#### IMPROVING LIVES SELECT COMMISSION

Date and Time:- Tuesday 30 July 2024 at 10.00 a.m.

Venue:- Rotherham Town Hall, The Crofts, Moorgate Street,

Rotherham, S60 2TH.

Membership:- Councillors Pitchley (Chair), Knight (Vice-Chair),

Baggaley, Blackham, Bower, Brent, T. Collingham, Elliott, Fisher, Foster, N Harper, Hughes, Monk, Reynolds, Ryalls

and Sutton.

This meeting will be webcast live and will be available to view <u>via the Council's website</u>. The items which will be discussed are described on the agenda below and there are reports attached which give more details.

Rotherham Council advocates openness and transparency as part of its democratic processes. Anyone wishing to record (film or audio) the public parts of the meeting should inform the Chair or Governance Advisor of their intentions prior to the meeting.

#### **AGENDA**

## 1. Apologies for Absence

To receive the apologies of any Member who is unable to attend the meeting.

# 2. Minutes of the Previous Meeting (Pages 5 - 18)

To consider and approve the minutes of the previous meeting held on 18 June 2024 as a true and correct record of the proceedings and to be signed by the Chair.

#### 3. Declarations of Interest

To receive declarations of interest from Members in respect of items listed on the agenda.

#### 4. Exclusion of the Press and Public

To consider whether the press and public should be excluded from the meeting during consideration of any part of the agenda.

#### 5. Questions from Members of the Public and the Press

To receive questions relating to items of business on the agenda from members of the public or press who are present at the meeting.

# 6. Children's and Young Peoples Service Year End Performance Report (Pages 19 - 39)

This update will include the performance outturn for the reporting year April 2023 to March 2024 for Children and Young People's Services. It includes areas of performance that are working well, alongside other areas where a continued focus is required.

# 7. Local Government Association Leaving Care Peer Challenge Feedback Report (Pages 41 - 59)

Rotherham Metropolitan Borough Council's social care services for children and young people were judged to be "good" following an Inspecting Local Authority Children's Services (ILACS) inspection undertaken by Ofsted and published in 2022. The peer challenge was completed at the request of the council and focused on young people in care and care leavers aged 16 to 24. This update will provide information on the outcome of the peer review.

# 8. Work Programme

To receive an update on the Commission's Work Programme.

# 9. Improving Lives Select Commission - Sub and Project Group Updates (Pages 61 - 70)

For the Chair/Project Group Leads to provide an update on the activity regarding sub and project groups of the Improving Lives Select Commission.

This item will consider the Scrutiny Review Report on preparation for adulthood for children and young people with special educational needs and disabilities (SEND). The report is a result of the review completed by Members of the Improving Lives Select Commission in February 2024 and details the proposed recommendations agreed by Members of the review group.

# 10. Urgent Business

To consider any item(s) the Chair is of the opinion should be considered as a matter of urgency.

The next meeting of the Improving Lives Select Commission will be held on Tuesday 17 September 2024 commencing at 10.00 a.m. in Rotherham Town Hall.

Spa Komp.

SHARON KEMP OBE, Chief Executive.

# IMPROVING LIVES SELECT COMMISSION Tuesday 18 June 2024

Present:- Councillor Pitchley (in the Chair), Councillor Brent (Vice-Chair) Councillors Hughes, Monk, Baggaley, Knight, Brent, Sutton, T. Collingham and Bower.

Apologies for Absence:- Apologies were received from Councillors Foster, N Harper, Blackham and Fisher.

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

# 1. MINUTES OF THE PREVIOUS MEETING

**Resolved:** - That the Minutes of the meeting of the Improving Lives Select Commission, held on 5 March 2024, be approved as a correct record of proceedings.

#### 2. DECLARATIONS OF INTEREST

There were no declarations of interest.

## 3. EXCLUSION OF THE PRESS AND PUBLIC

There were no items of business on the agenda that required the exclusion of the press and public from the meeting.

#### 4. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no questions from members of the public or press.

## 5. COMMUNICATIONS

The Chair advised that all the items regarding communication were covered on the agenda.

# 6. INTRODUCTION TO PERFORMANCE OF CHILDREN'S AND YOUNG PEOPLE'S SERVICES

This agenda item provided a presentation on the introduction to Childrens and Young People's Services (CYPS) Performance. The Chair welcomed to the meeting Anne Hawke, Head of Service for Performance and Quality and invited Anne to lead on the presentation, during which the following was noted:

What is Performance Management:

 The Local Government Association definition for performance management was "for councils, performance management was about using data to inform action that would improve outcomes for people. The umbrella term 'performance management' included a range of processes, techniques, and methods to identify shared goals and various measurements of progress towards these. It was also closely related to the concept of governance and making sure arrangements were in place so that an authority's objectives can be achieved."

# CYPS Performance Management and Reporting:

- There was extremely robust performance and data reporting across CYPS.
- There was strong governance, which included the following:
  - Performance Scorecards
  - o Directorate Leadership Team
  - Monthly Performance Board
  - Quarterly Assurance Board
  - Corporate Parenting Partnership Board
  - o Place Board
  - All performance and data were linked to the Council Plan and Year Ahead Delivery Plan
  - Improving Lives Select Commission.
- The service used data to recognise the need to focus on key areas of performance.
- Performance management was a collaborative process across the whole directorate.
- There was frequent benchmarking.
- There was a focus on activity and demand.

## Quarterly Members Scorecards included the following:

- The measures included in the scorecard were agreed and developed with elected members the year before via a workshop setting.
- The Scorecard included Key Performance Indicators.
- Social Care and Early Help performance.
- Education performance, which was timely throughout the year due to the timeframes of the academic year and assessments.
- Linked Council Plan measures.
- Timeline and whether the measures were a monthly, quarterly, or annual report.
- Data notes.
- Three months performance was provided at once.
- Year to date and annual trend information was included.

#### Good performance on the scorecard included the following:

- Direction of Travel (DOT) had a coloured arrow.
- Red, Amber, Green (RAG) rating was included.
- Targets and tolerances.
- Year on year performance and trend was included.
- Latest available benchmarking information was included.
- There was also a glossary to assist interpretation of the scorecard.

# Example One and Things to Note:

- An example scorecard was provided on the presentation slide and the officer discussed how to interpret the data on the scorecard example.
- In relation to this example, the following was advised:
  - Good performance for this indicator would be high.
  - The DOT indicated that when compared with the previous year performance had decreased.
  - This example indicated that current performance was in-line with the amber tolerance target (84%+).
  - Note the previous performance and peaks and troughs in the year-to-date trend lines.
  - Note that performance was consistently high and in-line with benchmarking for both statistical neighbours and national averages.

# Example Two and Things to Note:

- Another example scorecard was provided on the presentation slide and the officer discussed how to interpret the data on the scorecard example.
- In relation to this example, the following was advised:
  - Good performance for this indicator would be low.
  - DOT indicated that when compared with the previous month performance had increased (e.g., the number had reduced).
  - RAG indicated that current performance was in line with the red tolerance target.
  - Take note of previous performance and also peaks and troughs in YTD trend lines.
  - Note that performance was consistently improving however it was still above (e.g., below) benchmarking for both statistical neighbours and national averages.

#### **Annual Timeline:**

- The quarterly scorecard would be published following approval at the Performance Board every quarter. It would then be circulated to Members of the Improving Lives Select Commission and OSMB.
- Members were advised to send any queries on the circulated scorecards via email to the Governance Advisor. Any areas of concern raised would then be provided to the service and either a written response would be provided to members, or if deemed more appropriate an officer would attend the next Improving Lives Select Commission meeting to discuss any areas of concern raised.
- The Scorecard would also be published on the Members newsletter.
- The Annual CYPS Performance Report would be presented to Improving Lives in July 2024.

The Chair thanked the relevant officer for the presentation and invited questions, this led to the following points being raised during discussions:

• Every year during quarter three and quarter four, the data and performance team reviewed the scorecard with senior leadership in CYPS. During the review, the performance over the year was assessed and the KPI's were reviewed to ensure the right targets were in place for the next year. National targets and performance levels at that point in time, were considered during the review, to ensure the service was in line with those levels. Checks and challenges were completed via the assurance board.

Resolved: That the presentation on the introduction to performance in CYPS be noted.

## 7. INTRODUCTION TO THE EARLY HELP STRATEGY

This agenda item provided a presentation on the introduction to the Early Help Strategy. The Chair welcomed to the meeting Kelly White, Interim Assistant Director for Early Help and Business Support who was also the LINK Officer for the Commission, and Kirsty Woodhead, Locality Manager. The Chair invited Kelly to lead on the presentation, during which the following was noted:

# The Background:

- The Early Help Strategy 2024-2029 was recently approved at Cabinet.
- There was a government review called Stable Homes Built on Love which completed in 2023, this was a long-standing piece of work with lots of engagement with individuals who had lived experience in Early Help. This review defined a significant change to children's social care and set out key ambitions, known as the six pillars of reform. One of the pillars focused on including the need to provide family help, to help ensure all children and families could get the right help at the right time and in an easy way.
- Working Together to Safeguard Children was statutory guidance, which was refreshed in 2023 and sat alongside the Childrens Act. The guidance stated what organisations and agencies should do to help, protect, and promote the welfare of all children and young people. Ensuring a child-centred approach, while bringing a wholefamily focus, to embed a strong, effective, and consistent multiagency child protection practice.
- The Early Help System Guide outlined a national vision and descriptors that were shared by the Department of Education and the Department for Levelling up, Housing and Communities. It also provided a toolkit to assist local strategic partnerships.
- The National Supporting Families Framework 2012 focused on sustaining improved outcomes for families, facing complex challenges and problems. The programme promoted a whole family approach.

# The Vision and Key Principles:

- The Early Help Team worked with key partners to develop the key principles, ensuring children and families were kept at the centre of the principles. All agencies worked together to ensure that children, young people, and families could have their needs identified early and could receive swift access to targeted help and support.
- The key principles developed were as follows:
  - Children, young people and families were at the heart of everything in the service.
  - Early Help was a shared responsibility and was everyone's business.
  - Children, young people and families would receive the right support, at the right time, in the right place, from the right person.
  - The service was committed to promoting fairness, respect, equality, dignity and supporting autonomy.
  - The service would have purposeful conversations and provide support to improve outcomes.
  - The service would work restoratively with children, young people and families.
  - Prevention and early help support was better than late intervention.
  - Public, voluntary and community sector organisations combined to create the early help system and worked together to meet the needs of children and their families.
  - Expectations of family help to ensure early help would provide the right support at the right time, so that children could thrive with their families.

## Early Help:

- Early help was working together to safeguard children, support
  would be for children of all ages that could improve a family's
  resilience and outcomes or reduce the chance of a problem getting
  worse. It was not an individual service or a council only service, but
  a system of support delivered by local authorities and their partners
  working together and taking collective responsibility to provide the
  right provision in their area.
- The early help system included several public and voluntary and community sector organisations, working consistently together to meet the needs of children and their families so that they receive the right support at the right time. These organisations included public health nursing, midwifery, mental health services, the police, schools, nurseries, substance misuse providers, educational psychologists, domestic abuse services, childminders, housing providers.
- Early help focused on providing the following:
  - The right support at the right time
  - Identification of needs early, as problems arise to help prevent them from getting worst.
  - The best possible start which could increase the number of

- children accessing early education.
- A whole family approach, a system of support that supported families and partnership working.

The Three Stages of Support for Children and Young People in Rotherham:

- Stage one was universal and community family help. Universal and community services were available to all children, young people, and families in Rotherham. These services were provided by different agencies such as nurseries, schools, and colleges, GPs, midwives, health visitors, children centres, family hubs, libraries, youth services, and community organisations. They were the central point for any family in Rotherham requiring information, advice, and support.
- Examples of support within this stage was as follows:
  - Increasing access to all family hubs children's centres for families in Rotherham.
  - Developing the self-service and digital offer to increase the uptake of evidence-based programmes.
  - The SEND Hub.
  - Providing baby packs.
  - Increasing the capacity of the voluntary and community sector through provision of the universal youth work offer across the borough, ensuring young people have places to go and things to do.
  - Delivering the children's centre offer to children and families aged 0-5 years, to increase engagement via a universal offer.
  - Delivering targeted work with Rotherham's not in education, training or employment and not known young people, to support young people in years twelve and thirteen, to access employment, education, and training.
  - Increasing and review the use of the Early Help Assessment as Rotherham's consistent tool to ensure effective and coordinated support is provided to children and families.
- Stage 2 was focused family help that would be provided when families were not managing to affect positive change and required enhanced, more intensive and/or specialist support. Children and their families who needed additional support from the Local Authority so they could meet their full potential, would receive focussed family help. This often included children who required low level statutory social work input. This could be longer term and specialised support, for example supporting a child with disabilities or a child with areas of significant need.
- Examples of support within this stage was as follows:
  - Supporting families at the earliest opportunity to reduce the need for social care intervention and ensure that children and young people were in education.
  - Working with partners to ensure that children and young people and their families would get the right support at the

- right time.
- When there was a need for support, to ensure it was as straightforward as possible to access.
- Developing the approach to ensure that all children and young people could get the best possible start, by working with families to increase the number of children accessing early education.
- Ensuring that across the wider early help system, attendance was viewed as 'everybody's business' and that the reasons for poor attendance were understood and addressed through the Early Help Assessment.
- Working with young people that were disengaged to reconnect them to training, further education and employment.
- Working to provide better access to mental health and wellbeing support programmes for young people.
- Working with schools to reduce the number of children who would be excluded.
- Stage three was specialist family help, this was a statutory service
  to children and their families, which was provided when children
  and young people were experiencing or likely to suffer significant
  harm, including Child Protection and Children in
  Care arrangements. Specialist family help was provided to families
  where the problems were severe and had not improved through
  enhanced or specialist support.
- Examples of support within this stage were as follows:
  - Child protection
  - Tier three and four mental health services
  - Youth justice support
  - Children in care
  - Children in specialist education placements.

# The Strategies Five Year Phased Delivery Plan:

- Phase One would be Design in 2024-2025 and would include the following:
  - Identifying and consulting with stakeholders such as the police, health, and wider local authority.
  - Considering the new Working Together to Safeguard Children Framework 2023, incorporating any required changes for Rotherham.
  - Developing a roadmap of a child's journey across early help.
  - Reviewing and updating the Early Help Systems Guide in July 2024.
  - Budget and HR integration for relevant agencies.
  - Establishing a project.
- Phase Two would be to implement and deliver 2025-2026 and would include the following:
  - Ensuring clear governance arrangements.
  - Focusing on operational groups.
  - Developing key outcome measures.

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- Implementing the re-designed system.
- HR support.
- Budget monitoring.
- Continuing engagement with employees and stakeholders.
- Phase Three and Four would be maintain and operate in 2026-2028 and would include the following:
  - The on-going delivery of services.
  - Implementing the government changes and legislation.
  - Monitoring service quality and adjust measures accordingly.
  - Responding to learning to ensure continuous improvement.
  - Budget pressures.
  - External evaluation.
- Phase Five which would be to evaluate in 2029 and would include the following:
  - Assess and identify areas of development.
  - Review and refresh the Strategy.

The Chair thanked the relevant officers for the presentation and invited questions, this led to the following points being raised during discussions:

- The term absolute low income was referenced in the report, previously this was referenced as absolute poverty, the change in terminology was due to absolute low income being the government terminology used.
- Child and Adolescent Mental Health Services (CAMHS) would be included in the third stage of the Early Help Strategies five-year phased delivery plan. There was also lower-level intervention provided to children and young people within the early help offer, if there were concerns raised relating to emotional and mental wellbeing prior to a referral into the CAMHS process.
- Electively home educated children were not specifically named within the Strategy, there was a lot of work that was undertaken via the Education Service. Early help worked closely with the Education Team to identify any early help required for all children, including those that were electively home educated.
- The Early Years 0-5 Service engaged families within the borough in relation to early years and accessing services. There was a high uptake in nursey and pre-school offers.
- Early Help Assessments were completed by Early Help Workers within individual schools. Schools were well placed to use the Early Help Assessment as a tool and mechanism to ensure children and families accessed the right support. Within early help there were five Integrated Working Leads who provided support and oversight to the process of Early Help Assessments and worked closely with all partners, including schools.
- There was a digital pathway within the Family Hubs Programme, this focused on providing support to access digital offers within the family hubs centres and libraries. There was direct work and engagement available for any families unable to access the digital

offer. The Digital Inclusion Team worked within the family hubs centres to support families and individuals who did not have digital access. The Early Help Service held evening groups for daytime workers, to ensure that they could access support. The community resources via the voluntary sector also held some evening-based services. The Multi Agency Safeguarding Hub (MASH) was available twenty-four hours a day, via an out of hours service. The digital offer provided was a wraparound offer for families who were unable to work with the service in person, the main emphasis of the offer was to work with families face to face, in their homes and local communities. The service recognised the need for a digital offer to compliment the face-to-face offer.

- Child Development Centres were available for children aged between 0-5 and once a child turned five years old, they would be placed on the CAMHS waiting list. There was a waiting list for CAMHS, an intermediary service provided support via outreach to mainstream schools, which linked in with early help and wider services. Children of school age had access to a wide variety of school support.
- In relation to the baby self-weighing sessions, it was advised that some parents were unable to attend due to the time of the sessions. It was acknowledged that it was difficult to find a suitable time for all, however, the service would be flexible to the needs of the residents to ensure families could attend a session.
- Early Help had strong links with the voluntary sector, such as Voluntary Action Rotherham. The service worked closely with the Digital Inclusion Team who supported families to provide sim cards and other digital access where required.

#### Resolved:-

- 1) That the presentation on the introduction to Early Help be noted.
- 2) That the Assistant Director for Early Help provides members with specific data in relation to the number of schools with a dedicated family support worker available.

