%
	Nov-16	233 of 240	97.1%	189 of 240	78.8%
	Dec-16	235 of 254	92.5%	211 of 254	83.1%
	Jan-17	245 of 255	96.1%	198 of 255	77.6%
Feb-17	245 of 260	94.2%	141 of 260	54.2%	
Mar-17	259 of 267	97.0%	182 of 267	68.2%	
ANNUAL TREND	2013/ 14		73.3%		65.7%
	2014/ 15		76.0%		68.7%
	2015/ 16		97.8%		95.0%
	2016/ 17		97.0%		68.2%
LATEST BENCHMARKING	SN AVE				
	BEST SN				
	NAT AVE				
	NAT TOP QTILE				



CARE LEAVERS

DEFINITION A care leaver is defined as a person aged 25 or under, who has been looked after away from home by a local authority for at least 13 weeks since the age of 14; and who was looked after away from home by the local authority at school-leaving age or after that date. Suitable accommodation is defined as any that is not prison or bed and breakfast.

PERFORMANCE ANALYSIS

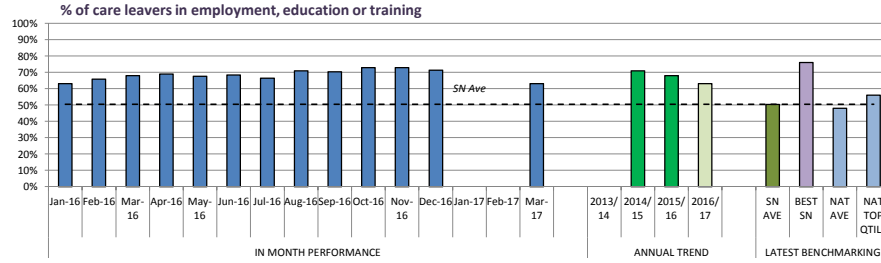
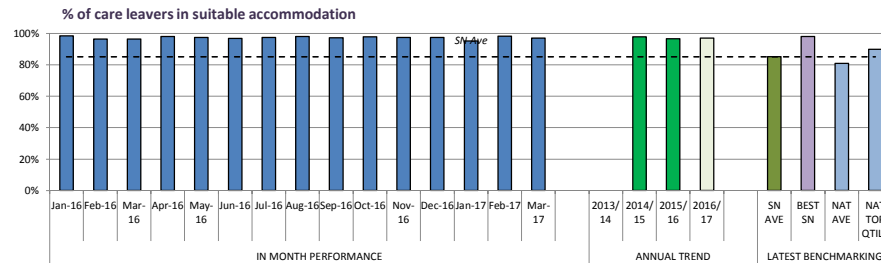
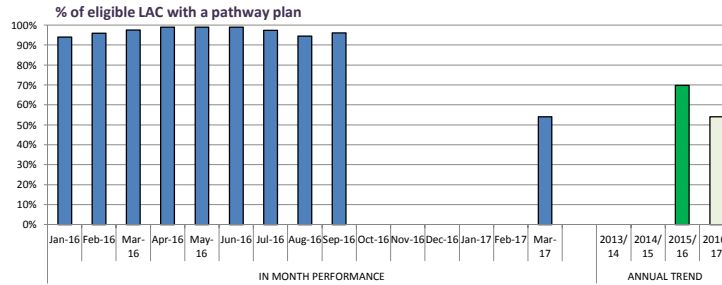
See note below. Team managers continue to report performance at fortnightly performance meetings so that compliance can be assured.

DATA NOTE: Care Leavers information was not part of the automated data migration therefore service has been manually inputting the full cohort information. Monthly monitoring via Liquid Logic has now been re-established from March 17 onwards. Any data provided between Oct 16 & Feb 17 has been supplied from the highlight reports that team managers provide for the fortnightly performance meetings.

