## **Children & Young People Services**



# Early Help and Family Engagement Monthly Performance Report

As at Month End: June 2017

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

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

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- increase in numbers (no good/bad performance)
 - improvement in performance

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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	201	16/17	2017/18					DOT	RAG (in	Та	rget and To	lerances	YR ON YR	TREND	LAT	EST BENCH	MARKING -	2014/15
	NO.	INDICATORS - EARLY HELP BOROUGH WIDE P	ERFORMANCE	PERF IS	(Monthly)	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Year To Date 2017/18	DATA NOTE	(Month on Month)	month)	Red	Amber	Target Green	2015/16	2016/17	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTILE THRESHOLD
щ		*Early Help Contacts during the reporting month (including S EH Contacts tab	Step downs)See Note 1 on	Info	Number	407	392	271	341	288	900	Financial Year	Ψ						3914				
TRIAGE		*Number and % of Early Help Contacts with an Early Help re Triaged during the reporting month withinFive working days		Info	Number	344	340	223	272	189	684	Financial Year (Cumulative)	¥						3337				
		downs) see note 2 on Triage Tab.		High	%	98.3%	98.6%	99.1%	93.8%	71.1%	88.0%	Financial Year (Cumulative)	<b></b>	R		>90% <100%	100%		85.3%				
INITIAL	2.1	*Number of Initial Contact cases that reached timeliness sco month. See note 3 on EH Assessment Tab	ppe within the reporting	Info	Number	66	136	98	103	110	311	Financial Year (Cumulative)	<b>^</b>						501				
EINI ATNO	2.2	*Number and % of Initial Contacts made within <b>Three</b> working	g days of allocation	Info	Number	26	73	53	64	70	187	Financial Year (Cumulative) Financial Year	<b>^</b>			>65%			616				
		*Number of Early Help Assessments that reached timeliness	s scope within the reporting	High	%	39.4%	53.0%	54.1%	62.1%	63.6%	60.1%	(Cumulative) Financial Year	<b>1</b>	R		<75%	75%						
္က	3.1	month. See note 4 on EH Assessment Tab  *Number and % of Early Help assessments completed within		Info	Number	115	127	89	130	104	323	(Cumulative) Financial Year	<b>.</b>						556				
MEN.	3.2	Timeliness is defined as Early Help Assessment being comp Triage Decision date (3 days IC plus 35 days for EHA)		Info	Number	40	50	44	46	41	131	(Cumulative) Financial Year	<u> </u>			>90%			481				
EARLY HELP ASSESSMENTS		1		High	%	34.8%	39.4%	49.4%	35.4%	39.4%	40.6%	(Cumulative) Financial Year	<b>^</b>	R		<100%	100%						
ASS		Number and % of Early Help Assessments made by Partner total number of EHA's in the reporting month)	rs (as a proportion of the	Info	Number	6	7	8	16	9	33	(Cumulative) Financial Year	<b>–</b>						75				
				High	%	5.4%	5.3%	7.8%	17.2%	9.3%	11.3%	(Cumulative)	Ψ						6.5%				
	4.1	Number of Open cases at the end of the reporting period		Info	Number	1399	1424	1506	1438	1559	1438	Month end position	<b>^</b>						1424				
CASELOAD	4.2	Number of Closed cases in the reporting period		Info	Number	212	222	226	178	157	404	Financial Year (Cumulative)	Ψ						1679				
CASE	4.3	Number of re-referrals where original referral was Early Help	om Step Down Panel				Data Ir	n Development															
	5.1	Number of cases (Families) submitted to Step Down Panel	l Old Indicator	Info	Number	66	50	37			37	Financial Year (Cumulative)							559				
DOWNS	5.2	Number and % of Families where Step Down Allocation was	s agreed during the	Info	Number	55	39	34			34	Financial Year (Cumulative)							445				
	J.Z	reporting period - Old Indicator		Info	%	83.3%	78.0%	91.9%			91.9%	Financial Year (Cumulative)							79.6%				
STEP		Number of Step Downs agreed in Locality	amilies	Info	Number			 	45	22	101 (5.2+5.3)	Financial Year (Cumulative)	Ψ										
	5.3		hildren	Info	Number				95	47	196	Financial Year (Cumulative)	Ψ										
RES		% of children aged 0-5 living in the Rotherham area who are Centre	eregistered with a Children's	High	% (Quarterly)		94%				Q1 to be	Financial Year	Q1 to be repo	orted July			95%	91%	94%				
CHILDRE	6.2	% of children aged 0-5 living in the Rotherham area who have Centre activities	ve accessed Children's	High	% (Quarterly)		52%	   			reported July 2017	Financial Year	2017				66%	54%	52%				
				Low	Primary % (Termly)	10.3%		9.8%			9.8% (Half term 1-4)	Academic Year	<b>^</b>	A			8.4%	10.3% (Autumn/Spring 15/16)	10.3%	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%		14.1%			14.1% (Half term 1-4)	Academic Year	<b>^</b>	А			13.8%	14.4% (Autumn/Spring 15/16)	14.8%	13.8% (Autumn/S pring 15/16)	10.9% (Autumn/S pring 15/16)	12.3% (Autumn/S pring 15/16)	
EDUCATIO	7.2	% of children attending School		High	Primary % (One month in arears)	95.5%	96.1%	95.8%	95.5%		95.7%	Academic Year	<b>.</b>	Α			96.0%	95.9% (Autumn/Spring 15/16)	95.7%	96% (Autumn/S pring 15/16)	96.3% (Autumn/S pring 15/16)	pring 15/16)	
		75 S. S. Marion diversing Control		High	Secondary % (One month in arears)	93.8%	94.6%	94.1%	93.9%		94.2%	Academic Year	•	A			94.7%	94.5% (Autumn/Spring 15/16)	94.3%	94.7% (Autumn/S pring 15/16)	95.2% (Autumn/S pring 15/16)	95% (Autumn/S pring 15/16)	

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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.

				DATA NOTE	201	6/17	2017/18							Targ	jet and To	lerances	YR ON YR	TREND	LA1	EST BENCI	HMARKING -	2014/15
	NO.	INDICATORS - EARLY HELP BOROUGH WIDE PERFORMANCE	GOOD PERF IS	(Monthly)	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Year To Date 2017/18	DATA NOTE	DOT (Month on Month)	RAG (in month)	Red	Amber	Target Green	2015/16	2016/17	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTILE THRESHOLD
~		Number and % of families engaged as a percentage of annual target Families For	High	Number	105	97	60	53	56	169	Financial Year (Cumulative)	<b>^</b>	G			633 Families	371	882				
S FOI		Change (FFC) Year 3	High	Cumulative %	89%	100%	9%	18%	27%	27%	Financial Year (Cumulative)	<b>^</b>	G			100%	100%	100%				
FAMILIES FOR CHANGE	8.2	Number of FFC PbR outcomes claimed (evidence of employment outcome)	High	Number	27	37	0	0	0	0	Claims subject to confirmation of	<b>→</b>	R			Between the range of 280-	5	37				
Ē	8.3	Number of FFC PbR outcomes claimed (evidence of significant & sustained progress)	High	Number	28	43	0	0	0	0	claim windows by TFU	<b>→</b>	R			350	0	43				
	9.1	Young people aged 16-17 (academic age) whose current activity is not known	Low	%		0.00/	0.004	0.40/			Annual (Nov, Dec Jan Average)		G			2.8%	N/A	2.8%				
					2.4%	2.8%	3.3%	3.1%	2.9%		Monthly	<u> </u>	G			3.0%						<b></b>
	92	Young people aged 16-17 (academic age) who are NEET	Low	%							Annual (Nov, Dec Jan Average)		G			3.1%	N/A	3.1%				
	0.2	Totally people agost 10 11 (academic age) and allo 11221	20	~	3.2%	3.5%	3.5%	3.9%	4.1%		Monthly	<u> </u>	G			4.2%						
NEETS	9.3	% of Academic Age 16,17,18 Corporate Responsibility LAC/CLEET	High	%	71.5%	68.5%	68.7%	68.6%	70.6%		Quarterly	<b>^</b>	R			80.0%	74.7% (Nov, Dec, Jan ave)	71.2% (Nov, Dec, Jan ave)				
2	9.4	% of Academic Age 16,17,18 Corporate Responsibility LAC/CLNEET	Low	%	27.8%	30.1%	29.2%	27.5%	24.8%		Quarterly	<b>^</b>	R			20.0%	22.3% (Nov, Dec, Jan ave)	27.8% (Nov, Dec, Jan ave) 92.5%				
	9.5	Young people aged 16-17 (academic age) meeting the duty to participate	Info	%	92.6%	92.2%	92.1%	91.6%	91.4%		Monthly	Ψ					91.9% (Nov, Dec, Jan ave)	(Nov, Dec, Jan ave)				
	9.6	No of Youth sessions undertaken in the reporting month	Info	Number	92	86	49	87	71	136	Annual	<u> </u>						1434				4
		Non-centre based	Info	Number	36	39	17	37	33	54	Annual	Ψ						450				
	10.1	Numbers of young people first time entrants (FTE) into the criminal justice system	Low	Rate per 100,000 of 10- 17 population		319				319 (period Jan16 - Dec16)	Annual						519 (Period April 14 to March 15)	414 (period Oct15 - Sep16)	439.76		409.1	
E	10.2	Use of Custody	Low	Rate per 100 of 10-17 population		0.29				0.29 (period Apr16 - Mar17)	Annual					Lower than same quarter previous year	0.24	0.41 (period Jan 16 - Dec 16)				
ΥОΤ	10.3	Rate of re-offending by young offenders	Low	Binary Rate		31.8%				31.8% (Jul 14 - Jun 15)	Annual					and comparable with national trends	Data not available	29.9% (Apr 14 - Mar 15)	36.28		37.95	
	10.4	Frequency of re-offending by young offenders	Low	Frequency Rate		0.9				0.9 (Jul14 - Jun15)	Annual						until early 2017	0.68 (Apr 14 - Mar 15)				
	11.1	No of Exit Surveys returned	Info	Number	14	27	27	21	18	66	Monthly	Ψ						222				
유 왕	11.2	Number of formal complaints received during the reporting month	Info	Number	0	0	0	0	0	0	Monthly	<b>→</b>						4				
OM	<del>-</del>	Number of formal complaints upheld in the reporting month	Info	Number	0	0	0	0	0	0	Monthly	<b>→</b>						2				
CUSTOMER FEEDBACK	11 4	Number of formal complaints closed during the month which were dealt with ir	High	Number	0	0	0	0	0	n	Monthly	<b>→</b>				100%		2				
ರ ≝	ļi	timescales			J				0	ļ						10070						
	11.5	Number of compliments received during the reporting month	Info	Number	1	0	0	2	1	3	Monthly	Ψ						9				
QUALITY ASSURANCE	12.1	Number of Team Manager Audits completed in the reporting month	Info	Number	14	15	13	10	3	26	Monthly	•						151				
	13.1	Number of staff Contract Count	Info	Number	328	328	329	327	331			<b>^</b>										
H	ļ		Info	Number	238.0	239.4	240.9	240.3	241.9			<u> </u>										
ESTABLISHMENT INFORMATION	13.2	Number of starters	Info	Number	2	2	3	0	3	6	Monthly	<b>^</b>						11				
SHI	13.3	Number of leavers	Info	Number	0	1	3	3	0	6		Ψ						34				
BLI		Staff Vacancies	Info	Number	33	30	32	37	33			Ψ										
STA		Percentage of PDR's completed	High	%			3.4%	21.0%	89.2%	89.2%	Annual	<u>^</u>	Α			98%	98%	100%				
ш	13.6	Number of Formal Capability processes in progress	Info	Number	1	1	0	0	0	0	Monthly	<b>→</b>						1				
	13.7	Sickness Annual FTE sick days	Low	Cumulative No.	10.91	11.2	10.73	10.76	10.6	10.6	Annual	<b>^</b>	Α			9.52	10.46	11.2				
				140.																		

Quarterly Scorecard As at Quarter 4: Jan - Mar 2017

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

no movement but within limits of target

d/bad performance) - decline in performance, not on target

no movement, not on target

										2017/18				
	NO.	INDICATORS - EARLY HELP BOROUGH WID	E PERFORMANCE	Data Source	Frequency	GOOD PERF IS	DATA NOTE (Monthly)	Quarter 1 April - June 2017	Quarter 2 July - September 2017	Quarter 3 October - December 2017	Quarter 4 January - March 2018	YTD	Direction of Travel	Sparkline
픋	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					-		
E BIRTH	1.2	Number of Teenage mothers who have received support	Initiation	Family Nurse Partnership	Quarterly	Info	Number	To be reported in Quarter 2				-	To be reported in Quarter 2	
PRE	1.3	through the programme and were breastfeeding at:	6-8 Weeks			Info	Number					-		
	2.1	Percentage of mothers initiating breastfeeding		- Family Nurse Partnership	Quarterly	High	%	To be reported				-	To be reported in	
MENT	2.2	Percentage of mothers continuing to breastfeed at 6 - 8 v	veeks	Family Nurse Partnership	Quarterly	High	Number	in Quarter 2				-	Quarter 2	
DEVELOPMENT	3	Percentage of births that receive a face to face new birth Health Visitor	visit within 14 days by a	Family Nurse Partnership	Quarterly	High	%	To be reported in Quarter 2				-	To be reported in Quarter 2	
YEARSD	4.1	Immunisation of 1 year olds - Diphtheria, Tetanus and W	hooping Cough - DTaP			High	%					-		
EARLY YE/	4.2	Immunisation of 2 year olds - Measles Mumps and Rube	lla - MMR	Family Nurse Partnership	Quarterly	High	%	To be reported in Quarter 2				-	To be reported in Quarter 2	
EAF	4.3	Percentage of children who received a 2 - 2.5 year review	v			High	%					-		
	5	Number and Percentage of Eligible 2 years olds accessing	ng their Early Years take-up	RMBC Early Years	Termly	High	%	78%				78.0%		
z	6.1	Number of Fixed Term Exclusions	Primary			Low	Number	101				101		
EDUCATION	0.1	Tollies of Face Tollies Exclusion	Secondary	. RMBC Inclusion Department	Available Termly	Low	Number	732				732		
ong	6.2	Number of Permanent Exclusions	Primary		,	Low	Number	3				3		
	6.2	Number of Permanent Exclusions	Secondary			Low	Number	8				8		
CARE	7.1	Number of Children on a CiN Plan				Info	Number	1744						
CIAL C	7.2	Number of Children who are on a child protection plan (C	PP)	RMBC Performance and Quality Team	Quarterly	Info	Number	424						
soc	7.3	Number of Children who are Looked after (LAC)				Info	Number	522						

4

DEFINITION Early Help Contacts Owner Susan Claydon

There were 288 contacts triaged within the reporting period of June which is a decline on the previous month of 53 cases. The north of the borough received 35 Early Help Assessment Recommendations and 9 Co-working Recommendations (with Children's Social Care). The south of the borough received 66 Early Help Assessment Recommendations and 6 Co-working Recommendations and the central area of the borough received 41 Early Help Assessment Recommendations and 17 C working Recommendations with Children's Social Care. In June, 15 cases (5%) that presented at the 'front door' were already open to a Lead Professional and the new concern was shared with the Lead Professional. This highlights the importance of the central visibility of the Early Help Assessment and evidences the swift sharing of new intelligence and information to ensure joined up support for children and families. 9% of cases in June were outcomed as universal which means that there was not evidence of additional need following the screening of the concerns within the triage function of the service. 24 cases (8% of contacts) resulted in an Early Help Assessment Recommendation to Partners in June and 4 cases (1.3%) were referred to the Barnardo's Reach Out Service.

Note 1:

All Contacts/Recommendations for May 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.

						R	отн	ERHA	М							
June 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 YOT	Step Down to Early Help Partners	Evidence Based Intervention	Universal Recommendation	Universal recommendation with Action	Still undergoing screening	ROTHERHAM TOTAL
MASH transfer to EH Triage	46	0	0	6	2	1	15	4	0	0	0	8	22	3	0	107
Request for Co Working	0	32	0	0	0	0	0	0	0	0	0	0	0	0	0	32
Request For Support	74	0	0	9	0	21	2	0	0	0	0	17	4	0	0	127
Step Down Request	22	0	0	0	0	0	0	0	0	0	0	0	0	0	0	22
Grand Total	142	32	0	15	2	22	17	4	0	0	0	25	26	3	0	288

					NORT	Н													SOU	TH												С	ENTRA	L					
June 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	al to External Partner/Agency	Recommendation for Barnardo's Reach out Service	Step Down Step Down to YOT	own to Early Help	Evidence Based Intervention Iniversal Recommendation	ersal recommendati	Still undergoing screening	NORTH TOTAL	Early Help Assessment Recommendation	EH Co working Agreement with Children's Social Care	Escalation to Children's Social Care Open EH Assessment Notification	EH Assessment Recommendation to Partner	Early Help Assessment Recommendation to Partner	Support from Early al Partner/Agency	Recommendation for Barnardo's Reach out Service	own	Step Down to YOT Step Down to Early Help Partners	Evidence Based Intervention	3	Universal recommendation with Action	TH TOTAL	Early Help Assessment Recommendation	working Agreement with Child	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	tner/Agency	Step Down	- ш	Evidence Based Intervention	Universal recommendation with Action	5	CENTRAL TOTAL
MASH transfer to EH Triage	13			2		7	2			2 6	1		33	19		1			2	1			5	8	2	38	14	1		5		1	6 1	L		1 8	:		36
Request for Co Working	9												9		6											6		17											17
Request For Support	18		4		8					5			35	33		1		7	2				5	2		50	23	3		4		6				7 2	!		42
Step Down Request	4												4	14												14	4												4
Grand Total	35 9	0	4	2	8	7	2	0 0	0	7 6	1	0	81	66	6	0 2	0	7	4	1	0	0 0	10	10	2 (	10	8 41	1 17	0	9	0	7	6 1	0	0 0	8 1	0 0	0	99

5

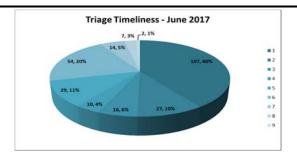
#### TRIAGE

DEFINITION Timeliness of Triage Owner Susan Claydon

ormance Analys

Performance related to the timeliness of cases being triaged within the expected 5 day timeframe has declined in June by 22.7% with 71.1% of cases triaged within the expected time frame. A further 45 cases (20.3%) were triaged within 6 days which is just outside of expectations. Several members of the team are off sick or taking planned annual leave and this has impacted considerably on performance in the reporting period. Discussions relating to capacity are taking place within the service. However, the sickness absence is the explanation for the dip in performance as the team were depleted. The situation is being assessed daily and additional support being drafted in where possible until the team are back to full compliment.

		1.1	
	R	OTHERHA	M
Jun-17	ТНЕКНАМ ТОТАL		s Triaged king days
	RO	%	Number
Number of Contacts Triaged	266	71.1%	189



	Past Performance 2016/17	Out turn 2016/17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Note 2: For June Triage Timeliness data has been taken from the Liquid Logic EHM system. We are now reporting in the
Nu day	nber of Contacts Triaged within 5	3337	223	272	189										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
	Percentage	85.3%	99.1%	93.8%	71.1%										all contacts other than Step Down from LCS.

