Children & Young People Services



Early Help and Family Engagement Monthly Performance Report

As at Month End: March 2017

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

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

Document Details
Status: Issue 1

Date Issued: 13/04/2017

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Performance Summary

As at Month End March 2017

Quarter 4 covering January - March 2017

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

- improvement in performance

- increase in numbers (no good/bad performance)

🔷 - stable with last month (no good/bad performance) 🖖 - decline in performance but still within limits of target

 ↓ - decrease in numbers (no good/bad performance)

 ↓ - decline in performance, not on target

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

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

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

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				GOOD	DATA NOTE			2016/17			DOT	DAG :	Та	rget and To	lerances	YR ON YR TRE	END	LA	TEST BENCH	HMARKING - 2	2014/15
	NO.	INDICATORS - EARLY HELP BOROUGH WIDE	PERFORMANCE	PERF IS	(Monthly)	Jan-17	Feb-17	Mar-17	Year End 2016/17	DATA NOTE	(Month on Month)	RAG (in month)	Red	Amber	Target Green	2014/15	2015/16	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTILE THRESHOLD
ANGE	8.1	Number and % of families engaged as a percentage of anr	nual target Families For	High	No	77	105	97	882	Monthly	•	G			882 Families	117%	100%				
FOR CHANGE	0.1	Change (FFC) Year 2		High	Cumulative %	77%	89%	100%	100%	Monthly	^	G									
FAMILIES F	8.2	Number of FFC PbR outcomes claimed (evidence of emplo	oyment outcome)	High	Number	27	27	37	37	Claims subject to confirmation of	↑	R			Between the range of 280-		5				
FAM	8.3	Number of FFC PbR outcomes claimed (evidence of signif	ficant & sustained progress)	High	Number	28	28	43	43	claim windows by TFU	1	R			350		0				
	9.1	Young people aged 16-17 (academic age) whose current a	activity is not known	Low	%	2.8%			2.8%	Annual		G			2.8%	N/A	N/A				
				ļ		2.8%	2.4%	2.8%	2.8%	Monthly	Ψ	G			3.0%						
	9.2	Young people aged 16-17 (academic age) who are NEET		Low	%	3.2% 3.2%	3.2%	3.5%	3.1%	Annual Monthly	4	G G			3.1%	N/A	N/A				
(0				<u> </u>		3.2 /0	3.2 /0	3.5 /6	3.2 /6		·	G			3.7 /6	70.00/ (Nov. Doc. Jos.	74.7%				
NEETS	9.3	% of Academic Age 16,17,18 Corporate Responsibility LAC	C/CL EET	High	%	70.1%	71.5%	68.5%		Monthly	V	R			80.0%	70.9% (Nov, Dec, Jan ave)	(Nov, Dec, Jan ave) 22.3%				
	9.4	% of Academic Age 16,17,18 Corporate Responsibility LAC	C/CL NEET	Low	%	29.2%	27.8%	30.1%		Monthly	•	R			20.0%	25.8% (Nov, Dec, Jan ave)	(Nov, Dec, Jan ave)				
	9.5	Young people aged 16-17 (academic age) meeting the dut	ty to participate	Info	%	92.4%	92.6%	92.2%	92.4%	Monthly	4					90.8% (Nov, Dec, Jan ave)	91.9% (Nov, Dec, Jan ave)				
	9.6	No of Youth sessions undertaken in the reporting month	Centre Based Non-centre based	Info Info	Number Number	95 44	92 36	86 39	1434 450	Annual Annual	↓										
	10.1	Numbers of young people first time entrants (FTE) into the		Low	Rate per 100,000 of 10- 17 population		55	35	414 (period Oct15 - Sep16)	Annual	,					564 (Data published Dec14 relating to Oct13 to Sep14)	519 (Period April 14 to March 15)	439.76		409.1	
	10.2	Use of Custody		Low	Rate per 100 of 10-17 population				0.41 (period Jan 16 - Dec 16)	Annual					Lower than same quarter previous year	0.36 (Data published Dec14 relating to Jan to Dec14)	0.24				
YOT	10.3	Rate of re-offending by young offenders		Low	Binary Rate				29.9% (Apr 14 - Mar 15)	Annual					and comparable	37.1% (Data published Dec14 relating to Apr12 to Mar13)	Data not available	36.28		37.95	
	10.4	Frequency of re-offending by young offenders		Low	Frequency Rate				0.68 (Apr 14 - Mar 15)	Annual						1.04 (Data published Dec14 relating to Apr12 to Mar13)	until early 2017				
	11.1	No of Exit Surveys returned		Info	Number	10	14	27	222	Monthly	↑										
CUSTOMER		Number of formal complaints received during the reporting		Info	Number	1	0	0	4	Monthly)										
STO		Number of formal complaints upheld in the reporting month Number of formal complaints closed during the month which		Info	Number	1	0	0	2	Monthly	→										
吕田		timescales		High	Number	1	0	0	2	Monthly)				100%						
	11.5	Number of compliments received during the reporting mon	th	Info	Number	0	1	0	9	Monthly	Ψ										
QUALITY ASSURANCE	12.1	Number of Team Manager Audits completed in the reportin	ng month	Info	Number	14	14	15	151	Monthly	4										
	13 1	Number of staff	Contract Count	Info	Number	325	328	328			→										
5 -			FTE	Info	Number	236.2	238.0	239.4	44		<u> </u>										
ESTABLISHMENT INFORMATION		Number of starters		Info	Number	1	2	2	11	Monthly)										
ISH		Number of leavers		Info	Number	1	0	1	34		1										
'ABI		Staff Vacancies Percentage of PDR's completed		Info High	Number %	31	33	30	100%	Annual		G			98%		98%				
EST		Number of Formal Capability processes in progress		Info	Number	0	1	1	1	Monthly)						55,0				
			Annual FTE sick days	Low	Cumulative No.	10.73	10.91	11.2	11.2	Annual	Ψ	R			10.2		10.46				
		;	1		INU.		1														

Quarterly Scorecard As at Quarter 4: Jan - Mar 2017

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- decrease in numbers /--- decrease in numbers (no good/bad performance)

- improvement in performance

- decline in performance but still within limits of target - decline in performance, not on target

- no movement but within limits of target

- no movement, not on target

										2016/17				
	NO.	INDICATORS - EARLY HELP BOROUGH WIDI	E PERFORMANCE	Data Source	Frequency	GOOD PERF IS	DATA NOTE (Monthly)	Quarter 1 April - June 2016	Quarter 2 July - September 2016	Quarter 3 October - December 2016	Quarter 4 January - March 2017	YTD	Direction of Travel	Sparkline
E	1.1	Number of Teenage mothers who have received support through the programme	No of open cases at the last day of the quarter			Info	Number	15				15		
PRE BIRTH	1.2	Number of Teenage mothers who have received support	Initiation	Family Nurse Partnership	Quarterly	Info	Number	23.0%				23.0%	To be reported in Quarter 2	
E	1.3	through the programme and were breastfeeding at:	6-8 Weeks			Info	Number	0.0%				0.0%		
	2.1	Percentage of mothers initiating breastfeeding		5	0.444	High	%	58%				58%	To be	
MENT	2.2	Percentage of mothers continuing to breastfeed at 6 - 8 we	eks	Family Nurse Partnership	Quarterly	High	Number	31%				31%	reported in Quarter 2	
EARLY YEARS DEVELOPMENT	3	Percentage of births that receive a face to face new birth vi Visitor	sit within 14 days by a Health	Family Nurse Partnership	Quarterly	High	%	91.0%				91.0%	To be reported in Quarter 2	
ARS D	4.1	Immunisation of 1 year olds - Diphtheria, Tetanus and Who	ooping Cough - DTaP			High	%	96.0%				96.0%		
3LY YE	4.2	Immunisation of 2 year olds - Measles Mumps and Rubella	ı - MMR	Family Nurse Partnership	Quarterly	High	%	95.0%				95.0%	To be reported in Quarter 2	
EAF	4.3	Percentage of children who received a 2 - 2.5 year review				High	%	92.0%				92.0%		
	5	Number and Percentage of Eligible 2 years olds accessing	their Early Years take-up	RMBC Early Years	Termly	High	%	86%	79.5%	87.20%	83.0%	83.0%	Ψ	
Z.	6.1	Number of Fixed Term Exclusions	Primary			Low	Number	124	35	84	106	349	^	
EDUCATION			Secondary	RMBC Inclusion Department	Available Termly	Low	Number	813	379	808	1064	3064	↑	
DOG	6.2	Number of Permanent Exclusions	Primary	,	ŕ	Low	Number	6	2	3	1	12	₩	
	0.2	Number of Fernancia Exclusions	Secondary			Low	Number	11	4	7	12	34	↑	
EARLY HELP	7.1	lumber of re-referrals where original referral was Early	from Step Down Panel From MASH	RMBC Early Help Performance					С	ata in Developm	ent			
ARE	8.1	Number of Children on a CiN Plan				Info	Number	1683	1897	1812	1656		Ψ	
SOCIAL CARE	8.2	Number of Children who are on a child protection plan (CP	P)	RMBC Performance and Quality Team	Quarterly	Info	Number	325	305	331	375		1	
soc	8.3	Number of Children who are Looked after (LAC)				Info	Number	429	454	484	487		↑	

CONTACTS

DEFINITION Early Help Contacts Owner Susan Claydon

In March 2017 there were 392 contacts made to Early Help through the integrated front door and step down panel, which is a decrease of 15 cases from February. 2017 has shown an increase in overall cases presenting to Early Help and this is as a result of recent integration within the First Response arrangements that was launched in Jan 2017. This is a positive development and highlights an increased confidence in the Early Help Offer and better collaborative approaches at the 'front door' for access to services. In the reporting period, 49% of cases were submitted as a Request for Support, 30% were transferred from First Response follwojing a request for social care and 11% were as a result of a Request for Co-working from Children's Social Care. The remaining 10% of contacts were submitted via Step Down from Children's Social Care to Early Help. A review of the recent changes to the integrated 'front door' has taken place in March to analyse the early impact of these changed arrangements and very positive feedback has been received from operational staff and managers within the First Response and Early Help Triage team. The throughput data reflects consistent high deprivation levels in the central locality of Rotherham and when considered in conjunction with the small geographical area that central represents and the relatively low population rate, the high level of need is further magnified. The South of Rotherham throughput data continues to show a high rate of demand and north of the borough remains the lowest demand across the Early Help Service. The difference in demand across the borough is useful when analysing specific need and support required in localities, however the service approaches support with a borough wide ethos to enable consistent responses across Rotherham and ensures that families get the right support at the right time. Request for Support continues to be the highest demand for service as a referral route across North, South and Central however central appears to receive a higher propor

All Contacts/Recommendations for March have been taken from the new case management system, Liquid Logic EHM. This month we are able to report fully in the same manner as previous scorecards.

					ROTH	ERHAN	1								-	NORTH											SOUTI	1										CEI	NTRAL					
March 2017 EARLY HELP CONTACTS WITH RECOMMENDATIONS BY AREA 1.1	Early Help Assessment Recommendation EH Co working Agreement with Children's Social	Care Escalation to Children's Social Care	Open EH Assessment Notification	EH Assessment Recommendation to Partner	Early Help Assessment Recommendation to Partner with Co-Working/Support from Early Help	referral to External Partner/Agency Recommendation for Barnardo's Reach out Service	Step Down	Step Down to Early Help Partners	Universal Recommendation Universal recommendation with Action	Still undergoing screening	КОТНЕКНАМ ТОТАL	Early Help Assessment Recommendation	Care Escalation to Children's Social Care	Open EH Assessment Notification	EH Assessment Recommendation to Partner	Early Help Assessment Recommendation to Partner with Co-Working/Support from Early Help	referral to External Partner/Agency Recommendation for Barnardo's Reach out	Step Down	Step Down to YOT Step Down to Early Help Partners	Universal Recommendation	Universal recommendation with Action	NORTH TOTAL	Early Help Assessment Recommendation	Care Escalation to Children's Social Care	Open EH Assessment Notification	EH Assessment Recommendation to Partner	Early Help Assessment Recommendation to Partner with Co-Working/Support from Early Help	referral to External Partner/Agency Recommendation for Barnardo's Reach out	Service Step Down Step Down to YOT	Step Down to Early Help Partners	Universal recommendation with Action	Still undergoing screening	SOUTH TOTAL Early Help Assessment Recommendation	EH Co working Agreement with Childre Care	Escalation to Children's Social Care	Open EH Assessment Notification	EH Assessment Recommendation to Partner	Early Help Assessment Recommendation to Partner with Co-Working/Support from Early Help	referral to External Partner/Agency Recommendation for barnardo s Reach out	Step Down Step Down to YOT	Step Down to Early Help Partners	Universal Recommendation Universal recommendation with Action	Still undergoing screening	CENTRAL TOTAL
MASH transfer to EH Triage	75	1	16	3	1	2 0			4 1	5 0	117	17		3		1	1			4	3		31	1	5	1					6	4	44 27			8	2		1			6	i	44
Request for Co Working	0 3	18	0 :	2	3	1				0	44		12		2							14		8									8	18				3	1					22
Request For Support	80	0	9	1 :	24	4			17 49	9 9	193	22		3		9				5	16 2		36		1		6	1			8 20	2 7		2		5	1	9	3			4 13	3 5	62
Step Down Request	36			1		1				0	38	12			1								16					1				1		1										8
Grand Total	191 3	88 1	25	7	28	8 0	0 1	0 0	21 6	4 9	392	51	12 0	6	3	10	1 0	0	0 0	9	19 2	113	83	8 1	6	1	6	2 0	0 0	0 :	8 26	2 1	43 57	7 18	0	13	3	12	5 0	0 0	0	4 19	9 5	136