# 8. INTRODUCTION TO SPECIAL EDUCATIONAL NEEDS AND DISABILITIES (SEND) AND SEND SUFFICIENCY

This agenda item provided a presentation on the introduction to Special Educational Needs and Disabilities (SEND) and SEND Sufficiency. The Chair welcomed to the meeting Cary-Anne Sykes, Head of Service for SEND and Mark Cummins, SEND Transformation Project Lead. The Chair invited Cary- Anne and Mark to lead on the presentation, during which the following was noted:

# What is the SEND Strategy:

The key line of the proposed Strategy was "My Life, My Rights".
 This was captured via feedback from the young people during the

- strategy consultation period.
- This proposed strategy covered the period of 2024-2028 and set the vision for children and young people with Special Educational Needs and Disabilities (SEND) in Rotherham. It would drive forward the improvements already started across the local area and help services in education, health, and social care to work together to ensure children and young people in Rotherham would achieve the best outcomes.
- The proposed strategy was written in a way to engage young people, as this was requested in the consultation feedback for the Strategy. The SEND Strategy had been approved for consultation.
- The service listened to children, young people and their families, to find out what needed to change. This highlighted that some parts of the system in Rotherham were working well, and the experience of families was good. However, this was not the same for all children, young people and families, there was several areas that required improvement.
- The proposed strategy was co-produced with partners such as the children's disabled council, young people and families and would go to wider consultation.
- Ambition, inclusion, and equity were identified as key principles by the consultation.

#### The Four Cornerstones:

• The service would continue to imbed the Four Cornerstones and recognised that when the cornerstone values were integrated into practice, then trust would be developed and progress in achieving outcomes for children and young people would be made. The service recognised that without trust, systems, partnerships, organisations and families could not work together effectively and meaningful partnership work could not be achieved.

## The Commitment to Young People with SEND:

- The following three commitments were identified as priority areas of development and monitoring via consultation with young people.
  - The number of permanent exclusions and part time timetables for children and young people with special educational needs.
  - The number of disabled children and young people and those with special educational needs missing school, due to health concerns, including mental health.
  - Having a clear process for engagement with children and young people.

### Next Steps:

• In August the service would begin a borough wide consultation on the Strategy to ensure all communities would be reached.

## What was SEND Sufficiency:

- In Rotherham 20.4% of pupils had either a statutory plan for SEND, known as an Education Health Care Plan (EHCP), or were receiving SEND support (previously known as school action and school action plus).
- This compared to an average of 17.1% across all England Authorities. To ensure the educational needs of children and young people in the borough with SEND could continue to be met, the Council created a sufficiency of education provision to meet the needs of all pupils.
- Most young people with an EHCP would have their needs met in mainstream settings and there was 38% of pupils with an EHCP are in mainstream education.

# SEND Sufficiency Phase Four:

 SEND Sufficiency Phase 4 would create ten additional SEND resource provisions within mainstream education settings, this would create a minimum of one hundred additional SEND places, over the next three academic years.

#### What Was a Resource Provision:

- A resource provision was attached to a mainstream school providing specialist therapeutic input and support for pupils with a specific SEND need type. Pupils could access support from the resource provision based on their individual need, whilst also accessing mainstream classes and curriculum.
- The development of resource provision through SEND Sufficiency Phase Four would increase capacity for provision, this would follow eight resource provisions developed during previous rounds of SEND Sufficiency.
- There was currently ninety-seven young people accessing resource provision across Rotherham, with primary and secondary provisions across the following need types:
  - Communication and Interaction
  - Moderate Learning Difficulty
  - Social Emotional and Mental Health
  - Speech, Language and Hearing Impairment.
- The key strategic aim set out for Phase Four was to enhance mainstream SEND capacity to meet a wider level of need across all schools and mitigate the need for children, young people, and young adults to be educated in settings outside the Borough and promote inclusive practice.

#### The Accessibility Strategy:

- The Accessibility Capital Funding Programme focused on three distinct areas and included the following:
  - Targeted work across mainstream and special schools linked to accessibility requirements for individual pupils and cohorts.

- Individual requests and contributions for individual pupils linked to the established equipment panel.
- A small capital grant programme for schools open through application and assessment in line with the school's own accessibility planning.

# Accessibility Small Grants Capital Programme-

- The service was implementing a local authority School's Accessibility Strategy and Capital Small Grants programme.
- The Strategy aims were as follows:
  - To increase the extent to which SEND and/or disabled pupils could participate in the curriculum.
  - To improve the physical environment of schools to increase the extent to which disabled pupils could take advantage of education.
  - To improve the delivery of information to disabled pupils and their parents and/or carers through the Rotherham Local Offer.

# Case Study at Rockingham Junior and Infant School:

- The school applied for an Accessibility Grant of £20,000 to develop an external, safe, multi-sensory exploration space with a 'forest school' approach to outdoor learning.
- At the time of applying the school had 311 children and 71 children on the SEND register.
- The school identified that there were many children who had communication, interaction and SEMH needs, who needed a curriculum taught in a different way. This new provision would enable children to engage with school, improve attendance and learn in a way that would enable and empower them.
- The school was very proactive in involving both children and parents and/or carers in the development of this exciting new provision. This included a visit to the Forest of Bewilderment at Wentworth Woodhouse.
- The school hoped to complete all works by the end of the summer holidays 2024.

#### Outreach Services:

- A key part of supporting mainstream schools to meet a wider level of need was the development of a range of specialist outreach provision.
- The current outreach services developed included the following:
  - Primary and Secondary SEMH Outreach. This had the aim of supporting mainstream schools to reduce suspensions and exclusions. Outreach support had been received by 78 schools, split across 14 secondary, 62 Primaries and 2 Early Years Settings.
  - A pilot Secondary Communication and Interaction Outreach.
     This service was piloted for this academic year, 6 schools

had received support to improve outcomes for communication and interaction learners. The service was extended by a further academic year to understand better longer-term outcomes and impact.

The Chair thanked the relevant officers for the presentation and invited questions, this led to the following points being raised during discussions:

- As part of the wider strategy and implementation work, the service continuously reviewed the impact and analysis of provisions, to ensure the most effective outcomes for children and young people.
- In relation to the consultation period, the service worked with three Key Stage Two groups in mainstream education, three secondary school groups, this included children and young people in provision and mainstream. The service consulted with children and young people who were in other education such as electively home educated children and medical home tuition children. The next phase would include questionnaires to ensure every young person in school and other education provisions would have the option to engage and respond.
- Accessibility would be a key focus in the strategy, to ensure families and carers struggling to engage due to literacy or language barriers could be helped to access services. An easy access document was being produced to ensure the strategy could be easier to read and accessible to all. There would also be an audio and brail versions of the strategy produced to ensure the service could reach as many people as possible.
- The funding application process for the Small Grant Funding was open to all schools across the borough. The service had practitioners and Specialist Advisory Teachers in school settings, and they would encourage schools to apply for the grant, when a need was recognised. The service also regularly mapped provision to target specific areas where required, there was a recently developed map of specialist provision completed by the service, this would be provided to members of the Commission following the meeting.
- For a young person to access a resource provision, their needs were identified through the EHCP process. The decisions and recommendations were decided via the Education, Health and Care Plan Panel. There was a cost involved for resource provision and this cost was very similar to the cost of an EHCP in a mainstream school.
- Resource provisions bridged the gap between mainstream school and specialist schools. The impact of resource provisions was assessed by the service. Sufficiency planning, individual pupil outcomes, attainment, destination data and borough wide outcomes were all assessed by the service.
- Children born during the pandemic were considered and accounted for during provision mapping. The service ensured future proofing by including cohorts that missed key transitions during the pandemic in SEND sufficiency planning.

### Resolved:-

- 1) That the presentation on the introduction to SEND and SEND Sufficiency be noted.
- 2) That the SEND Transformation Project Lead shares the relevant mapping document relating to specialist provisions, with members.

# 9. NOMINATION FOR HEALTH, WELFARE AND SAFETY PANEL

The Commission was asked to nominate one representative to sit as a member of the Health, Welfare and Safety Panel for 2024/2025.

**Resolved:-** That Improving Lives Select Commission appointed Councillor Brent as it's representative on the Health, Welfare and Safety Panel for 2024/2025.

#### 10. WORK PROGRAMME

The Committee considered its work programme, and the following was noted:

- The work programme for July's meeting was included in the agenda pack for members to consider.
- There would be an additional meeting for all scrutiny Commissions, to discuss and agree work programmes for 2024/2025.

**Resolved:** - That the work programme for the next meeting in July 2024 be approved.

# 11. IMPROVING LIVES SELECT COMMISSION - SUB AND PROJECT GROUP UPDATES

The Chair provided a progress report on sub and project group activity.

**Resolved: -** That the update be noted.

#### 12. URGENT BUSINESS

There was no urgent business.

# 13. DATE AND TIME OF THE NEXT MEETING

**Resolved:-** That the next meeting of the Improving Lives Select Commission take place on 30 July 2024 commencing at 10am in Rotherham Town Hall.



Public Report Improving Lives Select Commission

# **Committee Name and Date of Committee Meeting**

Improving Lives Select Commission – 30 July 2024

# **Report Title**

CYPS Performance Report 2023/2024 Outturn

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

# Strategic Director Approving Submission of the Report

Nicola Curley – Strategic Director, Children & Young Peoples Service

# Report Author(s)

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# Ward(s) Affected

Borough-Wide

### **Report Summary**

The report includes the performance outturn for the reporting year April 2023 to March 2024 for Children and Young People's Services. It includes areas of performance that are working well alongside other areas where a continued focus is required.

### Recommendations

1. It is recommended that Members consider and accept the CYPS Annual Performance Report and accompanying scorecard for the outturn 2023/2024.

## **List of Appendices Included**

Appendix 1 CYPS Performance – Members Scorecard – Q4 (March 2024)

## **Background Papers**

None

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

# **Council Approval Required**

No

**Exempt from the Press and Public** No

# CYPS Performance Report 2023/2024 Outturn

# 1. Background

- 1.1 This report provides performance information which enables the scrutiny of service delivery and the associated impact on the outcomes for children and young people. The report evidences the council's commitment to continuous improvement. It should be read in conjunction with the appended performance data report, which provides trend data, graphical analysis, and benchmarking data against national and statistical neighbours.
- 1.2 The report represents the monthly report for March 2024. It also provides a summary of performance under key themes across Children & Young Peoples Services (CYPS) including Early Help and Family Engagement, Social Care, Education and Inclusion at the end of the 2023/2024 reporting year (and Academic year 22/23).
- 1.3 Performance has been considered against local targets, including associated 'RAG' (Red, Amber, Green) rating tolerances. Targets are set in consideration of available national and statistical neighbour benchmarking data and recent performance levels and are reviewed annually. Reporting ensures focus on the effectiveness of services and achieving good outcomes for children and young people.
- This annual report and ILSC scrutiny forms part of the strong operational performance management arrangements which are in place across the service. These include a programme of service and team-based performance meetings which are well embedded across the directorate. On a monthly basis governance is provided by the CYPS Performance Board, chaired by the Director of Children's Services, and attended by the Directorate Leadership Team, Heads of Service from across the directorate and the CYPS Performance Manager. An Assurance Board is held each quarter which provides a quality focus as well as performance management including work undertaken by the Young Inspectors, the Practice Learning Days (PLDs) and the monthly audit programme. Scrutiny is also provided by the Corporate Parenting Partnership Board (CPPB) and Rotherham Safeguarding Children's Partnership (RSCP).

# 2. Key Issues

- 2.1 Early Help and Family Engagement
- 2.1.1 Summary of what has worked well against some key measures during 2023/2024
- 2.1.2 In 2023/24 a similar number of families were offered an Early Help service as in 2022/23. 3043 contacts were made (only 90 fewer than last year), of which 93.2% were engaged within 3 days, exceeding the target of 75% and improving on last year's outturn by 4%. There has been an increase in the number of Early Help assessments completed by partners across the

borough, ensuring support is provided at the earliest opportunity and appropriate level prior to any escalation.

For the 886 families in scope for Early Help Assessment timeliness, 90.1% were completed with 45 days, again, exceeding the target of 85% and improving on last year by 2.5%. 401 assessments were complete by partners (such as school, midwives) across the borough making up 27.5% of our total assessments.

- 2.1.3 The Outreach and Engagement team had an ambitious target of registering 95% of children aged 0-5, living in the 30% most deprived Super Output Areas with Rotherham Children's Centres by 31st March 2024 (Super Output Areas are small geographical areas developed from Census 2001 information). This year we continued our positive trajectory, reaching 94.5% of children registered. This is a significant improvement on the previous 2 years of 87% (2022) and 92% (2023). This early engagement is important to ensure children and their families are connected with appropriate support and resources and/ or know where to find them should the need arise.
- 2.1.4 Following registration, 80.6% of children accessed Childrens Centre activities, exceeding the target of 65%. This was a significant improvement on the previous 2 years of 72% (2021/22) and 78% (2022/23). It is positive to see an upward trend year on year for these young children, and the service are already working with partners on ways to improve data production to help us identify families early and support them with both registration and engagement as soon as possible.
- 2.1.5 The Outreach and Engagement team also support older children preparing for adulthood. The team work directly with young people to break down barriers and find suitable Education, Employment, and Training (EET) provision. The annual outturn figures, which is based on a 3-month combined average for statutory reporting, met set targets for Not in Education Employment or Training (NEET), and Not Known young people. For these figures, lower is better. The NEET figure was 4.31%, within the target of 4.5% and an improvement on 4.95% last year. The Not Known figure was 0.64% well below our target of 1.5% and a significant improvement on 2.3% last year. The overall combined figure was 4.95% clearing our target of 6% and a very respectable improvement on 7.2% last year.
- 2.1.6 The Rotherham Youth Justice Service has a relentless focus on preventing young people entering the youth justice system, and ensuring that when they do, 'child first' principles are applied to ensure the best possible outcomes for young people and victims of crime. The rate of re-offending was 16.1 per 100k, an improvement on 19.8 in the previous reporting year. This is a national measure to help compare data. Performance is below Statistical Neighbours at 38.1 and the national average of 32.1. This is positive and demonstrates the impact of good multi agency support being provided to first time entrants. The recent increase in first time entrances may impact on this data in the future.

In terms of re-offences by re-offenders, this is 2.00 compared to 3.56 in the previous year (lower is better), and lower than statistical neighbour averages

of 4.43. This means that we are successful in preventing young people from offending further.

# 2.1.7 Summary of areas of continued focus against some key measures during 2023/2024

- 2.1.8 During January to December 2023, we had 49 First Time Entrants (FTE) into the Youth Justice system who received a caution or sentence. This is a benchmarked rate of 186 per 100k population. This is higher than the previous year of 44 FTE with a rate of 170, and slightly higher than statistical neighbours of 177.
- 2.1.9 Use of Custody was at 0.08 (binary rate, lower is better) compared to 0.0 in the previous year and 0.07 stat neighbours but below 0.11 nationally. This data relates to 2 children. Prior to this, there has been no custodial sentences since May 2020.

#### 2.2 Children's Social Care

# 2.2.1 Summary of what has worked well against some key measures during 2023/2024

- 2.2.2 In 2023/24 there continued to be a safe and steady decline in numbers of children open to Children's Social Care, with an increase in prevention and working in partnership with families.
- 2.2.3 To monitor and compare performance both nationally and to other local authorities like Rotherham (statistical neighbours), rates of children against our 10,000 (k) population figure are monitored. The rates of children open to social care are reducing across the board and are all within set targets this year.
- 2.2.4 The rate of Children in Need (CiN) at the end of 2023/24 was 316.8, a reduction from 378.6 last year. This is below statistical neighbour average of 404.9 and the national average of 342.7. There has been a reduction of CiN subject to a plan for over 12 months, 46 children at the end of this year compared to 78 at the end of last year. Accessing Early Help services means families can access the support earlier without the need to step up to Children's Social Care (CSC). Family Network Meetings (FNM) and the use of Family Group Conferences (FGC) support families to develop plans to support themselves without the need for CSC intervention.
- 2.2.5 The rate of children with a Child Protection Plan (CPP) at the end of 2023/24 was 45.6, a reduction from 70.4 last year. This is close to the national average of 43.2 and below statistical neighbours of 60.0. The decrease can be partly attributable to the focus on strategy meetings and outcomes, greater scrutiny of conference requests, use of Family Group Conferencing and Family Network Meetings.
- 2.2.6 The rate of Children in Care (CiC) at the end of 2023/24 was 88.4 compared to 96.7 last year and is below the statistical neighbour average of 96.7, but

above the national average of 71. Children in care numbers continue to reduce through focussed work on rehabilitation and support to transition to Special Guardianship Order (SGO). Rotherham continues to support the National Transfer Scheme for Unaccompanied Asylum-Seeking Children (UASC), set up by the government to ensure a more equitable distribution across local authorities, meeting the overall best interests of these vulnerable children. CiC data includes UASC (39/502), consequently the cohort is larger than it would be if it just included local children.

