IMPROVING LIVES SELECT COMMISSION

Venue: Town Hall, Moorgate Date: Tuesday, 17th July, 2018

Street, ROTHERHAM.

S60 2TH

Time: 5.30 p.m.

AGENDA

There will be a pre-briefing for all members of the Improving Lives Select Commission at 4.00 p.m.

- 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 5th June, 2018 (Pages 1 11)

For Discussion

- 8. Domestic Abuse Update (Pages 12 30)
- 9. Children & Young People's Services (CYPS) 2017/2018 Year End Performance (Pages 31 103)
- Children and Social Work Act 2017 Implications for Practice (CSW Act 2017) (Pages 104 - 114)
- 11. Improving Lives Select Commission Work Programme and Prioritisation (Pages 115 119)

For Information

- 12. Spotlight Review following the Ofsted Inspection of Adult Community Learning (Pages 120 125)
- 13. Date and time of the next meeting

Tuesday, 18th September, 2018, commencing at 5.30 p.m.

Improving Lives Select Commission membership 2018/19:-

Chair – Councillor Cusworth Vice-Chair – Councillor Brookes

Councillors Allcock, Beaumont, Clark, Elliot, Hague, Ireland, Jarvis, Khan, Marles. Marriott, Pitchley, Price, Senior, Short and Julie Turner

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

Spa Komp.

Sharon Kemp, Chief Executive.

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IMPROVING LIVES SELECT COMMISSION 5th June, 2018

Present:- Councillor Cusworth (in the Chair); Councillors Allcock, Brookes, Clark, Elliot, Ireland, Jarvis, Khan, Marles, Pitchley, Price, Senior, Short and Julie Turner.

Councillor Watson was in attendance at the invitation of the Chair.

Apologies for absence were received from Councillors Beaumont, Hague and Jones (GROW).

The webcast of the Council Meeting can be viewed at: https://rotherham.public-i.tv/core/portal/home

1. DECLARATIONS OF INTEREST

Councillor Senior declared a non-pecuniary interest in Minute No. 137 (manager of a charity that works with post-abuse survivors and their families).

2. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no members of the public present at the meeting. The member of the press did not wish to ask any questions.

3. COMMUNICATIONS

Councillor Clark

The Chair wished to place on record the Select Commission's thanks to Councillor Clark for her work as Chair for the past 2 years and also her personal thanks for her help, support and mentoring.

New Members

The Chair welcomed Councillors Alcock and Price to their first meeting of the Select Commission.

Performance Sub-Group

Select Commission Members would be emailed seeking expressions of interest to be part of the newly established Performance Sub-Group.

Member Development

A training session was being held on Thursday, 7th June 9.30 a.m.-12.30 p.m. on Domestic Abuse Awareness a subject that the Commission had taken a great interest in in terms of its previous work programme.

Corporate Parenting Panel

It was noted that Councillor Jarvis was now a member of the above Panel and would be reporting back to the Select Commission.

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4. MINUTES OF THE PREVIOUS MEETING HELD ON 24TH APRIL, 2018

Consideration was given to the minutes of the previous meeting of the Improving Lives Select Commission, held on 24th April, 2018 and matters arising from those minutes.

Arising from Minute No. 129 (Ofsted Single Inspection Framework Recommendations), it was noted that a copy of the 8 specific additional actions for the Looked After Children Service had not been circulated to the Select Commission as agreed.

Resolved:- (1) That the minutes of the previous meeting of the Improving Lives Select Commission, held on 24th April, 2018, be approved as a correct record, for signature by the Chairman.

(2) That the Assistant Director Early Help & Family Engagement ensure that the Select Commission was provided with the 8 specific additional actions for the Looked After Children Service had not been circulated to the Select Commission as agreed at the previous meeting.

5. BARNARDO'S REACHOUT SERVICE UPDATE

In accordance with Minute No. 62 of the meeting held on 4th July, 2017, an update was submitted of the key areas of service delivery and responses to the recommendations of the meeting. The full ReachOut report March 2018 was submitted as Appendix 1 together with the summary report of the Year 2 evaluation of the Service undertaken by the University of Bedfordshire (Appendix 2).

Marie Harris, Barnardos, and Di McLeish, Independent Evaluator, was also present to answer any questions.

The report highlighted:-

- The number of individual referrals
- Train the Trainer, 'Real Love Rocks' (RLR)
- Work with Schools
- Outreach
- Taxi Driver Training
- Lesbian, Gay, Bisexual, Transgender Queer (LGBTQ) Safe Zone
- Engagement with Children from Black, Asian, Minority Ethnic and

Di McLeish gave a brief resume of the evaluation work that had taken place capturing the outcomes for/the feedback from young people which had resulted in a database of over 1,000 participants. ReachOut was delivered in most of Rotherham's primary and secondary schools with very positive feedback from both students and teachers. The Train the Trainer programme had been developed in order to support staff within schools to deliver the programme themselves and make the project more

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sustainable. The recent evaluation had shown that approximately 50 members of staff had participated in the training.

Discussion ensued with the following issues raised:-

- There was no waiting list of schools as all schools who had requested Train the Trainer training had been addressed. The schools not engaged with the initiative had chosen not to participate. The majority of schools had been visited over the last 2 years and all those that were interested in taking part had completed it
- There had been a decrease in referrals from the Education sector from 24% in 2016 to 17% in 2017. Nationally there were quite low levels of referrals from schools which would suggest that parents went to their GP, CYPS or may be referred as part of a multi-agency arrangement. When Barnardos carried out the Real Love Rocks work in schools in Year 1 greater number of referrals had been received; what was being seen now was the expected level of referrals as well as the impact of the work by Early Help
- There was a lack of referrals from health providers but Rotherham was not unique in this situation
- It was hoped to include a CAMHS Worker in the Barnardo's building
- 2 members of the Commissioning Team would be based within the CCG one day a week
- A Community Engagement Worker had been employed to work with the Black, Asian, Minority Ethnic and Refugee (BAMER) community and supporting efforts to forge links between the community and Barnardo's. It was also planned to apply for internal funding from Barnardo's to develop the work further
- ReachOut had carried out a lot of work with the Roma community which had been identified as a key priority earlier on
- The roll out of the Real Love Rocks initiative was very work intensive so there had not been opportunity to pursue or ascertain why a school had not engaged with the initiative
- The lack of engagement by some schools could be looked at in the next phase of evaluation
- There had been relatively few self-referrals and referrals from family members but it was difficult to ascertain the reasons for this

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- ReachOut had attempted to address the issue of self-referrals by maintaining a presence in the community and undertaking outreach work (via a bus). Whilst the engagement had been successful it had not resulted in greater number of self-referrals
- Part of the issue was the definition of a self-referral which required 1:1 work. There were many young people who had informal support from ReachOut which was not counted as 1:1 support
- If Ward Members were notified of where the bus was going to be they could encourage families to visit
- Generic publicity material had been produced and displayed in the first year. In the second year efforts had been more targeted
- Barnardos were very clear from the outset when they spoke to children that the information may be shared as appropriate. Multiagency meetings took place to share information and intelligence
- Managers and practitioners were part of the Police Intelligence Meeting as well as 2 ReachOut Workers based within the Evolve Team

Resolved:- (1) That the Barnardo's ReachOut Service update be noted.

- (2) That a further update be submitted in 6 months including the University of Bedfordshire's independent evaluation of the project.
- (3) That the full evaluation be submitted to the December 2018/January 2019 meeting of the Select Commission.
- (4) That discussions take place with the Young Inspectors with a view to them carrying out work on the areas where the profiles and awareness were not as good as others or where the engagement with schools had not been as effective.
- (5) That discussions take place with the Assistant Director for Schools with regard to including information within the newsletters about the Service
- (6) That the lower levels of engagement with Health colleagues be raised at the Children and Young People and Families Partnership where Health colleagues attended.

6. CSE POST ABUSE SERVICES UPDATE

In accordance with Minute No. 62 of 4th July, 2017, Sean Hill, Commissioning Officer, Children and Young People's Services, and Rebecca McAlister, Strategic Commissioning Manager, submitted the actions taken to address the recommendations made at that meeting.

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The Services had been commissioned in 2016 based on a 2015 Multi-Agency Needs Analysis. The contracts were let in 2016 and mirrored that analysis. 3 voluntary sector providers bid and were successful for those services.

In July 2017, an update was provided to the Select Commission on the commissioned services. A Service Review had been undertaken by Children's Commissioning Team between October and December, 2017, to quantify and understand the pressures on the services. These services were open to anyone who was a victim or survivor of CSE. It had demonstrated that joint work with the Adult Social Care Commissioning Team was vital to understand the broader context of service provision. The key findings were set out in the report submitted.

Victims and survivors had been directly engaged with and their views listened to as part of the Service Review with informal meetings held at GROW and Rotherham Abuse Counselling Service (RACS) to seek their views on the impact of the services and quality of support.

The CYPS Leadership Team had agreed the following longer term recommendations:-

- A whole system approach to commissioning support services be developed with partners (including the National Crime Agency, the Police and Crime Commissioner's Office and the Rotherham Clinical Commissioning Group) to avoid duplication, maximise resources and improve the Service user experience
- A needs analysis be undertaken to help inform the future commissioning of Services and to inform bids for external funding opportunities. The needs analysis will take an asset/strength based approach to find out "what matters" to victims and survivors to victims and survivors instead of "what's the matter". It would consider the accessibility of current support services (from all sections of the community) and draw together evidence and first-hand accounts of what works in helping victims and survivors begin to recover and build resilience. The needs analysis will help identify trends for support over the next 5 years
- Contracts for the post-CSE commissioned services were extended from 1st April 2019 to 30th September 2019 to allow for commissioning of a different service offer following the findings of the needs analysis and whole system mapping

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There were some real significant funding pressures on the services and it was a very difficult situation for the service providers to manage. Without the funding to commission the services it was very difficult to address the need. A Service Improvement Partnership had been established to discuss the pressures as well as discussions with Adult Commissioning colleagues with regard to managing throughput.

The Chair commended the report but expressed disappointment that the mapping of all the provision across Rotherham, as requested last July by the Select Commission, was still missing.

Councillor Watson stated that it would have been hoped that the mapping of provision would have been carried out but again it was a question of capacity and the associated cost of post-abuse support which had not been met by Central Government.

It was noted that Sarah Champion MP had issued a press release demanding that the Government commit funding to support survivors of child sexual exploitation in the town.

The Chair also stated that the Commission had raised strong concerns with regard to the needs analysis being updated when the previous update was submitted in July, 2017. It was disappointing that it was still not in place.

Discussion ensued with the following issues raised:-

- There had been a delay in commissioning the needs analysis due to funding. Discussions were taking place as to whether it could be carried out inhouse or whether it should be an independent evaluation
- Consideration had not been given to bringing together not only the commissioned services but the identified non-commissioned services to submit a consortium bid although providers working together would be welcomed. The Service Improvement Partnership had been established with the current 3 commissioned services but would be willing to extend it to other providers
- There was concern of the anecdotal evidence of gaps in the post-trial support. Flexibility of service had been discussed with providers and what they could do with the funding that was available. However, if most emphasis was given on post-trial support then something would be lost elsewhere
- Acknowledgement that the situation may be vastly different from that currently known as the only data collected was from the 3 commissioned services
- Partners were now meeting and discussing the commissioned services

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- Within a commissioning cycle a needs analysis would be carried out and a service recommissioned 12-18 months before a contract ended. The contract extension was to give extra capacity and time for questions and queries given the subject matter was very sensitive and highly political
- The commissioning timeline for the awarding of a tender for the needs analysis had slipped. Discussions were still taking place regarding the right method of conducting the analysis and whether it was felt the response from victims and survivors would be better if it came from a third party
- Acknowledgement that the 2015 needs analysis, completed with the involvement of a research partner, had been done as well as it could at the time with the information known. It had been unprecedented times with nothing to draw on in terms of best practice or guidance of what services might be required
- The recently established Commissioning Sub-Group came under the auspices of the Safer Rotherham Partnership and consisted of representatives from RMBC Adults Commissioning, Children's Commissioning, NHS CCG, Adult Safeguarding, Children Safeguarding, Safer Rotherham Partnership, Police and Crime Commissioner's Office and the National Crime Agency. Member involvement would be welcomed
- There had been no direct involvement in attempting to get other commissioning bodies around the table

Resolved:- (1) That the update on CSE Post-Abuse Services be noted.

- (2) That a further update be submitted in 6 months' outlining the impact of the remedial actions and the progress made on the proposed joint commissioning of CSE Post-Abuse Services with representatives of the Rotherham Clinical Commissioning Group and RDaSH in attendance.
- (3) That clarification be provided with regard to what action was to be taken with regard to the gaps around the post-trial support acknowledging that there were limits to the funding available.
- (4) That Rotherham Council continues to lobby Central Government for some joined up funding.
- (5) That an update be provided with regard to support for the wider family of victims and survivors.
- (6) That the possibility of a consortium funding bid be explored.

7. CHILDREN & YOUNG PEOPLE'S SERVICES EDGE OF CARE PROVISION

In accordance with Minute No. 117 of the Cabinet/Commissioners' Decision Making Meeting held on 14th November, 2016, Jenny Lingrell, Acting Head of Service, Early Help, presented an update on the implementation of Edge of Care Services by the Children and Young Peoples' Services Directorate as follows:-

Family Group Conferencing (FGC)

- Launched in April 2017 and consisted of a FGC Co-ordinator and 3
 Family Group Conference Practitioners. The size of the team was dictated by the funding that was made available. An additional practitioner was added to the team in December 2017
- The focus of the team was to work with families who had a Child in Need (CIN) plan particularly if risks were escalating. During the initial year following the service launch it had been necessary to be flexible and test work with families with a Child Protection Plan (CPP), families who were already in a Public Law Outline process and with Looked After Children where there may be an opportunity for a child or young person to return home
- 61 FGCs took place in the last financial year
- 25% of FGCs that did not take place during the 6 week timescale.
 These were families who required a longer period of time due to family dynamics and availability of family members when arranging a conference date
- Only 38% of referrals were allocated within 3 days

Edge of Care Team

- Was a multi-disciplinary team made up of practitioners who had complementary skills and experience developed through working with adults with complex needs as well as with families
- The Team had the skills to address behaviours linked to adult trauma and its impact and has, at its core weekly group, supervision with a consultant clinical psychologist
- In addition the Team Co-ordinator had monthly personal systemic supervision, the Team took part in monthly group supervision and an ongoing programme of systemic training
- The Team consisted of a Consultant Clinical Psychologist, a Team Co-ordinator (skilled in systemic family therapy), a Parenting Practitioner (who could deliver 1:1 outreach support), a Level 3 Social Worker and 3 Family Intervention Workers
- All referrals were made through the new Edge of Care Panel, a multiagency Panel chaired by a Head of Service from Social Care, which met on a weekly basis
- 79 families were referred to the Panel between 26th September 2017 and the end of the financial year
- The Team was currently at full capacity

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- It was estimated that the average cost for a child in care was £50,000
- 5 children had successfully moved home from foster care following an intervention by the Edge of Care Team with 2 more on caseload representing a full year saving of £350,000

Multi-Systemic Therapy (MST)

- MST was a shared service delivered in partnership by Rotherham and Barnsley Councils to support families where there was a risk that a child or young person would become looked after or go into custody
- The pilot arrangement had commenced in July 2014 for 10 young people. A formal agreement had been in place since April 2015
- All MST referrals were now allocated via the Edge of Care Panel
- MST was an evidence based programme and routine outcome measures recorded for each case
- Consistently difficult to achieve a positive outcome for education for young people on the MST caseload
- Learning from MST embedded in all Edge of Care work with close joint working with the lead Social Worker a requirement

Pause Rotherham

- Funding identified from the Early Help budget to set up a Pause Practice for a minimum of 18 months
- Each Pause Practice comprised a Pause Practice Lead, 3 Pause Practitioners and a Pause Co-ordinator
- The Team had capacity to work with between 20 and 24 women during the pilot phase
- The planning and implementation phase had been successful to date
- Pause Rotherham Board established and included broad multi-agency representation as well as a Rotherham Councillor

Discussion ensued with the following issues raised:-

- Multi-Systematic Therapy was separate intervention to Edge of Care but the principles of joint working was exactly the same between the 2. Much of the work would be completed by the Edge of Care practitioner; they were part of Early Help but had the additional layer of therapeutic intervention. There would be joint supervision whenever the Edge of Care Team worked with the Family Team Manager from the Edge of Care Team and Social Worker who would plan their work jointly so it was clear who was doing what within the timescales prescribed by the CPP
- The work fell into 2 categories with constant review to ensure the model responded appropriately:-

Adolescents - often these were situations where there may have been historical issues and, on becoming adolescents their behaviour prevented in a more challenging way. It was also known through "Right Child, Right Care" approach that the outcomes for a child that

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went into the care system after the age of 14 years was very negative. The Edge of Care Panel would make a decision on how to proceed safely

Neglect – large sibling groups whose parents who had their own issues around mental health, drugs, alcohol and domestic abuse. This involved a more family intervention model

Work of the Edge of Care Team - often the work needed with the adolescent cohort was more therapeutic in nature. Family therapy work talked much more about the family dynamics and patterns of behaviour that developed over time

- As part of the Family Group Conference the child was very much part of the process. A specific resource was allocated to advocate and capture the child's voice and wishes. As part of the preparation work the views of everyone who would be attending the conference were captured. It was very much part of the Edge of Care Team's intervention work and the voice of the child was very much apparent. The voice of the child has its own section on the form
- The Routine Outcome Measures and Score 15 captured the levels of depression, anxiety and stress. The Edge of Care Team would record it on every visit to a family. In the future graphs could be submitted which would show how high it was at point of referral and the impact the Service had had
- Multi-Systematic Therapy offer had been available in Rotherham since 2014. Approximately 20 Rotherham children were worked with annually aged between 11-16 years of age
- The Pause Rotherham Team was now fully staffed
- The Pause Rotherham Board was Chaired by the Assistant Director of Safeguarding, the Chief Executive of the Pause national charity, South Yorkshire Police, the Community Rehabilitation Company, Adult Services, Domestic Abuse Service, Sexual Health, Housing, CAFCASS, Councillor Clark, Drug and Alcohol Services
- The established model was the same as that delivered in other authorities
- Pause was really active and engaged in terms of making every Pause practice successful

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- Although Pause was targeted at women it was about positive relationships. Sometimes the relationships were not positive but women may still want to remain in that relationship; Pause would continue to work with them to make it as good as it could be. If it was a positive relationship Pause would embrace that positivity so there was no reason why they would not involve the father in that
- It was quite difficult to benchmark some of the work taking place.
 MST was reported in the national framework.

Resolved:- (1) That it be noted that Family Group Conferencing and Edge of Care Teams were fully operational.

- (2) That the Select Commission scrutinises the performance outcomes to date.
- (3) That the launch of Rotherham's Pause Practice in July, 2018 be noted.
- (4) That the frequency of updates be determined once the 2018/19 work programme had been agreed.
- (5) That the Select Commission suggest that the scorecards be submitted on a quarterly basis as part of the performance report.

8. DATE AND TIME OF THE NEXT MEETING

Resolved:- That the next meeting of the Improving Lives Select Commission take place at the Town Hall, Rotherham on Tuesday, 17th July, 2018, commencing at 5.30 p.m.



Public Report Improving Lives Select Commission

Improving Lives Select Commission

Domestic Abuse Update

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

No

Strategic Director Approving Submission of the Report

Damien Wilson

Report Author(s)

Sam Barstow
Head of Community Safety, Resilience and Emergency Planning

Ward(s) Affected

ΑII

Summary

This report provides an update in relation to key activity and progress in relation to the provision of Domestic Abuse Services across Rotherham.

Recommendations

- That the Committee note the report.
- That the Committee notes the intentions in relation to varied case audits and requests a report in relation to the findings and learning as a result.
- That the committee requests continued regular updates on progress.

List of Appendices Included

Appendix A – Peer Review Outcome

Background Papers

No

Consideration by	v anv other	Council Committee	Scrutiny	or Advisor	, Panel
Consideration b	y arry ourier		, oci utilij	OI AUVISOI	, i alici

No

Council Approval Required

No

Exempt from the Press and Public

No

Domestic Abuse Update

1. Recommendations

- 1.1 That the Committee note the report.
- 1.2 That the Committee notes the intentions in relation to varied case audits and requests a report in relation to the findings and learning as a result.
- 1.3 That the committee requests continued regular updates on progress.

2. Background

- 2.1. Domestic abuse remains a key priority for the Council and its partners, through the Safer Rotherham Partnership (SRP). This report follows previous reports to this Committee throughout 2017 and prior. The last report to this Committee was presented in November 2017.
- 2.2 The following outstanding recommendations will be addressed within this report, alongside providing a general update against progress:
 - That an update is provided to this Committee in 6 months to include information about how the voice of the victim is captured in the strategy and its implementation.
 - That an update is provided outlining progress in addressing the recommendations of the PEEL review in relation to South Yorkshire Police's response to domestic abuse.

3. Delivering the Strategy

- 3.1 The Domestic Abuse Strategy is a partnership strategy and adopted by the Safer Rotherham Partnership towards the end of 2017. It was subsequently endorsed by the Councils' Cabinet. The strategy lays out the collective vision for Domestic Abuse (DA) services within Rotherham for the next three years. There have been some key achievements to date, a number of which are outlined in further detail below. A summary however of key achievements is as follows:
 - The agreement of a revised action plan
 - A reduction in waiting lists in commissioned DA services
 - Additional funding secured through Housing
 - A revised training offer
 - Commencement of a Perpetrator Programme
 - Development of a hand-book for practitioners
 - Delivery of an independent peer review
 - Subject of the Council's independent Health Check
 - OFSTED rated GOOD
 - PEEL rated GOOD
 - A complete data set
 - Deliver of a targeted World Cup operation

- Additional DA support over Christmas period
- Enhanced engagement with service users

4. Governance and Assurance

- 4.1 As can be noted from the above summary, there has been a significant increase in the level of assurance and governance relating to DA. A large part of this assurance has come from the various Inspectorates. In relation to the Council, Members will be aware of the GOOD rating given by OFSTED at the start of 2018. This coincided with South Yorkshire Police being ranked GOOD by the Police Efficiency, Effectiveness and Legitimacy (PEEL) inspection, demonstrating progress against the improvement plan within the Police, as discussed at the previous meeting of this Committee.
- 4.2 Alongside general inspections, Domestic Abuse has been subject to two further independent reviews. Significantly, this area of business was a specified area within the Council Commissioners' Independent Health Check, the report of which demonstrates confidence in the provision of Domestic Abuse services. In addition, and as a direct result of the recommendations of this Improving Lives Select Committee, DA services underwent a full independent peer review, led by colleagues from Bradford City Council and a sector led improvement specialist. This is thought to have been the first review of its kind in the country. In order to support the review process, the DA priority group developed a story-board in relation to services, highlighting good practice alongside areas where improvement was required. In summary, the good practice identified related to:
 - Positive progress in individual agencies
 - o Up 2 you
 - o Rothacs
 - Multi-Agency Domestic Abuse meeting (Daily meeting within MASH)
 - Multi-Agency Safeguarding Hub (MASH)
 - Op Encompass (notification to schools following incidents in the home)
 - Perpetrator programme
 - Strategy
 - Action Plan

The areas that partners identified for improvement were as follows:

- Understanding our provision
 - Access to it (geographically and individually)
 - Informing commissioning
- Assessments
 - Quality
 - Consistency
 - Shared Use
 - Situational
- Engaging Service Users
- Data
 - Gathering
 - Using
 - Reviewing

- Training
 - Needs
 - Delivery
 - Assurance
- 4.3 The team from Bradford included the Assistant Director of Performance Partnerships Commissioning who led the review; the DA Coordinator; the Clinical Commissioning Group funded Health DA Coordinator; Bradford Social Care Multi-Agency Safeguarding Hub (MASH) Service Manager; two police officers from the MASH; a representative from adult commissioning; the Chief Executive of Keighley Domestic Violence Services; and Bradford's Head of Targeted Early Help. Bradford colleagues were supported in the review by the Sector Led Improvement Lead, Rob Mayall (ADCS).
- 4.4 The day began with a presentation from the Rotherham team, led by the Chair of the Domestic Abuse Priority Group (Head of Community Safety, Rotherham Metropolitan Borough Council (RMBC)) alongside the Deputy Chair (Assistant Chief Nurse, The Rotherham NHS Foundation Trust (TRFT)) and supported by a wide range of officers including colleagues from Health, Police, Commissioning, Adults and Children's Services. This presentation sought to articulate Rotherham's wider journey and within that, the journey in relation to domestic abuse. In particular, officers articulated the significant progress made recently in relation to the strategy, coordination and delivery, whilst at the same time offering an honest overview of the issues.
- 4.5 Following the presentation and subsequent question and answer session the team from Bradford undertook fourteen interviews and focus groups, hearing from a total of nearly sixty multi agency staff and service users as part of the challenge day.
- 4.6 The review included meetings with the Strategic Director of Children and Young People's Services; Police Commander for Rotherham; the Chair of Improving Lives Select Commission; the Chairs of both the Adult and Children's Safeguarding Boards; a focus group of middle managers; a prevention focus group; a provider focus group; service users; health partners; commissioners; workforce development staff. One team spent the day in the MASH and attended Multi Agency Risk Assessment Conference (MARAC) and the Multi Agency Domestic Abuse (MADA) meeting. The Portfolio Holder from Bradford for Health and Wellbeing undertook a telephone interview with the Cabinet member in Rotherham who is also chair of the Safer Rotherham Partnership Board.
- 4.7 The full outcome report is attached as Appendix A and addressed to the Strategic Director for Regeneration and Environment. The findings of the report are largely consistent with those issues identified by the partnership and make a clear case for improvement in some areas. The report also identifies a number of areas of good and effective practice. Worthy of note is the fact that not only did the Rotherham team learn a significant amount; the Bradford team also took some good practice from the process.

5. Voice of the Victim

- 5.1 As highlighted previously to this Committee, there is a clear ambition of partners to work closely with service users, victims and survivors to better understand how the service works for them, and to work together on designing services for the future. Whilst there have been some challenges in this area, Rotherham RISE did arrange for the Chair of the Safer Rotherham Partnership and the DA lead to address an open group in relation to the strategy during 2017. The Council's Chief Executive also spoke about the strategy at the 'Reclaim the Night' event in November 2017. During the Peer review, assessors and the team also ensured that service user's voices were captured to inform the overall outcome and this was done through a focus group.
- 5.2 Looking ahead to the remainder of 2018, Rotherham RISE have agreed to work with the DA coordinator to plan an annual calendar of engagement events. The purpose of this will be to both hear feedback and to consult on key policies and strategies. There is also an ambition to seek to have service users represented on the strategic group for DA. Finally, officers are seeking to routinely capture satisfaction data, to provide a consistent input from the victim's perspective. The Safer Rotherham Partnership has also agreed to focus some of its funding on engagement and awareness.

6. Focus for 2018/19

- 6.1 There are four key activities outlined within the domestic abuse delivery plan, which are as follows;
 - Review the full partnership service offer, engaging with victims and providers to identify any gaps and produce recommendations
 - Ensure an effective governance, assurance and performance framework
 - Review, understand and ensure training needs across all partners are met
 - Engage with service users consistently, consult with them relating to strategy, policy and process, alongside delivery
- 6.2 The action plan has been consolidated to focus on those activities that will make the most difference to victims and survivors of DA. Generally, each action plan area has some form of delivery function reporting in to the DA priority group.

7. Police Efficiency Effectiveness and Legitimacy (PEEL) Review

- 7.1 As reported to this committee in October 2017, the DA priority group has also given greater focus to understanding the actions of South Yorkshire Police (SYP) in response the Police Efficiency Effectiveness and Legitimacy (PEEL) inspection, conducted in November 2016. The SRP has received reassurance about the actions taken by SYP since this time. The key actions included:
 - Increasing training for officers (both general and specialist)
 - Training has been provided around civil orders re DA
 - A revised process for supervision/monitoring of DA investigations

- Superintendent, through Daily Management Meetings, provides clear focus on domestic abuse
- Work across all types of crime to enhance victim care on offer
- Revised processes to ensure quick and regular contact alongside ensuring appropriate support is provided
- 7.2 Since the previous report to this committee, the Police have faced a further PEEL inspection and the outcome of this inspection was GOOD, which is a significant improvement. The report highlights further work still to be done, including the need to continue to upskill the workforce in relation to vulnerable people. There is a new Detective Chief Inspector in post within Rotherham and, additionally, the centralised Protecting Vulnerable Persons Team (PVP) has now moved to report to the district command structure, which is seen as beneficial in terms of developing local delivery. There remain some challenges in relation to policing, however these challenges are now more transparent to partners and a coordinated effort continues to be made to improve services.

8. Performance

- 8.1 Crime continues to rise in relation to Domestic Abuse, with a 28% increase in 17/18, when compared to the previous year. Whilst this figure may appear concerning, the majority of the increase is thought to be due to improvements in crime recording standards, rather than an increase in incidents. When a crime is reported to the Police the report turns in to an incident. When a Police Officer investigates an incident, if they are satisfied a crime has been committed then it is recorded as such. Previously, supporting evidence would have been required however currently, if a victims says it is a crime, it is recorded as a crime. There has not been a correlating increase in incidents and this is therefore understood to demonstrate that the police are turning more incidents in to crimes, which is a positive. This rise however does mean that there has been a decrease in the number of positive outcomes which reduced by 13% (18% of all crimes for 17/18). The decrease is not entirely accounted for by the rise in crimes and this is therefore a concern to the partnership currently.
- 8.2 In relation to high risk cases, there has been an 8% decrease in the overall number of referrals to the Multi Agency Risk Assessment Conference (MARAC). More work is needed to track assessments in order to understand whether this can be interpreted as positive. Superficially, it suggests fewer victims are escalating through high risk processes. There has also been a reduction in the number of repeat high risk cases and this is seen as positive by the partnership as it potentially offers a measure of success in relation to the MARAC process. However again, the partnership view these figures cautiously.
- 8.3 Finally, satisfaction rates have dipped slightly, though again this should be considered in light of an increase in overall levels of demand. The partnership does not yet fully understand satisfaction across the whole system, though individual agencies and providers do collect some information. In relation to commissioned services, as reported to Council via the performance framework, outcomes have remained consistently high with the end of year figures showing 99% of people given successful support to avoid or manage harm; 99% given support to maintain accommodation.

9. Perpetrator Programme

- 9.1 As previously reported, the partnership prioritised the delivery of a perpetrator programme, following recommendations of this Committee. This programme is now in place across the South Yorkshire area by way of a partnership between all Local Authorities and the Police and Crime Commissioner. The programme is delivered by Sodexo, who also provide Community Rehabilitation Company (CRC) probation functions across South Yorkshire. The programme was delayed slightly in relation to commissioning, but was launched on the 20th April 2018 with an event in Rotherham.
- 9.2 Since commencement, Officers continue to deliver close monitoring. Currently, referrals have been slow to pick up within Rotherham and this continues to be pushed by the partnership. The low number currently being dealt with has allowed Officers to monitor cases closely, which also allows any concerns in relation to victims to be identified quickly and resolved. Performance in relation to this service will continue to be monitored through the DA priority group and development continues. An example of this would be the recent development of work with custody, which will see all entries referred to the service and assessed for suitability.
- 9.3 In terms of the profile of the individuals involved, this is varied. What is clear to date is that substance and alcohol misuse, and mental health issues are prevalent amongst those engaged in the programme, suggesting further work is needed in these areas.

10. Key Issues

- 10.1. Delivery of a single access point within the Council has been delayed. This is due to the partnership recognising the need to undertake a wider review of service provision. This decision was taken given the likelihood that a wider review may change structures and processes, which could in turn require a different way of delivering within the Council. Efforts will be focussed on delivering a single product which reviews the whole system, including both commissioned and non-commissioned services, and makes recommendations about gaps in delivery and the future model. This is being led by Commissioners within the Council, in Adult Care, Housing and Public Health, with support from a number of others. This is timetabled for completion by the end of this year with the potential to seek to commission in the early part of 2019.
- 10.2. The other key challenge remains enforcement. Officers are aware from the above data that outcome rates have reduced and that within the outcome rates, prosecution outcomes are low. South Yorkshire Police are keen to work with partners in a transparent way and this has been demonstrated by recent work within the DA priority group. Officers will collectively seek an increase in prosecutions, which are generally reliant on the survivor being given the reassurance and support to make formal complaints. The provision of reassurance and support cannot therefore come from the Police alone.

10.3 Whilst there are no current waiting lists within commissioned services, the partnership is aware of excess demand within non-commissioned services relating to DA. Further work needs to be undertaken to understand demand across services. This greater understanding will allow better allocation of resource of transfer of service.

11. Recommendations

- 11.1 That the Committee note the report.
- 11.2 It is recognised that there is much more work to do, but and that this is a key priority for the Council and its partner's and whilst progress continues to be made.
- 11.3 That, the committee requests regular updates on progress to be provided.

12. Financial and Procurement Implications

12.1 This report does not present any decisions and there are no additional financial or procurement implications.

13. Legal Implications

13.1 This report does not present any decisions and there are no legal implications.

14. Implications for Children and Young People and Vulnerable Adults

14.1 There are wide-ranging impacts as a result of domestic abuse on children, young people and vulnerable adults. Not only can the impact be physical injury but abuse of any forms can have long lasting psychological impacts. A range of professionals who work with young people are represented on the DA priority group and there is a process of continuous assurance in place through the Local Safeguarding Children's Board. In respect of vulnerable adults, again there are a range of professionals represented and assurance is provided through the Safeguarding Adults Board. The DA group continuously consider implications relating to children, young people and vulnerable adults and will continue to ensure services are fit for purpose in this regard.

15. Equalities and Human Rights Implications

15.1 The partnership continues to monitor data in relation to equal access to services. There is a bespoke commissioned service for Black, Asian and Minority Ethnic (BAME) Groups.

16. Implications for Partners and Other Directorates

16.1 Implications for partners and other Directorates are considered on an ongoing basis by all partners represented within the DA priority group and Safer Rotherham Partnership.

17. Risks and Mitigation

17.1 Domestic abuse presents risks to individuals alongside organisational risks relating to good quality service provision, the work outlined above seeks to continue to improve services whilst at the same time, provides assurance as to the current provision.

18. Accountable Officer(s)

Sam Barstow, Head of Community Safety, Resilience and Emergency Planning Approvals Obtained from:-

	Named Officer	Date
Strategic Director of Finance	No implications	
& Customer Services		
Assistant Director of	No implications	
Legal Services		

Report Author: Sam Barstow, Head of Community Safety

This report is published on the Council's website or can be found at:-

http://moderngov.rotherham.gov.uk/ieDocHome.aspx?Categories=



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Date: 24th April 2018

PRIVATE & CONFIDENTIAL

Damien Wilson Strategic Director Regeneration & Environment Rotherham Metropolitan Borough Council

By Email

Dear Damien

Bradford would firstly like to thank Rotherham MBC for the invitation to undertake the review and for the warm reception we received when on site. The positivity and helpfulness of all of the staff we encountered was a constant throughout the review. The review will also enable us to reflect on our own services in relation to domestic abuse (DA) and we will be making some changes in response to this. Peer Challenge is a two way process and this was evident for us in this review.

Context of the review

In January 2018 Bradford undertook a multi-agency peer review of Rotherham's response to domestic abuse (DA). This was at the invitation of the Safer Rotherham Partnership and arose after Rotherham's DCS led a peer challenge in Bradford in relation to SEND. This followed Bradford's positive JTAI inspection relating to DA in early 2017 and Rotherham identifying the benefits of a peer review as part of their work on a new DA strategy.

This challenge was delivered as a pilot using new methodology developed through the sector led improvement programme, with a focus on one area, with a large multi agency team doing the on site challenge on one day. The team from Bradford included the AD Performance Partnerships Commissioning who led the review; the DA Coordinator; the CCG funded Health DA Coordinator; Bradford Social Care MASH Service Manager; two police officers from the MASH, a representative from adult commissioning, the Chief Executive of Keighley Domestic Violence Services and Bradford's Head of Targeted Early Help. Bradford colleagues were supported in the review by the Sector Led Improvement Lead, Rob Mayall.

The challenge started with a Self Assessment prepared by Rotherham using a template adapted from the national DA requirements. This was reviewed by the team in Bradford, along with other information supplied, and was used as a basis for the on site day. Following review of the self assessment, Bradford sent Rotherham an indication of who they wanted to see as part of the site visit.

At the start of the visit Rotherham gave a presentation about their response to DA, after which the Bradford team undertook fourteen interviews and focus groups, hearing from a total of nearly sixty multi agency staff and service users as part of the challenge.