5

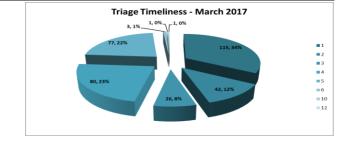
TRIAGE

DEFINITION Timeliness of Triage Owner Susan Claydon

-

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

		1.1	
	F	ROTHERH	AM
Mar-17	HER	Contacts in 5 work	s Triaged king days
	ROJ	%	Number
Number of Contacts Triaged	345	98.6%	340



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

Note 2:

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

DEFINITION Timeliness of initial contacts Owner Susan Claydon

Performance Analysis

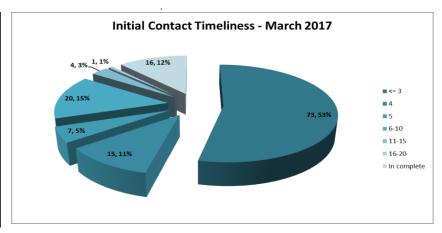
In March there was a sharp increase in cases that required an Early Help Assessment; 136 cases received an EHA Recommendation in March compared with 66 in February and 90 in January. Of the Early Help cases that required contact in March 2017, 88.3% were successfully engaged within the month, which is an increase of 5% on last month. Of these, 53.7% were engaged within 3 working days and a further 34.6 % were engaged after the 3 working day timeframe. This highlights positive progress in this area as previously there have been some barriers to timely engagement. In order to address these barriers, Heads of Service agreed a weekly operational performance meeting, supported by performance and data colleagues and this forum is clearly having a marked impact on performance. Operational managers have been able to look at live data and communicate back with staff on any recording issues and drift. As a result we are seeing better operational grip on performance which is a positive achievement. The remainder of cases that did not meet timeliness are still subject to workers contacting the families and they will persist to enable engagement. There are several reasons why engagement can take longer than anticipated and this includes the fact that the family may need extra time to build trust in the worker before accepting support. The service is committed to applying a persistent approach and exhausting a range of strategies to facilitate engagement. Early Help has several examples of families that have taken long periods of time to engage and this illustrates a tenacious approach to engagement. Whilst keeping cases open and persisting can adversely affect performance data, the leadership team is clear that it is the right approach to improving outcomes for children and families in a long term, sustainable way. We are committed to further improvement of this measure in the coming months and hope to see a steady increase.

				2.1.and 2.2	1			
Mar-17	ROTHE	RHAM	NO	RTH	SOI	HTU	CEN ⁻	TRAL
	Number	%	Number	%	Number	%	Number	%
Number of cases reaching scope in month	136		30		63		43	
ICs completed in time (meeting 3 days)	73	53.7%	20	66.7%	40	63.5%	13	30.2%
ICs completed in month outside 3 days timeliness	47	34.6%	7	23.3%	16	25.4%	24	55.8%
ICs in scope but not completed	16	11.8%	3	10.0%	7	11.1%	6	14.0%
Cases open at month end where no IC recorded	35		6		20		9	

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

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

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



DEFINITION Early Help Assessments Owner Susan Claydon

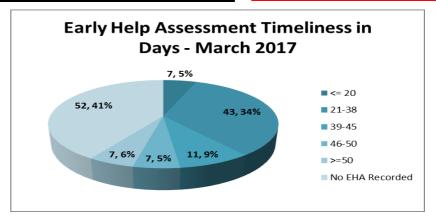
erformance Analysis

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

				3.1 an	d 3.2			
Mar-17	ROTHE	RHAM	NOI	RTH	SO	UTH	CENT	RAL
	Number	%	Number	%	Number	%	Number	%
Number of cases falling into scope in month	127		26		57		44	
Early Help Assessments completed in time	50	39.4%	15	57.7%	18	31.6%	17	38.6%
Early Help Assessments completed in month outside timeliness	25	19.7%	7	26.9%	9	15.8%	9	20.5%
Early Help Assessments in scope but not completed	52	40.9%	4	15.4%	30	52.6%	18	40.9%
Cases open at month end where no Early Help Assessment recorded	143		13		84		46	

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

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



EARLY HELP ASSESSMENT - COMPLETED BY PARTNERS

DEFINITION Early Help Assessments - Completed by Partners Owner Susan Claydon

erformance Analysis

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

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

OPEN CASES

Open and Closed Early Help Cases - A case is defined as any case that came

DEFINITION

Owner

Susan Claydon

Performance

There are 1424 open cases across the Rotherham Early Help Locality Teams and 222 case were successfully closed in the reporting month. Cases are counted by 'family' and so this represents a significantly higher number of children receiving support. This is an important element of the early help new ways of working and reflects one worker, one family, one plan. Whilst we are working on enabling a count of the total number of children in the system for analytical purposes, it is important for whole family working to be reflected in the overarching data so that we can understand family units and reduce duplication across in the way that we work with partners. The volume of throughput of cases is being monitored and is informing discussions related to partner uptake of Early Help Assessments.

Mar-17	4.1												
Open Cases	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total (As at current month end)
North					333	323	261	269	263	281	326	349	349
South					470	468	425	454	444	482	511	522	522
Central					620	550	502	469	468	522	562	553	553
Total number of Open cases					1423	1341	1188	1192	1175	1285	1399	1424	1424

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

DEFINITION The outcome of the step down panel Owner Karla Capstick

In March 2017 the step down process has shifted focus to localities, this was agreed at a task and finish group meeting that met to progress a shift from the central panel approach. Team Managers from Childrens Social Care and Early Help Locality Managers are now agreeing a planned step down through dialogue in localities that enhances integrated working and shared operational practice. This approach has also been trialled with duty team 1 whilst other duty teams and Evolve continue to use the central panel for Step Down. In addition, Step Up has seen a change in practice over the last month with the First Response to accept cases from Early help that need to step up without a full MARF, reducing time and duplication for children and families already known to Children's Services.

Findings from this pilot activity will be fed back to the group on the 26th April, reported to CYP DLT and it is anticipated that by the summer the step up and step down process will operate seamlessly within localities and between Early Help, Social Care Locality Teams, First Response and Duty Teams removing the need for a central panel other than by exception.

Work has also commenced to ensure the ICT system is able to support this practice change and this is being led by the Liquid Logic Project Team. All Managers have been issued with guidance to support the pilot activity.

March 2017 data is comparative to the previous month with a slightly lower volume of step down for 'families' received, but similar numbers accepted and rejected. The task and finish group reconvenes on the 26th April 2017 and will address any issues with volume, allocation to partners, reporting and continue the work to integrate the process.

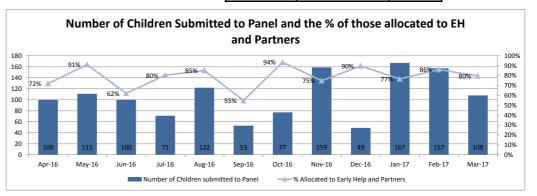
Outcomes - Number of Families - Monthly Data

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

Number of Families Submitted to Panel and the % of those allocated to EH and Partners 100% 80 90% 70 80% 60 70% 50 60% 40 50% 40% 30% 20% 10 10% Jul-16 Aug-16 Dec-16 Jan-17 ---- % Allocated to Early Help and Partners Number of Families submitted to panel

Outcomes - Number of Children - Monthly Data

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



CHILDREN'S CENTRES

DEFINITION Children's Centres (only available Quarterly) Owner Karla Capstick

Quarter 4 data is now available and included below; further data cleansing and analysis is planned to further validate numbers and to enable indentification of issues and strengths at a centre level

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

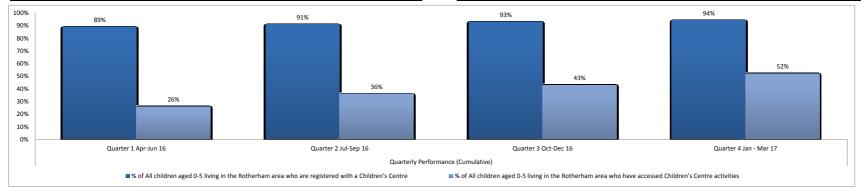
The engagement figures are cumulative with an end of year target of 66%. Continued positive progress has been made across the borough, with significant increases when compared with Quarter 3; however the target has not been achieved overall with the 30% LSOA areas falling short by 3% (this equates to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

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

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

			6	5.1			6.2		
	Measure	% of All children aged 0-5 living in the Rotherham area who are registered with a Children's Centre				% of All children aged 0-5 living in the Rotherham area who have accessed Children's Centre activities			
	Scorecard M	Rotherham Overall	North	South	<u>Central</u>	Rotherham Overall	North	South	Central
ance	Quarter 1 Apr-Jun 16	89%	100%	85%	87%	26%	35%	19%	29%
erforma llative)	Quarter 2 Jul-Sep 16	91%	100%	100%	87%	36%	44%	29%	38%
Quarterly Performance (Cumulative)	Quarter 3 Oct-Dec 16	93%	98%	95%	87%	43%	50%	36%	47%
Qua	Quarter 4 Jan - Mar 17	94%	98%	97%	88%	52%	57%	44%	58%

		deprive	en aged 0-5 ed SOA's in F tered with a	Rotherham w	ho are	deprive	d SOA's in R	living in the totherham w en's Centre	ho have
		Rotherham Overall	North	South	Central	Rotherham Overall	North	South	Central
ance	Quarter 1 Apr-Jun 16	93%	100%	100%	89%	32%	36%	25%	32%
erforma llative)	Quarter 2 Jul-Sep 16	95%	100%	98%	89%	44%	48%	37%	44%
Quarterly Performance (Cumulative)	Quarter 3 Oct-Dec 16	98%	100%	100%	92%	52%	55%	46%	53%
Qua	Quarter 4 Jan - Mar 17	99%	100%	100%	93%	62%	64%	55%	64%



EDUCATION WELFARE

DEFINITION Persistent Absence Owner David McWilliams

The LA Primary School Persistent Absence (PA) for Half Term 1-3 is 10.3%

90 (out of 95) Primary Schools submitted their PA Data, of those:

37 Primary Schools had less PA than the current National Average (8.4%)

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

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

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

The 37 schools who have less PA than the National Average are:

North Locality Area – Brampton Ellis Primary, High Greave Infant, Wath our Lady & St. Joseph, Rawmarsh Ashwood, Rosehill Junior, Thrybergh St. Gerards and Wath CE Primary.

Central Locality Area - Blackburn Primary, Coleridge Primary, Sitwell Infant, Sitwell Junior, St. Bede's RC, St. Mary's RC Herringthorpe and Thorpe Hesley Primary.

South Locality Area – Anston Greenlands Primary, Anston Hillcrest J&I, Anston Park Junior, Aston CE, Aston Fence, Aston Hall, Springwood Junior Academy, Bramley Sunnyside Infant, Bramley Sunnyside Junior, Brinsworth Manor Infant, Brinsworth Manor Infant, Brinsworth Manor Junior, Brinsworth Whitehll, Listerdale Primary, Whiston J&I, Whiston Worrygoose J&I and Wickersley Northfield Primary.

Unfortunately, the following schools were not able to share their Half Term 1-3 PA data with the Local Authority:

Aughton Academy, Bramley Grange Primary, Dinnington Community Primary, Laughton J&I and Thurcroft Academy.

The LA Secondary School Persistent Absence (PA) for Half Term 1-3 is 14.8%

13 (out of 16) Secondary Schools submitted their PA Data, of those:

4 Secondary Schools had less PA than the National Average (13.8%)

The average percentage PA in the North Locality area is 16.0%. Of the 5 secondary schools in the North area, 1 school had less PA than the National Average.

The average percentage PA in the Central Locality area is 18.3%. Of the 5 secondary schools in the Central area, 0 schools had less PA than the National Average.

The average percentage PA in the South Locality area is 11.8%. Of the 6 secondary schools in the South area, 3 schools had less PA than the National Average.

