Council Report
Improving Lives Select Commission 22nd March 2017

Title
Children’s and Young People’s Services Performance Report - January 2016/17

Is this a Key Decision and has it been included on the Forward Plan? No

Strategic Director Approving Submission of the Report
Ian Thomas, Children and Young People’s Services

Report Author(s)
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Ward(s) Affected
All

Summary
1.1 This report provides a summary of performance under key themes for Children’s Social Care and Early Help Services at the end of the January 2017. It should be read in conjunction with the accompanying performance data report at Appendix A which provides trend data, graphical analysis and benchmarking data against national and statistical neighbour averages.

Recommendations
2.1 The select commission is asked to receive the report and accompanying dataset (Appendix A and B) and consider issues arising.

List of Appendices Included
Appendix A – Early Help Scorecard (January 2016)
Appendix B – Children’s Social Care Performance Report (January 2016)

Background Papers
Ofsted Improvement Letter
Children’s Social Care Monthly Performance Reports

Consideration by any other Council Committee, Scrutiny or Advisory Panel
No

Council Approval Required
No

Exempt from the Press and Public
No
1. Recommendations

1.1 The select commission is asked to receive the report and accompanying dataset (Appendix A and B) and consider issues arising.

2. Background

2.1 This report evidences the council’s commitment to improvement and providing performance information to enable scrutiny of the improvements and the impact on the outcomes for children and young people. It provides a summary of performance under key themes for Children’s Social Care and Early Help Services. It should be read in conjunction with the accompanying performance data report which provides trend data, graphical analysis and benchmarking data against national and statistical neighbour averages.

2.2 Targets, including associated ‘RAG’ (red, amber, green rating) tolerances, are included. These have been set in consideration of available national and statistical neighbour benchmarking data, recent performance levels and, importantly, Rotherham’s improvement journey.

2.3 The narrative supplied within the report has been written in conjunction with the Deputy Strategic Director CYPS and the Assistant Directors of services.

3. Key Issues

3.1 This is the first performance report for Improving Lives Select Commission since the implementation of the new Liquid Logic case management system at the end of October 2016.

3.2 As with any major change in system this changeover created a number of challenges in terms of data quality and reporting. Significant progress has been made, however teams are still adjusting to new recording requirements and addressing data migration gaps. Therefore caution needs to be applied when comparing performance to that achieved earlier in the year.

3.3 Table one and two below highlights some of the achievements and areas for further improvement.
Table 1: Examples of good and improved performance

- There was a 51% increase in January of the number of contacts made to Early Help via the First Response, integrated front door and step down panel (403 compared to 136 in December)

- The official annual outturn for young people who are NEET has now been calculated showing we have successfully achieved our annual targets of 3.1% NEET and 2.8% Not Known. (Definition is based on November-January data)

- The Youth Justice Board (YJB) led Peer Review of Rotherham’s Youth Offending Team (YOT) Board has evidenced good Leadership and Governance.

- Re-referral rates are now demonstrating an improving trend with January’s in month performance of 22.7% being the lowest it has been in over 12 months. 100% of CP cases were reviewed within timescales, 98.3% year to date.

- At the end of January only 1 child (0.3% of cohort) had been subject to a child protection plan for longer than 2 years

- 100% of CP Reviews took place on time for the 6th month running.

- Timeliness of Initial Child Protection Conferences remains in the top quartile nationally

- There were nine adoptions in January which is the highest figure for a single month in over 12 months. It is hoped that there will be another six adoptions completed before the end of the reporting year taking the total to 35.

Table 2 – Key areas for further improvement

- The number of Early Help Assessments completed by Partners remains low with 8.3% (7 out of 84) completed during January.

- Of the 121 Early Help Assessments required in January, 30% were completed within the standard timeframe of 35 days.

- Continuing issues with the data received The Rotherham Hospital Foundation Trust (TRFT) have now been escalated to senior leadership and a review of the 0-19 contract arrangements has been instigated to strengthen future data sharing requirements

- Volume numbers and staff adjustment to new system processed has impacted on social care contact decision within 1 working day. 79.8% of January contacts were in time compared to performance above 90% earlier in the year.

- The proportion of assessments completed in 45 working days was low for January at 67.7% and 84.4% for the year to date compared to 92.8% 2015/16.
3.1 Early Help

3.1.1 In January there were 403 contacts made to Early Help via the First Response, integrated front door and step down panel. This is a difference of 136 cases (51%) from the previous month in December 2016. Of these contacts, 154 resulted in a recommendation for an Early Help Assessment by RMBC staff, with a further 18 contacts resulting in an Early Help recommendation to partners.