The review included meetings with the DCS; Police Commander for Rotherham; the Chair of Overview and Scrutiny; the Chairs of both the Adult and Children's Safeguarding Boards; a focus group of middle managers; a prevention focus group, a provider focus group; service users; health partners; commissioners; workforce development staff. One team spent the day in the MASH and attended MARAC and the MADA. The Portfolio Holder from Bradford for Health and Wellbeing undertook a telephone interview with the Cabinet member in Rotherham who is also chair of the Safer Rotherham Partnership Board.

Conclusions from the challenge using the self assessment, the documentation supplied and the meetings on the day were summarised in the LGA peer challenge areas of:

- 1. Vision strategy and leadership
- 2. Working together
- 3. Effective practice
- 4. Outcomes
- 5. Capacity and resources

1. Vision, strategy and leadership

Rotherham's commitment to reflecting on practice and to ensuring high quality arrangements are in place was evident throughout the process- through the commissioning of the review; in the presentation at the start of the challenge, and during the interviews and focus group sessions.

There was an acknowledgement that things had "not been in a good place" and there was a clear determination to see this change. The publication of the DA Strategy is a positive step, and it sets out clear aspirations. The Domestic Violence Practice group (DAPG) group demonstrates that there is a commitment to driving forward this agenda, and that the partnership is involved in this process.

Interviews with senior leaders and elected members demonstrated that there is commitment at the highest level to the DA Strategy as part of a broader response to vulnerable people. At every level there was an acknowledgement that the recent appointment of the Head of Service, Community Safety, Resilience and Emergency Planning is making a real difference to the focus and pace of work and that there is real confidence that under his leadership and with partner engagement the situation is improving. This view was reinforced by the providers who we met.

It was clear however that the strategy is relatively new, and that it is not yet well promoted, recognised and owned at all levels, particularly outside of the DAPG. There is an opportunity to secure partnership ownership across the system and at all levels within it. In relation to the strategy, the partnership may want to consider

- Securing broader ownership
- Developing arrangements for monitoring
- Ensuring the strategy is sensitive to both current and emerging demographic need

The current self evaluation on DA is a work in progress, and appears to be missing meaningful contribution from a number of agencies. The shortened Signs of Safety version is easier to understand and offers a more honest shared assessment. The action plan is very detailed and complex and it may be worth considering identifying a much smaller number of game changing actions and give a relentless focus on these to drive the process.



In relation to governance, there is clear ownership of DA through the Safer Rotherham Partnership (SRP) and the DAPG. DA is on the agenda at all SRP meetings. Strong and tenacious leadership is coming from the local authority through the role of the Head of Service, Community Safety, Resilience and Emergency Planning and there is evident buy in to this from a wider partnership. The appointment of the Assistant Chief Nurse from the Hospital Trust as Vice Chair of the group is a great step forward.

There is clear ownership of DA by Scrutiny which has strong oversight and provides robust challenge. This is also evident from the cabinet member who chairs the SRP.

The joint protocol between the Rotherham partnership boards demonstrates good practice. The audit on DA completed by the LSCB demonstrates a useful contribution to DA assurance in relation to children and young people.

A health based safeguarding strategic group meets quarterly, and is planning to increase awareness of the Strategy and the DAPG in the health sector, by inviting the appropriate lead officer to their meetings.

The model of the MADA in the MASH is good practice and demonstrates that there is a partnership commitment at an operational as well as strategic level.

While the Adult and Children's Safeguarding Board Chairs are clearly committed to ensuring that the Boards have a role within DA assurance, there is an opportunity to develop this further and to consider using other approaches. Examples of this might include an on-going programme of multi agency audits; consideration of DA by one of the Board sub groups and assurance reporting at the main Board. Given the joint protocol in place, and the fact that DA is one of the issues that impacts on the SRP, Adult and Children's Boards, there is an opportunity to consider what joint assurance might look like, and for clearer ownership across all three Boards of the joint strategy, rather than an assumption that this is the work of the SRP, and comes to other Boards for information. There is the opportunity to develop an annual plan around DA and put in place QA processes and assurance that is owned by all three boards.

Rotherham has a strong approach to CSE developed in response to the challenges raised by Casey and Jay. This response has galvanised partners and resulted in a good set of partnership arrangements. There is the opportunity to use the learning from this to drive improvements around DA. There was a suggestion from some of the interviews undertaken that response to CSE can at times feel to dominate the partnership energy at present.

2. Working together

There is an evident ambition in Rotherham for partners to work together around the DA agenda, evidenced through the DAPG group and the commitment of the CSP, adult and children's safeguarding boards. The commitment the partnership showed in supporting the review is very positive evidence of the strength of the will to work on this agenda. There are references to the strength of partnership in both the strategic section and in the section on effective practice.

During the review we saw evidence of strong provision in the partnership and had it referred in a number of ways. Service users reflected this also.



Partnership intent and its translation to improved joint work in practice is however still not fully matured in relation to the DA agenda. This is reflected in the need to embed the strategy, the ownership of the children's and adults boards and in the developing practical DA arrangements in the MASH. There is an opportunity for the police and health to consider allocating dedicated staff to DA to enable relationships and practice to be developed. The information sharing protocols described as 'clunky' are an example of the practical ways in which the partnership is not yet fully developed.

3. Effective Practice

The reappointment of the DA Co-ordinator post was highly valued by all partners, the role brings partners and the strategy to life, it has kick started and reinvigorated work to meet strategic and operational needs. There was evidence of a range of referral sources from other professionals which indicates a good awareness of the service from other agencies.

There was evidence of future planning from the Acute Trust around the acquiring of additional resources for Hospitals to support Victims of Domestic Abuse, with the introduction of Hospital based IDVA services.

The SLA between early help and two local Academy schools was an innovative example of Early Help and prevention being embedded into schools was encouraging to hear, the focus on healthy relationships through the curriculum will ultimately reduce and prevent DA, however evidence based interventions will take time to show any impact.

The proactive action of the Housing Services manager in making links with the DAPG and Domestic Abuse Lead Officer has increased knowledge gained by the housing team on Domestic Abuse and has influenced the delivery and commissioning of housing related services. This was a best practice model that can be replicated across other service and partnership areas. The review team saw evidence of strong professional ownership of cases, particularly in the MASH and with the providers. In the MASH there are dedicated staff members who are passionate about domestic abuse and want to get it right.

The MADA meeting that was observed, is an example of good practice and was well attended by agencies. Combining this with the meeting for adults affected by DA is a good model.

There were a good range of evidence based interventions on offer in early help and through the providers. The provision observed by the team was good and clearly meeting the needs of the service users who took part in the review, who noted that there was good provision and that this was flexible.

There was evidence of the use of Signs of Safety within social work and early help responses, but this was less clear across the wider partnership. Broader understanding and use of this as Rotherham develops its approach to Signs of Safety would enhance the offer to families and young people and help the voice of the child to come through more consistently.

The MASH- The recent Ofsted confirms the high quality of the MASH provision, which the review team also observed. The MASH appeared to be an effective central point of referral for all concerns regarding children for DA cases and these are assessed and referred to DA specialist in an appropriate manner. High risk cases that were reviewed were clearly managed well with high level partnership ownership and commitment.



Decision making observed in the MASH was good, with good management oversight from the team manager and senior social worker upon receipt of the DASH. Cases are dealt with in a timely manner. There is good management footprint around step down from Child Protection to Child in Need where cases are actively worked for three months under a CIN plan. Strategy meetings regarding S47's are well managed and attended by multi agency representation. In preparation for the meeting there is a good sense of willingness to share information for the protection of the child.

In relation to DA, the team, observed some evidence of division between each agency within the MASH, partly exacerbated by some operational and information sharing processes. Police and partners within the MASH recognised the value of a more integrated approach to DA that would benefit from co-location of dedicated DA police teams alongside partners. There was an apparent inconsistency of managing DA investigations by the Police with only high risk cases investigated by appropriately trained safeguarding teams.

Assessment- The team could not see evidence of multi agency input to the initial DA risk assessment process. Social Care appears to work solely on the police assessment and grading following their attendance at the incident. It is only when a substantially higher threshold has been reached that consideration for the Multi Agency Child Assessment (MACA) information is made. This could be done at a much earlier stage on a lower threshold thus ensuring that each referral is considered in light of all partner agency information sharing. The current process around assessment, review and referral for medium and low risk DA incidents identified some delays with some partners. High risk cases were seen to be managed in a timely and effective multi agency method. DASH forms are reviewed by a central Police unit which provides a consistent assessment of risk across South Yorkshire. The MASH at Rotherham and in particular Children Services and Education highlighted some referrals were not received until up to three weeks after the incident which was a risk in safeguarding children and effective information sharing. There were no delays or backlog within Children Services once referrals were made who will escalate cases to the MADA where necessary when additional information impacts upon risk assessments.

Voice of the Child- the DASH assessments reviewed by the team missed an opportunity to record the demeanour of the child and to provide any detail about the voice of the child as heard by the attending officers. Voice of the child did not appear to be consistently evidenced throughout the whole process from the police attendance at the DA incident to the S47 strategy discussion. The team did review cases using the new forms and asked to see some from previous cases, and all reflected this concern.

Information Sharing- although all partners display a willingness to share information the process appears clunky at times and it appears there is no fast track sharing. The current process revolves around completing an information requisition form to the partner. This creates an in built delay whilst the form is processed and returned before the information is considered as part of the assessment process for the child. There is some co-location of partners; however, a number of interviewees indicated silo working appears to still exist for some DA work in that the partnership teams are not integrated with one another.

There is a potential for duplication of effort around police information. The Gen 117 and DASH forms can be from the same incident but received at the different times due to how they are submitted from the Police. This means the same incident could be reported to Social Care twice. It is recommended that the police ensure only one report is sent regarding one incident.



In relation to DA, the National Probation Service declined to share information on a common referral form within the MARAC and questions were raised within MADA around previous convictions of a perpetrator. There are opportunities to improve the process between MADA and MARAC to ensure clearly defined roles and prevent duplication. Police teams investigating DA cases also attend at the MADA which creates a challenge between operational and partnership working. The DASH forms were not discussed within the MARAC.

Within the MADA and MARAC processes there was some uncertainty /clarity around information discussions with a range of colleagues identified that MASH and MARAC partners would benefit from further specialist multi-agency training around DA. First responders would also benefit from DA training, identified from MARAC group.

Complex systems - The team observed that there are a number of points at which disjointed practice is evident in relation to DA. There appears to be separate decisions made regarding risks to each party involved in a DA incident. This is evidenced by some children being graded as medium risk whereas the parent is high. There is potential for risk around failing to meet the relevant interventions for the child's needs. There appears to be duplication of processes around delegation and screening. Both appear to do the same things.

The provision of services for medium and low risk clients is through a commissioned service and the high risk IDVA provision is delivered in-house. While this approach enables specialist resources to be targeted it can lead to the multiple handovers of clients as risk levels fluctuate.

The Multi-Agency Protocol document sets out the referral process for vulnerable adults experiencing domestic abuse however it is not clear which team would lead on any work and intervention. This issue was discussed in the service user group following disclosure of a personal experience. It was clear in the scenario disclosed that there was confusion about whether the situation was being dealt with by Adults Safeguarding, MARAC or Children's (as the person was younger than 18 when abuse first commenced). Whilst it is not appropriate to go into the details of an individual case it highlights the potential for people to get lost in the system.

4. Outcomes

There is evidence of good data collection in both the CCG and the MASH in relation to DA. In the MASH there is a good performance data tool used by staff in live time to effectively manage workflow across the day and ensure performance indicators are met. The CCG have an excellent data set which can inform delivery of service provision and identifying trends and themes.

From the SEF and during the review however, a shared data set and performance measures were not evident in relation to DA. This makes monitoring services for individuals and charting progress as a system difficult, and is an area identified for development. This was recognised by the partnership at all levels. It is recommended that the partnership considers adopting and tracking a small set of measures on DA linked to its strategy and key actions.

5. Capacity and resources

Rotherham have undertaken transformation and developed a more corporate approach to commissioning arrangements through the CSP. Mapping of current provision around DA services is on-going and not fully understood at present. It is anticipated that this will allow



opportunities to remodel, create efficiencies and tailor services to the needs across communities. LA commissioning managers recognise that current provision is weighted towards adult services and that future arrangements will be informed by the mapping process and recognise children's needs and the impact of DA on them. There are challenges moving forward around future funding and commissioned services but innovative opportunities are being scoped. RISE was recognised as an excellent service, delivering in excess of agreed outputs and flexibility in service provision. LA commissioners utilise and work with the LSCB around the Section 11 audit to ensure appropriate quality assurance mechanisms are in place around commissioned services and the VOC. The Service users spoke very positively about the support they had received and gave examples of flexible service delivery.

The appointment of the DA Coordinator was seen across the partnership as a positive step, and there are resources across the partnership working on the DA agenda.

The new commissioning model is still in development and untested and will need to continue to fund CSE legacy requirements. The current model doesn't always take into account emerging complex safeguarding risks. Performance management and quality assurance was inconsistent due to number and ages of contracts in place. Managers recognise that there are limited services around on-line, Male and LGBT. The voice of the child needs to be fed into the commissioning process.

The target hardening provision is currently only available to people assessed as high risk. Whilst it is acknowledged that there is a need to prioritise resources a lowering of the threshold would enhance prevention work.

Training - Safeguarding adults and children's frontline staff undertake mandatory training which includes Domestic Abuse elements. CCGs deliver HARK training as well as having a proposal to implement delivery in A&E. There is training delivered by the DA Co-ordinator for Health Visitors, School Nurses and Midwives – this has been very positively welcomed. There was however a lack of evidence of multi-agency training, there is no current training needs analysis which would underpin the scale of the training required and no currently resourced plan in terms of funding and staffing on how to provide and sustain this. The current delivery of often agency specific bespoke training through the DA Co-ordinator appears to be unrealistic and unsustainable. There was an overall disconnect on workforce development issues and the needs of services and victims dealing with DA. Without clear evidence of a comprehensive, co-ordinated multiagency training offer, the strategy and its operational roll out is under risk as training would benefit from being intrinsically linked to the communication and awareness plans supporting the DA strategy.

There was a view from service users and the provider that the council website is not clear about what provision is available. The peer review team also looked at the website and identified some weaknesses in lack of information and links to other services. The idea of a single website or portal for domestic abuse information and reporting was raised in a number of groups. Further consultation with stakeholders including service users could be used to explore this further.

There was little resourcing for multi-agency working including joint campaigns and wider communications. It is recommended that the DAPG takes more of a lead in co-ordinating, designing and planning area wide campaigns, communications and training plans.



Summary and headline suggestions

Domestic Abuse is a safeguarding issue which is cross cutting between adult services, community safety and children's services. This provides an inherent complexity to partnerships everywhere, and Rotherham's challenges are in reality no different to those experienced in other areas as evidenced by the recent JTAI programme.

Rotherham's clear and open commitment to developing and improving services is a key strength and there are concrete examples of positive work within this, especially at single agency and provider levels and examples of how pace and partnership commitment have accelerated in recent months. The review highlights some excellent practice and also a genuine commitment from the partnership to move this agenda forward on behalf of everyone affected by DA in Rotherham. The areas for consideration highlighted in the review were not a surprise to the partnership and reinforce the level of partnership awareness now developed and existing plans to move forward. The maturing of the partnership approach to DA is expected to follow naturally as the DAPG and individual partner support becomes more embedded in coming months.

The key areas which the review identifies for reflection and action are:

- 1. Reviewing the partnership action plan and focusing on fewer but clearer actions
- 2. Rationalisation of the current referral process
- 3. Improved timeliness in data being received form the police for medium and low risk cases
- 4. Extension of Operation Encompass DA notifications to schools to medium and low risk cases
- 5. Consideration of dedicated police and health in the MASH for DA work
- 6. Review of the role of the DA Coordinator especially around being the point of contact for the public and delivering all training
- 7. Work with providers to develop processes to hear the voice of victims and include this in service development and training. This needs to include the voice of children affected by DA within families
- 8. Development of a multi agency training offer and resources for this
- 9. Establishment of a data dashboard and monitoring KPIs, including a small set of key metrics for the partnership
- 10. Further developing ownership of the DA agenda by the Adult and Children's Safeguarding Boards
- 11. Embedding of the strategy at all levels and in all agencies
- 12. Consideration to "one front door" through one website and contact number to signpost to help
- 13. Consider working with South Yorkshire authorities to extend the MADA across South Yorkshire

Yours sincerely

Jenny Cryer



Assistant Director Performance, Commissioning and Partnerships

The review team from Bradford were:

Jenny Cryer - AD Performance, Commissioning and Partnerships
Noreen Akhtar - Domestic Abuse Coordinator
Mark Griffin - Safeguarding Children Board Manager
Hannah Hatchman - Adult Commissioning Officer
DS Ian Mitchell - West Yorkshire Police based in Bradford MASH
Di Reed - Chief Executive of Keighley Domestic Violence Service
Mandy Robinson - Domestic Abuse Coordinator for the three CCGs
DS Andy Simpson - West Yorkshire Police based in Bradford MASH
Martyn Stenton - Head of Service Targeted Early Help
Sue Tinnion - Service Manager for the MASH
Cllr Val Slater - Portfolio Holder Health and Wellbeing

The review was supported by Rob Mayall – Sector Improvement lead for ADCS.

Agenda Item 9



Public/Private Report Council/or Other Formal Meeting

Summary Sheet

Committee Name and Date of Committee Meeting

Improving Lives Select Committee – Date: 17th July 2018

Report Title

Children & Young People's Services (CYPS) 2017/2018 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

Mel Meggs, Children and Young People's Services

Report Author(s)

Deborah Johnson (Performance Assurance Manager – Social Care)
Anne Hawke (Performance Assurance Manager – Early Help)
Lynsey Sylvester (Performance and Data Officer – Education and Skills)

Ward(s) Affected All

Summary

1.1 This report provides a summary of performance under key themes for Children's and Young Peoples Service at the end of the 2017/18 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

Appendix A – Performance Data Reports for Early Help and Safeguarding Children & Families (March 2018)

Background Papers

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 (2017/2018 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 by providing performance information to enable the scrutiny of service achievement levels and the associated impact on the outcomes for children and young people. It should be read in conjunction with the appended performance data reports which provide trend data, graphical analysis and benchmarking data against national and statistical neighbour averages.
- 2.2 It provides a summary of performance under key themes across Children & Young Peoples Services (CYPS) at the end of the 2017/18 reporting year and also represents the monthly report for March 2018. Due to the comprehensive nature of this report summaries of 'good and improved performance' (Section 3.1) and 'areas for improvement' (Section 3.2) are provided for members at the beginning of the report before a more detailed report for each service area, (Early Help Section 3.3, Children's Social Care Section 3.4 and Education and Skills Section 3.5).
- 2.3 Performance has been considered against local targets, including associated 'RAG' (red, amber, green rating) tolerances. These are reviewed annually and are set in consideration of available national and statistical neighbour benchmarking data, recent performance levels and, importantly, Rotherham's improvement journey and service knowledge. It ensures 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.
- 2.4 In addition to this annual report members are advised that strong operational performance management arrangements are in place across the service with a programme of team level performance meetings well embedded across social care, early help and education inclusion services. These hold team managers to account with a comprehensive escalation process in place when concerns for individual children are identified. On a monthly basis governance is provided by the CYPS Performance Board attended by the Lead Member, Commissioner and Directorate Leadership Team. Additional scrutiny is provided through the Corporate Parenting Panel and Rotherham Local Safeguarding Board. These performance management arrangements within CYPS were highlighted within the recent Ofsted report which stated; "Senior managers and leaders know the service they provide well. The culture is now one of openness and transparency and genuine dedication to improving the lives of children and young people."

2.5 The CYPS Quality Assurance Framework also ensures that the service does not over rely on compliance data to evidence the experience and outcomes for children, young people and families. The team manager led audit programme is well embedded across services and during the year Practice Learning Days (PLD) have been introduced. These PLDs take place on a monthly basis across Early Help and Social Care. The days provide a valuable opportunity for Senior Managers to visit teams and services, meet and talk to staff and observe and shadow practice and feedback so far has been very good. A review of these took place during January with subsequent changes made to the process to ensure that the days continue to improve and provide value to the service. Learning days are followed up (no earlier than three months) with a visit by the DCS and Lead Member which provides assurance that any learning has been embedded and any agreed actions completed.

3 Key Issues

3.1 Summary: Good and improved performance in the last 12 months

3.1.1 Early Help

- Satisfaction rates for Early Help are consistently high. 100% of Families completing exit surveys in March rated the Early Help intervention they received as 'Good or Excellent', with the service achieving a total annual performance of 96% overall.
- As significant elements of the Early Help Service are not mandatory families have a choice in whether they wish to accept support and engage with Early Help process. Annual performance shows that Rotherham's local total engagement rate is high at 92.2%. With 59.7% of families contacted and engaged within three working days, (the remainder engaged over longer timescales).
- During the year partners completed 15.9% of the total Early Help Assessments (EHA) which represents a significant improvement on last year when only 6.5% of EHA's were completed by Partners. In terms of numbers this is an increase from a total of 75 partner EHAs in 2016/17 to 225 in 2017/18.
- The Troubled Families' target of engaging with 633 families during 2017/2018 has been exceeded with the total number of families identified by the end of March reaching 1073 which as a percentage is 169% of the original target.
- Children centre registration and engagement within Rotherham's most deprived areas are good and above target. During the year 96% of children living in the 30% most deprived super output areas (SOA) were registered with a Children's Centre and 68% of these children were actively engaged (targets of 95% and 66% respectively).
- The year-to-date attendance rate for the current academic year is good and inline with the latest national averages. Primary is currently 95.7% compared to 96% nationally and secondary is 94.5% compared to 94.6% nationally.
- The latest Youth Justice Board (YJB) statistics show that Rotherham has made a positive decrease of 49.6% in the number of First Time Entrants from the same period last year. Similarly YJB report that Re-offending rates have decreased by 6.6% and now stands at 29.2%.

3.1.2 Children's Social Care

- In total 15,684 contacts have been received over the year compared to 16,609 in 2016/17, which equates to a 5.6% decrease. However in the same period the proportion progressing to referral has increased by 2% from 26.6% to 28.6% with more recent months seeing a higher progression rate of circa 30%. Similarly progression from referrals to assessment has increased over the year and now consistently achieves 99% each month (99.7% in March). As a whole, this reflects the improved quality in the operational process of our Multi-Agency Safeguarding Hub (MASH) with the majority of screening activity taking place at earlier and ensuring progression to social care referral only when appropriate.
- Over the last 12 months the re-referral rate has made incremental improvements each month reaching 23.1% at the end of 2017/18 resulting in a 4.4% positive decrease on the 2016/17 outturn. This evidences and supports audit findings that casework practice is significantly improving as a result of the implementation of the new operating model. The month on month trend also suggests that the improvement is being sustained. However to be confident that this is fully embedded we would need to see the rate fall below the national average (21.9%) for a sustained period and then move to a top quartile position (16%).
- Provisional performance for 2017/18 in relation to assessment timeliness stands at 78% which is a 7.3% decline on the previous year, however it is worth noting that the volume of assessments completed has increased by 32% in the same period (6781 compared to 5148).
- Less than 1% of children ceasing a Child Protection Plan were subject to that plan for two years or more, this places Rotherham in top quartile performance. At the end of the reporting year there was only one child being supported through a Child Protection Plan (CPP) for more than 2 years and only 10 who have been on a plan for more than 18 months, the vast majority of children have been on CPP for less than 12 months. In recent months the proportion of children subject to repeat plans (within 2 years) has also seen incremental improvements to 8.7% but remains relatively high and a key measure within the council plan.
- The Looked After Children's Virtual School have ensured that 97% of eligible Looked After Children (LAC) have a Personal Education Plan (PEP) with 95% having a PEP less than one term old. This equates to 15 children without a PEP and a further nine PEPs more than one term old. Although this is high performance the reasons behind each of case are known with the main issues related to re-scheduling due to adverse weather, short term care periods and entry to care late in the term. Meetings were scheduled to ensure each of these gaps are addressed as soon as possible.
- Rotherham's Care Leavers service was graded Outstanding by Ofsted in the 2017 re-inspection of services. The service has seen an on-going increase in the number of Care leavers to 257 at the end of March 2018 compared to 223 in March 2017, but performance remains high and above national averages. 97% of our young people have a pathway plan, 96.9% are in suitable accommodation (3.1% are serving custodial sentences and in respect Education, Employment or Training rates this improved after a decline in recent months, to 63.6% (highest level for 12 months and top quartile).

- Despite the significant increase in LAC numbers, the proportion of children living in a family based placement remains relatively stable at 82.4% of the total cohort (81.1% at the end of March 2017).
- Rotherham is top quartile performer for timeliness of adoptions and the adopter training package was recognised by Ofsted as an area of excellence. Over the whole year the average time between the child entering care and being placed with the adoptive family (national measure A1) performance was 325 days a slight increase on the year-to-date figure of 311 days reported in February. This remains excellent performance when compared to the Statistical neighbour average of 511 days and the national average of 558 days and places Rotherham in the top quartile. Over the longer 3 year period 2015-17 Rotherham has actually achieved an average performance of 404 days as opposed to a national average of 520 days which places Rotherham at the 11th best performing local authority in England over this period. Time between the Placement Order being made and the match with adoptive parents (national measure A2) is back to 125 days compared to the Statistical Neighbour average of 214 days and the national average of 226 days and once again Rotherham is in the top quartile.

3.1.3 Education and Skills

- At the end of the 2016/17 academic year performance in the Early Years Foundation Stage Profile (EYFSP) for a 'Good Level of Development' (GLD) continued to rise and be above the national average. This is an established trend and ranks Rotherham joint first in the statistical neighbour group and joint second in the Yorkshire and Humber region.
- In the 2017 Key Stage 1 assessments 64.0% of pupils met the expected standard combined reading, writing and mathematics (R,W&M) compared to 59.8% in 2016. This improvement of 4.2% places Rotherham above the national average and ranks the authority fourth in the Yorkshire and Humber region.
- In terms of the separate greater depth standard for R,W&M combined at Key Stage 1, Rotherham has improved by 3.3% to 12.2%; this is 1.3% above the national average and places the authority third in the Yorkshire and Humber region.
- With regards to Key Stage 2, 61% of pupils met the expected standard in R,W&M combined in 2017, compared to 53.9% in 2016. Rotherham has improved by 7.1% and is in line with the national average and places the authority second in the Yorkshire and Humber region.
- For the separate higher standard measure for R,W&M combined at Key Stage 2, Rotherham improved by 2.7% to 7.1% which is 1.5% below the national average and places the authority seventh in the Yorkshire and Humber region.
- At Key Stage 4, in 2017, the Rotherham Progress 8 score is +0.06, this is 0.09 above the national average (state-funded) score of -0.03. The Progress 8 score is only calculated at a national level for state-funded schools. The Progress 8 measure is ranked second compared against our statistical neighbours and ranked fifth in the Yorkshire and Humber region.

3.2 Summary: Areas for further improvement

3.2.1 Early Help

- The annual out-turn for the number of Early Help Contacts that were triaged within five working days is 85.3% which is below the target of 100%, but consistent with last year's outturn of 85.3%.
- The total number of Payment by Results (PbR) claims submitted for the Families for Change programme, (known nationally as Troubled Families), during this financial year was 212 taking the total for the programme to date to 292. Whilst this highlights a significant improvement, the rate of claims remains behind at this stage of the programme in comparison to other authorities. Intensive work is underway which will help identify potential claims and an action plan has been submitted to the Ministry of Housing, Communities and Local Government (MHCLG) to provide further assurance.
- The annual out-turn for Not in Education, Employment or Training (NEET) figure has now been validated at 3.3% against the local target of 3.1%. However, performance against the Not Known target was slightly better than target at 2.5%. This gives us a combined outturn of 5.8% which is better than statistical neighbours and national and in line with our regional neighbours.

3.2.2 Social Care

- Demand across the social care service is high with the most significant increases seen in the numbers of Children subject to Child Protection (656 compared to 370 at the end of 2016/17) and Looked After Children (624 compared to 488 at the end of 2016/17). This equates to increases of 77% and 29% respectively. This appears to be as a result of a combination of factors, an improvement in social work assessments identifying and responding to risk, the complex abuse enquiry and the upward trend nationally.
- Timeliness of Initial Child Protection Conferences (ICPC) in the month of March was 70.5% which is very low when compared to levels achieved in earlier months and below statistical neighbours and national average. The provisional outturn position is 83.9% which is 7.1% lower than last year.
- Compliance against the local CPP visit standard sees a disappointing year end position of 89.1%, given the consistent achievement levels earlier in the year of 93%+ however this is less than 1% below last year's outturn position when there were 241 less children on a CPP. Performance clinics continue to monitor this alongside other compliance measures and team managers are able to articulate the reasons, attempts to visit made and the plans which are in place to ensure that children are safe.
- Performance in the timeliness of CPP Review Conferences, for the year as a whole was 94.6% which is a decline when compared to last year's 98.6% but still places Rotherham above the national average of 92.2%.
- Compliance for plans in date has been consistently lower than targets in the latter months of the reporting year ending with an outturn position 82.7% for eligible Children in Need (CIN), 86.7% for children on subject to CPP, and 89.7% for LAC however this needs to be considered alongside the current high service demand across the service.

- In the last three months there has been an increase in the number of LAC who are experiencing multiple placement moves. The provisional outturn position of 13.1% (81 out of 618 children) is an increase on the 2016/17 figure of 11.9%. The local increase in LAC is part of a national trend and as a result the placement market is increasingly saturated making appropriate matching decisions an increasing challenge.
- Data recorded on the child's social care record shows that LAC Health and Dental assessment performance is low, however figures reported by the LAC Health Team are higher than those recorded in local systems, suggesting there is still some time lag in inputting data onto Liquid Logic by social workers. Over the year 55.3% of the 226 the completed Initial Health Assessments (IHAs) were within timescale, it is acknowledged that this is low but it is a significant improvement on levels achieved in recent years (18.2% in 2016/17, 8.4% in 2015/16). Both Health and Dental LAC reviews have seen a decline to 76.8% and 64.1% respectively. In respect of the Health Review Assessments the figure reported by the LAC Health Team colleagues is 86%.

3.2.3 Education and Skills

- Improvement is needed to ensure more Key Stage 4 pupils achieve in English and mathematics and the English Baccalaureate at grade 5+ and grade 4+ to meet or exceed the national average. The percentage of pupils who achieved English Baccalaureate (Ebacc) at grade 5 or above is 14.8%; 4.9% below the national average (all schools) and 6.6% below the national average (statefunded schools). The percentage of pupils who achieved Ebacc at grade 4 or above is 17.0%; 4.9% below the national average (all schools) and 6.9% below the national average (state-funded schools).
- The proportion of children and young people attending a "good or better" school, (as rated by Ofsted), showed a decline over the year by 2% to 84.0% at the end of December 2017. This compares to the national average of 87.0%.

3.3 Early Help & Family Engagement

- 3.3.1 **Early Help Initial Contacts.** The annual out-turn for the number of Early Help Contacts that were triaged within five working days was 85.3% which although below the target of 100%, does maintain performance against last year which was also 85.3%.
- 3.3.2 Annual performance shows that 59.7% (604/1011) of families were contacted and engaged within the three working day timescale with a further 32.5% (329/1011) being engaged with outside of timescales bringing the total annual out-turn to a high 92.2% (933/1011). This shows really positive performance and evidences that workers are engaging early with families once allocations are made to localities.
- 3.3.3 **Early Help Assessments.** Of the 68 Early Help Assessments (EHA's) in scope for completion in March 2018, 45.6% (31/68) were completed within the target timeframe. This was in comparison with January 2018 when 31.6% (24/76) of assessments were completed within timescales. A further 8.8% (6/68) of the EHA's required in March 2018 were completed outside of the 45 day time frame which results in a 54.4% (37/68) rate of completion overall which is an overall. This is positive and is evidence of the effectiveness of the Early Help Performance meetings and the local Insight Performance Portal and Dashboard. Overall, during the year, 47.2% (518/1097) of EHA's were completed in timescales, with a further 29.8% (327/1097) being completed outside of timescales. This shows the annual completion rate for assessments at a pleasing 77% (845/1097).
- 3.3.4 Progress and support for partners to complete Early Help Assessments is ongoing and by the end of March 2018 15.9% (225/1415) of EHA's in 2017/2018 had been completed by partners which is a significant improvement on last year when only 6.5% of EHA's were completed by partners. The number of EHA Recommendations submitted to partners from the Triage Team also continues to rise which in turn will have an impact (decreasing) on the high volume reaching the Early Help Locality Teams and will allow more time to focus on intervention with families and an increased focus on performance.
- 3.3.5 The Multi-Agency Practice Development Group continues to meet on a regular basis and is proving very successful. Partners are also supported by the five integrated working leads which are now based across Early Help localities. Partner engagement with the EHA is now being effectively tracked to highlight progress being made across agencies.
- 3.3.6 During 2017/2018, Primary and Secondary schools completed 67.5% (152/225) of Partner EHA's with the remaining Partners (including Health) completing the remaining 32.5% 73/225). Work will continue with health colleagues and other organisations during 2018/2018 to focus on increasing the numbers completed in these areas.
- 3.3.7 **Children's Centres.** Although overall Children's Centres fell slightly short of their registration rates during 2017/18 at 91% against the 95% target. However, performance in the 30% most deprived Super Output Area (SOA) neighbourhoods was better with 96% of children registered against the 95% target overall. Particularly pleasing performance was found in the

- South and North localities of the borough achieving 101% and 97% respectively. (baseline data cleansing to be completed)
- 3.3.8 Engagement rates saw a similar trend with the 30% most deprived SOA's achieving overall performance of 68% against a 66% target. Overall performance across the borough was 58% against the 66% target, however this was an increase when compared with 2016/2017 when performance reached 52%.
- 3.3.9 **Step Down from Social Care.** During May 2017 the step down process changed and is now managed in localities rather than by a central panel approach. Team Managers from Childrens Social Care and Early Help Locality Managers now agree a planned step down through dialogue that enhances integrated working and shared operational practice. Step Down in localities supports better integrated working across front line staff and managers and also enables 'Step Up' dialogue to take place. During the year 489 families with 873 children were stepped down to an Early Help Locality team.
- 3.3.10 Families for Change. The number of families identified as meeting the Troubled Families' criteria increased during March 2018 (117 when compared with 70 in February) in the Families for Change programme. The target of engaging with 633 families during 2017/2018 has been exceeded with the total number of families identified by the end of March 2018 reaching 1073 which as a percentage is 169% of the original target.
- 3.3.11 Work continues to progress in this area with all families where there is a recommendation for an Early Help Assessment now being included in the cohort and outcomes achieved will be eligible for a Payment by Results claim. Families for Change is discussed regularly at the Early Help Performance Meetings and team managers are currently looking at closed cases to identify potential claims.
- 3.3.12 A further Payment by Results (PbR) claim was submitted at the end of March. This brings the total claim to 212 in this financial year, and 292 in total. Of the payments claimed in this financial year, 101 were based on an adult in the family entering employment and sustaining this for 3-6 months (depending on the benefit claimed) and 111 claims were based on 'significant and sustained progress' based on a range of issues identified through the Early Help Assessment.
- 3.3.13 Whilst there has been a significant improvement, the rate of claims at this stage of the programme is in comparison behind other authorities. Rotherham has recently received a letter from the Troubled Families Unit expressing concern over the low number of claims submitted to date. The lead officer for Families for Change has submitted a response to the letter along with a Maturity Matrix Self-Assessment and an Action Plan which explains how performance will be improved.
- 3.3.14 Included in the action plan are various initiatives all of which should improve the efficiency and effectiveness of identifying potential claims, including;

- Update the Troubled Families Outcome Plan and align it with the new Financial Framework recently published by the Ministry of Housing, Communities and Local Government (MHCLG).
- Develop a data warehouse to bring together key data sources
- Continue to analyse retrospective checks on closed cases to check for potential claims
- Continue to develop new reports and analysis to help identify potential claims
- 3.3.15 **Persistent Absence.** The Primary School LA average for Persistent Absence (PA) (which only includes schools who have shared data) is 11.8%, which is an increase of 1.5% compared to the same period in 2016/17. Currently 23 Primary Schools (24.2%) have lower levels of persistent absence than the national average.
- 3.3.16 The Secondary school LA average for Persistent Absence (PA) (which only includes schools who have shared data) is 14.9%, which is an increase of 0.1% compared to the same period in 2016/17. Currently 7 secondary schools (43.8%) have lower levels of persistent absence than the national average. Early Help Team Managers are currently liaising with schools across the borough to ensure that appropriate support is being offered to those pupils who need it to improve their attendance. This may be through family support work and/or group work in schools.
- 3.3.17 **Not in Education, Employment or Training (NEET).** The annual out-turn for Not in Education, Employment or Training (NEET) figure has now been validated at 3.3% against the local target of 3.1%. In respect of young people whose status is "Not Known" annual performance was 2.5% against a 2.6% target. The council plan has been reviewed for 2018/19 and the NEET measure will be replaced with a combined NEET/NK measure with a target of 5.8%. Individual performance will be monitored monthly with the annual target being on the combined totals.
- 3.3.18 Youth Offending. Based on the latest released Youth Justice Board (YJB) data, which covers period October 2016 to September 2017, Rotherham's first time entrants into the youth justice system decreased to 304 which is 10.7% lower than the same period last year. The actual decrease in numbers for Rotherham relates to 51 young people. This continues the downward trend from the previous quarter and is now lower than National and Regional trends. The decrease is attributable to work undertaken with South Yorkshire 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 in relation to a smaller cohort with a greater propensity to offend.
- 3.3.19 **Customer Feedback.** In Early Help and Family Engagement during Quarter 4, 48 voluntary exit surveys were completed; bringing the total at year end to 201 exit surveys returned siting the top reason for requiring support as parenting support for behaviour. Over the year, through these surveys 96% of families rated the Early Help intervention they received as 'Good or Excellent'.