- 2.2.7 Our Leaving Care cohort stands at 348 at the end of 2023/24, an increase from 319 last year, with 45 who were formally unaccompanied asylumseeking children.
- 2.2.8 Sometimes children will be re-referred into the service after a previous intervention. In May 2023, there was a peak in the percentage of re-referrals, which raised some challenge at Performance Board. This initiated some direct work to review all re-referrals in that period to identify any issues at previous closures. The learning and improvements that followed had a positive impact reflected by the rates steadily reducing over the year finishing with 17.3% of re-referrals, within the target of less than 22%. Learning included strengthening the use of Family Network Meetings and reinforcing the plan prior to closure with everyone in the network. Simple processes to ensure consistent management oversight at closure were also implemented.
- 2.2.9 A section 47 (S47) enquiry is initiated to determine what type of action is required to safeguard and promote the welfare of a child where they are suffering or likely to suffer significant harm. The rate of S47's has reduced this year, at 194.8 per 10k population, just above national average of 191.6. This is a continuing reduction from 278.2 last year. There has been some specific work completed with all managers relating to this area of practice, paving the way for a continued improvement on this measure.
- 2.2.10 When a child is placed on a Child Protection Plan (CPP), they have the plan updated on a regular basis. 95% of our children had an up-to-date plan at the end of the year, an improvement on 88.7% last year and meeting the target of 95%.
- 2.2.11 For Children in Care (CiC) in 2023/24, we saw an improving picture in placement stability with only 7.4% of children experiencing 3 of more placements within 12 months, compared to 9.7% last year (lower is better). This is below the statistical neighbour average of 9.5% and within the target of 8%.
- 2.2.12 For children with a permanence plan of adoption, there are 2 timeliness measures. The average number of days between a child coming in to care and being placed with their prospective adopters is 387.2 days, an improvement on 492.5 last year and surpassing the target of less than 487. The average number of days between a placement order being granted and the child being matched to an adoptive family is 182.6 days, improving on 197.4 days last year, but higher than the national target of 121 days. The national average is 175 days and even the top quartile performance average

is not achieving the target at 135.5 days. Our cohort of children on an adoption plan is quite small, which means individual circumstance for an individual child can inflate the overall averages. For instance, a child with complex needs where a longer duration of search for the right family is approved as the right thing to do.

- 2.2.13 For the Children in Care (CiC) cohort, we have seen a positive increase in children receiving visits within timescale at 97.6% compared to 95.6% last year.
- 2.2.14 For the older children in care, and those previously in care, we have the Leaving Care service. Whilst there a higher number of young people open to leaving care this year, and performance is slightly below last years performance, it is still within target and above national and statistical neighbour averages. At the end of 2023/24, 96.3% of care leavers were in suitable accommodation compared to 87.7% statistical neighbour average and 88% nationally. 66.4% of care leavers were in education, employment, or training, compared to 52.9% statistical neighbour average and 56% nationally.

# 2.2.15 Summary of areas of continued focus against some key measures during 2023/2024

- From the beginning of a child's journey with us, the timeliness of the contact response is tracked and measured. In 2023/24, the percentage of contacts with a decision within 1 working day for Social Care had reduced to 69.3% from 72.1% in the previous year. Some recent work has highlighted that a large proportion of contacts not meeting the target are those progressing to MASH information sharing. Waiting for information back from partners means that is not possible to be complete within 1 working day. Other Local Authorities do not count this within their contact timeliness. In Rotherham we are developing new monitoring processes to monitor MASH information sharing contacts separately to give us deeper understanding of where delays are in returning the information. The timeliness of contacts will align with other local authorities and be based on decision being within 24 hours prior to MASH and for MASH Information Sharing responses to be measured within a 2 working day target. This will help to focus in on the cases that have a real delay, in turn improving timeliness through service improvement and working with partners.
- 2.2.17 Once a child has a referral to Social Care and an assessment is deemed necessary, the timeline set in the Working Together Guidance is 45 working days for completion. An ambitious target aims for 92% of assessments to be completed within that timeframe. Towards the end of the year that target has been met, however overall outturn was 88.2%, which is similar to last year's 88.6%. In comparison to other Local Authorities, this is good performance with statistical neighbours performing at 82.1% and national average at 82.5%. Rotherham is very close to the top quartile nationally of 89.7%. Assessment timeliness has been a topic of conversation at

performance board throughout the year. A QA process is in place for managers at the point of sign off of assessments, where they may ask for additional information to improve quality, this may mean assessments exceed the timescale. Senior leaders are assured that first assessments for children entering the service are usually within 30 days (well within timescale).

- 2.2.18 When a child becomes a Child in Need (CiN) a plan is created and updated on a regular basis. 88.6% of Children in Need had an up-to-date plan at the end of 2023/24, an improvement of 80.9% last year but still below the target of 92%. This can be due to several factors such as a case being near to closure or step down to Early help, but the ambition remains to achieve this.
- 2.2.19 Further down the pathway of intervention, if a child is subject to Section 47 (S47) investigation and they progress to an Initial Child Protection Conference (ICPC), there is a target to hold the ICPC within 15 days of the S47. In 2023/24, 84.8% of ICPCs were complete in time; below the target of 90%, but in line with statistical neighbours at 84% and national average of 78.4%. Late ICPCs are often the result of late requests for a conference. A new process has been implemented which involves raising with the manager on each occasion and there have been improvements from this. ICPC timeliness will remain a focus in the coming year.
- 2.2.20 At the end of 2023/24 4.6% of open child protection plans (CPP) lasting more than 2 years. This is above the target of 2.5% (lower is better). These children make up a small number of families, all of which have been recently reviewed to ensure positive trajectory for the children's safety and care planning. Two years is acknowledged to be too long, and learning has been taken on board by conference chairs and managers. This trigged further work in February and March 2024 to do some focused auditing for all children on a plan for 18 months or more. Measures are in place to track these plans including the continued use of midway reviews, check and challenge, and managerial scrutiny and oversight. This has been presented back to Performance Board to provide assurance.
- 2.2.21 2023/24 also saw an increasing trajectory of children on a CPP for a second or subsequent time within 2 years of their last plan. At year end performance was 12.5%, above our 8% target (lower is better). This increase has triggered some planned audit activity to review children in this cohort and to support any learning for practice in the workforce, to be delivered through 7 minute briefing format. Repeat plans are afforded closer scrutiny at the point of the second ICPC request. Step down is subject to scrutiny in audits, via the chair, at closure, and at rereferral. This will ensure that plans are correct for children at the point of need.
- 2.2.22 In 2023/24, 95.7% of children on a Child Protection Plan (CPP) had their plan reviewed with timescale. This is below the ambitious target of 98% this year, but above the statistical neighbour average of 79.1% and national average of 88.1% evidencing that performance is strong when comparing with other local authorities.

- 2.2.23 On 31st March 2024, 91.8% of children on a Child Protection Plan (CPP) had received a visit within the last 2 weeks, a reduction in performance compared to last years 95.1%, and below the target of 95%. Performance in this area fluctuated across the year, often linked to holiday periods. Visiting our children is a priority and key to ensuring children are safe. Visit timeliness has been discussed at Performance Board and some deep dive work to identify any common themes or barriers agreed. This performance will remain an area of focus over the next year.
- 2.2.24 In June 2023, the way we the number of children in care (CiC) who had an up-to-date plan is reported changed. Performance data had been tracking whether a plan was updated within 10 working days of a review taking place. While this is best practice it is not comparable with other local authorities. The true measure should be whether a plan is updated within one, three or six months (depending on the length of time a child has been in care). Due to this reporting change, performance decreased during the year to 84.4% when compared with 94.7% the previous year. The aim will continue to be to update plans within the 10-working day timeframe, however the correct reporting methods will now be used. This decision was made following in-depth discussion at Performance Board and has also been supported by the Corporate Parenting Partnership Board (previously Corporate Parenting Panel).
- 2.2.25 Health and Dental check timeliness remains an area of focus for both Social Workers and Independent Reviewing Officers, in collaboration with colleagues in Health. At the end of March 2024, 83.7% of children in care had an up-to-date health assessment recorded on the case management system (an improvement of 78.7% last year) and 61.8% of children had an up-to-date dental assessment (a decline in performance from 69.4% last year). Both have a target of 95%. Some children (often teenagers) decline health and dental checks, which remains a challenge and an area of focus.
- 2.2.26 The number of children in care is steadily reducing. However there has been an increase of children entering care who are over 16 years of age (children who are unaccompanied minors who have travelled from abroad) requiring supported accommodation. This has reduced the percentage of children in a family-based setting at 75.3% compared to 77% last year.
- 2.2.27 For longer-term children in care, remaining in placement for at least 2 years, performance was almost identical to last year at 65.1%, but remains below our target of 70% (higher is better). Wherever possible, any moves are positive and as a result of permanence planning for the child. There are several panels that monitor and support placement stability, with oversight from the Independent Reviewing Officer (IRO).

## 2.3 Education and Inclusion

2.3.1 The year-to-date figures referenced in the March 2024 Members Scorecard include Term 1 and Term 2, as Term 3 has not yet ended. The full academic

- year end data and attainment results in the Members Scorecard, is reported during the Autumn Term.
- 2.3.2 Whilst education data is reported termly, continued check and challenge of education performance takes place at the monthly CYPS performance board, working collaboratively with colleagues across the service to take a whole service approach on impact and outcomes.
- 2.3.3 Due to technical issues with the education systems provider Capita, there are difficulties reporting on attendance reliably. Capita have changed the way data is transferred from schools into the system and problems with the implementation of this has caused gaps. Work is taking place by Capita to address and resolve the issue.

# 2.3.4 Summary of what was working well against some key measures during 2023/2024

- 2.3.5 International research shows that children who spend longer in early years provision have better educational outcomes later on. It also shows that high-quality early years provision particularly benefits children from low-income backgrounds. At the end of Term 2, 90.9% of eligible 2-year-olds were taking up an early education place in Rotherham, surpassing the 85% target. This is slightly higher than Term 2 last year where we achieved 90% and is the highest level of take-up we have achieved in a Spring term. This is positive as take up tends to fall slightly in this term as more children become eligible for a place and therefore the new cohort may have less choice of available times and days or specific childcare providers.
- 2.3.6 A preferred education setting is important for both children and their families in their everyday lives. This year, 97.4% of secondary children were allocated a place at one of their 3 preferences on National Offer Day, an improvement on 96% last year and above the national average of 96%. For Primary, 99.2% were allocated one of their 3 preferences compared to 99% the previous year.
- 2.3.7 The latest attainment data is our 2022/23 outturn. There was an increase in the percentage of early years foundation stage pupils achieving a good level of development at 67.3% compared to 64.5% the previous year. There was an increase of pupils passing the phonics screening check in year 1, with 79% compared to 75% the previous year. 55% of key stage 2 pupils were meeting the expected standard and 5 % in higher standard for reading, writing, and maths, a 1% improvement on each this year compared to the previous year 2021/22.
- 2.3.8 From January to December 2023 (period in line with DfE reporting), a total of 59.9% of Education Health and Care Plans (EHCPs) were issued within 20 weeks. This is above the target of 58% and an improvement on 51.6% in the previous year. This continues to be an improving picture throughout 2024 (Jan-June 75.6%), despite the challenges of increasing numbers of requests from schools and waiting times on advice reports, for example from health.

- 2.3.9 Children with an EHCP have a transition review for both Primary and Secondary transitions. Each of these have a statutory deadline date. For Primary, this was 15th February, where we achieved 95.8% exceeding our target of 70%. For Secondary, the statutory deadline was the 31st of March, where we achieved 79.1% again exceeding the target of 70%.
- 2.3.10 The number of children missing from education (CME) at the end of term 2 was 110 compared to 116 at the end of term 2 last year. A child who is CME is someone who is of a compulsory school age but is either not registered at a school or else not receiving suitable education in place of a school setting. There is an improved process between our CME team and schools to ensure continued timely support for children who become CME in Rotherham.
- 2.3.11 At the end of term 2 the latest data at the time of reporting indicated that 93.5% of children in care had received an up-to-date Personal Education Plan (PEP) in the term. However, updated performance information tells us that this figure is actually 99.7%, which is comfortably above our target of 95%.

# 2.3.12 Summary of areas of continued focus against some key measures during 2023/2024

- 2.3.13 Some areas of attainment at the end of school year 2022/23 saw a reduction in performance. 38.7% of key stage 4 pupils achieved grade 5 or above in English and Maths compared to 44.7% the previous year. The average attainment 8 score at year 11 was 43.1, down from 46.7 the previous year. Finally, the English Baccalaureate average point score was 3.58 down from 3.83 the previous year. Work continues across place-based approaches such as Rotherham Loves Reading and Disadvantaged Pupils project, to help support and drive attainment.
- 2.3.14 Numbers of Elective Home Educated (EHE) children continue to rise with 523 at the end of term 2 compared to 435 at the end of term 2 last year. A specific action plan is in place in response to this to ensure the right support can be offered to parents and carers who choose to home educate in Rotherham. Resources have been updated and shared with schools and partners, including in Voluntary Sector, with continued assurance in place through the governance group.
- 2.3.15 At the end of term 2 we had recorded 11 permanent exclusions for primary and 73 for secondary for the year so far. This is an increase on 6 and 60 respectively at the same point last year. The response to increasing exclusions has continued this year following engagement with school leaders through a series of consultation events. The response includes updated guidance, the introduction of webinars, supporting alternatives to exclusion and the realignment of Secondary Inclusion Panel into localities.

# 3. Options considered and recommended proposal

- 3.1 Members to consider and accept the CYPS Performance Scorecard for March 2024 (Out-turn 2023/2024) as attached Appendix 1
- 4. Consultation on proposal
- 4.1 N/A
- 5. Timetable and Accountability for Implementing this Decision
- 5.1 N/A
- 6. Financial and Procurement Advice and Implications
- 6.1 There are no financial implications with this report.
- 7. Legal Advice and Implications
- 7.1 There are no legal implications with this report.
- 8. Human Resources Advice and Implications
- 8.1 There are no human resource implications with this report.
- 9. Implications for Children and Young People and Vulnerable Adults
- 9.1 Performance and Quality assurance is a key element of the work of Children and Young Peoples services to ensure that outcomes are improved for Rotherham children and their families and that they are resilient, successful, and safe.
- 10. Equalities and Human Rights Advice and Implications
- 10.1 There are no Equalities and Human Rights implications with this report
- 11. Implications for CO<sub>2</sub> Emissions and Climate Change
- 11.1 There are no CO2, Emissions or Climate Change implications with this report.
- 12. Implications for Partners
- 12.1 Partners and other directorates are engaged in improving the performance and quality of services for children, young people, and their families, including via the Rotherham Safeguarding Children's Partnership (RSCP), the CYPS Performance Board, the Corporate Parenting Partnership Board, the Early Help Steering Group and the SEND Strategic Partnership Board. All 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

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children and young people. Strong management oversight by the Directorship Leadership Team and the continued development of the Performance Management Framework mitigates this risk by holding managers and workers to account for any decline in performance both at a team and at an individual child level.

# Accountable Officer(s)

Kelly White, Interim Assistant Director Early Help and Family Engagement Monica Green, Assistant Director, Children's Social Care Niall Devlin, Assistant Director, Education & Inclusion Helen Sweaton, Joint Assistant Director, Commissioning, Performance and Quality

Approvals obtained on behalf of:

|                                  | Name                | Date     |
|----------------------------------|---------------------|----------|
| The Strategic Director with      | Nicola Curley –     | 05/07/24 |
| responsibility for this report   | Strategic Director, |          |
|                                  | Children & Young    |          |
|                                  | Peoples Service     |          |
| Consultation undertaken with the | Cabinet Member      | 16/07/24 |
| relevant Cabinet Member          | for Children and    |          |
|                                  | Young People -      |          |
|                                  | Councillor          |          |
|                                  | Cusworth            |          |

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# Children's and Young People Services Members Performance Report

As at month end : March 2024 (Quarter 4 - 2023/24)

**Document details** 

Status: Issue 1

**Please note:** Data reports are not dynamic. Although care is taken to ensure data is as accurate as possible every month, delays in data input can result in changes in figures when reports are re-run retrospectively. To combat this at least two individual months data is rerun for each indicator where necessary.

