RMBC Notice to Improve Action Plan

Performance Measures

Date of Update 27th January 2011

			Measures					
Ole i e e 4in e e	Mary Antinum	D "	Current	-	Land	DAG	Danfarra Commentaria	Lead
Objective Staying Safe - P	Key Actions	Baseline	Performance	Targets	Lead	RAG	Performance Commentary	Workstream(s)
Staying Sale - F	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) 2009/10 outturn 73.4%	84.44%	65% March 2010 68% October 2010 70% March 2011	Howard Woolfenden	↑ Green	From 1st April 2010 to 27 th January 2011 the figure is 84.44% which continues to increase and exceed the March 2011 target. Data checks continue to be undertaken to check accuracy in recording and are part of the QA process and in line with the Data Quality Strategy SN – 67.5% Nat – 64.3%	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) 2009/10 outturn 75.2%	81.88%	80% March 2010 85% October 2010 87% March 2011	Howard Woolfenden	↓Amber	81.88% of initial assessments completed between 1st April 2010 and 27th January 2011 were completed in time, this is lower than the figure reported in December (82.67%). Data checks continue to be undertaken to check accuracy in recording and are part of the QA process and the Data Quality Strategy. 86.2% of initial assessments were carried out in 10 working days or less SN – 69.2% Nat – 67.1%	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) 2009/10 outturn 80%	82.83%	80% March 2010 84% October 2010 87% March 2011	Howard Woolfenden	↓ Amber	Between 1st April 2010 and 27 th January, 2011 82.83% of Core Assessments have been completed in time, this has now fallen below the October 2010 target of 84%. Data checks continue to be undertaken to check accuracy in recording and are part of the QA process and in line with the Data Quality Strategy. The number required to meet the 84% target would be 13 SN – 77.6% Nat – 73.4%	Social Work

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Objective	Key Actions	Baseline	Targets	Target Date	Lead	RAG	Performance Commentary	Lead Workstream(s)
	– Social Worker Practice a		3				,	, ,
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	March 2011	Howard Woolfenden	→Amber	Quality Assurance continues, the Practice Improvement Managers tackled the issues through coaching and mentoring. A new framework has been introduced which also covers the quality of practice. Work is being undertaken to ensure that all audits conform to the new audit tool (IRO / Chairs of Conference) A report is on the agenda for the panel meeting on 9 th February.	Social Work
	Conduct a review on all NFA cases to quality assure the high level of 'no further action' decisions being taken	1.4.2009 to 31.12.2009 34.4% Total Contacts NFAd, 12.7% Referrals NFA'd 1.4.2010 to 31.12.10 30.7% contacts and 8% Referrals NFAd	10% reduction in overall contact and referrals which result in NFA by March 2011	March 2011	Howard Woolfenden	→Amber	Quality Assurance continues, the Practice Improvement Managers tackled the issues through coaching and mentoring. A new framework has been introduced which also covers the quality of practice. A report is on the agenda for the panel meeting on 9 th February	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	August 2010 for reprioritisation Sept 2010 for completion of Top 5 Commencement and Project Plan for those remaining March 2011	John Dunn, RBT / Rebecca Wragg	→Amber	Key processes have been revisited in line with service reconfiguration and are to be agreed by the Service. High level Child's journey has been approved, LAC review of process to commence end of January. Early Intervention and Prevention incorporated into appropriate processes and interfaces with services and pathways and are awaiting commencement. Now including CAMHS, Adults services and YOT. IRO work has commenced with Private Fostering being explored. The new SCP Director has arranged to meet with the team carrying out the BPR 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 No. of CAFs No. of CAFs preventing I.A. etc	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	611 CAFs were opened between Jan and Dec 2010. 487 CAFs have been registered between April 2010 and 24/1/11, an average of 51 CAFs per month. Clifton Learning Community area is currently completing the most CAFs (110 in 2010) with voluntary and community sector partners including Rush House and Women's Refuge undertaking half of the CAFs in this community. Increasing numbers of CAFs are for young people 16-18 years – this age range now accounts for 10% of all CAFs	Early Intervention