Consistent Case Studies are now embedded across Children's Centres enabling further qualitative feedback to be captured for group based delivery and 1:1 support. A performance framework has been developed which captures KPI's and evidences how the Early help offer contributes to the Public Health Outcomes Framework (PHOF) with Impact Calls completed bi-monthly looking initially at the impact of Breast pump hire.

3.4 Children's Social Care

- 3.4.1 **Contact and Referral.** The volume of contacts in March 2018 was slightly higher than the previous month but is at an expected level (1249 compared to 1167). In total 15,684 contacts have been received over the year compared to 16,609 in 2016/17, which equates to a 5.6% decrease. However in the same period the proportion progressing to referral has increased by 2% from 26.6% to 28.6%. It is worth noting that in the last 6 months this progression rate has been higher at circa 30%. Similarly progression from referrals to assessment has increased over the year and now consistently achieves 99% each month (99.7% in March). This reflects the accuracy in the operational process with the majority of screening activity taking place at contact stage.
- 3.4.2 Performance relating to decisions within 24 hours continues to see improvement month on month to 83.3% in March however, due to lower performance earlier in the year, the 2017/18 outturn position is 79.5% a decline on the 86% achieved in the previous year. This decline can at least in part be linked to the increased contact level screening activity earlier within the process as described above. Quality assurance activity continues to be a well embedded feature of the service, with the Service Manager sampling work completed outside of the 24 hour timescale, this allows for an understanding of the reasons why and ensures that the safety of children was prioritised, in addition further sampling is undertaken where the decisions is not to progress to referral.
- 3.4.3 The re-referral rate for the last 12 months has made incremental improvements each month reaching 23.1% at the end of 2017/18. Individually these small declines of a fraction of a percent may seem inconsequential however in total there has been 4.4% improvement since this time last year. 'In-month' data reflects the same pattern with 19.5% re-referral rate within March (below national average) compared to highs of 30+%. This evidences and supports audit outcomes that casework practice is significantly improving as a result of the implementation of the new operating model. This also suggests that the improvement is being sustained however to be confident that this is fully embedded we would need to see the 12 month rate fall below the national average (21.9%) for a sustained period and then move to a top quartile position (16%).
- 3.4.4 Child Assessments. January, February and March have seen high numbers of assessments completed with 583 assessments completed in March. This reflects the work done across services to reduce the accumulated volume from the latter months of 2017. Although assessment timeliness continues to be lower than expected (71%) there has now been a significant reduction in the number of open out of date assessments across the service. At the time of writing (10th April 2018) there are 68

open out of date assessments in the service, only 13 of which are within the Duty and Assessment Teams. The performance in relation to first assessments following referral is higher than the service wide performance, at 76.8%. Provisional performance for 2017/18 in relation to assessment timeliness stands at 78% which is a 7.3% decline on the previous year, however it is worth noting that the volume of assessments completed has increased by 32% in the same period (6781 compared to 5148).

- 3.4.5 Assessment outcomes continue to be reasonably consistent. 64.5% of assessments completed both in March and across the year resulted in further early help or social care involvement, therefore the majority of families receive help or support as a result of an assessment of need. This is an increase on the 2016/17 outturn of 59.2%.
- 3.4.6 Child Plans. If a child has an out of date plan it may mean that their risks and needs are not being addressed effectively. Compliance at the end of March is consistent with levels seen in the previous two months (82.7% CIN, 86.7% CPP, 89.7% LAC) however this is low when reviewed against the start of 2017/18 but needs to be considered alongside the lower service demand at this time. This will remains subject to management scrutiny at performance meetings.
- 3.4.7 The plans for the two children reported previously as being supported through a child protection plan for more than 2 years have now ceased (siblings both now CIN). The negative impact of the two plans ceasing means that the total number of children ceasing after having a long term CP plans is up to 5 which equates to 1%, however we remain within the national top quartile limit of 2.5%. This data suggests that the services ability to reach a timely resolution for children at risk continues to be good.
- 3.4.8 The data relating to children subject to child protection plans suggests that the services ability to reach a timely resolution for children at 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. There is increased evidence of better use of family group conferencing and edge of care support in addition to the pre-proceedings Public Law Outline (PLO) process which means that whilst more legal proceedings are being issued, more are being well prepared for, with front-loading of assessments whilst children are still subject to CP plans. This is likely to be a consequence of more timely escalations for children who are experiencing significant harm through parental neglect. However, there is only one child being supported through a plan for more than 2 years and only 10 who have been on a plan for more than 18 months, the vast majority of children have been on CPP for less than 12 months. Meaning a sustained period in the top quartile of performance in relation to CP for 2 years or more. In recent months the proportion of children subject to repeat plans (within 2 years) has seen incremental improvements to 8.7% but remains relatively high.
- 3.4.9 **Child Visits.** Compliance against the CPP visit two week standard has declined on last month from 95.1% in February to 89.1% in March. Although this is disappointing year end position given the achievement levels earlier in the year this is less than 1% below last year's outturn

- position when there were 241 less children on a CPP. However performance clinics continue to monitor the situation and team managers are able to articulate the reasons and measures taken to visit the children who do not have a recent visit and what plans are in place to ensure that children are safe.
- 3.4.10 In relation to children in care, performance in LAC visits within the national minimum standards has decreased slightly to 94.7% from last year's outturn of 94.9%. Performance has been impacted by the increase in numbers of LAC and the increased travelling distances required due to placement market saturation. This remains an on-going focus of attention in performance clinics.
- 3.4.11 **Section 47 investigations.** Trend data in relation to Section 47 investigations, demonstrate continued high volume. A comparison of year-on-year outturn data shows a 54.4% increase in the total volume of new S47s from 1457 to 2235. Investigation outcomes show 63.9% (1429 children) over the year were proven to be at risk of continuing harm and therefore progressing to be safeguarded through the child protection process. Only 7.3% (164 children) were not in line with the "significant harm" threshold. This low level indicates continued improvement; with 2015/16 having 11.2% and 2016/17 10.9%. This activity continues to be subject to continued management scrutiny.
- 3.4.12 Children in Need. 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. The service managers in the Locality social work teams continue to lead regular reviews in conjunction with early help colleagues on Child in Need work to minimise drift and ensure only those children that require this type of intervention are open to the service.
- 3.4.13 At the end of March 2018 there were 1686 CIN, when combined with those subject to child protection plans (CPP) this equates to a rate of 413.8 per 10k population; positioning us above both the statistical neighbour average (372.7), and the national average (337.7).
- 3.4.14 **Children subject to Child Protection Plans.** Demand across the whole service is high with further increases for children subject to Child Protection (656 compared to 630 in February). If compared to the 2016/17 outturn figures of 370 CPP this equates to an increase of 77%. This appears to be as a result of a combination of factors, an improvement in social work assessments identifying and responding to risk, the complex abuse enquiry and the upward trend nationally.
- 3.4.15 The volume of Initial Child Protection Conferences completed in March was 62 which is broadly in line with the previous last two months and a decrease on the high numbers held at the end of 2016/17. Timeliness of these conferences is at 70.5% which is very low when compared to levels achieved in earlier months and below statistical neighbours and national

- average. The provisional outturn position is 83.9% which is 7.1% lower than last year.
- 3.4.16 The trend for the number of children with a Child Protection Plan (CPP) continues to remain upwards and our rate per 10K population is now 115.9 which is significantly higher than statistical neighbour (56.6) and the national average (43.3). Managers are reviewing cases closely and having regular discussions regarding being clear about the difference between 'help' and 'harm', this has contributed to the increased number of child protection plans being made. A recent CPP summit of senior managers scrutinised the trend data and explored potential causal factors for the significant rise in CPP this resulted in a number of evaluation workstreams being created. The learning from these workstreams will create the service wide action plan to address the on-going monthly net increase. It is worth noting that in November 2017 Ofsted agreed that children in Rotherham who were on CP plans at the time, needed to be on plans.
- 3.4.17 **Looked After Children (LAC).** Demand across the whole service is high with further increases for Looked After Children (624 compared to 609 in January). If compared to the 2016/17 outturn figures of 488 LAC this equates to an increase of 29%. This appears to be as a result of a similar combination of factors as seen in the CPP rise, (improved identification and response to risk, the complex abuse enquiry and the upward trend nationally). The rate per 10,000 of the population now stands at 110.3 as compared to the statistical neighbour average of 81.3 and the national average of 62 (as reported at March 2017).
- 3.4.18 A 'Right Children, Right Care' transformation action plan is now being implemented focusing on both reducing the number of admissions through edge of care preventative approaches and 'safely' increasing the number of children ceasing care. The scoping process has been completed for the Right Child Right Care programme and there are 170 children for whom discharge is assessed to be a viable option. Work on progressing these plans will now commence, although significant impact is not anticipated until late 2018.
- 3.4.19 Positively the rate of discharge reached its highest level for 6 months at the end of the year with 20 children ceasing care in March 2018 indicating the Right Child Right Care programme is beginning to have some impact.
- 3.4.20 **LAC Statutory Reviews.** Due to a combination of Independent Reviewing Officer sickness levels, high demand and social workers not completing their pre-review reports within timescales there was a dip in the timeliness of LAC statutory reviews at the beginning of 2018. However, it is reassuring to note that, in March performance improved to above target at 95.5% and helped improve the full year's performance to 90.4%.
- 3.4.21 **LAC Placements.** The proportion of long term LAC who have lived in the same placement for over two years continues to have achieved incremental month-on-month improvements towards the end of the year towards an outturn of 61.3% (92 out of 150 children) this followed an in year low in November of 59.2%. Progress on this measure has been

- impacted by the increasing number of long term LAC and our desire to bring children closer to home and into family placements, (positive placement moves). Due to the timeframes within the definition this is an area of performance which cannot be improved quickly. A forward projection analysis of the current cohort predicts that this measure potentially could reach 66-67% within the next reporting year.
- 3.4.22 In the last three months of 2017/18 there was an increase in the number of children experiencing multiple placement moves. The provisional outturn position of 13.1% (81 out of 618 children) is an increase on the 2016/17 figure of 11.9%. The local increase in LAC is part of a national trend and as a result the placement market is increasingly saturated making appropriate matching decisions an increasing challenge. The Intensive Programme being implemented by the Therapeutic Team is clearly having some positive impact on the number of placement disruptions for the most vulnerable and challenging of our young people who are known to be at risk of placement breakdowns. However, it is also likely that the impact of the Right Child Right Care project will mean more placements will be converted to Special Guardianship Orders/Child Arrangement Orders, which will be a positive outcome for the child but may have a significant negative impact on the stable placement performance over 2018/19.
- 3.4.23 Despite the further increase in LAC numbers, the proportion of children in a family based placement remains relatively stable at 82.4% of the total cohort. Given the increasing numbers of LAC performance regarding the proportion of LAC in commissioned placements has declined to 50.5% (315 of 624 LAC). This decline is not significant and reflects the same level as October when there were only 267 LAC in the cohort. This indicates that the in-house Fostering and Placements team have become far more efficient in placing children within in-house placements.
- 3.4.24 **Foster Carer Recruitment.** At the end of the financial year there had been 17 new foster families approved providing 27 placements, exceeding the target set of 25 new placements over the course of the year. A more stretching target has been set for 2018/19 to create 35 new in house placements.
- 3.4.25 A number of initiatives being implemented to support in-house fostering recruitment including Mockingbird, Muslim Foster Carer recruitment and Challenge 63. In addition the Duty System has been overhauled and all initial enquirers are 'kept warm' via regular contact with the enquirer and newsletters even if they decide that now is not the right time for them to foster. The dedicated marketing officer is also having a marked impact with regular stories appearing in the local press meaning that a Google search of Fostering in Rotherham now brings RMBC as the 5th entry and the first reference that is not a paid for advertisement a significant improvement as compared to the very low social media presence the Fostering Team had last year.
- 3.4.26 As a result of the revised referral process the conversion rate form initial enquiry has as over the past 6 months improved from 11% to 16%. Over the course of 2018/19 the team are already forecasting approval of 14 foster families providing 16 new placements over the first half of the year.

The service is now well-positioned to improve on last year's performance and achieve its target of 35 new foster placements.

- 3.4.27 **LAC Health and Dental.** The performance figures reported by the LAC Health Team are higher than those recorded in local systems, suggesting there is still some time lag in inputting data onto Liquid Logic by social workers. The number of Initial Health Assessments (IHA) complete each month remains relatively consistent however timeliness performance according to internal recording is below 40% at 36.4% (4 out of 11 completed IHAs) this is particularly low when compared to achievements earlier in the year of between 75-90%. Over the year 55.3% of the 226 IHAs completed were within timescale, it is acknowledged that this is low but it is a significant improvement on levels achieved in the last three years (18.2% in 2016/17). The reported figure by Health colleagues for March is 56% with a further five "did not attends" and one last minute cancellation which needed to be followed up. Both Health and Dental LAC reviews have seen a decline to 76.8% and 64.1% respectively. In respect of the Health Review Assessments the figure reported by the LAC Health Team colleagues is 86%.
- 3.4.28 It is expected that internal Health related data will change once the data is rerun and validated in future performance reports. Work is being progressed with the Liquid Logic team to enable the LAC Health Team to directly input the Health Needs Assessment onto the case file which should resolve this time lag issue.
- 3.4.29 LAC Education. 97% of eligible LAC have a Personal Education Plan (15 LAC with no PEP) and 95% have a PEP less than one term old (24 with an older or no PEP). Although this performance is high and an improvement on the Autumn term it is slightly lower than usual due to a combination of the adverse weather which meant that several PEPs had to be rescheduled, and the fact that it was a very short school term. Also, the figure includes LAC who either did not come into care until late in the term, or who we were notified had come into care, and where there wasn't time to arrange a PEP meeting.
- 3.4.30 The quality of PEP and education planning is beginning to have an impact on educational planning with Key Stage 2 outcomes improving in 2017 as compared to 2016 and to a degree significantly above national and regional comparators. In respect of Key Stage 4 outcomes for 2017:-
 - 3 young people achieving 9 A*-C including English & Maths.
 - 1 achieved 8 A*-C including English but missed maths by 1 grade
 - A further 2 achieved 5+ A*-C including English but missed maths by a grade.
 - Another young person achieved 5 A*-C but missed maths and English by 1 grade.
 - 3 young people achieved 4 A*-C: 1 including English and 1 including Maths.
 - 10/30 had an EHCP, EHCP pending or a statement of SEN.
 - 10 young people were not in mainstream schools. Of the 20 children in mainstream education:

- 3/20 (15%) achieved 9 A*-C including English & Maths
- 6/20 (30%) achieved 5+ A*-C
- 9/20 (45%) achieved 4+ A*-C
- 3.4.31 Attendance for the whole LAC cohort currently stands at 94% but there are 26 young people who are currently receiving less than their 25 hours statutory entitlement. Some of these young people do not have the emotional resilience to manage any more than their current access but the multi-agency group, including Early Help, continues to meet on a monthly basis to support more of these young people towards their full entitlement.
- 3.4.32 **Care Leavers.** Despite an on-going increase in the number of Care leavers to 257 at the end of March 2018 compared to 223 in March 2017, the proportion with a pathway plan remains at an outstanding level (97%). The timeliness of these plans also continues to improve with 83% of young people with an up to date plan compared to 69% earlier in the year. The service continues to focus on improving the quality of the plans so that they are meaningful for young people and the introduction of a new plan template is significantly supporting this.
- 3.4.33 The numbers of care leavers in suitable accommodation has declined, however, to 96.9% which is solely due to 2 more young people receiving custodial sentences. Current performance still places Rotherham in the top quartile and in fact RMBC is 10th out of all the local authorities in England in respect of this performance measure.
- 3.4.34 Performance in respect of care leavers who are in Education, Employment or Training has improved after a recent decline in recent months, at 63.6% this measure currently stands at its highest level for 12 months. The Leaving Care Team are working closely with other Directorates to firm up the pre-apprenticeship offer (work experience and work placements) in order to achieve increased sustainability as only one young person from 2017 is still attending his apprenticeship placement. However, performance remains strong and once again places Rotherham back in the top quartile.
- 3.4.35 There are currently 13 Care Leavers in Higher Education and one undertaking a PhD. A further care leaver completed their Masters degree in 2017 in Engineering.
- 3.4.36 **Adoptions.** Due to their age, health needs or being part of a sibling group 55% of the children in Rotherham's adoption pathway process are classed by national guidelines as being 'hard to place' and therefore harder to find adoptive families. Rotherham's policy is to persevere in seeking adoptive placements for these and all children for as long as it is reasonable to do so. Whilst this can impact on performance figures, this practice does give the necessary reassurance that the adoption service is 'doing the right thing' by its children by doing everything it can to secure permanent family placements for its children. As a result one adoption completed this year 1,624 days after the child became looked after this demonstrates the determination and perseverance of the adoption team. That being said

- Rotherham's Adoption Team performance places the authority within the top quartile nationally with further specific recognition by Ofsted for their adopter training programme.
- 3.4.37 There were five adoptions in March, which is the highest single month of the reporting year, this takes the year's total to 27. Whilst this is a drop from last year there are currently 43 children on the adoption pathway with 21 of them already having an identified match and placed or about to be placed with their adoptive parents. As a result the adoption team are already well-placed to improve on this performance next year. This reduced outturn is almost solely due to adoption case law which now gives birth parents greater rights of appeal until the Adoption Order hearing. Whilst no appeals have been successful, thus far, this has prolonged the adoption process for some children.
- 3.4.38 Over the whole year the average time between the child entering care and being placed with the adoptive family (A1) performance was 325 days a slight increase on the year-to-date figure of 311 days reported in February. This remains excellent performance when compared to the statistical neighbour average of 511 days and the national average of 558 days and places Rotherham in the top quartile. Over the longer 3 year period 2015-17 Rotherham has actually achieved an average performance of 404 days as opposed to a national average of 520 days which places Rotherham at the 11th best performing local authority in England over this period.
- 3.4.39 Time between the Placement Order being made and the match with adoptive parents (A2) is back to 125 days compared to the Statistical Neighbour average of 214 days and the national average of 226 days and once again Rotherham is in the top quartile and at an England ranking of 42nd over the 3 year period.
- 3.4.40 In respect of adopter recruitment there are currently 12 adoptive parents undergoing the assessment process, 6 at stage 1 and 6 at stage 2. Given that only 13 adopters were approved throughout 2016/17 the team is once again well placed to improve on recent performance.
- 3.4.41 Child Sexual Exploitation (CSE). The improvement work in relation to services to identify and address child sexual exploitation in the borough has been extensive and rapid during the time since the Jay report and subsequent inspection of Children's Services (2014). Improvements in relation to practice and process in this field have been remarkable, confirmed by OFSTED in the 2017 inspection and confidence can be had across the Rotherham partnership in relation to the scale and nature of the improvement achieved. In this context, Rotherham's work in this regard is now able to move from a context which involves the kind of rapid, initial responses to service improvement which have been commonplace, to one of more business as usual approaches.
- 3.4.42 The overall number of new referrals which related primarily to CSE has seen a decline from 2016/17 (231) to 2017/18 (169). Quality assurance activity continues to be carried out in relation to CSE work in the Borough (Evolve) and indicates that social workers are conducting good quality work which is often successful in making significant positive differences for young people. However, the service is not complacent, this will continue to be an area for focus for embedding the learning and wider

understanding in relation to the features of CSE and ways to successfully intervene and disrupt activity.

- 3.4.43 **Social Worker Caseloads**. The average caseload for Duty teams continues to reduce from highs of 22.5 in December and is now well within limits at 17.9.
- 3.4.44 There has been an slight decrease in the overall number of agency staff across social care services from 73 to 71, similarly in terms of frontline teams, who either manage or work direct with children, there has been a further reduction from 29 to 27. From April more meaningful measures will be introduced to this report to demonstrate this figure as a proportion of the workforce.
- 3.4.45 Quality, Learning and Development. As part of the CYPS Quality Assurance Framework Team Managers across the service are, on a monthly basis, allocated a number of cases from other teams to audit and grade based on the Ofsted rating scheme. To ensure consistency of judgement senior managers also undertake sample moderation of the audits. Over the year a total of 892 Team Manager audits were completed. Outcomes over the year have seen an improving trajectory. In the first six months of 2017/18, April to September, 5% of cases audited were rated good or better compared to 21% for the last 6 months October to March.
- 3.4.46 Qualitative information for these audits is analyses to identify themes of both good practice and areas for improvement. These in turn feed into the staff learning and development programme and have helped inform agendas for both training and full service days.
- 3.4.47 Recent audits showed the following areas of good practice: engagement of child during visit and assessments, regular reviews, clear assessment of risk, clear management oversight and use of signs of safety. Recent areas of for improvement: genogram not always up-to-date or detailed enough, assessments incomplete, robustness of reviews, actions without clear timescales, wider exploration of family/friends network.

3.5 Education and Skills

- 3.5.1 **Early Years.** The number of two-year-olds taking up an early education place in Rotherham continues to remain high, with 81.3% of Rotherham's eligible two-year-olds taking up a place in spring 2018 which remains above our target of 80%.
- 3.5.2 95% of all Rotherham's Ofsted-registered Early Years and Childcare providers are judged to be good or outstanding, which is above the national average
- 3.5.3 **School Inspection.** The latest end of term position regarding the proportion of children and young people attending a "good or better" school, (as rated by Ofsted), showed a decline over the year by 2% to 84.0% at the end of December 2017. This compares to the national average of 87.0%.

- 3.5.4 To achieve improvement against this measure is complicated due to factors beyond the control of the authority. The DfE academy conversion programme has a significant impact on the improvement of the aggregated Ofsted school profile for Rotherham. The first inspection for all new schools, including academies, will usually take place within three years of opening. If a convertor academy school opens they retain their latest Ofsted judgement and this is reported against the school, aggregated local authority and national averages until their first school inspection (usually during the third year of the school opening). Some schools can retain a 'requiring improvement judgement' for up to six years depending on their academy conversion within the OFSTED cycle.
- 3.5.5 There are a number of multi-academy trusts within Rotherham who work in partnership with the Rotherham School Improvement Service (RoSIS) while some have made the decision to work with schools within their own trust and don't engage with the local authority. RoSIS continues to encourage all schools to work with the service and engage in best practice and is committed to retaining positive links and communication with all of Rotherham's educational providers whatever their status.
- 3.5.6 Early Years Foundation Stage Profile (EYFSP). From 2013 to 2016 Rotherham has achieved above the national average for a 'good level of development' (GLD), with an upward trajectory each year. Performance for this measure improved from 70.4% in 2016 to 72.1% in 2017. The 2017 outcome places Rotherham 1.4% above the national average of 70.7% and ranks the authority as joint first within the statistical neighbours comparator group and joint second against in the Yorkshire and Humber region.
- 3.5.7 **Phonics Screening Checks.** The percentage of pupils passing the phonics screening check in Year 1 had increased annually up to 2016 but remained static in 2017 at 79%. National averages also remained static in 2017 at 81%. Therefore gap the national average remains at 2% in 2017. Rotherham's Year 1 outcomes are ranked joint 5th compared to our statistical neighbours and joint 7th compared to other LAs in the Yorkshire and Humber region.
- 3.5.8 At Year 2 91% of pupils met the expected standard of phonics screening checks in 2017; this compares to the national average of 92%. The gap to the national average is 1% below.
- 3.5.9 **Key Stage 1 Assessments (KS1).** There were significant changes in KS1 teacher assessments in 2016. The previous levels 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 whilst the government decides the future of assessment for this Key Stage. Assessments are reported as working at the expected standard (EXS+), working at greater depth (GDS), and working lower than the expected standard.
- 3.5.10 The 2017 Key Stage 1 outcomes show:-

- 64.0% of pupils met the expected standard (EXS+) in reading, writing and mathematics (R,W&M) combined in 2017, compared to 59.8% in 2016. Rotherham has improved by 4.2% and is just above the national average.
- 73.3% of pupils met the expected standard in reading, compared to 70.9% last year (increased by 2.4%).
- 68.6% of pupils met the expected standard in writing, compared to 64.9% last year (increased by 3.7%).
- 74.7% of pupils met the expected standard in mathematics, compared to 71.3% last year (increased by 3.4%).
- Rotherham is above or in line with the national average at the expected standard in writing, mathematics and R,W&M combined and below the national average at the expected standard in reading.
- 3.5.11 In the greater depth standard for R,W&M combined at KS1, Rotherham has improved by 3.3% to 12.2%; this is 1.3% above the national average. 25.5% of pupils met the greater depth standard in reading, compared to 21.7% last year (increased by 3.8%). 16.9% of pupils met the greater depth standard in writing, compared to 12.3% last year (increased by 4.6%). 22.5% of pupils met the greater depth standard in mathematics, compared to 17.2% last year (increased by 5.3%).
- 3.5.12 Rotherham is above the national average at the greater depth (GDS) standard in all subjects in 2017 and the KS1 R,W&M combined indicator is ranked 4th at the EXS+ and 3rd at GDS against other LAs in the Yorkshire and Humber region
- 3.5.13 **Key Stage 2 (KS2).** 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.
- 3.5.14 Key stage 2 outcomes show:-
 - 61% of pupils met the EXS+ in R,W&M combined in 2017, compared to 53.9% in 2016. Rotherham has improved by 7.1% and is in line with the national average.
 - 69% of pupils met the expected standard in reading, compared to 63.5% last year (increased by 5.5%).
 - 75.9% of pupils met the expected standard in mathematics, compared to 72% last year (increased by 3.9%).
 - 75.7% of pupils met the expected standard in grammar, punctuation and spelling (GPS) compared to 70.9% last year (increased by 4.8%).
 - 77.3% of pupils met the expected standard in writing TA, compared to 77.7% last year (decreased by -0.4%).
 - In the higher standard (HS) 7.1% of pupils met the higher standard in the R,W&M combined measure, compared to 4.4% last year (increased by 2.7%).

- 19.2% of pupils met the higher standard in reading, compared to 15.1% last year (increased by 4.1%).
- 19.6% of pupils met the higher standard in mathematics, compared to 14.7% last year (increased by 4.9%).
- 27.0% of pupils met the higher standard in GPS, compared to 20.1% last year (increased by 6.9%).
- 17.8% of pupils met the greater depth standard in writing TA, compared to 13.8% last year (increased by 4.0%).
- 3.5.15 In 2017, the KS2 R,W&M combined indicator is ranked joint 2nd at the EXS+ and 7th at the HS compared against other LAs in the Yorkshire and Humber region (15 LAs). The KS2 R,W&M combined indicator is ranked 3rd at the EXS+ and joint 5th at the GDS / HS compared against our statistical neighbours (11 LAs).
- 3.5.16 There are three Rotherham primary schools below the KS2 floor standard. One school is a sponsored academy and two schools are convertor academies. All other schools are above the floor standard. To be above above the floor standard the school must meet:
 - 65% of pupils meet the EXS+ in R,W&M (ie achieve that standard in all three subjects) or
 - The school achieves sufficient progress scores in all of reading, writing and mathematics.
 - The sufficient progress threshold for 2017 was reading -5.0, writing -7.0 and mathematics -5.0.
- 3.5.17 **KS1** to **KS2 Progress Measures**. The average progress score for Rotherham LA in reading is -0.1, in writing is +1.0 (sig+) and in maths is +0.7 (sig+). The progress measures in writing and mathematics are identified as significantly above the national average.
- 3.5.18 The KS1 prior attainment average points score (APS) for Year 6 pupils was below the national average for both boys and girls in 2017 with boys being the wider gap to their national counterpart.

	Rotherham APS	National APS
All Pupils	15.3	15.8
Girls	15.9	16.2
Boys	14.8	15.5

- 3.5.19 Girls progress in writing was +1.7 (sig+) and boys progress in mathematics was +1.5 (sig+) in Rotherham in 2017.
- 3.5.20 **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. In 2017, the Progress 8 score is +0.06; this is 0.09 above the national average (state-funded) score of -0.03. The Progress 8 score is only calculated at a national level for state-funded schools.

- 3.5.21 In 2017, the Progress 8 measure is ranked 2nd compared against our statistical neighbours and ranked 5th compared against other LAs in the Yorkshire and Humber region.
- 3.5.22 The average Attainment 8 score has decreased by 3.8 points to 45.0 in 2017. National averages have decreased by 3.7 points to 46.4 (state-funded i.e. LA maintained schools, academies and free schools) and 3.9 points to 44.6 (all schools including the independent sector). The LA average is 0.4 points above the national average (all schools) and 1.4 points below the national average (state-funded schools).
- 3.5.23 The percentage of pupils achieving grade 5 or above in English and Maths is 37.1%; 2.5% below the national average (all schools) and 5.8% below the national average (state-funded schools). The percentage of pupils achieving grade 4 or above in English and maths is 59.0%; 0.1% below the national average (all schools) and 5.2% below the national average (state-funded schools).
- 3.5.24 The percentage of pupils who achieved English Baccalaureate (Ebacc) at grade 5 or above is 14.8%; 4.9% below the national average (all schools) and 6.6% below the national average (state-funded schools). The percentage of pupils who achieved Ebacc at grade 4 or above is 17.0%; 4.9% below the national average (all schools) and 6.9% below the national average (state-funded schools).
- 3.5.25 In 2017, a school will be below the floor standard if its Progress 8 score is below -0.5, unless the confidence interval suggests that the school's underlying performance may not be below average. Nationally, 365 schools were below the DfE floor standard in 2017 There are no Rotherham schools below the floor standard.
- 3.5.26 **Exclusions.** The Council continues to set challenging but realistic targets to address the rising number of exclusions, both fixed-term and permanent. These rising figures are following a national trend and being addressed through a recent Department for Education 'Call For Evidence' that will contribute to a review of school exclusions, to be reported on by the end of 2018.
- 3.5.27 This last academic year (2016/17) initially had 57 permanent exclusions but 19 (3 Primary and 16 Secondary) were overturned or rescinded, with the actual recorded number 38 (8 Primary, 30 Secondary). This represented a slight fall overall but, more significantly; it shows a halt in the trajectory of previously rising exclusions.
- 3.5.28 From September 2017 to the end of April 2018 the current number of permanent exclusions in secondary schools is 26 (plus 19 withdrawn); with 3 primary permanent exclusions (plus 3 withdrawn). This indicates a promising decline (with nine weeks remaining before final numbers). It is becoming evident that the culture, leadership and ethos of schools/multi-academy trusts contribute to their approach to exclusion. Measures are being taken across the partnership model advocated by the local authority, including training and development of the local authority Pupil Referral Units' offer for children and young people with social, emotional and mental health needs.

- 3.5.29 Education Health and Care Plans (EHCP). Education Health and Care Plans are given to children who have been assessed as having high level Special Educational Needs (SEN) they were introduced in 2014 replacing the old SEN Statements. All Education Health and Care Plan (EHCP) completions and conversions from SEN Statements are measured nationally. The monitoring of these two targets takes place fortnightly through an 'Inclusion Performance Clinic' with the involvement of the Performance and Quality team, which both challenges and supports the development of greater accuracy and scrutiny of data.
- 3.5.30 All local authorities were required to convert any old SEN Statements to EHCPs by April 2018. Therefore the percentage of completed new EHCP's within 20 weeks has fluctuated over this year due to the necessary prioritising of these conversions and seasonal fluctuations in demand (ie school holiday periods). Cumulative performance over the year for new EHCPs was 56.5%. New incremental quarterly targets have been set and are being monitored for 2018/19 with the aim of returning the service to performance levels of 90% in following reporting year (2019/20).
- 3.5.31 With regard to the 'conversions', there were a total of 998 Statements of SEN to convert to EHCP. 98% of all conversions were completed by the target date (April 2018) the remaining 2% (24 cases) were delayed due to the complexity of the individual cases. At the time of writing this report (25th May) this number had reduced to four daily progress tracking for each of the remaining children. This is a significant achievement for the team and demonstrates accelerated progress in the last eight months. At the end of July 2017 there were almost 500 plans remaining for conversion.

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 <u>Timetable and Accountability for Implementing this Decision</u>

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 <u>Implications for Partners and Other Directorates</u>

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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Approvals Obtained from:-

	Named Officer	Date
Strategic Director of Finance & Customer Services	Michael Wildman	31/05/18
Assistant Director of Legal Services	Neil Concannon	26/06/18
Head of Procurement (if appropriate)	N/A	
Head of Human Resources (if appropriate)	Amy Leech	05/06/18
CYPS Directorate Leadership Team	n/a	05/07/18

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This report is published on the Council's website or can be found at:http://moderngov.rotherham.gov.uk/ieDocHome.aspx?Categories

Appendix A

Children & Young People Services



Early Help and Family Engagement Monthly Performance Report

As at Month End: March 2018

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;-

- increase in numbers (no good/bad performance)

- stable with last month (no good/bad performance)

- improvement in performance
- decline in performance but still within limits of target

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.