**Our Vision** 

"Working with Rotherham's children, young people and families to be resilient, successful and safe"

# **CYPS Benchmark Indicators**

\*DOT - Direction of travel represents the direction of 'performance' since the previous month showing if the number or percentage has gone up or down. Colours have been added to help distinguish better and worse performance with the exceptions of measures that are for information only. Key Below;-

- increase/decrease in number/percentage = improvement in performance
- increase/decrease in number/percentage = decline in performance

- number/percentage remained same as previous month

| *REF  |                   |           | DATA               |        |        | 2023/24               |                       |              |                 |                   |                 | TARGET | 「& TOLE | RANCES                          | YR ON Y               | R PERFORMANCE       | LATEST BENCHMARKING   |                       |                       |                        |                      |
|---|-------------------|-----------|--------------------|--------|--------|-----------------------|-----------------------|--------------|-----------------|-------------------|-----------------|--------|---------|---------------------------------|-----------------------|---------------------|-----------------------|-----------------------|-----------------------|------------------------|----------------------|
| *REF<br>NO.   | Council<br>Measur | TIMELINE  | NOTE               | Jan-24 | Feb-24 | Mar-24<br>(Q4)        | 202                   | 3/24 Outturn | Good<br>perf is | DOT<br>(Yr on Yr) | RAG<br>(Yr End) | Red    | Amber   | Green<br>(target)               | 2022/23               | Yr on Yr trend      | Stat<br>neigh av.     | Best stat<br>neigh    | Nat av.               | Top qtile<br>threshold | RIA<br>2023/24<br>Q3 |
| B.1 % of assessments for children's social care completed in 45 working days (SC) of referral   |                   | monthly   | %                  | 93.0%  | 93.1%  | 89.4%                 | 88.2%                 |              | high            | •                 |                 | <84%   | 84%+    | 92%+                            | 88.6%                 |                     | 82.1%                 | 99.9%                 | 82.5%                 | 89.7%                  | 78.9%                |
| B.2 Rate of S47's per 10,000 population aged 0-17 - rolling 12 month (SC) performance   |                   | monthly   | Rate per<br>10,000 | 210.9  | 199.9  | 194.8                 | 194.8                 |              | low             | Ψ                 |                 | 227.1+ | -       | <227.1                          | 278.2                 |                     | 272.0                 | 179.4                 | 191.6                 | -                      | 146.9                |
| B.3 No. of children in need (CIN) per 10K population. (DfE definition)  | CH02              | monthly   | Rate per<br>10,000 | 311.9  | 316.4  | 316.8                 | 316.8                 | <b>I</b> III | low             | Ψ                 |                 | 375.5+ | -       | <375.5                          | 378.6                 |                     | 404.9                 | 312.3                 | 342.7                 | -                      | 336.1                |
| B.4 % of initial child protection conference (ICPCs) completed within 15 days of (SC) S47   | f                 | monthly   | %                  | 100.0% | 88.9%  | 84.4%                 | 84.8%                 |              | high            | Ψ                 |                 | <82%   | 82%+    | 90%+                            | 88.7%                 |                     | 84.0%                 | 100.0%                | 78.4%                 | 87.3%                  | 77.0%                |
| B.5 Rate of children with a child protection plan per 10,000 population aged 0-(SC) 17  | CH03              | monthly   | Rate per<br>10,000 | 53.5   | 48.6   | 45.6                  | 45.6                  |              | low             | •                 |                 | 85+    | -       | <85                             | 70.4                  |                     | 60.0                  | 33.2                  | 43.2                  | -                      | 51.9                 |
| B.6 % of open child protection plans lasting 2 years or more  |                   | monthly   | %                  | 4.2%   | 4.3%   | 4.6%                  | 4.6%                  |              | low             | <b>^</b>          |                 | 3.5%+  | 2.5%+   | <2.5%                           | 1.5%                  |                     | 2.4%                  | 0.0%                  | 2.2%                  | 2.6%                   | -                    |
| B.7 (SC) % of child protection cases which were reviewed within timescales  |                   | monthly   | %                  | 93.5%  | 97.3%  | 100.0%                | 95.7%                 |              | high            | <b>V</b>          |                 | <90%   | 90%+    | 98%+                            | 98.2%                 | $\overline{\wedge}$ | 79.1%                 | 100.0%                | 88.1%                 | 96.6%                  | -                    |
| B.8 (SC) Rate of children in care per 10,000 population aged 0-17   | CH04              | monthly   | Rate per<br>10,000 | 88.4   | 88.4   | 87.7                  | 88.4                  |              | low             | Ψ                 |                 | 95.2+  | -       | <95.2                           | 96.7                  |                     | 103.1                 | 55.0                  | 71.0                  | -                      | 81.8                 |
| B.9 % of long term children in care in placements which have been stable for at (SC) least 2 years  | t                 | monthly   | %                  | 65.1%  | 62.6%  | 65.1%                 | 65.1%                 |              | high            | <b>V</b>          |                 | <62%   | 62%+    | 70%+                            | 65.2%                 |                     | 71.1%                 | 77.0%                 | 71.0%                 | 74.1%                  | -                    |
| B.10 % of children in care who have had 3 or more placements - rolling 12 (SC) months   | OLD               | monthly   | %                  | 8.1%   | 8.3%   | 7.4%                  | 7.4%                  | <br>         | low             | Ψ                 |                 | 16%+   | 8%+     | <8%                             | 9.7%                  |                     | 9.5%                  | 6.0%                  | 10.0%                 | 8.0%                   | -                    |
| B.11 Av. days between a child becoming looked after and having a adoption (SC) placement (A10)  |                   | monthly   | YTD<br>Average     | 384.8  | 361.5  | 387.2                 | 387.2                 |              | low             | Ψ                 |                 | 487+   | -       | <487                            | 492.5                 | ~~~                 | 350.1                 | 274.0                 | 367.0                 | 317.5                  | - 6                  |
| B.12 Av. days between a placement order and being matched with an adoptive (SC) family (A2)   |                   | monthly   | YTD<br>Average     | 191.5  | 184.8  | 182.6                 | 182.6                 |              | low             | Ψ                 |                 | 121+   | -       | <121                            | 197.4                 | $\wedge$            | 160.4                 | 90.0                  | 175.0                 | 135.5                  | - 0                  |
| B.13 (SC) % of care leavers in suitable accommodation   |                   | monthly   | %                  | 95.6%  | 96.8%  | 96.3%                 | 96.3%                 |              | high            | <b>V</b>          |                 | <88%   | 88%+    | 96%+                            | 97.2%                 | 1                   | 87.7%                 | 95.0%                 | 88.0%                 | 93.0%                  | -                    |
| B.14 (SC) % of care leavers in employment, education or training  |                   | monthly   | %                  | 71.3%  | 68.5%  | 66.4%                 | 66.4%                 | <u> </u>     | high            | <b>ψ</b>          |                 | <58%   | 58%+    | 66%+                            | 69.6%                 |                     | 52.9%                 | 72.0%                 | 56.0%                 | 61.0%                  | -                    |
| B.15 (SC) % of agency staff in social care  | OLD               | monthly   | %                  | 7.3%   | 7.9%   | 6.6%                  | 6.6%                  |              | low             | <b>^</b>          |                 | 10%+   |         | <10%                            | 5.40%                 |                     |                       |                       |                       |                        |                      |
| B.16 Young people aged 16 17 (academic age) whose current activity is 'not  | OLD               | annual    | %                  | -      | -      |                       | 0.6%                  |              | low             | Ψ                 |                 |        |         | 1.5%                            | 2.3%                  |                     | 2.3%                  | 0.0%                  | 2.2%                  |                        |                      |
| (EH) known'   | OLD               | monthly   | %                  | 0.8%   | 0.4%   | 0.7%                  | 0.8%                  |              | low             | Ψ                 |                 |        |         |                                 | 1.5%                  | \                   |                       |                       |                       |                        |                      |
| B.17 Young people aged 16 17 (academic age) who are not in education,   | OLD               | annual    | %                  | -      | -      |                       | 4.3%                  |              | low             | •                 |                 |        |         | 4.5%                            | 4.9%                  |                     | 3.5%<br>(21/22)       | 2.0%<br>(21/22)       | 2.6%                  |                        |                      |
| (EH) employment or training (NEET)  | OLD               | monthly   | %                  | 4.3%   | 4.3%   | 4.8%                  | 4.4%                  |              | low             | <del>-&gt;</del>  |                 |        |         |                                 | 4.8%                  | /                   |                       |                       |                       |                        |                      |
| B.18 Young people aged 16 17 (academic age) who are not in education,   | OLD               | annual    | %                  | -      | -      |                       | 4.9%                  |              | low             | Ψ                 |                 |        |         | 6.0%                            | 7.2%                  |                     | 5.8%<br>(21/22)       | 4.2%<br>(20/21)       | 4.7%                  |                        |                      |
| (EH) employment or training (NEET) or 'not known' combined  | OLD               | monthly   | %                  | 5.1%   | 4.6%   | 5.4%                  | 5.2%                  |              | low             | Ψ                 |                 |        |         |                                 | 6.4%                  |                     |                       |                       |                       |                        |                      |
| (EH) No. of young people first time entrants (FTE) into the criminal justice system   | n                 | quarterly | Rate per<br>10,000 | -      | -      | 186<br>Jan 23-Dec 23  | 186<br>Jan 23-Dec 23  |              | low             | <b>^</b>          |                 |        |         | Lower<br>than<br>same qtr       | 170<br>Jan 22-Dec 22  |                     | 177<br>Jan 23-Dec 23  | 91<br>Jan 23-Dec 23   | 166<br>Jan 23-Dec 23  |                        |                      |
| B.20 (EH) Use of Custody  |                   | quarterly | Rate per<br>10,000 | -      | -      | 0.08<br>Jan 23-Dec 23 | 0.08<br>Jan 23-Dec 23 |              | low             | <b>^</b>          |                 |        |         | previous<br>year &              | 0.0<br>Jul 21-Jun 22  |                     | 0.07<br>Jan 23-Dec 23 | 0.00<br>Jan 23-Dec 23 | 0.11<br>Jan 23-Dec 23 |                        |                      |
| B.21 Rate of re-offending by young offenders (re-offending rates after 12 months (EH) aggregated qtly cohort)  B.22 Re-offences by re-offenders (re-offending rates after 12 months aggregated) |                   | quarterly | Binary rate        | -      | -      | 16.1<br>Apr 21-Mar 22 | 16.1<br>Apr 21-Mar 22 |              | low             | Ψ                 |                 |        |         | comparab<br>le with<br>national | 19.8<br>Apr 20-Mar 21 |                     | 38.1<br>Apr 21-Mar 22 | <u> </u>              | 32.1<br>Apr 21-Mar 22 |                        |                      |
| B.22 Re-offences by re-offenders (re-offending rates after 12 months aggregated (EH) qtly cohort)   | u                 | quarterly | Frequency rate     | -      | -      | 2.00<br>Apr 21-Mar 22 | 2.00<br>Apr 21-Mar 22 |              | low             | Ψ                 |                 |        |         | trends                          | 3.56<br>Apr 20-Mar 21 |                     | 4.43<br>Apr 21-Mar 22 | 2.80<br>Apr 21-Mar 22 | 4.07<br>Apr 21-Mar 22 |                        |                      |

\* Reference Number - The letters within the brackets identifies which service within the CYPS Directorate the indicator relates to.

KEY:

(SC) - Social Care Service

(EH) - Early Help Services

\*DOT - Direction of travel represents the direction of 'performance' since the previous month showing if the number or percentage has gone up or down. Colours have been added to help distinguish better and worse performance with the exceptions of measures that are for information only.

- Key: increase/decrease in number/percentage = improvement in performance
   increase/decrease in number/percentage = decline in performance

  - number/percentage remained same as previous month

| *DEE         |  | Plar<br>3S       |          | DATA          |          |        |                | 2023/24 |   |                 | ľ        | TARGET & TOLERANCES |      |       | YR ON Y           | R PERFORMANCE | LATEST BENCHMARKING          |                    |  |                    |
|--------------|--|------------------|----------|---------------|----------|--------|----------------|---------|---|-----------------|----------|---------------------|------|-------|-------------------|---------------|------------------------------|--------------------|--|--------------------|
| *REF<br>NO.  | INDICATOR  | Counci<br>Measur | TIMELINE | NOTE          | Jan-24   | Feb-24 | Mar-24<br>(Q4) | 20      | 23/24 YTD                                     | Good<br>perf is |          | RAG<br>(Yr End)     | Red  | Amber | Green<br>(target) | 2022/23       | Yr on Yr trend               | Stat Best standing |  | ile RIA<br>2022/23 |
| A.1<br>(SC)  | No. of all contacts (children) received  |                  | monthly  | Count         | 1525     | 1588   | 1607           | 18371   | الايسالل                                      | info            | Ψ.       |                     |      |       |                   | 18784         |                              |                    |  |                    |
|              | No. of all contacts (children) identified as social care (inc. harm, not sure, info only & view files)                                 |                  | monthly  | Count         | 1030     | 1061   | 1006           | 11962   |   | info            | <b>^</b> |                     |      |       |                   | 11912         | $\nearrow \searrow \searrow$ |                    |  |                    |
| A.2<br>(SC)  | No. of all contacts (families) identified as social care   |                  | monthly  | Count         | 569      | 568    | 539            | 6329    |   | info            | <b>^</b> |                     |      |       |                   | 6282          | \                            |                    |  |                    |
|              | % of all contacts identified as social care  |                  | monthly  | %             | 67.5%    | 66.8%  | 62.6%          | 65.1%   |   | info            | <b>^</b> |                     |      |       |                   | 63.4%         | \                            |                    |  |                    |
|              | No. of all contacts (children) identified as early help (inc. help, step down/co-working, EHA partner)                                 |                  | monthly  | Count         | 473      | 509    | 569            | 6216    | 111111  | info            | ¥        |                     |      |       |                   | 6702          | /                            |                    |  |                    |
| A.3<br>(SC)  | No. of all contacts (families) identified as early help  |                  | monthly  | Count         | 229      | 244    | 277            | 3044    |   | info            | ¥        |                     |      |       |                   | 3133          | /                            |                    |  |                    |
|              | % of all contacts identified as early help   |                  | monthly  | %             | 31.0%    | 32.1%  | 35.4%          | 33.8%   |   | info            | Ψ        |                     |      |       |                   | 35.7%         | /                            |                    |  |                    |
| A.4          | No. of contacts (children) with decision within 1 working day (social care target)   |                  | monthly  | Count         | 551      | 550    | 485            | 5264    |   | high            | •        |                     |      |       |                   | 6045          | \                            |                    |  |                    |
| (SC)         | % of contacts with decision within 1 working day (social care target)  |                  | monthly  | %             | 81.5%    | 79.8%  | 67.2%          | 69.3%   | <u> </u>                                      | high            | Ψ        |                     | <82% | 82%+  | 88%+              | 72.1%         |                              |                    |  |                    |
| A.5<br>(SC)  | % of re-referral in 12 months - in current month   | CH0<br>6         | monthly  | %             | 10.8%    | 11.7%  | 7.4%           | 17.3%   | dulli   | low             | <b>^</b> |                     | 30%+ | 22%+  | <22%              | 17.2%         |                              |                    |  |                    |
| A.6<br>(SC)  | No. of children currently supported by the Evolve service at risk of child sexual exploitation (CSE)                                   | CH0<br>7         | monthly  | Count         | 28       | 27     | 23             | 23      |   | info            | ₩ .      |                     |      |       |                   | 37            |                              |                    |  |                    |
| A.7<br>(SC)  | No. of children currently supported by the Evolve service at risk of child criminal exploitation (CCE)                                 |                  | monthly  | Count         | 57       | 55     | 59             | 59      | 1111_111111                                   | info            | <b>^</b> |                     |      |       |                   | 58            |                              |                    |  | -                  |
| A.8<br>(SC)  | No. of open children in need (CIN) cases   |                  | monthly  | Count         | 767      | 821    | 846            | 846     | <b> </b>                                      | info            | ₩        |                     |      |       |                   | 1007          |                              |                    |  | 1<br>2<br>0<br>0   |
| A.9<br>(SC)  | No. of children with a child protection (CP) plan  |                  | monthly  | Count         | 306      | 278    | 261            | 261     | <u>                                      </u> | info            | Ψ.       |                     |      |       |                   | 397           | $\sqrt{}$                    |                    |  | c<br>C             |
| A.10<br>(SC) | % of child protection plans (CPP) with visits in the last 2 weeks  |                  | monthly  | %             | 93.6%    | 95.7%  | 91.8%          | 91.8%   | <u> </u>                                      | high            | <b>↓</b> |                     | <87% | 87%+  | 95%+              | 95.1%         |                              |                    |  |                    |
| A.11<br>(SC) | % of children becoming the subject of a child protection plan (CPP) for a second or subsequent time within 2 years - rolling 12 months | OLD              | monthly  | %             | 12.2%    | 11.1%  | 12.5%          | 12.5%   |   | low             | <b>^</b> |                     | 16%+ | 8%+   | <8%               | 8.7%          | $\nearrow$                   |                    |  | 9.3%               |
| A.12<br>(SC) | No. of children in care  |                  | monthly  | Count         | 506      | 506    | 502            | 502     | <br>  | info            | ₩.       |                     |      |       |                   | 545           |                              |                    |  |                    |
| A.13<br>(SC) | % of children in care visits up to date & completed within timescale of national minimum standard                                      |                  | monthly  | %             | 97.6%    | 96.7%  | 97.6%          | 97.6%   | [.].[   | high            | <b>^</b> |                     | <90% | 90%+  | 98%+              | 95.6%         |                              |                    |  |                    |
| A.14<br>(SC) | % of children in care care plans reviewed within timescales  |                  | monthly  | %             | 78.7%    | 94.2%  | 93.3%          | 89.2%   |   | high            | Ψ.       |                     | <87% | 87%+  | 95%+              | 91.5%         |                              |                    |  |                    |
| A.15<br>(SC) | % of children in care having an initial health assessment within timescale   |                  | monthly  | %             | 52.2%    | 100.0% | 66.7%          | 63.1%   | <u>                                      </u> | high            | <b>^</b> |                     |      |       |                   | 61.5%         |                              |                    |  |                    |
| A.16<br>(SC) | % of children in care with a up to date health assessments   |                  | monthly  | %             | 91.3%    | 88.8%  | 83.7%          | 83.7%   |   | high            | <b>^</b> |                     | <87% | 87%+  | 95%+              | 78.7%         |                              |                    |  |                    |
| A.17<br>(SC) | % of children in care with a up to date dental assessments   |                  | monthly  | %             | <u> </u> | 65.9%  | <u> </u>       |         |   | high            | Ψ        |                     | <87% | 87%+  | 95%+              | 69.4%         |                              |                    |  |                    |
| A.18<br>(SC) | % of children in care in a family based setting  | OLD              | monthly  | %             | 76.9%    | 75.3%  | 75.3%          | 75.3%   | ıllıııı                                       | high            | Ψ        |                     | <77% | 77%+  | 85%+              | 77.0%         |                              |                    |  |                    |
| (SC)         | No. of care leavers  |                  | monthly  | Count         | 340      | 349    | 348            | 348     | <u> 1111 </u>                                 | info            | <b>^</b> |                     |      |       |                   | 319           |                              |                    |  |                    |
| A.20<br>(SC) | % of eligible children in care & Care Leavers with an up to date pathway plan  |                  | monthly  | %             | 78.0%    | 80.2%  | 80.5%          | 80.5%   | <u></u>                                       | high            | <b>^</b> |                     |      |       |                   | 74.5%         |                              |                    |  |                    |
| A.21<br>(SC) | Av. caseload of social workers in key safeguarding teams (exc. Children's Disability Team)   |                  | monthly  | Average count | 19.4     | 18.5   | 19.4           | 19.4    | l   | low             | Ψ        |                     | 23+  | 19+   | <19               | 22.0          |                              |                    |  |                    |