3.1.2 The number of Early Help Assessments completed by Partners remains low with 8.3% (7 out of 84) completed during January. Work is ongoing between RMBC and Partners to increase this number and this is a key focus of activity for the Early Help Steering Group which reports directly to the Children, Young People and Families Strategic Partnership.

3.1.3 Of the 121 Early Help Assessments required in January, 30% were completed within the standard timeframe of 35 days. The reasons for delays in assessment can be as a result of various issues; if engagement is delayed at the start because the worker was unable to secure consent for support and. The increase in volume and ongoing reporting issues related to the implementation of the new case management system has significantly impacted upon the service this month. Work is being undertaken to increase the uptake of partner completion of Early Help Assessments so that the responsibility is shared across the wider Children’s workforce.

3.1.4 The number of Early Help Assessments completed by Partners remains low with 8.3% (7 out of 84) completed during January. Work is ongoing between RMBC and Partners to increase this number and this is a key focus of activity for the Early Help Steering Group which reports directly to the Children, Young People and Families Strategic Partnership.

3.1.5 There are continuing issues with the data received from health due to a maternity leave in the data team at The Rotherham Hospital Foundation Trust (TRFT); work round solutions have been implemented and the Head of Service has discussed concerns with health and public health commissioners. A meeting has been held with colleagues at TRFT to raise these concerns and look for solutions. However; the concerns have now been escalated to the Director for Children’s Services, the Head of Service is preparing an overview of concerns (including issues re data sharing in early years and around SEND) for discussion with the CEX of the Trust. Through these discussions it has emerged that TRFT are also having issues with GP data so would be unable to provide this at present this is being escalated/discussed with the Clinical Commissioning Group (CCG). The Head of Service will now commence work with public health, commissioners from the Practice Improvement Partner (Lincolnshire CC) and legal
colleagues to revisit the 0 -19 contract arrangements and to look to make amends where possible to include data sharing.

3.1.6 The Step-Down Panel was implemented on 9th February 2016 and continues to meet weekly. It is jointly chaired by senior managers from both Social Care and Early Help. In total since the panel began we have stepped down 378 families and 906 children. A further 50 families and 94 children recommended to partners.

3.1.7 At the end of January the proportion of young people not in education, employment or training (NEET) was 3.2% and a Not Known figure of 2.8%. This is the final month of the official annual measure (calculated across the three month period November - January) and Rotherham has now successfully achieved annual targets of 3.1% NEET and 2.8% Not Known.

3.1.8 The Youth Justice Board (YJB) led a Peer Review of Rotherham’s Youth Offending Team (YOT) Board focussing upon Leadership and Governance. Feedback was good and recognised the improvements of the board its commitment and energy. Quotes from the feedback are provided below

- “In our view the rationale for the changes is well understood locally and the new partnership enjoys comprehensive support and is already showing a level of attention and creative thinking which we were told was not possible in the past.”
- “What we have found in this short review is the potential for a truly child focussed and restorative youth justice policy and partnership in Rotherham and a genuine will to learn and progress. A solid platform has been established and so the next 12 months should be about consolidation and measured onward development.”

3.1.9 During January, 10 exit surveys were completed, bringing the total to date to 181 since implementation in May 2016. Below is a summary of the survey results;
- 97% (61 people who responded) rated their overall experience of the help and support they received from the worker(s) within the Early Help Team as good or excellent service.
- 98% (69 people of who responded) said they got the support when they most needed it.
- 98% respondents (70 people) said we delivered the Service they were expecting.
- 97% (57 people who responded) said they did feel listened to and involved in the planning and support they received.
- 96% (66 of people responded) said our staff dealt with all the problems they asked them about.

3.2 Contact and Referral

3.2.1 Since September there has been an increase in the number of contacts received each month by the Multi-Agency Safeguarding Hub (MASH) to approximately 1300-1600 rather than the standard 1000-1100 per month.
3.2.2 Due to volumes and also the adjustment to the new system and associated processes has impacted on the timeliness of contact decision which has reduced to 79.8%. This will be closely monitored in the future to ensure improvements once systems and process are embedded.