1 25 1 25 1 25 1 25 1 25 1 25 25	Ý	- decrease in numbers (no good/bad performance)	V		rformance, not on target													J	J		
Part				GOOD	DATA NOTE						DOT	DAG	Ta	rget and Toleran	ces	YR ON YF	R TREND	LA	TEST BENCHM	IARKING - 2014	/15
Part	NO.	INDICATORS - EARLY HELP BOROUGH WIDE	E PERFORMANCE			Jan-18	Feb-18	Mar-18		DATA NOTE	(Month on		Red	Amber		2015/16	2016/17			NAT AVE	NAT TOP QTILE THRESHOLD
Part	<u>1.1</u>	Early Help Contacts during the reporting month (including s	Step downs)	Info	Number	391	330	366	4277	Financial Year	^						3914				
Part	RIAG			Info	Number	299	263	265	3145		^						3337				
Author of the Control Contro	F 1.2		s or receipt (excluding step	High	%	91.3%	99.2%	81.9%	85.3%		•	R		>90% <100%	100%		85.3%				
No.	<u>9</u> 2.1	Number of Initial Contact cases that reached timeliness so	cope within the reporting month.	Info	Number	58	63	69	1011		^						501				
Part	NTAC	N		Info	Number	25	43	40	604		Ψ						616				
March 2 Carlot on the Section 1 Se	= 0	Number and % or initial Contacts made within I nree working	ng days or allocation	High	%	43.1%	68.3%	58.0%	59.7%		Ψ.	R		>65% <75%	75%		40.5%				
1	3.1a		ss scope within the reporting	Info	Number	80	74	68	1097		Ψ										
Fig. Street of the control to the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the post of the reporting period Fig. Street (Open control and the end of the post of the reporting period Fig. Street (Open control and the end of the post of the reporting period Fig. Street (Open control and the end of the post of the reporting period Fig. Street (Open control and the end of the post of the reporting period Fig. Street (Open control and the end of the post of the end of the end of the post of the end	ELP	Timeliness is defined as Farly Holp Assessment being som		Info	Number	36	23	31	518		^										
Fig. Street of the control to the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the reporting period Fig. Street (Open control and the end of the post of the reporting period Fig. Street (Open control and the end of the post of the reporting period Fig. Street (Open control and the end of the post of the reporting period Fig. Street (Open control and the end of the post of the reporting period Fig. Street (Open control and the end of the post of the reporting period Fig. Street (Open control and the end of the post of the end of the end of the post of the end	3.2a SSME	Decision date (3 days IC plus 45 days for EHA)	,	High	%	45.0%	31.1%	45.6%	47.2%		^	R		>90% <100%	100%						
1 1 2 2 2 2 2 2 2 2	EAR	Number and % of Early Help Assessments made by Partn	ers (as a proportion of the total	Info	Number	31	37	25	225	Financial Year	Ψ						75				
40 Number of Chronic and Chronic of Chr	3.3	number of EHA's in the reporting month)	(3 3 4 4 5 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6		%	27.4%	27.2%	17.5%	15.9%	Financial Year	Ψ						6.5%				
Fig.		Number of Open cases at the end of the reporting period		Info	Number	1551	1547	1645	1645	,	^						1424				
Secondary Seco	4.2	Number of Closed cases in the reporting period		Info	Number	152	124	127	1,615		^						1679				
Fig.	ASEL	Number of re-referrals where original referral was Farly	from Step Down Panel			L	<u> </u>	<u> </u>	<u>-</u>		L										
State Part Consider of State Part Consider of State State Consideration State Consid	O 4.3	inein	From MASH				Data In Develop	pment													2
State Continue C	5.1	Number of cases (Families) submitted to Step Down Pan	nel Old Indicator	Info	Number				37								559				G G
State Continue C	SAD		as agreed during the reporting	Info	Number				34								445				ر
Final State	STEP	period - Old Indicator		Info	%				91.9%								79.6%				C
Secondary % Firmany Firmany % Firm	NN SX		Families	Info	Number	64	36	52			^										
Number Parameter Paramet			Children	Info	Number	114	80	108	873		^										
Children Info Number	STEF		Families	Info	Number		•	Data in dev	velonment												
Fig. Countre() Fig.	5.4		Children	Info	Number			Data III de	velopment												
8.2 % of children aged 0-5 living in the Rotherham area who have accessed Children's Centr Accidence of paraly larged Ferminary 6 (Journaly) 94.0% Primary 8 (Journal) 11.8% Secondary 8 (Journal) 11	S S S 6.1		re registered with a Children's	High				91.0%	91%	Financial Year	^	R			95%	91%	94%				
The color of the primary % (Termly) The pr		% of children aged 0-5 living in the Rotherham area who hactivities	ave accessed Children's Centre	High				58.0%	58%	Financial Year	^	R			66%	54%	52%				
1 1 1 1 1 1 1 1 1 1				Low			11.8%			Academic Year	ψ	А			8.2%		10.1%	(Autumn/Spring	(Autumn/Spring	(Autumn/Spring	
1 1 1 1 1 1 1 1 1 1	ELFAR (1.1	% of Persistently Absent (PA) Children and Young People		Low			14.9%			Academic Year	ψ	А			13.1%		15.2%	13.8% (Autumn/Spring	10.9% (Autumn/Spring	12.3% (Autumn/Spring	
1 1 1 1 1 1 1 1 1 1	W NOILES	% of children attending School		High		95.8%	95.6%			Academic Year	y	А			96.0%		95.5%	96% (Autumn/Spring	96.3% (Autumn/Spring	96.1% (Autumn/Spring	
Number and % of families pagged as a pagge	EDOC	70 of Grindren attending School		High		94.0%	94.0%			Academic Year	→	А			94.8%		94.0%	(Autumn/Spring	(Autumn/Spring	(Autumn/Spring	
	K 0.1	Number and % of families engaged as a percentage of an	nual target Families For	High	Number	141	70	117	1073	Financial Year (Cumulative)	1	G			633 Families	371	882				
High Cumulative % 140% 151% 169% Financial Year (Cumulative)	NGE 8.1			High	Cumulative %	140%	151%	169%	169%		^	G			100%	100%	100%				
8.2 Number of FFC PbR outcomes claimed (evidence of employment outcome) High Number 16 13 10 101 Claims subject to confirmation of confirmat	8.2	Number of FFC PbR outcomes claimed (evidence of emple	oyment outcome)	High	Number	16	13	10	101	Claims subject to	ψ	R				5	37				
8.3 Number of FFC PbR outcomes claimed (evidence of significant & sustained progress) High Number 14 23 8 111 TFU R 26 1280-350 0 43	4	Number of FFC PbR outcomes claimed (evidence of signif	ficant & sustained progress)	High	Number	14	23	8	111	claim windows by	•	R				0	43				

Performance Summary As at Month End March 2018

"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)

 improvement in performance decline in performance but still within limits of target 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.

	→	- stable with last month (no good/bad performance) - decrease in numbers (no good/bad performance)	_	_	performance but still within limits of target performance, not on target	et									logic. Note: there may be some areas where the figures have changed. Identical Services Area of the figures have changed. Identical Services Area of the figures have changed.							
				GOOD	DATA NOTE						DOT	RAG	Targ	get and Tolerand	es	YR ON Y	R TREND	L	ATEST BENCH	MARKING - 2014	1/15	
	NO). INDICATORS - EARLY HELP BOROUGH WIDE	PERFORMANCE	PERF IS	(Monthly)	Jan-18	Feb-18	Mar-18	Year To Date 2017/18	DATA NOTE	(Month on Month)	(in month)	Red	Amber	Green (Target)	2015/16	2016/17	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTILE THRESHOLD	
	9.1	Young people aged 16·17 (academic age) whose current a	activity is not known	Low	%	2.3%	1.3%	2.0%	2.5%	Annual (Dec Jan, Feb Average)		G			2.6%	N/A	2.6%					
	<u> </u>					2.3%	1.3%	2.0%		Monthly	↑	G			3.0%							
z	9.2	2 Young people aged 16-17 (academic age) who are NEET		Low	%	3.2%	3.6%	3.3%	3.3%	Annual (Dec Jan, Feb Average)	-	R			3.1%	N/A	3.1%					
ATIOI	ļ					3.2%	3.6%	3.3%		Monthly	^	G			3.5%							
ARTICIPATION	9.3	% of Academic Age 16,17,18 Corporate Responsibility LAC	C/CL EET	High	%	71.3%	71.3%	71.7%		Quarterly	^	R			80.0%	74.7% (Nov, Dec, Jan ave)	71.2% (Nov, Dec, Jan ave)					
PAR	9.4	% of Academic Age 16,17,18 Corporate Responsibility LAC	C/CL NEET	Low	%	24.4%	24.0%	22.9%		Quarterly	^	R			20.0%	22.3% (Nov, Dec, Jan ave)	27.8% (Nov, Dec, Jan ave)					
	9.5	Young people aged 16-17 (academic age) meeting the duty	y to participate	Info	%	92.7%	91.5%	92.6%		Monthly	^					91.9% (Nov, Dec, Jan ave)	92.5% (Nov, Dec, Jan ave)					
	9.6	No of Youth sessions undertaken in the reporting month	Centre Based	Info	Number	84	83	46	886	Annual	Ψ.						1434					
			Non-centre based	Info	Number	48	53	33	506	Annual	•						450					
	10.	1 Numbers of young people first time entrants (FTE) into the	criminal justice system	Low	Rate per 100,000 of 10-17 population				215 (Oct16 - Sep17)	Annual				I	ower than	519 (Apr14 - Mar15)	319 (period Jan16 - Dec16)	439.76		409.1		
үот	10.2	2 Use of Custody		Low	Rate per 100 of 10-17 population			To be reported in	0.33 (Jan17 - Dec17)	Annual					quarter previous	0.24	0.29 (period Apr16 - Mar17)					
λ.	10.:	3 Rate of re-offending by young offenders		Low	Binary Rate			May 18	29.2% (Jan - Mar16 cohort)	Annual					year and comparable vith national	Data not available	31.8% (Jul 14 - Jun 15)	36.28		37.95		
	10.4	4 Frequency of re-offending by young offenders		Low	Frequency Rate				0.36 (Oct 15 - Dec 15)	Annual					trends	until early 2017	0.9 (Jul14 - Jun15)					
ACK	11.	1 No of Exit Surveys returned		Info	Number	18	21	9	201	Monthly	Ψ						222					
EDB/	11.2	Number of formal complaints received during the reporting	month	Info	Number	0	0	0	1	Monthly	→						4				•	
IR FE	11.:	3 Number of formal complaints upheld in the reporting month	h	Info	Number	0	0	0	0	Monthly	→						2					
TOME	11.4	4 Number of formal complaints closed during the month which	ch were dealt with in timescal	es High	Number	0	0	0	1	Monthly	→				100%		2					
CUSTON	11.	5 Number of compliments received during the reporting mon	th	Info	Number	0	1	0	11	Monthly	•						9					
QUALITY ASSURANC E	12.	Number of Team Manager Audits completed in the reporting	ng month	Info	Number	10	13	12	98	Monthly	•						151					
	40	4 Number of staff	Contract Count	Info	Number	312	311	315			^											
NOIL	13.	1 Number of staff	FTE	Info	Number	232.13	233.27	238.11			^											
ORMA	13.	2 Number of starters		Info	Number	1	4	4	21	Monthly	→						11					
T INF	13.3	3 Number of leavers		Info	Number	1	4	2	29		•						34					
N W T	13.4	4 Staff Vacancies		Info	Number	58	63	59			•											
BLISF	13.	5 Percentage of PDR's completed		High	%	99.66%	99.32%	99.70%	99.70%	Annual	^	G			98%	98%	100%					
ESTA	13.0	6 Number of Formal Capability processes in progress		Info	Number	0	0	1	1	Monthly	^						1					
	13.	7 Sickness	Annual FTE sick days	Low	Cumulative No.	11.7	11.7	11.6	11.6	Annual	^	R			9.52	10.46	11.2					

Quarterly Scorecard As at: Quarter 2 (Jul-Sep 17)

*'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

									201	7/18				
	NO	. INDICATORS - EARLY HELP BOROUGH	I WIDE PERFORMANCE	Data Source	Frequency	Good Performance is	Data note	Quarter 1 (Apr-Jun 17)	Quarter 2 (Jul 17-Sep 17)	Quarter 3 (Oct 17-Dec 17)	Quarter 4 (Jan 18-Mar 18)	YTD	Direction of Travel	Sparkline
Ŧ	1.1	Number of Teenage mothers who have received support through the programme	No of open cases at the last day of the quarter			Info	Number					-		
PRE BIRTH	1.2	Number of Teenage mothers who have received support through the programme	Initiation	0-19 Service	Quarterly	Info	Number					-	To be reported in Quarter 2	
A R	1.3	and were breastfeeding at:	6-8 Weeks			Info	Number					-		
	2.1	Percentage of mothers initiating breastfeedi	ng	0-19 Service	Quarterly	High	%	57%	51%	47%		-	To be reported	
MEN	2.2	days by a Health Visitor	feed at 6 - 8 weeks	0-19 Service	Quarterly	High	%	32%	29%	28.00%	Data available in May 2018	-	in Quarter 2	
DEVELOPMENT	3		ace new birth visit within 14	0-19 Service	Quarterly	High	%	98.0%	92.0%	99.0%	Data available in May 2018	-		
S DEV	4.1	Immunisation of 1 year olds - Diphtheria, Te Cough - DTaP	tanus and Whooping			High	%		***************************************			-		
&	4.2	Immunisation of 2 year olds - Measles Mum	ps and Rubella - MMR	0-19 Service	Quarterly	High	%	Measures bei	ng reviewed for in 2018	clusion in Performa /2019	ance report for	-		
EARLY	4.3	Percentage of children who received a 2 - 2	.5 year review			High	%					-		
E/	5	Number and Percentage of Eligible 2 years Years take-up	olds accessing their Early	RMBC Early Years	Termly	High	%	Not reported	78.5% (summer term data)	85.8% (Autumn term data)	81.3% (Spring Term)	81.3% (Spring Term)		
_	6.1	Number of Fixed Term Exclusions	Primary			Low	Number	110	50	146	85	391	Ψ	
ATION	0.1	Number of Fixed Term Exclusions	Secondary	RMBC Inclusion	Available Termly	Low	Number	745	544	1097	791	3177	Ψ	
EDUCATION	6.0	Number of Permanent Exclusions	Primary	Department	Available Tellilly	Low	Number	3	2	0	2	7	→	
	0.2	Number of Ferniahent Exclusions	Secondary			Low	Number	7	11	11	12	41	^	
CARE	7.1	Number of Children on a CiN Plan				Info	Number	1738	1417	1698	1686			
IAL C	7.2	Number of Children who are on a child prote	ection plan (CPP)	RMBC Performance and Quality Team	Quarterly	Info	Number	426	519	607	656			
SOCIAL	7.3	Number of Children who are Looked after (L	_AC)			Info	Number	518	518	575	624			

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 CONTACTS

 DEFINITION
 Early Help Contacts
 OWNER
 Susan Claydon

Performance

There were 366 contacts into Early Help within March 2018 which is an anticipated increase from February as it was a short month.
The north of the borough received 41 Early Help Assessment Recommendations and 10 Co-working requests and 10 Co-working requests and 10 Co-working requests.
Partner EHA Recommendations represented 33% of the total Early Help Assessment Recommendations and 11 co-working requests and the central locality received 45 Early Help Assessment Recommendations and 10 Co-working requests.
Partner EHA Recommendations represented 33% of the total Early Help Assessment Recommendations and 10 Co-working requests and the central locality received 45 Early Help Assessment Recommendations and 10 Co-working requests.
Partner EHA Recommendations and 11 co-working requests and the central locality received 45 Early Help Assessment Recommendations and 11 co-working requests and the central locality received 45 Early Help Assessment Recommendations and 11 co-working requests.
Partner EHA Recommendations are such as the contract of the Early Help Assessment Recommendations and 11 co-working requests and the central locality received 45 Early Help Assessment Recommendations and 11 co-working requests.
Partner EHA Recommendations and 11 co-working requests and the central locality received 45 Early Help Assessment Recommendations and 11 co-working requests and the central locality received 45 Early Help Assessment Recommendations and 11 co-working requests.
Partner EHA Recommendations and 11 co-working requests and the central locality received 45 Early Help Assessment Recommendations and 11 co-working requests.
Partner EHA Recommendations and 11 co-working requests and the central locality received 45 Early Help Assessment Recommendations and 11 co-working requests.
Partner EHA Recommendations and 11 co-working requests.
Partner EHA Recommendations and 11 co-working requests and the central locality received 45 Early Help Assessment Recommendations and 11 co-working requests.
Partner EHA Recommendations and

						ROTHE	RHAM					
Mar 2018 EARLY HELP CONTACTS WITH RECOMMENDATIONS BY AREA 1.1	Early Help Assessment Recommendation	EH Co working Agreement with Children's Social Care	Escalation to Children's Social Care	Open EH Assessment Notification	EH Assessment Recommendation to Partner	referral to External Partner/Agency	Recommendation for Barnardo's Reach out Service	Evidence Based Intervention	Universal Recommendation	Universal recommendation with Action	Still undergoing screening	RОТНЕВНАМ ТОТАL
MASH transfer to EH Triage	28	0	1	0	27	0	0	2	38	0	0	96
Request for Co Working	0	36	0	0	2	0	0	0	1	0	0	39
Request For Support	48	0	0	0	40	2	0	31	9	0	0	130
Step Down Request	62	0	0	0	0	0	0	0	0	0	0	62
Open Case Contact	0	0	0	39	0	0	0	0	0	0	0	39
Grand Total	138	36	1	39	69	2	0	33	48	0	0	366

						NOI	тн											sou	ЛН											CENTRA	AL				
Mar 2018 EARLY HELP CONTACTS WITH RECOMMENDATIONS BY AREA 1.1	Early Help Assessment Recommendation	EH Co working Agreement with Children's Social Care	Escalation to Children's Social Care	Open EH Assessment Notification	EH Assessment Recommendation to Partner	referral to External Partner/Agency	Recommendation for Barnardo's Reach out Service	Evidence Based Intervention	Universal Recommendation	Universal recommendation with Action	Still undergoing screening	NORTH TOTAL	Early Help Assessment Recommendation	EH Co working Agreement with Children's Social Care	Escalation to Children's Social Care	Open EH Assessment Notification	EH Assessment Recommendation to Partner	referral to External Partner/Agency	Recommendation for Barnardo's Reach out Service	Evidence Based Intervention	Universal Recommendation	Universal recommendation with Action	Still undergoing screening	SOUTH TOTAL	Early Help Assessment Recommendation	EH Co working Agreement with Children's Social Care	Escalation to Children's Social Care	Open EH Assess ment Notification	EH Assessment Recommendation to Partner	referral to External Partner/Agency	Recommendation for Barnardo's Reach out Service	Evidence Based Intervention	Universal Recommendation	Universal recommendation with Action	CENTRAL TOTAL
MASH transfer to EH Triage	7				8			1	13			29	13				13			1	18			45	8		1		6				7		22
Request for Co Working		10										10		11			2				1			14		15									15
Request For Support	15				9	1		10	3			38	22				23			14	2			61	11				8	1		7	4		31
Step Down Request	19											19	17											17	26										26
Open Case Contact				13								13				19								19				7							7
Grand Total	41	10	0	13	17	1	0	11	16	0	0	109	52	11	0	19	38	0	0	15	21	0	0	156	45	15	1	7	14	1	0	7	11	0 0	101

Past Early Help Contact Numbers 2017/18	Rotherham	North	South	Central
Apr-17	274	90	104	80
May-17	342	98	128	116
Jun-17	391	116	141	134
Jul-17	415	107	159	149
Aug-17	343	85	127	131
Sep-17	354	105	124	125
Oct-17	436	128	147	161
Nov-17	352	97	144	111
Dec-17	288	95	104	89
Jan-18	391	122	159	110
Feb-18	330	103	111	116
Mar-18	366	109	156	101

5

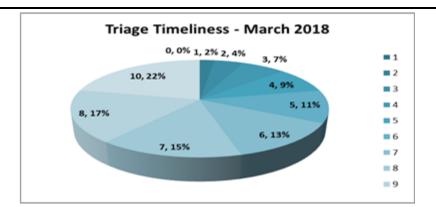
TRIAGE

DEFINITION Timeliness of Triage OWNER Susan Claydon

Performance Analysis

Performance related to the timeliness of cases being triaged within the expected 5 day timeframe has decreased by 17% on last month to 81.9% in March. This will be explored in the regular performance meetings with a view to addressing issues that are triggering delay. The adverse weather conditions towards the end of February had some impact on performance across the board, however the delay in screening will be explored fully in the forthcoming weeks.

		1.2	
	R	OTHERHA	М
Mar-18	RHAM		Triaged in ng days
	ROTHERHAM TOTAL	%	Number
Number of Contacts Triaged	265	81.9%	217



ı	Past Performance 2017/18	Out turn 2016/17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
	Number of Contacts Triaged within 5 days	3337	231	278	213	274	295	246	346	271	164	299	263	265
F	Percentage	85.3%	98.3%	93.8%	59.3%	76.8%	98.3%	78.1%	88.9%	86.6%	71.3%	91.3%	99.2%	81.9%

INITIAL CONTACTS

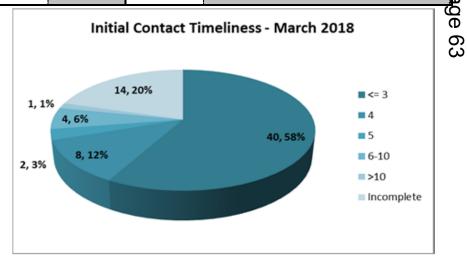
DEFINITION Timeliness of Initial Contacts Owner Susan Claydon

Performance Analysis

Of the Early Help cases that required contact in March 2018 58.0% were successfully engaged within 3 days and a further 21.7% were engaged after a three day time frame but within the month. This brings the engagement rate in month to 79.7% overall. This performance represents a decrease from February's performance of 9.2% and reflects some delay experienced through loss of staff during adverse weather conditions that has impacted on Mach performance. This performance will be scrutinised with a view to improvement in the regular performance meetings within the service.

					2.1.a	and 2.2						
Mar-18	ROTHE	RHAM	NO	RTH	SO	JTH		CENTRAL				
	Number	%	Number	%	Number	%	Number	%				
Number of cases reaching scope in month	69		21		32		16					
ICs completed in time (meeting 3 days)	40	58.0%	11	52.4%	15	46.9%	14	87.5%				
ICs completed in month outside 3 days timeliness	15	21.7%	4	19.0%	9	28.1%	2	12.5%				
ICs in scope but not completed	14	20.3%	6	28.6%	8	25.0%	0	0.0%				
Cases open at month end where no IC recorded	22		11		8		3	,				
Past Performance of Initial Contacts made within 3	Rotherham	North	South	Central		Initia	l Contact Timeliness - March 2018					

	itial Contacts made within 3 days 2017/18	Rotherham	North	South	Central
Apr-17	53 out of 93	57.0%	71.9%	54.1%	41.7%
May-17	69 out of 106	65.1%	58.8%	65.9%	71.4%
Jun-17	75 out of 113	66.4%	58.3%	60.0%	79.5%
Jul-17	75 out of 133	56.4%	61.8%	50.9%	59.1%
Aug-17	66 out of 105	62.9%	60.7%	56.8%	70.0%
Sep-17	49 out of 67	73.1%	76.2%	50.0%	95.5%
Oct-17	40 out of 66	58.2%	56.0%	66.7%	50.0%
Nov-17	36 out of 65	60.6%	36.8%	64.3%	61.1%
Dec-17	30 out of 71	42.3%	39.1%	23.3%	77.8%
Jan-18	25 out of 58	43.1%	39.1%	43.8%	47.6%
Feb-18	43 out of 63	68.3%	60.9%	68.2%	77.8%
Mar-18	40 out of 69	58.0%	52.4%	46.9%	87.5%



EARLY HELP ASSESSMENT

DEFINITION Early Help Assessments (EHAs)

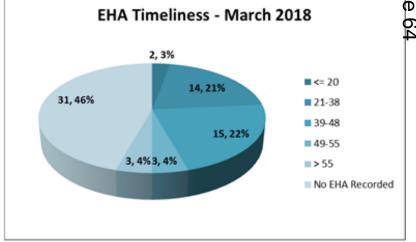
OWNER

Susan Claydon

Performance Analysis The central area of the borough has the highest rate of EHA completion in March 2018 with 52.2% of EHAs being completed in time. The north locality has a 42.9% completion rate and the south 41.7%. Performance related to the completion of Early Help Assessments overall has increased from last month's performance with 45.6% of 'in scope' assessments across the borough being completed within timeliness targets this represents an increase of 14.4% when compared with last month. This performance is positive given days lost to adverse weather conditions that have delayed some responses. The reasons for delay in assessment can be as a result of various issues however capacity in localities is impacting currently. Additional reasons include engagement that is delayed at the start because the worker was unable to secure consent for support which has a knock on effect with regard to the assessment completion.

	3.1a and 3.2a									
Mar-18	ROTHI	ROTHERHAM		RTH SO		UTH	CEN	TRAL		
	Number	%	Number	%	Number	%	Number	%		
Number of cases reaching scope in month	68		21		24		23			
Early Help Assessments completed in time	31	45.6%	9	42.9%	10	41.7%	12	52.2%		
Early Help Assessments completed in month outside timeliness	6	8.8%	2	9.5%	1	4.2%	3	13.0%		
Early Help Assessments in scope but not completed	31	45.6%	10	47.6%	13	54.2%	8	34.8% _		
Cases open at month end where no Early Help Assessment recorded	48		14		23		11	2		

	of Early Help Assessments completed 5 working days 2017/18	Rotherham	North	South	Central
Apr-17	47 out of 82	57.3%	90.0%	44.4%	50.0%
May-17	60 out of 109	55.0%	72.4%	39.6%	62.5%
Jun-17	50 out of 113	44.2%	58.1%	23.3%	55.6%
Jul-17	48 out of 104	46.2%	70.3%	31.7%	40.9%
Aug-17	48 out of 107	44.9%	60.9%	31.3%	52.8%
Sep-17	54 out of 117	46.2%	63.3%	36.2%	45.0%
Oct-17	52 out of 109	47.7%	75.0%	45.7%	36.0%
Nov-17	38 out of 68	55.9%	70.0%	44.4%	57.1%
Dec-17	31 out of 66	47.0%	61.5%	39.1%	35.3%
Jan-18	36 out of 80	45.0%	56.5%	40.6%	40.0%
Feb-18	23 out of 74	31.1%	40.9%	32.1%	20.8%
Mar-18	31 out of 68	45.6%	42.9%	41.7%	52.2%



EARLY HELP ASSESSMENT - COMPLETED BY PARTNERS

DEFINITIONEarly Help Assessments - Completed by Partners

OWNER

Susan Claydon

Performanc e Analysis

Early Help Assessment uptake by partners has declined when compared with last month with 17.5% of all completed EHAs being carried out by partners. Conversations with health colleagues have taken place in March to discuss solutions to the low uptake by health and firm agreements have been made which should result in an increase in the coming months. Primary and Secondary schools are engaged well and make up high volumes of partner EHAs which is highly positive. The focus over coming months is to increase uptake in health and wider organisations.

		_					3.	.3					
Mar-18	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total to Date
Nursery Provision								1	1	1			3
Primary School	3	11	5	5	2	4	9	10	8	17	18	17	109
Secondary School		2				2	6	5	6	4	14	4	43
PRU								1					1
Rotherham Drug and Alcohol/RDaSH													0
Health					2	1	1	4	1	2	1	2	14
Work Based Learning Provider													0 0
YWCA	4	3	6	2	2	7	6	11		7	3	2	53
GROW													0
Barnardo's Rotherham											1		1
Rotherham Rise					1								1
Other LA													0
Total Partner Early Help Assessments	7	16	11	7	7	14	22	32	16	31	37	25	225
Total Early Help Assessments completed	105	104	110	114	135	135	147	101	72	113	136	143	1415
Partner completion % against all completed EHA's	6.7%	15.4%	10.0%	6.1%	5.2%	10.4%	15.0%	31.7%	22.2%	27.4%	27.2%	17.5%	15.9%

Open and Closed Early Help Cases - A case is defined as any case that is currently or has been worked by a locality team.

OWNER

Susan Claydon

Performanc e Analysis

There were 1645 families open in Early Help at the end of March 2018 which indicates an increase of 98 families when compared with the previous month and a significant increase when compared with March 2017 when 221 less families were open to the service. In March the distribution of open cases was 36.5% south 35.5% central locality and 27% north locality. Closure of cases slightly decreased in March with 127 families being closed to the service. South continues to have the highest closure rate with 47.5% of all closures.

March - 18		4.1										
Open Cases	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
North	398	422	420	420	398	417	416	412	423	437	427	451
South	555	565	565	603	576	569	549	560	572	559	562	607
Central	558	572	581	602	634	609	611	582	566	555	558	587
Total number of Open cases		1559	1566	1625	1608	1595	1576	1554	1561	1551	1547	1645

South	555	303	505	603	576	569	549	560	3/2	559	362	607	J D
Central	558	572	581	602	634	609	611	582	566	555	558	587	age
Total number of Open cases	1511	1559	1566	1625	1608	1595	1576	1554	1561	1551	1547	1645	e 60
March - 18							4	.2					
Closed Cases	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total to Date
North	39	35	37	38	22	22	48	35	20	34	31	27	388
South	70	102	81	72	72	76	104	56	49	77	59	60	878
Central	66	52	53	58	29	59	75	57	36	41	34	40	600
Number of Cases Closed during the reporting month		189	171	168	123	157	227	148	105	152	124	127	1866

Children's Centres (only available Quarterly)

nildren's Centres (only available Quarterly

Quarter 4

Registration Rates: The 30% registration rates overall have achieved the LA target of 95% at 96% with South and North areas exceeding the target with performance at 101% (data cleansing required but is due to live birth data from health) and 97% respectively, Central area was just below target at 93%, this is mainly due to the interim arrangements at Broom Valley which will be addressed through the review. This demonstrates that the Centres are targeting those families in the most deprived areas as priority which is crucial. The overall registration rates continued to increase from Q3 and just fell short of the 95% target at 91% overall. Performance officers continue to monitor and provide updates at Head of Centre meetings and through Early Help Performance Meetings.

OWNER

Karla Capstick

Engagement Rates: The Engagement Rates are a cumulative end of year target of 66% and again progress is positive for the 30% areas with an overall rate of 68% against a 66% target. All areas met or exceeded target with the South area performing well above target at 74%. This is positive as two out of the three centres in the South were underperforming last year and at the end of Q2 of this year and have received additional support and resources to support in the last two quarters which has worked well. Performance overall is pleasing despite two targets not being fully realised as there have been some issues with staffing, recruitment and retention as we enter the review. There have been some agreed increases in staffing hours to support the pause in the Early Help Phase Two review and to further improve quality, performance and improved outcomes for Children and Families. Work is now well under way to capture evidence of impact and outcomes around Outreach and Group Work in the Children's Centres (this will also support the required evidence for the Public Health Outcomes Framework) with the first analysis completed and positive.

Analysis around vulnerable groups aged under 2 (including Cin,CP and LAC) is currently being completed with meetings and working groups developing from this.

			6	.1			6.	.2		
	rd Measure	Rotherh	hildren aç am area v th a Child	vho are re	gistered	% of All children aged 0-5 living in the Rotherham area who have accessed Children's Centre activities				
	Scorecard	Rotherha m Overall	North	South	Central	Rotherha m Overall	North	South	Central	
0.0	Quarter 1 (Apr-Jun 17)	85%	90%	85%	81%	25%	27%	22%	30%	
terly nance lative)	Quarter 2 (Jul-Sep 17)	88%	92%	87%	87%	37%	44%	30%	40%	
Quarterly Performance (Cumulative)	Quarter 3 (Oct-Dec 17)	90%	94%	88%	88%	45%	51%	39%	48%	
<u>a</u> 0)	Quarter 4 (Jan - Mar 18)	91%	95%	90%	89%	58%	60%	55%	60%	

100%	85%		88%	88%		90%		91%		
80%				27%					58%	
60% 40%		250/		37%			45%			
20%		25%								
0%										Щ
	Quar		Quar			Quar			rter 4	
	(Apr-Ju	un 17)	(Jul-Se	(Jul-Sep 17)		(Oct-D	ec 17)	(Jan - N	Mar 18)	
	Quarterly Performance (Cumulative)									
	■% 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									

		30%	ildren age most dep am who ar Children	rived SOA	\'s in	% of children aged 0-5 living in the 30% most deprived SOA's in Rotherham who have accessed Children's Centre activities				
		Rotherha m Overall	North	South	Central	Rotherha m Overall	North	South	Central	
6.0	Quarter 1 (Apr-Jun 17)	89%	91%	95%	83%	30%	28%	27%	33%	
terly nance lative)	Quarter 2 (Jul-Sep 17)	93%	94%	97%	90%	44%	47%	39%	44%	
Quarterly Performance (Cumulative)	Quarter 3 (Oct-Dec 17)	94%	96%	99%	91%	54%	56%	55%	53%	
P(Quarter 4 (Jan - Mar 18)	96%	97%	101%	93%	68%	65%	74%	66%	

FAMILIES FOR CHANGE

 DEFINITION
 Families For Change
 Owner
 Jenny Lingrell

rformance

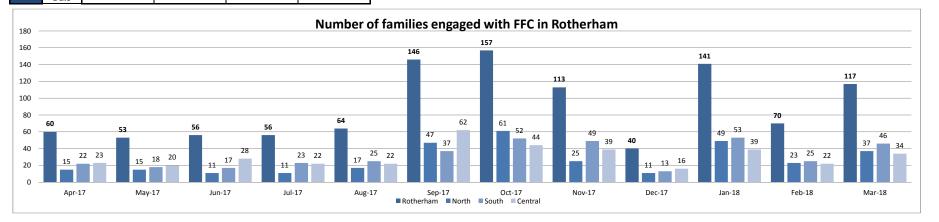
A further Payment by Results (PbR) claim was submitted at the end of March. This brings the total claim to 212 in this financial year, and 292 in total. Of the payments claimed in this financial year, 101 were based on an adult in the family entering employment and sustaining this for 3-6 months (depending on the benefit claimed) and 111 claims were based on 'significant and sustained progress' based on a range of issues identified through the Early Help Assessment.

Whilst there has been a significant improvement in the rate of claims, performance overall remains behind at this stage of the programme in comparison to other authorities. Rotherham has recently received a letter from the Troubled Families Unit expressing concern over the low number of claims submitted to date. The lead officer for Families for Change has submitted a response to the letter along with a Maturity Matrix Self-Assessment and an Action Plan which explains how performance will be improved.

	ē		8	.1	
	Scorecard Measure	Number of families engaged in Rotherham against a monthly target of 53	Number of families engaged in <u>North</u>	Number of families engaged in <u>South</u>	Number of families engaged in <u>Central</u>
	Apr-17	60	15	22	23
	May-17	53	15	18	20
	Jun-17	56	11	17	28
Φ	Jul-17	56	11	23	22
anc	Aug-17	64	17	25	22
Ë	Sep-17	146	47	37	62
erfc	Oct-17	157	61	52	44
ē.	Nov-17	113	25	49	39
Ę	Dec-17	40	11	13	16
Monthly Performance	Jan-18	141	49	53	39
	Feb-18	70	23	25	22
	Mar-18	117	37	46	34
	Year to Date	1073	322	380	371

	8	8.1									
Number of families engaged as percentage of annual target of 633 in Rotherham (Year 3)	Number of families engaged as percentage of annual target in <u>North</u>	Number of families engaged as percentage of annual target in South	Number of families engaged as percentage of annual target in <u>Central</u>								
9%	2%	3%	4%								
18%	5%	6%	7%								
27%	7%	9%	11%								
36%	8%	13%	15%								
46%	11%	17%	18%								
68%	18%	22%	28%								
94%	28%	31%	35%								
111%	32%	38%	41%								
117%	33%	40%	44%								
140%	41%	49%	50%								
151%	45%	53%	53%								
169%	50%	60%	59%								

	9	8.2	8.3		
	Yearly Cumulative Performance	Number of FFC PbR outcomes claimed (evidence of employment outcome)	Number of FFC PbF outcomes claimed (evidence of significant & sustained progress		
ë	Year 1 to date	5	0		
anc	Year 2 to date	37	43		
Monthly rforman	Year 3 to date	101	111		
iviontniy Performance	Year 4 to date				
Д	Year 5 to date				



NEETS AND NOT KNOWNS

DEFINITIONNEETS and NOT KNOWNS

OWNER

David McWilliams

rformance Analysis The percentage of young people "Not Known" in March is 2.0% against a target of 3.0%. This figure has risen since the February return but still remains lower than seasonal trends would predict. The Not in Education, Employment or Training (NEET) figure reduced and at the end of March was 3.3% against a local target of 3.5%.

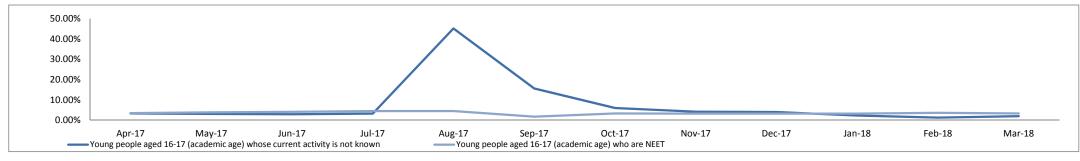
The latest monthly comparison data available is based on the February Return and shows:

Not Known; Rotherham's performance at 1.3% was better than National at 2.7%, Regional at 2.1% and Statistical Neighbours at 1.8%.

In respect of NEET; Rotherham's performance at 3.6% was better than Statistical Neighbours at 3.8%, in line with Regional at 3.2%, whilst falling below National performance at 2.8%.

		9.1	9.2			
	Scorecard Measure	Young people aged 16-17 (academic age) whose current activity is not known	Young people aged 16-17 (academic age) who are NEET			
	Apr-17	3.3%	3.5%			
4	May-17	3.1%	3.9%			
၁၁	Jun-17	2.9%	4.1%			
nar	Jul-17	3.2%	4.5%			
orn	Aug-17	45.2%	4.5%			
erfo	Sep-17	15.6%	1.7%			
Pe	Oct-17	6.0%	3.3%			
کر ا	Nov-17	4.2%	3.2%			
nth	Dec-17	4.0%	3.2%			
Monthly Performance	Jan-18	2.3%	3.2%			
	Feb-18	1.3%	3.6%			
	Mar-18	2.0%	3.3%			

		North		South		Central	
		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
	Apr-17	1.8%	3.4%	2.6%	3.2%	5.3%	3.9%
Monthly Performance	May-17	1.6%	4.1%	3.0%	3.2%	4.2%	4.6%
	Jun-17	1.2%	4.2%	3.0%	3.4%	4.1%	5.1%
	Jul-17	1.3%	4.2%	3.1%	3.7%	4.6%	5.6%
	Aug-17	50.9%	4.3%	39.5%	3.7%	48.5%	5.7%
	Sep-17	16.5%	1.4%	13.3%	1.3%	18.2%	2.7%
	Oct-17	5.7%	3.8%	4.5%	2.7%	8.1%	3.6%
	Nov-17	3.6%	4.2%	3.7%	2.4%	5.2%	3.6%
	Dec-17	3.1%	4.1%	3.2%	2.5%	5.8%	3.5%
	Jan-18	1.1%	3.7%	2.1%	2.7%	3.6%	3.5%
	Feb-18	0.5%	3.9%	0.9%	3.0%	2.6%	4.1%
	Mar-18	0.9%	3.9%	1.7%	3.0%	3.4%	3.4%



EDUCATION WELFARE

DEFINITION Persistent Absence (reported in half-termly instalments)

Owner

Karla Capstick

Analysis

Half Term 1-3 data covers the period 04/09/2017 - 09/02/2018. Pupils are identified as persistent absentees if they miss 10% or more of their own possible sessions. During HT1-3, pupils typically have to be absent for 20+ sessions (10 days) to be classified as a persistent absentee.