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							completed. The CAF team are meeting with the Director of SCP on 7 th February to discuss impact measures on referrals linked to the introduction of CAF. There has been a reduction from 12.7% to 8% of referrals NFA'd by localities during 9 months in 2010 compared with the same period in 2009. As part of the Y&H REIP project a significant reduction in conversation rates has been felt in other LAs	
Implement the recommendations from the recent Fostering Inspection	Develop an action plan and monitoring system to implement the 9 elements of the recommendations	Action Plan Developed	Action Plan developed and actions implemented	Completion of individual actions by June 2011	Howard Woolfenden	↑ Amber	7 recommendations are now complete, 2 are nearing completion. The completed actions have been audited to ensure evidence is robust and in place. The 2 outstanding actions are both in relation to ESCR for carers details and the changes required are with the system supplier with a view to go live in June 2011.	Social work
Implement the recommendations from the recent Safeguarding and LAC inspection	Develop an action plan and monitoring system to implement the 10 recommendations	Action Plan Developed	Action Plan developed and actions implemented	Completion of 3 immediate actions by mid Sept 2010. Completion of remaining 7 actions by 28th February 2011	Howard Woolfenden	↑ Amber	8 recommendations are now complete, 2 are nearing completion. The completed actions have been audited to ensure evidence is robust and in place. The 2 outstanding actions are in relation to the quality of social care supervision and developing an independent visiting service.	Social work

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Objective 1. Staying Safe –	Key Actions Social Worker Practice ar	Baseline	Targets	Target Date	Lead	RAG	Performance Commentary	Workstream(s)
Monitor	Ensure that all children's		No inadequate	October 2010	Howard	complete		Social Work
improvement in	homes are compliant	1 - Ot Lamanas	children's	October 2010	Woolfenden	Complete		Oociai vvoik
children's social	with regulatory		homes		VVOOIICHACH			
care, by establishing	requirements		Tiomes					
a rigorous	requirements							
performance	Review compliance in							
management system	relation to revised							
which delivers	inspection criteria							
regular monitoring,	(currently out for							
scrutiny and quality	consultation). Conduct							
assurance of social	routine audits of							
care performance	compliance and report							
	key themes arising.							
	Conduct robust quality	Quality	Number and %	March 2011	Howard	→ Amber	A report is on the agenda for the panel	Social Work
	assurance checks on	assurance and	of adequate		Woolfenden		meeting on 9 th February which details	
	information systems to	audits require	data quality				progress on QA checks.	
	ensure that contacts,	improved	checks					
	referrals and the status	performance	conducted -					
	of investigations,	framework	100%					
	assessments and plans							
	are up to date							
	Maintain the momentum	Children's	6 Good or	December 2011	Howard	Amber	The 3 National Indicators are monitored and	
	of improvement in	Homes: 2 Good	Better		Woolfenden		reported routinely including the quality of	
	Social Care Services for	4 Satisfactory					practice. Work continues to improve the	
	children and young						quality of children's homes. The Regulation	
	people, including the	As at 14/1/11					33 process is being reviewed to ensure	
	quality of children's						independence.	
	homes is a							
	recommendation in the							
	CSA letter.							

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Objective	Key Actions	Baseline	Targets	Target Date	Lead	RAG	Performance Commentary	Lead Workstream(s)
	ieving – Practice and Proce		i ai goto	1 411 900 2 4100		1 1 1 1 1	,	1101110110111(0)
Improve Performance across primary schools with a particular focus on addressing the performance of schools below the floor targets	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. *Improve the outcomes for children at the end of primary school is a recommendation in the CSA letter.	13 Primary schools below floor targets 10 Primary schools below floor targets (2010)	13 down to 8 during 2010 and then down to 0 in 2011	March 2010 October 2010 August 2011	David Light	→ Amber	KS2 SAT results in 2010, despite the distortions introduced by the differential impact of the boycott across LAs, confirmed the systemic underperformance across Rotherham Primary schools and the level of challenge the LA faces in raising standards at 11+. Those challenges are compounded by the financial reductions affecting the LA which are producing an abrupt and severe reduction in the central SES workforce and by the shifts in the national policy direction which require the LA to redefine its core remit and relationships with schools. The World Class Primary Schools' Programme, for example, which provided the framework for interventions in Rotherham and elsewhere, is no longer government policy. SES is, therefore, continuing to work intensively with the most vulnerable schools, albeit with a much reduced team, while seeking to establish a 'school improvement' settlement which is increasingly led, staffed and resourced by schools themselves. This is a considerable challenge and the transition period is particularly difficult to negotiate when results must rise in 2011. That urgency underpins SES staffing deployment and practice and was worked through with Primary Headteachers again as recently as 13 January in their Phase meeting.	Enjoying and Achieving