#### **INITIAL CONTACTS**

DEFINITION Timeliness of initial contacts Owner Susan Claydon

Performance Analysis

Of the Early Help cases that required contact in June 2017, 85.4% were successfully engaged within the month which represents an increase of 1.9% on last month's performance and highlights a steady increase over the year. Of those successfully engaged, 63.6% of engagement was made within 3 days and a further 21.8% were engaged after the three day target. This is positive progress and highlights the performance culture that is becoming embedded in localities around the importance of swift, early engagement with families when needs present.

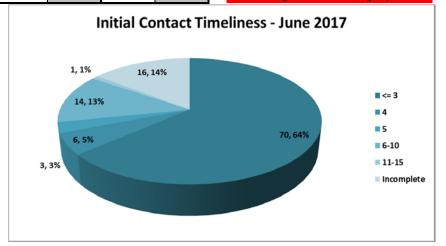
				2.1.and 2.2				
Jun-17	ROTHE	RHAM	NO	RTH	sol	UTH	CEN	TRAL
	Number	%	Number	%	Number	%	Number	%
Number of cases reaching scope in month	110		25		49		36	
ICs completed in time (meeting 3 days)	70	63.6%	16	64.0%	25	51.0%	29	80.6%
ICs completed in month outside 3 days timeliness	24	21.8%	6	24.0%	15	30.6%	3	8.3%
ICs in scope but not completed	16	14.5%	3	12.0%	9	18.4%	4	11.1%
Cases open at month end where no IC recorded	27		9		12		6	

# Note 3: For June 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

	f Initial Contacts made ng days 2017/18	Rotherham	North	South	Central
Apr-17	53 out of 98	54.1%	66.7%	50.0%	44.0%
May-17	64 out of 103	62.1%	54.5%	65.9%	65.5%
Jun-17	70 out of 110	63.6%	64.0%	51.0%	80.6%
Jul-17					
Aug-17					
Sep-17					
Oct-17					
Nov-17					
Dec-17					
Jan-18					
Feb-18					
Mar-18					



#### **EARLY HELP ASSESSMENT**

DEFINITION Early Help Assessments Owner Susan Claydon

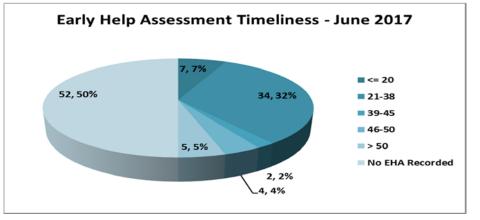
Performance Analysis

Of the 104 Early Help Assessments that required completion in June 39.4% were completed within the standard timeframe of 35 days and a further 10.6% were completed after that timeframe had expired. The reasons for delay in assessment can be as a result of various issues; if engagement is delayed at the start because the worker was unable to secure consent for support this has a knock on effect with regard to the assessment completion. Timeliness measures are important to ensure that children and families receive support at the right time and the increase in volume has impacted upon the service this month. Work is ongoing to increase the uptake of partner generation of Early Help Assessments so that the responsibility is shared across the wider children's workforce. In addition, a regular performance meeting has been developed with performance colleagues and locality managers to address performance issues as they emerge. Improving performance in this area will be a key focus of the next operational performance group.

				3.1 ar	nd 3.2			
Jun-17	ROTHE	RHAM	NOI	RTH	soi	JTH	CENT	<b>TRAL</b>
	Number	%	Number	%	Number	%	Number	%
Number of cases reaching scope in month	104		38		41		25	
Early Help Assessments completed in time	41	39.4%	23	60.5%	9	22.0%	9	36.0%
Early Help Assessments completed in month outside timeliness	11	10.6%	3	7.9%	5	12.2%	3	12.0%
Early Help Assessments in scope but not completed	52	50.0%	12	31.6%	27	65.9%	13	52.0%
Cases open at month end where no Early Help Assessment recorded	126		30		62		34	

	Note 4:
For	June Early Help Assessment
timelir	ness has been calculated using
informa	ation from EHM. The measure is
taken on	any contacts with an outcome of
Early He	lp Assessment or Step Down and
	is based on:
EHM re	cords - number of days between
Triage D	ecision date and EHA completion
	date (practitioner).
NB Tim	neliness is defined as Early Help
Assessr	ment being made in 38 days from
	Triage Decision date

	nance of Early Help Assessments ed in 35 working days 2017/18	Rotherham	North	South	Central
Apr-17	44 out of 89	49.4%	77.3%	26.7%	51.4%
May-17	46 out of 130	35.4%	43.9%	22.6%	44.4%
Jun-17	41 out of 104	39.4%	60.5%	22.0%	36.0%
Jul-17					
Aug-17					
Sep-17					
Oct-17					
Nov-17					
Dec-17					
Jan-18					
Feb-18					
Mar-18					



#### **EARLY HELP ASSESSMENT - COMPLETED BY PARTNERS**

DEFINITION Early Help Assessments - Completed by Partners Owner Susan Claydon

Performance Analysis

Partners were responsible for 9.3% of the total Early Help Assessment rate in the borough during June 2017 which is an increase on April at the start of the financial year and a decrease on May. A new, simpler Early Help Assessment tool has been coproduced that is expected to be launched in August. It is anticipated that this new tool will support the work to increase uptake of Early Help Assessments by partners across the borough, however health update remains low and work continues to support better engagement in the process by health partners.

Jun-17		3.3											
Juli-17	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total to Date
Nursery Provision													0
Primary School	3	11	3										17
Secondary School		2											2
PRU													0
Rotherham Drug and Alcohol/RDaSH													0
Health													0
Work Based Learning Provider													0
YWCA	5	3	6										14
GROW													0
Other LA													0
Total Partner Early Help Assessments	8	16	9	0	0	0	0	0	0	0	0	0	33
Total Early Help Assessments completed	102	93	97										292
Partner completion % against all completed EHA's	7.8%	17.2%	9.3%										11.3%

#### **OPEN CASES**

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

DEFINITION

Owner

Susan Claydon

Performance Analysis The number of open cases in the Early Help Service has increased by 121 families when compared with last month. Cases are counted by families and so this represents a significant number of children and families receiving support. In addition, fewer cases were closed this month than previous month and this has contributed to an increased open case rate and will have impacted on capacity to complete Early Help Assessments on time. Cases need to remain open until sustainable change is effected across the whole family and again this highlights the importance of shared responsibility across the system for uptake of the Early Help Assessment to reduce the risk of needs escalating and requiring high level, statutory intervention.

June-17							4.	1					
Open Cases	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total (As at current month end)
North	403	389	423										423
South	544	515	531										531
Central	559	534	605										605
Total number of Open cases	1506	1438	1559	0	0	0	0	0	0	0	0	0	1559

June - 17													
Closed Cases	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total to Date
North	41	33	31										105
South	99	97	82										278
Central	86	48	44										178
Number of Cases Closed during the reporting month	226	178	157	0	0	0	0	0	0	0	0	0	561

DEFINITION Children's Centres (only available Quarterly)

Owner

Karla Capstick

The data for Quarter One will be available in July and therefore a full narrative will be included in the July Performance Scorecard which will be published during August.

#### Latest data and info below relates to Quarter 4 from 2016/2017.

In Quarter Four 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 higher helphest 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.

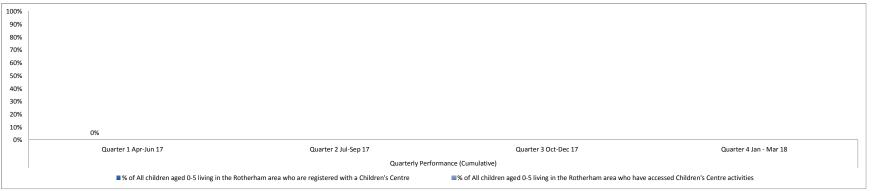
The engagement figures are cumulative with an end of year target of 66%. Continued positive progress has been made across the borough, with significant increases when compared with Quarter 3; however the target has not been achieved overall with the 30% LSOA areas falling short by 3% (this equates to 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.

TRFT have agreed and recognised the current data sharing agreement that is in place is current, valid and in line with existing national statutory and good practice guidance; they Trust are still experiencing capacity issues and RMBC officers have agreed to take data and complete some of the cleansing. The 0 -19 PNHS performance management framework has been agreed with KPI's that clearly articulates the need for TRFT to complete and lead on early help assessments.

			6	.1			6.2		
	easure				stered with a	% of All chi Rotherham Childr		have ac	cessed
	Scorecard Measure	Rotherham Overall	North	South	Central	Rotherham Overall	North	South	Central
ance	Quarter 1 Apr-Jun 17			D	ue in July's	Scorecard			
erforma Ilative)	Quarter 2 Jul-Sep 17								
Quarterly Performance (Cumulative)	Quarter 3 Oct-Dec 17								
Qua	Quarter 4 Jan - Mar 18								

		deprive	d SOA's in F	living in the Rotherham v Children's C	vho are	deprive	d SOA's in R	living in the otherham w en's Centre	ho have
		Rotherham Overall	North	South	Central	Rotherham Overall	North	South	Central
ance	Quarter 1 Apr-Jun 17			D	ue in July'	s Scorecar	rd		
terly Performa (Cumulative)	Quarter 2 Jul-Sep 17								
Quarterly Performance (Cumulative)	Quarter 3 Oct-Dec 17								
Qua	Quarter 4 Jan - Mar 18								



#### **FAMILIES FOR CHANGE**

DEFINITION Families For Change Owner Jenny Lingrell

The target for 2017-18 is 633. If families are identified evenly across the year our target is to identify 53 families each month and the target has been exceeded this month. This is positive because it provides a larger number of families who may be eligible for payment by results claims due to positive outcomes.

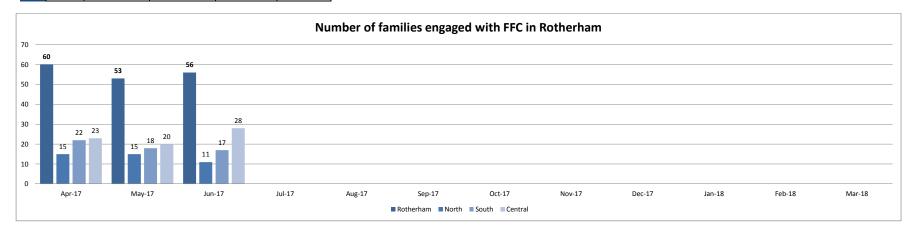
The Troubled Families Unit will visit Rotherham on 25th July 2017 to complete a spot-check of the payment by results claims that we have submitted to date. Preparations for this visit are robust, including documentary evidence and opportunities to talk to front-line staff.

The payment by results claim window is now open again and we will be submitting a further claim by October. The work to prepare this will begin following a deep dive performance review into Rotherham's payment by results claim on 27th July 2017. The deep dive review was requested following a national report published in March 2017 which identified Rotherham as a low performer when compared to local authorities across the country. Our figure of 3.4% against the 5 year target lags behind Doncaster (5.4%) who also entered the expanded programme in Wave 3.

	•		8.1		
	Scorecard Measure	Number of families engaged in Rotherham against a monthly target of 53	Number of families engaged in <u>North</u>	Number of families engaged in <u>South</u>	Number of families engaged in <u>Central</u>
	Apr-17	60	15	22	23
	May-17	53	15	18	20
	Jun-17	56	11	17	28
90	Jul-17				
Monthly Performance	Aug-17				
Ē	Sep-17				
ıl	Oct-17				
Pe	Nov-17				
ار ا	Dec-17				<u>.</u>
ut	Jan-18		_		_
Mo	Feb-18				
	Mar-18				
	Year to Date	169	41	57	71

		8	.1	
	Number of families engaged as percentage of annual target of 633 in Rotherham (Year 3)	Number of families engaged as percentage of annual target in <u>North</u>	Number of families engaged as percentage of annual target in <u>South</u>	Number of families engaged as percentage of annual target in <u>Central</u>
	9%	2%	3%	4%
l	18%	5%	6%	7%
l	27%	7%	9%	11%
l				
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		8.2	8.3
	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
au	Year 2 to date	37	43
Performance	Year 3 to date		
ərfd	Year 4 to date		
ď	Year 5 to date		



DEFINITION

NEETS and NOT KNOWNS

Owner

Collette Bailey

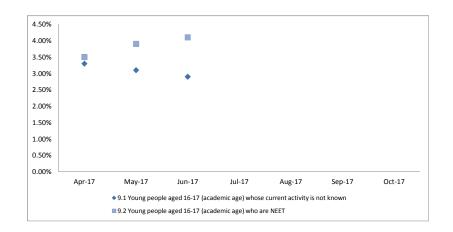
The position at the end of June shows a NEET figure of 4.1% (against a local target of 4.2%) and a Not Known figure of 2.9% (against a local target of 3.0%). Data sharing exercises and follow up will continue, as will work to re engage the NEET cohort, both centrally and across all localities to ensure we continue to meet our local targets.

Latest comparison data available for May return show:

In respect of Not Known Rotherham (3.1%) appear stronger than statistical neighbours (3.2%) and in line with national figures (3.0%), whilst falling short of the regional return (2.2%).

In respect of NEET figures Rotherham (3.9%) are enjoying better results than statistical neighbours (4.1%) and are in line with region (3.8%), whilst falling short of the national return (3.0%).

		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
	Apr-17	3.3%	3.5%
	May-17	3.1%	3.9%
e	Jun-17	2.9%	4.1%
anc	Jul-17		
ırm	Aug-17		
erfo	Sep-17		
y Pe	Oct-17		
th	Nov-17		
Monthly Performance	Dec-17		•
2	Jan-18		
	Feb-18		•
	Mar-18		



		Nort	h	Sout	h	Ce	entral
		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	roung people	Young people aged 16 - 17 (academic age) whose current activity is not known	Young people aged 16 - 17 (academic age) who are NEET
	Apr-17	1.8%	3.4%	2.6%	3.2%	5.3%	3.9%
	May-17	1.6%	4.1%	3.0%	3.2%	4.2%	4.6%
8	Jun-17	1.2%	4.2%	3.0%	3.4%	4.1%	5.1%
ıan	Jul-17						
JII.	Aug-17						
ərfc	Sep-17						
ď	Oct-17						
Monthly Performance	Nov-17						
oni	Dec-17						
Σ	Jan-18						
	Feb-18						
	Mar-18						

DEFINITION

Attendance (reported in arrears) and PA (reported in half termly installments)

Owner

David McWilliams

NORTH LOCALITY
Primary Attendance:

North has twenty-seven primary schools in the locality. 9 (33%) of the primary schools are on track to exceed local and national targets, with a further 3 (11%) on track to exceed local targets. The 15 remaining schools they are currently below local and national targets.

Out of the five secondary schools in the North, two schools (40%) are currently on track to exceed the local and national target and one school to exceed the local target. Two schools are currently below national and local targets.

Primary PA:
Out of the 27 primary schools, 10 schools (37%) had less PA, which is an improvement compared to the previous period where there was only seven schools with less than the national average. 17 schools (63%) had higher rates of persistent absence than the national average.

Secondary PA:
Out of the 5 secondary schools, two schools (40%) had less PA, which is an improvement compared to the previous period where there was only one school with less than the national average. The remaining three schools (60%) had higher rates of persistent absence than the national average.

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

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

			Reporting Month									
School Name	Area	NOR - Jan 17	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	
Brampton Cortonwood Infant	NORTH	205	95.5	93.7	94.0	92.6	94.8	93.8	95.7	94.7	95.4	
Brampton the Ellis CofE Primary	NORTH	484	97.3	96.5	96.4	95.7	96.4	97.1	96.5	97.0	97.0	
Brookfield Academy Primary	NORTH	260	95.5	93.5	93.5	94.0	92.7	89.6	94.9	95.3	93.0	
Dalton Foljambe J&I	NORTH	188	93.5	93.1	91.5	92.1	95.9	95.2	96.1	96.9	93.2	
High Greave Infant	NORTH	181	96.3	94.6	93.0	92.3	92.8	92.6	93.5	95.2	94.7	
High Greave Junior	NORTH	200	96.0	94.1	96.4	94.2	94.8	95.1	No Data	95.7	94.8	
Kilnhurst Primary	NORTH	213	96.0	94.7	94.4	93.3	95.5	94.7	96.2	97.2	95.5	
Monkwood Primary	NORTH	397	95.4	96.4	96.2	96.0	96.7	95.0	95.9	94.8	95.5	
Our Lady and St Josephs Catholic Primary	NORTH	249	96.3	97.1	97.3	94.9	94.8	96.6	97.0	96.2	95.9	
Rawmarsh Ashwood J&I	NORTH	229	96.4	96.1	97.2	97.7	95.9	95.9	97.6	96.9	96.7	
Rawmarsh Rosehill Junior	NORTH	237	96.5	96.7	96.9	97.4	95.7	96.9	96.6	96.2	94.1	
Rawmarsh Ryecroft Infant	NORTH	167	96.2	95.1	95.3	94.6	93.9	95.0	96.1	94.0	94.5	
Rawmarsh Sandhill Primary	NORTH	268	96.7	95.7	96.0	96.2	96.6	96.6	96.7	96.4	96.2	
Rawmarsh Thorogate J&I	NORTH	205	97.9	94.0	95.4	95.0	95.3	95.5	97.6	97.3	95.9	
St Gerard's Catholic Primary	NORTH	133	95.8	94.9	96.2	95.5	95.4	95.4	96.4	95.6	95.9	
St Joseph's Catholic Primary (Rawmarsh)	NORTH	189	95.8	95.8	95.2	94.7	94.8	96.5	95.4	96.4	95.8	
St Thomas CE Primary (Kilnhurst)	NORTH	195	95.1	95.3	94.9	96.1	94.4	92.8	95.6	96.3	94.5	
Swinton Fitzwilliam Primary	NORTH	357	96.9	96.0	96.9	95.9	94.7	96.3	96.9	95.9	96.3	
Swinton Queen Primary	NORTH	353	95.8	95.3	93.2	95.1	94.6	95.1	95.7	95.0	93.6	
Thrybergh Fullerton CE Primary	NORTH	144	96.5	95.4	95.1	94.2	94.4	93.9	94.3	95.7	95.7	
Thrybergh Primary	NORTH	191	94.3	94.6	95.1	93.9	95.7	94.6	95.6	93.5	95.7	
Trinity Croft CE J&I	NORTH	142	97.4	96.5	95.7	94.0	97.1	96.1	97.7	95.4	95.2	
Wath CE Primary	NORTH	336	97.0	95.8	96.1	95.5	96.8	96.4	95.3	96.0	96.4	
Wath Central Primary	NORTH	467	96.1	95.2	94.1	92.7	93.6	92.4	94.6	94.3	94.6	
Wath Victoria J&I	NORTH	346	95.5	94.1	95.5	94.7	92.8	94.7	94.6	92.8	93.7	
Wentworth CE J&I	NORTH	111	97.2	96.6	95.2	97.5	93.3	93.6	95.3	96.4	94.8	
West Melton J&I	NORTH	170	91.6	93.1	94.2	94.8	94.5	93.7	95.0	96.9	94.1	
ROTHERHAM TOTAL - not a complete figure due to non returns		6617	95.9	95.8	95.9	95.3	95.6	95.5	96.1	95.8	95.5	
Rawmarsh Community School - A Sports College	NORTH	860	96.1	95.9	95.2	95.1	94.6	93.8	95.8	94.5	94.4	
Saint Pius X Catholic High School	NORTH	468	95.9	95.3	95.2	93.4	94.2	91.3	94.5	91.5	90.6	
Swinton Community School	NORTH	644	94.5	94.0	94.2	92.8	91.9	93.6	94.3	94.7	93.7	
Thrybergh Academy	NORTH	837	92.8	91.1	91.8	89.0	91.4	88.8	91.4	94.1	93.7	
Wath Comprehensive - A Language College	NORTH	1843	95.6	94.1	94.1	92.3	94.1	94.3	94.6	94.2	94.2	
ROTHERHAM TOTAL - not a complete figure due to non returns	•	4652	94.8	94.6	94.8	93.6	93.7	93.8	94.6	94.1	93.9	