Primary School Persistent Absence

The Primary School LA average for Persistent Absence (PA) (which only includes schools who have shared data) is 11.8%, which is an increase of 1.5% compared to the same period in 2016/17. Currently 23 Primary Schools (24.2%) have lower levels of persistent absence than the national average.

Secondary School Persistent Absence

The Secondary school LA average for Persistent Absence (PA) (which only includes schools who have shared data) is 14.9%, which is an increase of 0.1% compared to the same period in 2016/17. Currently 7 secondary schools (43.8%) have lower levels of persistent absence than the national average.

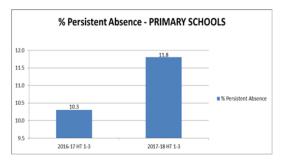
Early Help Team Managers are currently liaising with schools across the borough to ensure that appropriate support is being offered to those pupils who need it to improve their attendance. This may be through family support work and/or group work in schools.

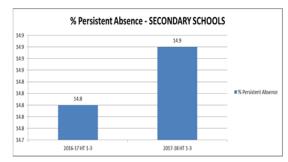
PRIMARY KEY					
Above national average percentage attendance (96%) Above Local Average (95.4)	Below National Average (96%) Below local average percentage attendance (95.4%)				
Below National Average (96%) above local average percentage attendance (95.4%)	No Data	Above PA National Average 8.4%			

SECONDARY KEY					
Above national average percentage attendance (94.7%) Above Local Average (94%)	Below National Average (94.7%) above local average percentage attendance (94%)	Below PA National Average 13.8%			
Below National Average (94.7%) Below local average percentage attendance (94%)	NO DATA	Above PA National Average 13.8%			

2017-2018 Half Term 1-3 Persistent Absence - PRIMARY SCHOOLS	Rotherham LA	North Locality	Central Locality	South Locality
Number of Schools with less				
Persistent Absence than the				
National average. (8.3%)				
	23	4	3	16
Number of Schools with more				
Persistent Absence than the				
National average. (8.3%)				
	63	21	19	23
Number of Schools who did				
not share their data with the				
LA	9	2	1	6

2017-2018 Half Term 1-3 Persistent Absence - SECONDARY SCHOOLS	Rotherham LA	North Locality	Central Locality	South Locality
Number of Schools with less Persistent Absence than the National average. (13.5%)	7	2	2	3
Number of Schools with more Persistent Absence than the National average. (13.5%)	7	8	3	1
Number of Schools who did not share their data with the LA	2	0	0	2





EDUCATION WELFARE

DEFINITION Attendance (reported one month in arrears) Owner

Karla Capstick

Attendance data is available a month behind the published scorecard due to the time taken to collate and cleanse the data after receiving it from schools.

Primary School Attendance for February 2018 is 95.6%; which is an improvement of 0.1% compared to the same period in 2017. In February 2018, 40 primary schools (42.1%) were above the national average for attendance.

The overall YTD Primary School Attendance for the academic year 2017/18 stands at 95.7%, which is 0.3% lower than the latest published national average. A total of 58 schools (61.1%) are currently on target to exceed the latest published local or national average attendance

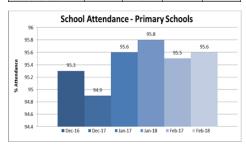
Secondary School Attendance for February 2018 is 94.0%, which is an improvement of 0.2% compared to the same period 2017. In February 2018, 6 secondary schools (37.5%) were above the national average for attendance.

The overall YTD Secondary School Attendance for the academic year 2017/18 stands at 94.5%, which is 0.1% lower than the latest published national average but an improvement of 0.5% compared to the latest published local average. A total of 12 (75%) schools are currently on target to exceed the latest published local or national average attendance.

·	PRIMARY KEY						
Above national average percentage attendance (96%) Above Local Average (95.4)	Below National Average (96%) Below local average percentage attendance (95.4%)	Below PA National Average 8.4%					
Below National Average (96%) above local average percentage attendance (95.4%)		Above PA National Average 8.4%					

	% Attendance - Primary Schools								
	Scorecard Measure								
		Rotherham LA	North Locality	Central Locality	South Locality				
	Sep-17	96.0%	96.1%	95.2%	96.4%				
8	Oct-17	95.8%	95.3%	95.4%	96.4%				
Jan	Nov-17	96.0%	96.0%	95.8%	96.3%				
Jorn	Dec-17	94.9%	94.7%	94.7%	95.1%				
Fer	Jan-18	95.8%	95.8%	95.0%	96.4%				
Monthly Performance	Feb-18	95.6	95.5	94.8	96.1				
E O	Mar-18								
ž	Apr-18								
	May-18								
	Jun-18								
	Jul-18								
	Year to Date	95.7%							

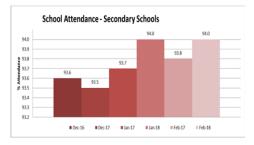
February 2018 - Primary Schools	Rotherham LA	North Locality	Central Locality	South Locality
Number of Schools above		,	,	,
both the National average				
attendance (96%) and Local	40	10	7	23
Number of Schools below the				
National average attendance				
(96.0%) but above the Local				
average attendance (95.6%)	17	3	4	10
Number of Schools below				
both the National average				
attendance (96.0%) and the				
Local average attendance				
(95.6%)	37	14	12	11
Number of Schools who did				
not share their data	1	0	0	1



SECONDARY KEY						
Above national average percentage attendance (94.7%) Above Local Average (94%)	Below National Average (94.7%) above local average percentage attendance (94%)	Below PA National Average 13.8%				
Below National Average (94.7%) Below local average percentage attendance (94%)	NO DATA	Above PA National Average 13.8%				

	% Attendance - Secondary Schools								
	Scorecard Measure								
		Rotherham LA	North Locality	Central Locality	South Locality				
	Sep-17	95.3%	95.5%	94.2%	95.8%				
8	Oct-17	95.0%	94.8%	94.6%	95.5%				
an Jan	Nov-17	94.9%	95.0%	94.3%	95.1%				
Monthly Performance	Dec-17	93.5%	93.1%	93.4%	93.8%				
	Jan-18	94.0%	94.2%	93.1%	94.5%				
홑	Feb-18	94	93.9	93.5	94.4				
E E	Mar-18								
Ž	Apr-18								
	May-18								
	Jun-18								
	Jul-18								
	Year to Date	94.5%							

February 2018 - Secondary				
Schools	Rotherham LA	North Locality	Central Locality	South Locality
Number of Schools above				
both the National average				
attendance (94.8%) and Local	6	2	1	3
Number of Schools below the				
National average attendance				
(94.8%) but above the Local				
average attendance (94.2%)	3	1	1	1
Number of Schools below				
both the National average				
attendance (94.8%) and the				
Local average attendance				
(94.2%)	7	2	3	2
Number of Schools who not				
share their data	U	0	0	0



YOUTH ACTIVITY AND LEARNING

DEFINITION In Learning and Youth Activity OWNER David McWilliams

Rotherham continues to perform well in terms of Participation. The current position of 92.6% is an effect of the low Not Known cohort.

Most recent data for comparators (February 2018) shows Rotherham's Participation to be at 93.1%. This is above national performance at 92.3%, statistical neighbours at 92.1% and the region at 92.8%. Centre based Youth session activity continues to be focussed on Targeted Group work.

We are unable to give any comparison for LAC/Care Leaver data as this is not a published data set. However, most recent data (published December 2017) at national level relating to resident Care Leavers in Education, Employment, and Training (EET) shows that Rotherham's performance at 76.9% is above both Statistical Neighbours at 66.3%, Regional at 75.5% and National performance at 69.8%.

		9.3
		% of Academic Age 16,17,18 Corporate Responsibility LAC/CL EET
		ROTHERHAM
	Apr-17	68.7%
	May-17	68.6%
40	Jun-17	70.6%
ance	Jul-17	63.3%
rme	Aug-17	19.2%
Monthly Performance	Sep-17	64.9%
, Pe	Oct-17	74.2%
f.	Nov-17	75.8%
Non	Dec-17	72.8%
_	Jan-18	71.3%
	Feb-18	71.3%
	Mar-18	71.7%

		9.4
		% of Academic Age 16,17,18 Corporate Responsibility LAC/CL NEET
		ROTHERHAM
	Apr-17	29.2%
	May-17	27.5%
ø.	Jun-17	24.8%
ance	Jul-17	31.0%
rma	Aug-17	30.1%
ırfo	Sep-17	25.3%
, Ре	Oct-17	25.2%
ıthı	Nov-17	24.2%
Monthly Performance	Dec-17	24.1%
~	Jan-18	24.4%
	Feb-18	24.0%
	Mar-18	22.9%

		9.5						
		Young people aged 16 -	· 17 (academic participate	age) meetin	g the duty to			
		ROTHERHAM	NORTH	SOUTH	CENTRAL			
	Apr-17	92.1%	93.3%	93.4%	89.5%			
	May-17	91.6%	92.4%	93.0%	89.2%			
40	Jun-17	91.4%	92.6%	92.6%	88.6%			
ince.	Jul-17	90.8%	92.3%	92.2%	87.9%			
rme	Aug-17	48.9%	42.7%	55.8%	43.9%			
<u>orfo</u>	Sep-17	82.2%	81.9%	85.2%	78.3%			
, Pe	Oct-17	89.4%	89.0%	91.9%	86.5%			
Î	Nov-17	91.4%	90.3%	93.1%	88.9%			
Monthly Performance	Dec-17	91.5%	90.7%	93.2%	88.7%			
	Jan-18	92.7%	92.9%	94.1%	90.6%			
	Feb-18	91.5%	93.0%	94.3%	90.5%			
	Mar-18	92.6%	92.7%	93.8%	90.3%			

		9.6											
		Number of Youth Activity sessions undertaken during the month											
		ROTH	ERHAM	NORTH		SOUTH		CENTRAL					
		Centre Based	Non-Centre Based	Centre Based	Non-Centre Based	Centre Based	Non-Centre Based	Centre Based	Non-Centre Based				
	Apr-17	66	34	15	9	18	13	33	12				
	May-17	103	61	24	14	40	34	39	13				
d)	Jun-17	105	55	22	12	41	37	42	6				
Performance	Jul-17	98	62	14	24	44	32	40	6				
rme	Aug-17	87	36	4	14	44	17	39	5				
ırfo	Sep-17	78	67	13	20	35	32	30	15				
, Pe	Oct-17	109	68	18	21	43	37	48	10				
Monthly F	Nov-17	103	56	17	8	48	35	38	13				
Non	Dec-17	53	19	9	0	27	13	17	6				
_	Jan-18	84	48	8	8	37	28	39	12				
	Feb-18	83	53	9	6	36	35	38	12				
	Mar-18	46	33	5	0	22	25	19	8				

		Number of Unique Attendees at Youth Activities								
		ROTH	ERHAM	NO	RTH	so	SOUTH		TRAL	
		Centre Based	Non-Centre Based	Centre Based	Non-Centre Based	Centre Based	Non-Centre Based	Centre Based	Non-Centre Based	
	Apr-17	336	187	80	69	151	58	105	60	
	May-17	390	171	105	54	159	87	126	30	
•	Jun-17	341	202	117	63	125	101	99	38	
ince	Jul-17	386	160	75	52	216	85	95	23	
m²	Aug-17	181	118	27	59	61	40	93	19	
Monthly Performance	Sep-17	297	225	87	66	92	100	118	59	
, Pe	Oct-17	382	237	115	85	130	82	137	70	
Ę	Nov-17	347	205	111	38	126	133	111	34	
4on	Dec-17	240	22	77	0	92	3	72	19	
_	Jan-18	376	88	46	22	221	30	110	36	
	Feb-18	335	119	56	26	192	62	88	31	
	Mar-18	253	57	64	0	144	20	46	37	

YOUTH OFFENDING TEAM

DEFINITION Youth Offending Team (YOT) Owner David McWilliams

Quarter 3 performance information. Quarter 4 information will not be available until May/June 2018.

Numbers of young people First Time Entrants (FTE) into the Criminal Justice System: Figures based on latest released Youth Justice Board (YJB) data (Dec 17) and covers period October 16 – September 17.

Rotherham has shown a decrease of 49.6% from the same period last year, whilst national figures also stand lower at 304 (decrease of 10.7% on same time last year). Comparison with the North East Region gives a similar picture with the regional figure standing at 349 with a decrease of 12.3%. The actual decrease in numbers for Rotherham relates to 51 young people. This continues the downward trend from the previous quarter and is now lower than National and Regional trends. The decrease is attributable to work undertaken with South Yorkshire 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 in relation to a smaller cohort with a greater propensity to offend.

Use of Custody: Figures based on latest released YJB data (December 2017) and covers period January to December 17. Year on Year data is shown as the same period for the previous year.

Rotherham has remained stable with the same period last year, now standing at 0.33. National figures stand lower at 0.38 (decrease of 0.01% on same time last year). North East figures stand at 0.39 with a decrease of 0.02 for the same period. Custody figures are generally stable, but are subject to spikes in demand.

Rate of re-offending by young offenders: Figures based on latest released YJB data (Sept 2017) and covers cohort April 15- March 16.

Rotherham has shown a decrease in this measure of 6.6%, now standing at 29.2%. National figures have reduced slightly standing at 41.9%, whilst North East figures have also shown a decrease of 0.5% standing at 44.4%.

260

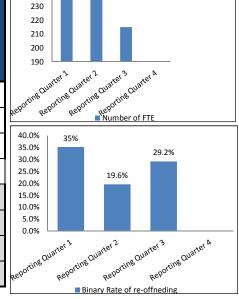
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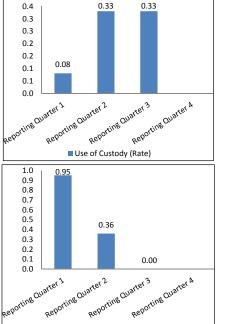
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Frequency of re-offending by young offenders: Data unavailable for Q3

Reoffending is increasing generally in YOT cohorts across the country and this is attributed by the Youth Justice Board (YJB) and the Ministry of Justice (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. Those remaining in the system will be more entrenched in offending behaviour.

	O	10.1	10.2	10.3	10.4	
	Scorecard Measure	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	256	0.08	35%	0.95	
		(Apr16 - Mar17)	(Jul 16 - Jun 17)	(Oct 14 - Sep 15)	(Oct 14-Sep 15)	\
alysis	Reporting	244	0.33	19.6%	0.36	
se Ana	Quarter 2	(Jul16 - Jun17)	(Oct 16 - Sep 17)	(Oct 15 - Sep 16)	(Oct 15 - Sep 16)	
Performance Analysis	Reporting	215	0.33	29.2%	Data unavailable	
Quarter 3	(Oct16 - Sep17)	(Jan17 - Dec17)	(Apr15 - Mar16)			
	Reporting					
	Quarter 4					R





Frequency of re-.

CUSTOMER FEEDBACK

DEFINITIONCustomer Feedback - Quality Assurance

Owner

David McWilliams

Out of 117 case closures in March 50 (45.9%) Exit Surveys were requested (this does not include cases closed due to No Consent). Work is ongoing with Team Managers to increase the numbers of Exits Surveys requested at the point of case closure.

Nine Exit Surveys were returned in March from families who had received an Early Help service.

People told us that they were requesting support for the following top reasons:

Parenting support for behaviour

Risk of school exclusion

Low self-esteem, self-confidence, self-worth

The measure below will be a Council Plan measure from April 2018.

% of people who rate the Early Help service as good or better. The measure will have a target of 98% and will be monitored monthly.

100% of respondents in March (9 people) said the Early Help Service was good or better.

				11.	1		
	sure			Exit Surveys retu	ırned in month		
	Scorecard Measure	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
	Apr-17	2	12	13	0	0	27
	May-17	2	3	16	0	0	21
	Jun-17	6	3	9	0	0	18
Ф	Jul-17	4	1	18	0	0	23
anc	Aug-17	3	2	4	0	0	9
orm	Sep-17	6	1	4	0	0	11
Perf	Oct-17	5	2	6	1	0	14
hly	Nov-17	1	12	8	1	0	22
Monthly Performance	Dec-17	0	0	8	0	0	8
2	Jan-18	1	4	13	0	0	18
	Feb-18	4	6	11	0	0	21
	Mar-18	0	0	9	0	0	9
	Year to Date	34	46	119	2	0	192

11.2	11.3	11.4	11.5
	Complaints		Compliments
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
0	0	0	0
0	0	0	2
0	0	0	1
0	0	0	2
0	0	0	1
1	0	1	3
0	0	0	1
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
1	0	1	10

QUALITY ASSURANCE

DEFINITIONMonthly Case File Audits

Owner

David McWilliams

ertormance Analysis There were 12 monthly Case File audits completed by Early Help Team Managers during March. 3 were graded Good, 4 Requires Improvement whilst 5 were graded Inadequate.

Overall during the year, Team Managers completed 99 audits across the service with 63 of those audits being graded as requires improvement. Work is currently ongoing to develop further consistency between Early Help and social care quality assurance activities and to fully integrate the reporting and governance centrally. The Head of Safeguarding and Quality Assurance is currently reviewing and updating the Quality Assurance Framework in collaboration with Early Help and also now includes early help audit findings and other activities in the regular reporting schedule.

	Р			12.	1		
	car			Team Mana	ger Audits		
	Scorecard Measure	Outstanding	Good	Requires Improvement	Inadequate	Inadequate - Critical	Total
	Apr-17	0	3	9	1	0	13
	May-17	0	1	8	1	0	10
e S	Jun-17	0	0	3	0	0	3
an	Jul-17	0	0	0	0	0	0
Ē	Aug-17	0	0	0	0	0	0
ıfo	Sep-17	0	1	9	4	0	14
P	Oct-17	0	3	7	2	0	12
Monthly Performance	Nov-17	0	0	0	0	0	0
JIT.	Dec-17	0	1	10	0	0	11
Ĭ	Jan-18	0	2	7	2	0	11
	Feb-18	0	6	6	1	0	13
	Mar-18	0	3	4	5	0	12
	Total to date	0	20	63	16	0	99
	% of total to date	0%	20%	64%	16%	0%	

	ard re				Respons	se Rates			
	Scorecard	No	rth	Sou	ıth	Cen	tral	Borough Wid	de Services
_	Sco	Number	%	Number	%	Number	%	Number	%
	Apr-17	3 out of 4	75%	4 out of 4	100%	5 out of 5	100%	1 out of 2	50%
	May-17	3 out of 4	75%	4 out of 4	100%	3 out of 6	50%	0 out of 2	0%
Se	Jun-17	1 out of 1	100%	1 out of 1	100%	1 out of 1	100%	0 out of 0	0%
Performance	Jul-17	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
L L	Aug-17	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
erfo	Sep-17	3 out of 3	100%	4 out of 4	100%	5 out of 5	100%	2 out of 2	100%
<u>۾</u>	Oct-17	2 out of 3	67%	4 out of 4	100%	5 out of 5	100%	1 out of 2	50%
亨	Nov-17	0	0%	0	0%	0	0%	0	0%
Monthly	Dec-17	3 out of 4	75%	3 out of 4	75%	4 out of 5	80%	1	100%
Ĭ	Jan-18	2 out of 4	50%	2 out of 4	50%	5 out of 5	100%	0	0%
	Feb-18	4 out of 4	100%	4 out of 4	100%	5 out of 5	100%	0 out 1	0%
	Mar-18	4 out of 4	100%	3 out of 4	75%	4 out of 4	100%	1 out of 1	100%

EARLY HELP - HUMAN RESOURCES (HR)

DEFINITION Sickness Information Owner David McWilliams

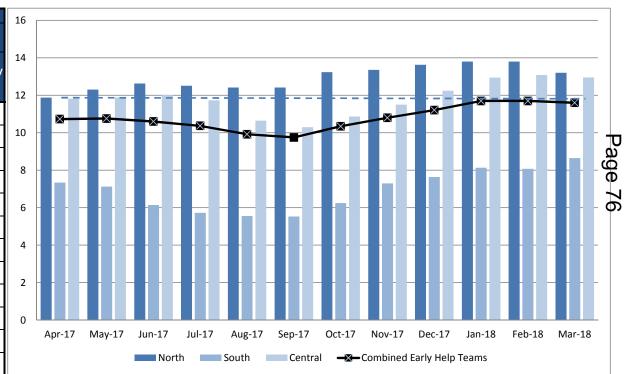
Performanc e Analysis

Monthly Performance

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 seasonal illnesses which have also impacted on sickness levels during the period.

*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.

		13	3.7	
card		Sickness - Annu	al FTE sick days	
Scorecard Measure	North	South	Central	Combined Early Help Teams
Apr-17	11.88	7.34	11.82	10.73
May-17	12.31	7.13	11.89	10.76
Jun-17	12.63	6.15	12.02	10.60
Jul-17	12.51	5.73	11.73	10.37
Aug-17	12.42	5.56	10.65	9.92
Sep-17	12.42	5.53	10.30	9.75
Oct-17	13.24	6.25	10.87	10.35
Nov-17	13.36	7.30	11.50	10.80
Dec-17	13.63	7.64	12.25	11.21
Jan-18	13.80	8.14	12.95	11.70
Feb-18	13.80	8.08	13.08	11.70
Mar-18	13.20	8.65	12.96	11.60



Children & Young People Services



Safeguarding Children & Families Monthly Performance Report

As at Month End: March 2018

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 <u>at least</u> 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 1

Date Created: 4th April 2018

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

• improvement in performance / increase in numbers

- no movement - numbers stable with last month

- decline in performance, not on target / decrease in numbers

			GOOD	DATA			2017 / 18			DOT (Month	DOT	RAG	RAG		Target a Tolerand		YR (ON YR TR	REND	LA	TEST BEI	NCHMARK	ING
	NO.	INDICATOR	PERF IS	NOTE (Monthly)	Jan-18	Feb-18	Mar-18	Year End 2017/18		on	(Yr on Yr)	(in month)	(Year End)	Red	Amber	Target Green	2014/15	2015/16	2016/17	STAT NEIGH AVE	BEST STAT	NAT AVE	NAT TOP QTILE THRESHOL
Î	1.1	Number of contacts	Info	Count	1404	1167	1249	15684	Financial Year	_	Ψ					n/a	10517	12165	16609				THRESHUL
IASI	1.2	% Contacts with decision within 1 working day	High	Percentage	79.9%	82.0%	83.3%	79.5%	Financial Year	1	•			<92%	92%>	95%+		96.5%	86.0%				
FERRAL (MASH)	1.3	Number of contacts going onto referral (including MASH referrals)	Info	Count	421	342	379	4489	Financial Year	^	1					n/a	4513	4915	4411				
4RA	1.4	% of contacts going onto referral (including MASH referrals)	High	Percentage	30.0%	29.3%	30.3%	28.6%	Financial Year	1	1			ra	nge to be	e set	42.9%	40.5%	26.6%				
REFER	1.5	Rate of referrals per 10,000 population aged under 18 - rolling 12 month performance	Info	Rate per 10,000	808.4	804.7	794.6	794.6	Rolling Year	Ψ	1					n/a			909.8	637.9	429.1	548.2	-
∞ ∞ •	1.6	% of referrals going onto assessment	High	Percentage	98.8%	98.6%	99.7%	97.3%	Financial Year	↑	1			<83%	83%>	86%+	69.6%	77.6%	90.0%	85.9%	99.7%	87.1%	97.8%
ACT	1.7	% of re-referral in 12 months - in current month	Low	Percentage	22.0%	21.3%	19.5%		As at mth end	↑				26%+	26%<	23%<							
CONTA	1.8	% of re-referral in 12 months - rolling 12 mths	Low	Percentage	23.7%	23.6%	23.1%	23.1%	Rolling Year	↑	1			26%+	26%<	23%<			27.5%	20.2%	9.0%	21.9%	16.0%
ဝ၁	1.9	Number of CSE referrals in the current month (Council Plan Indicator)	Info	Count	5	12	20	169	Financial Year	↑	Ψ					n/a		200	256				
	2.1	Number of assessments started	Info	Count	568	550	601	6961	Financial Year	1	1					n/a	3929	3996	6182				
တ	2.2	% of assessments for children's social care completed in 45 working days of referral	High	Percentage	66.8%	70.0%	71.0%	78.0%	Financial Year	↑	•			<90%	90%>	90%+	88.8%	92.8%	85.3%	76.7%	58.7%	83.4%	91.9% .
Ä	2.3	Open assessments already past 45 working days	Low	Count	3	6	47		As at mth end	•						n/a							C C
SME	2.4	Number of assessments completed in the current month	Info	Count	606	661	583	6781	Financial Year	Ψ	1					n/a		4064	5781				,
SSESSMENTS	2.5	% of completed assessments ending in - Ongoing Involvement	High	Percentage	49.7%	43.9%	42.2%	43.2%	Financial Year	Ψ	1			<40%	40%>	45%+		43.6%	22.0%				(
AS	2.6	% of completed assessments ending in - No further action	Info	Percentage	33.0%	28.4%	35.5%	35.4%	Financial Year	1	Ψ					n/a		36.5%	36.8%				
	2.7	% of completed assessments ending in - Step down to Early Help / Other Agency	Info	Percentage	17.3%	27.7%	22.3%	21.3%	Financial Year	Ψ	1					n/a		15.4%	16.6%				
	2.8	% of completed assessments ending in - Other/Not Recorded	Info	Percentage	0.0%	0.0%	0.0%	0.0%	Financial Year	→	•					n/a		0.2%	24.6%				
	3.1	Number of S47 Investigations started	Info	Count	171	175	200	2235	Financial Year	↑	1					n/a	909	1478	1457				
	3.2	Number of S47 Investigations - rolling 12 month performance	Info	Count	2200	2214	2235	2235	Rolling Year	1	new					n/a							
	3.3	Number of S47's per 10,000 population aged 0-17 - rolling 12 month performance	Info	Rate per 10,000	388.7	391.2	394.9	394.9	Financial Year	1	1			more than +/-15	+/-15	+/-5 of 158.8	156.1	262.1	258.3	221.15	112.9	157.4	-
s.	3.4	Number of S47 Investigations - Completed	Info	Count	211	182	212	2237	Financial Year	1	1					n/a	876	1390	1460				
S47's		% of S47's with an outcome - Concerns are substantiated and child is judged to be at continuing risk of significant harm	High	Percentage	66.8%	58.8%	68.9%	63.9%	Financial Year	1	1					n/a		58.3%	28.8%				
	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	30.3%	37.9%	24.1%	28.7%	Financial Year	4	↑					n/a		30.2%	18.1%				
	3.7	% of S47's with an outcome - Concerns not substantiated	Low	Percentage	2.8%	2.2%	7.1%	7.3%	Financial Year	Ψ	1					n/a		11.2%	6.4%				
	3.8	% of S47's with an outcome - Not Recorded	Low	Percentage	0.0%	1.1%	0.0%	0.1%	Financial Year	Ψ	¥					n/a		0.3%	1.2%				
	4.1	Number of open CIN cases	Info	Count	1759	1724	1686	1686	As at mth end	Ψ	•					n/a	1526	1430	1659				
Z	4.2	Number of CIN (inc. CPP as per DfE definition)	Info	Count	2362	2354	2342	2342	As at mth end	Ψ.	1					n/a	1947	1805	2029				
CIN	4.3	Number of CIN per 10,000 population aged 0-17 - inc. CPP as per DfE definition. <i>(Council Plan Indicator)</i>	Low	Rate per 10,000	417.4	416.0	413.8	413.8	As at mth end	1	1					336.9	347.1	320	359.8	372.7	274.6	337.7	296.6
	4.4	% of CIN (open at least 45 days) with an up to date plan	High	Percentage	81.8%	83.9%	82.7%	82.7%	As at mth end	Ψ	¥			<85%	85%>	90%+	65.1%	98.6%	93.9%				
	5.1	Number of open CPP cases	Info	Count	603	630	656	656	As at mth end	1	1					n/a	423	369	370				
	5.2	Number of Initial CP Conferences (children) - rolling 12 month	Info	Count	889	922	957	957	Rolling Year	1	1					n/a	556	597	490				

- improvement in performance / increase in numbers

→ - no movement - numbers stable with last month

- decline in performance, not on target / decrease in numbers

NO	INDICATOR	GOOD PERF	DATA NOTE			2017 / 18			DOT (Month	DOT (Yr on	RAG	RAG (Year	Ţ	Target ar		YR (ON YR TE	REND	LA [.]	TEST BEI	NCHMAR	
		IS	(Monthly)	Jan-18	Feb-18	Mar-18	Year End 2017/18		on Month)	Yr)	(in month)	End)	Red	Amber	Target Green	2014/15	2015/16	2016/17	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT QTI THRE
5.3	Number of Initial CP Conferences (children) per 10,000 population - rolling 12 month	Within limits (low)	Rate per 10,000	157.1	162.9	169.1	169.1	Rolling Year	Ψ	↑			79+	79<	74.1<	98.6	105.9	86.9	79.6	45.8	65.3	-
5.4	Number of Initial CP Conferences (children) - in month	Info	Count	87	86	88	88	As at mth end	1				raı	nge to be	set							
5.5	% of initial child protection conference (ICPCs) completed within 15 days of S47 (based on number of children)	High	Percentage	59.8%	76.7%	70.5%	83.9%	Financial Year	Ψ	4			<85%	85%>	90%+	65.0%	88.3%	91.0%	82.8%	99.6%	76.7%	89
5.6	Number of children with a CP plan per 10,000 population under 18 (Council Plan Indicator))	Low	Rate per 10,000	106.6	111.3	115.9	115.9	As at mth end	4	Ψ					60.3	74.7	65.4	65.6	56.6	22.1	43.3	
5.7	Number of children becoming subject to a CP plan per 10,000 population - rolling 12 months	Low	Rate per 10,000	140.5	145.4	150.4	150.4	Rolling Year	Ψ	Ψ					n/a	93.05	93.8	79.0				
5.8	No. of children ceased to be subject to a CP plan per 10K pop - rolling 12 months	High	Rate per 10,000	91.5	97.7	101.1	101.1	Rolling Year	1	↑			<55	55>	59.9+	85.4	105.0	79.8	67.5	85.9	55.5	
5.9	% of children becoming the subject of a CP plan for a second or subsequent time within 2 years - rolling 12 months (Council Plan Indicator)	Low	Percentage	10.1%	9.1%	8.7%	8.7%	Rolling Year	^	^			6%+	6%<	4%<	4.0%	4.7%	9.2%				
5.10	% of children becoming the subject of a CP plan for a second or subsequent time - ever - rolling 12 months	Low	Percentage	26.5%	25.0%	24.6%	24.6%	Rolling Year	↑	Ψ				16%<	14%<	10.8%	12.7%	20.0%	14.7%	9.4%	18.7%	14
5.11	% of open CP plans lasting 2 years or more	Low	Percentage	0.3%	0.0%	0.2%	0.2%	As at mth end	Ψ	1			3.6% +	3.6%<	2.6%<	4.2%	0.8%	0.3%	2.0%	0.0%	2.1%	1
5.12	% of CP plans lasting 2 years or more - ceased within period	Low	Percentage	0.0%	3.8%	0.0%	0.9%	Financial Year	1	1			6.5% +	6.5%<	4.5%<	4.2%	4.8%	1.8%	3.1%	0.0%	3.4%	2
5.13	% of CP cases which were reviewed within timescales	High	Percentage	92.3%	80.7%	86.7%	94.6%	Financial Year	1	Ψ			<95%	95%>	98%+	96.4%	94.2%	98.6%	88.2%	100.0%	92.2%	9
5.14	% CPP with an up to date plan	High	Percentage	84.2%	84.0%	86.7%	86.7%	as at mth end	^	Ψ			<93%	93%>	95%+	97.6%	100.0%	96.2%				
5.15	% of CPP with visits in the last 2 weeks	High	Percentage	90.0%	95.1%	89.1%	89.1%	As at mth end	Ψ	Ψ			<90%	90%>	95%+			90.0%				
6.1	Number of Looked After Children	Info	Count	604	609	624		As at mth end	1	1					n/a	407	432	488				
6.2	Rate of Looked After Children per 10,000 population aged under 18 (Council Plan Indicator)	Low	Rate per 10,000	106.7	107.6	110.3		As at mth end	Ψ	Ψ					75	70	76.6	86.6	81.3	58.0	62.0	
6.3	Admissions of Looked After Children	Info	Count	27	18	34	320	Financial Year	1	1					n/a	175	208	262				
6.4	Number of children who have ceased to be Looked After Children	High	Count	11	13	20	184	Financial Year	^	Ψ					n/a	160	192	215				
6.5	Percentage of LAC who have ceased to be looked after due to permanence (Special Guardianship Order, Residence Order, Adoption)	High	Percentage	0.0%	25.0%	15.0%	24.5%	Financial Year	Ψ	Ψ			<33%	33%>	35%+	37.5%	40.1%	27.9%				
6.6	Percentage of LAC who have ceased to be looked after due to a Special Guardianship Order	High	Percentage	9.1%	7.7%	5.0%	6.9%	Financial Year	Ψ	Ψ			rar	nge to be	set			9.8%	12.9%	26.0%	12.0%	1
6.7	LAC cases reviewed within timescales	High	Percentage	85.9%	88.4%	95.5%	90.4%	Financial Year	1	Ψ			<90%	90%>	95%+	94.9%	83.3%	91.3%				
6.8	% of children adopted	High	Percentage	0.0%	15.4%	25.0%	14.7%	Financial Year	^	Ψ	YTD		<20%	20%>	22.7%+	26.3%	22.9%	14.4%	18.9%	30.0%	14.0%	2
6.9	Health of Looked After Children - up to date Health Assessments	High	Percentage	80.2%	80.5%	76.8%	76.8%	As at mth end	Ψ	Ψ			<90%	90%>	95%+	81.4%	92.8%	89.5%				
6.10	Health of Looked After Children - up to date Dental Assessments	High	Percentage	66.8%	65.7%	64.1%	64.1%	As at mth end	Ψ	^			<90%	90%>	95%+	58.8%	94.5%	57.3%				
6.11	Health of Looked After Children - Initial Health Assessments carried out within 20 working days	High	Percentage	53.3%	33.3%	36.4%	55.3%	Financial Year	^	1			rar	nge to be	set	20.0%	8.4%	18.2%				
6.12	% of LAC with a PEP	High	Percentage	93.5%	92.9%	96.9%	89.9%	As at mth end	^	Ψ			<90%	90%>	95%+	68.7%	97.8%	96.9%				
6.13	% of LAC with up to date PEPs (Report Termly - End Jul, Dec, Mar)	High	Percentage			95.0%		As at mth end	1	1			<90%	90%>	95%+	71.4%	95.0%	87.9%				
6.14	% of eligible LAC with an up to date plan	High	Percentage	89.7%	90.3%	89.7%	89.7%	As at mth end	Ψ	1			<93%	93%>	95%+	98.8%	98.4%	79.1%				
6.15	% LAC visits up to date & completed within timescale of National Minimum standard	High	Percentage	98.4%	97.7%	94.7%	94.7%	As at mth end	Ψ	→			<95%	95%>	98%+	94.9%	98.1%	94.7%				
6.16	% LAC visits up to date & completed within timescale of Rotherham standard	High	Percentage	88.5%	88.1%	81.6%	81.6%	As at mth end	Ψ	Ψ			<85%	85%>	90%+	64.0%	80.2%	88.3%				
7.1	Number of care leavers	Info	Count	238	246	257	257	As at mth end	^	^					n/a	183	197	223				

- improvement in performance / increase in numbers
- no movement numbers stable with last month
- decline in performance, not on target / decrease in numbers

