

Performance Measures

Date of update 8th July

| Objective | Key Actions | Measures | | | Lead | RAG | Performance Commentary | Lead Workstream(s) |
|--|---|--|--|--|------------------------------|---------|---|---------------------------------|
| | | Baseline | Current performance | Targets | | | | |
| Staying Safe - Performance | | | | | | | | |
| | NI 68 - Increase the % of referrals of children in need to children's social care going onto initial assessment in line with the current statistical neighbour average/top band performance (mid range is good performance) | 57.6% (2008/09 outturn) (2270/3940) 59.8% (position as at Nov 2009) | 62.63% | 65% March 2010 68% October 2010 70% March 2011 | Gani Martins | ↑ Amber | From 1st April to 7th July the figure is 62.63%, (compared with 61.64% reported to the Panel on the 3rd June). Data checks continue to be undertaken but the Practice Improvement Managers to check accuracy in recording and are part of the QA process. | Social Work |
| Improvement Notice | NI 59 - Increase the % of initial assessments for children's social care carried out within 7 working days of referral from the 2008/09 baseline in line with current statistical neighbour average/top band performance (high is good performance) | 77.8% (2008/09 outturn) (1767/2270) 73% (position as at Nov 2009) | 80.16% | 80% March 2010 85% October 2010 87% March 2011 | Gani Martins | ↑ Amber | 80.16% (back above the March target of 80%) of the I.A.s completed between 1st April and the 7th July were completed in time. Data checks continue to be undertaken by the Practice Improvement managers to check accuracy in recording and are part of the QA process. | Social Work |
| Improvement Notice | NI 60 - Increase the % of core assessments for children's social care carried out within 35 working days of their commencement from the 2008/09 baseline in line with the current statistical neighbour average/top band performance (high is good performance) | 84.9% (2008/09 outturn) (276/325) 68% (position as at Nov 2009) | 87.71% | 80% March 2010 84% October 2010 87% March 2011 | Gani Martins | ↑ Green | Between 1st April and 7th July 87.71% of Core Assessments have been completed in time, this is now slightly higher than the March 2011 target of 87%. Sample core assessments are being audited by the Practice Improvement Managers | Social Work |
| LAA 2008-2011 Being Healthy; Enjoying and Achieving; Achieving Economic Wellbeing; Making A Positive Contribution - Performance | | | | | | | | |
| Overall improvements in LAA indicators relating to children's services and statutory attainment targets through the period of this Improvement Notice | Overall improvement to be made against all CYP related LAA measures | Baseline for measures is the agreed position when the LAA refresh was finished in March 2009 | 67% of CYPS related indicators, 76% including education and NTI indicators have improved from the baseline | >65% improved from baseline March 2011 | Rotherham MBC / LSP Partners | → Green | At outturn 2009/10 67% of CYPS LAA related targets (76% including Education and NTI indicators) have improved performance from their baseline positions since the LAA was agreed. Further work is taking place in relation to the Red risks in the LAA action plan and improvement plans being put into place | Performance and all Workstreams |