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Objective	Key Actions	Baseline	Targets	Target Date	Lead	RAG	Performance Commentary	Lead Workstream(s)
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3. Leadership and M	lanagement/Capacity Buildi							
Develop a	Identify practice issues	Further	Month on	March 2011	Howard	↑Green	Robust programme of learning and	Social work
comprehensive	related to quality and	embedding	month		Woolfenden /		development being rolled out to all	
programme of training,	consistency from Quality	required	improvement		Warren Carratt		qualified social work staff in CYPS.	
mentoring and	Assurance audit reports by		on QA Audits				4 x FTE Social Work Practice Consultant	
continuous	Locality and Teams.		with less				posts currently being advertised to carry	
professional			issues				QA role in fieldwork teams.	
development for all			reported				Both NQSW and generic induction	
social care staff so that							programmes rolled out on a monthly and	
they have the skills to							quarterly basis respectively, with a focus	

		Mea	sures	-				
Objective	Key Actions	Baseline	Targets	Target Date	Lead	RAG	Performance Commentary	Lead Workstream(s)
	Management/Capacity Buildi		rargets	raiget Date	Load	IVAG	1 crioimanee commentary	Workstream(s)
complete high quality and timely assessments	Januagements Supacity Bullar	у очероге					on service standards. Team Managers receiving monthly action learning sets since October 2010 with focus on quality issues	
	Incorporate into L&D activity identifying most appropriate to resolve issues encountered	Initial learning programme rolled out	Review quarterly in line with QA Audits to ensure continual improvement	March 2011	Deb Johnson and Warren Carratt	↑Green	Handover of work from Practice Improvement Partners to Social Work Practice Consultants has taken place. PQ programme has been rolled out to the entire social work workforce. Manager Action Learning Sets being used to inform emergent learning and development programme both single and multi-agency via the LSCB	Social work
	Evaluate effectiveness of L&D interventions by Locality and Teams in relation to improved practice.	Initial learning programme rolled out	Review quarterly in line with QA Audits to ensure continual improvement	March 2011	Deb Johnson and Warren Carratt	↑Green	38 Social Workers already completed SW Health Check. University of Sheffield due to report findings at end of January. Regular manager Action Learning Sets used to measure improvement and requirements for future learning and development.	Social work
	Track improvement of Locality and Teams in relation to quality issues identified.	Further embedding required	Month on month improvement on QA Audits with less issues reported	March 2011	Deb Johnson and Warren Carratt	→ Amber	A further detailed audit reporting identified issues is on the agenda for the Improvement Panel on 9 th February	Social work
	Ensure that accountabilities for each individual are being reinforced through consistently applied PDR's to ensure staff have a satisfactory Performance Plan. Consider action post inspection report	81%	90%	March 2011	Julie Westwood/ Warren Carratt	↑Green	PDR training has been rolled out to managers across CYPS. Importance of supervision and performance management covered in manager ALS. Progression Framework for NQSWs has been updated to ensure assessment is completion of the NQSW portfolio, which has robust competencies included throughout (content developed nationally by the CWC) PDRs due in April – May 2011: guidance will be circulated in March to ensure all	Workforce / Performance
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	Improve outcomes of CYPS Satisfaction Surveys	Employee Opinion Survey Family Placement Survey Audit Commission in Schools Survey Social Worker Survey	LAC reviews Social Worker Survey December 2010	March 2010 Oct 2010 and March 2011	Julie Westwood/ Warren Carratt	→Amber	The full staff survey planned for December has been deferred, a social work specific survey is planned for November and will be concluded in December. At the end of December 2010 93% of LAC participate in reviews. In relation to customer satisfaction we have engaged victims of youth crime, satisfaction is consistently high (90-100%) in relation to how they are treat by staff and listened to as part of the remediation work. Young people are engaged with in relation to voice and	

		Meas	ures					_
Objective	Key Actions	Baseline	Targets	Target Date	Lead	RAG	Performance Commentary	Lead Workstream(s)
Leadership and Ma	anagement/Capacity Build	ling/Support						
							influence and the impact this has on services and in addition the youth service evaluates satisfaction about our early intervention services. Complaints are a key part of the customer experience ad work will be carried out as part of DLT to measure impact. The new starter survey carried out for April to September 2010 showed that 61.6% of staff feel a strong sense of belonging, 77% feel comfortable suggesting new ways of working. 77% still intend to be working in Rotherham in the next 12 months which have all increased since the same period last year.	