	PA Half Term 1	PA Half Term 1-2	PA Half Term 1- 3	PA Half Term 1-4
Year to Date	Covers Sep - Oct Half Term	Covers Autumn Term	Autumn Term and First Half of Spring	Covers Autumn Term and Spring Term
94.6	8.7	16.1	17.2	16.1
96.6	9.5	10.4	8.0	12.7
93.6	20.8	No Data	20.7	19.4
94.1	26.3	27.3	21.6	15.4
93.9	14.9	17.2	0.0	7.6
95.2	14.6	11.2	12.6	16.5
95.3	24.9	15.3	13.5	12.6
95.8	9.6	11.1	10.8	8.3
96.3	11.0	12.2	8.3	5.7
96.7	6.4	6.8	4.5	11.3
96.3	7.1	8.9	5.8	3.8
95.1	14.2	14.0	13.1	14.0
96.3	12.9	7.3	9.1	8.1
96.0	11.3	11.3	10.7	7.3
95.7	18.0	0.0	0.0	0.0
95.6	15.1	9.4	9.9	5.2
95.0	16.8	11.3	15.4	12.8
96.3	12.0	15.6	8.5	5.9
94.8	15.4	No Data	12.0	11.2
95.1	12.4	14.4	16.5	17.5
94.9	14.0	13.3	10.1	8.8
96.2	5.9	10.7	14.7	7.8
96.2	19.2	18.5	16.0	17.1
94.3	9.1	9.1	6.9	7.8
94.4	14.1	14.3	13.0	12.1
95.5	9.0	7.2	11.7	9.8
94.1	19.5	22.6	19.3	18.8
95.7	12.0	11.3	10.3	9.8
95.1	10.0	12.1	9.8	8.6
91.1	12.1	14.2	No Data	25.6
94.4	16.3	17.9	19.4	11.7
93.7	23.9	27.5	26.9	17.4
94.2	15.1	17.3	14.5	15.2
94.2	14.6	16.1	14.8	14.1

#### **EDUCATION WELFARE - SOUTH AREA**

DEFINITION Attendance (reported in arrears) and PA (reported in half termly installments) Owner David McWilliams

#### SOUTH LOCALITY

Primary Attendance:
South has a much larger number of schools in comparison to the other localities with forty-five out of ninety-five. Currently there are 29 primary schools (64%) on target to exceed local and national averages, a further 6 (13%) are on track to exceed local targets. 10 (22%) schools are currently below national and locatories.

#### Secondary Attendance

In the South, four out of six schools (66%) are on track to exceed local and national targets. Two (33%) are currently below local and national targets.

#### Primary PA:

Out of the 45 primary schools, 22 schools (48%) had less PA than the national average. Four schools were not able to share their PA data in this reporting period, they were Aughton Primary, Dinnington Primary, Listerdale J & I, and Thurcroft Junior Academy.

#### Secondary PA:

Out of the six secondary schools, three schools (50%) had less PA, which is consistent with the previous reporting period, with the remaining two schools (33%) reporting higher rates of persistent absence than the national average. Aston Comprehensive did not share their PA data in this reporting period.

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

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

				Reporting Month									PA Half Term 1	PA Half Term 1-2	PA Half Term 1	PA Half Term 1
School Name	Area	NOR - Jan 17	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Year to Date	Covers Sep - Oct	1-Z Covers Autumn Term	Autumn Term and First Half of Spring	Covers Autumn Term and Spring
																Term
Anston Brook Primary	SOUTH	196	97.26	97.17	95.38	95.80	93.67	95.03	93.77	94.9	93.2	94.9	7.7	6.2	9.8	11.6
Anston Greenlands J&I	SOUTH	212	97.40	97.54	97.80	94.26	98.35	96.59	97.19	97.2	96.5	97.0	9.8	7.0	3.8	2.3
Anston Hillcrest School	SOUTH	249	No Data	95.61	96.54	96.92	No Data	95.46	95.97	96.9	95.9	96.3	13.0	9.8	7.2	6.7
Anston Park Infants	SOUTH	203	97.03	96.01	97.31	96.17	95.61	95.76	95.78	96.9	95.1	96.2	10.9	8.2	9.5	5.4
Anston Park Juniors	SOUTH	276	97.06	96.40	97.66	94.83	96.47	97.03	96.66	96.4	95.0	96.4	9.5	9.3	7.7	5.3
Aston CofE J&I	SOUTH	214	97.87	96.49	96.48	96.76	98.04	97.75	95.39	97.6	96.2	96.8	8.9	8.5	5.1	4.2
Aston Fence J&I	SOUTH	214	97.93	95.98	96.13	96.89	97.14	97.30	97.60	97.3	96.6	97.0	8.0	7.0	7.9	4.2
Aston Hall J&I	SOUTH	280	97.96	97.22	97.10	96.90	96.92	95.97	97.48	97.2	94.6	96.8	8.0	6.3	7.5	5.0
Aston Lodge Primary	SOUTH	217	94.58	92.99	95.52	94.29	95.68	94.01	95.24	95.0	93.6	94.6	18.3	15.9	15.8	9.9
Aston Springwood	SOUTH	181	95.89	96.10	97.24	96.77	97.56	97.60	97.60	97.6	96.0	96.9	8.8	8.8	7.5	4.5
Aughton Primary	SOUTH	174	No Data	96.35	95.00	95.74	95.81	95.73	No Data	95.2	95.3	95.7	9.3	9.8	No Data	No Data
Bramley Grange Primary	SOUTH	335	95.96	95.37	No Data	No Data	No Data	No Data	96.85	No Data	96.1	96.2	16.6	No Data	No Data	15.3
Bramley Sunnyside Infant	SOUTH	300	97.19	94.83	96.75	96.69	96.77	96.27	96.54	92.6	97.0	96.3	13.8	9.2	6.5	7.1
Bramley Sunnyside Junior	SOUTH	357	97.96	96.58	97.20	97.18	97.23	97.69	97.95	97.5	96.2	97.3	7.2	6.6	4.4	3.9
Brinsworth Howarth Primary	SOUTH	232	96.80	97.25	97.10	96.29	95.29	95.25	96.21	95.7	94.9	96.1	8.8	7.6	9.3	8.5
Brinsworth Manor Infant	SOUTH	281	96.83	94.82	96.39	93.45	96.26	96.52	95.59	94.8	92.6	95.3	11.0	10.3	8.3	9.6
Brinsworth Manor Junior	SOUTH	310	96.47	97.00	96.69	96.52	95.86	96.90	96.40	96.0	96.2	96.4	8.7	8.7	6.1	7.4
Brinsworth Whitehill Primary	SOUTH	323	95.04	96.86	97.53	96.17	94.71	96.15	97.79	94.8	96.1	96.2	14.4	9.7	8.2	6.2
Catcliffe Primary	SOUTH	212	95.74	95.38	95.42	96.69	95.82	95.37	96.11	97.0	95.2	95.8	14.1	13.5	11.1	10.0
Crags Community	SOUTH	487	95.96	94.01	94.71	95.70	95.41	94.23	94.57	93.8	94.1	94.8	16.4	15.2	14.2	15.5
Dinnington Community Primary	SOUTH	340	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data
Flanderwell J&I	SOUTH	333	98.52	96.33	96.09	94.29	96.24	96.96	96.67	97.2	95.2	96.4	4.6	6.7	6.3	30.5
Harthill Primary	SOUTH	178	98.04	95.92	97.80	95.48	98.05	97.82	97.19	96.7	96.4	97.1	9.0	7.3	6.1	12.4
Kiveton Park Infant	SOUTH	178	98.57	96.40	95.33	94.46	96.40	96.66	96.22	96.3	96.0	96.3	7.1	7.1	8.0	15.5
Kiveton Park Meadows Junior	SOUTH	204	97.10	96.85	96.08	95.18	96.90	96.64	96.35	95.2	95.5	96.3	7.9	10.3	8.7	10.0
Laughton All Saints CE (A) Primary	SOUTH	97	96.36	95.92	93.41	95.22	96.82	92.68	96.80	98.2	92.6	95.2	11.8	11.9	12.9	10.6
Laughton J&I	SOUTH	202	No Data	96.15	96.00	94.80	97.34	97.28	94.26	97.4	95.9	96.0	11.9	0.0	No Data	9.9
Lilly Hall Junior	SOUTH	442	97.38	94.36	95.56	94.85	95.97	95.25	96.26	96.5	95.0	95.7	11.1	13.5	9.6	8.0
Listerdale J&I	SOUTH	294	No Data	No Data	No Data	No Data	96.38	95.45	97.37	97.0	95.3	96.4	No Data	8.5	3.1	No Data
Maltby Manor Primary	SOUTH	383	96.23	96.18	95.36	95.51	95.85	96.09	96.53	95.7	94.7	95.8	10.5	14.1	10.5	10.5
Maltby Redwood J&I	SOUTH	195	97.28	95.05	95.18	94.60	94.67	96.22	95.86	96.5	93.6	95.4	9.1	11.9	8.4	7.7
Ravenfield Primary	SOUTH	204	97.82	97.24	96.93	95.19	No Data	96.13	97.34	96.9	95.7	96.8	5.2	No Data	5.7	3.9
St Alban's CE Primary	SOUTH	244	98.46	97.39	97.69	96.31	96.36	96.43	96.68	97.3	98.1	97.2	3.8	7.2	5.6	12.9
St Joseph's Catholic Primary (Dinnington)	SOUTH	199	95.29	92.60	93.83	95.29	92.83	94.82	93.15	92.4	92.2	93.6	20.0	26.1	24.2	21.7
St Mary's Catholic Primary (Maltby)	SOUTH	211	96.72	93.93	93.45	92.54	94.85	94.34	96.08	94.1	94.9	94.6	16.7	15.9	13.5	16.9
Swallownest Primary	SOUTH	227	97.43	96.47	96.25	94.80	96.07	95.66	96.83	96.9	95.7	96.3	11.0	11.1	8.7	9.1
Thurcroft Infant	SOUTH	237	95.03	94.50	96.83	95.61	95.84	95.81	97.02	97.0	93.5	95.7	17.5	14.3	11.9	5.6
Thurcroft Jun Academy	SOUTH	206	96.55	96.72	96.12	95.99	96.55	96.35	96.60	97.6	94.7	96.3	No Data	No Data	No Data	No Data
Todwick J&I	SOUTH	212	98.08	96.95	97.02	95.70	96.02	96.21	96.46	95.2	96.2	96.4	7.9	6.1	6.1	6.1
Treeton CofE (A) Primary	SOUTH	324	96.79	96.39	96.45	93.68	95.07	95.60	96.88	96.3	93.8	95.8	8.9	12.4	11.6	7.2
Wales Primary	SOUTH	247	97.84	96.57	97.45	96.28	97.99	96.33	96.65	96.5	95.6	96.8	8.1	5.3	5.3	2.8
Whiston J&I	SOUTH	215	97.62	97.16	96.47	95.45	96.94	96.94	96.99	96.4	96.0	96.7	5.6	8.8	6.0	6.0
Whiston Worrygoose J&I	SOUTH	244	94.84	94.54	96.94	95.45	95.67	96.46	96.34	93.2	94.7	95.5	13.4	14.5	7.3	7.3
Wickersley Northfield Primary	SOUTH	455	98.01	96.37	97.33	96.55	96.93	97.17	97.11	96.7	95.3	96.9	7.7	8.1	3.7	2.6
Woodsetts Primary	SOUTH	223	96.69	95.54	96.46	94.16	96.61	94.80	96.82	97.1	96.0	96.1	11.2	14.1	9.4	10.0
ROTHERHAM TOTAL - not a complete LA figure due to non returns		11547	95.87	95.81	95.89	95.28	95.60	95.53	96.07	95.8	95.5	95.7	12.0	11.3	10.3	9.8
Aston Comprehensive School	SOUTH	1729	96.2	94.8	95.4	93.8	94.2	94.1	95.6	95.6	95.0	95.0	No Data	No Data	No Data	No Data
Brinsworth Comprehensive School	SOUTH	1353	94.5	95.8	95.4	95.7	94.1	96.3	96.4	96.0	95.1	95.6	10.9	9.9	11.6	9.4
Dinnington Comprehensive School	SOUTH	1353	94.5	95.8	96.5	No Data	94.1	No Data	96.4	96.0	93.3	93.5	14.5	19	15.2	14.0
	SOUTH	1085	94.5	94.5	94.7	No Data	94.0	No Data	94.2	94.0	93.3	93.5	18.2	19.9	18.5	16.4
Maltby Academy			94.8			94.5	95.1	33.7	94.2		95.1	95.4	10.5	11.6	9.5	7.6
Wales High School	SOUTH	1623 2084	96.7	95.3	95.6 96.5			95.2	95.6 96.0	95.0 95.9	95.1 95.6	95.4 95.9	10.5 8.6	8.1	9.5 8.2	7.6 6.9
Wickersley School and Sports College	SOUTH	2084 8939	96.7	96.2 94.6	96.5 94.8	96.0 93.6	94.6	95.2 93.8	96.0	95.9	95.6	95.9	8.6 14.6	8.1 16.1	14.8	6.9
ROTHERHAM TOTAL - not a complete LA figure due to non returns		8939	94.8	94.6	94.8	93.6	93.7	93.8	94.6	94.1	93.9	94.2	14.6	16.1	14.8	14.1

DEFINITION

Attendance (reported in arrears) and PA (reported in half termly installments)

Owner

David McWilliams

CENTRAL LOCALITY
Primary Attendance:
Central have twenty-three schools in the locality and is the smallest of the three localities. There are currently six primary schools (26%) on track to exceed local and national, a further two (8%) schools are above local targets, 15 (65%) are currently below local and national targets for the year to date.

#### Secondary Attendance:

Two out of five schools (40%) in Central are on track to exceed the local target with the remaining 3 (60%) below local and national targets.

Primary PA:
Out of the 23 primary schools, nine schools (39%) had less PA, which is an improvement compared to the previous period where only seven schools exceeded the national average. 13 schools (56%) had higher rates of persistent absence than the national average. One school in the area did not share their PA data in this reporting period.

#### Secondary PA:

Out of the five secondary schools one school (20%) had less PA, which is an improvement compared to the previous period where there was no schools with less than the national average. The remaining four schools (80%) had higher rates of persistent absence than the national average. All the schools in the area shared their PA data in this reporting period.

Reporting Month

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

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

School Name	Area	NOR - Jan 17	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17
Badsley Moor Primary	CENTRAL	552	93.58	94.87	94.52	95.11	No Data	95.19	95.46	No Data	No Data
Blackburn Primary	CENTRAL	296	96.70	97.03	97.37	96.91	94.70	95.20	97.07	96.4	94.9
Broom Valley Community Primary	CENTRAL	491	88.83	96.13	95.21	94.83	94.65	94.30	95.39	95.2	96.1
Canklow Woods Primary	CENTRAL	240	95.38	94.24	95.61	95.94	94.29	95.47	96.76	96.6	93.9
Coleridge Primary	CENTRAL	224	93.35	97.16	96.11	95.08	96.59	95.73	96.71	94.6	96.7
East Dene	CENTRAL	342	94.61	96.89	95.38	95.79	95.48	95.92	95.37	93.9	96.0
Eastwood Village Primary	CENTRAL	149	91.45	96.37	93.43	96.45	92.75	94.29	93.72	89.5	91.7
Ferham J&I	CENTRAL	283	86.58	95.23	94.72	91.29	88.71	91.56	94.17	90.8	93.6
Greasbrough Primary	CENTRAL	222	93.58	94.89	94.88	93.86	93.41	95.50	94.92	No Data	94.9
Herringthorpe Infant	CENTRAL	291	95.15	95.49	96.48	94.34	95.08	95.55	95.65	95.6	95.7
Herringthorpe Junior	CENTRAL	354	94.33	95.87	96.83	96.02	96.89	95.33	No Data	96.3	96.2
Kimberworth Community Primary	CENTRAL	233	93.98	93.38	94.21	93.87	93.53	93.83	96.00	96.5	92.3
Meadow View Primary	CENTRAL	249	95.98	97.31	96.24	94.34	95.42	95.49	94.06	94.4	95.7
Redscope Primary	CENTRAL	451	96.79	96.67	95.86	96.03	96.06	94.18	96.25	96.4	96.7
Rockingham J&I	CENTRAL	406	95.59	96.39	94.11	95.72	96.12	96.27	94.73	95.8	95.5
Roughwood Primary	CENTRAL	262	96.04	95.34	95.39	94.23	93.82	94.16	95.27	95.7	93.7
Sitwell Infant	CENTRAL	225	97.54	97.65	97.40	95.08	96.24	95.64	97.44	97.6	96.1
Sitwell Junior	CENTRAL	334	94.98	96.22	97.83	96.51	97.79	96.72	97.40	97.4	96.5
St Ann's J&I	CENTRAL	421	89.85	94.19	93.33	92.78	91.27	91.81	92.19	90.7	92.8
St Bede's Catholic Primary	CENTRAL	344	96.15	96.56	95.24	93.77	96.38	95.96	96.30	95.6	96.2
St Mary's Catholic Primary (Herringthorpe)	CENTRAL	210	95.93	97.13	96.36	95.76	96.37	95.01	91.95	94.5	No Data
Thornhill Primary	CENTRAL	306	90.78	97.35	97.15	96.42	95.28	95.78	95.36	94.3	97.2
Thorpe Hesley Primary	CENTRAL	520	97.47	97.30	96.21	96.07	96.75	96.46	97.32	95.5	96.2
ROTHERHAM TOTAL - not a complete figure due to non returns	*	7405	95.87	95.81	95.89	95.28	95.60	95.53	96.07	95.8	95.5
Clifton - A Community Arts School	CENTRAL	812	89.0	91.5	91.0	90.6	89.0	91.5	90.5	89.8	88.9
Oakwood Technology College	CENTRAL	1031	91.4	95.2	No Data	92.9	93.3	93.0	94.3	92.8	93.7
St Bernard's Catholic High School	CENTRAL	693	95.7	95.3	95.6	93.1	93.9	93.8	94.2	93.7	94.3
Wingfield Comprehensive School	CENTRAL	734	95.1	94.3	94.4	93.4	94.2	93.7	94.7	93.6	94.0
Winterhill School	CENTRAL	1182	93.4	94.5	95.1	93.6	93.7	93.3	93.8	92.8	93.2
ROTHERHAM TOTAL - not a complete figure due to non returns		4452	94.8	94.6	94.8	93.6	93.7	93.8	94.6	94.1	93.9