The 4 schools who have less PA than the National Average are:

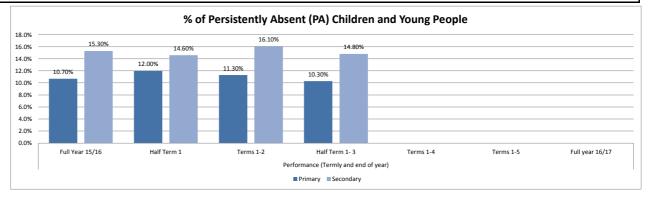
North Locality Area - Rawmarsh Community School

South Locality Area – Brinsworth Academy, Wales High and Wickersley School and Sports College

Unfortunately, the following schools were not able to share their Half Term 1-3 PA data with the Local Authority:

Aston Academy, St. Bernard's and St. Pius

	75	7.	7.1				
	Scorecar	% of Persistently Absent (PA) Children and Young People					
	o)	Primary	Secondary				
of	Full Year 15/16	10.70%	15.30%				
end of	Half Term 1	12.00%	14.60%				
e e	Terms 1-2	11.30%	16.10%				
Termly and vear)	Half Term 1- 3	10.30%	14.80%				
rmly and enc	Terms 1-4						
i ja	Terms 1-5						
	Full year 16/17						



Primary Whole School Attendance for February 2017 is 95.5%

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

The average percentage attendance for February in the North Area is 95.0%. Of the 27 primary schools in the North area, 8 schools were in line or exceeded the national average.

The average percentage attendance for February in the South Area is 96.1%. Of the 45 primary schools in the South area. 24 schools were in line or exceeded the national average.

The average percentage attendance for February in the Central Area is 95.1%. Of the 23 primary schools in the Central area, 6 schools were in line or exceeded the national average.

Unfortunately, due to either staffing or capacity issues the following schools were not able to share their February data with the LA:

Bramley Grange Primary and Dinnington Community Primary

The Average Primary Whole School Attendance to date for the period September 2016 - February 2017 is 95.7%.

39 schools (listed by locality area below) are currently on target to achieve or exceed the latest published national average percentage attendance (96%)

55 schools are currently on target to achieve or exceed the latest published local average percentage attendance (95.6%)

North Area Locality: Brampton Ellis Primary, Our Lady & St. Joseph's Wath, Rawmarsh Ashwood, Rawmarsh Rosehill, Sandhill Academy, Swinton Fitzwilliam Primary, Trinity Croft CE and Wath CE

Central Area Locality: Blackburn Primary, Redscope Primary, Sitwell Infant, Sitwell Junior and St. Mary's Herringthorpe.

South Area Locality: Anston Greenlands, Anston Hillcrest, Anston Park Infant, Anston Park Junior, Aston CE, Aston Fence, Aston Hall, Springwood Academy, Bramley Sunnyside Infant, Bramley Sunnyside Junior, Brinsworth Howarth, Brinsworth Whitehill, Brinsworth Manor Junior, Listerdale Primary, Flanderwell Primary, Harthill Primary, Kiveton Park Infant, Kiveton Park Meadows Junior, Laughton J&I, Ravenfield Academy, Swallownest Primary, Thurcroft Junior Academy, Todwick Primary, Wales Primary, Wales Primary, Wales Primary, Wales Primary, Wales Primary, Primary Wales Primary

Secondary Whole School Attendance for February 2017 is 93.8%

15 (out of 16) secondary schools submitted their attendance data to the Local Authority, of those:

3 secondary school was in line or exceeded the published national average percentage attendance (94.8%)

4 secondary schools were in line or exceeded the published local average percentage attendance (94.2%)

The average percentage attendance for February in the North area is 93.0%. Of the 5 secondary schools in the North area, 0 schools were in line or exceeded the national average.

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

The average percentage attendance for February in the Central area is 93.0%. Of the 5 secondary schools in the Central area, 0 schools were in line or exceeded the national average.

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

The Average Secondary Whole School Attendance to date for the period September 2016 – February 2017 is 94.2%.

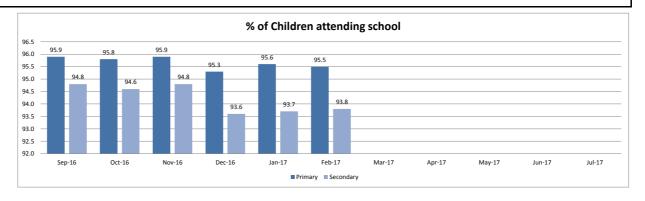
5 schools (listed by locality area below) are currently on target to achieve or exceed the latest published national average percentage attendance (94.8%)

8 schools are currently on target to achieve or exceed the latest published local average percentage attendance (94.2%)

North Area Locality: Rawmarsh Community School

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

		7.	.2		
	Scorecard Measure	% of Children attending school			
	Sco	Primary	Secondary		
	Sep-16	95.9	94.8		
	Oct-16	95.8	94.6		
ce	Nov-16	95.9	94.8		
Monthly Performance	Dec-16	95.3	93.6		
nro L	Jan-17	95.6	93.7		
erf	Feb-17	95.5	93.8		
ď	Mar-17				
ŧ.	Apr-17				
<u>o</u>	May-17				
Σ	Jun-17				
	Jul-17				
	Aug-17				



FAMILIES FOR CHANGE

DEFINITION Families For Change Owner Jenny Lingrell

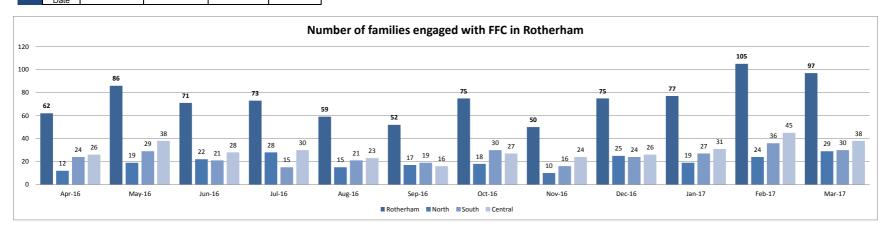
In 2016/17 Rotherham committed to identifying and engaging 882 families in the Troubled Families Programme (known locally as Families for Change). The target engagement figure for this financial year was achieved in March when 97 new families were attached to the programme. The increased rate of identification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

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

	8.1						
	Scorecard Measure	Number of families engaged in Rotherham against a monthly target of 74	Number of families engaged in <u>North</u>	Number of families engaged in <u>South</u>	Number of families engaged in <u>Central</u>		f 8
	Apr-16	62	12	24	26	li	
	May-16	86	19	29	38	lſ	
	Jun-16	71	22	21	28	Н	
မွ	Jul-16	73	28	15	30	lſ	
Monthly Performance	Aug-16	59	15	21	23	lſ	
Ē	Sep-16	52	17	19	16	H	
ಕಿ	Oct-16	75	18	30	27	H	
Pe	Nov-16	50	10	16	24	H	
훋	Dec-16	75	25	24	26	H	
ŧ	Jan-17	77	19	27	31	H	
ĕ	Feb-17	105	24	36	45	Н	
	Mar-17	97	29	30	38	H	
	Year to	882	238	292	352		

Number of families engaged as percentage of annual target of 882 in Rotherham (Year 2)	Number of families engaged as percentage of annual target in <u>North</u>	Number of families engaged as percentage of annual target in <u>South</u>	Number of families engage as percentage o annual target in <u>Central</u>
7%	1%	3%	3%
16%	3%	6%	7%
24%	6%	8%	10%
33%	9%	10%	14%
40%	11%	12%	16%
46%	13%	15%	18%
54%	15%	18%	21%
60%	16%	20%	24%
68%	19%	22%	27%
77%	21%	26%	30%
89%	24%	30%	35%
100%	27%	33%	40%

Ī		8.2	8.3
	on the same of the	0.2	0.3
	Yearly Cumulative Performance	Number of FFC PbR outcomes claimed (evidence of employment outcome)	Number of FFC PbR outcomes claimed (evidence of significant & sustained progress)
Se	Year 1 to date	5	0
عار a	Year 2 to date	37	43
Monthly Performance	Year 3 to date		
erfo	Year 4 to date		
ď	Year 5 to date		



DEFINITION NEETS and NOT KNOWNS Owner Collette Bailey

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

Latest comparison data available for February return show:

In respect of Not Known Rotherham are stronger than both statistical neighbours and national, whilst being in line with region.

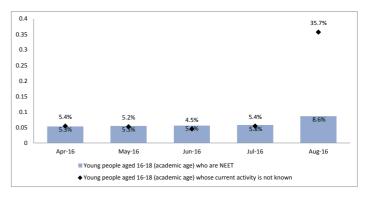
In respect of NEET figures Rotherham are enjoying better results than both statistical neighbours and region, whilst being in line with the national return.

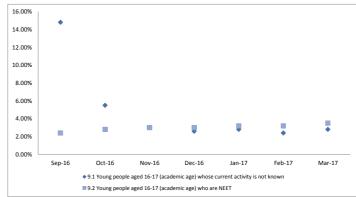
Old indicator

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

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

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





YOUTH ACTIVITY AND LEARNING

DEFINITION In Learning and Youth Activity Owner Collette Bailey

Rotherham performs well in terms of participation. Most recent data for comparators (February) evidences that Rotherham participation was better than both statistical neighbours (91.0%) and national (92.3%), and was in line with region (92.8%).

Centre based Youth session activity increasingly has become more focused on targeted group work. We are unable to give any comparison for Corporate LAC/Care Leaver data as this is not a published data set. However, most recent data (published Dec 16) at national level relating to resident Care Leavers in EET evidences that Rotherham's performance at 87.5% is above statistical neighbours (55.1%), regional (75.8%) and national (68.4%).

		9.3
		% of Academic Age 16,17,18 Corporate Responsibility LAC/CL EET
	F	ROTHERHAM
	Apr-16	74.5%
	May-16	76.2%
8	Jun-16	74.2%
Monthly Performance	Jul-16	76.7%
Ę	Aug-16	59.5%
erfe	Sep-16	71.6%
ď	Oct-16	71.8%
Ē.	Nov-16	70.9%
lon	Dec-16	72.7%
2	Jan-17	70.1%
	Feb-17	71.5%
	Mar-17	68.5%

	[9.5 (old indicat	tor)	
		% of Young people	aged 16-18 (academi	c age) who are i	n Learning
		ROTHERHAM	NORTH	SOUTH	CENTRAL
ø.	Apr-16	86.3%	85.2%	90.2%	81.8%
Monthly Performance	May-16	86.3%	84.8%	90.5%	81.8%
te E	Jun-16	86.6%	85.3%	90.6%	82.1%
E Σ	Jul-16	85.6%	84.0%	90.2%	80.6%
ď	Aug-16	55.3%	52.5%	61.3%	49.4%

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

					9.	6			
				Number of Yout	h Activity session	ns undertaken durir	ng the month		
		ROTHE	RHAM	NORTH			SOUTH	CENTRAL	
		Centre Based	Non-Centre Based	Centre Based	Non-Centre Based	Centre Based	Non-Centre Based	Centre Based	Non- Centre Based
	Apr-16	134	35	54	10	35	20	45	5
	May-16	128	32	49	8	36	20	43	4
92	Jun-16	131	15	46	2	35	13	40	0
ä	Jul-16	93	37	37	0	27	23	29	14
Ę	Aug-16	68	26	32	0	18	16	18	10
Performa	Sep-16	56	22	14	1	18	10	24	11
	Oct-16	109	56	24	10	38	32	47	14
Monthly	Nov-16	116	43	23	9	50	12	50	12
e II	Dec-16	71	17	14	2	31	4	26	11
≥	Jan-17	95	44	22	19	33	20	45	0
	Feb-17	92	36	14	18	33	18	34	0
	Mar-17	86	39	13	20	36	11	37	8

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

DEFINITION Youth Offending Team (YOT) Owner Collette Bailey

Latest available data

Numbers of young people first time entrants (FTE) into the criminal justice system:

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

Use of Custody:

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

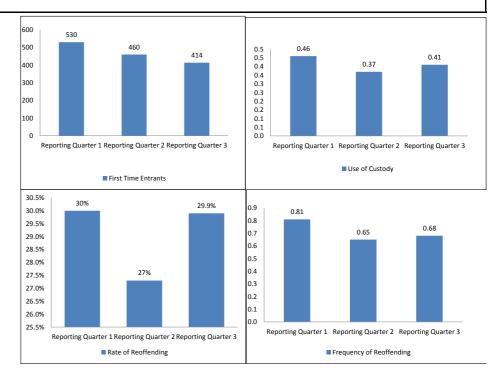
Rate of re-offending by young offenders:

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

Frequency of re-offending by young offenders:

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

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



CUSTOMER FEEDBACK

DEFINITION Customer Feedback Owner David McWilliams

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

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

There were no complaints or compliments centrally recorded in March.