| *RFF   | Plan   | <b>S</b>                       | DATA  |                                 |   |                | 2023/24 |  |                 |                   |                 | TARGE    | Γ & TOLE | RANCES            | YR ON Y | R PERFORMANCE          | LATEST BENCHMARKING |                      |         |                       |                |
|--|--|--------------------------------|-------|---------------------------------|---|----------------|---------|--|-----------------|-------------------|-----------------|----------|----------|-------------------|---------|------------------------|---------------------|----------------------|---------|-----------------------|----------------|
| *REF INDICATOR NO.   | Council Pi                                   | Measure<br>Aeasure             | NOTE  | Jan-24                          | Feb-24                                    | Mar-24<br>(Q4) | 20      | 23/24 YTD                                      | Good<br>perf is | DOT<br>(Yr on Yr) | RAG<br>(Yr End) | Red      | Amber    | Green<br>(target) | 2022/23 | Yr on Yr trend         | Stat<br>neigh av    | Best stat<br>. neigh | Nat av. | Top qtile threshold 2 | RIA<br>2022/23 |
| A.22 Early Help families where angagement target of 2 days was mot   |  |                                | Count | 60                              | 59  | 58             | 637     |  | info            | 4                 |                 |          |          |                   | 677     | -//                    |                     |                      |         |                       |                |
| (EH) Early Help families where engagement target of 3 days was met   |  | monthly                        | %     | 93.8%                           | 92.2%                                     | 93.5%          | 91.3%   | <u>                                     </u>   | high            | <b>^</b>          |                 | <65%     | 65%+     | 75%+              | 89.3%   |                        |                     |                      |         |                       |                |
| Early help assessments completed within 45 working days.   |  | monthly                        | Count | 70                              | 48  | 70             | 798     |  | info            | <b>↑</b>          |                 |          |          |                   | 755     |                        |                     |                      |         |                       |                |
| (EH) (EHA complete in 48 days from triage decision date (3 days IC plus 45 days for  | or EHA))                                     |                                | %     | 90.9%                           | 88.9%                                     | 95.9%          | 90.1%   | <u>   -  -  -  -  -  -  -  -  -  -  -  -  </u> | high            | <b>↑</b>          |                 | <75%     | 75%+     | 85%>              | 87.6%   |                        |                     |                      |         |                       |                |
| A.24<br>(EH) Early help assessments completed by partners  |  | monthly                        | Count | 27                              | 28  | 49             | 401     |  | info            | <b>↑</b>          |                 |          |          |                   | 372     |                        |                     |                      |         |                       |                |
|  |  |                                | %     | 23.5%                           | 24.4%                                     | 36.8%          | 27.5%   | <u> </u>                                       | high            | 1                 |                 |          |          |                   | 25.6%   |                        |                     |                      |         |                       |                |
| A.25<br>(EH) No. of early help step downs agreed in locality   | Families                                     | monthly                        | Count | 29                              | 19  | 24             | 320     | ılıllıı.                                       | info            | Ψ                 |                 |          |          |                   | 367     |                        |                     |                      |         |                       |                |
|  | Children                                     |                                | Count | 56                              | 40  | 56             | 662     | 11.11  | info            | Ψ                 |                 |          |          |                   | 802     |                        |                     |                      |         |                       |                |
| A.26 No. of early help step ups to social care (episode closure reason - 'Refer to (EH) LCS')                                | Families                                     | monthly                        | Count | 34                              | 23  | 16             | 273     | <u> </u>                                       | info            | Ψ                 |                 |          |          |                   | 286     |                        |                     |                      |         |                       |                |
| A.27 % of children aged 0-5 living in the 30% most deprived SOA's in Rotherham v   | Children                                     |                                | Count | 65                              | 54  | 39             | 593     |  | info            | Ψ                 |                 |          |          |                   | 621     |                        |                     |                      |         |                       |                |
| (EH) Children's Centre   |  | monthly                        | %     | 89.1%                           | 91.5%                                     | 94.5%          | 94.5%   |  | high            | <b>1</b>          |                 |          |          | 95%+              | 92.0%   |                        |                     |                      |         |                       |                |
| A.28 % of children aged 0-5 living in the 30% most deprived SOA's in Rotherham v (EH) Children's Centre activities           | vno nave accessed                            | monthly                        | %     | 70.8%                           | 76.9%                                     | 80.6%          | 80.6%   |  | high            | 1                 |                 | <u> </u> |          | 65%+              | 78.0%   | $\nearrow \nearrow$    |                     |                      |         |                       |                |
| A.29<br>(EH) No. of family group conferences which have taken place  | Families                                     | monthly                        | Count | 12                              | 10  | 6              | 124     | <u> </u>                                       | info            | <b>1</b>          |                 |          |          |                   | 98      | /,                     |                     |                      |         |                       |                |
|  | Children                                     |                                | Count | 23                              | 11  | 7              | 208     | <u> </u>                                       | info            | <b>1</b>          |                 |          |          |                   | 179     |                        |                     |                      |         |                       |                |
| A.30 (EH) No. of edge of care children open at end of reporting period   |  | monthly                        | Count | 45                              | 54  | 51             | 51      | <u> </u>                                       | info            | Ψ                 |                 |          |          |                   | 52      | New measure<br>2022/23 |                     |                      |         |                       | _              |
| A.31 (INC) No. of children with an Education Health & Care plan  | CI<br>(                                      | : IVIONTNIV                    | Count | 3320                            | 3339                                      | 3360           | 3360    | <u></u>  | info            | <b>↑</b>          |                 |          |          |                   | 3056    |                        |                     |                      |         |                       | 99             |
| A.32 No. of Education Health & Care plans issued in 20 weeks   | OI   | _D Monthly                     | Count | 16                              | 33  | 43             | 92      | 11  -111-1                                     | high            | <b>1</b>          |                 |          |          |                   |         |                        |                     |                      |         |                       |                |
| (INC) (YTD and year on year figure is January 1st to December 31st in line with DfE reporting)                               |  |                                | %     | 43.2%<br>'Reporting             | 75.0%                                     | 81.1%          | 68.7%   | <u>illillii</u>                                | high            | <b>^</b>          |                 | <47%     | 47%+     | 58%+              | 51.6%   | \                      |                     |                      |         |                       |                |
|  | Number due                                   | Annually                       | Count | will begin<br>following<br>stat | 165                                       | -              | 165     |  | high            | n/a               |                 |          |          |                   |         |                        |                     |                      |         |                       |                |
| A.33 No. of Education Health and Care Plan (EHCP) PRIMARY transition reviews (INC) completed by the Stat Deadline (15th Feb) | Number Finalised                             | Annually                       | Count | deadline,<br>15th<br>February   | 158                                       | -              | 158     |  | high            | n/a               |                 |          |          |                   |         |                        |                     |                      |         |                       |                |
| (INC) completed by the Stat Deadline (15th Feb)  | % on time at Stat Deadline                   | Annually                       | %     | 2024.<br>Measure<br>has been    | 95.8%                                     | -              | 95.8%   |  | high            | n/a               |                 | <50%     | 50-70%   | 70%               |         |                        |                     |                      |         |                       |                |
|  | Number Outstanding Cases after Stat Deadline | Monthly after<br>Stat Deadline | Count | reviewed<br>and is now          | 7   | 4              | 4       |  | high            | n/a               |                 |          |          |                   |         |                        |                     |                      |         |                       |                |
|  | Number due                                   | Annually                       | Count | ·· following st                 | g will begin<br>tat deadline,             | 235            | 235     |  | high            | n/a               |                 |          |          |                   |         |                        |                     |                      |         |                       |                |
| A.34 No. of Education Health and Care Plan (EHCP) SECONDARY transition   | Number Finalised                             | Annually                       | Count | Measure<br>reviewed             | rch 2024.<br>has been<br>and is now       | 186            | 186     |  | high            | n/a               |                 |          |          |                   |         |                        |                     |                      |         |                       |                |
| (INC) reviews completed by the Stat Deadline (31st March)  | % on time at Stat Deadline                   | Annually                       | %     | differently.  data cannot       | reported<br>. Historical<br>t be reported | 79.1%          | 79.1%   |  | high            | n/a               |                 | <50%     | 50-70%   | 70%               |         |                        |                     |                      |         |                       |                |
|  | Number Outstanding Cases after Stat Deadline | Monthly after<br>Stat Deadline | Count | in this sa                      | ame way.                                  | 49             | 49      |  | high            | n/a               |                 |          |          |                   |         | ,                      |                     |                      |         |                       |                |
| A.35 No. of Education Health & Care Plan (EHCP) tribunal cases open at the end of  | of the month                                 | Monthly                        | Count | 16                              | 14  | 24             | 24      | allud .  | info            | <b>1</b>          |                 |          |          |                   | 13      |                        |                     |                      |         |                       |                |

\* Reference Number - The letters within the brackets identifies which service within the CYPS Directorate the indicator relates to.

KEY:
(SC) - Social Care Service
(EH) - Early Help Services
(INC) - Inclusion Services

**CYPS Education Indicators** 

As at month end : March 2024 (Quarter 4 - 2023/24)

\*DOT - Direction of travel represents the direction of 'performance' since the previous month showing if the number or percentage has gone up or down. Colours have been added to help distinguish better and worse performance with the exceptions of measures that are for information only.

- Key: increase/decrease in number/percentage = improvement in performance - increase/decrease in number/percentage = decline in performance
  - number/percentage remained same as previous month

| *DEF  |          | o                      | DATA         | 2022/23              | 3 2023/24 T. |        |       |        |                 |                |     | TARGE  | TARGET & TOLERANCES |                                |         | R PERFORMANCE                          | LATEST BENCHMARKING |                    |         |                        |                       |  |  |
|---|----------|------------------------|--------------|----------------------|--------------|--------|-------|--------|-----------------|----------------|-----|--------|---------------------|--------------------------------|---------|--|---------------------|--------------------|---------|------------------------|-----------------------|--|--|
| *REF INDICATOR NO.  | Council  |                        | DATA<br>NOTE | Term 3               | Term 1       | Term 2 | 2023/ | 24 YTD | Good<br>perf is | DOT*<br>(term) | RAG | Red    | Amber               | Green<br>(target)              | 2022/23 | Yr on Yr trend                         | Stat neigh av.      | Best stat<br>neigh | Nat av. | Top qtile<br>threshold | Yorkshire<br>& Humber |  |  |
| ED.1 % of all eligible 2 year olds taking up an early education place   | CH(<br>8 | Termly                 | %            | 85.6%                | 94.0%        | 90.9%  | 90.9% |        | high            | Ψ              |     | <80%   | 80%+                | 85%+                           | 85.6%   |  | 79.7%               | 91.8%              | 74.0%   | 82.0%                  | 76.6%                 |  |  |
| ED.2 % of primary children who were allocated a place at one of their 3  (B) preferences on National Offer Day    |          | Annual                 | %            | -                    | -            | -      | -     |        | high            | n/a            |     | <98%   |                     | 98%+                           | 99.0%   | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |                     |                    | 98.0%   |                        |                       |  |  |
| ED.3 % of secondary children who were allocated a place at one of their 3  (B) preferences on National Offer Day  |          | Annual                 | %            | -                    | -            | 97.4%  | 97.4% |        | high            | <b>^</b>       |     | <94%   |                     | 94%+                           | 96.0%   |  |                     |                    | 96.0%   |                        |                       |  |  |
| ED.4 % of overall attendance  |          | Termly                 | %            | 93.2%                | 93.4%        | 94.0%  | 93.7% |        | high            | <b>^</b>       |     | <93.7% |                     | 93.7%+                         | 93.6%   |  | 93.6%               | 94.3%              | 93.7%   |                        | 93.6%                 |  |  |
| (B) (Statutory school aged children) Secondary  |          | Termly                 | %            | 89.6%                | 90.8%        | 90.2%  | 89.6% |        | high            | <b>V</b>       |     | <91%   |                     | 91%+                           | 90.2%   |  | 90.4%               | 91.1%              | 91.0%   |                        | 90.3%                 |  |  |
| ED.5 % of persistent absence - 10% or more sessions Primary   |          | Termly<br>(cumulative) | %            | 24.9%                | 18.13%       | 18.11% | 18.1% |        | low             | Ψ              |     | 17.7%+ |                     | <17.7%                         | 22.4%   |  |                     |                    | 17.7%   |                        | 18.8%                 |  |  |
| (B) missed (Statutory school aged children) Secondary   |          | Termly<br>(cumulative) | %            | 28.8%                | 26.0%        | 25.8%  | 25.8% |        | low             | ¥              |     | 27.7%+ |                     | <27.7%                         | 25.3%   |  |                     |                    | 27.7%   |                        | 29.7%                 |  |  |
| ED.6 % of early years foundation stage (EYFS) pupils achieving a good let (B) development (GLD)                   | el of    | Annual                 | %            | 67.3%<br>(validated) | -            | -      | -     |        | high            | <b>^</b>       |     |        |                     | 67.3%                          | 67.3%   |  | 66.3%               | 68.8%              | 67.2%   | 69.2%                  | 66.1%                 |  |  |
| ED.7 % of pupils passing the phonics screening check in year 1  |          | Annual                 | %            | 79%<br>(validated)   | -            | -      | -     |        | high            | <b>^</b>       |     |        |                     | Above stat<br>neigh<br>(79.7%) | 79.0%   |  | 79.7%               | 86.0%              | 79.0%   | 81.1%                  | 79.0%                 |  |  |
| ED.10 % of key stage 2 (KS2) pupils achieving expected standard (EXS+) in (B) reading, writing and maths combined | OLI      | ) Annual               | %            | 55.0%<br>(validated) | -            | -      | -     |        | high            | <b>^</b>       |     |        |                     | 59.0%                          | 55.0%   | $\overline{}$                          | 59.8%               | 64.0%              | 60.0%   | 63.1%                  | 58.0%                 |  |  |
| ED.11 % of key stage 2 (KS2) pupils achieving higher standard (HS) in reac (B) writing and maths (R,W&M) combined | ng,      | Annual                 | %            | 5.0%<br>(validated)  | -            | -      | -     |        | high            | <b>^</b>       |     |        |                     | 7.0%                           | 5.0%    | <i></i>                                | 7.2%                | 10.0%              | 8.0%    | 10.1%                  | 7.0%                  |  |  |
| ED.15 % of key stage 4 (KS4) pupils achieving grade 5 or above in English (B) maths                               | ınd      | Annual                 | %            | 38.7%<br>(validated) | -            | -      | -     |        | high            | •              |     |        |                     | 45.1%                          | 38.7%   |  | 39.9%               | 45.0%              | 42.2%   | 49.76%                 | 42.4%<br>42.4%        |  |  |
| ED.16 (B) Average progress 8 score (progress from Y6 > Y11)   | OLI      | ) Annual               | Av.          | -0.15<br>(validated) | -            | -      | -     |        | high            | •              |     |        |                     | -0.03                          | -0.15   |  | -0.20               | 0.12               | -0.06   | 0.13                   | -0.06 <b>(</b> )      |  |  |
| ED.17 (B) Average attainment 8 Score (attainment at Y11)  | OLI      | ) Annual               | Av.          | 43.10<br>(validated) | -            | -      | -     |        | high            | <b>V</b>       |     |        |                     | 46.20                          | 43.10   |  | 43.60               | 45.60              | 44.60   | 48.41                  | 44.60                 |  |  |
| ED.18 (B) English Baccalaureate (Ebacc) average points score  |          | Annual                 | Av.          | 3.58<br>(validated)  | -            | -      | -     |        | high            | •              |     |        |                     | 4.05                           | 3.58    |  | 3.75                | 3.97               | 3.88    | 4.34                   | 3.86                  |  |  |
| ED.19 Primary   |          | Termly                 | Count        | 153                  | 149          | 97     | 246   |        | low             | Ψ              |     |        |                     |                                | 421     |  |                     |                    |         |                        |                       |  |  |
| (A) No. of suspensions during the term  Secondary   |          | Termly                 | Count        | 1515                 | 2101         | 1506   | 3607  |        | low             | Ψ              |     |        |                     |                                | 4780    |  |                     |                    |         |                        |                       |  |  |
| ED.20 No. of permanent evaluations during the term  | OLI      | ) Termly               | Count        | 4                    | 6            | 5      | 11    |        | low             | Ψ              |     |        |                     |                                | 10      |  |                     |                    |         |                        |                       |  |  |
| (A) No. of permanent exclusions during the term  Secondary  | OLI      | Termly                 | Count        | 22                   | 45           | 28     | 73    |        | low             | Ψ              |     |        |                     |                                | 82      |  |                     |                    |         |                        |                       |  |  |
| ED.21 No. of active children missing from education (CME) cases   |          | Termly                 | Count        | 76                   | 108          | 110    | 110   |        | low             | <b>^</b>       |     |        |                     |                                | 76      |  |                     |                    |         |                        |                       |  |  |
| ED.22 No. of elective home educated (EHE) children at period end  |          | Termly                 | Count        | 397                  | 454          | 523    | 523   |        | low             | <b>^</b>       |     |        |                     |                                | 397     |  |                     |                    |         |                        |                       |  |  |
| ED.23 % of children in care (CiC) with an up-to-date Personal (A) Education Plan (PEP) in term                    | /11      | Termly                 | %            | 98.9%                | 99.1%        | 93.5%  | 96.4% |        | high            | •              |     | <90%   | 90%+                | 95%+                           | 98.9%   |  |                     |                    |         |                        |                       |  |  |

\* Reference Number - The letters within the brackets identifies which type of indicator it is. **KEY:**(B) - Benchmark indicator
(A) - Activity indicator