Year to Date   Covers Sep - Oct   Half rem   Covers Autumn Term   Covers Autumn   Covers Autumn   Covers Autumn   Covers Autumn   Covers Autumn   Covers Autumn   Covers   Covers Autumn   Covers   Covers Autumn   Covers   Covers Autumn   Covers   Cove						
Covers Sep - Oct			PA Half Term 1			PA Half Term 1-4
96.3	Year to Da	ate			and First Half of	Covers Autumn Term and Spring Term
94.5 20.3 12.8 19.1 1 95.3 13.9 15.0 15.6 1 95.9 5.7 7.5 4.4 4 95.5 8.8 9.0 9.9 No 93.4 13.1 24.8 35.5 2 91.9 27.6 27.6 31.0 3 94.5 15.1 18.9 13.0 1 95.5 11.1 8.6 10.5 5 96.0 12.8 8.4 9.3 7 94.2 19.8 20.7 21.0 1 95.4 17.1 18.5 9.9 1 96.1 9.9 7.9 11.7 8 96.1 9.9 7.9 11.7 8 96.1 9.9 7.9 11.7 8 96.1 11.1 11.1 10.1 1 96.8 7.4 5.3 6.7 5 96.7 11.3 8.4 7.8 7 92.1 19.8 24.4 27.0 3 95.8 11.7 13.5 7.3 6 95.8 11.7 13.5 7.3 6 95.8 17.1 8.6 7.1 8 95.8 17.1 8.6 7.1 8 95.8 17.1 8.6 7.1 8 95.5 17.8 9.3 12.2 1 95.8 17.1 8.6 7.1 8 95.5 17.8 9.3 12.2 1 95.7 12.0 11.3 10.3 5 95.7 12.0 11.3 10.3 5	94.8		17.1	11.7	14.0	13.6
95.3 13.9 15.0 15.6 1 95.9 5.7 7.5 4.4 4 95.5 8.8 9.0 9.9 No 93.4 13.1 24.8 35.5 2 91.9 27.6 27.6 31.0 3 94.5 15.1 18.9 13.0 1 95.5 11.1 8.6 10.5 5 96.0 12.8 8.4 9.3 7 94.2 19.8 20.7 21.0 1 95.4 17.1 18.5 9.9 1 96.1 9.9 7.9 11.7 8 96.1 9.9 7.9 11.7 8 96.8 7.4 5.3 6.7 5 96.7 11.3 8.4 7.8 7 92.1 19.8 24.4 27.0 3 95.8 11.7 13.5 7.3 6.7 5 95.8 11.7 13.5 7.3 6.7 5 95.8 11.7 13.5 7.3 6.7 5 95.8 11.7 13.5 7.3 6.7 1 95.8 12.7 13.5 12.2 1 95.8 12.7 13.5 12.2 1 95.8 12.7 13.5 12.2 1 95.8 12.7 13.5 12.2 1 95.8 12.7 13.5 12.2 1 95.8 12.7 13.5 12.2 1 95.8 12.7 13.5 12.2 1 95.8 12.7 13.5 12.2 1 95.8 12.7 13.5 12.2 1 95.8 12.7 13.5 7.3 6.7 1 95.8 12.7 13.5 7.3 6.7 1 95.8 12.7 13.5 7.3 6.7 1 95.5 17.8 9.3 12.2 1 96.7 6.3 8.0 7.0 4 95.7 12.0 11.3 10.3 5	96.3		8.8	7.4	5.5	3.3
95.9	94.5		20.3	12.8	19.1	18.3
95.5 8.8 9.0 9.9 No 93.4 13.1 24.8 35.5 2 91.9 27.6 27.6 31.0 3 94.5 15.1 18.9 13.0 1 95.5 11.1 8.6 10.5 5 95.0 12.8 8.4 9.3 7 95.4 17.1 18.5 9.9 1 95.4 17.1 18.5 9.9 1 95.1 17.1 18.5 9.9 1 95.1 17.1 18.5 9.9 1 95.1 17.1 18.5 9.9 1 95.1 17.1 18.5 9.9 1 95.5 12.7 15.0 11.2 1 94.9 11.1 11.1 10.1 1 96.8 7.4 5.3 6.7 5 96.7 11.3 8.4 7.8 7 95.1 19.8 24.4 27.0 3 95.8 11.7 13.5 7.3 6 95.5 17.8 9.3 12.2 1 95.8 17.1 8.6 7.1 8 95.5 17.8 9.3 12.2 1 95.5 17.8 9.3 12.2 1 96.7 6.3 8.0 7.0 4 95.7 12.0 11.3 10.3 5	95.3		13.9	15.0	15.6	13.2
93.4 13.1 24.8 35.5 2 91.9 27.6 27.6 31.0 3 94.5 15.1 18.9 13.0 1 95.5 11.1 8.6 10.5 5 96.0 12.8 8.4 9.3 7 94.2 19.8 20.7 21.0 1 95.4 17.1 18.5 9.9 1 96.1 9.9 7.9 11.7 8.6 10.5 11.2 1 96.8 7.4 5.3 6.7 5 96.7 11.3 8.4 7.8 7 96.7 11.3 8.4 7.8 7 95.5 11.7 13.5 7.3 6 95.5 11.7 13.5 7.3 6 95.7 12.0 11.3 10.3 5 95.8 11.7 13.5 7.3 6 95.8 11.7 13.5 7.3 6 95.8 11.7 13.5 7.3 6 95.8 11.7 13.5 7.3 6 95.8 11.7 13.5 7.3 6 95.8 11.7 13.5 7.3 6 95.8 11.7 13.5 7.3 6 95.8 11.7 13.5 7.3 6 95.8 11.7 13.5 7.3 6 95.8 11.7 13.5 7.3 6 95.7 12.0 11.3 10.3 5	95.9		5.7	7.5	4.4	4.4
91.9	95.5		8.8	9.0	9.9	No Data
94.5 15.1 18.9 13.0 1 195.5 11.1 8.6 10.5 5 11.1 8.6 10.5 5 11.1 8.6 10.5 5 11.1 8.6 10.5 5 11.1 8.6 10.5 5 11.1 8.6 10.5 5 11.1 18.5 9.9 1 1.7 18.5 9.9 1 17. 8 19.5 12.7 15.0 11.2 1 19.8 10.1 12.1 11.1 10.1 1 11.1 10.1 1 11.1 10.1 1 11.1 10.1 1 11.1 10.1 1 1 11.1 10.1 1 1 11.1 10.1 1 1 11.1 10.1 1 1 11.1 10.1 1 1 10.1 1 1 1	93.4		13.1	24.8	35.5	20.2
95.5 11.1 8.6 10.5 5 96.0 12.8 8.4 9.3 7 94.2 19.8 20.7 21.0 1 95.4 17.1 18.5 9.9 1 96.1 9.9 7.9 11.7 8 95.5 12.7 15.0 11.2 1 94.9 11.1 11.1 10.1 1 96.8 7.4 5.3 6.7 5 96.7 11.3 8.4 7.8 7 92.1 19.8 24.4 27.0 3 95.8 11.7 13.5 7.3 6 95.3 7.1 8.6 7.1 8 95.3 7.1 8.6 7.1 8 95.5 17.8 9.3 12.2 1 95.5 17.8 9.3 12.2 1 95.5 17.8 9.3 12.2 1 95.7 12.0 11.3 10.3 5	91.9		27.6	27.6	31.0	30.5
96.0 12.8 8.4 9.3 7 94.2 19.8 20.7 21.0 1 95.4 17.1 18.5 9.9 1 96.1 9.9 7.9 11.7 8 95.5 12.7 15.0 11.2 1 94.9 11.1 11.1 10.1 1 96.8 7.4 5.3 6.7 5 96.7 11.3 8.4 7.8 7 92.1 19.8 24.4 27.0 3 95.8 11.7 13.5 7.3 6 95.5 17.8 9.3 12.2 1 95.5 17.8 9.3 12.2 1 96.7 6.3 8.0 7.0 4 95.7 12.0 11.3 10.3 5	94.5		15.1	18.9	13.0	12.4
94.2 19.8 20.7 21.0 1 95.4 17.1 18.5 9.9 1 96.1 9.9 7.9 11.7 8. 95.5 12.7 15.0 11.2 1 94.9 11.1 11.1 10.1 1 96.8 7.4 5.3 6.7 5. 96.7 11.3 8.4 7.8 7 92.1 19.8 24.4 27.0 3 95.8 11.7 13.5 7.3 6 95.3 7.1 8.6 7.1 8 95.3 7.1 8.6 7.1 8 95.5 17.8 9.3 12.2 1 95.7 12.0 11.3 10.3 5 95.7 12.0 11.3 10.3 5	95.5		11.1	8.6	10.5	5.5
95.4 17.1 18.5 9.9 1 1 95.1 17.1 18.5 9.9 1 1 95.1 17.2 18.5 19.9 11.7 8 19.5 11.2 1 1 12.1 11.1 10.1 1 11.1 10.1 1 11.1 10.1 1 11.1 10.1 1 1 11.1 10.1 1 1 1	96.0		12.8	8.4	9.3	7.6
96.1 9.9 7.9 11.7 8 95.5 12.7 15.0 11.2 1 94.9 11.1 11.1 10.1 1 95.8 7.4 5.3 6.7 5 96.7 11.3 8.4 7.8 7 92.1 19.8 24.4 27.0 3 95.8 11.7 13.5 7.3 6 95.3 7.1 8.6 7.1 8 95.5 17.8 9.3 12.2 1 96.7 6.3 8.0 7.0 4 95.7 12.0 11.3 10.3 5 90.2 26.4 27.6 28.1 2 93.4 No Data 17.3 16.5 1	94.2		19.8	20.7	21.0	15.5
95.5 12.7 15.0 11.2 1 94.9 11.1 11.1 10.1 1 96.8 7.4 5.3 6.7 5 96.7 11.3 8.4 7.8 7 92.1 19.8 24.4 27.0 3 95.8 11.7 13.5 7.3 6 95.3 7.1 8.6 7.1 8 95.5 17.8 9.3 12.2 1 96.7 6.3 8.0 7.0 4 95.7 12.0 11.3 10.3 5 90.2 26.4 27.6 28.1 2 93.4 No Data 17.3 16.5 1	95.4		17.1	18.5	9.9	13.0
94.9 11.1 11.1 10.1 1 196.8 7.4 5.3 6.7 5.9 6.7 11.3 8.4 7.8 7.8 7.9 5.5 11.7 13.5 7.3 6.7 1.9 5.8 11.7 13.5 7.3 6.9 5.5 17.8 9.3 12.2 1 19.8 9.3 12.2 1 19.5 9.5 17.8 9.3 12.2 1 19.5 9.5 17.8 9.3 12.2 1 19.5 9.5 17.8 9.3 12.2 1 19.5 17.5 17.5 17.5 17.5 17.5 17.5 17.5 17	96.1		9.9	7.9	11.7	8.9
96.8 7.4 5.3 6.7 5 96.7 11.3 8.4 7.8 7 92.1 19.8 24.4 27.0 3 95.8 11.7 13.5 7.3 6 95.3 7.1 8.6 7.1 8 95.5 17.8 9.3 12.2 1 96.7 6.3 8.0 7.0 4 95.7 12.0 11.3 10.3 5 90.2 26.4 27.6 28.1 2 93.4 No Data 17.3 16.5 1	95.5		12.7	15.0	11.2	10.5
96.7 11.3 8.4 7.8 7.9 19.8 19.8 19.8 19.8 19.8 19.8 19.8 19	94.9		11.1	11.1	10.1	10.1
92.1 19.8 24.4 27.0 3 95.8 11.7 13.5 7.3 6 95.3 7.1 8.6 7.1 8 95.5 17.8 9.3 12.2 1 96.7 6.3 8.0 7.0 4 95.7 12.0 11.3 10.3 9 90.2 26.4 27.6 28.1 2 93.4 No Data 17.3 16.5 1	96.8		7.4	5.3	6.7	5.3
95.8 11.7 13.5 7.3 6 95.3 7.1 8.6 7.1 8 95.5 17.8 9.3 12.2 1 96.7 6.3 8.0 7.0 4 95.7 12.0 11.3 10.3 5 90.2 26.4 27.6 28.1 2 93.4 No Data 17.3 16.5 1	96.7		11.3	8.4	7.8	7.1
95.3 7.1 8.6 7.1 8.6 9.1 9.5 9.5 17.8 9.3 12.2 1 96.7 6.3 8.0 7.0 4 95.7 12.0 11.3 10.3 9.5 90.2 26.4 27.6 28.1 2 93.4 No Data 17.3 16.5 1.	92.1		19.8	24.4	27.0	30.2
95.5 17.8 9.3 12.2 1 96.7 6.3 8.0 7.0 4 95.7 12.0 11.3 10.3 5 90.2 26.4 27.6 28.1 2 93.4 No Data 17.3 16.5 1	95.8		11.7	13.5	7.3	6.6
96.7 6.3 8.0 7.0 4 95.7 12.0 11.3 10.3 5 90.2 26.4 27.6 28.1 2 93.4 No Data 17.3 16.5 1	95.3		7.1	8.6	7.1	8.1
95.7 <b>12.0</b> 11.3 10.3 5 90.2 26.4 27.6 28.1 2 93.4 No Data 17.3 16.5 1:	95.5		17.8	9.3		15.2
90.2 26.4 27.6 28.1 2 93.4 No Data 17.3 16.5 1	96.7		6.3	8.0	7.0	4.2
93.4 No Data 17.3 16.5 1	95.7		12.0	11.3	10.3	9.8
93.4 No Data 17.3 16.5 1	00.0		25.4	27.6	20.4	27.0
						27.9
94.4 13.1 No Data No Data 1						18.3
04.2						12.7
94.2 16.6 17.9 14.9 1	94.2		16.6	17.9	14.9	14.1

### 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 (May) evidences that Rotherham participation was better than statistical neighbours (90.5%), was in line with national (91.8%) whilst being slightly below region (92.3%). Centre based Youth session activity increasingly has become more focussed on targeted group work. We are unable to give any comparison for Corporate LAC/Care Leaver data as this is not a published data set. However, most recent data (published Mar 17) at national level relating to resident Care Leavers in EET evidences that Rotherham's performance at 77.8% is above statistical neighbours (56.0%), regional (73.3%) and national (66.1%).

		9.3
		% of Academic Age 16,17,18 Corporate Responsibility LAC/CL EET
		ROTHERHAM
	Apr-17	68.7%
	May-17	68.6%
8	Jun-17	70.6%
Monthly Performance	Jul-17	
or.	Aug-17	
Ē	Sep-17	
Ϋ́	Oct-17	
€.	Nov-17	
<u>6</u>	Dec-17	
2	Jan-18	
	Feb-18	
	Mar-18	

		9.4
		% of Academic Age 16,17,18 Corporate Responsibility LAC/CL NEET
		ROTHERHAM
	Apr-17	29.2%
	May-17	27.5%
8	Jun-17	24.8%
Monthly Performance	Jul-17	
orm	Aug-17	
eu	Sep-17	
Δ,	Oct-17	
- ₽	Nov-17	
<u>0</u>	Dec-17	
2	Jan-18	
	Feb-18	
	Mar-18	

					9	9.6									
			Number of Youth Activity sessions undertaken during the month												
		ROTHER	RHAM	NOR'		SOUTH	CENTRAL								
		Centre Based	Non-Centre Based	Centre Based	Non-Centre Based	Centre Based	Non-Centre Based	Centre Based	Non- Centre Based						
	Apr-17	49	17	6	8	15	3	28	6						
	May-17	87	37	22	10	33	23	32	4						
93	Jun-17	71	33	13	8	11	7	35	1						
ıan	Jul-17														
Monthly Performance	Aug-17														
erfc	Sep-17														
٩.	Oct-17														
- €	Nov-17														
<u>6</u>	Dec-17														
2	Jan-18														
	Feb-18														
	Mar-18														

			9.5		
		Young people aged	16 - 17 (academic	age) meeting the	duty to participate
		ROTHERHAM	NORTH	SOUTH	CENTRAL
	Apr-17	92.1%	93.3%	93.4%	89.5%
	May-17	91.6%	92.4%	93.0%	89.2%
8	Jun-17	91.4%	92.6%	92.6%	88.6%
Monthly Performance	Jul-17				
E	Aug-17				
ert,	Sep-17				
ď	Oct-17				
Ē.	Nov-17				
<u>5</u>	Dec-17				
≥	Jan-18				
	Feb-18				
	Mar-18				

				Number o	of Unique Attendees	at Youth Activities			
		ROTI	HERHAM	N	ORTH	SOU	TH	С	ENTRAL
		Centre Based	Non-Centre Based	Centre Based	Non-Centre Based	Centre Based	Non-Centre Based	Centre Based	Non-Centre Based
	Apr-17	240	109	22	55	137	9	81	45
	May-17	334	73	87	53	155	20	92	0
93	Jun-17	259	64	27	0	98	5	89	0
an	Jul-17								
Monthly Performance	Aug-17								
art.	Sep-17								
ď	Oct-17								
ਵੂੰ	Nov-17								
ou	Dec-17								
Σ	Jan-18								
	Feb-18								
	Mar-18								

#### YOUTH OFFENDING TEAM

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 (Mar 2017) and covers period Jan 16 – Dec 16. Rotherham has shown a decrease of 35.1% from the same period last year, whilst national figures also stand lower at 327 (decrease of 12.2% on same time last year). Comparison with the North East region gives a similar picture with the regional figure standing at 367 with a decrease of 15.2%. The actual decrease in numbers for Rotherham relates to 43 young people. This continues the downward trend from the previous quarter and is now lower than National and Regional trends. The decrease is attributable to work undertaken with 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 (Mar 2017) and covers period Apr 16 to Mar 17. Yr on Yr data is shown as same period for previous year. Rotherham has shown a decrease of 0.17 % from the same period last year, now standing at 0.29. National figures also stand lower at 0.37 (decrease of 0.05% on same time last year). North East figures stand at 0.36 with a decrease of 0.05 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.