3.2.3 However the data shows that less contacts are progressing to referral (292 in January compared to 400-500 in earlier months). This may indicate that MASH managers are not allowing volumes to impact on the quality of their decisions and are still remaining stringent in ensuring only appropriate children and families are considered for a social care assessment.

3.2.4 With good quality contact screening the percentage of referrals progressing to an assessment is very high at 98%.

3.2.5 Re-referral rates are now demonstrating an improving trend and January’s in month performance of 22.7% this is the lowest it has been in over 12 months. This indicator is a reflection of the quality of the practice and as this improves so the indicator should continue to reduce. The second re-referral measure which looks at referral data for a full rolling 12 months is also improving at 28.1% but is still higher than the corporate plan target of 23%. Given the trajectory of the monthly data this target should be reached within the next reporting year.

3.3 Assessments

3.3.1 The number of new assessments started in January was 508 which is broadly in-line with normal levels. There were caseload and capacity issues within the Duty and Assessment with average caseloads exceeding the upper limit of 22 cases per worker. This has now been addressed and the service is now at manageable levels with an average caseload of 15.8 cases. To reduce future capacity risks and improve service resilience a fifth Duty Team has been created by reconfiguration of workers the investment in an additional manager.

3.3.2 The previous capacity with the teams created a backlog of assessments which has now been cleared. However this impacted on the timeliness of the assessments being completed with a low of 67.7% completed within the 45 working day standard (previously achieved 98%).

3.4 Plans

3.4.1 Due to technical reasons ‘plans’ data could not be migrated into Liquid Logic. Therefore workers are required to manually input the information for each child as this no longer relates just to the date of the plan but includes the full details, rather than having a separate associated Word document. However once the first plan is created the system rolls forward key information and makes subsequent plans easier to create.
3.4.2 This additional ‘catch-up’ work is reflected in the performance levels for up-to-date plans. Performance is therefore currently low compared to previous levels but improving with 87.6% of Children in Need (CIN), 96.9% of Children on Child Protection Plans (CPP) and 79.4% of Looked After Children (LAC) having an up-to-date plan. This does not necessarily mean the child doesn’t have a plan it simply means it has not been entered on the system. This will improve over the coming months.

3.5 Section 47

3.5.1 The numbers of Section 47 (S47) investigations has remained relatively stable with 111 started in January against a 2016/17 monthly average of 109. When converted into a rate per 10,000 population this is 244.0 which is very high when compared to statistical neighbours and national benchmarking data.

3.5.2 Managers have continued to increase the rigour with which they apply the threshold for S47 and to ensure that the reasons for their decisions are fully justified. This applies as much to the decisions not to instigate S47 as to commence one. This is an area where challenge needs to be sustained to ensure that the right children are subject of S47 investigations and that those investigations are of sufficient quality to properly prove or disprove significant harm to a child. For the year to date 10.6% of ‘concerns not substantiated which is an improvement on last year’s outturn position of 11.2%. Performance is expected to improve with the implementation of the new operating methodology.

3.6 Initial Child Protection Conferences

3.6.1 If it is deemed that there is continuing risk of significant harm to the child then the S47 will progress to an Initial Child Protection Conference (ICPC), this should be held within 15 working days of the S47 starting.

3.6.2 By the end of January there had been 348 children subject to an ICPC, it is therefore projected that by the year end we will be in excess of 450 children which is a substantial increase on the 2015/16 total of 330. This increased workload has not however impacted on timeliness which for the year so far remains excellent at 90.6%, with January in-month being 97.6%. This places Rotherham in the top quartile of performance nationally (87.7%+). Although the numbers not meeting the 15 working day threshold are extremely low they are still reviewed by senior managers to ensure reasons are understood and practice continues to improve.

3.7 Children in Need

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

3.7.2 Following a month on month upward trend of CIN numbers, which culminated in November at a high of 1946, there now has now been a significant drop to 1685 children. This, combined with our numbers of children on a child protection plan, equates to 357.3 per ten thousand population. And places Rotherham back below the statistical neighbour average of 372.4.

3.7.3 This reduction is due to Duty and Assessment managers rigorously applying the threshold to step down when appropriate to Early Help rather than ongoing social care involvement and clear locality processes for regularly reviewing CIN to ensure timely progression and avoid drift. The review work happens on a rolling basis and ensures that workers and team managers are challenged where appropriate in respect of the effectiveness of CIN planning.