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4. Performance Mar	•		<u> </u>	•			,	, , , , , , , , , , , , , , , , , , , ,
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	Sue Wilson	↑ 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. Visits have taken place to validate the implementation of recommendations and the state of readiness in terms of achieving a positive outcome in the next inspection. Action plans are in place from the services to shift proportion of services to good or better. The CSA letter was received and rated as adequate, the overall profile as moved from red to amber. 93% of all inspection recommendations monitored are complete.	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	Sue Wilson	↑ Amber	All inspection recommendations (with the exception of schools and which have an established monitoring system) are entered into the reconfigured CYP inspections monitoring system. Reports from these are generated monthly and reviewed by DLT 93% of all inspection recommendations monitored are complete.	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	Sue Wilson	↑ Amber	Using local information shows that 61.8% of inspected settings were good or better. The new super groups have an impact also, we have 2 of these in the top bands, Nursery and Primary Schools and Special Schools and PRUs. The CSA letter was received and rated as adequate.	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	Sue Wilson	→ Green	The LSCB signed off the two outstanding SCR action plans in December 2010. A further Serious Case Review commissioned by the LSCB in November 2010 is making satisfactory progress. The Serious Case Review sub group has also developed a root cause analysis methodology to consider learning from serious cases that do not meet SCR criteria and this has been utilised effectively to identify lessons learned	Performance

		Meas	sures					
Objective	Key Actions	Baseline	Targets	Target Date	Lead	RAG	Performance Commentary	Lead Workstream(s)
Performance	Management					_		
							from a recent case. The outcome of this review is to be reported back at the February SCR Sub Group.	
	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	Sue Wilson	→ 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.	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	Sue Wilson	→ Amber	The latest Ofsted profile has been received and is currently being analysed.	Performance

		Mea	sures					
Objective	Key Actions	Baseline	Targets	Target Date	Lead	RAG	Performance Commentary	Lead Workstream(s)
5. Recruitment and		Dascille	Targets	raiget bate	Loud	INAC	1 chomance commentary	Workstream(s)
Increase the capacity of social workers to ensure effective services to safeguard vulnerable children		37.2% 16th December 2009	20% vacancy rate by October 2010 10% vacancy rate by March 2011	March 2011	Howard Woolfenden	→ Amber	Of the permanent establishment posts we have 13.8 posts vacant (15.4 %) with 11.3 of these covered by agency staff, leaving 4 social worker posts unfilled (2.8%). A further permanent recruitment trawl is in process.	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	March 2011	Howard Woolfenden	→ Amber	There are 15 Team Manager posts in the establishment with 3 vacancies (20%), however all of these are covered by agency staff.	Social Care / Workforce
	Recruit 30 new Foster Carers	126 (January 2009)	156	March 2011	Howard Woolfenden	→ Amber	There are currently 139 foster carers, with 15 being recruited since April 2010 and 8 have resigned. Currently there are 17 being assessed. Our 2010 Fostering Recruitment campaign has generated 74 enquiries since September.	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	March 2011	Howard Woolfenden	→ Amber	The recruitment campaign for permanent social workers and team managers continues however, there is still major expenditure on agency staffing. Expenditure on agency social workers and team managers to date is £998,979 and agency admin £33,837. It is anticipated that the savings target of £440,000 will not be met.	Workforce / Finance
6. Annual Children's	Services Assessment – Ke	l .	elopment					
To ensure that the 4 key elements included in the Annual Children's Services Letter are Actioned	Improve secondary schools so that more are good or better.	3 outstanding 4 good (44% good or better) (current published)	50% good or better	December 2011	Dorothy Smith		Based on those published on the OFSTED website: The profile is currently 3 outstanding, 4 good and 9 satisfactory. 2 schools have received notification that they won't be inspected before Sept 2011 (St Bernards and Wath). There is a distinct possibility that no changes can be made to the profile this year, other than Aston once published, taking the profile upto 50%.	
7. DfE – Milestone A	Increase the number of good childminders	52.7% of childminders are good or better	TBA further work taking place in EY to establish realistic target	December 2011	Dorothy Smith		Currently the profile of Childminders is: 14 outstanding, 114 good, 114 satisfactory, 1 inadequate (not currently active childminder)	
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Objective	Key Actions	Baseline	Targets	Target Date	Lead	RAG	Performance Commentary	Lead Workstream(s)
To ensure that progress continues in key areas following discussions with the DfE in December	Supervision continues to be embedded across the Service	Supervision is still inconsistent across the service	Supervision to be routinely carried out across all areas of the service	April 2011	Howard Woolfenden	Amber	Progress has been made and was demonstrated in the Safeguarding and Looked After Children inspection in July. We will continue to audit supervision records and to ensure that this activity is embedded and that this is standard practice across the whole of the Service.	
	An independent peer review process is developed	Work carried out by Practice Improvement Partners	Yearly external peer review	March 2011	Joyce Thacker	Amber	Calderdale have agreed to work with us on a Peer Review/ challenge process to ensure that we have an external view to the effectiveness or otherwise of practice in Rotherham.	