ĺ				11.	1		
	sure			Exit Sur	veys		
	Scorecard Measure	Completed exit surveys - North	Completed exit surveys - South	Completed exit surveys - Central	Completed exit surveys - Borough Wide	Exit surveys where no area was specified	Total Number of exit surveys received
	Apr-16						0
	May-16					1	1
d)	Jun-16	2	4	26	0	2	34
20	Jul-16	4	3	14	0	1	22
ä	Aug-16	5	3	10	0	1	19
for	Sep-16	5	7	8	0	2	22
e.	Oct-16	8	2	14	0	1	25
<u>×</u>	Nov-16	17	5	9	0	0	31
듇	Dec-16	4	3	6	2	2	17
Monthly Performance	Jan-17	1	1	7	0	1	10
_	Feb-17	2	4	8	0	0	14
	Mar-17	4	1	20	2	0	27
	Year to Date	52	33	122	4	11	222

11.2	11.3	11.4	11.5
	Complaints		Compliments
Number of formal complaints received during the reporting month	Number of complaints upheld in the reporting month	Number of complaints closed during the month which were dealt with in timescales	Number of compliments received during the reporting month
0	0	0	2
0	0	0	0
1	1 (partial)	1	0
0	0	0	0
1	0	1	1
11	0	1	1
0	0	0	3
0	0	0	0
0	0	0	1
11	1	1	0
0	0	0	1
0	0	0	0
4	1	4	9

QUALITY ASSURANCE

DEFINITION Team Manager Audits Owner David McWilliams

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

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

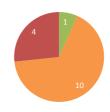
- More detailed cases notes needed
- Inclusion of Chronology and Genograms
- SMART targets in plans
- EH plans not to be so adult focussed
- Supervision notes to be more reflective

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

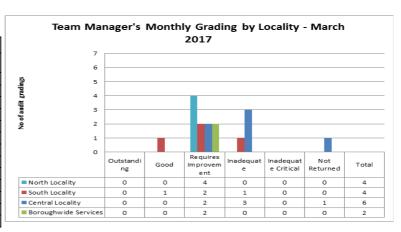
	ъ _Ф			12.1					
	ecal	Team Manager Audits							
	Scorecard Measure	Outstanding	Good	Requires Improvement	Inadequate	Inadequate - Critical	Total		
	Apr-16	0	3	11	1	0	15		
	May-16	0	6	8	0	0	14		
Monthly Performance	Jun-16	0	0	0	0	0	0		
	Jul-16	0	6	7	2	0	15		
	Aug-16	0	5	10	1	0	16		
ırfo	Sep-16	1	5	6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

	card	Response Rates								
	ě SE	North		Sou	th	Centra	al	Borough Wide Services		
	Scor	Number	%	Number	%	Number	%	Number	%	
	Apr-16	4 out of 5	80%	2 out of 3	67%	6 out of 6	100%	3 out of 3	100%	
	May-16	3 out of 4	75%	4 out of 4	100%	4 out of 6	66%	3 out of 3	100%	
e S	Jun-16	-	-	-	-	-	-	-	-	
Performance	Jul-16	4 out of 4	100%	2 out of 4	50%	6 out of 6	100%	3 out of 3	100%	
Ē	Aug-16	4 out of 4	100%	3 out of 3	100%	6 out of 6	100%	3 out of 3	100%	
g.	Sep-16	4 out of 4	100%	3 out of 3	100%	6 out of 6	100%	1 out of 2	66%	
	Oct-16	2 out of 2	100%	0 out of 1	0%	2 out of 2	100%	1 out of 2	50%	
μ̈́	Nov-16	3 out of 3	100%	4 out of 4	100%	6 out of 6	100%	2 out of 2	100%	
Monthly	Dec-16	4 out of 4	100%	2 out of 2	100%	6 out of 6	100%	2 out of 2	100%	
Š	Jan-17	4 out of 4	100%	2 out of 2	100%	6 out of 6	100%	2 out of 2	100%	
	Feb-17	4 out of 4	100%	3 out of 4	75%	6 out of 6	100%	1 out of 2	50%	
	Mar-17	4 out of 4	100%	4 out of 4	75%	5 out of 6	83%	2 out of 2	100%	

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



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



EARLY HELP - HUMAN RESOURCES (HR)

Performance Analysis

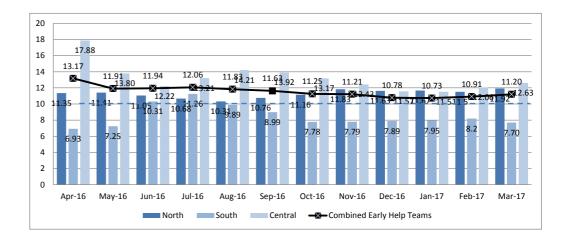
DEFINITION Establishment Information Owner David McWilliams

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

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

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

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



Children & Young People Services



Safeguarding Children & Families Monthly Performance Report

As at Month End: March 2017

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

Document Details Status: Issue 3

Date Created: 19th April 2017

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

Monthly Performance - Mar 2017 - I3.xlsx

Performance Summary

As at Month End: March 2017

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

- increase in numbers (no good/bad performance)

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

- improvement in performance

no movement but within limits of target

- decrease in numbers (no good/bad performance)

decline in performance but still within limits of target
 decline in performance, not on target

- no movement, not on target

	No.	NIDIO ATOD	GOOD	DATA			2016 / 1	7		DOT	RAG	Target	and Tol	erances	YR	ON YR TRI	END	LATES	T BENCHI	ARKING - 2	2014/15
	NO.	INDICATOR	PERF IS	(Monthly)	Jan-17	Feb-17	Mar-17	Year End 2016/17	DATA NOTE	(Month on Month)	(in month)	Red	Amber	Target Green	2013/14	2014/15	2015/16	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTILE THRESHOLD
	1.1	Number of contacts	Info	Count	1649	1373	1653	14959	Financial Year	^				n/a		10517	12165				
(HS	1.2	% Contacts with decision within 1 working day	High	Percentage	79.9%	93.3%	90.6%	86.0%	Financial Year	ψ		<92%	92%>	95%+			96.5%				
(MASH)	1.3	Number of contacts going onto referral (including MASH referrals)	Info	Count	293	383	453	5066	Financial Year	^				n/a		4513	4915				
	1.4	% of contacts going onto referral (including MASH referrals)	High	Percentage	18.7%	27.3%	26.6%	26.6%	Financial Year	V		ra	ange to be	set		42.9%	40.4%				
REFERRAL	1.5	Rate of referrals per 10,000 population aged under 18 - rolling 12 month performance	Info	Rate per 10,000	911.7	911.9	914.2	914.2	Rolling Year	1				n/a	689.8	800.2	780.5	655.4	333.9	548.3	-
	1.6	% of referrals going onto assessment	High	Percentage	98.6%	94.8%	95.8%	not available	Financial Year	^		<83%	83%>	86%+	77.8%	69.6%	77.6%	85.9%	99.7%	87.1%	97.8%
CT &	1.7	% Referral decision was made within 48 hours	High	Percentage	98.0%	99.0%	98.0%	not available	Financial Year	V		<92%	92%>	95%+	56.3%	71.2%	96.5%				
CONTAC	1.8	% re-referral rate in the current month	Low	Percentage	22.5%	23.0%	25.2%			ψ		26%+	26%<	23%<							
CON	1.9	% re-referral rate in 12 months - Rolling year <i>(Corporate Plan 2016</i> Indicator)	Low	Percentage	28.0%	27.7%	27.6%	27.6%	Rolling Year	^		30%+	28%<	26%<				23.6%	15.4%	24.0%	16.5%
		Number of CSE referrals in the current month (Corporate Plan 2016 Indicator)	Info	Count	18	26	29	231	Financial Year	^				n/a			200				
	2.1	Number of assessments started	Info	Count	520	645	698	6174	Financial Year	^				n/a		3780	3996				
	2.2	% of assessments for children's social care completed in 45 working days of referral	High	Percentage	67.4%	85.9%	93.1%	85.4%	Financial Year	^		<83%	83%>	86%+		70.1%	92.8%	79.8%	98.3%	81.5%	91.2%
ဟ	2.3	Open assessments already past 45 working days	Low	Count	4	4	21			V				n/a							
ENT	2.4	Number of assessments completed in the current month	Info	Count	657	619	626	5660	Financial Year	1				n/a			4064				
ASSESSMENTS	2.5	% of completed assessments ending in - Ongoing Involvement	High	Percentage	41.7%	43.3%	37.9%	37.3%	Financial Year	V		<40%	40%>	45%+			43.6%				
SSE	2.6	% of completed assessments ending in - No further action	Info	Percentage	42.5%	33.1%	41.9%	33.7%	Financial Year	^				n/a			40.0%				
¥		% of completed assessments ending in - Step down to Early Help / Other Agency	Info	Percentage	15.2%	22.5%	20.3%	16.7%	Financial Year	Ψ				n/a			15.3%				
		% of completed assessments ending in - Out of area	Info	Percentage	0.0%	0.0%	0.0%	0.2%	Financial Year	→				n/a			1.0%				
	2.9	% of completed assessments ending in - Other/Not Recorded	Info	Percentage	0.6%	1.1%	0.0%	3.2%	Financial Year	¥				n/a			0.2%				
	3.1	Number of S47 Investigations	Info	Count	142	148	158	1428	Financial Year	↑				n/a	752	909	1478				
	3.2	Number of S47 Investigations - rolling 12 month performance	Info	Count	1408	1426	1420			Ψ				n/a							
	3.3	Number of S47's per 10,000 population aged 0-17 - rolling 12 month performance	Info	Rate per 10,000	249.7	252.8	251.8	251.8	Financial Year	Ψ		more than +/-15	+/-15	+/-5 of 158.8	141.3	156.1	262.1	149.2	75	138.2	-
S	3.4	Number of S47 Investigations - Completed	Info	Count	168	152	157	1376	Financial Year	^				n/a			1390				
S47's	3.5	% of S47's with an outcome - Concerns are substantiated and child is judged to be at continuing risk of significant harm	High	Percentage	47.6%	61.2%	51.0%	55.8%	Financial Year	Ψ				n/a		56.3%	58.3%				
	3.6	% of S47's with an outcome - Concerns are substantiated, but the child is not judged to be at continuing risk of significant harm	Info	Percentage	36.3%	21.7%	35.0%	27.0%	Financial Year	^				n/a		19.8%	30.2%				
		% of S47's with an outcome - Concerns not substantiated	Low	Percentage	16.1%	13.8%	11.5%	11.0%	Financial Year	1				n/a			11.2%				
	3.8	% of S47's with an outcome - Not Recorded	Low	Percentage	0.0%	3.3%	2.5%	2.0%	Financial Year	<u> </u>				n/a		9.5%	0.3%				

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

- increase in numbers (no good/bad performance)

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

- decrease in numbers (no good/bad performance)