3.8 Children subject to a Child Protection Plan

3.8.1 Following a mid-year reduction the number of children with a child protection plan (CPP) has steadily increased to 330 this converts to a rate of 58.6 per 10,000 population which is high when compared to statistical neighbours but remains below the higher numbers seen at the end of 2015/16 (369 at outturn).

3.8.2 It is expected that the numbers will see further reductions as the CP plans are worked more effectively, managers become more confident in their decision making and practice improves with the implementation of the new operating methodology. Long term the figures should then stabilise closer to the benchmarking averages. However the number of plans alone cannot offer assurance that we have identified the right children at risk of or experiencing significant harm are supported by a plan.

3.8.3 At the end of January there was 1 child who has been on a Child Protection Plan (CPP) for over two years, which equates to 0.3% of the CPP population and a significant improvement in the last 12 months. It would be unrealistic to expect such a low proportion is sustainable as it is sometimes right for the child to stay on a CPP for longer than 24 months, however this should be by exception. This performance level is indicative of increased grip and management oversight of these cases.

3.8.4 However, the proportion of children starting a new CPP who are on their second or subsequent plan within 24 months, (a corporate plan indicator), has been steadily rising and in January reached 8.8% against a target of 4%. This needs to be monitored closely to ensure plans are not being ceased too prematurely before all risks have been addressed.

3.8.5 In January the proportion of children on CPPs with up-to-date visits has fallen when compared to previous months to 93% but this
remains excellent performance. Regular performance meetings continue to review progress in this area to ensure that the positive progress made this year can be sustained and where visits are late then the reasons are fully understood and clear measures in place to ensure that each child is seen and that they are safe.

3.8.6 The excellent performance of CPP reviews has been sustained, with 100% achievement for over 6 months.

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

3.9.1 Overall Rotherham has an increasing Looked After Children (LAC) profile. At the end of January there were 482 children in care which equates to a rate of 85.5 per 10,000 population this is high when compared to the 2015/16 year-end position of 76.6 and statistical neighbour average of 75.8.

3.9.2 Work has commenced to develop a range of services that will address this such as an Edge of Care intervention team, Family Group Conferencing and an expanded Therapeutic Team. This will enable more adolescents to remain and/or return home. It is not unusual for numbers of LAC in an authority in intervention to rise as action is taken to address cases which have been drifting previously. The rise in the numbers of care proceedings in Rotherham is testimony to this happening locally. There is no feedback from the courts to suggest that any children are being brought before them unnecessarily.

3.9.3 Timeliness of LAC reviews remains high and monthly performance is relatively stable at above 98%. Slightly lower performance in the summer is impacting on the year to date figure which is slightly lower but good at 96.7%.

3.9.4 Visit data was successfully migrated into the new system. However, since the November performance has been declining. This is, in part, connected to the high turnover of staff across the LAC service, this should improve following the latest round of recruitment and once a stable permanent team management is secured. Performance against National Minimum standards at the end of the January was 78.7% and against local standards 65.8%. This is well below targets and previous performance levels.

3.10 LAC Placements

3.10.1 Although some placement moves are in the best interests of the child the provision of a good stable home is known to be essential for children to achieve good outcomes. Placement performance statistics demonstrate that we need to improve our preventative work to reduce placement disruption.

3.10.2 In January the proportion of children who have had three or more placements has seen a small improvement from 12.8% to 11.7%. Whilst it has reduced it continues to be higher than all other
benchmarks. Our target of reducing to less than 10% remains and is still achievable.

3.10.3 The proportion of our long term children in care who experience a stable placement for over two years is at 66.2% which is a declining picture and places Rotherham below statistical neighbours and the national average.

3.10.4 There is good progress being made in reducing the numbers of children placed in residential care. While the change for them signifies a disruption, and will have some impact on these performance measures, they are only being moved if the new arrangement is demonstrably in their best long term interests. The Fostering Allowance and Support Scheme has recently been approved which should increase the growth of in-house foster carers. This in turn will support placement stability - a recent audit evidenced that over the past six months 18 Independent Fostering Agency placements disrupted whilst only four in-house placements disrupted over the same period. Whilst there can be no direct correlation more in-house placements should support placement stability. In addition the proposed expansion of the in-house LAC therapy team should also ensure greater support to carers and in turn the stability of the placement.

3.11 Looked After Children Health and Education outcomes

3.11.1 Please note there are known delays in the data input for both Health and Dental information therefore it is likely that performance may change when statistics are rerun in future reports.