Operational Targets

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|---|--|---|--|-------------|--------------------------------|----------|--|--------------------|
| | | Baseline | Targets | | | | | |
| 1. Staying Safe - Social Work Practice and Process | | | | | | | | |
| Establish and implement an effective policy on the auditing of assessment and referrals so as to ensure managerial involvement in quality assurance | Implement an improved quality assurance framework for assessments and referrals | Each Team Manager audits 3 files per month as per guidance. Locality Managers to audit 3 files per month and 5 NFA Audits | 100% compliance with the policy | August 2010 | Gani Martins | ↑ Amber | A detailed progress report on the new monitoring system is on the agenda for the Improvement Panel on the 13th July. Quality Assurance has increased significantly and although practice issues are being identified there is evidence of some improvement and Practice Improvement Managers tackle the issues through coaching and mentoring. | Social Work |
| | Conduct a review on all NFA cases to quality assure the high level of 'no further action' decisions being taken | NFA Contacts and Referrals 1.4.2009 to 9.12.2009 33.18% Total Contacts 11.12% Total Referrals | 10% reduction in overall contact and referrals which result in NFA by March 2010 | August 2010 | Gani Martins | → Green | A detailed progress report on the new monitoring system is on the agenda for the Improvement Panel on the 13th July. Quality Assurance has increased significantly and although practice issues are being identified there is evidence of some improvement and Practice Improvement Managers tackle the issues through coaching and mentoring. | Social Work |
| | Conduct Business Process re-engineering exercise on current practices in relation to Assessments and Referrals in line with best practice to enhance performance | Practices in relation to Assessments and Referrals in need of review | Business process Re-engineering process completed | July 2010 | John Dunn, RBT / Rebecca Wragg | ↓ Red | BPR work has continued to complete those areas identified as priority. The remaining processes are to be re-prioritised with the Director and Safeguarding and Corporate Parenting and a detailed report is on the Improvement Panel agenda on the 13th July. Prioritisation of this work continues to be an issue in relation to other key pieces of work | ICT |
| Embed use of the CAF in practice across children's services so that it is effectively used to inform early intervention | Improve quality and completion levels of CAFs | Between January 2006 and July 2009 there have been 976 CAFs completed in Rotherham. | 600 CAFs to be completed between April 2010 and March 2011 | March 2011 | Simon Perry / Sarah Whittle | ↑ Amber | Following the launch of the early intervention improvement programme and CAF training re-commencing on the 24th February, as at the 8th July 519 staff and 89 managers have now been trained. Since the first of April 2010 147 CAFs have been completed. | Early Intervention |
| | Update Multi Agency Safe & Well Protocol and Practice Guidance | Original Safe and Well Protocol launched in 2006. | Update of Protocol Completed | April 2010 | Gani Martins/ Simon Perry | complete | | Social Work |
| | High profile re-launch to ensure consistency in Thresholds for intervention across all agencies. | Original Safe and Well Protocol launched in 2006. | Protocol updated and relaunched | April 2010 | Gani Martins/ Simon Perry | complete | | Social Work |

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| | | Baseline | Targets | | | | | |
| 1. Staying Safe - Social Work Practice and Process | | | | | | | | |
| Monitor improvement in children's social care, by establishing a rigorous performance management system which delivers regular monitoring, scrutiny and quality assurance of social care performance | Ensure that all children's homes are compliant with regulatory requirements | 1 - St Edmunds | No inadequate children's homes | December 2009 | Gani Martins | complete | | Social Work |
| | Introduce monthly safeguarding report card to CYP Directorate Leadership Team, Corporate Management Team, Safeguarding Board and Children and Young People's Board. | Safeguarding focused performance scorecard required | 12 reports per year | August 2010 | Julie Westwood | complete | The Safeguarding report card has been approved and adopted by the Improvement Panel, CYP Board and Locality Teams and was presented at the Safeguarding Board on the 19th March 2010. A new Performance sub group has been established which have firmed up reporting arrangements to the RSCB and work is underway with the Children's Board with reports scheduled to the sub-group. | Performance |
| | Conduct a self assessment using the Safeguarding Inspection Criteria to identify any areas for development prior to inspection | Initial work started | Assessment completed and approved | May 2010 | Gani Martins / All Managers / Performance and Quality | complete | | Social Work |
| | Improve quality of serious case reviews to ensure all judged adequate or better | Two of Four judged inadequate | All future SCRs to be rated good or better | ongoing | Howard Woolfenden | ↑ Green | The SCR previously evaluated as inadequate has been fully re-evaluated by OFSTED following the submission of the challenge and we were informed on the 17th June that this has now been rated adequate. The SCR evaluations are now 1 good and 3 adequate on the CAA OFSTED profile and the performance status should now improve to green. In 2010, GOYH has signed off 2 SCR Action Plans and evidence for an additional 1 was submitted to GOYH in May 2010. Of the remaining 2 Action Plans, no actions are at Red status. | Social Work |
| | Ensure that all actions from recommendations from SCRs are implemented and that evidence is provided to ensure robust audit trail. | Baseline 37 Actions | Number of recommendations in red status = 0. | July 2010 | Alan Hazell Howard Woolfenden Phil Morris | → Amber | Rotherham LSCB constitution signed off on 19th March 2010 including TOR of P&Q sub group. SCR sub committee to retain overall responsibility for SCR action plans and P&Q sub group will evaluate impact and outcomes. 1 action plan has now been signed off by GO on the 15th March and the remaining 3 actions are to be reviewed with GO. Further work has taken place on all actions plans including ongoing monitoring at the monthly SCR panels, a meeting held with GO on 11th May. There are currently no recommendations in red status | Social Work |
| | Permanent Safeguarding Manager to be in post | 1 individual working 2 days a week conducting safeguarding manager duties | Safeguarding Manager in post | May 2010 | Joyce Thacker | → Green | Interviews for a permanent Safeguarding Manager were held on 18th March 2010, an appointment was not made but alternative action has been agreed with the RSCB independent chair. Howard Woolfenden has been appointed as Interim Safeguarding Manager from the 1st June. Longer term plans are being considered. | Workforce |