- improvement in performance

- decline in performance but still within limits of target

- decline in performance, not on target

- no movement but within limits of target

- no movement, not on target

			GOOD	DATA			2016 / 1	7		DOT	nth on (in	Target	and Tole	erances	YR	ON YR TR	END	LATES	T BENCHW	IARKING - 2	2014/15
	NO.	INDICATOR	PERF IS	NOTE (Monthly)	Jan-17	Feb-17	Mar-17	Year End 2016/17	DATA NOTE	(Month on Month)	(in month)	Red	Amber	Target Green	2013/14	2014/15	2015/16	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTILE THRESHOLD
	4.1	Number of open CIN cases	Info	Count	1704	1652	1656	1656	As at mth end	↑				n/a	1324	1526	1430				
	4.2	Number of CIN (inc. CPP as per DfE definition)	Info	Count	2026	2006	2031	2031	As at mth end	^				n/a		1947	1805				
S	4.3	Number of CIN per 10,000 population aged 0-17 - inc. CPP as per DfE definition. (Corporate Plan 2016 Indicator)	Info	Rate per 10,000	359.2	355.7	360.1	360.1	As at mth end	^		more than +/-15	+/-15	+/-5 of 346.4		347.1	320	372.4	285.1	337.3	281.0
	4.4	% of CIN (open at least 45 days) with a plan	High	Percentage	90.9%	94.2%	95.5%	95.5%	As at mth end	^		<90%	90%>	95%+		91.4%	98.9%				
	4.5	% of CIN (open at least 45 days) with an up to date plan	High	Percentage	90.8%	92.6%	93.8%	82.7%	Financial Year	^		<85%	85%>	90%+	43.8%	65.1%	98.6%				
	5.1	Number of open CPP cases	Info	Count	322	354	375	375	Financial Year	↑				n/a		423	369				
	5.2	Number of Initial CP Conferences (children) - rolling 12 month	Info	Count	450	454	490	490	Rolling Year	^				n/a	428	556	597				
	5.3	Number of Initial CP Conferences (children) per 10,000 population - rolling 12 month	Within limits (low)	Rate per 10,000	79.8	80.5	86.9	86.9	Rolling Year	4		79+	79<	74.1<	75.9	98.6	105.9	69.2	40	61.6	-
		Number of Initial CP Conferences (children) - in month	Info	Count	42	53	51			Ψ		ra	nge to be s	set							
	5.5	% of initial child protection conference (ICPCs) completed within 15 days of S47 (based on number of children)	High	Percentage	97.6%	98.1%	90.2%	91.4%	Financial Year	4		<85%	85%>	90%+	81.5%	65.0%	88.3%	85.7%	100.0%	74.7%	88.5%
CTION	5.6	Number of children with a CP plan per 10,000 population under 18	Low	Rate per 10,000	57.1	62.8	66.5	66.5	As at mth end	V		more than +/-10	+/-10	+/-5 of 52.3	69.2	74.7	65.4	46.1	26.4	42.9	-
ECT	5.7	Number of children becoming subject to a CP plan per 10,000 population	Info	Rate per 10,000	73.1	74.0	80.2	80.2	Rolling Year	^				n/a	72.37	93.05	93.8				
PROTE	5.8	Number of discontinuations of a CP plan per 10,000 population - rolling 12 months performance	High	Rate per 10,000	81.4	80.4	79.5	79.5	Rolling Year	<u> </u>		<55	55>	59.9+	62.7	85.4	105.0	67.8	39.0	52.1	-
	5.9	% of children becoming the subject of a CP plan for a second or subsequent time within 2 years - rolling 12 months (Corporate Plan 2016	Low	Percentage	8.3%	8.4%	8.4%	8.4%	Rolling Year	->		6%+	6%<	4%<	4.4%	4.0%	4.7%				
CHILD	5.10	% of children becoming the subject of a CP plan for a second or subsequent time - ever - rolling 12 months	Low	Percentage	17.5%	19.4%	19.7%	19.7%	Rolling Year	V		16%+	16%<	14%<	11.1%	10.8%	12.7%	16.1%	7.7%	16.6%	13.3%
	5.11	% of open CP plans lasting 2 years or more	Low	Percentage	0.3%	0.3%	0.3%	0.3%	As at mth end	→		3.6%+	3.6%<	2.6%<	4.9%	4.2%	0.8%	1.6%	0.0%	2.3%	0.0%
	5.12	% of CP plans lasting 2 years or more - ceased within period	Low	Percentage	0.0%	0.0%	0.0%	1.8%	Financial Year	→		6.5%+	6.5%<	4.5%<	6.8%	4.2%	4.8%	3.4%	0.0%	3.7%	2.4%
	5.13	% of CP cases which were reviewed within timescales	High	Percentage	100.0%	100.0%	100.0%	98.6%	Financial Year	→		<95%	95%>	98%+	95.3%	96.4%	94.2%	97.6%	100.0%	94.0%	100.0%
	5.14	% CPP with an up to date plan	High	Percentage	96.9%	94.1%	96.3%			^		<93%	93%>	95%+							
	5.15	% of CPP with visits in the last 2 weeks	High	Percentage	94.4%	93.2%	88.4%			V		<90%	90%>	95%+							
	6.1	Number of Looked After Children	Info	Count	471	484	487	487	As at mth end	^				n/a		407	432				
	6.2	Rate of Looked After Children per 10,000 population aged under 18	Info	Rate per 10,000	83.6	85.9	86.4	86.4	As at mth end	↑		more than +/-5	+/-5	up to +/-2 of 73.5	70	70	76.6	75.8	56.0	60.0	-
	6.3	Admissions of Looked After Children	Info	Count	9	26	20	264	Financial Year	•				n/a	147	175	208				
	6.4	Number of children who have ceased to be Looked After Children	High	Count	21	14	15	210	Financial Year	^				n/a	136	160	192				
z	6.5	Percentage of LAC who have ceased to be looked after due to permanence (Special Guardianship Order, Residence Order, Adoption)	High	Percentage	42.9%	28.6%	13.3%	28.3%	Financial Year	V		<33%	33%>	35%+	40.4%	37.5%	40.1%				
CHILDREN	6.6	Percentage of LAC who have ceased to be looked after due to a Special Guardianship Order	High	Percentage	0.0%	14.3%	0.0%			V		ra	nge to be s	set							
∃	6.7	LAC cases reviewed within timescales	High	Percentage	82.6%	87.1%	91.5%	94.7%	Financial Year	^		<90%	90%>	95%+	98.6%	94.9%	83.3%				
	6.8	% of children adopted	High	Percentage	42.9%	7.1%	13.3%	14.8%	Financial Year	↑		<20%	20%>	22.7%+	26.5%	26.3%	22.9%	18.8%	27.0%	15.0%	21.0%
AFTER	6.9	Health of Looked After Children - up to date Health Assessments	High	Percentage	92.1%	88.4%	87.1%	87.1%	As at mth end	V		<90%	90%>	95%+	82.7%	81.4%	92.8%				
	6.10	Health of Looked After Children - up to date Dental Assessments	High	Percentage	63.8%	62.3%	62.7%	62.7%	As at mth end	1		<90%	90%>	95%+	42.5%	58.8%	94.5%				
ООКЕВ	6.11	Health of Looked After Children - Initial Health Assessments carried out within 20 working days	High	Percentage	0.0%	37.5%	42.9%			^		ra	nge to be s	set							

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

- increase in numbers (no good/bad performance)

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

• decrease in numbers (no good/bad performance)

- improvement in performance

- decline in performance but still within limits of target

- decline in performance, not on target

- no movement but within limits of target

no movement, not on target

	NO	INDICATOR	GOOD	DATA			2016 / 1	7		DOT	RAG	Target	and Tol	erances	YR	ON YR TRE	END	LATES	T BENCHI	IARKING - 2	2014/15
	NO.	INDICATOR	PERF IS	MOTE (Monthly)	Jan-17	Feb-17	Mar-17	Year End 2016/17	DATA NOTE	(Month on Month)	(in month)	Red	Amber	Target Green	2013/14	2014/15	2015/16	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTILE THRESHOLD
	6.12	% of LAC with a PEP	High	Percentage	96.1%	94.2%	97.0%	97.0%	As at mth end	1		<90%	90%>	95%+	65.7%	68.7%	97.8%				
	6.13	% of LAC with up to date PEPs	High	Percentage	77.6%	54.2%	68.2%	68.2%	As at mth end	^		<90%	90%>	95%+	72.9%	71.4%	95.0%				
	6.14	% of eligible LAC with an up to date plan	High	Percentage	78.6%	77.7%	79.3%	64.1%	Financial Year	^		<93%	93%>	95%+	67.0%	98.8%	98.4%				
	6.15	% of completed LAC visits which were completed within timescale - National Minimum standard	High	Percentage	87.7%	89.5%	94.5%	94.5%	Financial Year	^		<95%	95%>	98%+		94.9%	98.1%				
	6.16	% of completed LAC visits which were completed within timescale - Rotherham standard	High	Percentage	81.5%	86.8%	86.4%	86.4%	Financial Year	V		<85%	85%>	90%+		64.0%	80.2%				
ERS	7.1	Number of care leavers	Info	Count	223	223	223	223	As at mth end	→				n/a		183	197				
LEAVERS	7.2	% of eligible LAC with an up to date pathway plan	High	Percentage	-	-	54.0%	Not available	Financial Year	-		<93%	93%>	95%+		69.8%	97.5%				
ARE L	7.3	% of care leavers in suitable accommodation	High	Percentage	95.1%	98.2%	96.9%	96.9%	Financial Year	V		<95%	95%>	98%+	96.3%	97.8%	96.5%	85.1%	98.0%	81.0%	90.0%
CAF		% of care leavers in employment, education or training	High	Percentage	-	-	63.2%	not available	Financial Year	-		<70%	70%>	72%+	52.3%	71.0%	68.0%	50.4%	76.0%	48.0%	56.0%
STI	8.1	% of long term LAC in placements which have been stable for at least 2 years	High	Percentage	66.7%	65.5%	67.6%	67.6%	As at mth end	^		<68%	68%>	70%+	68.8%	71.9%	72.7%	68.2%	79.0%	68.0%	72.0%
ACEMENTS	8.2	% of LAC who have had 3 or more placements - rolling 12 months	Low	Percentage	13.0%	12.2%	11.3%	11.3%	Rolling Year	^		12%+	12%<	9.6%<	11.2%	12.0%	11.9%	9.2%	6.0%	10.0%	8.0%
ACE	8.3	% of LAC in a family Based setting (Corporate Plan 2016 Indicator)	High	Percentage	80.3%	81.6%	84.6%			^		range	to be set	87.5%>							
— P.L.	8.4	% of LAC placed with parents or other with parental responsibility (P1)	Low	Percentage	4.9%	4.8%	6.0%			Ψ		r	ange to be	set							
SNO	L	% of adoptions completed within 12 months of SHOBPA	High	Percentage	33.3%	0.0%	0.0%	38.7%	Financial Year	->		<83%	83%>	85%+	55.6%	84.6%	53.5%				
ADOPTIONS		Average number of days between a child becoming Looked After and having a adoption placement (A1) (Rolling 12 months)	Low	Rolling year - ave count	368.8	374.7	404.0	404.0	Rolling Year	<u> </u>		511+	511<	487<	661	417.5	338.5	546.5	336.0	593.0	520.0
ADC	9.3	Average number of days between a placement order and being matched with an adoptive family (A2) (Rolling 12 months)	Low	Rolling year - ave count	211.0	208.4	232.9	232.9	Rolling Year	•		127+	127<	121<	315	177.3	137.9	220.6	47.0	223.0	172.0
	10.1	Maximum caseload of social workers in key safeguarding teams (excluding children's disability team)	Low	Average count	36	25	30			V		25+	24<	22<							
	10.2	Maximum caseload of social workers in LAC	Low	Average count	18	17	17			→		21+	20<	18<							
	10.3	Average number of cases per qualified social worker in LAC	Within Limits	Average count	12.9	11	11.6	11.6	As at mth end	^		over 1% above range	1% above range	14-20							
Q	10.4	Average number of cases per qualified social worker in Duty Teams	Within Limits	Average count	15.8	13.7	13.3	13.3	As at mth end	Ψ		over 1% above range	1% above range	16-22		11.2	15.8				
ELO/	10.5	Average number of cases per qualified social worker in CIN North Teams	Within Limits	Average count	15.2	16.7	17.4	17.4	As at mth end	^		over 1% above range	1% above range	16-22		18.2	16.8				
CASELOAD	10.6	Average number of cases per qualified social worker in CIN Central Teams	Within Limits	Average count	15.7	16.4	17.4	17.4	As at mth end	^		over 1% above range	1% above range	16-22			18				
	10.7	Average number of cases per qualified social worker in CIN South Teams	Within Limits	Average count	17.9	18.1	18.3	18.3	As at mth end	^		over 1% above range	1% above range	16-22		17.4	15.8				
	10.8	Average number of cases per qualified social worker in Children's Disability Team	Within Limits	Average count	16.9	16	15.4	15.4	As at mth end	•		over 1% above range	1% above range	16-22		22.7	19.1				
	10.9	Average number of cases per qualified social worker in Child Sexual Exploitation team	Within Limits	Average count	2.8	2	1	1	As at mth end	Ψ		over 1% above range	1% above range	16-22		18	5.7				

CONTACTS

DEFINITION

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

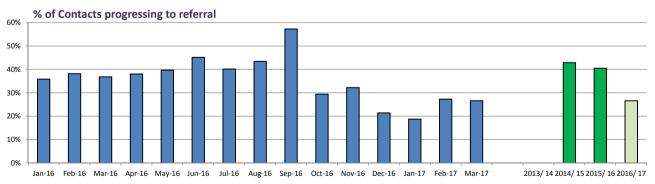
FORMANCE

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

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

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





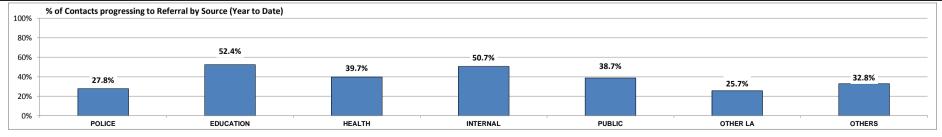
Monthly Performance - Mar 2017 - 13.xlsx 5 of 26

CONTACTS BY SOURCE

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

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

			(1) POLICE			ducation sei		(3)	Health servi	ces	(4) Inter	nal council	services		embers of p c. self / pare		(6) OTHER	LOCAL AU	THORITIES		(7) Others ildren centre vices, cafca	
		Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral
	Jan-16	408	86	21.1%	168	105	62.5%	121	52	43.0%	142	68	47.9%	142	53	37.3%	0	0	-	119	30	25.2%
	Feb-16	404	121	30.0%	133	79	59.4%	119	56	47.1%	167	81	48.5%	99	24	24.2%	0	0	-	108	32	29.6%
	Mar-16	360	97	26.9%	141	81	57.4%	129	53	41.1%	161	66	41.0%	164	56	34.1%	0	0	-	137	49	35.8%
	Apr-16	328	118	36.0%	167	109	65.3%	107	68	63.6%	182	111	61.0%	124	61	49.2%	0	0	-	113	40	35.4%
Š	May-16	404	156	38.6%	202	146	72.3%	132	73	55.3%	132	72	54.5%	120	60	50.0%	0	0	-	109	53	48.6%
ORMANCE	Jun-16	404	147	36.4%	169	133	78.7%	183	114	62.3%	137	83	60.6%	111	57	51.4%	0	0	-	159	61	38.4%
POR	Jul-16	405	177	43.7%	62	35	56.5%	114	67	58.8%	123	81	65.9%	105	59	56.2%	0	0	-	145	67	46.2%
Ä	Aug-16	352	152	43.2%	2	1	50.0%	144	98	68.1%	150	91	60.7%	156	98	62.8%	0	0	-	122	61	50.0%
ONTH	Sep-16	360	177	49.2%	137	108	78.8%	134	93	69.4%	136	107	78.7%	109	72	66.1%	3	3	100.0%	104	52	50.0%
MON	Oct-16	443	107	24.2%	165	80	48.5%	208	56	26.9%	156	57	36.5%	125	36	28.8%	15	4	26.7%	153	32	20.9%
Z	Nov-16	541	136	25.1%	261	102	39.1%	177	47	26.6%	122	61	50.0%	146	56	38.4%	81	21	25.9%	141	50	35.5%
	Dec-16	512	88	17.2%	152	51	33.6%	161	41	25.5%	121	25	20.7%	150	49	32.7%	55	6	10.9%	137	16	11.7%
	Jan-17	687	83	12.1%	208	76	36.5%	195	22	11.3%	183	61	33.3%	185	26	14.1%	39	14	35.9%	152	27	17.8%
	Feb-17	535	103	19.3%	220	97	44.1%	164	26	15.9%	113	55	48.7%	136	34	25.0%	67	21	31.3%	138	39	28.3%
	Mar-17	602	103	17.1%	254	109	42.9%	200	57	28.5%	226	99	43.8%	160	22	13.8%	51	11	21.6%	160	38	23.8%
	2013/14																					
E E	2014/ 15																					
ANNU/ TREN	2015/16	4383	1321	30.1%	1586	909	57.3%	1636	789	48.2%	1735	866	49.9%	1303	513	39.4%	2	0.0%	0.0%	1520	517	34.0%
	2016/17	5573	1547	27.8%	1999	1047	52.4%	1919	762	39.7%	1781	903	50.7%	1627	630	38.7%	311	80	25.7%	1633	536	32.8%