		7.1	7.2	7.3	7.4
		Number of care leavers	% of eligible LAC with a pathway plan	% of care leavers in suitable accommodation	% of care leavers in employment, education or training
IN MONTH PERFORMANCE	Jan-16	198	93.9%	98.5%	63.1%
	Feb-16	196	95.9%	96.4%	65.8%
	Mar-16	197	97.5%	96.5%	68.0%
	Apr-16	192	99.0%	97.9%	68.9%
	May-16	188	98.9%	97.3%	67.6%
	Jun-16	187	98.9%	96.8%	68.5%
	Jul-16	185	97.3%	97.3%	66.5%
	Aug-16	200	94.5%	98.0%	71.0%
	Sep-16	201	96.0%	97.1%	70.3%
	Oct-16	221		97.8%	73.0%
	Nov-16	223	Unavailable due to data not being migrated	97.3%	73.0%
	Dec-16	223		97.3%	71.3%
	Jan-17	223	95.1%	Unavailable - data not migrated	
	Feb-17	223	98.2%		
Mar-17	223	54.0%	96.9%	63.2%	

ANNUAL TREND	2013/ 14				
	2014/ 15	183		97.8%	71.0%
	2015/ 16	197	69.8%	96.5%	68.0%
	2016/ 17	223	54.0%	96.9%	63.2%

LATEST BENCHMARKING	SN AVE			85.1%	50.4%
	BEST SN			98.0%	76.0%
	NAT AVE			81.0%	48.0%
	NAT TOP QTILE			90.0%	56.0%



ADOPTIONS

DEFINITION

Following a child becoming a LAC, it may be deemed suitable for a child to become adopted which is a legal process of becoming a non-biological parent. The date it is agreed that it is in the best interests of the child that they should be placed for adoption is known as their 'SHOBPA'. Following this a family finding process is undertaken to find a suitable match for the child based on the child's needs, they will then be matched with an adopter(s) followed by placement with their adopter(s). This adoption placement is monitored for a minimum of 10 weeks and assessed as stable and secure before the final adoption order is granted by court decision and the adoption order is made .

Targets for measures A1 and A2 are set centrally by government office.

PERFORMANCE ANALYSIS

Performance each month can vary significantly given the size of the cohort which is always very small.

Given the small numbers it is most useful to look at a rolling 12 months than a month snapshot and overall performance in this area over the last three years has shown an improving trend. Importantly, all children awaiting adoption are reviewed in the fortnightly performance meeting and the reasons for delay examined and understood. The work of the new 'permanence' team which has been in place since January 2016 is really starting to show impact in terms of both reducing the length of care proceedings and ensuring timely matching and placing of younger children with prospective adopters. The good quality of the work of this team is attracting regular positive feedback from the courts and the impact on outcomes for children is tangible.

Data Note: Taken from manual tracker. Data requires inputting into LCS

		9.1	9.2	9.3
Number of adoptions	Number of adoptions completed within 12 months of SHOBPA	% adoptions completed within 12 months of SHOBPA	Av. No. days between a child becoming LAC & having a adoption placement (A1) (rolling yr.)	Av. No. days between placement order & being matched with adoptive family (A2) (rolling yr.)

IN MONTH PERFORMANCE	Jan-16	3	0	0%	368.0	159.5
	Feb-16	7	7	100%	348.4	141.7
	Mar-16	4	2	50%	338.4	137.9
	Apr-16	2	1	50%	362.5	145.5
	May-16	2	0	0%	546.8	213.3
	Jun-16	1	0	0%	500.4	197.0
	Jul-16	2	2	100%	430.1	161.8
	Aug-16	2	1	50%	395.7	150.7
	Sep-16	3	2	66%	398.3	142.4
	Oct-16	2	2	100%	372.3	138.6
	Nov-16	4	1	25%	354.3	143.4
	Dec-16	1	0	0%	335.7	221.3
	Jan-17	9	3	33%	368.8	211.0