3.11.2 Current statistics demonstrate that the timeliness of dental checks is declining at 66.1% compared to previous performance of above 71% and a target of 95%.

3.11.3 Health Assessment reviews in the previous three months has been good at over 95% in time and it is expected that the fall in January to 92.7% will be linked to data inputting issues. This will need to be monitored in future months.

3.11.4 Initial Health Assessments (IHA) however remain an area of concern. Every child should have their first (initial) health assessment within the first 20 working days of entering care. However the number of IHAs completed each month is not reflecting the increase in LAC admissions. It is worth noting that January’s improvement to 50% relates to only one IHA out of two.

3.11.5 Personal Education Plans (PEPs) are now produced termly and are led by the Virtual School Team. 90.1% of eligible children have a PEP recorded on their social care record only 63.7% of children have a PEP which is up-to-date (produced within the last term).

3.12 Care Leavers
3.12.1 The number of Care Leavers is stable at 224. Unfortunately at this time we are unable to report direct on accommodation or Education, Employment and Training (EET) status as the data was not migrated during Liquid Logic implementation and requires manual input on all young people’s files. The performance team is working closely with the service and systems support to ensure this gap is addressed.

3.12.2 Whilst the systems developments are being addressed the Leaving Care Team are still ensuring that they can track each young person with an internal tracker.

3.12.3 This tracker showed on 1st February 10 of the young people were not in suitable accommodation, 4 of which were in custody. Of the remaining 6 the service were in touch and supporting all but one of the young people (one in overcrowded family based accommodation, one in hotel/B&B, three ‘sofa surfing’ at friends) The remaining young person has abandoned his tenancy and is wanted by the police.

3.12.4 The Leaving Care tracker also demonstrated that 71.3% of care leavers were in EET. For those aged over 18 this drops to 64.7%. Although this still compares well against the benchmarking averages of 50.4% for statistical neighbour and 48% for national average, it is still not where we want to be for our young people. The service continues to work with young people to return them back into suitable training or employment. To support this Early Help services have allocated a part time worker (0.5FTE) to focus on education pathway planning alongside leaving care personal advisers.

3.13 Adoptions

3.13.1 There were nine adoptions in January which is the highest figure for a single month in over 12 months. Although timeliness measures have not been achieved this represents a good outcome for these children. It is hoped that there will be another six adoptions completed before the end of the reporting year taking the total to 35 which is a drop on last year’s achievement of 43.

3.14 Caseloads

3.14.1 Reducing the CIN demand at the front door combined with an introduction of 'one week in five' rather than 'one week in four' duty rota system has seen a significant reduction in average caseloads from 26 to 15 within safeguarding teams. Managers report feeling the benefit of this on practice and this has been validated by the recent Ofsted monitoring visit where the emergence of good social work practice was found.

3.14.2 The impact of rising LAC has been a rise in the number of average number of cases per LAC team social worker to 12.9 however the maximum is now at 18. A management review of all children with a
section 20 legal status has identified the potential to return home for up to 15 children. If this is achieved, combined with new edge of care interventions, this will result in a significant decrease in workload.

4. Options considered and recommended proposal

4.1 The full service performance report attached at Appendix A (Early Help) and B (Social Care) represent a summary of performance across a range of key national and local indicators with detailed commentary provided by the service. Members are therefore recommended to consider and review this information.

5. Consultation

5.1 Not applicable

6. Timetable and Accountability for Implementing this Decision

6.1 Not applicable

7. Financial and Procurement Implications

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

8. Legal Implications

8.1 There are no direct legal implications to this report.

9. Human Resources Implications

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

10. Implications for Children and Young People and Vulnerable Adults

10.1 The performance report relates to services and outcomes for children in care.
11. Equalities and Human Rights Implications

11.1 There are no direct implications within this report.

12. Implications for Partners and Other Directorates

12.1 Partners and other directorates are engaged in improving the performance and quality of services to children, young people and their families via the Rotherham Local Children's Safeguarding Board (RLSCB). The RLSCB Performance and Quality Assurance Sub Group receive this performance report within the wider social care performance report on a regular basis.

13. Risks and Mitigation

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

14. Accountable Officer(s)

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Approvals Obtained from:-
Strategic Director of Finance and Corporate Services:- Named Officer -
Director of Legal Services:- Named officer
Head of Procurement (if appropriate):- N/A

Name and Job Title.
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