			GOOD	DATA			2017 / 18			DOT (Month	DOT	RAG	RAG		Target a		YR (ON YR TR	REND	LA1	TEST BEN	NCHMARK	KING
	NO.	INDICATOR	PERF	NOTE (Monthly)	Jan-18	Feb-18	Mar-18	Year End 2017/18		on Month)	(Yr on Yr)	(in month)	(Year End)	Red	Amber	Target Green	2014/15	2015/16	2016/17	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTILE THRESHOL
AVE	7.2	% of eligible LAC & Care Leavers with a pathway plan	High	Percentage	97.0%	97.0%	97.0%	97.0%	As at mth end	→	1			<93%	93%>	95%+	69.8%	97.5%	99.3%				
LEA	7.3	% of eligible LAC & Care Leavers with an up to date pathway plan	High	Percentage	73.2%	78.9%	82.1%	82.1%	As at mth end	1	new												
ARE	7.4	% of care leavers in suitable accommodation	High	Percentage	99.2%	99.2%	96.9%	96.9%	As at mth end	¥	¥			<95%	95%>	98%+	97.8%	96.5%	97.8%	91.0%	100.0%	84.0%	91.0%
CA	7.5	% of care leavers in employment, education or training	High	Percentage	58.1%	61.4%	63.6%	63.6%	As at mth end	1	1			<70%	70%>	72%+	71.0%	68.0%	62.9%	52.2%	65.0%	50.0%	57.0%
w	8.1	% of long term LAC in placements which have been stable for at least 2 years	High	Percentage	60.8%	60.3%	61.3%	61.3%	As at mth end	1	•			<68%	68%>	70%+	71.9%	72.7%	66.2%	68.8%	86.0%	68.0%	74.0%
CEMENTS	8.2	% of LAC who have had 3 or more placements - rolling 12 months (Council Plan Indicator)	Low	Percentage	12.0%	13.2%	13.1%	13.1%	Rolling Year	↑	Ψ			12%+	12%<	9.6%<	12.0%	11.9%	11.9%	9.2%	6.0%	10.0%	8.0%
CEN	8.3	% of LAC in a family Based setting	High	Percentage	82.5%	81.8%	82.4%	82.4%	As at mth end	1	1			range	to be set	87.5%>			81.1%				
PLA	8.4	% of LAC placed with parents or other with parental responsibility (P1)	Low	Percentage	5.3%	5.0%	4.4%	4.4%	As at mth end	1	1			ra	ange to b	e set			5.3%				
	8.5	% of LAC in a Commissioned Placement (Council Plan Indicator)	Low	Percentage	48.5%	49.6%	50.5%	38.1%	As at mth end	1	↑			ra	ange to b	e set			43.2%				
	9.1	Number of LAC in a Fostering Placement (excludes family/friend carers)	High	Count	399	401	422	422	As at mth end	1	1			ra	ange to b	e set		180	353				
ING	9.2	% of LAC in a Fostering Placement (excludes family/friend carers)	High	Percentage	66.1%	65.8%	67.6%	67.6%	As at mth end	1	Ψ			ra	ange to b	e set		41.7%	72.3%				
OSTERING	9.3	Number of Foster Carers (Households)	High	Count	149	147	146	146	As at mth end	Ψ	Ψ			ra	ange to b	e set			168				-
FOS	9.4	Number of Foster Carers Recruited	High	Count	0	1	1	15	Financial Year	→	Ψ			ra	ange to b	e set			77				Ġ
	9.5	Number of Foster Carers Deregistered	Info	Count	2	3	2	25	Financial Year	•	^			ra	ange to b	e set			24				9
	10.1	Number of adoptions	High	Count	0	2	5	27	Financial Year	1	Ψ					n/a	43	43	31				
SNS	10.2	Number of adoptions completed within 12 months of SHOBPA	High	Count	0	1	4	16	Financial Year	1	1					n/a	16	23	12				
TIC	10.3	% of adoptions completed within 12 months of SHOBPA	High	Percentage	-	50.0%	80.0%	59.3%	Financial Year	1	1			<83%	83%>	85%+	37.2%	53.5%	38.7%				
ADOPTIONS	10.4	Average number of days between a child becoming Looked After and having a adoption placement (A1)	Low	YTD Average	315.0	311.9	325.3		Rolling Year	•	1			511+	511<	487<	393.0	296.0	404.0	511.6	337.0	558.0	501.1
	10.5	Average number of days between a placement order and being matched with an adoptive family (A2)	Low	YTD Average	137.0	134.9	124.8		Rolling Year	^	↑			127+	127<	121<	169	136	232.9	214.7	73.0	226.0	183.6
	11.1	Number of agency staff in social care (Council Plan Indicator)	Low	Average count	68	73	71		As at mth end	•	Ψ			ra	ange to b	e set			77.0				
	11.1b	Number of agency SW with a caseload	Low	Average count	33	29	27	27	As at mth end	^	new			ra	ange to b	e set							
OAD	11.2	Maximum caseload of social workers in key safeguarding teams (excluding children's disability team)	Low	Average count	32	31	30	30	As at mth end	Ψ	→			25+	24<	22<		29.1	30.0				
CASELOAD	11.3	Maximum caseload of social workers in LAC	Low	Average count	17	17	18	18	As at mth end	Ψ	Ψ			21+	20<	18<		19.2	17.0				
& CA		Average number of cases per qualified social worker in LAC Teams 1-3	Within Limits	Average count	11.6	12.9	12.6	12.6	As at mth end	Ψ	Ψ			over 1% above range	1% above range	14-20		14.1	11.6			1	
3CE	11.4	Average number of cases per qualified social worker in LAC Teams 4 - 5	Within Limits	Average count	9.7	10.7	11.8	11.8	As at mth end	1	new			over 1% above range	1% above range	14-20		-	-				
WORKFORCE	11.5	Average number of cases per qualified social worker in Duty Teams	Within Limits	Average count	20.7	20.1	17.9	17.9	As at mth end	Ψ	Ψ			over 1%	1% above range	16-22		15.8	13.3				
WOR	11.6	Average number of cases per qualified social worker in CIN Teams (1-12)	Within Limits	Average count	17.5	18.9	18.7	18.7	As at mth end	Ψ	Ψ			over 1% above	1% above range	16-22		18.0	17.7				
	11.7	Average number of cases per qualified social worker in Children's Disability Team	Within Limits	Average count	11.4	13.5	13.4	13.4	As at mth end	Ψ	1			range over 1% above		16-22		19.1	15.4				
	L	i vani	L	I	L	L	I	I	L		l			range	9-	<u> </u>	l		<u></u>	L	ā	A	ă

improvement in performance / increase in numbers

- no movement - numbers stable with last month

- decline in performance, not on target / decrease in numbers

NO.	INDICATOR	GOOD PERF				2017 / 18			DOT (Month					Target aı Foleranc		YR (ON YR TI	REND	LA1	EST BEN	CHMARK	
NO.	INDICATOR	IS	NOTE (Monthly)	Jan-18	Feb-18	Mar-18	Year End 2017/18		on Month)	(Yr on Yr)	(in month)	(Year End)	Red	Amber	Target Green	2014/15	2015/16	2016/17	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTILE THRESHOL
11.8	Average number of cases per qualified social worker in Complex Abuse Team	Within Limits	Average count	14.2	11.2	16.6	16.6	As at mth end	^	new			over 1% above range	1% above range	16-22							

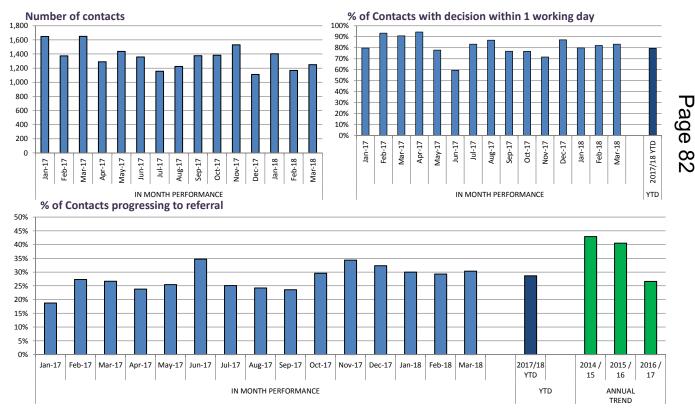
An initial contact is where a LA receives a contact about a child, and where there is a request for general advice, information or a social care service. Contacts received are screened against an agreed multi-agency threshold criteria for social care, where a manager agrees these thresholds have been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

ERFORMANC

The volume of contacts in March is slightly higher than in Febuary but is at the expected level. Performance relating to timeliness has remained steady within recent months, with a slight improvement month on month and is in line the year to date average. Quality assurance activity continues to be a well embedded feature of the service, with the Service Manager sampling work completed outside of the 24 hour timescale, in order to understand the reasons why and ensure that the safety of children was prioritised, as well as sampling work when decisions have been taken not to progress to referral.

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				1.3	
		No. Contacts	ded	cisio	itacts won with king da	in 1	prog		Contac sing to	ts referral
	Jan-17	1649	1315	of	1649	79.7%	309	of	1649	18.7%
	Feb-17	1373	1281	of	1373	93.3%	375	of	1373	27.3%
	Mar-17	1651	1500	of	1651	90.9%	440	of	1651	26.7%
	Apr-17	1290	1216	of	1290	94.3%	307	of	1290	23.8%
CE	May-17	1438	1120	of	1438	77.9%	366	of	1438	25.5%
IN MONTH PERFORMANCE	Jun-17	1358	808	of	1358	59.5%	471	of	1358	34.7%
FOR	Jul-17	1156	962	of	1156	83.2%	290	of	1156	25.1%
PERI	Aug-17	1223	1062	of	1223	86.8%	296	of	1223	24.2%
THE	Sep-17	1376	1057	of	1376	76.8%	324	of	1376	23.5%
AON	Oct-17	1383	1060	of	1383	76.6%	409	of	1383	29.6%
Z	Nov-17	1529	1095	of	1529	71.6%	525	of	1529	34.3%
	Dec-17	1111	969	of	1111	87.2%	359	of	1111	32.3%
	Jan-18	1404	1122	of	1404	79.9%	421	of	1404	30.0%
	Feb-18	1167	957	of	1167	82.0%	342	of	1167	29.3%
	Mar-18	1249	1040	of	1249	83.3%	379	of	1249	30.3%
YTD	2017/18 YTD	15684	12468	of	15684	79.5%	4489	of	15684	28.6%
AL D	2014 / 15	10517								42.9%
ANNUAL TREND	2015 / 16	12165				96.5%				40.5%
₽ F	2016 / 17	16609				86.0%				26.6%



CONTACTS BY SOURCE

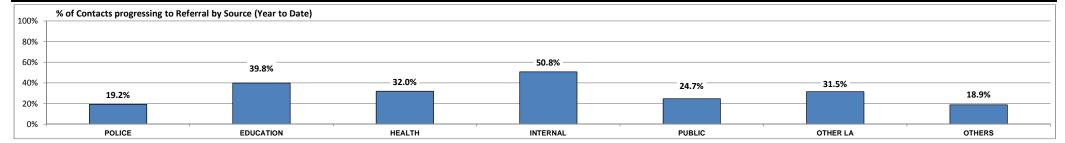
An initial contact is where a LA receives a contact about a child, and where there is a request for general advice, information or a social care service. Contacts received are screened against an agreed multi-agency threshold DEFINITION criteria for social care, where a manager agrees these thresholds 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.

The number of contacts progressing to a social work referral is relatively stable for all referring agencies.

The MASH Operational Group continues to routinely review a sample of the contacts, collating and taking forward the learning arising. Partners have acknowledged and begun to reflect on the high volume of NFA outcomes and information in this regard has been provided.

The below table sets out the proportion of contacts from each agency progressing to referral, which means that a relatively high proportion of contacts do not progress for further social care intervention. This means that there is the opportunity to significantly reduce the volume of contacts made to social care, without there being adverse effects for children. To some extent this requires the further embedding of the Early Help assessment across the partnership a piece of work that is progressing, though froma low base. Further work is planned at the social work front door to better integrate the Social Care and Early Help screening functions, which will help to support the work to better embed Early Help assessment in all accumulative children's cases.

			(1) POLICE		. ,	ducation ser (Inc. Schools		(3)	Health servi	ces	(4) Inter	nal council s	ervices		lembers of p		(6) OTHER	LOCAL AU	THORITIES	•	(7) Others Idren centre vices, cafca	
		Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral
	Jan-18	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-18	535	103	19.3%	215	93	43.3%	79	14	17.7%	115	55	47.8%	118	30	25.4%	67	21	31.3%	244	59	24.2%
	Mar-18	598	103	17.2%	256	109	42.6%	192	54	28.1%	226	100	44.2%	116	17	14.7%	51	11	21.6%	212	46	21.7%
	Apr-17	592	92	15.5%	131	41	31.3%	141	33	23.4%	140	79	56.4%	106	32	30.2%	39	10	25.6%	141	20	14.2%
NCE	May-17	519	88	17.0%	249	65	26.1%	168	47	28.0%	180	83	46.1%	137	36	26.3%	43	18	41.9%	142	29	20.4%
MA	Jun-17	492	122	24.8%	199	96	48.2%	122	40	32.8%	227	125	55.1%	124	24	19.4%	49	33	67.3%	145	31	21.4%
FOR	Jul-17	532	76	14.3%	86	26	30.2%	125	46	36.8%	148	93	62.8%	94	30	31.9%	41	8	19.5%	130	11	8.5%
FR	Aug-17	627	72	11.5%	1	1	100.0%	144	50	34.7%	192	113	58.9%	95	22	23.2%	28	8	28.6%	136	30	22.1%
푬	Sep-17	579	96	16.6%	129	49	38.0%	150	36	24.0%	185	101	54.6%	97	11	11.3%	39	7	17.9%	197	24	12.2%
NON	Oct-17	554	114	20.6%	183	65	35.5%	149	54	36.2%	179	105	58.7%	104	30	28.8%	37	8	21.6%	177	33	18.6%
Z	Nov-17	489	135	27.6%	186	92	49.5%	173	63	36.4%	284	139	48.9%	106	34	32.1%	71	18	25.4%	220	44	20.0%
	Dec-17	342	103	30.1%	202	80	39.6%	144	59	41.0%	167	58	34.7%	63	12	19.0%	38	18	47.4%	155	29	18.7%
	Jan-18	428	95	22.2%	224	97	43.3%	168	46	27.4%	186	89	47.8%	184	42	22.8%	41	9	22.0%	173	43	24.9%
	Feb-18	431	93	21.6%	145	66	45.5%	136	43	31.6%	189	76	40.2%	108	21	19.4%	23	9	39.1%	135	34	25.2%
	Mar-18	351	53	15.1%	217	99	45.6%	177	58	32.8%	202	96	47.5%	128	38	29.7%	37	7	18.9%	137	28	20.4%
YTD	2017 / 18	5936	1139	19.2%	1952	777	39.8%	1797	575	32.0%	2279	1157	50.8%	1346	332	24.7%	486	153	31.5%	1888	356	18.9%
AL D	2014 / 15																					
ANNU/ TREN	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%
A E	2016 / 17	6085	1193	19.6%	1997	864	43.3%	1708	474	27.8%	784	317	40.4%	1404	371	26.4%	335	80.0%	0.2%	4296	1112	25.9%



REFERRALS

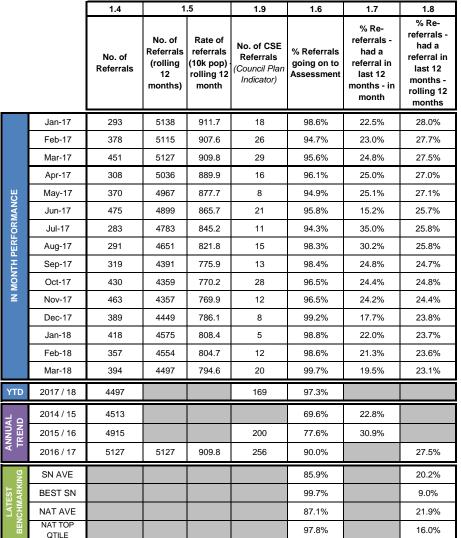
DEFINITION

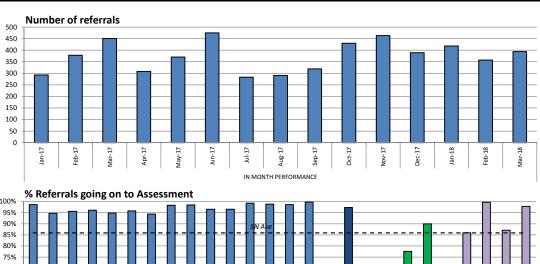
An Initial Contact will be progressed to a 'referral' where the social worker or manager considers an assessment and/or services may be required for a child or further information is required to make an informed decision.

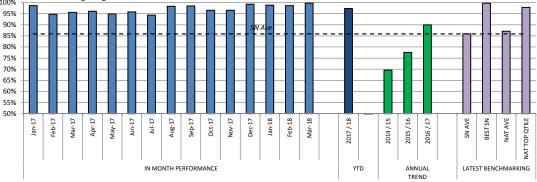
RFORMANCE

The number of referrals continue to reduce, with a further decline in March 2018. Generally, the re-referral rate shows a increasingly positive picture having reduced to a rolling 12 month average of 23%, suggesting that the improvement achieved is being sustained. This is in line with audit outcomes that suggest casework practice is significantly improving as a result of the implementation of the new operating model. To be confident that this is embedded we would need to see rates fall below the national average (21.9%) for a sustained period and to a level that would put the performance in the top quartile (16%).

The number of referrals progressing to assessment in month remains high which reflects a continuing trend around the vast majority of referrals progressing to assessment (over 90%). This reflects the accuracy in the operational process with the majority of screening activity taking place at contact stage.









ASSESSMENTS - STARTED / COMPLETED

DEFINITION

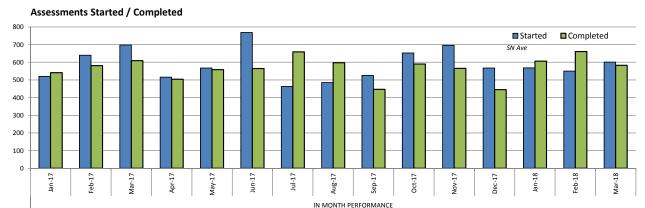
If a child meets the Children's Act definition of 'Child in Need' or is likely to be at risk of significant harm, authorisation will be given for an assessment of needs to be started to determine which services to provide and what action to take. National Working Together guidelines state that the maximum 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 exceeding the time limit.

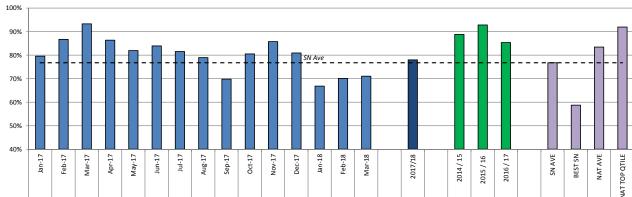
January, February and March have seen high numbers of assessments completed with 583 assessments completed in March. This reflects the work done across services to reduce the accumulated volume from the latter months of 2017. Though assessment timeliness continues to be lower than expected (at 71%) there has now been a significiant reduction in the number of open out of date assessments across the service. At the time of writing (10th April 2018) there are 68 open out of date assessments in the service, only 13 of which are within the Duty / Assessment Teams and relate to children who are not already within a CIN / CP / CIC process. The performance in relation to first assessments (Duty Teams) is higher than the service wide performance, at 76.8%.

The timeliness of assessment completion is below the statistical neighbour average. This reflects the work done to reduce out of date assessments in the service. The reduction in out of date assessments has been signficiant during January and Febuary 2018 and progress continues as reflected in the Month of March data. At the time of writing (11th April 2018) there are 69 out of date assessments across the service, 14 of which relate to children where this is the first assessment following the initial referral (a working together compliant assessment). The position regarding completed assessment has held over the last 4 months but there has been no substantive improvement.

Data Note: Following validation work on the Assessments Completed report the numbers have changed slightly for all months (inc. No. Assessments Completed & % completed in 45 working days)

		2.1	2.4	2.2	2.3
		Number of Assessments started	No. of Assessments completed in Month	% completed within 45 working days	Open assessments already past 45 working days
	Jan-17	520	541	79.5%	4
	Feb-17	640	581	86.7%	3
	Mar-17	698	609	93.3%	2
	Apr-17	516	504	86.3%	11
CE	May-17	567	558	81.9%	15
IN MONTH PERFORMANCE	Jun-17	769	565	83.9%	5
FOR	Jul-17	463	659	81.5%	2
PERI	Aug-17	485	597	78.9%	1
H	Sep-17	526	447	69.8%	2
MON	Oct-17	653	590	80.5%	5
Z	Nov-17	696	566	85.7%	5
	Dec-17	567	445	80.9%	4
	Jan-18	568	606	66.8%	3
	Feb-18	550	661	70.0%	6
	Mar-18	601	583	71.0%	47
YTD	2017/18	6961	6781	78.0%	
), D	2014 / 15	3929		88.8%	
NNNUA! TREND	2015 / 16	3996	4064	92.8%	
A F	2016 / 17	6182	5148	85.3%	
NG	SN AVE			76.7%	
ST	BEST SN			58.7%	
LATEST BENCHMARKING	NAT AVE			83.4%	
BEN	NAT TOP QTILE			91.9%	





Monthly Performance - March 2018 - D2 9 of 27

% completed within 45 working days

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.

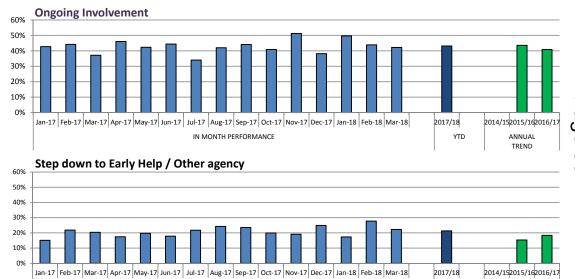
Data Note: Following validation work on the Assessments Completed in 45 working days)

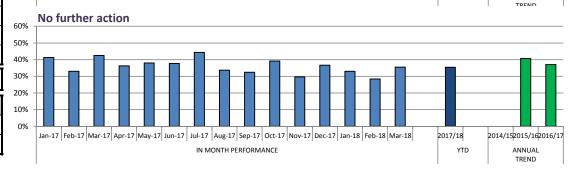
PERFORMANCE

Assessment outcomes continue to be reasonably consistent. Just over 64.5% of assessments resulted in early help and social care involvement, therefore the majority of families receive help and support as a result of an assessment of need.

Processes for quality assurance (particularly in relation to NFA outcomes) are in place in the Duty Services, where a monthly quality sample takes place.

2.5					2.6				2.7		2.8						
		Ongoing Involvement			No further action			Step down to Early Help			Early	Not Recorded/Other					
	Jan-17	231	of	541	42.7%	223	of	541	41.2%	82	of	541	15.2%	5	of	541	0.9%
	Feb-17	257	of	581	44.2%	192	of	581	33.0%	127	of	581	21.9%	5	of	581	0.9%
	Mar-17	226	of	609	37.1%	259	of	609	42.5%	124	of	609	20.4%	0	of	609	0.0%
	Apr-17	232	of	504	46.0%	183	of	504	36.3%	88	of	504	17.5%	1	of	504	0.2%
CE	May-17	236	of	558	42.3%	212	of	558	38.0%	110	of	558	19.7%	0	of	558	0.0%
IN MONTH PERFORMANCE	Jun-17	251	of	565	44.4%	213	of	565	37.7%	101	of	565	17.9%	0	of	565	0.0%
ORI	Jul-17	224	of	659	34.0%	292	of	659	44.3%	143	of	659	21.7%	0	of	659	0.0%
ERF	Aug-17	251	of	597	42.0%	201	of	597	33.7%	145	of	597	24.3%	0	of	597	0.0%
Ë	Sep-17	197	of	447	44.1%	145	of	447	32.4%	105	of	447	23.5%	0	of	447	0.0%
MON	Oct-17	241	of	590	40.8%	231	of	590	39.2%	118	of	590	20.0%	0	of	590	0.0%
Z	Nov-17	290	of	566	51.2%	168	of	566	29.7%	108	of	566	19.1%	0	of	566	0.0%
	Dec-17	170	of	445	38.2%	163	of	445	36.6%	111	of	445	24.9%	1	of	445	0.2%
	Jan-18	301	of	606	49.7%	200	of	606	33.0%	105	of	606	17.3%	0	of	606	0.0%
	Feb-18	290	of	661	43.9%	188	of	661	28.4%	183	of	661	27.7%	0	of	661	0.0%
	Mar-18	246	of	583	42.2%	207	of	583	35.5%	130	of	583	22.3%	0	of	583	0.0%
YTD	2017/18	2929	of	6781	43.2%	2403	of	6781	35.4%	1447	of	6781	21.3%	2	of	6781	0.0%
AL D	2014/15																
ANNUAL TREND	2015/16	1772	of	4064	43.6%	1624	of	4064	40.7%	621	of	4064	15.4%	7	of	4064	0.2%
ANI	2016/17	2104	of	5148	40.9%	1905	of	5148	37.0%	944	of	5148	18.3%	195	of	5148	3.6%





IN MONTH PERFORMANCE

10 of 27 Monthly Performance - March 2018 - D2

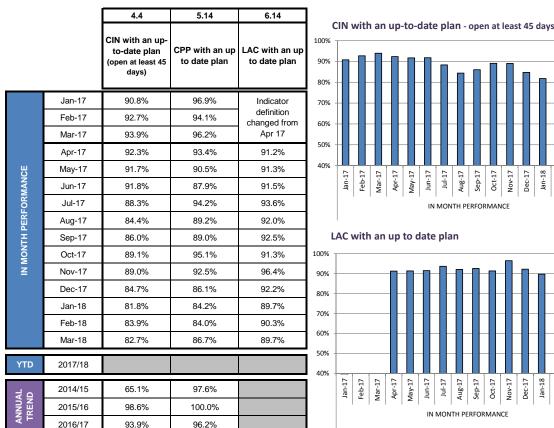
YTD

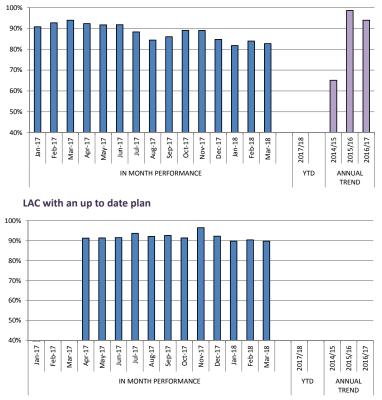
ANNUAL

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 their plan changes to 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)

If a child has an out of date plan it may mean that there risks and needs are not being addressed effectively, Performance for CIN and LAC plans, whereas performance for CP plans vary's at 1.5% over a four month period. The level of change is not statistically significant but are subject to management scrutiny in the performance meetings. The performance dip is likely to be as a consequence of a number of factors including the increase in caseloads in locality and LAC, these increases are being scrutinised by managers and joint work is underway to ensure smooth transfer of work and step-down to Early Help where appropriate. In duty the number of assessments that have exceeded 45 working days has decreased and this can have a positive impact on the timeliness of CIN plans. Scrutiny of insight tells us that there are particular challenges in some locality teams which appear to correlate with the areas who have the highest caseloads. To explore this further and as a check and challenge there has been a series of Service Manager led Reviews of all open CIN activity. In the mean, work was purposeful and timely.







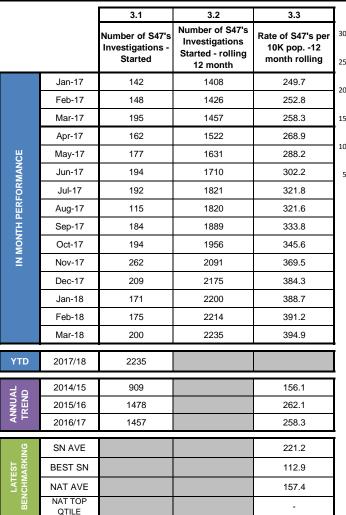
SECTION 47 INVESTIGATIONS - STARTED

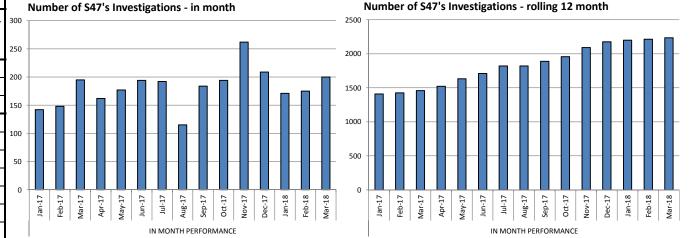
DEFINITION

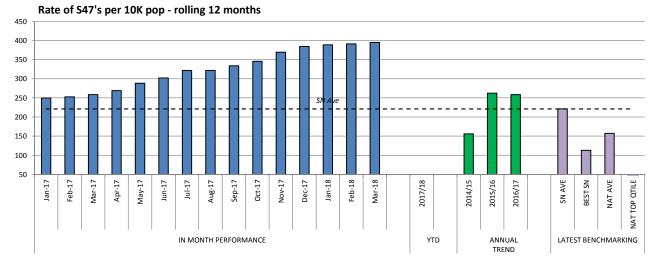
If there is reasonable cause to suspect a child is suffering or likely to be suffering significant harm a Strategy Discussion will be convened between child protection staff and other relevant bodies. The Strategy Discussion may then decide to launch a Section 47 enquiry. This means the local authority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

ERFORMANCI

It has been noted this month, that there has been a rise in the number of section 47 investigations concluded. The level of investigations remain significantly higher than national and statistical neighbour average, however audit activity and the outcomes of investigations suggest that most are appropriate. The month of March shows 8% of investigations concluded that the original concern, leading to the strategy discussion was unsubstantiated. To understand the significance of this, we would need to review Team/Service level data before any significant inference is drawn from this.







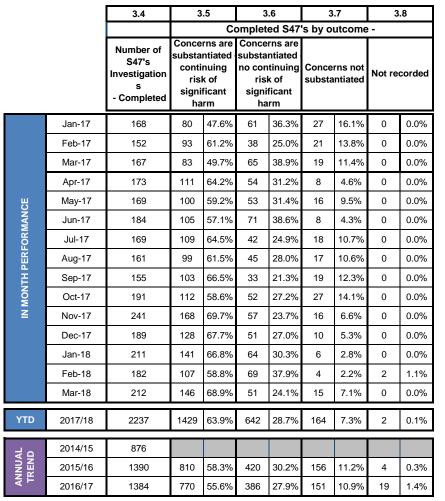
SECTION 47 INVESTIGATIONS - COMPLETED

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 Section 47 investigations, suggests continued high volume. The majority of the outcomes for the completed section 47s continue to show that the concerns are substantiated so therefore the decision to initiate the strategy discussion/section 47 investigation was right for the majority of children/families.

Over the year 63.9% (1429 children) were proven to be at risk of continuing harm and therefore progressing to be safeguarded through the child protection process. Only 7.3% (164 children) were not in line with the "significant harm" threshold. This low level indicates continued improvement; with 2015/16 having 11.2% and 2016/17 10.9%. This activity continues to be subject to continued management scrutiny.





CHILDREN IN NEED (CIN)

DEFINITION

ANALYSIS

PERFORMANCE

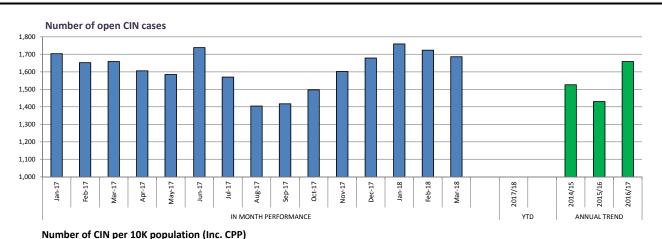
If the child is found to be disabled or the assessment finds that their health and development is likely to suffer without local authority intervention, the child will be classed as 'in need', as defined by Section 17 of the Children Act 1989. This means that the local authority is now legally obliged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

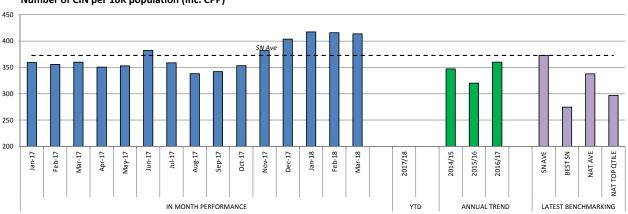
There is no good or bad performance in relation to number of CIN, although it is important to monitor against statistical neighbour and national averages, as numbers considerably higher or lower than average can be an indicator of other performance issues.

The demand in March has again fallen slightly but overall numbers remains high. Management information suggests that a greater proportion of the casework is at a child protection level. The growth in CIN numbers since August is almost in entirely related to initial social work interventions, specifically referrals and initial assessments are sitting within the duty service. The narrative around this is explained in early sections of the report relating to referrals and assessments. The service managers in the Locality social work teams lead regular reviews on Child in Need work to minmise drift and ensure only those children that require this type of intervention are open to the service. The data now suggests we are above the statistical neighbour and national average. Further Service Manager led Reviews in February and March are beginning to impact on the overall CIN population within Locality.

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)	
	Jan-17	1704	2026	359.2	
	Feb-17	1652	2006	355.7	
	Mar-17	1659	2029	359.8	
	Apr-17	1606	1983	350.4	
IN MONTH PERFORMANCE	May-17	1585	1997	352.9	
MA	Jun-17	1738	2164	382.4	
FOR	Jul-17	1570	2030	358.7	
PER	Aug-17	1404	1912	337.9	
臣	Sep-17	1417	1936	342.1	
NO	Oct-17	1497	1999	353.2	
Z	Nov-17	1602	2162	382.0	
	Dec-17	1679	2285	403.8	
	Jan-18	1759	2362	417.4	
	Feb-18	1724	2354	416.0	
	Mar-18	1686	2342	413.8	
YTD	2017/18				
4L D	2014/15	1526	1947	347.1	
REND	2015/16	1430	1805	320.0	
AH	2016/17	1659	2029	359.8	
NG	SN AVE			372.7	
LATEST BENCHMARKING	BEST SN			274.6	
LAT	NAT AVE			337.7	
BE	NAT TOP QTILE			296.6	





INITIAL CHILD PROTECTION CONFERENCES

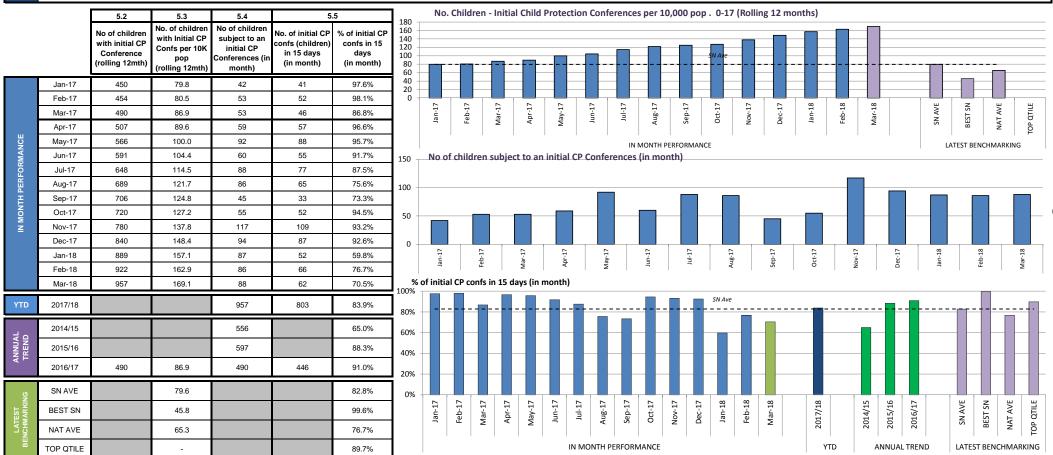
DEFINITION

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.

RFORMANCE ANALYSIS

The timeliness of initial CP conferences since January has fallen significantly. While there has been an improvement in February this has dipped slightly with the barriers to timeliness being achieved remain linked to some key themes that we are working to address. These include parental request to stand down linked to access to reports; staff absence across children's service linked to annual leave impacting on quoracy; late notification linked to ongoing high demand. Heads of service work closely to ensure that any delay does not impact on a child's safety and wellbeing. In order to support the ongoing high demand for conference we have continue to review the support functions in the Safeguarding unit to create additional capacity and streamline processes which support professional attendance and quoracy. We are also working with the fieldwork teams to improve the timeliness of notification and completing key tasks that support calling conferences.



ANALYSIS

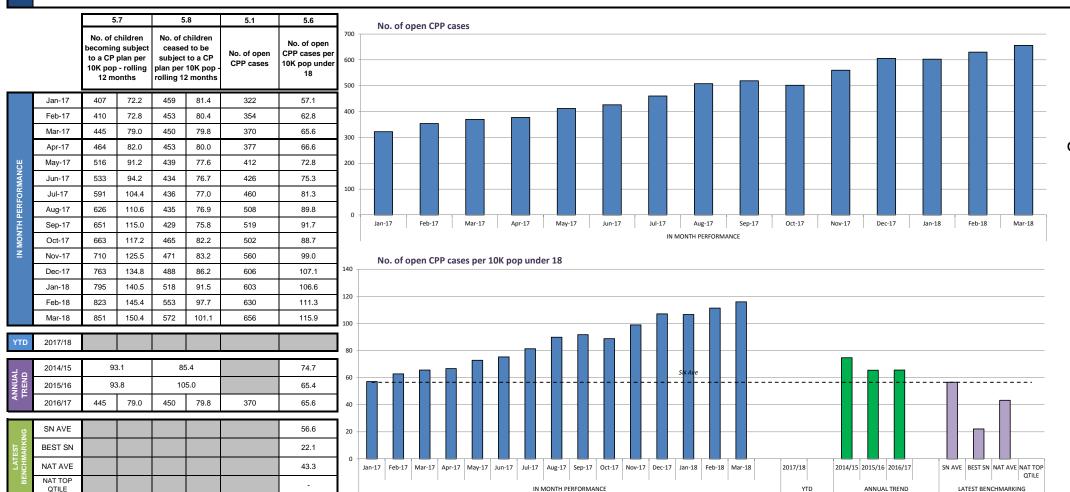
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The number of children made subject to plans, continues to be high and in line with our performance around section 47. This may continue given the awareness and the tenacious approach we are taking towards child neglect, particularly those subject to the complex abuse enquiry. The trend for the number of children with a Child Protection Plan (CPP) continues to increase and remains significantly higher than that of statistical neighbours (56.6) and the national average (43.3). Managers are reviewing cases closely and having regular discussions regarding being clear about the difference between 'help' and 'harm', this has contributed to the increased number of child protection plans being made. Ofsted agreed that children in Rotherham who are plans, needed to be on plans.