6 of 26 Monthly Performance - Mar 2017 - I3.xlsx

DEFINITION

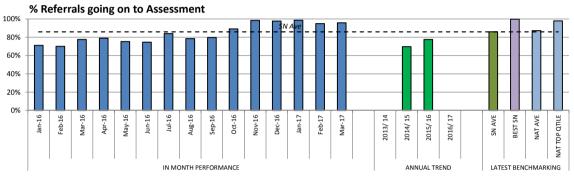
PERFORMANCE ANALYSIS

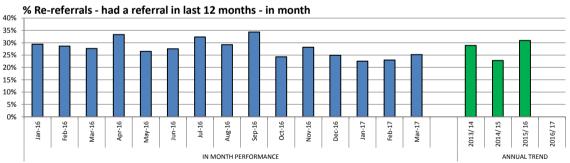
An Initial Contact will be progressed to a 'referral' where the social worker or manager considers an assessment and/or services may be required for a child or further information is required to make an informed decision.

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

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

		1.3	1.10	1.7	1.6	1.8	1.9
		No. of Referrals	No. of CSE Referrals (Corporate Plan 2016/17 Indicator)	% Referral decision was made within 48 hours	% Referrals going on to Assessment	% Re- referrals - had a referral in last 12 months - in month	% Re-referrals - had a referral in last 12 months - rolling 12 months
	Jan-16	394	17	96.4%	71.1%	29.4%	
	Feb-16	393	21	97.7%	70.0%	28.6%	
	Mar-16	402	40	99.0%	77.6%	27.7%	
	Apr-16	388	22	97.8%	78.9%	33.3%	30.7%
CE	May-16	436	18	96.4%	75.2%	26.5%	30.5%
IN MONTH PERFORMANCE	Jun-16	525	12	94.7%	74.5%	27.5%	29.9%
-ori	Jul-16	383	14	96.3%	84.1%	32.3%	30.0%
PERI	Aug-16	402	9	95.9%	78.4%	29.2%	29.7%
H	Sep-16	563	12	91.1%	79.6%	34.3%	30.4%
MON	Oct-16	461	17	34.0%	89.0%	24.3%	28.7%
Z	Nov-16	478	23	98.0%	98.3%	28.2%	28.6%
	Dec-16	301	31	100.0%	97.7%	24.9%	28.3%
	Jan-17	293	18	98.0%	98.6%	22.5%	28.0%
	Feb-17	383	26	99.0%	94.8%	23.0%	27.7%
	Mar-17	453	29	98.0%	95.8%	25.2%	27.6%
	2013/ 14					28.9%	
ANNUAL TREND	2014/ 15	4513			69.6%	22.8%	
ANNUAL TREND	2015/ 16	4915	200	96.5%	77.6%	30.9%	
,	2016/ 17	5066	231	not available	not available	not available	
NG	SN AVE				85.9%		23.6%
ST	BEST SN				99.7%		15.4%
LATEST BENCHMARKING	NAT AVE				87.1%		24.0%
BEN	NAT TOP QTILE				97.8%		16.5%





ASSESSMENTS - STARTED

DEFINITION

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

RFORMANC ANALYSIS

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

		2.1
		Number of Assessments started
	Jan-16	390
	Feb-16	356
	Mar-16	426
	Apr-16	375
ICE	May-16	409
MAN	Jun-16	476
N MONTH PERFORMANCE	Jul-16	430
PER	Aug-16	418
E	Sep-16	589
MON	Oct-16	503
롣	Nov-16	654
	Dec-16	457
	Jan-17	520
	Feb-17	645
	Mar-17	698
Q.	2013/ 14	
TREND	2014/ 15	3929
IUAL	2015/ 16	3996
ANN	2016/ 17	6174
O Z	SN AVE	
EST	BEST SN	
LATE	NAT AVE	
Ä	NAT TOP	



Monthly Performance - Mar 2017 - 13.xtsx 8 of 26

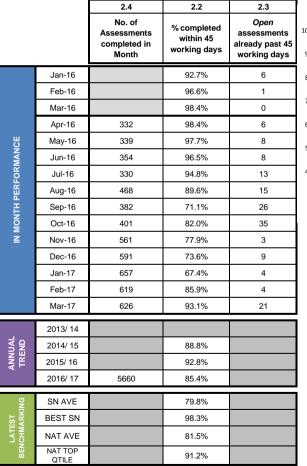
ASSESSMENTS - COMPLETED

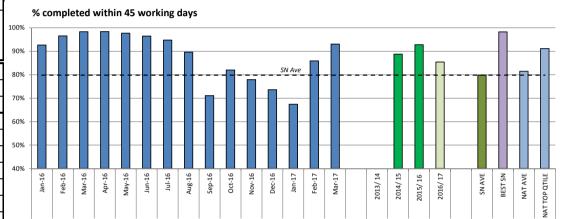
DEFINITION

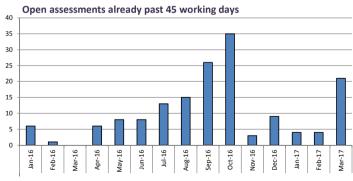
National Working Together guidelines state that the maximum timeframe for the assessment to be completed is 45 working days from the point of referral. If, in discussion with a child and their family and other professionals, an assessment exceeds 45 working days the social worker should record the reasons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

ERFORMANCE

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







Monthly Performance - Mar 2017 - 13 xlsx

ASSESSMENTS - OUTCOMES

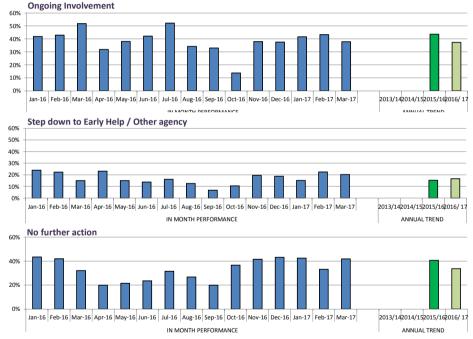
DEFINITION

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

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

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

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



10 of 26 Monthly Performance - Mar 2017 - I3 xlsx

PLANS - IN DATE

DEFINITION

A child's plan is to be developed for an individual child if they have a "wellbeing need" that requires a targeted intervention. Each type of plan has a completion target.

When a Looked After Child reaches 16 years and 3 months they become eligible for a 'Pathway Plan' - this plan focuses on preparing a young person for adulthood and their future (For example; future accommodation, post 16 Education/Training and Employment)

PERFORMANCE ANALYS

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

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



Monthly Performance - Mar 2017 - 13.visx

SECTION 47 INVESTIGATIONS - STARTED

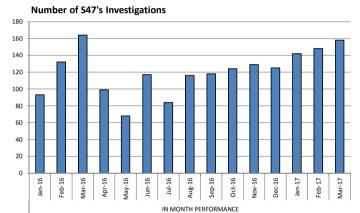
DEFINITION

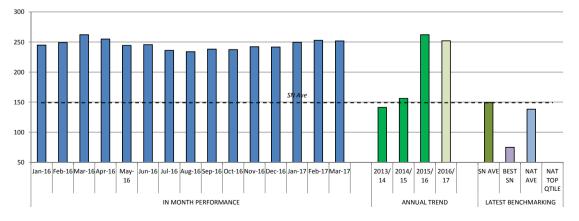
If there is reasonable cause to suspect a child is suffering or likely to be suffering significant harm a Strategy Discussion will be convened between child protection staff and other relevant bodies. The Strategy Discussion may then decide to launch a Section 47 enquiry. This means the local authority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

RFORMANC

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

		3.1	3.2	3.3
		Number of S47's Investigations - Started	Number of S47's Investigations started 12 month rolling	Rate of S47's per 10K pop12 month rolling
	Jan-16	93	1380	244.7
	Feb-16	132	1404	248.9
	Mar-16	164	1478	262.1
	Apr-16	99	1438	255.0
<u>S</u>	May-16	68	1377	244.3
IN MONTH PERFORMANCE	Jun-16	117	1384	245.6
-or	Jul-16	84	1330	236.0
PER	Aug-16	116	1318	233.9
E	Sep-16	118	1342	238.1
MON	Oct-16	124	1339	237.4
Z	Nov-16	129	1365	242.0
	Dec-16	125	1363	241.7
	Jan-17	142	1408	249.7
	Feb-17	148	1426	252.8
	Mar-17	158	1420	251.8
	2013/ 14			141.3
ND ND	2014/ 15	752		156.1
ANNUA TREND	2015/ 16	954		262.1
,	2016/ 17	1428		251.8
<u> </u>	SN AVE			149.2
T KIN	BEST SN			75.0
ATES				
LATEST BENCHMARKII	NAT AVE			138.2
Δ.	QTILE			-





Monthly Performance - Mar 2017 - 13.xls.x 12 of 26

SECTION 47 INVESTIGATIONS - COMPLETED

DEFINITION

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

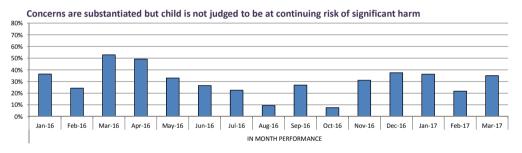
RFORMANC ANALYSIS

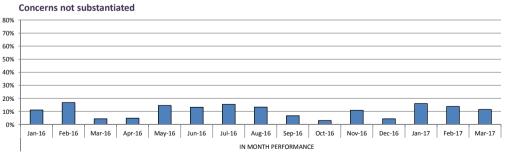
Trend data in relation to the outcome of Section 47 investigations, suggests an increase this month in overall outcomes that were substantiated. This suggests that the original decision to initiate the strategy discussion/section 47 investigation was right for the majority of children/families even though,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

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

		3.4	3	.5	3	.6	3	.7	3	.8
					Comple	ted S47	s by ou	tcome -		
		Number of S47's Investigation s - Completed	substar continu of sigr	rns are ntiated - ling risk nificant rm	substar no con ris	rns are ntiated - itinuing k of ant harm		rns not intiated	Not re	corded
	Jan-16	99	52	52.5%	36	36.4%	11	11.1%	0	0.0%
	Feb-16	119	70	58.8%	29	24.4%	20	16.8%	0	0.0%
	Mar-16	136	57	41.9%	72	52.9%	6	4.4%	1	0.7%
	Apr-16	61	28	45.9%	30	49.2%	3	4.9%	0	0.0%
병	May-16	82	43	52.4%	27	32.9%	12	14.6%	0	0.0%
NAN	Jun-16	83	50	60.2%	22	26.5%	11	13.3%	0	0.0%
ORI	Jul-16	71	44	62.0%	16	22.5%	11	15.5%	0	0.0%
ERF	Aug-16	150	115	76.7%	14	9.3%	20	13.3%	1	0.7%
IN MONTH PERFORMANCE	Sep-16	89	42	47.2%	24	27.0%	6	6.7%	4	4.5%
MON	Oct-16	132	59	44.7%	10	7.6%	4	3.0%	14	10.6%
_ ≥	Nov-16	119	69	58.0%	37	31.1%	13	10.9%	0	0.0%
	Dec-16	112	65	58.0%	42	37.5%	5	4.5%	0	0.0%
	Jan-17	168	80	47.6%	61	36.3%	27	16.1%	0	0.0%
	Feb-17	152	93	61.2%	33	21.7%	21	13.8%	5	3.3%
	Mar-17	157	80	51.0%	55	35.0%	18	11.5%	4	2.5%
	2013/14									
NP	2014/ 15	876								
ANNUAL TREND	2015/16	1390	810	58.3%	420	30.2%	156	11.2%	4	0.3%
	2016/ 17	1376	768	55.8%	371	27.0%	151	11.0%	28	2.0%
ى ق	SN AVE									
T X	BEST SN									
ATEST HMAR										
LATEST BENCHMARKING	NAT AVE NAT TOP QTILE									







CHILDREN IN NEED (CIN)

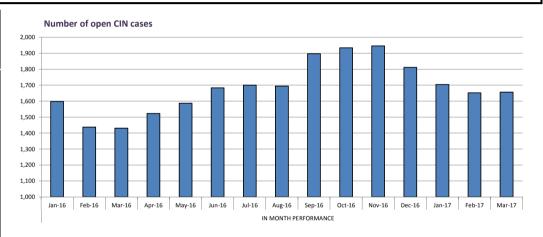
DEFINITION

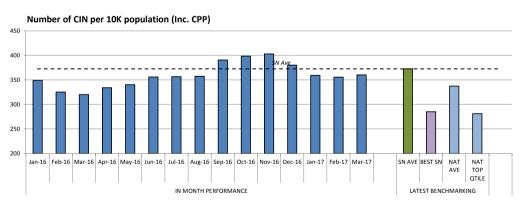
If the child is found to be disabled or the assessment finds that their health and development is likely to suffer without local authority intervention, the child will be classed as 'in need', as defined by Section 17 of the Children Act 1989. This means that the local authority is now legally obliged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

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

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

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





Monthly Performance - Mar 2017 - 13.xlsx

CHILD PROTECTION

DEFINITION

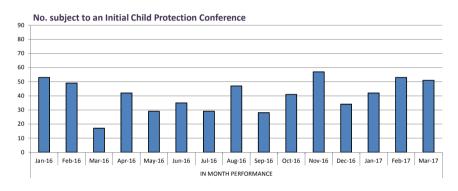
Following a S47 investigation a child protection conference may be convened to consider all the information obtained under the Section 47 enquiry and to determine the best course of action.