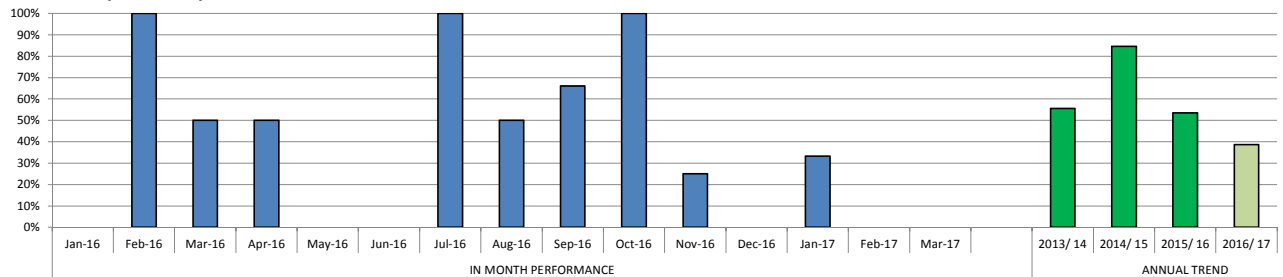
ANNUAL TREND	2013/ 14			55.6%	661.0	315.0
	2014/ 15			84.6%	417.5	177.3
	2015/ 16	43	23	53.5%	338.4	137.9
	2016/ 17	31	12	38.7%	404.0	232.9

LATEST BENCHMARKING	SN AVE				546.5	220.6
	BEST SN				336.0	47.0
	NAT AVE				593.0	223.0
	NAT TOP QTILE				520.0	172.0

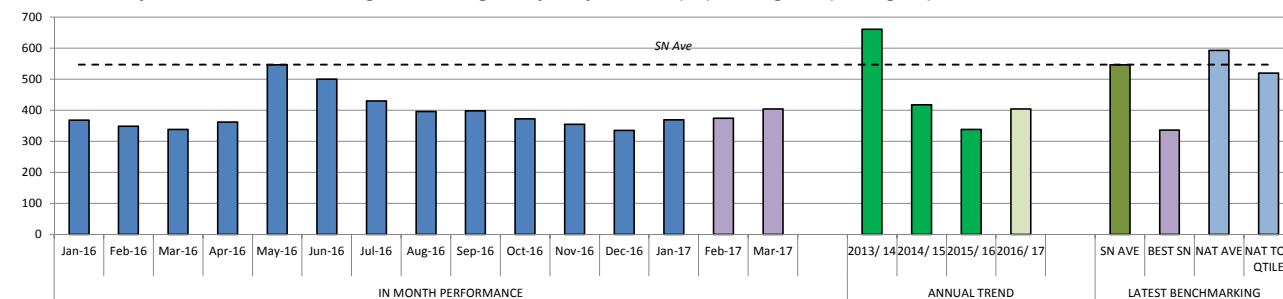
*Annual Trend relates to current reporting year April to Mar - not rolling year

**adoptions have a 28 day appeal period so any children adopted in the last 28 days are still subject to appeal

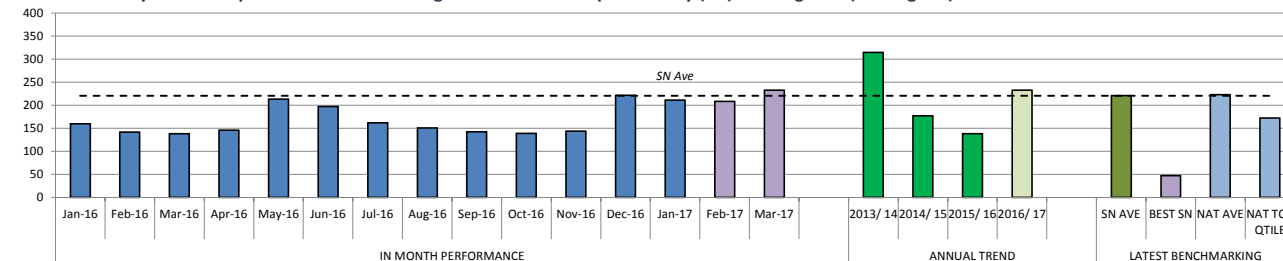
% adoptions completed within 12 months of SHOBPA