#### A-Z Glossarv Definition Term Academic year The academic year runs from September to July over 3 terms (Autumn, Spring & Summer). Following a child becoming looked after, it may be deemed suitable for a child to become adopted which is a legal process of becoming a non-biological parent. The date this is agreed to be in Adoptions the best interests of the child is known as their 'SHOBPA'. Following this a family finding process is undertaken to find a suitable match based on the child's needs, followed by placement with their adopter(s). Placement are monitored and assessed before the final adoption order is granted. 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 Assessment 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 Comparing ourselves to others to help evaluate performance, efficiency of processes and value for money. It is always important in any comparison work that we consider whether the context of Benchmarking that authority or group (see statistical neighbours/comparators) Care Leavers A care leaver is, a person 25yrs or under; has been looked after by a LA for 13wks+ since 14yrs; and has been looked after by a LA at school-leaving age or after. CCE Child Criminal Exploitation Child Protection (CP) Visits Local standards state that any child subject to a child protection plan should be visited at least every two weeks (exc. children on a CPP for less than a week). **Child Protection Conferences** 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. (initial & review conferences) Following a child protection conference where information is considered the best course of action is agreed leading 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. Child protection plans remain in force Child Protection Plan (CPP) 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. If a 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 Children in Need (CiN) Section 17 of the Children Act 1989. This means that the local authority is now legally obliged to provide the necessary services and support. Children missing from education A child missing from education is a child of compulsory school age who is not on a school roll, and is not receiving suitable education otherwise than at a school. (CME) Contact A contact is where an LA receives a contact about a child, and where there is a request for general advice, information or a social care service. CSE Child Sexual Exploitation In the law, custody is used in criminal and family law. In criminal law, a person is in custody when-after being arrested or convicted of a crime-they are held in jail or prison. Such persons are Custody under state control until they are acquitted of their alleged crime or the conclusion of their prison sentence. Dental assessment A dental assessment will be requested by the Social Worker every six months for children under 5 years old and annually for those over 5 and up to 18 years. DfE The Department for Education is responsible for education and children's services in England. Has performance improved or declined? Remembering that 'high' figures are not always related to better performance. So on occasion direction of travel can be positive when the data has Direction of Travel (DOT) decreased. The aim of the service is to support children to continue to live at home and prevent family breakdown. It is a resource for families where practitioners have significant concerns that a child or Edge of care young person is on the edge of care - and may need to become looked after. Education, Health and Care Plan An EHCP involves parents, carers, young people and children in decisions about what support a child or young person needs, now and in the future. It's prepared in partnership with professionals (EHCP) working across education, health and social care specialist services. Education, employment or training This indicator presents the share of young people who <u>are</u> in employment, education or training (NEET), as a percentage of the total number of young people. (EET) Elective home education is a term used to describe a choice by parents to provide education for their children at home or in some other way they desire, instead of sending them to school full-Elective Home Educated (EHE) Episode An episode is the timeframe of a family working with Early Help. First time entrants (FTE) into the Criminal Justice System A FTE is an offender who has. received their first reprimand, warning, caution or conviction for an offence processed by a police force in First time entrant (FTE) England or Wales or by the British Transport Police. Following an initial health assessment when entering care a review health assessments (RHA) will be requested by the Social Worker every six months for children under 5 years old and Health assessment annually for those over 5 and up to 18 years. Indicators A measure which helps quantify the achievement of a desired outcome. Initial Health Assessment identifies existing health problems and deficits in previous healthcare and provides a baseline for managing the child's future health needs. The forms must be raised as Initial health assessment soon as the. child becomes Looked After to ensure that Statutory Guidance is met. These are agreed within local policy and outline our expectations of service for our customers. These should, match or preferably be higher than the minimum outlined in National Standards Local Standards (where applicable). Children in care are children who have become the responsibility of the local authority either voluntarily by parents struggling to cope or through an intervention by children's services because a child is at risk of significant harm. CiC review meetings are convened to consider the plan for the welfare of CiC and how to achieve permanence for them within a timescale that meets their Children in Care (CiC) needs. The LA is responsible for visiting CiC wherever they are living to ensure his/her welfare continues to be safeguarded and promoted and the LA should ensure that every CiChas his/her health needs fully assessed and a health plan clearly set out. Multi-Agency Safeguarding Hub MASH provides triage and multi-agency assessment of safeguarding concerns - in respect of vulnerable children and adults. It brings together professionals from a range of agencies into an (MASH) integrated multi-agency team. Measures Performance measures are how well a particular service or system is working as opposed to the impact on whole populations - 'Management Information'. There are 2 National offer days each year, one for Primary school and one for Secondary School. These are the dates that the Primary/Secondary school allocations are communicated to National offer day

parents. Parents will find out if they have secured a place at their chosen school for their children, or if they have one of their other preferred choices.

The minimum level of service we are required to delivery based on government guidelines. Where these are not applicable local standards should be set.

National Standards

| Term  | Definition   |  |  |
|---|--|--|--|
| Not in education, employment or training (NEET) | This indicator presents the share of young people who are not in employment, education or training (NEET), as a percentage of the total number of young people.  |  |  |
| Ofsted  | Ofsted is the Office for Standards in Education, Children's Services and Skills. They inspect and regulate services that care for children and young people, and services providing education and skills for learners of all ages.   |  |  |
| Outcomes  | A statement of well-being for our local people. Whether it be children, adults, families or communities.   |  |  |
| Permanent Exclusions                            | Permanent exclusion is the most serious sanction a school can give if a child does something that is against the school's behaviour policy (the school rules). It means that the child is no longer allowed to attend the school and their name will be removed from the school roll.  |  |  |
| Persistent absence                              | Persistent absence is when a pupil enrolment's overall absence equates to 10 per cent or more of their possible sessions.  |  |  |
| Personal education plan (PEP)                   | A PEP is a statutory requirement for all looked after children to ensure that a record is maintained regarding the child's educational progress and thus it forms an integral part of the child's overall care plan.   |  |  |
| Placements                                      | A CiC placement is where a child has become the responsibility of the local authority (CiC) and is placed with foster carers, in residential homes or with parents or other relatives. 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.             |  |  |
| Quarter/Quarterly                               | Formal performance reporting follows a three monthly (quarterly) reporting schedule based on the financial year. Shown in the annual reporting wheel.  1st Quarter – April to June  2nd Quarter – July to September  3rd Quarter – October to December  4th Quarter – January to March   |  |  |
| RAG Status                                      | When monitoring progress on either plans or performance indicators a colour coded assessment of risk is undertaken against each item to assess whether we are on track to meet our target.  This risk status is known by the acronym 'RAG'. Standard definition for this is as follows;  Red – Off track  Amber – Satisfactory progress but not fully reaching target set  Green – On track                                    |  |  |
| Rate per 10,000                                 | A rate gives an indication of an amount that can be equivalent to the rate for a geographical indicator set, enabling the indicator to be comparable.  For example, if a children's & young peoples service is being accessed by 500 per 10,000, it means that 500 children are accessing the service for every 10,000 children in Rotherham. This can then be compared to the rate per 10,000 in other LA's or even national. |  |  |
| Referral  | Contacts received are screened against an agreed multi-agency threshold criteria and where a manager agrees these thresholds have been met then the contact progresses to a 'referral' for consideration of an assessment and/or other services which may be required for a child.   |  |  |
| Re-offending                                    | The underlying principle of measuring re-offending is that someone who has received some form of criminal justice sanction (such as a conviction or a caution) goes on to commit another offence within a set time period.   |  |  |
| Reporting year                                  | The standard reporting year follows the financial year and runs from April to March. However there are exceptions to this where due to the nature of indicators they follow a calendar or academic year. This should be clearly stated in any plan or performance scorecard.   |  |  |
| Rolling 12 months                               | Indicators that are 12 months rolling take into account the current month and the previous 11 months.  For example, a measure being reporting in January 2022 will also include February 2021 to December 2021   |  |  |
| Section 47 (S47)                                | The Strategy Discussion may then decide to launch a Section 47 enquiry. This means the local authority must investigate the case further.  |  |  |
| SOA's   | SOAs (Super Output Areas), are small areas designed to be of a similar population size, with an average of approximately 1,500 residents or 650 households. They were produced by the Office for National Statistics for the reporting of small area statistics.   |  |  |
| Statistical neighbours/comparators              | Authorities which due to the size and similar needs of their population have been grouped together. There are various groupings available which specialise in specific services for example Ofsted for Children's services and CIPFA for finance related measures. It is important when comparing ourselves to others we use the most appropriate group for that service.  |  |  |
| C4-4-4  | Rotherham Statistical Neighbours - Barnsley, Doncaster, Dudley, North East Lincolnshire, North Lincolnshire, Redcar and Cleveland, Tameside, Telford and Wrekin, Wakefield, Wigan  |  |  |
| Statutory                                       | Something which the Council has to do by law.  |  |  |
| Step down                                       | Step down is the process where an episode is stepped down from Social Care intervention to Early Help  |  |  |
| Step up Strategy Meeting                        | Step up is the process where an episode is stepped up to Social Care intervention from Early Help.  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.  |  |  |
| Suitable Accommodation                          | Accommodation is to be regarded as suitable if it provides safe, secure and affordable provision for young people.   |  |  |
| Suspensions                                     | Suspension is where a child is temporarily removed from school for a fixed period of time. It is important that a continuation of education occurs during this time.   |  |  |
| Targets   | Where we want to be and by when. This can be at indicator level or against actions within a delivery plan.   |  |  |
| Threshold                                       | The criteria required to meet a specific requirement.  |  |  |
| Transition                                      | Transition is where a child is moving from Primary to Secondary school.  |  |  |
| Tribunal  | A tribunal is responsible for handling appeals against local authority decisions regarding special educational needs, including a refusal to: assess a child or young person's educational, health and care (EHC) needs. reassess their EHC needs. issue an EHC plan. change what's in a child or young person's EHC plan.   |  |  |
| Validation                                      | Processes to ensure data quality   |  |  |
| Year to date (YTD)                              | Refers to performance from the beginning of the current financial year up to and inclusive of the reporting period.  |  |  |
| Youth Justice Service (YJS)                     | The primary aim is to prevent offending and re-offending by young people aged 10-17 years as well as supporting young people who are involved in the Criminal Justice system.  |  |  |
| ,   |  |  |  |

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Public Report Improving Lives Select Commission

#### **Committee Name and Date of Committee Meeting**

Improving Lives Select Commission – 30 July 2024

#### **Report Title**

Care Leavers Peer Review Update

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

#### **Strategic Director Approving Submission of the Report**

Nicola Curley - Strategic Director, Children & Young Peoples Service

#### Report Author(s)

Jane Wood – Head of Service, Children in Care Jane-E.Wood@rotherham.gov.uk

Monica Green – Assistant Director, Children's Social Care Monica.green@rotherham.gov.uk

#### Ward(s) Affected

Borough-Wide

#### **Report Summary**

The report outlines the outcome of the peer challenge conducted by the Local Government Association (LGA) in March 2024 on the Care Leavers service.

#### Recommendations

That Improving Lives Select Commission note the outcomes of the peer challenge and the progress made on the recommendations.

#### **List of Appendices Included**

Appendix 1 LGA Peer Challenge Feedback Report

#### **Background Papers**

None

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

#### **Council Approval Required**

Νo

#### **Exempt from the Press and Public**

#### **Care Leavers Peer Review Update**

#### 1. Background

- 1.1 A peer challenge via the Local Government Association was requested by the Council to establish our current support, services and practice in relation to care leavers. This review took place between 12<sup>th</sup> and 15<sup>th</sup> March 2024. A peer challenge is undertaken by experienced, independent senior managers, who explore key practice, performance and governance information in order to provide a robust assurance process and strategic challenge to Councils, around a specific area of service.
- 1.2 A care leaver is a young person aged 16-25 years old who has been 'looked after' at some point since they were 14 years old and were in care on or after their 16th birthday. As such not all care leavers have left the care of the local authority but will be entitled to support and services.
- 1.3 The key lines of enquiry agreed prior to the review being undertaken are as follows:
  - Leadership and Governance
  - ➤ Do our care leavers have timely and robust pathway plans, which support their transition to adulthood and meet their needs and does this process start at an early enough stage?
  - ➤ Do our unaccompanied asylum-seeking young people have bespoke plans for their needs?
  - ➤ Do our accommodation options meet the needs of our care leavers, enabling them to transition successfully to adulthood?
  - ➤ Do we support care leavers to have successful and long-lasting relationships with family and connected people?
  - ➤ Is our draft Local Offer ambitious enough for our Care Leavers and does it support them to have access to quality education or training and employment opportunities?
  - Are leaders as corporate parents tackling disparities in the physical and mental-health outcomes of care leavers and are they able to access help when they need it?
- 1.4 The review included onsite and off-site activity, including case file auditing and interviews with staff, partners and young people. More than 70 practitioners, foster carers, managers and partners were spoken to as part of the review. The peer review team visited various sites, attending focus groups and meeting with a number of care leavers.

#### 2. Key Issues

2.1 In Rotherham, we are committed to ensuring that our care Leavers achieve their aspirations and the best possible outcomes for their future. We want to deliver the best service we can to support care leavers to be successful in adulthood.

- 2.2 In January 2023, a new judgement for Care Leavers was introduced to the Ofsted ILACS inspection framework: The experiences and progress of children in care and care leavers.
- 2.3 Inspections also consider whether local authorities are making good decisions for care leavers, and what they are doing to support them into adulthood. The new judgement focuses on the things that matter most to care leavers' lives, including their:
  - Relationships and access to social and recreational opportunities.
  - Ability to influence the services they are offered.
  - · Health and emotional well-being.
  - · Learning and employment opportunities.
- 2.4 The review identified that there was a commitment from senior leaders in children's services, wider corporate services and health to meet the needs of, and improve outcomes for care leavers. The review evidenced a number of strengths in service and practice and also robustly reviewed the key lines of enquiry requested by the Council. Recommendations to strengthen practice were made in a number of areas and will be shared with Improving Lives Select Commission via a separate presentation.
- 2.5 The Corporate Parenting Partnership Board is responsible for overseeing the delivery of Rotherham Leaving Care Strategy. The Board meets four to six times per year and is responsible for ensuring that the council fulfils its role as corporate parent. The Board will ensure that officers are held to account for the outcomes of children in care and care leavers and that their best interests are at the centre of decision making.
- 3. Options considered and recommended proposal
- 3.1 Not applicable.
- 4. Consultation on proposal
- 4.1 All partners have been consulted in respect of the Peer Review and have contributed to the process of this. Partners have been asked to consider the recommendations and outcome of the Review.
- 5. Timetable and Accountability for Implementing this Decision
- 5.1 A Leaving Care Strategy is underway and will be completed by September 2024, with an associated Action Plan, this will outline the timetable for when the recommendations of the review will be fully implemented.
- 6. Financial and Procurement Advice and Implications
- 6.1 Not applicable at this stage.
- 7. Legal Advice and Implications:

- 7.1 Not applicable at this stage.
- 8. Human Resources Advice and Implications
- 8.1 Not applicable at this stage.
- 9. Implications for Children and Young People and Vulnerable Adults
- 9.1 These issues are highlighted within the report.
- 10. Equalities and Human Rights Advice and Implications
- 10.1 These issues are highlighted within the report.
- 11. Implications for CO<sub>2</sub> Emissions and Climate Change
- 11.1 Not applicable
- 12. Implications for Partners
- 12.1 The implications for parents are highlighted within the peer review report.
- 13. Risks and Mitigation
- 13.1 Not Applicable.

#### Accountable Officer(s)

Monica Green, Assistant Director Children's Services.

Jane Wood, Head of Service Children in Care and Corporate Parenting.

Report Author: Jane Wood – Head of Service, Children in Care

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# Rotherham Metropolitan Borough Council Leaving Care Peer Challenge

12th to 15th March 2024

**Feedback Report** 

#### **1.Executive Summary**

Rotherham Metropolitan Borough Council's social care services for children and young people were judged to be "good" following an ILACS inspection undertaken by Ofsted and published in 2022.

This peer challenge, at the request of the council, has focused on young people in care and care leavers aged 16 to 24. At the commencement of the peer challenge the Council had 500 children and young people (aged 0-17) that are looked after by the council and 351 care leavers (aged 18-24), including unaccompanied asylumseeking young people.

The commitment of senior leaders and staff in children's services and local health and accommodation services was clear, with high levels of passion and determination to meet the needs and improve outcomes for care leavers. The peer team were able to identify examples of services making a real difference to the lived experience of care leavers. Performance measured against national indicators was generally high although the quality and consistency of pathways plans was variable.

There is a recognition that there is limited availability of suitable placements for older young people and care leavers within the local area. Consequently, they have to be placed in other council areas and post 18 remain outside the borough. This is reflected in the council's sufficiency strategy, but further work is required to develop the range of accommodation services needed for care leavers. The peer team have recommended a separate leaving care strategy as well as updating the existing sufficiency strategy with clearer focus on care leavers with an implementation plan to help achieve this.

Rotherham has a comprehensive local offer for care leavers but there are areas for improvement particularly regarding the health support post 19 which does not provide a dedicated health offer for care leavers similar to that which it provides to children and young people in care. The local offer is under review and would benefit from being coproduced with young people in care and care leavers to better reflect their wishes and views.

#### 2.Key Recommendations

There are a range of observations and suggestions within the report which the peer team hope will offer practical actions for the council in addition to the conversations which took place during the week on site. The following are the peer team's key recommendations to Rotherham Metropolitan Borough Council and its partners.

1. Dedicated leaving care strategy and updated sufficiency strategy to be developed. The peer team believe that the Council and its partners would benefit from having a dedicated leaving care strategy and sufficiency strategy setting out how the specific needs of this cohort will be catered for. This will help support the clear ambition for care leavers and drive progress.