One of the things the child protection conference considers is whether the child should become subject to a Child Protection Plan. The aim of a child protection plan is to ensure the child is safe from harm and remains that way. As long as it is in the best interests of the child, this will involve offering support and services to the family.

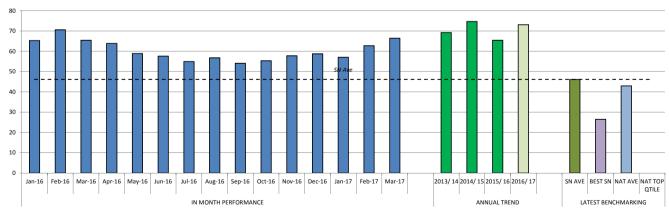
RFORMANCE

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

		5.4	5.1	
		No of children subject to an initial CP Conferences (in month)	No. of open CPP cases	No. of open CPP cases per 10K pop under 18
	Jan-16	53	368	65.3
	Feb-16	49	398	70.6
	Mar-16	17	369	65.4
	Apr-16	42	360	63.8
병	May-16	29	332	58.9
MAN	Jun-16	35	325	57.6
FOR	Jul-16	29	310	55.0
ERI	Aug-16	47	320	56.7
IN MONTH PERFORMANCE	Sep-16	28	305	54.1
	Oct-16	41	312	55.3
Z	Nov-16	57	326	57.8
	Dec-16	34	331	58.7
	Jan-17	42	322	57.1
	Feb-17	53	354	62.8
	Mar-17	51	375	66.5
P	2013/ 14	427		69.2
TRE	2014/ 15	556		74.7
ANNUAL TREND	2015/ 16	427		65.4
ANN	2016/ 17	488		73.1
NG	SN AVE			46.1
LATEST BENCHMARKIN	BEST SN			26.4
	NAT AVE			42.9
BE	NAT TOP QTILE			-



No. children with a Child Protection plan per 10,000 pop. 0-17



Monthly Performance - Mar 2017 - 13 xlsx

INITIAL CHILD PROTECTION CONFERENCES

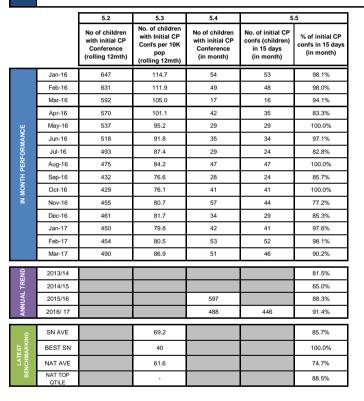
DEFINITIO

Following a S47 investigation a child protection conference may be convened to consider all the information obtained under the Section 47 enquiry and to determine the best course of action.

One of the things the child protection conference considers is whether the child should become subject to a Child Protection Plan. The aim of a child protection plan is to ensure the child is safe from harm and remains that way. As long as it is in the best interests of the child, this will involve offering support and services to the family.

ERFORMANCE

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





Monthly Performance - Mar 2017 - Suksx

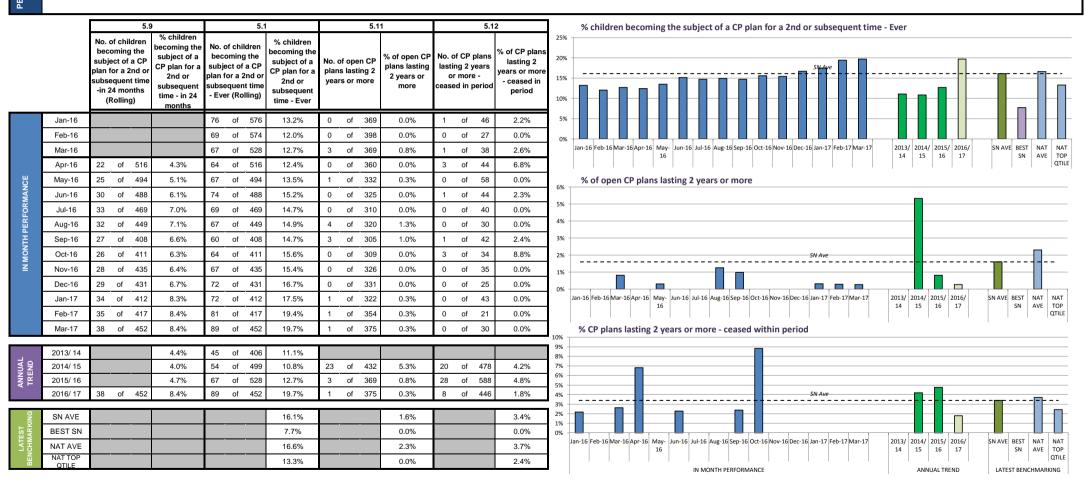
CHILD PROTECTION - TIME PERIODS

DEFINITION

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

RFORMANC

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



Monthly Performance - Mar 2017 - 13.xlsx

CHILD PROTECTION - REVIEWS & VISITS

DEFINITION

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

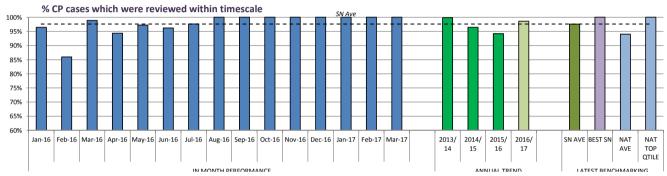
Local standards state that any child subject to a child protection plan should be visited at least every two weeks (this excludes children registered on a CPP for less than a week).

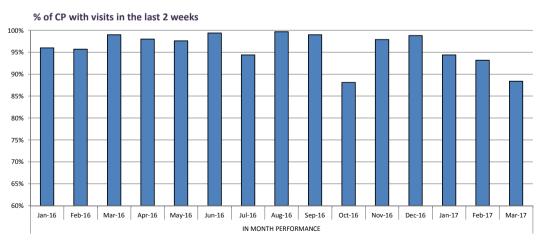
ERFORMANCI

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

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

				5.	13	5.15
		cases V	o. of (s revi vithio nesca	ewed 1	% CP cases which were reviewed within timescale	% of CP with visits in the last 2 weeks
	Jan-16	81	of	84	96.4%	96.0%
	Feb-16	49	of	57	86.0%	95.7%
	Mar-16	90	of	91	98.9%	99.0%
	Apr-16	100	of	106	94.3%	98.0%
핑	May-16	105	of	108	97.2%	97.6%
IN MONTH PERFORMANCE	Jun-16	76	of	79	96.2%	99.4%
ORI	Jul-16	83	of	85	97.6%	94.4%
ERI	Aug-16	57	of	57	100.0%	99.7%
Ē	Sep-16	119	of	119	100.0%	99.0%
MON	Oct-16	60	of	60	100.0%	88.1%
Z	Nov-16	85	of	85	100.0%	97.9%
	Dec-16	43	of	43	100.0%	98.8%
	Jan-17	100	of	100	100.0%	94.4%
	Feb-17	73	of	73	100.0%	93.2%
	Mar-17	95	of	95	100.0%	88.4%
	2013/14				99.8%	
NNUAL	2014/ 15				96.5%	
ANN	2015/ 16				94.2%	
,	2016/ 17				98.6%	
NG	SN AVE				97.6%	
EST AARKI	BEST SN				100.0%	
LATEST BENCHMARKING	NAT AVE				94.0%	
BE	NAT TOP QTILE				100.0%	





Monthly Performance - Mar 2017 - 13.xlsx

LOOKED AFTER CHILDREN

DEFINITION

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

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



Monthly Performance - Mar 2017 - 13.xls.x 19 of 26

LOOKED AFTER CHILDREN - PLACEMENTS

DEFINITION

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

RORMANCE VEIS

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

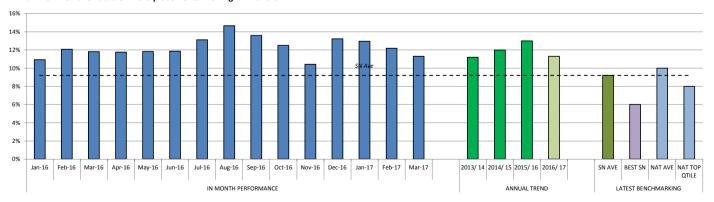
The number of children who experience a stable placement for over two years is just below that of our statistical neighbours and the national average. These two statistics could suggest that we need to improve our preventative work to reduce initial placement disruption. If a child experiences a disruption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

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

	trie sarrie pia			8.1				8.	2
		No. of long term LAC placements stable for at least 2 years least 2 year				have plac	of LAC e had more cemer olling	3 or nts - 12	% LAC who have had 3 or more placements - rolling 12 months
	Jan-16	108	of	145	74.5%	47	of	430	10.9%
	Feb-16	108	of	149	72.5%	51	of	422	12.1%
	Mar-16	109	of	150	72.7%	51	of	432	11.8%
	Apr-16	103	of	142	72.5%	51	of	434	11.8%
삥	May-16	103	of	141	73.0%	51	of	431	11.8%
IN MONTH PERFORMANCE	Jun-16	98	of	138	71.0%	51	of	430	11.9%
ORI	Jul-16	98	of	141	69.5%	58	of	442	13.1%
ERF	Aug-16	98	of	142	69.0%	66	of	450	14.7%
표	Sep-16	99	of	142	69.7%	61	of	449	13.6%
Q N	Oct-16	136	of	211	64.5%	58	of	464	12.5%
Ξ	Nov-16	101	of	147	68.7%	50	of	480	10.4%
	Dec-16	98	of	145	67.6%	64	of	484	13.2%
	Jan-17	94	of	141	66.7%	61	of	471	13.0%
	Feb-17	93	of	142	65.5%	59	of	484	12.2%
	Mar-17	98	of	145	67.6%	55	of	487	11.3%
	2013/ 14	108	of	157	68.8%	44	of	393	11.2%
NNUAL	2014/ 15	110	of	153	71.9%	49	of	409	12.0%
ANNUAL TREND	2015/16	109	of	150	72.7%	56	of	431	13.0%
	2016/ 17	98	of	145	67.6%	55	of	487	11.3%
NG	SN AVE				68.2%				9.2%
MARKI	BEST SN				79.0%				6.0%
LATEST BENCHMARKING	NAT AVE				68.0%				10.0%
98	NAT TOP QTILE				72.0%				8.0%

% long term LAC placements stable for at least 2 years 100% 90% 80% SN Ave 70% 60% 50% 40% 30% 20% 10% Jan-16 Feb-16 Mar-16 Apr-16 May-16 Jun-16 Jul-16 Aug-16 Sep-16 Oct-16 Nov-16 Dec-16 Jan-17 Feb-17 Mar-17 2013/ 14 2014/ 15 2015/ 16 2016/ 17 SN AVE | BEST SN | NAT AVE | NAT TOP IN MONTH PERFORMANCE ANNUAL TREND LATEST BENCHMARKING





Monthly Performance - Mar 2017 - 13.xlsx 20 of 26

LOOKED AFTER CHILDREN - REVIEWS & VISITS

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

DEFINITION

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

RFORMANCI

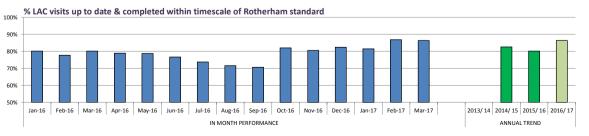
Current performance on LAC visits are monitored by the Head of Service daily and at weekly performance meetings. Any visit exceeding statutory minimum timescales is examined on a child by child basis to ensure they have been subsequently visited and to ensure the reason for lateness is understood. In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