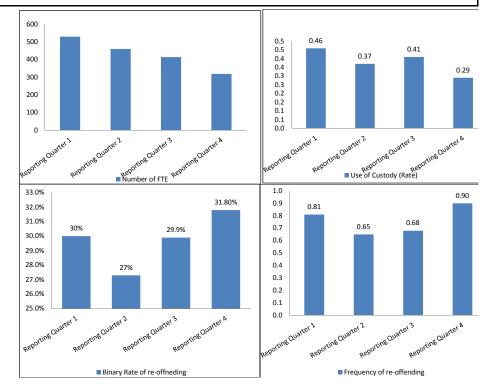
#### Rate of re-offending by young offenders:

Figures based on latest released YJB data (Mar 2017) and covers period Jul 14 to Jun 15. Rotherham has shown a decrease in this measure of 1.3%, now standing at 31.8%. National figures have reamined stable standing at at 37.7%, whilst North East figures have shown an increase of 0.6% 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 smaller but more complex and challenging group more likely to reoffend having a greater history of offending behaviour. The data contained here is related to the MoJ "proven rate of offending" in which reoffending is tracked for 12 months with additional 3 months added to allow for conviction. The YOT therefore uses a live tracker to determine re-offending and this is based on current arrests, whilst not as accurate, it is nevertheless a useful proxy for looking at re-offending trends. Further decreases in the number of first time entrants are likely to lead to an increase in reoffending as those remaining in the system will be more entrenched in offending behaviour.

#### Frequency of re-offending by young offenders:

Figures based on latest released YJB data (Mar 2017) and covers period Jul 14 to Jun 15. Rotherham now stands at 0.90, which is an increase in this measure of 8.8%, but still stands lower than both North East (1.41) and National figures (1.26). No the East has actually shown an increase of 10.1%, whilst national figures have shown an increase in their rate of 6.4%.

		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
•	Reporting Quarter 1	(period Apr15 - Mar16)	(period Jul 15 - Jun 16)	(Oct 13 - Sep 14)	(Oct 13-Sep 14)
renominance Analysis	Reporting Quarter 2	460	0.37	27%	0.65
	Reporting Quarter 2	( Jul15 - Jun 16)	(Oct 15 -Sep 16)	(Jan14 - Dec 14)	(Jan14 - Dec 14)
	Reporting Quarter 3	414	0.41	29.9%	0.68
	Reporting Quarter 3	( Oct 15 - Sep 16)	(Jan 16 - Dec 16)	(Apr 14 - Mar 15)	(Apr 14 - Mar 14)
	Reporting Quarter 4	319	0.29	31.80%	0.90
	Reporting Quarter 4	(Jan 16 - Dec 16)	(Apr 16 - Mar 17)	(Jul 14 - Jun 15)	(Jul 14 - Jun 15)



Performance Analysis

18 exit surveys were completed in June (3 less than previous month)

In June the top three reasons given for Early Help support were:

- Parenting support for behaviour 63%
- \* Parental mental health issues 31%
- Low self-esteem, self-confidence, self-worth 63%

97% of respondents rated their overall experience of the help and support they received from the worker(s) within the Early Help Team as Good or Excellent

- 98% of respondents said that they got support when they most needed it
- 97% of respondents said that the service had a positive impact on their child(ren)'s life

There were no complaints in the reporting month, there was one compliment received for North.

				11.1	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-17	2	12	13	0	0	27
	May-17	2	3	16	0	0	21
þ	Jun-17	6	3	9	0	0	18
di Oilliai loa	Jul-17						0
	Aug-17						0
5	Sep-17						0
5	Oct-17						0
,	Nov-17						0
	Dec-17						0
VIOLET III Y	Jan-18						0
	Feb-18						0
	Mar-18						0
	Year to Date	10	18	38	0	0	66

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

#### **QUALITY ASSURANCE**

DEFINITION Team Manager Audits Owner David McWilliams

A different approach was taken in June with three audits being completed, one each for North, South and Central during a "What good looks like" session with the locality managers. This gave managers the opportunity to share views, discuss and agree grading's and learn from each other and was a really positive process.

During July and August there will be no audits undertaken which is in line with the agreement in Social Care as well as Early Help to move to a nine month audit cycle. This will help alleviate pressure in the summer with annual leave and also during December when there is less time avaailable to complete audits.

Further development work will take place over the summer months following feedback from the "What good looks like" session and also to continue to ensure alignment with Social Care and the wider quality Assurance Framework.

	e d			12.1													
	ecal			Team Manage	er Audits												
	Scorecard Measure	Outstanding	Good	Team Manager Audits   Good   Requires   Inadequate   Critical   Total													
	Apr-17	0	3	9	1	0	13										
	May-17	0	1	8	1	0	10										
ce	Jun-17	0	0	3	0	0	3										
Performance	Jul-17						0										
ırm	Aug-17						0										
erfc	Sep-17						0										
	Oct-17						0										
Monthly	Nov-17						0										
out	Dec-17						0										
M	Jan-18						0										
	Feb-18						0										
	Mar-18						0										
	Total to date	0	4	20	2	0	26										
	% of total to date	0%	15%	77%	8%	0%											

	ard re				Response Rates	3			
	Scorecard Measure	North		Sou	th	Centra	al	Borough Servic	
	တ္တ ≥	Number	%	Number	%	Number	%	Number	%
	Apr-17	3 out of 4	75%	4 out of 4	100%	5 out of 5	100%	1 out of 2	50%
	May-17	3 out of 4	75%	4 out of 4	100%	3 out of 6	50%	0 out of 2	0%
0	Jun-17	1 out of 1	100%	1 out of 1	100%	1 out of 1	100%	0 out of 0	0%
enormance	Jul-17								
	Aug-17								
7	Sep-17								
Ľ	Oct-17								
, i	Nov-17								
VIOLICI II)	Dec-17								
Š	Jan-18								
	Feb-18								
	Mar-18								

#### Overall Grading's from EH Team Manager Audits for June 2017



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

#### **EARLY HELP - HUMAN RESOURCES (HR)**

DEFINITION Establishment Information Owner David McWilliams

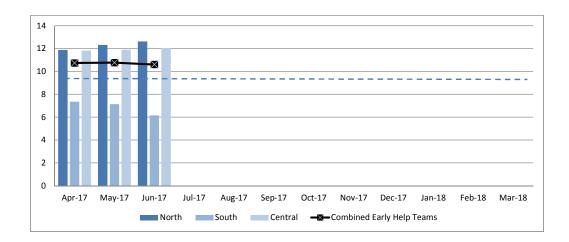
Performance Analysis

The 2017/18 target for RMBC is 9.52 annual FTE sick days and by the end of June overall performance against this measure was at 10.60 FTE days which is a slight improvement on previous months performance.

Heads of Service and managers work closely with HR colleagues to provide support to staff whilst managing sickness across the service. There are currently some periods of long-term sickness and 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	ickness - Annual FTE	sick days	
Scorecard Measure	North	South	Central	Combined Early Help Teams
Apr-17	11.88	7.34	11.82	10.73
May-17	12.31	7.13	11.89	10.76
Jun-17	12.63	6.15	12.02	10.6
Jul-17				
Aug-17				
Sep-17				
Oct-17				
Nov-17				
Dec-17				
Jan-18				
Feb-18				
Mar-18				



### **Children & Young People Services**



# Safeguarding Children & Families Monthly Performance Report

As at Month End: June 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 1

Date Created: 14th July 2017

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

Monthly Performance - June 17 - I1.xlsx 1 of 27

Performance Summary

As at Month End: June 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 movement - numbers stable with last month

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

	NO	NDIGATOR	GOOD	DATA			2017 / 18			DOT (Month	RAG	Target	and Tol	erances	YR (	ON YR TR	END	LATEST	BENCHM	IARKING	- 2014/15
	NO.	INDICATOR	PERF IS	(Monthly)	Apr-17	May-17	Jun-17	YTD 2017/18	DATA NOTE	on Month	(in month)	Red	Amber	Target Green	2014/15	2015/16	2016/17	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTILE THRESHOL
Î	1.1	Number of contacts	Info	Count	1291	1435	1371	4097	Financial Year	Ψ				n/a	10517	12165	16609				
FERRAL (MASH)	1.2	% Contacts with decision within 1 working day	High	Percentage	94.3%	78.0%	59.1%	76.8%	Financial Year	Ψ		<92%	92%>	95%+		96.5%	86.0%				
<u>S</u>	1.3	Number of contacts going onto referral (including MASH referrals)	Info	Count	308	363	470	1141	Financial Year	<b>1</b>				n/a	4513	4915	4411				
RA	1.4	% of contacts going onto referral (including MASH referrals)	High	Percentage	23.9%	25.3%	34.3%	27.8%	Financial Year	<b>1</b>		rai	nge to be	set	42.9%	40.5%	26.6%				
Ш	1.5	Rate of referrals per 10,000 population aged under 18 - rolling 12 month performance	Info	Rate per 10,000	893.6	881.4	869.3		Rolling Year	4				n/a			909.8	670.2	300.3	532.2	-
<b>∞</b>	1.6	% of referrals going onto assessment	High	Percentage	96.1%	95.4%	96.0%	95.8%	Financial Year	<b>1</b>		<83%	83%>	86%+	69.6%	77.6%	90.0%	85.9%	99.7%	87.1%	97.8%
ACT	1.7	% of re-referral in 12 months - in current month	Low	Percentage	25.0%	25.3%	15.1%		As at mth end	<b>1</b>		26%+	26%<	23%<							
CONTA	1.8	% of re-referral in 12 months - rolling 12 mths	Low	Percentage	27.0%	27.1%	25.7%		Rolling Year	<b>1</b>		26%+	26%<	23%<			27.5%	23.7%	10.0%	22.3%	16.0%
ဝ	1.9	Number of CSE referrals in the current month (Council Plan Indicator)	Info	Count	16	8	21	45	Financial Year	<b>1</b>				n/a		200	256				
	2.1	Number of assessments started	Info	Count	513	569	762	1844	Financial Year	<b>1</b>				n/a	3929	3996	6182				
S	2.2	% of assessments for children's social care completed in 45 working days of referral	High	Percentage	86.6%	82.5%	85.5%	84.8%	Financial Year	<b>1</b>		<90%	90%>	90%+	88.8%	92.8%	85.3%	76.7%	58.7%	83.4%	91.9%
ENTS	2.3	Open assessments already past 45 working days	Low	Count	11	21	66		As at mth end	₩				n/a							
SME	2.4	Number of assessments completed in the current month	Info	Count	516	577	557	1650	Financial Year	Ψ				n/a		4064	5781				
ASSESSM	2.5	% of completed assessments ending in - Ongoing Involvement	High	Percentage	46.5%	41.8%	44.7%	44.2%	Financial Year	<b>1</b>		<40%	40%>	45%+		43.6%	22.0%				
AS	2.6	% of completed assessments ending in - No further action	Info	Percentage	36.0%	38.3%	37.9%	37.5%	Financial Year	Ψ				n/a		36.5%	36.8%				
	2.7	% of completed assessments ending in - Step down to Early Help / Other Agency	Info	Percentage	17.1%	19.9%	17.4%	18.2%	Financial Year	Ψ				n/a		15.4%	16.6%				
	2.8	% of completed assessments ending in - Other/Not Recorded	Info	Percentage	0.4%	0.0%	0.0%	0.1%	Financial Year	<b>→</b>				n/a		0.2%	24.6%				
	3.1	Number of S47 Investigations started	Info	Count	162	175	160	497	Financial Year	Ψ				n/a	909	1478	1457				
	3.2	Number of S47 Investigations - rolling 12 month performance	Info	Count	1522	1631	1677		Rolling Year	<b>1</b>				n/a							
	3.3	Number of S47's per 10,000 population aged 0-17 - rolling 12 month performance	Info	Rate per 10,000	269.9	289.2	297.4		Financial Year	<b>↑</b>		more than +/-15	+/-15	+/-5 of 158.8	156.1	262.1	258.3	178.73	89.8	147.5	-
လ	3.4	Number of S47 Investigations - Completed	Info	Count	173	165	148	486	Financial Year	4				n/a	876	1390	1460				
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	64.2%	60.0%	56.8%	60.5%	Financial Year	Ψ				n/a		58.3%	28.8%				
	3.6	% of S47's with an outcome - Concerns are substantiated, but the child is not judged to be at continuing risk of significant harm	Info	Percentage	31.2%	31.5%	32.4%	31.7%	Financial Year	<b>^</b>				n/a		30.2%	18.1%				
	3.7	% of S47's with an outcome - Concerns not substantiated	Low	Percentage	4.6%	8.5%	5.4%	6.2%	Financial Year	<b>1</b>				n/a		11.2%	6.4%				
	3.8	% of S47's with an outcome - Not Recorded	Low	Percentage	0.0%	0.0%	5.4%	1.6%	Financial Year	₩				n/a		0.3%	1.2%				
	4.1	Number of open CIN cases	Info	Count	1606	1587	1744		As at mth end	<b>1</b>				n/a	1526	1430	1659				
7	4.2	Number of CIN (inc. CPP as per DfE definition)	Info	Count	1983	1999	2168		As at mth end	<b>1</b>				n/a	1947	1805	2029				
S	4.3	Number of CIN per 10,000 population aged 0-17 - inc. CPP as per DfE definition. <i>(Council Plan Indicator)</i>	Info	Rate per 10,000	351.6	354.4	384.4		As at mth end	Ψ				351	347.1	320	359.8	372.68	274.6	337.7	296.6

\*'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 movement numbers stable with last month
- decline in performance, not on target / decrease in numbers

	NO	INDICATOR		DATA			2017 / 18			DOT (Month	RAG	Target	and Tol	erances	YR (	ON YR TR	END	LATEST	BENCHI	IARKING	- 2014/15
	NO.	INDICATOR	PERF IS	(Monthly)	Apr-17	May-17	Jun-17	YTD 2017/18	DATA NOTE	on Month)	(in month)	Red	Amber	Target Green	2014/15	2015/16	2016/17	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTILE THRESHOL
	4.4	% of CIN (open at least 45 days) with an up to date plan	High	Percentage	92.3%	91.6%	91.6%		As at mth end	<b>→</b>		<85%	85%>	90%+	65.1%	98.6%	93.9%				
	5.1	Number of open CPP cases	Info	Count	377	412	424		As at mth end	<b>1</b>				n/a	423	369	370				
	5.2	Number of Initial CP Conferences (children) - rolling 12 month	Info	Count	507	566	585		Rolling Year	个				n/a	556	597	490				
	5.3	Number of Initial CP Conferences (children) per 10,000 population - rolling 12 month	Within limits (low)	Rate per 10,000	89.9	100.4	103.7		Rolling Year	Ψ		79+	79<	74.1<	98.6	105.9	86.9	75.6	31.3	62.6	-
	5.4	Number of Initial CP Conferences (children) - in month	Info	Count	59	88	54		As at mth end	Ψ		rar	nge to be	set							
	5.5	% of initial child protection conference (ICPCs) completed within 15 days of S47 (based on number of children)	High	Percentage	96.6%	95.5%	96.3%	96.0%	Financial Year	<b>↑</b>		<85%	85%>	90%+	65.0%	88.3%	91.0%	82.8%	100.0%	76.7%	89.7%
CTION	5.6	Number of children with a CP plan per 10,000 population under 18 (Council Plan Indicator))	Low	Rate per 10,000	66.8	73.1	75.2		As at mth end	Ψ				60	74.7	65.4	65.6	51.7	27.1	43.1	-
ECT	5.7	Number of children becoming subject to a CP plan per 10,000 population - rolling 12 months	Low	Rate per 10,000	82.3	91.6	94.6		Rolling Year	Ψ				n/a	93.05	93.8	79.0				
PROTE	5.8	Number of discontinuations of a CP plan per 10,000 population - rolling 12 months performance	High	Rate per 10,000	80.4	77.9	76.8		Rolling Year	Ψ		<55	55>	59.9+	85.4	105.0	79.8	63.1	39.1	53.7	-
CHILD F	5.9	% of children becoming the subject of a CP plan for a second or subsequent time within 2 years - rolling 12 months (Council Plan Indicator)	Low	Percentage	11.0%	11.8%	11.4%		Rolling Year	<b>↑</b>		6%+	6%<	4%<	4.0%	4.7%	9.2%				
	5.10	% of children becoming the subject of a CP plan for a second or subsequent time - ever - rolling 12 months	Low	Percentage	20.7%	23.6%	24.2%		Rolling Year	Ψ		16%+	16%<	14%<	10.8%	12.7%	20.0%	18.4%	12.7%	17.9%	13.8%
	5.11	% of open CP plans lasting 2 years or more	Low	Percentage	0.3%	0.0%	0.0%		As at mth end	<b>→</b>		3.6%+	3.6%<	2.6%<	4.2%	0.8%	0.3%	1.5%	0.0%	2.1%	1.1%
	5.12	% of CP plans lasting 2 years or more - ceased within period	Low	Percentage	0.0%	2.3%	0.0%	0.8%	Financial Year	Ψ		6.5%+	6.5%<	4.5%<	4.2%	4.8%	1.8%	2.9%	2.7%	3.8%	2.4%
	5.13	% of CP cases which were reviewed within timescales	High	Percentage	100.0%	98.0%	100.0%	99.2%	Financial Year	<b>1</b>		<95%	95%>	98%+	96.4%	94.2%	98.6%	84.2%	100.0%	93.7%	100.0%
	5.14	% CPP with an up to date plan	High	Percentage	93.4%	90.5%	87.8%		as at mth end	Ψ		<93%	93%>	95%+	97.6%	100.0%	96.2%				
	5.15	% of CPP with visits in the last 2 weeks	High	Percentage	92.0%	91.0%	91.0%		As at mth end	<b>→</b>		<90%	90%>	95%+							
	6.1	Number of Looked After Children	Info	Count	501	504	522		As at mth end	<b>1</b>				n/a	407	432	488				
	6.2	Rate of Looked After Children per 10,000 population aged under 18 <i>(Council Plan Indicator)</i>	Low	Rate per 10,000	88.9	89.4	92.6		As at mth end	Ψ				75	70	76.6	86.6	75.8	56.0	60.0	-
	6.3	Admissions of Looked After Children	Info	Count	26	14	33	73	Financial Year	<b>1</b>				n/a	175	208	262				
	6.4	Number of children who have ceased to be Looked After Children	High	Count	11	12	16	39	Financial Year	<b>1</b>				n/a	160	192	215				
z	6.5	Percentage of LAC who have ceased to be looked after due to permanence (Special Guardianship Order, Residence Order, Adoption)	High	Percentage	9.1%	16.7%	37.5%	23.1%	Financial Year	<b>^</b>		<33%	33%>	35%+	37.5%	40.1%	27.9%				
CHILDREN	6.6	Percentage of LAC who have ceased to be looked after due to a Special Guardianship Order	High	Percentage	0.0%	8.3%	6.3%	5.1%	Financial Year	Ψ		rar	nge to be	set			9.8%	11.0%	21.0%	11.0%	14.1%
툸	6.7	LAC cases reviewed within timescales	High	Percentage	87.4%	85.7%	89.1%	86.8%	Financial Year	<b>1</b>		<90%	90%>	95%+	94.9%	83.3%	91.3%				
	6.8	% of children adopted	High	Percentage	9.1%	25.0%	6.3%	12.8%	Financial Year	Ψ		<20%	20%>	22.7%+	26.3%	22.9%	14.4%	18.8%	27.0%	15.0%	21.0%
AFTER	6.9	Health of Looked After Children - up to date Health Assessments	High	Percentage	85.4%	78.3%	70.7%		As at mth end	Ψ		<90%	90%>	95%+	81.4%	92.8%	89.5%				
ED A	6.10	Health of Looked After Children - up to date Dental Assessments	High	Percentage	56.9%	56.5%	55.0%		As at mth end	Ψ		<90%	90%>	95%+	58.8%	94.5%	57.3%				
OOKED	6.11	Health of Looked After Children - Initial Health Assessments carried out within 20 working days	High	Percentage	5.9%	40.7%	50.0%	29.2%	Financial Year	<b>^</b>		rar	nge to be	set							
Ĭ	6.12	% of LAC with a PEP	High	Percentage	98.2%	94.8%	91.6%		As at mth end	Ψ		<90%	90%>	95%+	68.7%	97.8%	96.9%				