- 2. Business and needs analysis to drive and shape care leavers strategy with SMART implementation plan. The leaving care strategy should be based on a detailed needs analysis and include an implementation plan which includes the views and wishes of care leavers and has been agreed with other departments of the council such as housing as well as partners where appropriate.
- 3. Project management resource to support care leaver service to develop and deliver strategy. Peers felt that having a dedicated project management resource to assist with implementation and monitoring of the leaving care strategy would ensure schemes can be delivered in a timely manner particularly those involving additional building and capital investment.
- 4. Review the current structure to determine the merits of having a dedicated 16 plus service for young people in care and care leavers including UASC. To enable the council to drive and develop the range of services it wishes to have within the borough the relative merits of having a dedicated 16 plus service will need to be determined.
- **5.** Assess the need for additional capacity for 16 plus service. Determine if there is a business case for additional personal advisers and service manager capacity to enable the earlier allocation of personal advisers at 16 and to manage the range of services likely to be required.
- **6.** In line with the vision, expedite the allocation of personal advisers at the age of 16 to commence work with young people at the earliest opportunity. This will better support and enable effective access to education, employment and training, financial planning, and accommodation prior to and following their 18<sup>th</sup> birthday.
- 7. Personal advisers to be provided with specific training on their role including how to develop high quality and meaningful pathway plans which are updated with the changing needs of the care leavers. To help sustain consistent quality and maintain practice standards of pathway plans personal advisers would benefit from being offered dedicated training and development to ensure they have a good understanding of what is expected of them and what a good plan should include.
- 8. Based on an evaluated needs assessment, additional supported housing and individual accommodation options should be provided in Rotherham to meet the needs of local young people and care leavers, including UASC. The council is committed to keeping its young people and care leavers within the borough but currently does not have sufficient accommodation provision and range of options available to do so and offer placement choice. A more detailed needs and costed options analysis will assist in determining the range of provision and priorities.
- 9. Joint accommodation working group to be established to determine level of need and medium-term implementation and investment plan. Children's social care services will need to work corporately across council services and include housing, planning and financial services and its partners to be able to develop the range of provision which is likely to be required.

- 10. A more impactful approach to coproduction with this group of young people to be introduced and facilitated where the voice of care leavers is visible in all service, policy, and practice developments. Incorporating the wishes and views of young people and care leavers in all service, policy and practice reviews is likely to ensure that the leaving care offer better reflects what they feel will work best for them and cater for their needs.
- 11. Include the development of a separate care leavers forum supported by a dedicated participation resource. To help facilitate the effective engagement of care leavers it will be necessary to have a more dedicated participation resource in place to support regular meetings, events, and use of social media.
- 12. Consider the development of an integrated performance data dashboard which aggregates a range of education, social care and health information etc. to help inform planning and scrutiny. Whilst there is a good range of performance data available the creation of an integrated strategic performance dashboard which aggregates the full range of child and young people level data available would help managers and service commissioners with planning services and monitoring performance. UASC data should be shown as a subset of the main performance data to help with clarifying their specialist needs.
- **13.** Review senior membership of the new Corporate Parenting Partnership Board. The new Corporate Parenting Partnership Board which is due to come into place would benefit from having a broader membership including improved representation from senior leaders in education, health, and housing to help drive the desired service improvements.

#### 3. Summary of Peer Challenge Approach

The fundamental aim of a peer challenge is to help councils and their partners reflect on provision in their local area and what improvements can be made. It is important to remember that the peer challenge is not an inspection; it provides a critical friend approach to challenge the council in assessing its strengths and helping to identify areas for development. The approach has included reviewing the documentation and data provided by the council, reviewing a sample of cases open to the leaving care service prior to the team's arrival on site and during the onsite phase. This involved a review of pathway plan needs assessments, pathway plans and the case record. Peers held meetings with a broad range of senior leaders, managers, and practitioners from within social care, education and health services, foster carers, and unaccompanied asylum seekers and care leavers. It is important to recognise that the findings are based on a range of evidence-based activity and the peer challenge reflects what the peer team read, observed, and heard.

Rotherham Metropolitan Borough Council and its partners are encouraged to reflect on what the findings mean in relation to the local area. They will need to determine how foster carers, education, training and housing providers, parents and carers and young people can be further involved in the improvement work identified during the peer challenge.

#### 4.The Peer Team

Peer challenges are delivered by experienced senior officers. The selection and make-up of the peer team reflects the focus of the peer challenge. Peers were identified based on their relevant experience and expertise and their participation was agreed in advance with the council.

The peers who delivered the peer challenge for Rotherham were:

- Lead Peer Catherine Mc Evoy-Carr, Director of Children's Services, Newcastle City Council.
- Health Peer Penny Earney, LGA Associate.
- **Housing Peer** Katri Wilson, Assistant Director Housing Operations, London Borough of Havering.
- Off-site EHCP Review Peers Amanda Checkley and Jane Ash LGA Associates.
- Peer Challenge Manager Cliff James, LGA Associate.
- Shadow Peer Challenge Manager Peter Wood, LGA Associate.

#### **5.Peer Challenge Process**

The peer team prepared by reviewing a range of strategic and performance documents and data, including a self assessment, to ensure they had a good grasp of the challenges facing the council. Two offsite peers reviewed 16 young people and care leavers open to the children in care and leaving care service aged 16 to 24. A report of their findings was shared with the council in advance of the peer team arriving on site and the findings discussed with senior managers during the on-site phase.

The peer team then spent four days onsite, based at Rotherham Metropolitan Borough Council's main office at Riverside House, Rotherham. During the onsite phase the peers:

- Met in excess of 70 practitioners, managers and partners.
- Visited the Hollowgate 16 plus supported housing service and The Journey the leaving care hub at Chatham Villas.
- Participated in focus groups with foster carers, education leads, practitioners, and managers.
- Met with partners representing health, housing, police, DWP and probation.
- Reviewed a further 4 cases allocated to social workers and 4 cases allocated to personal advisers.
- Met with 3 care leavers and 8 unaccompanied asylum seekers.
- Collectively the team spent more than 300 hours determining findings.

This report provides a summary of the peer team's findings. It builds on the presentation provided by the peer team on the 15<sup>th</sup> March 2024.

By its nature, the peer challenge is a snapshot in time and needs to be viewed in this context.

#### 6.Scope and Focus of the Peer Challenge

In advance of the peer team arriving on-site, Rotherham identified six key lines of enquiry they wanted the team to focus on. In addition to this all LGA peers have commented on leadership and governance which is standard practice for all LGA peer challenges.

Key lines of enquiry:

- Leadership and Governance
- Do our care leavers have timely and robust pathway plans, which support their transition to adulthood and meet their needs and does this process start at an early enough stage?
- Do our unaccompanied asylum-seeking young people have bespoke plans for their needs?
- Do our accommodation options meet the needs of our care leavers, enabling them to transition successfully to adulthood?
- Do we support care leavers to have successful and long-lasting relationships with family and connected people?
- Is our draft Local Offer ambitious enough for our Care Leavers and does it support them to have access to quality education or training and employment opportunities?
- Are leaders as corporate parents tackling disparities in the physical and mental-health outcomes of care leavers and are they able to access help when they need it?

#### 7.Main findings

#### 7.1 Leadership and governance

Senior leaders demonstrate clear evidence of ambition and aspiration for children's services in Rotherham and have a good overall understanding of the improvement challenges they are facing and are addressing issues openly. There is visible commitment from senior leaders, managers and front facing practitioners to deliver improved outcomes for young people and care leavers. Rotherham has a skilled and dedicated practitioner workforce who like working for the council and feel professionally fulfilled and supported by their managers. Peers found however that there is sometimes a disconnect between the council's strategic vision and implementation of it at an operational level.

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There is strong evidence of political oversight and leadership with the lead member playing an active role both locally and nationally and offering experience and insight of the key issues impacting on services to children in care and care leavers. Peers identified confidence in the member officer interface. Political commitment was evident in the desire to deliver good outcomes for the children of Rotherham e.g., cabinet supporting additional investment in new services including improvements in the foster care offer, additional investment in new children's homes and supported accommodation placements for care leavers.

The peer team could not see evidence that the Corporate Parenting Panel is currently driving service improvement and would benefit from having a broader membership involving key stakeholders able to commit to service improvement. The need to refocus the Corporate Parenting Panel has been recognised by senior leaders and plans are being developed to establish a Corporate Parenting Partnership Board.

Rotherham's Corporate Parenting Strategy 2024/27 sets out the council's vision and promises to children in care and care leavers. South Yorkshire Integrated Care Board's (ICB) draft strategy for looked after children and care leavers 2023/28 sets out its vision for physical and mental health support. It acknowledges the need for specialist health provision to be commissioned for care experienced young adults up to age of 25 years, including UASC, SEND, and those within the justice system, as to date the provision only extends to a care leavers 19<sup>th</sup> birthday.

The corporate parenting and sufficiency strategies and leaving care action plan would benefit from being based on a detailed analysis of the needs of children and young people and care leavers in Rotherham. This combined with a SMART implementation plan would lead to more comprehensive service improvement.

Co-production with care leavers and including their views and aspirations is underdeveloped in strategic service plans and the leaving care offer. Supporting care leavers to actively engage with service commissioners and providers will enhance the quality of service plans, policies and the service offer. The peer team felt the plethora of feedback such as those from services like Hollowgate could be better used.

The peer team were able to identify that the joint ICB/RMBC Assistant Director post is supporting effective partnership working and joint commissioning between health and council services. This approach should help to improve timely pathways for agreed joint funding for accommodation and care packages for care leavers transitioning into adult services with complex needs.

There is strong partnership working with South Yorkshire Police and within the local criminal justice system with evidence of criminal mapping and targeted prevention and intervention services in place and effective contextual safeguarding to support children and young people at risk and care leavers.

Performance against national and regional indicators is high for children in care and care leavers in Rotherham with high levels of care leavers in suitable accommodation at 95.5% and accessing education, training and employment at

72.4%. The comprehensive range of performance data is not, however, fully utilised in a way that could better inform strategic planning for a range of health and accommodation services.

# 7.2 Do our care leavers have timely and robust pathway plans, which support their transition to adulthood and meet their needs and does this process start at an early enough stage?

Social workers and personal advisers are highly motivated, know their young people and care leavers well and are committed to achieving improved outcomes for them. Care leavers told peers that they greatly value the support they receive from their social workers and personal advisers who have manageable caseloads to support best practice. There is strong evidence of joint working at an operational level with partners to safeguard young people and care leavers and meeting their needs.

Despite the ambition to allocate personal advisers early there remains a high number of cases being allocated three months prior to a young person reaching their 18th birthday which does not support effective transition planning and is not yet in line with the council's ambition. Heath information provided at 17 as a Health Passport is not being recorded to inform pathway planning in a timely way.

There is good evidence of a strong collaborative focus between adult and children's social care services which is supporting transition pathways for those young people who meet adult services criteria.

Rotherham's "Signs of Safety" practice model was clearly evidenced in pathway plans and case recording and is understood by social workers. The scoring system used is helpful and reflects engagement with young people. This is not the case for personal advisers. Pathways plans tend to be formulaic and are not always valued by care leavers and personal advisers or updated in response to a change in circumstances. They lack specific detail on the pathway needed to achieve aspirations. There is also a lack of evidence of life story work being undertaken, in particular in relation to UASC.

The peer team felt there is insufficient regular training and staff development available regarding leaving care practice to help model what a "good" plan is and how pathway plans should be updated and developed over time.

## 7.3 Do our unaccompanied asylum-seeking young people have bespoke plans for their needs?

The Journey (Rotherham's leaving care service hub) offers an accessible community based one stop shop and good support to unaccompanied asylum seekers (UASC). There is a good understanding of the cultural, social and religious needs of UASC and UASC care leavers and significant efforts are being made by social workers and

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personal advisers to meet these. There are good links with the Refugee Council who visit the hub monthly.

Currently there is insufficient capacity for personal advisers to engage with young people in care at an earlier stage. There is also a recognised lack of expertise to gain an understanding of the history and lived experience of UASC prior to their arrival in the UK and benefits are likely to be gained in addressing this issue.

The virtual school is actively supporting the needs of UASC with additional English teaching being provided and laptops made available for them to use. The local further education college offer to UASC is strong and they are provided with ready access to ESOL and more advanced courses when able and ready to do so.

The ICB has commissioned extended initial health assessments in recognition of the complexity of UASC health needs and to assist with the needs for translation and screening to ensure correct health information is being shared to inform transition planning. Health care plan details are not, however, being routinely used to inform pathway planning.

UASC are frequently placed outside of the borough, and they tend to remain in those areas post 18 which can create issues for them when needing to access the range of support services they require from the council and its partners.

Including UASC performance data as a subset of data on the main performance dashboard will assist with future planning for this group and help distinguish performance and needs of these young people and UASC care leavers from those who originate from the local area.

## 7.4 Do our accommodation options meet the needs of our care leavers, enabling them to transition successfully to adulthood?

Accommodation and placement resources within Rotherham are limited resulting in not insignificant numbers of young people and care leavers including UASC being placed in Sheffield or further afield due to a lack of sufficient placements and housing options in the local area.

There is evidence of increased joint planning with housing colleagues which has led to 10 properties being offered to meet the needs of some young people and care leavers. Care leavers are also given priority 1 access to housing to facilitate independence and the revised allocation banding system is shortly due to change and will offer care leavers further enhanced priority access to housing provision as it becomes available. The number of HMOs used by care leavers has increased and residents are supported to sustain their tenancy.

Hollowgate is an impressive and crucial resource provided by the council and offers comprehensive semi-independent support to prepare young people under 18 for independence. This is well used and highly regarded by the young people staying there and by practitioners. The capacity within Hollowgate is however stretched due to staff vacancies which may impact on the support offer to care leavers.

There has been an increase in in-house foster carers due to a targeted recruitment process over the last year and consistent use is being made of staying put which is a very positive offer for care leavers.

There remains a need to further develop the stock and range of accommodation required to adequately cater for care leavers and reduce the dependence on expensive private housing provision. A more detailed analysis is required to inform the business case and strategy for care leavers to better determine housing needs and the best options for provision. The capital investment programme would benefit from such a needs analysis which is likely to better facilitate care leavers to remain in Rotherham. There are insufficient outcome measures to fully understand the success and effectiveness of providing supported housing and these will need to be developed and put in place. This needs to be undertaken with housing and commissioning colleagues and providers and informed by the wishes and views of young people and care leavers.

Staying close has not been rolled out due to lack of funding from DfE but opportunities need to be considered about how the model might be developed to enable staff in children's homes and supported accommodation to continue to support care leavers post 18.

## 7.5 Do we support care leavers to have successful and long-lasting relationships with family and connected people?

"Staying Put" with in-house and independent fostering agency foster carers is well developed in Rotherham with over 50 care leavers in staying put placements. Foster carers are committed to offering practical and emotional support to the young people they look after whilst in placement and after they have moved on from living with them. Some carers reported that there may be a reluctance to offer staying put placements due to the financial implications. The council may wish to explore this issue further with carers. Not all personal advisers maintain ongoing contact with staying put foster carers post 18 and this was identified as a challenge for some foster carers. Foster carers also felt there were limited opportunities to celebrate success for them and the young people they look after particularly post Covid.

Consideration could be given to supporting some special guardianship carers with a post 18 support package to encourage take up particularly where orders are made for older young people.

There is an ambition to ensure care leavers understand and use their support networks including birth family and friendships. The new Support to Change Team is running a pilot Caring Connections for 16- to 18-year-olds transitioning to independence and targeting isolation and building non biological supportive networks prior to a young person leaving care. This is based on some of the principles of the "Lifelong Links" and builds on the FGC offer for Care Leavers

Personal advisers regularly visit care leavers and support links with the birth family where appropriate. Pathway plans do not however always focus on a young person's

networks and how this will support long lasting relationships. Potential opportunities for reunification and greater contact with birth family would benefit from having a greater focus to be successful e.g. family network meetings and a dedicated resource to explore what support would be required to enable reunification to be successful and endure and avoid an unplanned drift back to birth family which can often happen.

There remain a high number of children placed in independent foster placements and peers were advised that there is a plan to recruit an additional 20 foster carers during 2024/25, equal to the target gained in 23/24. Greater inhouse recruitment will hopefully add to the stock of carers willing to offer staying put placements.

# 7.6 Is our draft Local Offer ambitious enough for our Care Leavers and does it support them to have access to quality education or training and employment opportunities?

Rotherham's current local leaving care offer provides a good range of support and opportunities to its care leavers e.g. priority access to accommodation, financial support and setting up home allowance, help to access education, training and employment, leisure services and driving lessons.

The pathway and personal development toolkit for care leavers is in place and is being well used by care leavers who are supported to identify areas of strengths where they need additional help in developing their independence skills.

The council is in the process of reviewing the local offer and there is a recognition that the accessibility and content of the offer needs to be improved and better communicated to young people and care leavers, including the clarification and revision of the health offer post 18 years. The voice of care leavers does not obviously feature in the local offer and there is limited evidence of coproduction to date. The offer would be strengthened by being able to demonstrate how care leavers have helped to shape it. Additional staffing capacity to support the active participation and engagement of care leavers would, via the Care Leavers' Forum, help achieve this.

Joint working arrangements with specialist officers at the Department of Work and Pensions (DWP) and leaving care team are well developed and target those young people who need support to access employment or further education and training.

The virtual school is having a beneficial impact in Rotherham and members of the virtual school team attend personal education plan meetings to support the allocated social worker and schools and colleges. There is a dedicated post 16 specialist in the team. However, services available to support access to education, employment and training are not however evaluated to determine impact and ongoing engagement by care leavers.

The low numbers of young people in higher education are not fully understood and would benefit from further exploration to help achieve a level which is more consistent with statistical neighbours and the national average.

# 7.7 Are leaders as corporate parents tackling disparities in the physical and mental-health outcomes of care leavers and are they able to access help when they need it?

Rotherham's inhouse therapeutic service is valued by staff and foster carers and quickly responds to issues when they arise.

There are appropriate health services being commissioned to support the physical and mental health needs of children in care and during the first year after they reach 18 however dedicated health services are not currently continuing or being separately commissioned to work with care leavers post 19. Health drop-ins at the Journey leaving care hub are not yet happening. Delays in assessment and funding decisions can lead to uncertainty of post 18 care packages.