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|--|--|---|---|--------------|--------------|---------|---|-------------------------|
| | Conduct robust quality assurance checks on information systems to ensure that contacts, referrals and the status of investigations, assessments and plans are up to date | Quality assurance and audits require improved performance framework | % of monthly supervision checks conducted - 100% Number and % of adequate data quality checks conducted - 100% | June 2010 | Gani Martins | ↑ Amber | A single QA/Audit Framework has been implemented which covers all aspects of this action. The overall data quality assurance strategy and monitoring and reporting policies and procedure has been signed off by the SCPMT. From the 1st March initial and core assessments are being audited with a bank of good practice which has been developed. Further, more robust recording of audits has recently been introduced. A report was submitted to the Improvement Panel on the 7th May, a further report is being submitted to the Improvement Panel on the 13th July | Social Work |
| Review social workers' responsibilities to ensure that responsibilities are clearly and tightly defined so that no staff carry too wide a range of work. This will need to involve consideration of whether a restructure of children's social care services is necessary | Undertake Fieldwork Review and implement improved operational structure | The remaining priority action to be addressed | Fully reviewed social care infrastructure in place | October 2010 | Gani Martins | ↑ Amber | A report of the review has been completed and a project plan developed to ensure effective and timely implementation. Key areas include: Front Door improvements, the number of locality teams, and introduction of dedicated LAC teams. This report has now been shared with Safeguarding and Corporate Parenting Management Team and DLT on the 27th April. Implementation will be complete by October 2010. | Social Work / Workforce |

Operational Targets

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|---|--|---|--|--|-----------------------------------|----------|---|-------------------------|
| 2. Enjoying and Achieving - Practice and Process | | | | | | | | |
| Improve Performance across primary schools with a particular focus on addressing the performance of schools below the floor targets | Submit a plan to the DCSF which addresses performance across primary schools with a particular focus on addressing the performance of schools below the floor targets | Existing plan in need of review | Plan Agreed With DCSF | End of January 2010 | David Light | complete | | Enjoying and Achieving |
| | Implement this plan, as agreed with DCSF and National Strategies, to bring about demonstrable and sustained improvement in primary school standards throughout the term of the Improvement Notice. | 13 Primary schools below floor targets | 13 down to 8 during 2010 and then down to 0 in 2011 | March 2010 October 2010 March 2011 | David Light | → Amber | Report was submitted to Improvement Panel on 22nd April 2010 and a World Class Primaries Board meets with DCSF and National Strategies involvement to progress the actions in the plan | Enjoying and Achieving |
| 3. Leadership and Management / Capacity Building / Support | | | | | | | | |
| Build capacity and capability to deliver and sustain improvement | Obtain external funding from Regional Improvement Efficiency Programme/DCSF including sector led expertise as required | No funding agreed | Funding obtained and apportioned | August 2010 | Matthew Gladstone | → Green | £125k additional funding was agreed by the RIEP, this is being used to fund the CAF Champion posts. DfE allocated £150k (over two years) to support improvement. Additional social work resources have been selected from tenders using the DfE funding and is focussing on quality assurance and improvement work. | Finance |
| Develop a comprehensive programme of training, mentoring and continuous professional development for all social care staff so that they have the skills to complete high quality and timely assessments | Director of Children's Services holds monthly 1:1 challenge meetings with each Service Director covering all aspects of performance | Monthly supervisions currently in place | 12 challenge meetings per year per director | December 2009 | Joyce Thacker | Complete | | Workforce |
| | Improve induction process for CYPS | Induction process for CYPS inconsistent | Induction process for CYPS consistently adhered to and monitored | January 2010 | Gani Martins/ Warren Carratt | complete | | Workforce |
| | Ensure that accountabilities for each individual are being reinforced through consistently applied PDR's to ensure staff have a satisfactory Performance Plan. | 81% | 90% | June 2010 | Julie Westwood/ Warren Carratt | → Amber | An interim audit report has revealed that supervision / PDRs are under-recorded on Yourself and work is being undertaken to correct this. A further audit will be conducted at the end of July. Staff have been remind to record the activity appropriately | Workforce / Performance |