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

	NO. INDICATOR		GOOD	DATA		:	2017 / 18			DOT (Month	RAG	Target	and Tole	erances	YR C	ON YR TR	REND	LATEST	BENCHM	ARKING .	- 2014/15
	NO.	INDICATOR	PERF IS	NOTE (Monthly)	Apr-17	May-17	Jun-17	YTD 2017/18	DATA NOTE	on Month)	(in month)	Red	Amber	Target Green	2014/15	2015/16	2016/17	STAT NEIGH AVE	BEST STAT NEIGH	NAT AVE	NAT TOP QTILE THRESHOL
	6.13	% of LAC with up to date PEPs	High	Percentage	95.7%	78.6%	57.4%		As at mth end	Ψ		<90%	90%>	95%+	71.4%	95.0%	87.9%				
	6.14	% of eligible LAC with an up to date plan	High	Percentage	76.8%	76.4%	73.8%		As at mth end	Ψ		<93%	93%>	95%+	98.8%	98.4%	79.1%				
	6.15	% LAC visits up to date & completed within timescale of National Minimum standard	High	Percentage	95.6%	95.8%	92.5%		As at mth end	Ψ		<95%	95%>	98%+	94.9%	98.1%	94.7%				
	6.16	% LAC visits up to date & completed within timescale of Rotherham standard	High	Percentage	91.0%	90.9%	83.0%		As at mth end	Ψ		<85%	85%>	90%+	64.0%	80.2%	88.3%				
ဟ	7.1	Number of care leavers	Info	Count	220	217	215		As at mth end	Ψ				n/a	183	197	223				
RE /ERS	7.2	% of eligible LAC & Care Leavers with a pathway plan	High	Percentage	98.6%	98.6%	99.3%		As at mth end	<b>1</b>		<93%	93%>	95%+	69.8%	97.5%	99.3%				
CAR	7.3	% of care leavers in suitable accommodation	High	Percentage	99.5%	96.8%	94.4%		As at mth end	Ψ		<95%	95%>	98%+	97.8%	96.5%	97.8%	88.2%	100.0%	83.0%	90.6%
	7.4	% of care leavers in employment, education or training	High	Percentage	65.4%	65.0%	65.3%		As at mth end	<b>1</b>		<70%	70%>	72%+	71.0%	68.0%	62.9%	55.6%	80.0%	49.0%	56.6%
ဟ	8.1	% of long term LAC in placements which have been stable for at least 2 years	High	Percentage	64.1%	63.3%	62.1%		As at mth end	Ψ		<68%	68%>	70%+	71.9%	72.7%	66.2%	68.2%	79.0%	68.0%	71.1%
ACEMENTS	8.2	% of LAC who have had 3 or more placements - rolling 12 months (Council Plan Indicator)	Low	Percentage	11.6%	12.7%	12.1%		Rolling Year	<b>↑</b>		12%+	12%<	9.6%<	12.0%	11.9%	11.9%	9.2%	6.0%	10.0%	8.0%
CEN	8.3	% of LAC in a family Based setting	High	Percentage	79.6%	80.6%	82.0%		As at mth end	<b>1</b>		range to	o be set	87.5%>			81.1%				
PLA	8.4	% of LAC placed with parents or other with parental responsibility (P1)	Low	Percentage	5.0%	5.0%	5.0%		As at mth end	<b>→</b>		rar	nge to be	set			5.3%				
	8.5	% of LAC in a Commissioned Placement (Council Plan Indicator)	Low	Percentage	45.9%	46.2%	46.6%		As at mth end	Ψ		ran	nge to be	set			43.2%				
	9.1	Number of LAC in a Fostering Placement	High	Count	357	364	385		As at mth end	<b>1</b>		ran	nge to be	set		180	353				
STERING	9.2	% of LAC in a Fostering Placement	High	Percentage	71.3%	72.2%	73.8%		As at mth end	<b>↑</b>		ran	ge to be	set		41.7%	72.3%				
岜	9.3	Number of Foster Carers (Households)	High	Count	153	155	159		As at mth end	<b>↑</b>		ran	ige to be	set			168				
FOS	9.4	Number of Foster Carers Recruited	High	Count	6	3	8	17	Financial Year	<b>^</b>		ran	ige to be	set			77				
	9.5	Number of Foster Carers Deregistered	Info	Count	2	0	1	3	Financial Year	<b>↑</b>		ran	nge to be	set			24				
	10.1	Number of adoptions	High	Count	1	3	1	5	Financial Year	Ψ				n/a	43	43	31				
SN	10.2	Number of adoptions completed within 12 months of SHOBPA	High	Count	0	1	1	2	Financial Year	<b>→</b>				n/a	16	23	12				
TIO	10.3	% of adoptions completed within 12 months of SHOBPA	High	Percentage	0.0%	33.3%	100.0%	40.0%	Financial Year	<b>1</b>		<83%	83%>	85%+	37.2%	53.5%	38.7%				
ADOPTIONS	10.4	Average number of days between a child becoming Looked After and having a adoption placement (A1) (Rolling 12 months)	Low	Rolling year - aver count	618.0	316.3	323.0		Rolling Year	Ψ		511+	511<	487<	393.0	296.0	404.0	546.5	336.0	593.0	520.0
	10.5	Average number of days between a placement order and being matched with an adoptive family (A2) (Rolling 12 months)	Low	Rolling year - aver count	378.0	149.5	131.0		Rolling Year	<b>↑</b>		127+	127<	121<	169	136	232.9	220.6	47.0	223.0	172.0
	11.1	Number of agency social workers (Council Plan Indicator)	Low	Average count	78	72	71		As at mth end	Ψ		ran	ige to be	set			77.0				
OAD	11.2	Maximum caseload of social workers in key safeguarding teams (excluding children's disability team)	Low	Average count	28	26	34		As at mth end	Ψ		25+	24<	22<		29.1	30.0				
ASELOAD	11.3	Maximum caseload of social workers in LAC	Low	Average count	18	18	19		As at mth end	Ψ		21+	20<	18<		19.2	17.0				
& CA	11.4	Average number of cases per qualified social worker in LAC	Within Limits	Average count	10.6	11.7	10.7		As at mth end	Ψ		over 1% above range	1% above range	14-20		14.1	11.6				

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	NO.		GOOD	DATA		;	2017 / 18			<b>DOT</b> (Month	RAG	Target	and Tole	erances	YR (	ON YR TR	END	LATEST	BENCHM	ARKING -	- 2014/15
	NO.	INDICATOR	PERF IS	(Monthly)	Apr-17	May-17	Jun-17	YTD 2017/18	DATA	on	(in month)	Red	Amber	Target Green	2014/15	2015/16	2016/17	STAT NEIGH AVE	BEST STAT NEIGH	NATAVE	NAT TOP QTILE THRESHOL
RCE	11.5	Average number of cases per qualified social worker in Duty Teams	Within Limits	Average count	12.7	13.3	19.2		As at mth end	<b>↑</b>		over 1% above range	1% above range	16-22		15.8	13.3				
RKFO	11.6	Average number of cases per qualified social worker in CIN Teams (1-12)	Within Limits	Average count	17.8	18.0	18.0		As at mth end	<b>→</b>		over 1% above range	1% above range	16-22		18.0	17.7				
WO	11.7	Average number of cases per qualified social worker in Children's Disability Team	Within Limits	Average count	15.7	15.8	13.9		As at mth end	Ψ		over 1% above range	1% above range	16-22		19.1	15.4				
	II.ŏ	Average number of cases per qualified social worker in Complex Abuse Team	Within Limits	Average count	14.8	17.4	14.2		As at mth end	<b>\</b>		over 1% above range	1% above range	16-22							

#### **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.

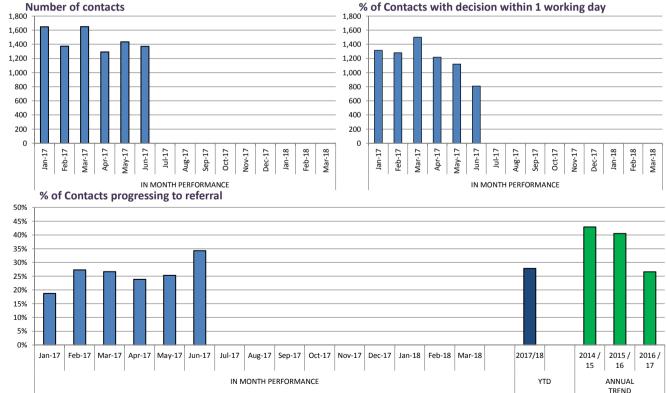
ERFORMANC

The data suggests that the number of contacts has slightly decreased for June with a higher proportion progressing on to referral. The services ability to reach a decision within 24 hours, has significantly reduced with 561 not achieving the required standard. On exploration of the dip in performance the service reports that in large part this is due to the large amount of time the Liquid Logic system has been down in recent weeks. When the system is down for most of the working day, one day a week it means that entering data is delayed and in high volume services it is difficult to get back on top of the work (the service have been asked to demonstrate this correlation). The performance as of the 11/7/17 was 87%.

The first response operational management group will request agencies review a sample of their own contacts not progressing to referral so as to offer advice to the referrers on appropriate referrals and or escalate the decision for social care review.

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 decision wit working d	hin 1	% Contacts progressing to referral			
	Jan-17	1649	1315 of 1649	79.7%	309 of 1649	18.7%		
	Feb-17	1373	1281 of 1373	93.3%	375 of 1373	27.3%		
	Mar-17	1651	1500 of 1651	90.9%	440 of 1651	26.7%		
	Apr-17	1291	1217 of 1291	94.3%	308 of 1291	23.9%		
B B	May-17	1435	1119 of 1435	78.0%	363 of 1435	25.3%		
IN MONTH PER FORMANCE	Jun-17	1371	810 of 1371	59.1%	470 of 1371	34.3%		
FOR	Jul-17							
Ë	Aug-17							
喜	Sep-17							
NON	Oct-17							
Z	Nov-17							
	Dec-17							
	Jan-18							
	Feb-18							
	Mar-18							
YTD	2017/18	4097	3146 of 4097	76.8%	1141 of 4097	27.8%		
AL D	2014 / 15	10517				42.9%		
NNUA	2015 / 16	12165		96.5%		40.5%		
A F	2016 / 17	16609		86.0%		26.6%		



Monthly Performance - June 17 - I1.xlsx 6 of 27

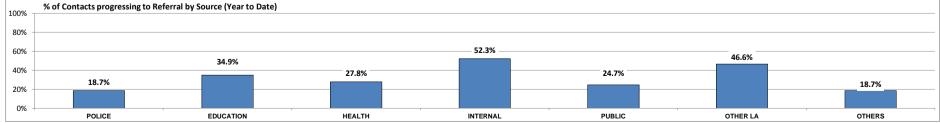
#### **CONTACTS BY SOURCE**

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.

The number of contacts progressing to referrals is improving for some agencies. The best performing are internal council services and Education. The police conversion rates are low but are likely to be impacted by the large numbers and the high proportion of domestic abuse notifications received. It is a requirement that social care services are notified of all instances of domestic abuse when there is a child living in the household, even if the risk to the child is very low. Although this skews the performance rate the information allows for an analysis of risk to be formed and monitored over time on households to allow for consideration of intervention when there are repeated events (either Early Help or Social Care).

The first response operational management group will request agencies to review a sample of their own contacts not progressing to referral so as to offer advice to the referrers on appropriate referrals and or escalate the decision for social care review. The number of contacts progressing to referrals is improving for some agencies. The best performing are internal council services and Education. The police conversion rates are low but are likely to be impacted by the large

			(1) POLICE			ducation ser		(3)	Health servi	ces	(4) Inter	nal council	services	(5) Members of public (Inc. self / parent)		(6) OTHER LOCAL AUTHORITIES			(7) Others (Inc. Children centres, Legal services, cafcass)			
		Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral	Total Contacts	No. prog to referral	% prog. to referral
	Jan-18	687	83	12.1%	208	76	36.5%	195	22	11.3%	183	61	33.3%	185	26	14.1%	39	14	35.9%	152	27	17.8%
	Feb-18	535	103	19.3%	215	93	43.3%	79	14	17.7%	115	55	47.8%	118	30	25.4%	67	21	31.3%	244	59	24.2%
	Mar-18	598	103	17.2%	256	109	42.6%	192	54	28.1%	226	100	44.2%	116	17	14.7%	51	11	21.6%	212	46	21.7%
	Apr-17	593	93	15.7%	131	41	31.3%	141	33	23.4%	140	79	56.4%	106	32	30.2%	39	10	25.6%	141	20	14.2%
岁	May-17	519	88	17.0%	249	65	26.1%	168	47	28.0%	179	82	45.8%	135	34	25.2%	43	18	41.9%	142	29	20.4%
₹	Jun-17	508	122	24.0%	198	96	48.5%	122	40	32.8%	226	124	54.9%	123	24	19.5%	49	33	67.3%	145	31	21.4%
FOR	Jul-17																					
IN MONTH PERFORMANCE	Aug-17																					
돝	Sep-17																					
NO NO	Oct-17																					
Z	Nov-17																					
	Dec-17																					
	Jan-18																					
	Feb-18																					
	Mar-18																					
YTD	2017 / 18	1620	303	18.7%	578	202	34.9%	431	120	27.8%	545	285	52.3%	364	90	24.7%	131	61	46.6%	428	80	18.7%
AL ID	2014 / 15																					
A M	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%
₹ F	2016 / 17	6085	1193	19.6%	1997	864	43.3%	1708	474	27.8%	784	317	40.4%	1404	371	26.4%	335	80.0%	0.2%	4296	1112	25.9%



7 of 27

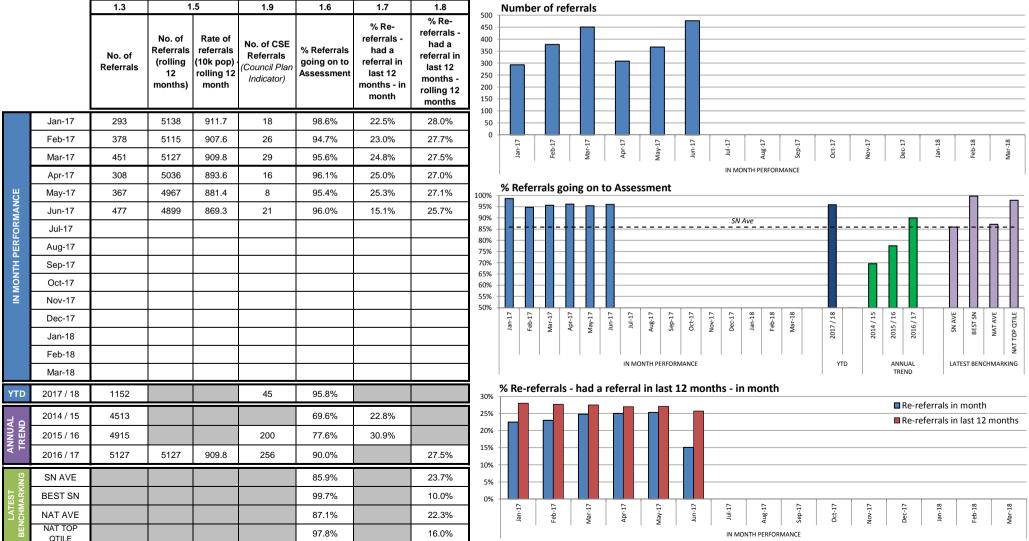
DEFINITION

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

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. 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 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 re-referral rate remains relatively stable on an overall downward trajectory. This indicator is usually a reflection of the quality of the practice and as this improves, the indicator should reduce. Considering this data presentation, 'in month' performance has decreased to be within the target, as well as the 'rolling 12 months' inicator which is now just above the locally set target of 23%. 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 over the last 6 months.

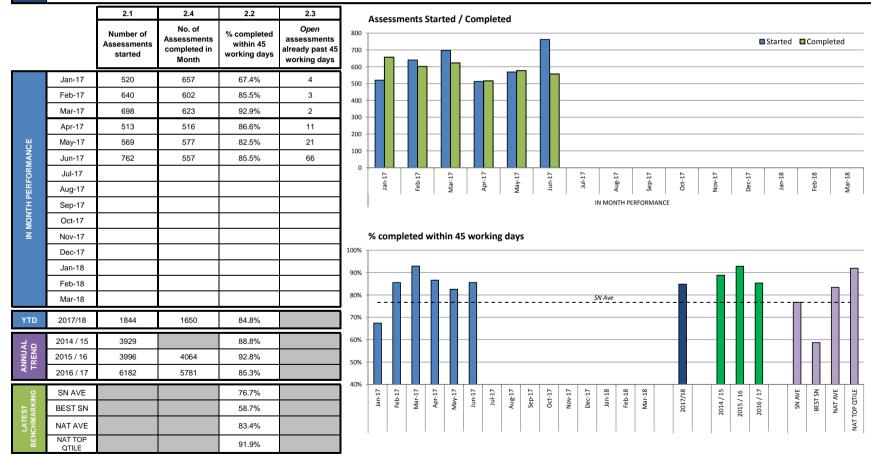


#### **ASSESSMENTS - STARTED / COMPLETED**

DEFINITION

If a child meets the Children's Act definition of 'Child in Need' or is likely to be at risk of significant harm, authorisation will be given for an assessment of needs to be started to determine which services to provide and what action to take. National Working Together guidelines state that the maximum timeframe for the assessment to be completed is 45 working days from the point of referral. If, in discussion with a child and their family and other professionals, an assessment exceeds 45 working days the social worker should record the reasons for exceeding the time limit.