Following successful implementation of the dental focus SMILE pilot, care leavers now have access to a dentist. Creative commissioning arrangements for sexual health, drug and substance misuse services providing timely access and appropriate support are in place. The Young Parents Team offers timely support for care leavers up to age 25 who are pregnant and/or become parents.

The Integrated Care Board representation on Corporate Parenting Panel has been inconsistent, and this appears to have impacted on the awareness and implementation of some health initiatives for care leavers. Data collection around impact measures insufficient and Health outcomes for care leavers are not fully understood by the local integrated health system. There is a recognition from health colleagues that the leaving care health offer requires revision. The terms of reference for the joint ICB/RMBC Looked After children and Care Experience Young People Physical and Emotional Health workstream were finalised and ratified in December 2023 with acknowledgement by senior leads for the need of this workstream to be expedited. The articulation of the physical and mental health offer and its effectiveness, needs to be strengthened and developed.

#### 8.Next Steps

Rotherham Metropolitan Borough Council and its partners are encouraged to reflect on what these findings mean in relation to the local area. They along with accommodation and housing providers, education and training providers, parents and carers, young people and care leavers can be further involved in the improvement work relating to the findings of the peer challenge. The council will also want to provide feedback to individuals who have contributed to this peer challenge.

The Local Government Association would be happy to discuss how we could help you further, please contact Richard Cooke, Head of children's services improvement (richard.cooke@local.gov.uk).

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Thank you to everyone involved for their participation in this peer challenge. Please pass on thanks from the peer challenge team to Michelle Hill for her help and assistance prior to the peer challenge and during the on-site phase.

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Public Report Improving Lives Select Commission

#### **Committee Name and Date of Committee Meeting**

Improving Lives Select Commission – 30 July 2024

#### **Report Title**

Scrutiny Review - Preparation for Adulthood for Children and Young People with Special Educational Needs and Disabilities (SEND).

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

#### Strategic Director Approving Submission of the Report

Jo Brown, Assistant Chief Executive

#### Report Author(s)

Natasha Aucott, Governance Advisor natasha.aucott@rotherham.gov.uk

#### Ward(s) Affected

Borough-Wide

#### **Report Summary**

The purpose of this report is to outline the outcomes from the Improving Lives Select Commissions spotlight review on preparation for adulthood, in relation to children and young people with Special Educational Needs and Disabilities (SEND).

#### Recommendations

That Improving Lives Select Commission approve the following recommendations and agree that they be submitted to Cabinet for consideration:

#### 1) School Effectiveness:

- a) That the support available for preparation for adulthood for children and young people with SEND in mainstream education, in both the early years and post sixteen settings, is further enhanced.
- b) That education pathways relating to preparation for adulthood for children with SEND are reviewed, ensuring clear communication of the pathways to parents and carers.

#### 2) Inclusion and Communities:

- a) That information relating to the support available to parents and carers within communities is developed, enabling a seamless service that supports and empowers parent carers.
- b) That the feedback from the Autism Strategy Consultation is reflected in the support offer available, to ensure children and young people feel safe within their communities, at school and online.

c) That there is a further focus on enhancing equality, diversity, and inclusion (EDI) in relation to this area of activity, with a particular focus on improving engagement levels with children and young people with SEND in marginalised communities.

#### 3) Communication:

- a) That established networks and partnerships, such as the Rotherham Parent Carers' Forum, are further embedded, to increase awareness raising and increase the number of SEND families that are engaged and reached in the Borough.
- b) That the process relating to Education, Health and Care Plans is reviewed to ensure the young person's voice is present throughout the process.

#### **List of Appendices Included**

N/A

#### **Background Papers**

- Minutes of Meeting, Health Select Commission, 28 July 2023.
- Preparing for Adulthood Minimum Standards, January 2024.
- Quality Assurance Preparation for Adulthood Summary Report, March 2023.
- Preparation for Adulthood Work Programme, January 2024.
- Preparation for Adulthood Framework Guidance for Practitioners 2023.

## Consideration by any other Council Committee, Scrutiny or Advisory Panel N/A

#### **Council Approval Required**

Yes

#### **Exempt from the Press and Public**

No

**Scrutiny Review - Preparation for** Adulthood for Children and Young People with Special Educational Needs and Disabilities (SEND).

#### 1. Background

1.1 Preparation for Adulthood has been an on-going area of interest for the Improving Lives Select Commission (ILSC) over recent years, following the SEND inspection in 2021. In discussions, with the Improving Lives Select Commission, the Rotherham Parent Carers' Forum highlighted that a greater focus was required to identify what was in place, to support successful preparation to adulthood for children and young people in Rotherham with SEND and consider whether there were any gaps in the available provision.

The Improving Lives Select Commission agreed to hold a spotlight review on preparation for adulthood which took place on 15<sup>th</sup> February 2024. The methodology is listed in section 3 of the report.

#### 2. Key Issues

2.1 What is "Preparation for Adulthood? For Children and Young People With SEND?

Preparation for adulthood (also known as transition) is the process by which young people who need support or care, move from services provided exclusively for children, to services provided for those over the age of 18, aiming to ensure a seamless transition. The Local Government Association describe successful preparation for adulthood as "A successful transition from children's and young people's services to adult care and support, needs the young person, their families, and professionals to work together with the young person at the centre of discussions. Legislation gives local authorities a legal responsibility to co-operate, and to ensure that all the correct people work together to get the transition right for a young person".

The support provided to children and young people assists with preparing for adult life and often includes the following aspects:

- Education, Employment and Training
- Friends, Relationships, and the Community
- Health
- Independent Living.
- 2.2 Why is Preparation for adulthood an identified area of focus?

Between the 5th and 9th July 2021, Ofsted, and the Care Quality Commission (CQC) undertook a joint inspection of Rotherham to judge the effectiveness in identifying and meeting the needs of children and young people who have special educational needs and/or disabilities, as prescribed in the Children and Families Act 2014. The inspection identified four areas of significant concern and prescribed that a Written Statement of Action (WSoA) should be produced, to outline how the areas of significant concern would be addressed. The third area of concern identified by the joint inspection, related to the quality of provision for children and young people's preparation for and transition to, adulthood.

<sup>&</sup>lt;sup>1</sup> LGA Preparation for Adulthood Guide, Preparation for adulthood | Local Government Association.

The WSoA that was developed as a result of the inspection, identified the actions that the partnership would take to address this particular area of concern, how success would be measured and what difference it would make to Rotherham's children and young people with SEND, and their parents and carers.

Emerging from the concern identified and outlined in the WSoA, the Rotherham SEND Strategy was a partnership response that set out four main outcomes to ensure that good practice in working with children, young people, parents and carers would be achieved. Mirroring the WSoA, one of the four outcomes of the SEND Strategy related to preparation for adulthood and aimed to ensure all young people in Rotherham with SEND would be well prepared and supported, to exercise choice and control that would enable them to enjoy fulfilling lives.

The Department of Health also published statutory guidance to support the updated National Autism Strategy, the Fulfilling and Rewarding Lives Strategy, which was developed in December 2014. The revised guidance covered nine areas, with one of these areas being specific to preparation for adulthood and focused on planning in relation to the provision of services for people with autism, as they move from being children to adults.

The Rotherham Autism Strategy 2024-2027 also outlined Rotherham's Four Cornerstones, which structure the Strategy and associated priorities. The Strategy identified key areas, with one of the main area's focusing on preparing for adulthood. The Autism Strategy connects to both the Rotherham's SEND Strategy and Learning Disability Strategy.

#### 3. Methodology

- 3.1 Planning sessions were held in advance of the spotlight review meeting to determine the scope of the review. Briefing materials and resources were circulated in advance of the review session, to inform key lines of enquires (KLOEs). The review itself took place over a single afternoon, with many partners present to provide a range of perspectives and information.
- 3.2 An informal meeting was held with members of the Commission and the Rotherham Parent Carers' Forum (RPCF) in advance of the review. During the meeting the Rotherham Parent Carers' Forum presented their Annual Report and provided detailed information to members on the organisations vision, mission, values and strategic priorities. As part of the presentation to members, the Rotherham Parent Carers' Forum provided information on the 323 workstreams that they were involved in, this included the Preparation for Adulthood Strategic Board, the Education Health and Care Plan Sub-Group and the Written Statement of Action Preparation for Adulthood Sub-Group.
- 3.3 The purpose of the review was to assess what measures were in place at that point in time, to support successful preparation to adulthood for young people in Rotherham with SEND and where required, to identify any potential gaps in provision or area's requiring further focus.

An information pack was circulated to each of the review group members which contained the following reports and/or briefing documents:

- Preparation for Adulthood Framework Guidance for Practitioners 2023.
- Draft Preparation for Adulthood Quality Assurance Summary Report 2022-2023.
- Preparation for Adulthood Work Programme Draft 2024-2025.

The review links to the following Council Plan themes:

3.5

- Every child able to fulfil their potential
- People are safe, healthy and live well
- Expanding economic opportunity
- Every neighbourhood thriving.

The review group consisted of the following members:

3.6

- Councillor Lyndsay Pitchley (Chair)
- Councillor Wendy Cooksey (Vice-Chair)
- Councillor Tony Griffin
- Councillor Maggi Clark
- Councillor Taiba Yasseen

Witnesses were drawn from the Council and its partners. The Chair would like to put on record her thanks for the contribution of each participant and their evident commitment to tackling this issue.

- Councillor David Roche, Cabinet Member for Adult Care, Housing and Public Health.
- Assistant Director, Adult Care and Integration
- SEND Service Manager
- Commissioning Manager
- Head of Service, Adult Care
- Strategic Manager, the Rotherham Parent Carers' Forum
- Operational Manager, the Rotherham Parent Carers' Forum
- Psychologist, specific to inclusion.

#### 4. Summary of the issues raised:

- 4.1 The key lines of enquiry (KLOEs) and issues raised during the review focused on four main areas. They were identified as a result of the background information and the presentations provided to review members, from local authority officers and the Rotherham Parent Carers' Forum and were as follows:
  - Partnership working
  - School effectiveness and education pathways
  - Inclusion and communities

Communication.

#### 4.2 Partnership working

Overall, in relation to partnership working, it was apparent that there was a good strengths-based approach embedded throughout the service and partnership organisations, with robust partnership working in place which could be further enhanced. It was identified that there was a strong foundation with effective networks and many meaningful activities being completed. An example of this was the clear focus on the voice of children and young people with SEND, which was present throughout the development of both the Learning Disability Strategy and the Autism Strategy. Both strategies provided clear evidence of partnership organisations working together to gather a range of views, in creative ways.

#### 4.3 School effectiveness and education pathways

In relation to school effectiveness and education pathways, it was identified that there were good education pathways in place, as demonstrated by the quality standards in relation to education. However, it was evident that further focus was required to ensure pathways were communicated more clearly to parents, carers and young people, this was as a result of feedback from the Rotherham Parent Carers' Forum. It was also acknowledged by the service, that there was less emphasis on preparation for adulthood and independent living in mainstream schools, both in the early years and post sixteen settings. The Rotherham Parent Carers' Forum also provided feedback which identified this as an area requiring further focus. As a result, the review group felt that further work was required, to identify the specific gaps present in current provision available for academically enabled children and young people, with SEND in mainstream education, to determine how this offer could be strengthened.

#### 4.4 Inclusion and communities

In relation to inclusion and communities, the main area identified that required further focus was ensuring that children and young people with SEND could feel safe within their communities. It was evidenced during the review, that the co-production activities undertaken as part of the Autism Strategy development highlighted feedback from children and young people with autism, which expressed that they did not feel safe within their communities, at school or online. It was also identified that whilst there was evidently clear embedded support in place for parents and carers, further work was required to ensure parents and carers could feel further empowered and supported in their journeys. It was also identified that further work was required in relation to Equalities, Diversity, and Inclusion (EDI), specifically in relation to children and young people with SEND in marginalised communities as members felt that this was a gap currently. The service acknowledged during the review that there was further work to be completed, which would focus on providing EDI training to employees and ensuring targeted work was completed within communities, to improve engagement levels with marginalised communities.

#### 4.5 Communication

In relation to communication relating to preparation for adulthood, it was advised that 2,000 SEND families were currently engaging with and being reached by the Rotherham Parent Carers' Forum, out of 11,000 SEND families identified at the point of the review, living within the borough. It was acknowledged that further work was required to ensure clearer pathways were available and to ensure an increase in information and guidance available for parents and carers, to increase outreach and engagement to more SEND families residing within the borough. It was also acknowledged by the service that further work needed to be completed to ensure the young person's voice was present throughout all Education Health Care Plans (EHCP), as feedback on the process by children and young people with lived experience, highlighted that the individuals voice was often missing from the EHCP process.

- 4.6 Questions were raised during the review session which led to the following discussion points:
  - Members felt that the presentations provided during the review session demonstrated that there were good engagement levels within the service and relevant partner organisations.
  - It was acknowledged that there was more work to do in relation to EDI.
     This would include a focus on educating employees in the Council and partner organisations and completing targeted work with minority communities.
  - In relation to the Black Asian Minority Ethnic (BAME) community, it
    was advised that the proportion of BAME children, young people,
    parents and carers accessing the support and services available with
    the Rotherham Parent Carers Forum, was higher than the Rotherham
    borough's average and the national average. Therefore, further work
    would be completed by the Rotherham Parent Carers' Forum to
    identify any specific barriers to the BAME community accessing
    services and any subsequent identifiable improvements.
  - There would be a specific focus on creating more parent-to-parent engagement by sharing of family experiences. This would be achieved by creating and sharing videos which would include real life experiences of communities working with the Rotherham Parent Carers' Forum.
  - There were on average 11,000 children and young people on the SEND register in Rotherham and 3000 of those had an EHCP. It was clarified that children and young people did not require an EHCP to access provisions and services, in relation to preparation for adulthood, although it was acknowledged that there were some services that were led by EHCPs.
  - In relation to the Rotherham Parent Carers' Forum's consultation feedback for the Autism Strategy and children and young people feeling unsafe in their communities, it was clarified that the feedback provided regarding feeling unsafe was not always due to where they lived, it also included examples such as feeling unsafe at school, online and in peer settings. It was also identified that children and

young people felt that others such as their peers, were not understanding of their SEND requirements and needs.

#### 5 Options Considered and the Recommended Proposal

5.1 Members have made a series of recommendations on how the support available for preparation for adulthood for children and young people, along with parents and carers, could be enhanced in Rotherham. It is recommended that Members approve the recommendations.

#### 6. Consultation on proposal

6.1 The review considered evidence from the Cabinet Member for Adult Care, Housing and Public Health, the Assistant Director for Adult Care, Officers in Adult Care and Childrens Services. Evidence was also provided by health partners and partner agencies such as the Rotherham Parent Carers Forum. A full list of those included in providing evidence can be found at section 3.5.

#### 7. Timetable and Accountability for Implementing this Decision

- 7.1 The timetable and accountability for implementing recommendations arising from this report will sit with the Cabinet and officers. The Overview and Scrutiny Procedurals require the Cabinet to consider and respond to recommendations made by scrutiny within two months.
- Implementation of any recommendation made to a partner organisation is at the discretion of the relevant partner organisation. Implementation of recommendations addressed to a directorate of the Council is a matter reserved to the relevant directorate. Timescales for Council directorates responding to scrutiny recommendations are outlined in the Scrutiny Procedure Rules contained in the Constitution of the Council.

#### 8. Financial and Procurement Advice and Implications

8.1 Any financial or procurement implications arising from this report will be considered as part of the Cabinet response to its recommendations.

#### 9. Legal Advice and Implications

9.1 There are no legal implications directly arising from this report.

#### 10. Human Resources Advice and Implications

10.1 There are no human resources implications directly arising from this report.

#### 11. Implications for Children and Young People and Vulnerable Adults

- 11.1 The review links to the following Council Plan themes:
  - People are safe, healthy and live well
  - Every child able to fulfil their potential

- Expanding economic opportunity
- Every neighbourhood thriving.
- The review group has ensured that the implications for children and young people and vulnerable adults were considered throughout the review and they are listed in the main body of the report.

#### 12. Equalities and Human Rights Advice and Implications

12.1 Members of the Improving Lives Select Commission review group have due regard to equalities and human rights in developing recommendations.

#### 13. Implications for CO<sub>2</sub> Emissions and Climate Change

13.1 There are no implications for CO<sub>2</sub> emissions and climate change directly arising from this report.

#### 14. Implications for Partners

14.1 The implications for partners are described in the main sections of the report. Implementation of any recommendation is at the discretion of the relevant partner organisation. The recommendations contained in this report are offered acknowledging the contributions that have been made by each of the partner organisations.

#### 15. Risks and Mitigation

15.1 There are no risks arising directly as a result of this report.

#### Accountable Officer(s)

Emma Hill, Head of Democratic Services

Approvals obtained on behalf of:

|                                   | Name               | Date          |
|-----------------------------------|--------------------|---------------|
| Chief Executive                   |                    | Click here to |
|                                   |                    | enter a date. |
| Strategic Director of Finance &   | Named officer      | Click here to |
| Customer Services (S.151 Officer) |                    | enter a date. |
| Assistant Director of Legal       | Named officer      | Click here to |
| Services (Monitoring Officer)     |                    | enter a date. |
| Assistant Director of Human       |                    | Click here to |
| Resources (if appropriate)        |                    | enter a date. |
| Head of Human Resources           |                    | Click here to |
| (if appropriate)                  |                    | enter a date. |
| The Strategic Director with       | Please select the  | Click here to |
| responsibility for this report    | relevant Strategic | enter a date. |
|                                   | Director           |               |

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| Consultation undertaken with the |                            | Click here to |
|----------------------------------|----------------------------|---------------|
| relevant Cabinet Member          | relevant Cabinet<br>Member | enter a date. |

Report Author: Natasha Aucott, Governance Advisor Natasha Aucott, Governance Advisor

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