The majority of CP plans are under 12 months. A group of heads of service and service managers have recently met and agreed a set of workstreams aimed at scrunitising CPP numbers to ensure that the numbers are well understood and actions are put in place to ensure that this type of plan is only used where appropriate and no other plan would safeguard the child. It is expected that this work will happen over the next 6 - 8 weeks. (right child right plan)

The introduction of the signs of safety methodology should have a positive impact in this area of support. Long-term the figures should then stabilise closer to the benchmark averages. However, the number of plans alone cannot offer assurance that we have identified the right children at risk of/or experiencing significant harm and are supported by a plan.

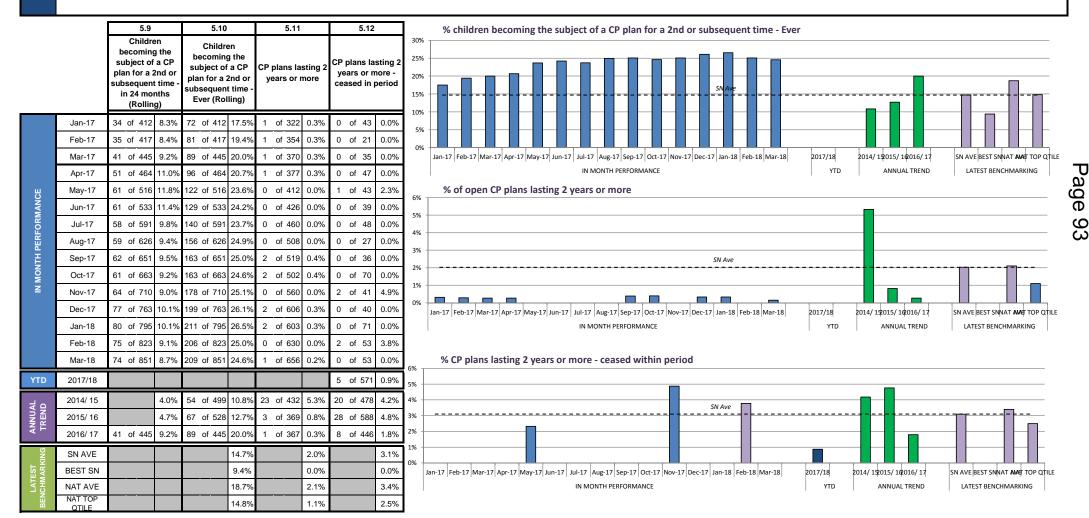


Child protection plans remain in force until the child is no longer considered at risk, moves out of the local authority area (in which case the receiving authority should convene its own child protection conference) or reaches the age of 18.

RFORMANCE

The data suggests that the services ability to reach a timely resolution for children at 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. There is increased evidence of better use of family group conferencing and edge of care support in addition to the pre-proceedings PLO process which means that whilst more legal proceedings are being issued, more are being well prepared for, with front-loading of assessments whilst children are subject to CP plans.

The proportion of children subject to repeat plans has remained the same remaining relatively high at 8.7%. This is likely to be a consequence of more timely escalations for children who are experiencing significant harm through parental neglect. However, there is only one child being supported through a plan for more than 2 years and only 10 who have been on a plan for more than 18 months, the vast majority of childen have been on CPP for less than 12 months. Meaning a sustained period in the top quartile of performance in relation to CP for 2 years or more.



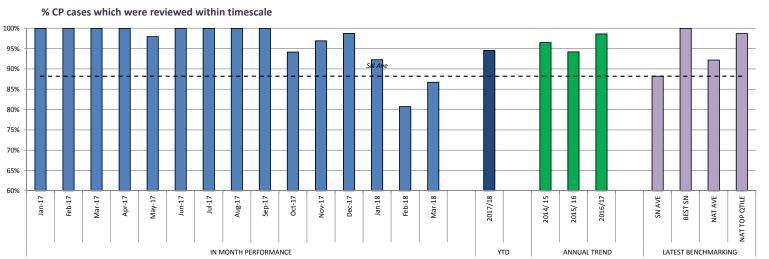
A child protection plan is reviewed after three months and at intervals of no more than six months thereafter.

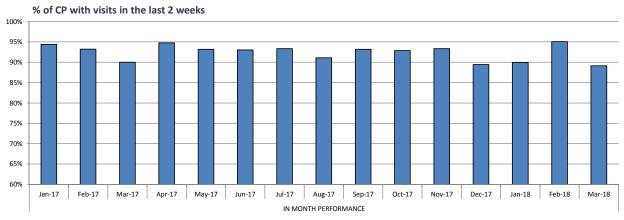
Local standards state that any child subject to a child protection plan should be visited at least every two weeks (this excludes children registered on a CPP for less than a week).

Performance in the timeliness of Review Case Conferencing has shown some improvement this month with 19 children not having their plan reviewed in timescale. The conferences held out of time can be linked to a small number of conferences being cancelled linked to the day adverse weather and issues around quoracy. We are currently holding 8- 9 conferences per day in order to support the ongoing high demand for conferences. We continue to work closely to review the support functions in the Safeguarding unit to create additional capacity and streamline processes which support professional attendance and quoracy. We are also working closely with fieldwork services to support raising awareness around the practice issues linked to LL, reports and minutes.

Visit timeliness at the end of March has found that 69 children have not been visited on time. Team managers provide up to date information regarding visits undertaken/missed, largely children have been seen (even if this is late) and there are times where the recording of visits does not reflect the work done by the workers. Team managers are able to articulate what measures have been taken to visit children and what plans are in place to ensure that children are safe.

5.13 5.15 No. of CP cases No. of CP with visits in the last 2 reviewed within timescale (Children) weeks 100.0% 304 of 322 94.4% Jan-17 100 of 100 73 of 100.0% 330 of 354 93.2% Feb-17 95 of 95 100.0% 333 of 370 90.0% Mar-17 Apr-17 64 of 64 100.0% 343 of 362 94.8% 96 of 98.0% 369 of 396 93.2% May-17 387 of 416 93.0% Jun-17 107 of 107 100.09 Jul-17 122 of 122 100.0% 406 of 435 93.3% Aug-17 78 of 78 100.0% 451 of 495 91.1% 464 of 498 93.2% Sep-17 101 of 101 100.09 129 of 137 94.2% 455 of 490 92.9% Oct-17 Nov-17 94 of 97 96.9% 492 of 527 93.4% 78 of 79 98.7% 542 of 606 89.4% Dec-17 Jan-18 131 of 142 92.3% 529 of 588 90.0% 580 of 610 95.1% 113 of 140 80.7% Feb-18 124 of 143 86.7% 566 of 635 89.1% Mar-18 2017/18 1237 of 1308 94 6% 2014/15 96.5% 94.2% 2015/16 2016/17 98.6% 333 of 370 90.0% 88.2% SN AVE BEST SN 100.09 NAT AVE 92.2% NAT TOP 98.7% QTILE





LOOKED AFTER CHILDREN

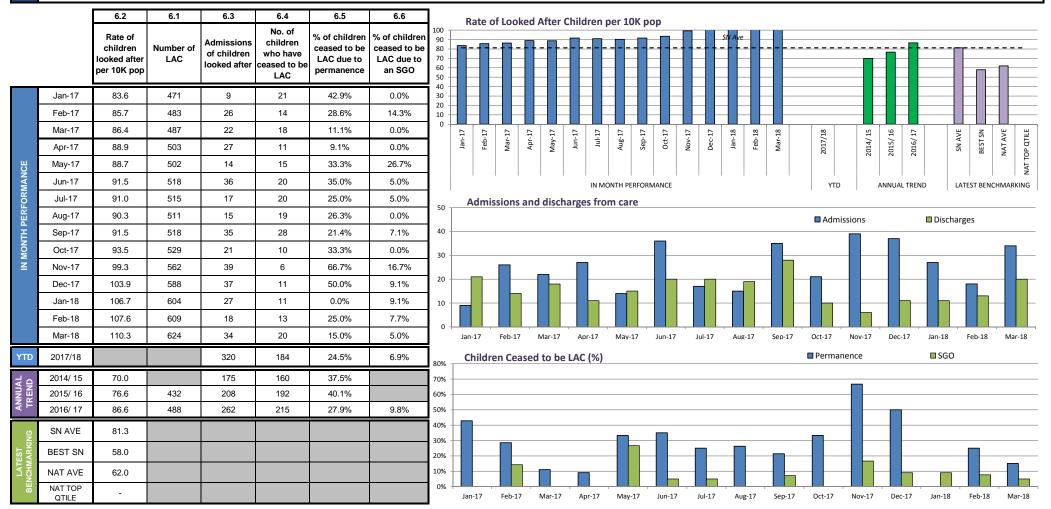
DEFINITION

PERFORMANCE ANALYSIS

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.

The recent decline in admissions to care was reversed in March with 34 children admitted to care which brought the total numbers of LAC to 624. The rate per 10,000 of the population now stands at 110.3 as compared to the statistical neighbour average of 81.3 and the national average of 62 (as reported at March 2017). On a more positive note the rate of discharge reached its highest level for 6 months with there being 20 children discharged from care indicating the Right Child Right Care programme is beginning to have some impact. Further awareness work is required in respect of the added 'value' in respect of admitted young people over the age of 14 to care, in order to ensure a more robust enforcement of the alternative offer from the Edge of Care Service as over the course of 2018 thus far there have been 12 young people admitted over the age of 14 including 2 x 17 year olds. This will be re-enforced with a presentation at the Whole Service Event and consultation process to be commended in respect of a charging policy for Section 20 placements.

The scoping process has been completed for the Right Child Right Care programme and there are 170 children for whom discharge is assessed to be a viable option. Work on progressing these plans will now commence, although significant impact is anticipated until late 2018.



LOOKED AFTER CHILDREN - REVIEWS & VISITS

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)

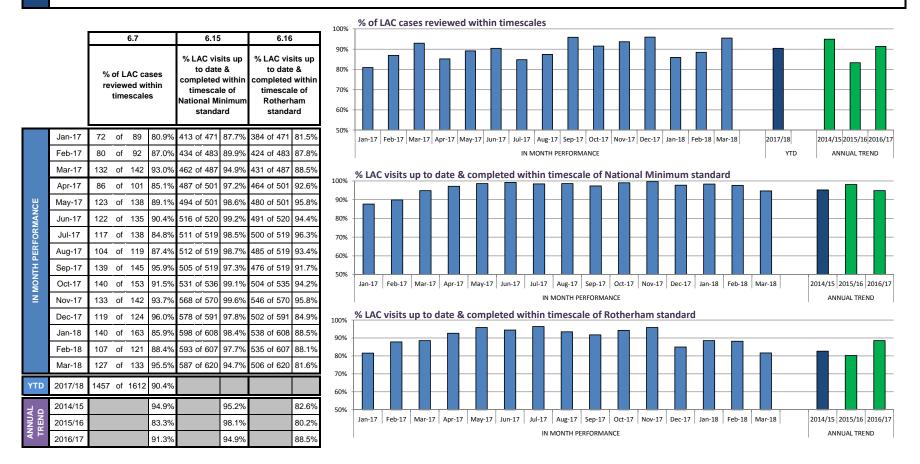
DEFINITION

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.

RFORMANCE

The timeliness of Statutory Reviews has improved this month to 95.5%. The reviews not held in timescale are linked to IRO sickness levels and some social workers not completing their prereview reports within timescales. To support maintaining and improving on the timeliness of reviews and the quality of care planning we are working closely with the LAC and field work teams around positive preparation for reviews. We are also considering and reviewing the staffing capacity within the IRO service to support less meetings being held out of time.

Performance in respect of statutory visits has declined slightly but this amounts to only 6 less visits than last month. Performance has been impacted by the increase in numbers of LAC and the increased travelling distances required due to placement market saturation. The adverse weather over the course of the month may also have had some impact. This remains an on-going focus of attention in performance clinics.



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

The performance figures reported by the LAC Health Team are higher than those recorded in this report, suggesting there is still some timelag in inputting data onto Liquid Logic by social workers. In respect of Initial Health Aassessments the reported figure is 56% over the course of March (13 of 23) although there were still 5 x Did Not Attends and 1 last minute cancellation which need to be followed up. In respect of the Review Health Assessments the figure reported by the LAC Health Team is 86%.

Work is being progressed with the Liquid Logic team to enable the LAC Health Team to directly input the Health Needs Assessment onto the case file which should resolve this time lag issue.

		6.9	6.10			6.	11	
		Health of LAC - Health Assessments up to date	Health of LAC - Dental Assessments up to date	N	o. Init Healtl	h nts In	Health of LAC - % Initial Health Assessments In Time	:
	Jan-17	92.1%	63.8%	0	of	28	0.0%	Ì
	Feb-17	89.1%	60.3%	6	of	16	37.5%	
	Mar-17	89.5%	57.3%	5	of	12	41.7%	
	Apr-17	87.8%	74.6%	1	of	17	5.9%	
병	May-17	83.7%	74.1%	14	of	33	42.4%	
IN MONTH PERFORMANCE	Jun-17	91.0%	79.3%	16	of	24	66.7%	
ORI	Jul-17	89.3%	79.0%	13	of	24	54.2%	:
PERF	Aug-17	90.1%	75.8%	12	of	19	63.2%	
Ē	Sep-17	89.9%	75.6%	9	of	10	90.0%	
MON	Oct-17	86.7%	72.1%	18	of	24	75.0%	
Z	Nov-17	87.5%	69.0%	14	of	18	77.8%	
	Dec-17	83.0%	65.1%	10	of	13	76.9%	
	Jan-18	80.2%	66.8%	8	of	15	53.3%	
	Feb-18	80.5%	65.7%	6	of	18	33.3%	
	Mar-18	76.8%	64.1%	4	of	11	36.4%	
YTD	2017/18			125	of	226	55.3%	1
٦ ر	2014/15	81.4%	58.8%				20.0%	Ì
ANNUAL	2015/16	92.8%	95.0%				8.4%	
₹ F	2016/17	89.5%	57.3%				18.2%	
ō	SN AVE							İ
ST	BEST SN							İ
LATEST BENCHMARKING	NAT AVE							
BENG	NAT TOP QTILE							





10%

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.

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.

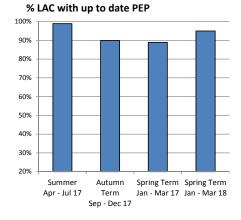
PERFORMANCE ANALYSIS

97% of eligible LAC have Personal Education Plan (15 LAC with no PEP) and 95% have a PEP less than a term old (24 with an older or no PEP).

Although this performance is high and an improvement on the Autumn term it is slightly lower than usual due to a combination of the adverse weather which meant that several PEPs had to be rescheduled, and the fact that it was a very short term. Also, the figure includes LAC who either did not come into care until late in the term, or who we were notified had come into care, and who there wasn't time to arrange PEP meeting.

				6.	12	6.13			
		Number of Eligible LAC with a Personal Education Plan			% LAC with a Personal Education Plan	% LAC with up to dat Personal Education Plan (Termly)			
	Jan-17	309	of	322	96.0%				
	Feb-17	316	of	328	96.3%				
	Mar-17	324	of	334	97.0%	88.9%	(Spring Term)		
	Apr-17	333	of	339	98.2%				
빙	May-17	343	of	356	96.3%				
MAN	Jun-17	354	of	368	96.2%				
ORI	Jul-17	371	of	373	99.5%	98.9%	(Summer Term)		
PERF	Aug-17	371	of	383	96.9%				
Ē	Sep-17	401	of	429	93.5%				
IN MONTH PERFORMANCE	Oct-17	401	of	429	93.5%				
Z	Nov-17	424	of	445	95.3%				
	Dec-17	429	of	456	94.1%	89.9%	(Autumn Term)		
	Jan-18	433	of	463	93.5%				
	Feb-18	435	of	468	92.9%				
	Mar-18	468	of	483	96.9%	95.0%	(Spring Term)		
YTD	2017/18								
D'L D	2014/15				76.0%		68.7%		
NNUAI	2015/16				97.8%		95.0%		
AA	2016/17				96.9%		87.9%		
NG	SN AVE								
LATEST BENCHMARKING	BEST SN								
CHI	NAT AVE								
BEI	NAT TOP QTILE								





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 Despite the increase in numbers of care leavers, performance remains strong with the numbers of care leavers with an up to date Pathway Plan increasing to more than 82%. The numbers of care leavers in suitable accommodation has declined, however, to 96.9% which is solely due to 2 more young people receiving custodial sentences. Current performance still places Rotherham in the top quartile and in fact RMBC is 10th out of all the local authorities in England in respect of this performance measure.

Performance in respect of care leavers who are in EET has improved after a recent dip and currently stands at its highest level for 12 months. The Leaving Care Team are working closely with other Directorates to firm up the preapprenticeship offer (work experience and work placements) in order to achieve more sustained apprenticeships given that from 2017 only one young person is still attending his apprenticeship placement. However, performance remains strong and once again places Rotherham back in the top quartile.

		7.1	7.2	7.3	7.4	7.5	
		Number of care leavers	% of eligible Care Leavers with a pathway plan	% of eligible Care Leavers with up to date pathway plan	% of care leavers in suitable accommodatio n	% of care leavers in employment, education or training	
	Jan-17	223	Unavailable		95.1%	Unavailable	
	Feb-17	223	97.8%	Unavailable	98.2%	44.4%	
	Mar-17	223	99.3%		97.8%	62.9%	
	Apr-17	220	98.6%		99.5%	65.4%	
CE	May-17	218	98.6%		96.8%	62.7%	
IN MONTH PERFORMANCE	Jun-17	216	99.3%	Unavailable	99.1%	62.7%	
-ori	Jul-17	222	100.0%		94.6%	62.5%	
ERI	Aug-17	230	100.0%		99.6%	61.9%	
E	Sep-17	230	100.0%	79.2%	96.3%	63.5%	
MON	Oct-17	237	98.6%	77.6%	99.6%	61.5%	
Z	Nov-17	237	98.6%	68.9%	99.2%	59.1%	
	Dec-17	236	96.2%	74.1%	99.2%	59.7%	
	Jan-18	238	97.0%	73.2%	99.2%	58.1%	
	Feb-18	246	97.0%	78.9%	99.2%	61.4%	
	Mar-18	257	97.0%	82.1%	96.9%	63.6%	
YTD	2017/18						
٦ ا	2014/15	183			97.8%	71.0%	
ANNUAL TREND	2015/16	197	69.8%		96.5%	68.0%	
₹ F	2016/17	223	99.3%		97.8%	62.9%	
Ő Z	SN AVE				91.0%	52.2%	
EST	BEST SN				100.0%	65.0%	
LATEST BENCHMARKING	NAT AVE				84.0%	50.0%	
BE	NAT TOP QTILE				91.0%	57.0%	



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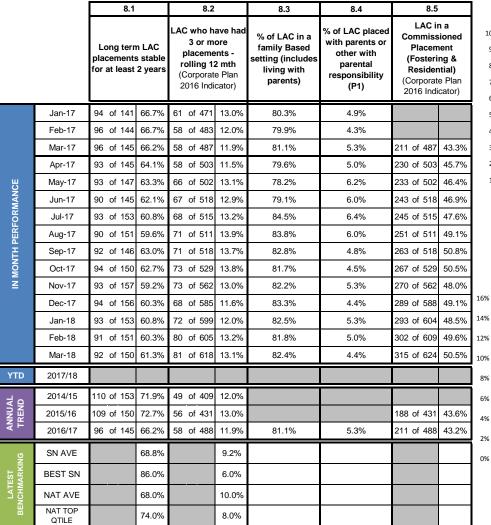
LOOKED AFTER CHILDREN - PLACEMENTS

DEFINITION

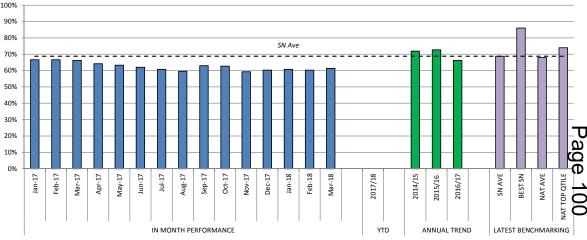
A LAC placement is where a child has become the responsibility of the local authority (LAC) and is placed with foster carers, in residential homes or with parents or other relatives.

ERFORMANC

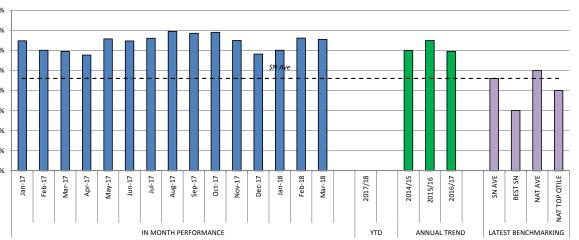
The increase in LAC is part of a national trend and as a result the placement market is increasingly saturated making appropriate matching decisions an increasing challenge. Despite this there has been a slight improvement in both measures of placement stability and in the numbers of LAC in family based settings. The Intensive Intervention Programme being implemented by the Rotherham Therapeutic Team is clearly having some positive impact on the number of placement disruptions for the most vulnerable and challenging of our young people and a full report of the programme will be presented to DLT next month. However, it is also likely that the impact of the Right Child Right Care project will mean more long-term placements will be converted to Special Guardianship Orders/Child Arrangement Orders which will have a significant negative impact on the stable placement performance over the course of the latter end of 2018.







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



DEFINITION

A foster care family provide the best form of care for most Looked after children. Rotherham would like most of its children to be looked after by its own carers so that they remain part of their families and community.

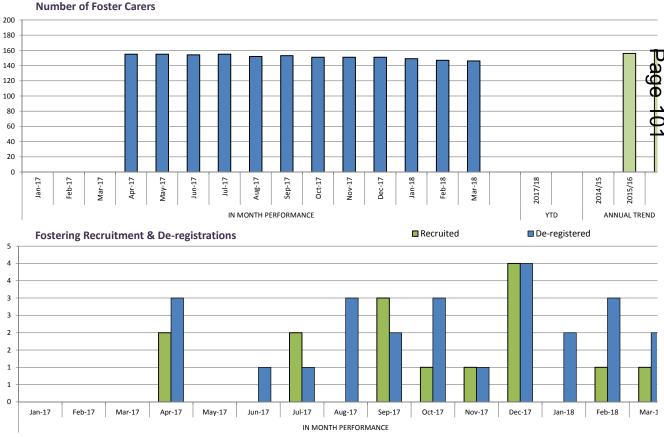
The final year end performance was the recruitment of 17 new foster families providing 26 new placements with 2 approvals being put on hold due to further information being received that will require further review. At present there are already 12 assessments being progressed all of which should be presented to Panel within the first 6 months of the financial year. This will place the Recruitment Team in a strong position to exceed last year's performance. This will be supported by the Muslim Foster Care project in which Rotherham is a pilot Local Authority, and the Challenge 63 Project in which every elected member will be challenged to propose a viable candidate for fostering over the course of the year.

In respect of de-registrations the figure is not as negative as would first appear. Of the reported de-registrations 1 was a Family and Friends placement where the children returned to birth parents, 3 were day care/respite care only and 5 had not actually provided any placement for the previous 6 months and so the impact is not as significant as would appear. An audit undertaken in March evidenced that the 16 (at that time) newly registered households provided 3602 days care for a total of 36 children whilst the 20 households who were deregistered only provided 1120 days care for a total of 12 children. As a result there was a net increase of 2482 actual care days provided (this does not take into account any days these carers had no placement or the 17th foster carer recruited over the course of the year.

There are currently 163 active fostering households providing 196 placements (+ 11 Reg 24 placements) which is 46% of the total foster placements being accessed by LAC. There are 8 placements on hold due to safeguarding concerns and a further 25 on hold due to bedroom/space issues, carers being on holiday or needing a break from fostering.

In respect of social work visits performance is at 86.2% for supervisory visits (up from 74.7%) and 81.6 for unannounced visits (up from 77.8%) and the trend is one of ongoing improvement.

		9.1	9.2	9.3	9.4	9.5	
		Number of LAC in a Fostering Placement (excludes relative/friend)	% or total LAC in a Fostering Placement (excludes relative/friend)	Number of Foster Carers (Households)	Number of Foster Carers Recruited (Households)	Number of Foster Carers De- registered (Households)	
	Jan-17						
	Feb-17						
	Mar-17						
	Apr-17	357	71.0%	155	2	3	
핑	May-17	364	72.5%	155	0	0	
IN MONTH PERFORMANCE	Jun-17	356	68.7%	154	0	1	
FOR	Jul-17	371	72.0%	155	2	1	
R	Aug-17	381	74.6%	152	0	3	
돝	Sep-17	391	75.5%	153	3	2	
MON	Oct-17	363	68.6%	151	1	3	
≥	Nov-17	377	67.1%	151	1	1	
	Dec-17	394	67.0%	151	4	4	
	Jan-18	399	66.1%	149	0	2	
	Feb-18	401	65.8%	147	1	3	
	Mar-18	422	67.6%	146	1	2	
YTD	2017/18				15	25	
AL D	2014/15						
ANNUAL	2015/16			156	13	16	
A	2016/17	353	72.3%	161	32	22	



DEFINITIO

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.

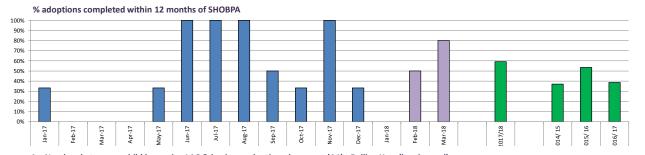
Time between the child entering care and being placed with the adoptive family (A1) current performance was an average of 325 days up slightly from the 311 days reported in February. This remains well below the Statistical neighbour average of 510 days and the national average of 558 days and places Rotherham in the top quartile. Over the 3 year period 2015-17 Rotherham has actually achieved an average performance of 404 days as opposed to a national average of 520 days which places Rotherham at the 11th best performing local authority in England over this period.

Time between the Placement Order being made and the match with adoptive parents (A2) is back to 125 days compared to the Statistical Neighbour average of 214 days and the national average of 226 days and once again Rotherham is in the top quartile and at an England ranking of 42nd over the 3 year period

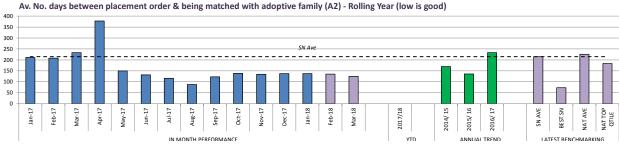
Please note performance in respect of timeliness is likely to experience some ongoing volatility given that the numbers in the cohort remain relatively small and one child can therefore have a disproportionate impact on the overall data. 27 children have been adopted during this financial year. Whilst this is a drop from last year there are currently 43 children on the adoption pathway with 21 of them already having an identified match and placed or about to be placed with their adoptive parents. As a result the adoption team are already well-placed to improve on this performance next year. This reduced forecast is almost solely due to adoption case law which seems to be giving birth parents greater rights of appeal right up to the Adoption Order hearing. Whilst no appeals have been successful thus far this does seem to be prolonging the adoption process. In respect of recruitment there are currently 12 adoptive parents undergoing the assessment process, 6 at stage 1 and 6 at stage 2. Given that only 13 adopters were approved throughout 2016/17 the team is once again well placed to improve on recent performance.

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

		10.1	10.2	10.3	10.4	10.5
		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) (ytd. ave)	Av. No. days between placement order & being matched with adoptive family (A2) (ytd. ave)
	Jan-17	9	3	33.3%	368.8	211.0
	Feb-17	1	0	0.0%	374.7	208.4
	Mar-17	2	0	0.0%	404.0	232.9
	Apr-17	1	0	0.0%	618.0	378.0
S	May-17	3	1	33.3%	316.3	149.5
IN MONTH PER FORMANCE	Jun-17	1	1	100.0%	323.0	131.0
FOR	Jul-17	1	1	100.0%	321.0	115.6
PER	Aug-17	3	3	100.0%	243.3	87.7
Ē	Sep-17	4	2	50.0%	289.5	122.5
MON	Oct-17	3	1	33.3%	307.6	138.5
	Nov-17	1	1	100.0%	307.8	134.1
	Dec-17	3	1	33.3%	315.0	137.0
	Jan-18	0	0	-	315.0	137.0
	Feb-18	2	1	50.0%	311.9	134.9
	Mar-18	5	4	80.0%	325.3	124.8
YTD	2017/18	27	16	59.3%		
70	2014/ 15			37.0%	393.0	169.0
ANNUAL TREND	2015/ 16	43	23	53.5%	296.0	136.0
A	2016/ 17	31	12	38.7%	404.0	232.9
NG	SN AVE				511.6	214.7
EST	BEST SN				337.0	73.0
LATEST BENCHMARKING	NAT AVE				558.0	226.0
BE	NAT TOP QTILE				501.1	183.6







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^{*}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

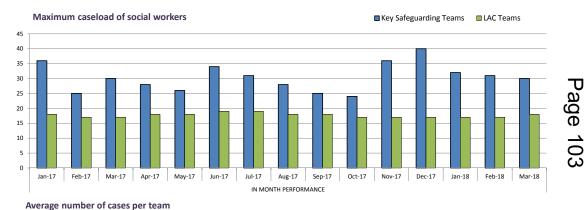
Caseload figures relate to the number of children the social worker is currently the lead key worker. Fieldwork teams relate to frontline social care services including the four Duty Teams, none Long Term CIN Teams, two LAC teams and the CSE Team. All averages are calculated on a full time equivalency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

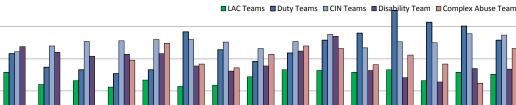
Taking into account the reduced caseloads allocated to 'Assessed and Supported Year in Employment' (ASYE) social workers and 'Advanced Care Planning' (ACPs) the actual average caseload for the LAC Teams 1-3 is more accurately presented as 15. In addition one social worker has a low caseload as he is in the process of leaving the employ of RMBC. 2 social workers are off long-term sick with their cases being managed by the rest of the service and one ACP is temporarily acting up into the management role so actual caseloads will be even higher than this. Similarly the average caseload within LAC 4-5 is also increasing as at the 9th April the average had increased to 13.5 which is on the high side of a team that manages the legal process and this will need careful monitoring over the coming months.

However, at present the 'maximum and average caseload' across the key safeguarding teams still continues to be consistent and remains within acceptable limits. The recent trend in increasing LAC numbers does impact on social worker capacity by more than just an increased caseload. Due to market saturation local placements are increasingly hard to secure and as a result social workers spend more of their working time driving to and from placement visits. A further audit of social work capacity being spent transporting to and supervising contact and travelling to and from out of authority placements is being undertaken week commencing 9th April which will further evidence the pressures being faced by the LAC Service above and beyond caseload numbers.

42 Social Workers now have caseloads over 20 children with which 12 have caseloads over 25 children. Current projections from the duty transfer list would indicate that the current caseload levels are unlikely to ease and may in fact increase further 42 Social Workers now have caseloads over 20 children with which 12 have caseloads over 25 children. The corresponding pressure in locality appears to correlate with duty pressures post Ofsted. A number of these Social Workers have a number of additional demands placed upon them such as contact. The increase in caseloads and other additional demands is also having an impact on work identified to close/step down, as Social Worker's are using time available to work active cases. There is a programme of activity led by Team Managers in terms of 'lock down days' to try and address this barrier. Issues with LAC capacity and the impact on transfers and criteria for transfer also does impact on available capacity within Locality Teams. The current caseloads in locality do not accord with the Rotherham Pledge and is impacting on morale and retention. Experience staff are progressing in line with their career development and although positive in one sense, the concern is the skills mix across the teams is variable. Operationalising signs of sfaety is time consuming especially due to the lack of confidence of practitioners embedding this model.

		11.1	11.1b	11.2	11.3	11	.4	11.5	11.6	11.7	11.8
		Number of agency staff in social care	Number of agency SW with a caseload	Maximum caseload of social workers in key Safeguarding Teams	Maximum caseload of social workers in LAC Teams	Av. no. cas Tea Teams 1-3		Av. no. cases in Duty Teams	Av. no. cases in Locality Teams (CiN)	Av. no. cases in Children's Disability Team	Av. no. cases in Complex Abuse Team (Duty 6)
	Jan-17			36	18	12	9	15.8	16.1	16.9	
	Feb-17			25	17	11	.0	13.7	17.0	16.0	
	Mar-17			30	17	11.6		13.3	17.7	15.4	
	Apr-17	78		28	18	10.6		12.7	17.8	15.7	14.8
CE	May-17	72		26	18	11.7		13.3	18.0	15.8	17.4
MAN	Jun-17	71		34	19	10.7		19.2	18.0	13.9	14.2
IN MONTH PERFORMANCE	Jul-17	61		31	19	10.9		16.4	17.6	13.1	13.6
ERF	Aug-17	62		28	18	12.2	9.7	14.6	16.6	13.9	15.7
H	Sep-17	64		25	18	13.3	10.9	15.9	17.7	16.2	17.0
MON	Oct-17	75		24	17	13.2	11.4	17.9	18.8	18.5	16.6
Ξ	Nov-17	72		36	17	12.9	11.5	19.0	16.7	13.2	14.1
	Dec-17	70	33	40	17	13.3	11.0	22.5	17.7	12.1	15.6
	Jan-18	68	33	32	17	11.6	9.7	20.7	17.5	11.4	14.2
	Feb-18	73	29	31	17	12.9	10.7	20.1	18.9	13.5	11.2
	Mar-18	71	27	30	18	12.6	11.8	17.9	18.7	13.4	16.6
YTD	2017/18										
무	2014/15										
ANNUAL	2015/16			29.1	19.2	14	.1	15.8	18.0	19.1	
4 -	2016/17	77	-	30.0	17.0	11.6		13.3	17.7	15.4	







Monthly Performance - March 2018 - D2 27 of 27

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Public/Private Report Council/or Other Formal Meeting

Summary Sheet

Committee Name and Date of Committee Meeting

Improving Lives – 17th July 2018

Report Title

Children and Social Work Act 2017 – Implications for Practice

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

Strategic Director Approving Submission of the ReportMel Meggs

Report Author(s)

Ian Walker - Head of Service

Ward(s) Affected

ΑII

Summary

The Children and Social Work Act 2017 is intended to improve the support for looked after children (LAC), previously looked after children and care leavers, promote the welfare and safeguarding of children and make revised provisions about the regulation of social workers.

This report will focus solely on the implications for looked after children, previously looked after children and care leavers.

This report outlines the main legislative changes in the Children and Social Work Act 2017 and how the Council aims to implement those changes locally to ensure that our care leavers have the brightest future.

For the full text of the Act, please refer to: www.legislation.gov.uk/ukpga/2017/16/ contents/enacted

Recommendations

Improving Lives Select Commission is recommended to note the changes in practice that the Act will require along with the specific implications there will be for Rotherham CYPS.

List of Appendices Included

None

Background Papers

None

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Consideration by any other Council Committee, Scrutiny or Advisory Panel None

Council Approval Required No

Exempt from the Press and PublicNo

Children and Social Work Act 2017 - Implications for Practice

1. Recommendations

1.1 Improving Lives Select Commission is recommended to note the changes in practice that the Act will require along with the specific implications there will be for Rotherham CYPS.

2. Background

- 2.1 The Act sets out corporate parenting principles for the Council as a whole to be the best parent it can be for the children in its care. These are largely a collation of existing duties local authorities have towards looked after children and those leaving care. Local authorities will be required to publish their support offer to care leavers and to promote the educational attainment of children who have been adopted or placed in other long-term arrangements. The legislation extends the current considerations of the court when making decisions about the long-term placement of children to include an assessment of current and future needs and of any relationship with the prospective adopter.
- 2.2 As corporate parents, it is every Councillor's responsibility to make sure that the Council is meeting these duties towards children in care and care leavers. Children can be in care in a range of different settings, with the authority acting as corporate parent to all of them. This includes foster care, children's homes, secure children's homes and kinship care.
- 2.3 Every Councillor and officer within a Council has a responsibility to act for those children and young people as a parent would for their own child. Lead members, those on corporate parenting panels, and overview and scrutiny committees will have particular responsibilities.