RFORMANCE ANALYSIS June has seen a significant increase in the number of single social work assessments started against a reduction in contacts. 193 additional assessments were commenced and there were 64 less contacts received in June. This month sees performance of assessments completed in time increase to 85.5% placing performance better than the national and statistical neighbour averages. The number of assessments open past 45 days is significantly higher than the past 3 months, this is likely to reflect a delay in input for those completed towards the end of the month (last month went from 56 to 21 on data validation of the whole month). On further scrutiny the assessments taking the longest sit with the children's disability team who have 11 cases over 45 days. This may be explained due to the additional complexity and wider range of agencies required to provide information. It is important to note that only 7 assessments completed by the duty and assessment team were over time. All assessments over time will be reviewed by the head of service to ensure children's 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 - June 17 - 11.xtsx 9 of 27

**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.

FORMANC

Due to the new outcome coding options in the new system this data should be analysed with caution. June data suggests a small increase in the number of assessments resulting in 'Ongoing Involvement' but a small decrease in 'Step down to Early Help'. Overall, assessments resulting in further service is at 62.1% from 61.7% in May. Further system adjustments will be made if 'outcome' options need to be added. This will continue to be monitored at performance meetings and through a new 'No Further Action (NFA)' weekly auditing process 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.

										Ongoing Involvement
		2.5		2.6		2.7		2.8		
		Ongoing Invol	vement	No further ac	tion	Step down to Ea	ırly Help	Not Recorded	Other/	50%
	Jan-17	274 of 657	41.7%	279 of 657	42.5%	100 of 657	15.2%	4 of 657	0.6%	30%
	Feb-17	260 of 602	43.2%	202 of 602	33.6%	133 of 602	22.1%	7 of 602	1.2%	10%
	Mar-17 Apr-17	234 of 623 240 of 516	37.6% 46.5%	264 of 623 186 of 516	42.4% 36.0%	125 of 623 88 of 516	20.1% 17.1%	0 of 623 2 of 516	0.0%	0% Jan-17 Feb-17 Mar-17 Apr-17 May-17 Jul-17 Jul-17 Aug-17 Sep-17 Oct-17 Nov-17 Dec-17 Jan-18 Feb-18 Mar-18 2017/18 2014/15 2015/16 2016/17
삥	May-17	241 of 577	41.8%	221 of 577	38.3%		19.9%	0 of 577	0.0%	IN MONTH PERFORMANCE YTD ANNUAL TREND
PERFORMANCE	Jun-17	249 of 557	44.7%	211 of 557	37.9%	97 of 557	17.4%	0 of 557	0.0%	Step down to Early Help / Other agency 60%
FOR	Jul-17									40%
	Aug-17									30%
IN MONTH	Sep-17 Oct-17									20%
Z	Nov-17									0% Jan-17 Feb-17 Mar-17 Apr-17 Jun-17 Jul-17 Jul-17 Aug-17 Sep-17 Oct-17 Nov-17 Dec-17 Jan-18 Feb-18 Mar-18 2017/18 2014/15 2015/16 2016/17
	Dec-17									IN MONTH PERFORMANCE YTD ANNUAL TOFMIN
	Jan-18 Feb-18									No further action
	Mar-18									50%
YTD	2017/18	730 of 1650	44.2%	618 of 1650	37.5%	300 of 1650	18.2%	2 of 1650	0.1%	30%
AL ID	2014/15									10%
ANNUAL TREND		1772 of 4064	43.6%	1624 of 4064	40.7%	621 of 4064	15.4%	7 of 4064	0.2%	0% Jan-17 Feb-17 Mar-17 Apr-17 May-17 Jul-17 Jul-17 Aug-17 Sep-17 Oct-17 Nov-17 Dec-17 Jan-18 Feb-18 Mar-18 2014/18 2014/15 2015/16 2016/17
<b>4</b> '	2016/17	1270 of 5781	22.0%	2129 of 5781	36.8%	962 of 5781	16.6%	1420 of 5781	24.6%	IN MONTH PERFORMANCE YTD ANNUAL TREND

Monthly Performance - June 17 - I1.xlsx

**DEFINITION** 

PERFORMANCE ANALYSIS

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

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

Performance data is starting to return to normal sustained levels after reaching a low in December. June continues to see a small decrease in performance across CPP and LAC 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 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. The CPP plan performance issue is being addressed by the Head of Service through heightened interventions at a team level. This has resulted in compliance being achieved in 92.7 % as of the 12/7/17.

#### CPP with an up to date plan CIN with an up-to-date plan - open at least 45 days CIN with an up-100% CPP with an up AC with an up to-date plan (open at least 45 to date plan to date plan 90.8% 96.9% 78.6% Feb-17 92.7% 94.1% 60% 60% Mar-17 93.9% 96.2% 79.1% 50% Apr-17 92.3% 93.4% 76.8% May-17 91.6% 90.5% Aug-17 Sep-17 Oct-17 Nov-17 2014/15 2015/16 2016/17 2017/18 Jan-17 Mar-17 Mar-17 Apr-17 Jul-17 Jul-17 Sep-17 Sop-17 Oct-17 Doc-17 Jan-18 Feb-18 2017/18 Jun-17 91.6% 87.8% 73.8% 201 Jul-17 IN MONTH PERFORMANCE YTD ANNUAL IN MONTH PERFORMANCE YTD ΔΝΝΙΙΔΙ TREND TREND Aug-17 LAC with an up to date plan Sep-17 Oct-17 Nov-17 Dec-17 80% Jan-18 Feb-18 Mar-18 2017/18 Jan-17 Feb-17 Mar-17 Apr-17 May-17 Aug-17 Sep-17 Oct-17 Jul-17 Nov-17 2014/15 2015/16 2016/17 2014/15 65.1% 97.6% 98.6% 100.0% 98.4% 2015/16 IN MONTH PERFORMANCE ANNUAL 2016/17 93 9% 96.2% 79.1% TREND

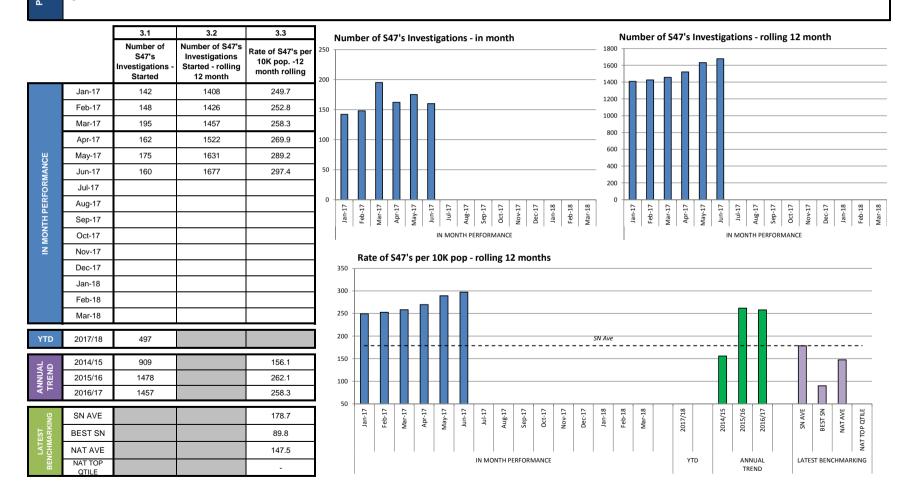
11 of 27

#### **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.

ERFORMANCE ANALYSIS The number 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.



Monthly Performance - June 17 - II.xisx 12 of 27

#### 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.

RFORMANCE

Trend data in relation to the outcome of Section 47 investigations, suggests continued high performance. This month overall outcomes were substantiated (89.2%). 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 (32.4%), there is no continuing risk of harm.

In June only 5.4% concluded at the end of the activity that they were not in line with the "significant harm" threshold against a rising number of investigations. This low level could indicate continued improvement, however this level would need to be sustained for another two quarters as a minimum to be statistically significant. As indicated in the previous section, this activity is subject to continued scrutiny and the subject of ongoing workforce development activity.

		3.4	3	.5	3.6		3.7		3.8			
			Completed S47's by outcome -									
		Number of S47's Investigation s - Completed	substa - cont ris signi	rns are intiated tinuing k of ficant irm	substa - conti ris signi	rns are intiated no nuing k of ficant irm		rns not intiated	Not re	corded		
	Jan-17	168	80	47.6%	61	36.3%	27	16.1%	0	0.0%		
	Feb-17	152	93	61.2%	38	25.0%	21	13.8%	0	0.0%		
	Mar-17	167	83	49.7%	65	38.9%	19	11.4%	0	0.0%		
	Apr-17	173	111	64.2%	54	31.2%	8	4.6%	0	0.0%		
SE	May-17	165	99	60.0%	52	31.5%	14	8.5%	0	0.0%		
NAN	Jun-17	148	84	56.8%	48	32.4%	8	5.4%	8	5.4%		
IN MONTH PERFORMANCE	Jul-17											
ERF	Aug-17											
H	Sep-17											
MON	Oct-17											
Z	Nov-17											
	Dec-17											
	Jan-18											
	Feb-18											
	Mar-18											
YTD	2017/18	486	294	60.5%	154	31.7%	30	6.2%	8	1.6%		
AL D	2014/15	876										
ANNUAL TREND	2015/16	1390	810	58.3%	420	30.2%	156	11.2%	4	0.3%		
A F	2016/17	1384	770	55.6%	386	27.9%	151	10.9%	19	1.4%		



Monthly Performance - June 17 - I1.xlsx 13 of 27

#### **CHILDREN IN NEED (CIN)**

DEFINITION

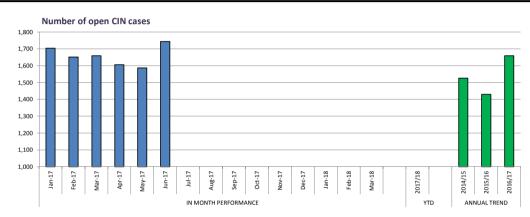
If the child is found to be disabled or the assessment finds that their health and development is likely to suffer without local authority intervention, the child will be classed as 'in need', as defined by Section 17 of the Children Act 1989. This means that the local authority is now legally obliged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

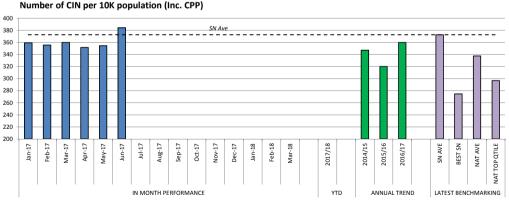
R FORMANC

There is no good or bad performance in relation to number of CIN although it is important to monitor against statistical neighbour and national averages as numbers considerably higher or lower than average can be an indicator of other performance issues. The numbers for June show a significant increase in the number of children (157) that puts performance above the statistical neighbour average, and national average. This is likely to be related to levels of deprivation and therefore the stat neighbour average is the most reliable comparator. This increase is being explored by the Head of Service to ascertain whether it is a genuine increase in referrals or an inability to close cases/step down to early help.

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

		4.1	4.2	4.3
		Number of open CIN cases	Number of CIN (Inc. CPP as per DfE definition)	Number of CIN per 10K pop. (Inc. CPP as per DfE definition)
	Jan-17	1704	2026	359.2
	Feb-17	1652	2006	355.7
	Mar-17	1659	2029	359.8
	Apr-17	1606	1983	351.6
CE	May-17	1587	1999	354.4
IN MONTH PERFORMANCE	Jun-17	1744	2168	384.4
FOR	Jul-17			
PER	Aug-17			
Ę	Sep-17			
MOR	Oct-17			
≧	Nov-17			
	Dec-17			
	Jan-18			
	Feb-18			
	Mar-18			
YTD	2017/18			
7 L	2014/15	1526	1947	347.1
NNUA	2015/16	1430	1805	320.0
A +	2016/17	1659	2029	359.8
D N C	SN AVE			372.7
EST	BEST SN			274.6
LATEST BENCHMARKING	NAT AVE			337.7
H H	NAT TOP QTILE			296.6





#### CHILD PROTECTION

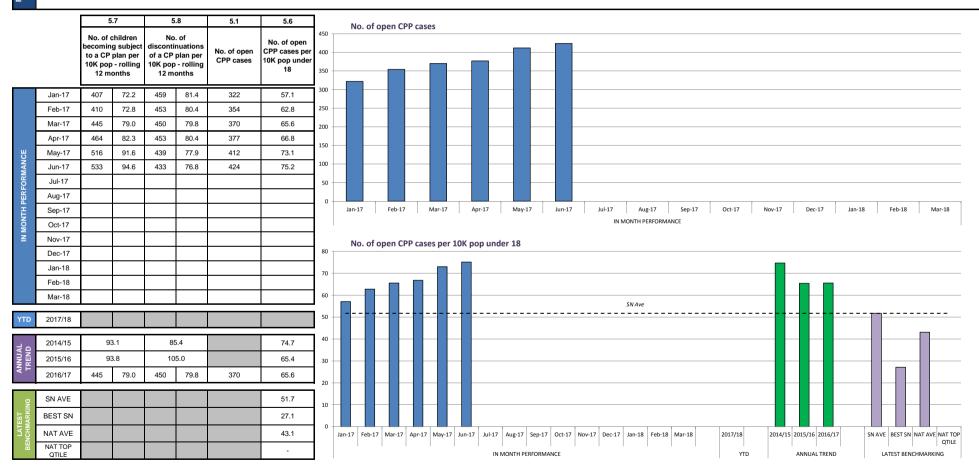
DEFINITION

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. 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.

RFORMANC ANALYSIS

The trend for the number of children with a Child Protection Plan (CPP) has continued to increase 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 and either the risk of harm is reduced or alternative plans are made to care for the child. The increase in plans could in part 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. We are considering how best to intervene at a community level to reduce the number of children who experience childhood neglect. The introduction of the signs of safety methodology should have a positive impact in this area of support. Long-term the figures should then stabilise closer to the benchmark averages. However the number of plans alone cannot offer assurance that we have identified the right children at risk of/or experiencing significant harm and are supported by a plan.



#### **INITIAL CHILD PROTECTION CONFERENCES**

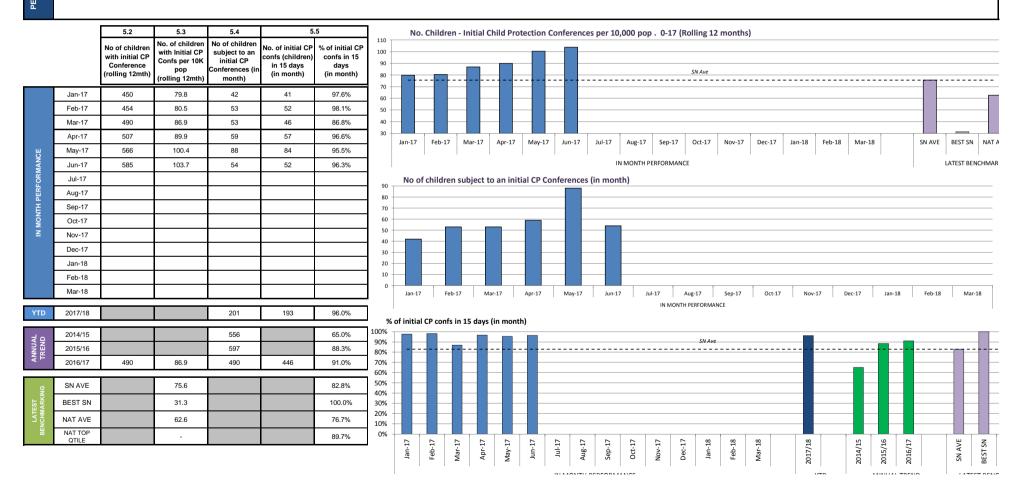
DEFINITION

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RFORMANCE

54 children were subject to an Initial Child Protection Conferences held in June which is a significant decrease (34), which is more in line with previous months. 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 continues to be good at 96.3%. It remains good and better than the national and statistical neighbour average, placing Rotherham in the top quartile. For any children experiencing a delay the reasons for these delays are known and understood by the conference chair manager to help mitigate and improve future practice.



Monthly Performance - June 17 - 11.xlsx

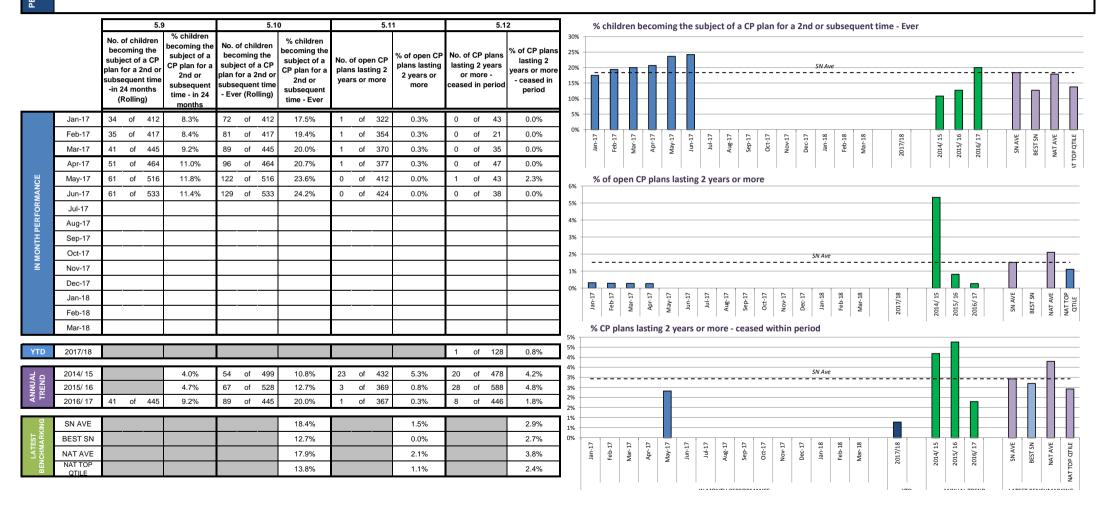
# **CHILD PROTECTION - TIME PERIODS**

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.

ERFORMANC

The data suggests that the services ability to reach a timely resolution for children at risk continues to be good. This is likely to relate in large part to increasing numbers of children in care and subject of a legal proceeding. 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 static.



Monthly Performance - June 17 - 11.xlsx 17 of 27

# CHILD PROTECTION - REVIEWS & VISITS

DEFINITION

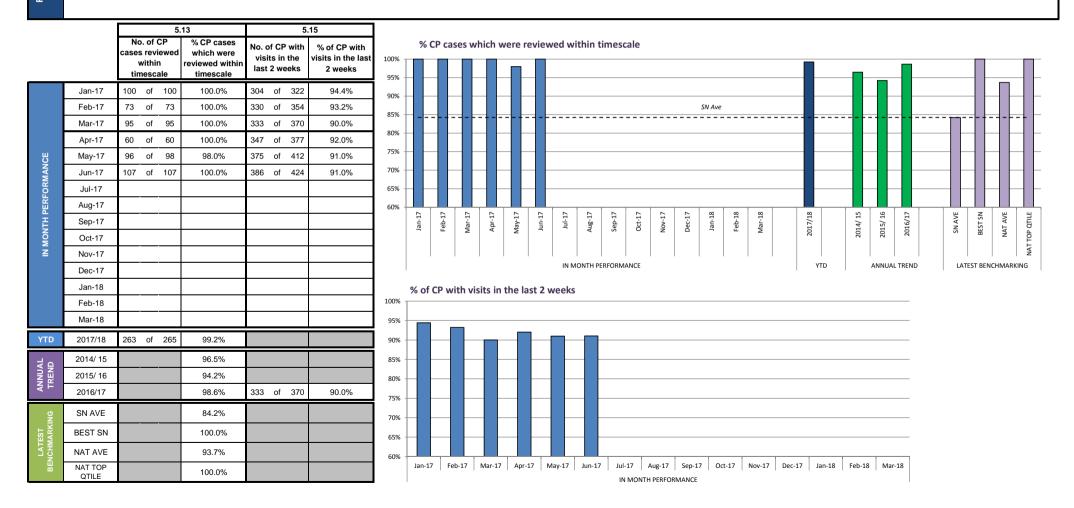
A child protection plan is reviewed after three months and at intervals of no more than six months thereafter.