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|---|--|--|--|---|---|--|--|--------------------------------------|
| <p>Demonstrate improvements in staff satisfaction and in the satisfaction of children and families with the services they receive through the term of the Improvement Notice</p> | <p>Improve outcomes of CYPS satisfaction surveys</p> | <p>Employee Opinion Survey TBC LAC reviews TBC Audit Commission in Schools Survey TBC Social Worker Survey TBC</p> | <p>Employee Opinion Survey TBC LAC reviews TBC Audit Commission in Schools Survey TBC Social Worker Survey TBC</p> | <p>March 2010 Oct 2010 and March 2011</p> | <p>Julie Westwood/ Warren Carratt</p> | <p style="background-color: orange; color: black; text-align: center;">↑ Amber</p> | <p>Baseline for EOS - 64% (CYPS) rest of Council 69% - target to be discussed 69%, the next EOS is not until 2011, HR are planning for a specific survey for CYPS to be run at the end 2010. Baseline for AC schools survey response rate 2008 29% 2009 63%. Target 80%, next survey not now run until 2011 (now 2 yearly). The Family Placement Survey is a bi-annual survey of Foster Carers and Adopters, the response rate in November 09 was 29% lower than the 2006 survey - 52%. However, the rates of satisfaction have increased, particularly around the levels of support they receive. The next survey is scheduled for 2011.</p> | <p>Workforce and all Workstreams</p> |
|---|--|--|--|---|---|--|--|--------------------------------------|

Operational Targets

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|--|---|--|---|-------------|-----------------------------|---------|--|---------------------------|
| | | Baseline | | | | | | |
| 4. Performance Management | | | | | | | | |
| Improve Annual Children's Service Scores Profile to Performing well by 2011 through implementation of all outstanding recommendations and improvement of inspection scores to good or better | Continually assess the position in relation to all outstanding external inspection recommendations including all those listed in CAA Blocks A and B | Performing Poorly | 90% of recommendations met in original timescale 12 reports per year | monthly | Julie Westwood | → Amber | Recommendations from key high risk inspections being input. Visits undertaken to Early Years and SES to examine recording systems already deployed. These have been found to be satisfactory. There will be on site visits to validate the implementation of recommendations and the state of readiness in terms of achieving a positive outcome in the next inspection. Action plans have been requested from the services to shift proportion of services to good or better and have been received and were discussed with GO on the 9th June. | Performance |
| | Introduce robust monthly monitoring arrangements to ensure implementation of all outstanding inspection recommendations from all inspections in original timescales | Inspection recommendations from key inspections are being monitored but reports need to include all inspected services | 90% of recommendations met in original timescale 12 reports per year | Quarterly | Julie Westwood | → Amber | All inspection recommendations (with the exception of schools and childminders which have an established monitoring system) are being entered into the reconfigured CYP inspections monitoring system. Monitoring reports will be presented quarterly to each Improvement Panel Meeting, reported to Improvement Panel on 25th March focusing on the high risk area, children's homes, this will be included in the overarching audit and inspection report being submitted to the 13th July Improvement Panel | Social Work / Performance |
| | Conduct a minimum of 2 mock unannounced inspections, in line with the Ofsted criteria per quarter | 0 | Minimum of 2 mock inspections per quarter to have been conducted | Quarterly | Julie Westwood/Gani Martins | ↑ Amber | Resources have been committed to commissioning this externally. The work will take place over 6 half days to allow "deep dive" focus on a number of areas but with a particular focus on those which have been highlighted in the self assessment work and challenge. work will take place with Team and Locality Managers in respect of "what does good look like". As Part of Gani Martin's induction she carried out a "deep dive" in 2 Localities. Discussions with external consultant Steven Warburton to establish a framework of pre-inspection activity has now taken place and will be increased in preparation for the announced inspection on the 19th July. | Social Work / Performance |
| | Improve CYP Performance Profile rating for Block A by increasing % of inspected services rated "good or better" | Performing Poorly (bottom band for both PRU and Children's Homes) 54.9% | Performing Well (65% - 79% categorised as outstanding or good) | Quarterly | Julie Westwood | → Amber | An update of the OFSTED Quarter 1 profile has now been received and a few areas are being challenged with OFSTED, this will be presented to a future Improvement Panel | Performance |
| | Improve CYP Performance Profile rating for Block B by: Ensuring majority of inspected scores are rated "good or better" for safeguarding LAC and SCRs | Fostering - Satisfactory SCRs 2/4 judged inadequate | Fostering - Good All future SCRs rated adequate or better | Quarterly | Julie Westwood | ↑ Green | The SCR previously evaluated as inadequate has been fully re-evaluated by OFSTED following the submission of the challenge and we were informed on the 17th June that this has now been rated adequate. The SCR evaluations are now 1 good and 3 adequate on the CAA OFSTED profile and the performance status should now improve to green. In 2010, GOYH has signed off 2 SCR Action Plans and evidence for an additional 1 was submitted to GOYH in May 2010. Of the remaining 2 Action Plans, no actions are at Red status. | Performance |