CYPS Achievements – (CYPP 4 Big Things)

Tackling Inequality

- 96% of children in Rotherham get their first choice of secondary school (2010)
- The Quarter 3 figure for NEETS is 6.6% and is now above the target of 7.1% (Dec 2010).
- 2010 Year 11 school leavers 94.4% of these are in learning and only 3.8% are not in education, employment or training (NEET) (Nov 10)

Keeping Children and Young People Safe

- 100% of CPP are reviewed within timescales. Children Protection Reviews are maintaining the top 100% performance (2009/10).
- 95% of care leavers are in suitable accommodation higher than the target of 92% and above national and statistical neighbours (Dec 2010)

Prevention and Early Intervention

- 97% of all Rotherham Schools (including PRUs) have achieved National Healthy Schools Status (2009/10)
- Childhood obesity for both reception and Year 6 has improved by 2% and we are now in line with our statistical neighbours. (09/10)
- 86% of children and young people participate in 2 hours+ sport or PE (increase of 25% since 2006) (2009/10)
- Rotherham are the first Authority in the country to have 2 childminders achieve the Quality Mark for Early Years by the Basic Skills Agency (2010)
- Since 2005/6 there has been a 34% reduction in the number of young people entering the criminal justice system. (2009/10)
- 80% of Rotherham's Under 5s are currently part of the Imagination Library Project, that's 12,358 children. 16,378 children have registered since the scheme began and 3,803 have graduated from the programme (Jan 2011)
- 83% of care leavers are in employment, education or training exceeding the target of 67% (Dec 2010)
- Primary School Lunch take up 49.8% in Q3 up from 44.6%
- The number of under 18 conceptions continues to fall. In comparison with our statistical neighbours we rank the 3rd best performance out of 11 as at September 2009 (Nov 10)

Transforming Rotherham Learning

- 97.5% of schools are meeting Extended Services Core Offer. (09/10)
- Ofsted have judged Hilltop School to be outstanding in all major areas including Safeguarding (2010)
- Thornhill has been judged by Ofsted as outstanding with an outstanding capacity to improve. (2010)
- 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 (2009)
- Rotherham Schools Music Service Second outstanding Ofsted inspection report. (2009)

- Achievement at Foundation Stage has improved from 50.4% in 2009 to 56.6% in 2010 (including PSE and CLL) (2010)
- A Level achievement in 2010 has shown a 1.1% increase from 2009 (provisional data) (2010)
- GCSE results 5 A* to C has increased by 6.43% since 2009, 3.41% including English and Maths (2010)
- GCSE results for Looked After Children 5 A* to C including English and Maths 26.9% (11.6% national) and 42.3% (26.1% national) not including English and Maths (provisional data) (2010)
- 100% of SEN statements are issued in 26 weeks (Dec 2010)