Av. No. days between a child becoming LAC & having a adoption placement (A1) - Rolling Year (low is good)



Av. No. days between placement order & being matched with adoptive family (A2) - Rolling Year (low is good)



CASELOADS

DEFINITION Caseload figures relate to the number of children the social worker is currently the lead key worker. Fieldwork teams relate to frontline social care services including the four Duty Teams, none Long Term CIN Teams, two LAC teams and the CSE Team. All averages are calculated on a full time equivalency basis, based on the number of hours the worker is contracted to work.

PERFORMANCE ANALYSIS

Caseloads are all within acceptable limits. Performance meetings continue to examine caseloads in detail. All those over 18 are examined and the reasons explained. For example some senior social workers have students allocated to them and the student caseload shows under the supervisor's name.

The impact of rising LAC has been a rise in the number of average cases per SW to 11 however the maximum is now at 17 well within accepted limits. A management review of all children with a section 20 legal status has identified the potential to return home for up to 15 children. If this is achieved, combined with new edge of care interventions, this will result in a significant decrease in workload.

Reducing the CIN demand at the front door combined with an introduction of 'one week in five' rather than 'one week in four' duty rota system has seen a month on month reduction in average caseloads from 26 to 13.3 Managers report feeling the benefit of this on practice and this has been validated by the recent Ofsted monitoring visit where the emergence of good social work practice was found .

The 'maximum and average caseload' within safeguarding teams continues to be good. This is reviewed weekly and managers are ensuring that cases transfer, close or step down in a timely manner.

	10.1	10.2	10.3	10.4	10.5	10.6	10.7	10.8	10.9	
	Maximum caseload of social workers in key Safeguarding Teams	Maximum caseload of social workers in LAC Teams	Av. no. cases in LAC Teams	Av. no. cases in Duty Teams	Av. no. cases in CIN North Teams	Av. no. cases in CIN Central Teams	Av. no. cases in CIN South Teams	Av. no. cases in Children's Disability Team	Av. no. cases in Children Sexual Exploitation Team	
IN MONTH PERFORMANCE	Jan-16	29	18	11.7	17.2	14.7	19.2	15.7	14.9	4.9
	Feb-16	30	18	12.8	11.3	17.1	16.6	17.8	13.5	4.4
	Mar-16	23	18	12.6	13.7	16.6	17.9	17.3	14.9	5.4
	Apr-16	25	17	13.2	13.8	17.8	16.3	17.1	15.9	5.1
	May-16	27	17	12.7	15.8	18.1	17.2	15.1	15.8	4.4
	Jun-16	34	18	11.8	18.9	18.2	17.6	14.2	15.9	5.3
	Jul-16	28	15	13.7	19.5	18.8	16.7	14.2	17.0	5.9
	Aug-16	32	15	12.7	18.9	17.8	16.1	15.7	16.3	4.5
	Sep-16	36	15	12.0	26.0	18.0	16.0	14.0	14.0	4.0
	Oct-16	Oct & Nov 16 data unavailable due to data migration								
	Nov-16	Oct & Nov 16 data unavailable due to data migration								
	Dec-16	36	19	12.5	15.0	14.7	14.5	15.5	15.6	3.4
	Jan-17	36	18	12.9	15.8	15.2	15.7	17.9	16.9	2.8
Feb-17	25	17	11.0	13.7	16.7	16.4	18.1	16.0	2.0	
Mar-17	30	17	11.6	13.3	17.4	17.4	18.3	15.4	1.0	

ANNUAL TREND	2013/ 14	2014/ 15	2015/ 16	2016/ 17
			29.1	30.0
			19.2	17.0
			14.1	11.6
			15.8	13.3
			16.8	17.4
			18.0	17.4
			15.8	18.3
			19.1	15.4
			5.7	1.0