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

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







LOOKED AFTER CHILDREN - HEALTH

DEFINITION

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

RFORMANCE ANALYSIS

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

New Horse Carlo				6.9	6.1			6.		100% T	Health of LA	C - I	lealth /	Assess	ments																				
Jan-16 88.7% 70.5% 0 of 12 0.0% 40% 30% Feb-16 88.3% 65.3% 0 of 14 0.00% 10% 10% 10% 10% 10% 10% 10% 10% 10%				Health	Dental	No.	Initial essme	Health ents In	% Initial Health Assessments In	90% — 80% — 70% —																	E					E			Ē
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Apr-16 92.9% 65.3% 0 of 14 0.0% 15 20.0% 14 92.8% 67.2% 3 of 15 20.0% 14 0.0% 14 0.0% 14 0.0% 14 0.0% 14 0.0% 15 0.0%			Mar-16	92.1%	86.6%	3	of	10	30.0%			-	\mathbf{H}	Н	Н	Н	+		\dashv			-	\dashv		-			+		-	Н		╂	-	H
No.			Apr-16	92.9%	65.3%	0	of	14	0.0%					П	П				\dashv	•						\Box				76	H				Ц.
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Nov-16 95.9% 69.1% 2 of 20 10.0%		MON	Oct-16	95.7%	69.5%	1	of	11	9.1%																										E
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Feb-17 88.4% 62.3% 6 of 16 37.5% Mar-17 87.1% 62.7% 3 of 7 42.9% PARTITION OF THE PERFORMANCE SN AVE NAT AVE NAT TOP NAT TO			Jan-17	92.1%	63.8%	0	of	28	0.0%			-	Н	Н	Н		+	+	\dashv	\vdash	\blacksquare		-	-							\vdash			-	
Health of LAC - % Initial Health Assessments In Time Health of			Feb-17	88.4%	62.3%	6	of	16	37.5%		Jan-16 Feb-16	Ma	r-16 Apr	-16 Ma	y-16 Ju	ın-16	Jul-16	Aug-1	6 Se	p-16	Oct-16	Nov-	.6 De	c-16	Jan-1	7 F6	eb-17	Mar-17	,]	2013	/ 14 20	14/ 15	2015/ 16	5 2016	/ 17
2013/14 82.7% 42.5% 19.2% 40.5% 20.0% 20.15/16 92.8% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 95.0% 8.4% 20.0% 20.15/16 92.8% 95.0% 95.			Mar-17	87.1%	62.7%	3	of	7	42.9%								IN	MONTH	PERFC	RMANO	E											ANN	IUAL TR	END	
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SN AVE BEST SN NAT AVE NAT TOP NAT TOP SN AVE 10% 5% 0% Jan-16 Feb-16 Mar-16 Apr-16 May-16 Jun-16 Jul-16 Aug-16 Sep-16 Oct-16 Nov-16 Dec-16 Jan-17 Feb-17 Mar-17 2013/14 2014/15 2015/16 2016/17 ANNUAL TREND		ANA	2016/ 17	87.1%	62.7%				17.7%			_				_										_		_				_			
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Monthly Performance - Mar 2017 - 13.xlsx 22 of 26

LOOKED AFTER CHILDREN - PERSONAL EDUCATION PLANS

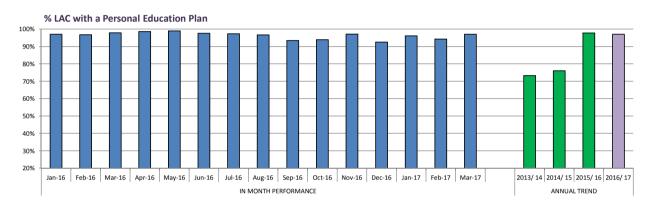
DEFINITION

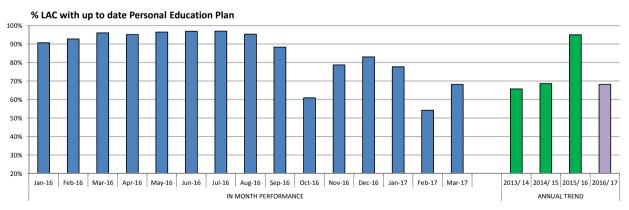
A personal education plan (PEP) is a school based meeting to plan for the education of a child in care. The government have made PEPs a statutory requirement for children in care to help track and promote their achievements.

PERFORMANCE ANALYSIS

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

				6.1	2			6.1	3
		Eligi v Pe	mber ible i vith a ersor ation	LAC a	% LAC with a Personal Education Plan	Numb with u Pe Educa	ıp to	date al	% LAC with up to date Personal Education Plan
	Jan-16	260	of	268	97.0%	243	of	268	90.7%
	Feb-16	267	of	276	96.7%	256	of	276	92.8%
	Mar-16	272	of	278	97.8%	267	of	278	96.0%
	Apr-16	283	of	287	98.6%	273	of	287	95.1%
핑	May-16	282	of	285	98.9%	275	of	285	96.5%
IN MONTH PERFORMANCE	Jun-16	282	of	289	97.6%	280	of	289	96.9%
ORI	Jul-16	287	of	295	97.3%	286	of	295	96.9%
PERF	Aug-16	287	of	297	96.6%	283	of	297	95.3%
Ē	Sep-16	255	of	273	93.4%	241	of	273	88.3%
MON	Oct-16	216	of	230	93.9%	140	of	230	60.9%
Z	Nov-16	233	of	240	97.1%	189	of	240	78.8%
	Dec-16	235	of	254	92.5%	211	of	254	83.1%
	Jan-17	245	of	255	96.1%	198	of	255	77.6%
	Feb-17	245	of	260	94.2%	141	of	260	54.2%
	Mar-17	259	of	267	97.0%	182	of	267	68.2%
	2013/ 14				73.3%				65.7%
UAL	2014/ 15				76.0%				68.7%
ANNUAI TREND	2015/ 16				97.8%				95.0%
,	2016/ 17				97.0%				68.2%
NG	SN AVE								
LATEST BENCHMARKING	BEST SN								
NC HA	NAT AVE								
BEI	NAT TOP QTILE								





Monthly Performance - Mar 2017 - 13.xlsx

CARE LEAVERS

DEFINITION

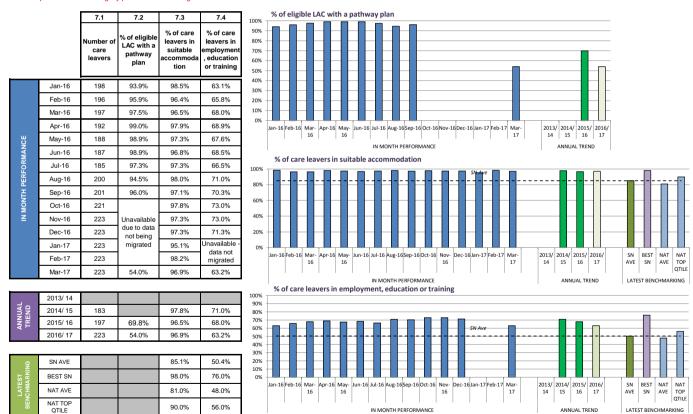
A care leaver is defined as a person aged 25 or under, who has been looked after away from home by a local authority for at least 13 weeks since the age of 14; and who was looked after away from home by the local authority at school-leaving age or after that date. Suitable accommodation is defined as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

PERFORMANCE ANALYSIS

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

DATA NOTE: Care Leavers information was not part of the automated data migration therefore service has been manually inputting the full cohort information.

Monthly monitoring via Liquid Logic has now been re-established from March 17 onwards. Any data provided between Oct 16 & Feb 17 has been supplied from the highlight reports that team managers provide for the fortnightly performance meetings.



ADOPTIONS

DEFINITION

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

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

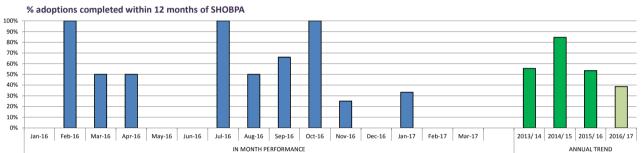
RFORMANCE

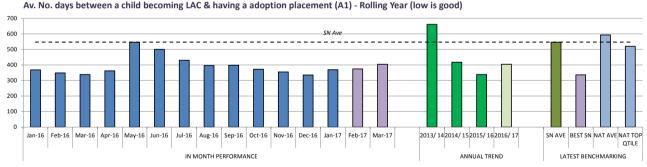
Performance each month can vary significantly given the size of the cohort which is always very small.

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

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

					,	
				9.1	9.2	9.3
		Number of adoptions	Number of adoptions completed within 12 months of SHOBPA	% adoptions completed within 12 months of SHOBPA	Av. No. days between a child becoming LAC & having a adoption placement (A1) (rolling yr.)	Av. No. days between placement order & being matched with adoptive family (A2) (rolling yr.)
	Jan-16	3	0	0%	368.0	159.5
	Feb-16	7	7	100%	348.4	141.7
	Mar-16	4	2	50%	338.4	137.9
	Apr-16	2	1	50%	362.5	145.5
CE	May-16	2	0	0%	546.8	213.3
MAN	Jun-16	1	0	0%	500.4	197.0
FOR	Jul-16	2	2	100%	430.1	161.8
PER	Aug-16	2	1	50%	395.7	150.7
IN MONTH PERFORMANCE	Sep-16	3	2	66%	398.3	142.4
MON	Oct-16	2	2	100%	372.3	138.6
Ξ	Nov-16	4	1	25%	354.3	143.4
	Dec-16	1	0	0%	335.7	221.3
	Jan-17	9	3	33%	368.8	211.0
	Feb-17	1	0	0%	374.7	208.4
	Mar-17	2	0	0%	404.0	232.9
ND_	2013/14			55.6%	661.0	315.0
TRE	2014/ 15			84.6%	417.5	177.3
JAL	2015/ 16	43	23	53.5%	338.4	137.9
ANNUAL TREND	2016/ 17	31	12	38.7%	404.0	232.9
G	SN AVE				546.5	220.6
LATEST CHMARKING	BEST SN				336.0	47.0
LATEST	NAT AVE				593.0	223.0
BEN	NAT TOP				520.0	172.0







Monthly Performance - Mar 2017 - 13.xtsx 25 of 26

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

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

CASELOADS

DEFINITIO

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

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

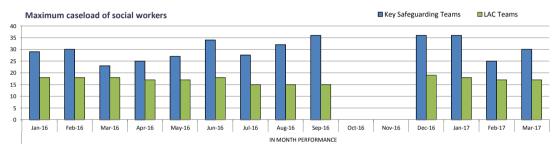
The impact of rising LAC has been a rise in the number of average cases per SW to 11 however the maximum is now at 17 well within accepted limits. A management review of all children with a section 20 legal status has identified the potential to return home for up to 15 children. If this is achieved,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

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

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

		10.1	10.2	10.3	10.4	10.5	10.6	10.7	10.8	10.9
		Maximum caseload of social workers in key Safeguardi ng Teams	Maximum caseload of social workers in LAC Teams	Av. no. cases in LAC Teams	Av. no. cases in Duty Teams	Av. no. cases in CIN North Teams	Av. no. cases in CIN Central Teams	Av. no. cases in CIN South Teams	Av. no. cases in Children's Disability Team	Av. no. cases in Children Sexual Exploitation Team
	Jan-16	29	18	11.7	17.2	14.7	19.2	15.7	14.9	4.9
	Feb-16	30	18	12.8	11.3	17.1	16.6	17.8	13.5	4.4
	Mar-16	23	18	12.6	13.7	16.6	17.9	17.3	14.9	5.4
	Apr-16	25	17	13.2	13.8	17.8	16.3	17.1	15.9	5.1
병	May-16	27	17	12.7	15.8	18.1	17.2	15.1	15.8	4.4
MAN	Jun-16	34	18	11.8	18.9	18.2	17.6	14.2	15.9	5.3
ORI	Jul-16	28	15	13.7	19.5	18.8	16.7	14.2	17.0	5.9
ER	Aug-16	32	15	12.7	18.9	17.8	16.1	15.7	16.3	4.5
IN MONTH PERFORMANCE	Sep-16	36	15	12.0	26.0	18.0	16.0	14.0	14.0	4.0
NON	Oct-16			Oct 8 N	lov 16 doto	unavailable	due to deta	migration		
Z	Nov-16			OCI & I	NOV 10 data	uriavaliable	due to data	i illigiation		
	Dec-16	36	19	12.5	15.0	14.7	14.5	15.5	15.6	3.4
	Jan-17	36	18	12.9	15.8	15.2	15.7	17.9	16.9	2.8
	Feb-17	25	17	11.0	13.7	16.7	16.4	18.1	16.0	2.0
	Mar-17	30	17	11.6	13.3	17.4	17.4	18.3	15.4	1.0

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



Average number of cases per team