| | | | | | | | | |
|---|---|--|--|---------------|----------------|----------|---|-------------|
| | Improve CYP Performance Profile rating for Block C by improving NI performance | Not In line with or better than statistical neighbours and the national position | In line with or better than statistical neighbours and the national position | Quarterly | Julie Westwood | → Amber | Improvement plans are in place for NIs and where targets are not being met performance clinics are held to identify areas where further improvement can be made. OFSTEDs updated Quarter 1 profile has been received and will be submitted to a future Improvement Panel. | Performance |
| | Ensure quarterly reporting on the Children's Services Performance Profile on their release clearly outlining areas of risk and potential impact | Report on Quarter 2 profile prepared | 4 reports per year and improvement in each service block | Quarterly | Julie Westwood | ↑ Amber | An updated profile has been received and a few areas have been challenged this will be presented to the Improvement Panel in August. | Performance |
| | Implement all the recommendations arising from the Children's First review undertaken using the DCSF Improvement Framework | 67% when Improvement Notice Made | 100% of recommendations implemented | May 2010 | Julie Westwood | → Green | A report on progress and the overall completion of the actions with evidence will be submitted to the Improvement Panel on 13th July as part of the wider report on outstanding inspection recommendations and actions. | Performance |
| Ensure that the Panel, chaired by the Chief Executive, provides effective challenge, and drives swift and sustainable progress through overseeing a robust action plan | Appoint the Director of Children and Learners at GOYH as a member of the Improvement Panel | N/A | Director of Children and learners at GOYH to attend CYP Improvement Panel meetings | December 2009 | Joyce Thacker | complete | | Performance |

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| 5. Finance | | | | | | | | |
| Strengthen financial management arrangements to ensure they are fit for purpose and financial targets 09/10 are met | Tackle the existing overspend in Directorate (particularly Social Care) | £4.5m overspend | Corporate Variance on target 2% +/- | March 2010 | Joyce Thacker | complete | The final outturn figure was £3.99m overspent. | Finance |
| | Address the under funding issues in Social Care and School Effectiveness Service | In 2008/09 the gap was £8.3m. In 2008/09 had narrowed to £6.8m. | Close the gap against statistical neighbours average spend for CYP Services | March 2010 | Joyce Thacker | complete | | Finance |
| | Benchmarking exercise in relation to funding and performance | | establish how low spend is linked to high performance in other LAs | August 2010 | Julie Westwood / Joanne Robertson | ↑ Amber | Benchmarking to be carried out with Barnsley, Wakefield and Wigan, visits have now been arranged with Barnsley and Wakefield for later in the summer to clarify joint understanding, report to be presented to August Improvement Panel. | Finance |