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).

ERFORMANCE

Performance in the timeliness of Review Case Conferences continues to be good and has returned to 100% for June.

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. Although the last two months has seen a small downturn. 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.



Monthly Performance - June 17 - 11.xlsx 18 of 27

# 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

The overall trend of admissions to care continues to rise. In the last eight 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). In June this was particular stark as the gap is +17. However the number of children who ceased to be lack due to permanance improved. 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. More recently the initiating of a large complex abuse investigation will be impacting on the number of children subject to care proceedings that will ensure their safety from the impact of accumulative neglect.



Monthly Performance - June 17 - 11.xls.x 19 of 27

### **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

DEFINITION

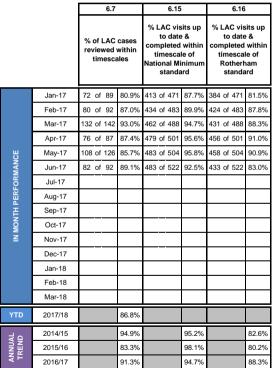
Independent Reviewing Officer (IRO)

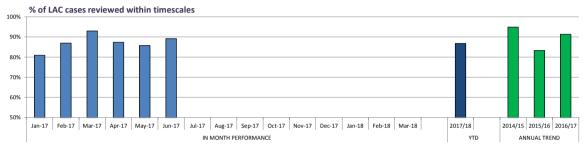
The LA is also responsible for appointing a representative to visit the child wherever he or she is living to ensure that his/her welfare continues to be safeguarded and promoted. The minimum national timescales

for visits is within one week of placement, then six weekly until the child has been in placement for a year and the 12 weekly thereafter. Rotherham have set a higher standard of within first week then four weekly thereafter until the child has been permanently matched to the placement.

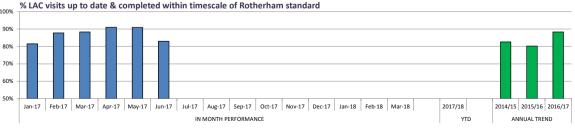
REORMANC

Current performance on LAC visits are monitored by the Head of Service 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 at good level.







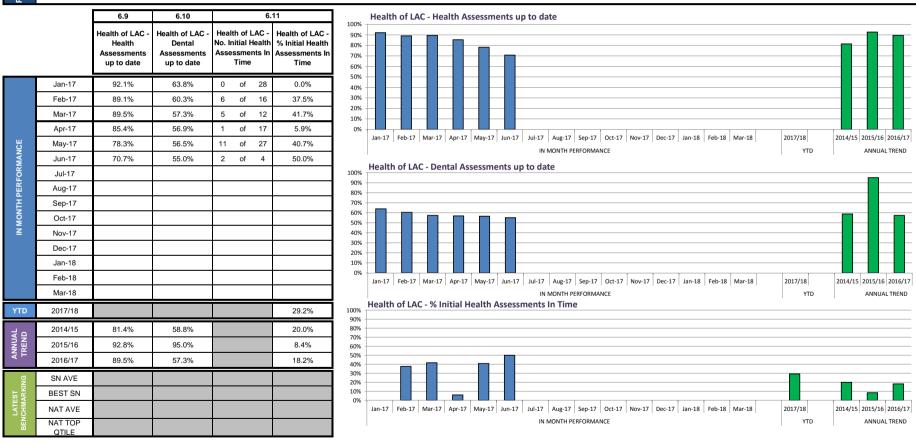


DEFINITION

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.

ERFORMANCE ANALYSIS

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



Monthly Performance - June 17 - 11.xisx

# **LOOKED AFTER CHILDREN - PERSONAL EDUCATION PLANS**

DEFINITION

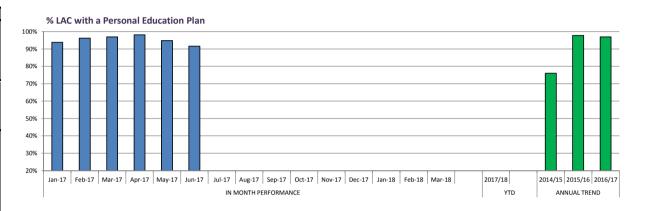
A personal education plan (PEP) is a school based meeting to plan for the education of a child in care. The government have made PEPs a statutory requirement for children in care to help track and promote their achievements.

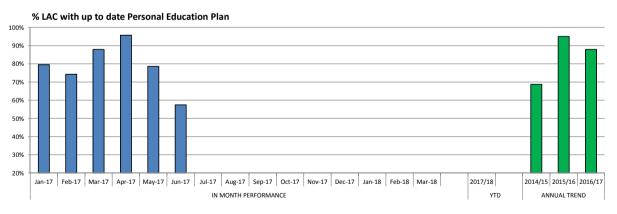
PERFORMANCE ANALYSIS

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 remains too low. This has been caused by authorisation delays due to long term sickness absence, a solution is being looked at. 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.

Validation work by the Virtual School has identified a number of PEPs which have not been input into the Liquid Logic system this is contributing to 'LAC with an up to date PEP' performance being lower than expected. Once remedial work is completed performance is expected to be much higher.

		6.12				6.13				
		Number of Eligible LAC with a Personal Education Plan		% LAC with a Personal Education Plan	with Pe	up to ersor	f LAC date nal Plan	% LAC with up to date Personal Education Plan		
	Jan-17	289	of	308	93.8%	245	of	308	79.5%	
	Feb-17	303	of	315	96.2%	234	of	315	74.3%	
	Mar-17	313	of	323	96.9%	284	of	323	87.9%	
	Apr-17	321	of	327	98.2%	313	of	327	95.7%	
CE	May-17	327	of	345	94.8%	271	of	345	78.6%	
IN MONTH PERFORMANCE	Jun-17	327	of	357	91.6%	205	of	357	57.4%	
ORI	Jul-17									
ER	Aug-17									
풀	Sep-17									
MON	Oct-17									
≧	Nov-17									
	Dec-17									
	Jan-18									
	Feb-18									
	Mar-18									
YTD	2017/18									
AL D	2014/15				76.0%				68.7%	
ANNUAL	2015/16				97.8%				95.0%	
AP T	2016/17				96.9%				87.9%	
NG	SN AVE									
LATEST BENCHMARKING	BEST SN									
NCHN	NAT AVE									
BEI	NAT TOP QTILE									





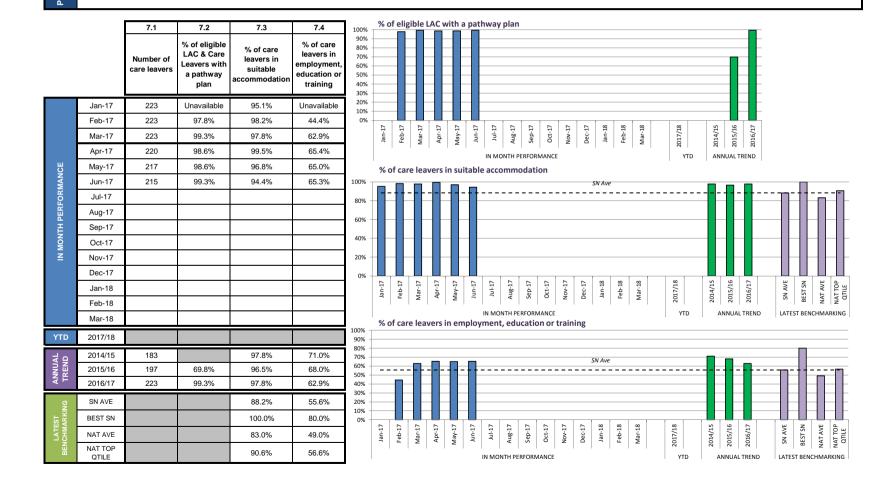
# **CARE LEAVERS**

DEFINITION

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

PERFORMANCE ANALYSIS

The number of care leavers who have a pathway plan is at a good level, however the quality of the plans are too variable and significant improvement work has commenced to improve the quality of plans including introducing a new plan template that encourages the workforce to hear the young persons voice. The number of young people living in suitable accommodation is high and those who are not, are provided with additional support to address this issue. Performance on this indicator places the service in the top quartile nationally. The number of young people who are positively engaged in education and employment is good and places the service in the top quartile. Those young people who are NEET will receive additional support to make progress into EET.



Monthly Performance - June 17 - 11.xisx

### LOOKED AFTER CHILDREN - PLACEMENTS

DEFINITIO

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.

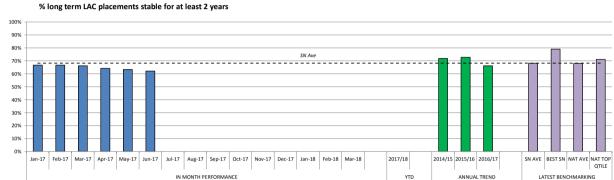
REORMANCI

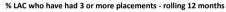
The June performance for children who have had three or more placement moves is stable at, 12.1%, whilst it has reduced, it continues to be higher than all other benchmarks. Our target of reducing to less than 10% remains and is still achievable in the current financial year.

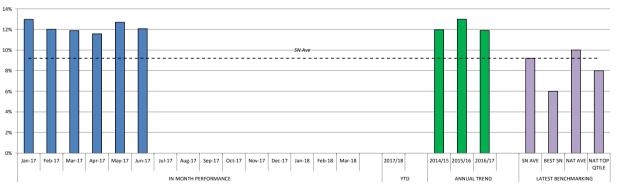
The number of children who experience a stable placement for over two years is just below that of our statistical neighbours and the national average. These two statistics could suggest that we need to improve our preventative work to reduce initial placement disruption. If a child experiences a disruption 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 experiencing placement moves in 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 new Fostering Allowance and Support Scheme has increased the growth of in-house foster carers. This in turn will 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. The number of children in a family based setting remains stable at 82% against a larger number of children in care this demonstrates that the increase in foster carers are managing to care for our new entrants well.

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

#### 8.4 No. of LAC % of LAC % LAC who % of LAC in No. of long who have placed with 6 long ter have had 3 d amily Base lo of LAC in term LAC LAC had 3 or % of LAC in a parents or setting placements placement more other with Commission (Corporate ommissio stable for at stable for a placements parental d Placemen Plan 2016 d Placemer rolling 12 least 2 years least 2 years rolling 12 esponsibil y (P1) Jan-17 94 of 141 66.7% 61 of 470 13.0% 80.3% 4.9% Feb-17 96 of 144 66.7% 58 of 483 12.0% 79.9% 4.3% 58 of 488 81.1% 211 of 488 Mar-17 96 of 145 66.2% 11.9% 5.3% 43.2% Apr-17 93 of 145 64.1% 58 of 501 11.6% 79.6% 5.0% 230 of 501 45.9% 63 3% 64 of 504 12.7% 233 of 504 May-17 93 of 147 80.6% 5.0% 46.2% Jun-17 90 of 145 62.1% 63 of 522 12.1% 82.0% 5.0% 243 of 522 46.6% lul-17 Aug-17 Sep-17 Oct-17 Nov-17 Dec-17 Jan-18 Feb-18 Mar-18 2017/18 2014/15 110 of 153 71.9% 49 of 409 12.0% 109 of 150 2015/16 72.7% 56 of 431 13.0% 188 of 431 43.6% 2016/17 96 of 145 66.2% 58 of 488 11.9% 81.1% 5.3% 211 of 488 43.2% SN AVE 68 2% 9.2% BEST SN 6.0% 79.0% NAT AVE 68.0% 10.0% 71 1% 8.0%







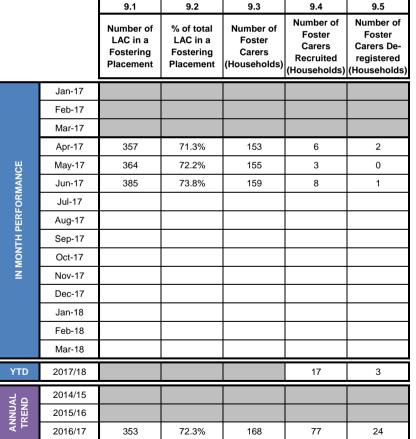
# **FOSTERING**

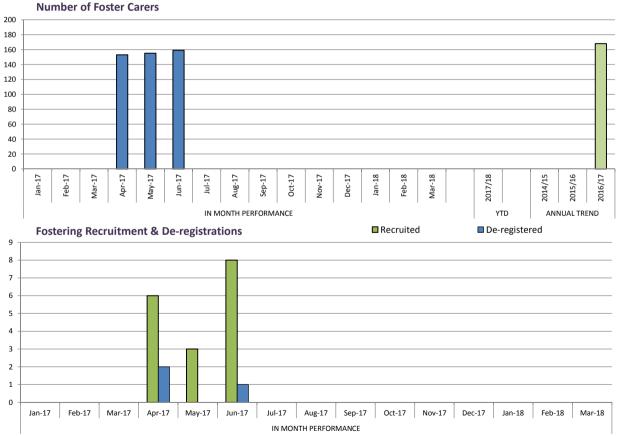
DEFINITION

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

ERFORMANCE

A significant improvement programme is in place to support an increase in the number of families who provide care and increase the number of children living in families. This should then reduce the number of children who experience a disruption.





### **ADOPTIONS**

DEFINITION

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.

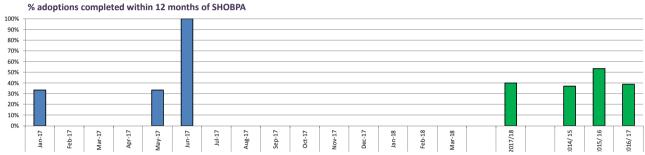
Targets for measures A1 and A2 are set controlly by government office

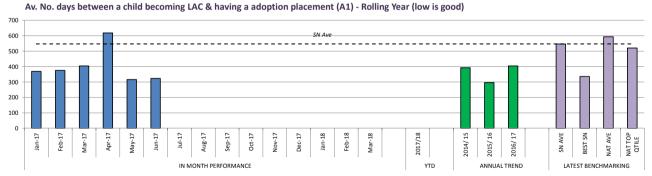
Performance each month can vary significantly given the size of the cohort which is always very small.

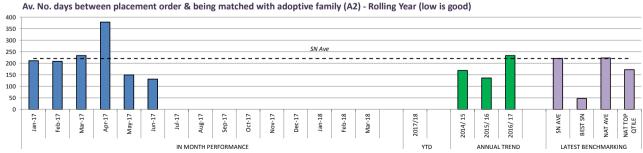
Given the small numbers it is most useful to look at a rolling 12 months than a month snapshot and overall performance in this area over the last three years has shown an improving trend. Importantly, all children awaiting adoption are reviewed in the fortnightly performance meeting and the reasons for 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

		10.1	10.2	10.3	10.4	10.5		
		Number of adoptions	Number of adoptions completed within 12 months of SHOBPA	% adoptions completed within 12 months of SHOBPA	Av. No. days between a child becoming LAC & having a adoption placement (A1) (rolling yr.)	Av. No. days between placement order & being matched with adoptive family (A2) (rolling yr.)		
	Jan-17	9	3	33.3%	368.8	211.0		
	Feb-17	1	0	0.0%	374.7	208.4		
	Mar-17	2	0	0.0%	404.0	232.9		
IN MONTH PERFORMANCE	Apr-17	1	0	0.0%	618.0	378.0		
	May-17	3	1	33.3%	316.3	149.5		
	Jun-17	1	1	100.0%	323.0	131.0		
	Jul-17							
	Aug-17							
	Sep-17							
MON	Oct-17							
	Nov-17							
	Dec-17							
	Jan-18							
	Feb-18							
	Mar-18							
YTD	2017/18	5	2	40.0%				
ANNUAL	2014/ 15			37.0%	393.0	169.0		
	2015/ 16	43	23	53.5%	296.0	136.0		
	2016/ 17	31	12	38.7%	404.0	232.9		
Ş	SN AVE				546.5	220.6		
LATEST BENCHMARKING	BEST SN				336.0	47.0		
	NAT AVE				593.0	223.0		
	NAT TOP QTILE				520.0	172.0		







Monthly Performance - June 17 - 11.xisx 26 of 27

<sup>\*</sup>Annual Trend relates to current reporting year April to Mar - not rolling year

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

DEFINITION

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

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.

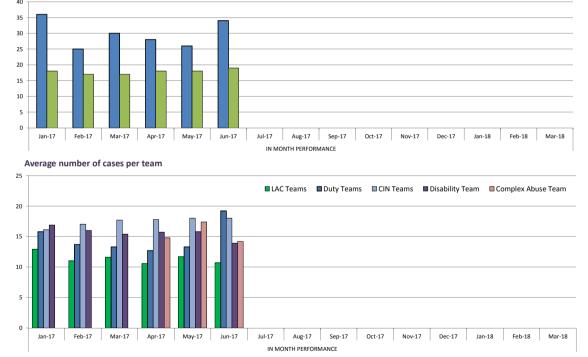
The impact of rising LAC has been a small rise in the number of average cases per SW however this is still well within acceptable tolerances.

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 all are within tolerances. 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. The complex abuse team has been added and shows a caseload within acceptable limits although this should reduce to the level of a LAC social worker recognising the additional complexity of the cases held by the team.

Maximum caseload of social workers

ļ		11.1	11.2	11.3	11.4	11.5	11.6	11.7	11.8
		Number of agency social workers	Maximum caseload of social workers in key Safeguardin g 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 Locality Teams (CiN)	Av. no. cases in Children's Disability Team	Av. no. cases in Complex Abuse Team
	Jan-17		36	18	12.9	15.8	16.1	16.9	
	Feb-17		25	17	11.0	13.7	17.0	16.0	
	Mar-17		30	17	11.6	13.3	17.7	15.4	
IN MONTH PERFORMANCE	Apr-17	78	28	18	10.6	12.7	17.8	15.7	14.8
	May-17	72	26	18	11.7	13.3	18.0	15.8	17.4
	Jun-17	71	34	19	10.7	19.2	18.0	13.9	14.2
	Jul-17								
	Aug-17								
	Sep-17								
Ŏ.	Oct-17								
N	Nov-17								
	Dec-17								
	Jan-18								
	Feb-18								
	Mar-18								
YTD	2017/18								
ANNUAL	2014/15								
	2015/16		29.1	19.2	14.1	15.8	18.0	19.1	
	2016/17	77	30.0	17.0	11.6	13.3	17.7	15.4	



■ Key Safeguarding Teams ■ LAC Teams

Monthly Performance - June 17 - II.xisx 27 of 27