There are 64 sections in the Act. The first 10 have direct relevance to LAC and Care Leavers.

The following provisions of the Act came into force on 1st April 2018 -

- (a) section 1 (corporate parenting principles); (b) section 2 (local offer for care leavers); and
- (c) section 3 (advice and support).

3. Key Issues

- 3.1 Section 1 introduces the 7 principles of Corporate Parenting which local authorities must give due regard to for both LAC and Care Leavers whether or not they were the local authority who looked after the child. These principles are:-
 - To act in the best interests of, and to promote the health and wellbeing of relevant children and young people.
 - The need to encourage relevant children and young people to express their views, wishes and feelings.
 - The need to take account of a relevant child or young person's views, wishes and feelings.

- The need to help relevant children and young people to gain access to and get the best use of the services provided by the local authority and its partners.
- The need to promote high aspirations amongst relevant children and young people and the need to secure the best outcomes.
- The need for relevant children and young people to be safe and for stability in their home lives, relationships and education or work.
- The need to prepare relevant children and young people for adulthood and independent living.
- 3.1.1 The implication for Rotherham CYPS is that the Corporate Parenting Panel will need to review and formally adopt these principles and then benchmark current practice against them. The Panel may then need to agree and implement an Action Plan in order to ensure that any shortfalls are reviewed and addressed. This will be a focus of attention in the forthcoming Corporate Parenting Panel meetings.
- 3.2 Section 2 requires local authorities to publish information about the services it offers to care leavers which may assist them in preparing for adulthood and independent living. These services may include health and wellbeing, education and training, employment, accommodation, and participation in society. It is distinct from the special educational needs and disability (SEND) local offer stipulated by the Children and Families Act 2014.
 - 3.2.1 Rotherham has had a formal offer to its care leavers that was approved by the Corporate Parenting Panel in February 2017. This Guide to Financial Support for Young People Leaving Care in Rotherham includes formal committments in respect of the financial assistance available for eligible and relevant and former relevant young people, provision of accommodation, support for young people to access further education, employment or training opportunities including apprenticeships and support in special circumstances including for care leavers who were unaccompanied minors and support with Criminal Injuries claims.
 - 3.2.2 However, one year after its launch this Guide would benefit from a review as the focus on the health and wellbeing of care leavers and their participation in society is not as well developed as it could have been. In addition, the Leaving Care team has instigated further developments over the course of the past 12 months including a formal offer for care leavers who are pregnant or young parents. This aspect of the offer would usefully be incorporated into the full Guide to better meet the expectation laid out in the Act.
- 3.3 Section 3 requires local authorities to appoint a personal adviser for care leavers who request one up until the age of 25, regardless of whether the young person intends to pursue education or training. The local authority also has a duty to carry out an assessment of the young person's needs and to provide the necessary advice and support. This duty is initiated as from April 1st 2018.

- 3.3.1 In respect of the impact for practice in Rotherham it is envisaged that care leavers' needs will vary considerably. Some of them will, from time to time, require only limited support to resolve a relatively straightforward query or to be signposted to another specialist service such as careers guidance. Other young adults will require more intensive support for a limited period of time when they are facing particular challenges, such as losing their job or receiving a benefit sanction or facing eviction, but then require only limited support once they are back on track. There will be a small number who have complex needs and will need intensive ongoing support but it will be very difficult to predict both how many young people will request support after the age of 21, or what type and level of support they will need. However, a scoping exercise undertaken with Trafford local authority, which had been offering support to all its care leavers to age 25 for a number of years, suggested that around 15% of care leavers were actively receiving support in any given week, and that on average this equated to each young person receiving about 2 hours' Personal Adviser time per week. In Rotherham this would equate to approximately one f.t.e Personal Adviser role. The Leaving Care Team has recently had approval to increase the number of Personal Advisers and it is therefore anticipated that this additional function will be assimilated within existing staff resources.
- 3.4 Section 4 places a duty on local authorities to make advice and information available to parents, designated teachers in maintained schools, and academies to promote the educational achievement of previously looked after children. A local authority must appoint an officer employed by them or another authority to discharge the duty to provide advice and information.
 - 3.4.1 Local authorities have a duty under section 23ZZA of the Children Act 1989 (inserted by section 4 of the Children and Social Work Act 2017) to promote the educational achievement of previously looked-after children in their area by providing information and advice to:
 - any person that has parental responsibility for the child;
 - providers of funded early years education, designated teachers for previously looked-after children in maintained schools and academies, and
 - any other person the authority considers appropriate for promoting the educational achievement of relevant children.
- 3.5 Section 5 places a duty on the governing body of a maintained school to designate a member of school staff to have responsibility for promoting the educational achievement of previously looked after children, including those who are now the subject of an adoption, special guardianship or child arrangements order.
 - 3.5.1 Although the responsibility of schools and the LA for supporting previously looked after children does not commence until September 2018 meetings have already held between the Virtual School, the Head of LAC Service, the Therapeutic Team manager, the post adoption team, the post SGO social worker and the post adoption therapeutic intervention worker, to consider how we could work in collaboration in

discharging the new statutory responsibilities of the Virtual School. The initial phase of this work was to attempt to scope the potential numbers of children involved and it has been calculated that there are approximately 200 active post adoption cases and 150 active post SGO cases. However, many of these cases only involve sporadic support or signposting and in fact there are approximately 'only' 20 acute post adoption cases and 15 acute post SGO cases currently receiving more intensive support.

- 3.5.2 At this meeting it was agreed that:-
- The Virtual School will modify the training it already provides to carers, schools, governors, social workers and so on to incorporate the new responsibilities to provide support for post LAC.
- Duty and Assessment and MASH will require guidance and training to ensure that enquiries are directed appropriately.
- Systems and processes need to be established to signpost, provide advice and guidance to all relevant parties.
- The Virtual School will provide consultancy to the post LAC team who will act as gatekeepers, given that demand will always exceed supply.
- The Virtual School will aim to attend the post adoption support group on a regular basis.
- There will need to be significant amounts of awareness raising to ensure that head-teachers and school governors engage fully with the new legal duties.
- This may include actively encouraging school capacity building measures such as developing Emotional Literacy Support Assistants.
- That we consider providing highly accessible leaflets/ communications to parents, carers and teachers in the area of understanding and responding to challenging behaviour.
- That further liaison is held with the Early Help Service to clarify what part they could contribute in fulfilling this new duty.
- 3.6 Section 6 imposes a provision on all existing and new academy agreements requiring the proprietor of an academy to designate a member of staff to have responsibility for promoting the educational achievement of relevant children and young people. The proprietor must ensure that person undertakes training and has regard to guidance issued by the Secretary of State.
 - 3.6.1 Within Rotherham the Virtual School will ensure that all Academies in the RMBC are made aware of this new legal requirement.
- 3.7 Section 7 amends the Children and Young Persons Act 2008 to require the governing body of a maintained school to ensure that the designated teacher for looked after pupils has regard to any guidance from the Secretary of State. Previously, only the governing body was required to do so.
 - 3.7.1 Once again within Rotherham the Virtual School will ensure that maintained schools are made aware of this new legal requirement.
- 3.8 Section 8 extends the definition of the permanence provisions in the Children Act 1989 so that it includes kinship care, adoption, and other types of longterm care. The courts will now be required to consider the impact on the child

concerned of any harm they have or are likely to have suffered; their current and future needs, and the way in which the long term plan for the child's upbringing would meet those current and future needs. Social workers will have to give full consideration to these issues in the child's Care Plan and as a result they may require some additional guidance from the Public Law Outline Care Manager to ensure they abide by this additional expectation.

- 3.9 Section 9 amends the Adoption and Children Act 2002 and requires courts and adoption agencies to consider the child's relationship with their prospective adopters in decisions relating to the adoption if the child has been placed with those prospective adopters.
- 3.10 Section 10 amends legislation to allow local authorities in England and Wales to place children in secure accommodation in Scotland.
- 3.11 As it can be seen the most significant impact arising from the Children and Social Work Act 2017 will be the new expectation of an assessment of need and provision of support for care leavers up to the age of 25 and the requirement to promote the educational outcomes for children previously looked after and now subject of an Adoption Order, Special Guardianship Order or Child Arrangement Order. Rotherham CYPS has already assessed the likely impact of these revised legal duties and anticipate that the new provision can be met within existing services.

4. Options considered and recommended proposal

4.1 Given that these new duties arise from legislative changes there are no suggested options to consider and Improving Lives Select Commission is recommended to endorse the proposals contained in this report.

5. Consultation

5.1 There has already been some consultation with partners who will be required to support some of the new requirements but further awareness raising will need to be undertaken with maintained schools and academies within Rotherham.

6. Timetable and Accountability for Implementing this Decision

6.1 All the requirements of the Act will need to be in place by September 2018. Head of Service, Children in Care and Peter McNamara, Virtual School Headteacher (interim) will be responsible for overseeing the implementation of the revised legislation.

7. Financial and Procurement Implications

7.1 The first major potential implication is the financial burden on local authorities, as the requirement to provide advice and support, a personal advisor and a pathway plan extends to young persons up to 25 who are not in education or training. The legislation also affects children who are present in the UK but have no recourse to public funds. Whilst it is envisaged children that fall within this provision will be caught by section 54 and Schedule 3 to the Nationality, Immigration and Asylum Act 2002 (NIA 2002) (which provides a list of services the local authority is permitted to exclude for certain groups of

migrants such as who are unlawfully in the UK), it does not include the wider band of persons, who have an embargo on access to public funds, but have valid claims for leave to remain and who therefore are not caught by Schedule 3 to the NIA 2002. In order to mitigate the additional costs incurred by extending the role of the Personal Adviser to 25 the DfE has recently published the Extended Personal Adviser Duty Grant Determination 2018-19. As a result of this Rotherham will receive an additional £12,901 which will clearly not meet the anticipated additional costs this legislation will bring. Unfortunately the funding formula was based on the number of Care Leavers as at March 2017 since when the number of LAC and care leavers has significantly increased.

8. Legal Implications

The Children and Social Work Act 2017 received Royal Assent on 27th April 2017.

8.1 Corporate Parenting Principles

Section 1 of the CSWA 2017 Act introduces corporate parenting principles which comprises of seven needs that local authorities must have regard to whenever they exercise a function in relation to looked after children and care leavers. These principles will apply to the every part of the local authority and not just to children's services in how it carries out its functions to ensure that there is more joined up approach in relation looked after children and care leavers. These are largely a collation of existing duties local authorities have towards looked after children and those leaving care.

8.2 Council tax exemption

As stated above, S1 of the CSWA 2017 states that every part of the local authority will need to consider the extent to which the corporate parenting principles are relevant to their particular service area and all service areas can have a role in supporting care leavers.

The Council has power as a billing authority under S13A (1) (c) of the Local Government Act 1992 to reduce to nil to reduce the amount of council tax payable by young people leaving in care. The power to reduce council tax to nil is limited to those young people living in care in the borough. However, financial support can be offered to meet the cost of council tax that may be payable by RMBC's leavers who live outside the borough. Rotherham has already implemented this exemption to its care leavers in full

8.3 Apprenticeships

The funding for apprenticeship training is no longer restricted to younger age groups, although some additional funds are available for younger groups and 19-24 year old care leavers. Generally the Council will need to advertise apprenticeship opportunities to every age group within of the community to avoid giving the impression that apprenticeships are just for young people even if in practice the majority of those applying for and being offered them are young; otherwise the Council may be vulnerable to claims of age discrimination.

The Council's Local offer can include employment services and support that is specifically available to care leavers. In the context of age discrimination in having a quota of apprenticeship places for care leavers, it is lawful for the Council to make such an offer to care leavers provided that the Council is able to demonstrate that there is justification for this offer, which promotes fairness and accords with a social policy aim to secure best outcomes for care leavers

8.4 **Public Sector Equality Duty**

Under Section 149 the Equality Act 2010, the Council has a duty to have due regard to the need to: eliminate unlawful discrimination, harassment and victimisation and any other conduct prohibited by the Act; advance equality of opportunity between people who share a protected characteristic and people who do not share it; and foster good relations between people who share a protected characteristic and people who do not share it. The protected characteristics covered by the Equality Duty are as follows:

 Age, disability, gender reassignment, marriage and civil partnership (but only in respect of eliminating unlawful discrimination), pregnancy and maternity, race (including ethnic or national origins, colour or nationality), religion or belief (including lack of belief), sex and sexual orientation.

The public sector equality duty requires the Council, when exercising its functions, to have "due regard" to the need to eliminate discrimination, harassment and victimisation and other conduct prohibited under the Act, and to advance equality of opportunity and foster good relations between those who have a "protected characteristic" and those who do not share that protected characteristic.

8.5 The Court of Appeal in *SO v* London Borough of Barking & Dagenham [2010] EWCA Civ 1101 decided that section 23C(4)(c) of the CA 1989 encompassed the provision of accommodation. Therefore, many of these young people with no recourse to public funds are provided with accommodation under section 23C(4)(c) by the LA. Section 23C(4) of the CA 1989 continues to apply to young people up to the age of 21 and the CWSA 2017 does not repeal or change those provisions. However the CSWA 2017 now extends the application of section 23C(4) to young people between the ages of 21 and 25. It is no coincidence that following the debates in the House of Lords, the wording of the new section 23CZB(5) is more explicit, in that section 2(2) of the CSWA 2017 is clear that services that may assist care leavers, includes services relating to accommodation. It is clear that accommodation is a service a LA can consider providing, if it considers the young person requires it.

In the same way that the "well-being principle" is at the heart of the Care Act 2014, the "corporate parenting principles" is the heart of the CSWA 2017. Although the principles do not add anything new to local authorities' duties, it does bring the young person back into focus and attempts to bring the corporate parent in line with a biological parent. In practical terms, nothing much should change and this principle in itself does not herald a massive change in practice. In theory, local authorities should have been working with these principles in mind in any case. However, some local authorities whose

focus may have shifted in recent years may need to revisit their policies and procedures to ensure compliance with the corporate parenting principles. The discussions in the House of Lords noted that local authorities, being one of the biggest employers, should do more to secure employment for those children it "parents". This appears to make sense and it is recognised that some local authorities do more than others to create opportunities for their care leavers.

The CSWA 2017 also has the effect of imposing a further responsibility on local authorities in relation to children who are being educated within the local authority area and who may have been looked after by another local authority.

9. Human Resources Implications

- 9.1 There are already some reviews of staffing and structures being undertaken to ensure that CYPS have the relevant staff and skills to meet the requirements of the Act. Further support for training and development needs may also be required.
- 9.2 As per the legal implications, the Council will be expected to do more to secure employment for children it parents which may involve additional work for the HR Department.

10. Implications for Children and Young People and Vulnerable Adults

10.1 The offer of additional educational support being made available postpermanence will be likely only to improve their educational outcomes. The extended offer to care leavers to the age of 25 will also assist in providing more support to those vulnerable adults who otherwise would be at greater risk of being NEET or living in insecure accommodation.

11 Equalities and Human Rights Implications

11.1 The Council's corporate parenting duty extends to all care leavers to whom the local authority owes a duty, regardless of their current area of residence. On that basis the support offered should be broadly similar, irrespective of where a young person resides.

12. Implications for Partners and Other Directorates

12.1 Given the strengthening of the Corporate Parenting responsibilities, especially in respect of the apprenticeship offer, there will clearly be implications for other directorates although through the Corporate Parenting Panel agenda this is already being progressed. Given the extension of responsibility for care leavers to the age of 25 there will clearly need to be closer partnership working with Adults Services.

13. Risks and Mitigation

13.1 Looked After Children and care leavers are a vulnerable group that are at risk of a number of factors – poor education and training, health, safeguarding and transition into adulthood.

14.

Accountable Officer(s)
Ian Walker – Head of Service, Children in Care
Peter McNamara – Virtual School Headteacher (Interim)

Agenda Item 11



Public Report Improving Lives Select Commission

Improving Lives Select Commission – 17 July 2018

Title: Improving Lives Select Commission work programme and prioritisation

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

No

Strategic Director Approving Submission of the Report

Assistant Chief Executive

Report Author(s)

Caroline Webb, Senior Adviser (Scrutiny and Member Development) (01709) 822765 caroline.webb@rotherham.gov.uk

Ward(s) Affected

ΑII

Summary

This paper provides Members with an outline work programme for 2018/19.

Recommendations:

- 1. That consideration be given to the prioritised items within the Improving Lives Select Commission's work programme 2018/19 as attached in Para 2.1;
- 2. That further consideration is given to the items listed in Para 2.2 and determines which of those items should be priorities for the work programme.
- 3. That updates are provided to each meeting of Improving Lives on the progress of the work programme and for further prioritisation as required.

List of Appendices Included

None

Background Papers

Nil

Consideration by any other Council Committee, Scrutiny or Advisory Panel

N/A

Council Approval Required

No

Exempt from the Press and Public

No

Report title: Improving Lives Select Commission work programme and prioritisation

1 Recommendations

- 1.1 That consideration be given to the prioritised items within the Improving Lives Select Commission's work programme 2018/19 as attached in Para 2.1
- 1.2 That further consideration is given to the items listed in Para 2.2 and determines which of those items should be priorities for the work programme.
- 1.3 That updates are provided to each meeting of Improving Lives on the progress of the work programme and for further prioritisation as required.

2 Background

2.1 Members of the Improving Lives Select Committee held an informal work planning session on June 5, 2018 to consider what items to include in the commission's work programme for the 2018/19 municipal year. In doing so, Members gave consideration to the following items which have been prioritised or referred from the previous year's work programme which has been provisionally scheduled as follows:

Meeting Date	Agenda Item	
5 June 2018	 Evaluation Report: Barnardo's Reach Out Service CSE Post Abuse Services Update CYPS Edge of Care Provision 	
17 July 2018	 Domestic Abuse Update Children and Social Work Act 2017 Children & Young People's Services (CYPS) 2017/2018 Year End Performance Report 	
18 September 2018	 Children Missing from Education/Home/Care SEND sufficiency 	
30 October 2018	 Rotherham Local Safeguarding Children Board - Annual Report 2017-18 Rotherham Adult Safeguarding Board 2017-18 Annual Report (TBC) 	
4 December 2018	 CYPS Transformation and innovation projects (update) Education Performance Outturn (un-validated data) (TBC) 	
15 January 2019	 Voice of the Child Lifestyle Survey CSE Post abuse and Barnardos Reachout (TBC) – (requested from 5 June, 2018) 	
5 March 2019	Agenda to be determined	

16 April 2019	Agenda to be determined

2.2 Items to schedule

There are a number of items identified by Members for further scheduling and prioritisation. These are listed below. Members' views are sought on which items should be prioritised for inclusion in the work programme.

OFSTED recommendations – progress	Referral from previous work programme
LAC sufficiency strategy and related budgetary issues	Referral from previous work programme
Prevent	Request from Members
Rotherham 'family approach'	Suggestion from Link Officer
Demand management across children's services	Referral from previous work programme
Early Help (pre-decision scrutiny)	Request from Members
Inclusive education	Request from Members
'Prevent'	Referral from previous work programme
Complaints	Referred by OSMB
Child poverty and the impact of the roll out of universal credit	Suggested item
Child-friendly Rotherham	Referral from previous work programme

2.3 Performance monitoring

Members should note that a dedicated sub-group has been set up to consider performance monitoring information which is to be chaired by Cllr Amy Brookes. This will meet on a quarterly basis and performance matters arising from the sub-group will feed into the work programme for further consideration and review.

3 Key Issues

3.1 Improving Lives Select Commission previously agreed the use of the '**PAPERS**' tools as a framework for prioritising its scrutiny work programme. This is as follows:

<u>Public Interest:</u> the concerns of local people should influence the issues chosen for scrutiny;

<u>Ability</u> to change: priority should be given to issues that the Committee can realistically influence;

<u>Performance</u>: priority should be given to the areas in which the Council and other agencies are not performing well;

Extent: priority should be given to issues that are relevant to all or large parts of the district;

<u>Replication</u>: work programmes must take account of what else is happening in the areas being considered to avoid duplication or wasted effort:

<u>Statutory responsibility</u>: where an issue is part of a statutory duty to scrutinise or hold to account (or the area under scrutiny is a statutory, high profile responsibility)

- 3.2 On the basis of this framework, this report requests that the Commission endorses the items listed in Para 2.1 for inclusion in the work programme and gives further consideration to the items list in Para 2.2. Once this has been done, work can commence to plan what review work may be undertaken and what papers will be brought to future meetings in accordance with the work programme.
- 3.3 The Commission should be mindful of the timeliness of the matters within its work programme and ensure that it leaves sufficient flexibility within its work programme to undertake any pre-decision scrutiny arising from matters in the Forward Plan of Key Decisions or any items referred to it directly from either the Cabinet or OSMB.

4 Options considered and recommended proposal

4.1 Members of the Improving Lives Select Commission have commenced the process of planning a work programme and this paper is submitted to assist the process of finalisation.

5 Consultation

5.1 In developing its work programme, the Commission should have regard to input from the Cabinet, Senior Leadership Team, partners, service users and the public who may identify issues which may be relevant to its remit.

6 Timetable and Accountability for Implementing this Decision

6.1 The Commission is responsible for the preparation and delivery of its own work programme, with support provided by the Scrutiny Team and designated Link Officer from the council's Strategic Leadership Team.

7 Financial and Procurement Implications

7.1 There are no financial or procurement implications arising from this report.

8 Legal Implications

8.1 There are no legal implications arising from this report.

9 Human Resources Implications

9.1 Members should have regards to the human resources required to undertake the activities within a work programme. In doing so, Members should be mindful of their own commitments as well as the available officer resource to support any activity across the authority.

10 Implications for Children and Young People and Vulnerable Adults

10.1 Good scrutiny is an essential part of providing critical checks and balances to the performance and quality of all aspects of safeguarding. It provides a mechanism to hold the executives and partners to account.

11 Equalities and Human Rights Implications

11.1 In developing a work programme, the Commission should be mindful of the equalities implications of the issues prioritised for scrutiny.

12 Implications for Partners and Other Directorates

12.1 Overview and scrutiny activity will have implications for partners and other directorates. The Commission has been allocated a link officer to with Members to identify possible implications in the planning of its work programme.

13 Risks and Mitigation

13.1 There are no risks directly arising from this report.

14 Accountable Officer(s)

James McLaughlin, Democratic Services Manager and Statutory Scrutiny Manager

Approvals Obtained from:-

Strategic Director of Finance and Corporate Services:- N/A

Assistant Director of Legal Services:- N/A

Head of Procurement (if appropriate):- N/A

Caroline Webb Senior Adviser (Scrutiny and Member Development) 01709 822765 caroline.webb@rotherham.gov.uk.

This report is published on the Council's website or can be found at:-

http://moderngov.rotherham.gov.uk/ieDocHome.aspx?Categories=

Overview and Scrutiny Management Board

1.	Date of meeting:	16 May 2018
2.	Title:	Spotlight review following the Ofsted Inspection of Adult Community Learning
3.	Directorate/Agency:	Assistant Chief Executive's Children and Young People's Services

4 Background

4.1 This paper outlines the outcomes of the spotlight review following the Ofsted Inspection of Adult Community Learning (ACL) by members of Improving Lives Select Commission.

5 Context

5.1 In June 2017, an Ofsted inspection of RMBC Adult and Community Learning provision delivered a judgement "that the quality of teaching, learning and assessment is now inadequate and the proportion of learners who stay to the end of their course and achieve a qualification is low". Delivery of this service has since been transferred from the local authority to Rotherham and North Notts College (RNN).

Of the approximate 1400 learners registered for the 2016/17 academic year, the majority were enrolled on non-accredited courses, which included family learning, with approximately 25% enrolled on courses leading to qualifications, including functional skills or English for speakers of other language. The ACL Ofsted reported concerns about the monitoring of progress and assessment; poor standard of teaching provision and inadequate support and guidance.

- 5.2 It was agreed that a small cross-party working group would be established to examine what actions had been taken to address the issues raised by the Ofsted inspection. In undertaking the review, Members wanted to seek assurance:
 - That there was a clear understanding of the issues leading to the inadequate judgement in June 2017;
 - That the issues raised in the 2017 Ofsted inspection of Adult and Community Learning have been addressed; and
 - That there are clear plans in place to ensure that adult learners have pathways to secure employment or skills training.
- 5.3 The following Members undertook the spotlight review on Tuesday 6th March 2018:
 - Cllr Chris Beaumont;
 - Cllr Maggi Clark (Chair);
 - Cllr Victoria Cusworth.

Cllr Peter Short also contributed to the planning meeting which determined key lines of enquiry for the spotlight review.

5.4 The conclusions and recommendations made by Members are based on information gathered during the course of the review and examination of related documentation.

This documentation included:

 Ofsted: Further education and skills inspection report – Rotherham Borough Council (20 -23 June 2017, published 28 July 2017)

- RMBC Corporate Plans 2016 -17 Quarter 1 4 Performance Reports
- RMBC Council Plan 2017/18 Quarter 1 2 Performance Reports
- RMBC Annual Governance Statement 2016/17
- 5.5 The review group thanks the following Cabinet Member for Children and Young People's Services and officers for their co-operation with this inquiry.
 - Cllr Gordon Watson, Deputy Leader (Lead Member Children and Young People Services)
 - Ian Thomas, Strategic Director for Children and Young People Services (CYPS)¹
 - Dean Fenton, Head of Service School Planning, Admissions & Appeals, CYPS
 - Aileen Chambers, Head of Service Early Years and Childcare, CYPS

6 Key Issues

6.1 The Ofsted report flagged areas of concern arising from the previous inspection which had not been addressed in a timely manner. It further identified that quality improvement plans had not been enacted quickly enough and Elected Members had not received clear information about performance. Members sought explanation as to the circumstances behind these issues. Whilst acknowledging that ACL is a small part of CYPS provision overall, in light of previous Council governance failings outlined in the Casey Report², Scrutiny Members wanted to be assured that wider issues around oversight and governance had been addressed.

6.2 Events leading to the inadequate judgement in June 2017:

- 6.2.1 As context, the Strategic Director reminded Scrutiny Members that from September 2014 onward CYPS had been focussed on addressing the serious and widespread failures identified in the Jay Report and the Ofsted Inspections³. Prioritisation was therefore given to addressing the shortcomings in safeguarding within children's social care and tackling Child Sexual Exploitation, with resources dedicated accordingly. It was acknowledged that assurance from the ACL service about performance had been accepted at 'face value', which in retrospect, did not correlate with supporting data. It was noted that the Ofsted judgement did not raise any safeguarding concerns for the ACL service.
- 6.2.2 The Strategic Director explained that the delivery of ACL is a non-statutory duty and the local authority has no requirement to provide adult learning courses directly. The provision was comparatively small, with a small in-house team delivering some elements of adult and community learning with the remainder commissioned to be delivered by voluntary and community agencies.
- 6.2.3 Although under the previous inspection framework, the service had received an Ofsted judgement of "Good" in 2014, concerns had been expressed by senior managers at that time that performance was inconsistent. A notice of concern was issued in 2015 by the Skills Funding Agency (now the Education and Skills Funding Agency) for the ACL service's failure to meet the minimum performance thresholds. As a result of this, significant additional management support was given to the service to increase capacity which resulted in the notice of concern being lifted again in February 2016. However, despite these actions, there were continuing concerns that the improvements were not

¹ Ian Thomas left the Authority in April 2018 to take up a new position.

² Louise Casey CB: Report of Inspection of Rotherham Metropolitan Borough Council (February 2015)

³ Ofsted Inspection of services for children in need of help and protection, children looked after and care leavers and Review of the effectiveness of the Local Safeguarding Children Board (September 2014)

- embedding at pace with a further notice of concern issued in spring 2017 which triggered the re-inspection.
- 6.2.4 Due to additional management intervention, the extent of the issues became apparent in early 2017 (prior to the re-inspection in June 2017). Accelerated action was then taken to address the serious shortcomings that had arisen regarding data analysis; poor supervision of teaching quality; and lack of performance monitoring and risk management. The actions to address poor performance were acknowledged in the Ofsted ACL report however, it was reported that there was not sufficient time for these to embed for Ofsted to evaluate the impact of the interventions.
- 6.2.5 It was reported to the Scrutiny Members that following management intervention, significant improvements had been made which became evident later in the year (post-inspection). It was noted that the required achievement rate for accredited courses levels had been reached by the end of July 2017 and had been well above the threshold on which the Notice of Concern was issued.

6.2.6 Conclusions

- Scrutiny Members appreciate the candour of the Deputy Leader and officers in their explanation of the circumstances that led to the inadequate judgement.
- From the evidence, it is clear that following the 2014 ACL Ofsted judgement of "Good", a false assurance was given of service quality. This allowed performance and data concerns which had been highlighted prior to 2014 to remain unresolved which in turn led to poor outcomes for many learners. Despite additional management support to address these issues, performance remained inconsistent.
- Scrutiny Members are assured that robust action was taken to address the decline in service quality and resources were allocated accordingly. This accelerated from March 2017 with increased oversight from the Deputy Leader and it is evident that improvements were made to the service, albeit too late to embed sufficiently in time for the ACL Ofsted inspection.

6.3 How wider issues raised in the 2017 Ofsted inspection of Adult and Community Learning were addressed:

- 6.3.1 The ACL inspection report highlighted that "until recently, managers have not given elected members clear information about performance.....This means that council members have been unable to challenge managers or hold them to account for the decline in standards" (Ofsted, 2017, p5). It was clarified that a Performance Board had been established in March 2017, chaired by Cllr Watson as Lead Member, which provided rigorous challenge to managers for service delivery. From the time line presented to Scrutiny Members, it would appear that the reports to the Performance Board commenced some two years after the first Notice of Concern was issued in March 2015.
- 6.3.2 Although it is accepted that the Deputy Leader was informed latterly of the serious decline in performance, neither this decline or the inadequate judgement were referred explicitly to any of the Council's Overview and Scrutiny Committees at the time.
- 6.3.3 The ACL Ofsted inspection report stated that "Leaders and Managers have not rectified areas for improvement identified at the previous inspection". The Scrutiny Members sought guarantees that this was an anomaly and there were rigorous processes in place to address areas of improvement identified in inspections and there was clarity about how these were recorded. Both the Deputy Leader and Strategic Director referred

Scrutiny Members to the recent Ofsted report⁴ which concluded that the local authority "has taken a systematic and rigorous approach to improvement... Leaders and senior managers have appropriately prioritised the improvement of key service areas... embedding a culture of performance and quality assurance". The Deputy Leader gave further assurance that these principles had been applied across the directorate and he had oversight of the inspection schedule and related performance issues across individual services.

- 6.3.4 The importance of adult learning as a gateway to further skills development or employment opportunities was recognised in the RMBC Corporate Plan 2016-17 and the successor RMBC Council Plan 2017-20, with specific outcomes linked to this activity⁵. Performance was reported on a quarterly basis with reports submitted to Cabinet and in some instances, Overview and Scrutiny Management Board.
 - The Scrutiny Members reviewed the reports to examine whether the decline in performance was flagged as a risk. It was noted that concerns were reported in the narrative in both the Quarter 3 and 4 Corporate Plan Performance Reports and Quarter 1 and 2 Council Plan Reports, however, it was felt that the performance decline was not signposted sufficiently in the cover reports or scorecards. This also meant that opportunities for wider corporate organisational learning arising from the decline in performance were not fully explored and applied.
- 6.3.5 It was also noted that the inadequate judgement was reported in the 2016/17 Revised Annual Governance Statement to the Audit Committee. However, this was not reported in the regular reports to the committee on recommendations from external audits and inspections. This appears to be a gap. It is also unclear if the decline in performance and attached risks relating to the reissuing of the Notice of Concern in spring 2017 were raised with the Audit Committee.

6.3.6 Conclusions

- Scrutiny Members are assured that the Deputy Leader had a full understanding of the performance issues from March 2017. However, given that concerns had been raised about inconsistent performance from 2013, it is surprising that this was not flagged earlier to the Cabinet Member or Scrutiny and/or Audit Committee as a risk.
- The Council rightly aspires to high standards of openness and transparency in the
 way in which it allows for adequate scrutiny by Councillors and responds to inspection
 outcomes and issues of performance. In addition to consideration by the Cabinet
 Member, public democratic oversight of inspection outcomes, performance concerns
 or service failure should also include timely referral to the relevant scrutiny body
 and/or the Audit Committee.
- It is accepted that the decline in performance was detailed in the narrative of both the Corporate Plan and Council Plan reports from February 2017 onward. However, in order for Members to hold officers to account on an informed basis, it is important that critical performance issues are also signposted more explicitly in cover reports and performance scorecards.
- The organisational learning arising from areas of concern should be reviewed and

⁴ Ofsted Re-inspection of services for children in need of help and protection, children looked after and care leavers (January 2018)

⁵ Outcome: 4C. Adults supported to access learning improving their chances of securing or retaining employment Improve participation, performance and outcomes of people aged 19+ accessing Council funded and RMBC delivered adult learning provision.

[•] Increase the number of people aged 19+ supported through a learning programme

Increase the number of learners progressing into further learning, employment and/or volunteering

reported on by the Corporate Performance, Intelligence and Improvement Team on a timely basis to provide assurance that improvements and learning are being applied.

6.4 What pathways are in place for adult learners to secure employment or skills training?

- 6.4.1 Provision for ACL has been transferred to Rotherham and North Notts College (RNN) from the start of the 2017/18 academic year and the Education and Skills Funding Agency confirmed that RNN will be allocated the funding previously awarded to the local authority. This ensured that whilst the provider had changed, the funding was maintained in Rotherham for local adults.
- 6.4.2 It was reported that as a large college provider, RNN could manage the delivery and quality assurance requirements that the Council had failed to deliver consistently in the past. It was felt that this would address the significant decline in the standards of teaching and learning and in learners' outcomes which were reported in the Ofsted judgement. The Deputy Leader and Strategic Director were confident in RNN as a strategic partner and its capacity to deliver a programme that would focus on engagement, first steps learning and targeting Rotherham's most vulnerable groups and communities. It was asserted that this would support the Council aim to deliver family learning, digital inclusion and community cohesion training and workshops. Some of this activity had been sub-contracted to the Creative Learning Centre within the Local Authority to deliver for the 2017/18 academic year.
- 6.4.3 It was reported that negotiations between the Business Growth Board, Health and Well Being Board and the newly evolving Local Integration Board would need to take place in order to influence the ongoing programme offered by RNN so it meets the needs of Rotherham's communities. In order to ensure that there is good governance of these arrangements, given there are potentially three reporting routes, it was felt that further clarification was required on how RNN's delivery of ACL links to the agreed Council priorities around the employment and skills agenda (as outlined in the Council Plan) and how these are reported to Members.
- 6.4.4 It was also reported that Government proposals for adult education delivery would lead to funding being devolved to combined authorities (including Sheffield City Region Combined Authority) to determine how this is to be allocated in local areas. The Department for Education has signalled that this will take place from 2019.

6.4.5 Conclusions

- Scrutiny Members are assured that the transfer of provision to RNN means that the
 delivery of ACL will be on a more sustainable footing, with proper oversight of
 teaching standards and advice and guidance. This will lead to better outcomes for
 adult learners and address the concerns raised in the ACL Ofsted report about
 teaching, learning and assessment.
- Although the transfer of provision is supported, there is a lack of clarity about how RNN will deliver a programme which links to Council priorities around the skills and employment agenda, (targeting Rotherham's most vulnerable groups and communities) and how this is reported to Members.
- Whilst it is accepted that the Council is no longer responsible for the delivery of this
 provision, it is important that the Council maximises its influence in this key area,
 particularly in light of the devolution of adult education delivery to the Sheffield City
 Region Combined Authority.

7 Recommendations

- 7.1 That areas of concern raised in external inspections or reviews are referred to the relevant scrutiny commission on a timely basis, alongside a plan detailing what action is proposed to address identified areas of improvement;
- 7.2 That the Corporate Performance, Intelligence and Improvement Team ensures that learning from the reporting of areas of concern and in particular the issues arising from this spotlight review, are applied to inform how performance management information is shared and acted upon;
- 7.3 That future performance reports and scorecards should signpost Members clearly to areas of declining performance and actions taken to address these;
- 7.4 That further details are provided to the Improving Places Select Commission to clarify how Council priorities linked to the skills agenda and community engagement will be delivered by RNN and how outcomes will be reported to Members;
- 7.5 That the Council's representatives on the Sheffield City Region Combined Authority Scrutiny Panel are asked to keep oversight of the devolution of adult education provision to ensure good outcomes for Rotherham learners.

8 Name and Contact Details

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