Operational Targets

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|---|--|---|--|---------------|----------------|----------|---|-------------------------|
| | | Baseline | Targets | | | | | |
| 6. Recruitment and Retention | | | | | | | | |
| Increase the capacity of social carers to ensure effective services to safeguard vulnerable children | Reduce the vacancy rate of qualified social workers from the December 2009 baseline to meet the improvement notice target | 37.2% 16th December 2009 | 20% vacancy rate by October 2010 10% vacancy rate by March 2011 | June 2010 | Gani Martins | → Amber | Currently all social worker posts are covered either by permanent establishment posts or agency staff 21.6 posts | Social Care / Workforce |
| | Reduce the vacancy rate of team managers from the December 2009 baseline to meet the improvement notice target | 33% 16th December 2009 | 16% vacancy rate by October 2010 8% vacancy rate by March 2011 | June 2010 | Gani Martins | ↑ Amber | There are currently 26.7% Team Manager posts unfilled. There are 15 Team Manager posts in the establishment with 4 vacancies, however all of these are covered by agency staff. | Social Care / Workforce |
| | Recruit 30 new Foster Carers | 126 (January 2009) | 156 | March 2011 | Gani Martins | → Green | From April 2009 to March 2010 there have been 22 foster carers approved. There are currently 138 foster carers. Since April 2010 5 sets of carers have been approved and 3 have been de-registered. | Social Care / Workforce |
| | Reduce the over reliance on agency staff | 2009/10 spend = £1,843,627 (12 months) £1,811,768 relates to social care, £1,390,402 of which via the Duttons contract | Reduce by £440,000 in 2010/11 on agency staff | October 2010 | Gani Martins | ↓ Red | The recruitment campaign for permanent social workers and team managers continues however, there is still expenditure on agency staffing. Expenditure on agency social workers and team managers to date is £219,464 and agency admin £21,639. There are currently 25.6 fieldwork vacancies covered by agency workers (4 team managers and 21.6 social workers) | Workforce / Finance |
| | Increase the number of additional administrative staff within the Directorate to free up time of social workers and assess impact to inform future budgets | 7.9 FTE additional admin staff transferred into the Directorate to provide support and 7 admin agency staff. | Impact Assessment completed | December 2009 | Julie Westwood | complete | | Workforce / Finance |

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| 7. ICT | | | | | | | | |
| Improve information systems to enable social workers/managers to process and access assessments and plans and transfer of case information on vulnerable children in a timely, accurate manner. | Increase email 'in box' capacity for managers | Inspectors recommendation | Resolve Issues raised | November 2009 | Julie Westwood | complete | | Performance / ICT |
| | Revise and accelerate the implementation of the corporate agile working programme for social work staff | Social Work teams in a later phase of the council's agile working programme - Worksmart. | Prioritise Social Work teams in the Worksmart programme. 106 Laptops and VPN tokens to be issued | January 2009 | RBT | complete | | ICT |

CYPS Achievements

- 100% of care leavers are living in suitable accommodation.
 - CPP lasting over 2 years have reduced from the 2008/09 outturn of 4.8% to 1.3%.
 - 100% of CPP are reviewed within timescales. Child Protection Reviews are maintaining the top 100% performance.
 - LAC Reviews in timescales improved from 85.4% to 96.5%
-
- 97% of all Rotherham Schools (including PRUs) have achieved National Healthy Schools Status
 - Childhood obesity for both reception and Year 6 has improved by 2% and we are now in line with our statistical neighbours.
 - 86% of children and young people participate in 2 hours+ sport or PE (increase of 25% since 2006)
-
- 93% of schools are meeting Extended Services Core Offer.
 - Rotherham has been rated the best in the region for children getting their first choice of secondary school 97%.
 - Rotherham's Audit Commission Schools Survey 35% increase in response in 2009.
 - Since 2005/6 there has been a 34% reduction in the number of young people entering the criminal justice system.
-
- Ofsted have judged Hilltop School to be outstanding in all major areas including Safeguarding.
 - 68% of Rotherham's Under 5s are currently part of the Imagination Library Project, that's 10,439 children.
 - GCSEs 2009 - 13th most improved Authority
 - Foundation Stage 2009 15th most improved Authority.
 - Thornhill has been judged by Ofsted as outstanding with an outstanding capacity to improve.
 - Herringthorpe Junior School is one of the top 20 schools in the UK for the best use of technology. Runner up in the learning experience Primary Becta ICT Excellence Award
 - Rotherham Schools Music Service - Second outstanding Ofsted inspection report.
 - Rotherham are the first Authority in the country to have 2 childminders achieve the Quality Mark for Early Years by the Basic Skills Agency