

# Children's Services Committee

<b>Report title:</b>	<b>Performance Monitoring 2017-18</b>
<b>Date of meeting:</b>	<b>13 March 2018</b>
<b>Responsible Chief Officer:</b>	<b>Sara Tough Executive Director Children's Services</b>
<b>Strategic impact</b>  Robust performance and risk management is key to ensuring that the organisation works both efficiently and effectively to develop and deliver services that represent good value for money and which meet identified need.	

## **Executive summary**

Performance is reported on an exception basis, meaning that only those vital signs that are performing poorly or where performance is deteriorating are presented to committee. Those that do not meet the exception criteria will be available on the Performance section of the Norfolk County Council web site. The two measures which are currently rated as Red (Child in Need with an up to date plan and LAC Health Assessments) were reported via scorecards to the last Committee.

This report focusses primarily on data as at end of January 2018 and in addition to vital signs performance, this report and its appendices contain other key performance information via the (MI) Report (Appendix 1).

Locality-level performance information is available on the Members Insight area of the intranet.

## **Recommendation:**

**Review and comment on the performance data, information and analysis presented in the vital sign report cards and determine whether the recommended actions identified are appropriate or whether another course of action is required.**

# 1. Introduction

## 1.1 Performance dashboard

1.1.1 The performance dashboard provides a quick overview of Red/Amber/Green rated performance for our vital signs over a rolling 12 month period. This then complements that exception reporting process and enables committee members to check that key performance issues are not being missed.



## Children's Services Committee - Vital Signs Dashboard

NOTES:

Green is in line with high performing authorities; Amber within 10% (not percentage points) of high performing authorities; Red being more than 10% worse than high performing authorities.  
 'White' spaces denote that data will become available; 'grey' spaces denote that no data is currently expected, typically because the indicator is being finalised.  
 The target value is that which relates to the latest measure period result in order to allow comparison against the RAG colours. A target may also exist for the current and/or future periods.

Monthly	Bigger or Smaller is better	Jan 17	Feb 17	Mar 17	Apr 17	May 17	Jun 17	Jul 17	Aug 17	Sep 17	Oct 17	Nov 17	Dec 17	Jan 18	Target
{ChS} Percentage of Referrals into Early Help Services who have had a referral to EH in the previous 12 months	Smaller	11.3%	10.1%	13.7%	14.7%	18.4%	16.8%	21.7%	11.3%	11.2%	6.8%	9.4%	10.2%	6.5%	20.0%
		/	/	/	24 / 163	36 / 196	31 / 184	31 / 143	14 / 124	12 / 107	9 / 133	15 / 160	13 / 127	11 / 168	
{ChS} Percentage of Referrals into Section 17 CIN Services who have had a referral to S.17 CIN in the previous 12 months	Smaller	25.6%	25.5%	25.1%	25.0%	24.9%	22.8%	24.0%	24.2%	23.7%	23.7%	23.5%	23.8%	23.9%	<20%
		2068 / 8072	2068 / 8098	2075 / 8257	2024 / 8110	1973 / 7920	1963 / 8039	1976 / 8110	2071 / 8575	2101 / 8881	2156 / 9109	2189 / 9320	2252 / 9482	2233 / 9341	
{ChS} Percentage of Children Starting a Child Protection Plan who have previously been subject to a Child Protection Plan (in the last 2 years)	Smaller	4.2%	9.8%	7.6%	5.5%	5.7%	16.2%	8.4%	9.8%	8.6%	8.4%	8.3%	8.1%	8.1%	<15%
		/	91 / 871	96 / 906	96 / 906	87 / 912	88 / 896	87 / 893	83 / 848	70 / 810	69 / 821	67 / 809	66 / 814	70 / 859	
{ChS} Child in Need (CIN) with up to date CIN Plan	Bigger	85.7%	86.7%	81.9%	78.3%	82.1%	79.9%	84.0%	80.0%	75.1%	71.5%	64.7%	62.4%	58.9%	100%
		1084 / 1265	1052 / 1213	997 / 1218	950 / 1213	958 / 1167	1057 / 1323	1052 / 1253	890 / 1112	1022 / 1361	999 / 1397	973 / 1505	979 / 1570	909 / 1544	
{ChS} Child Protection (CP) - % children seen	Bigger	89.1%	84.5%	93.3%	90.5%	90.0%	83.6%	70.4%	74.8%	88.8%	90.6%	80.9%	84.7%	82.7%	100%
		423 / 475	392 / 464	458 / 491	466 / 515	441 / 490	427 / 511	368 / 523	448 / 599	443 / 499	454 / 501	411 / 508	427 / 504	440 / 532	
{ChS} LAC with up to date Care Plan	Bigger	98.6%	98.0%	97.3%	97.1%	96.5%	96.6%	96.7%	96.1%	96.8%	97.0%	95.3%	95.6%	94.3%	100%
		1097 / 1113	1083 / 1105	1075 / 1105	1058 / 1090	1051 / 1089	1060 / 1097	1061 / 1097	1065 / 1108	1076 / 1111	1082 / 1115	1078 / 1131	1076 / 1125	1085 / 1151	
{ChS} LAC with up to date Health Assessment (HA)	Bigger	87.8%	89.4%	86.5%	85.4%	80.3%	78.3%	79.4%	79.9%	79.6%	79.1%	78.0%	76.2%	75.1%	100%
		652 / 743	666 / 745	641 / 741	622 / 728	590 / 735	579 / 739	602 / 758	614 / 768	611 / 768	613 / 775	610 / 782	604 / 793	604 / 804	
{ChS} Eligible Care Leavers with up to date Pathway Plan	Bigger	89.9%	84.4%	82.6%	84.1%	85.9%	83.7%	84.5%	83.6%	84.8%	84.9%	83.5%	82.3%	83.1%	
		176 / 207	179 / 212	181 / 219	180 / 214	177 / 206	175 / 209	175 / 207	181 / 215	179 / 211	180 / 212	177 / 212	181 / 220	187 / 225	

Quarterly / Termly		Bigger or Smaller is better	Dec 14	Mar 15	Jun 15	Sep 15	Dec 15	Mar 16	Jun 16	Sep 16	Dec 16	Mar 17	Jun 17	Sep 17	Dec 17	Target
{ChS} Percentage of Children Starting to be looked-after who have previously been looked-after		Smaller							17.6%	10.0%	9.0%	8.3%	7.0%	8.0%	5.3%	<15%
			/	/	/	/	/	/	/	/	/	/	/	/	/	
{ChS} LAC with up to date Personal Education Plan (PEP)		Bigger	84.6%	86.5%	76.7%	63.5%		73.5%	88.1%	76.0%	83.2%	84.2%	89.2%	89.4%	88.5%	100%
			/	/	/	/	/	527 / 717	597 / 678	541 / 712	570 / 685	591 / 702	610 / 684	599 / 670	577 / 652	

## **1.2 Report cards**

- 1.2.1 A report card has been produced for each vital sign. It provides a succinct overview of performance and outlines what actions are being taken to maintain or improve performance. The report card follows a standard format that is common to all committees.
- 1.2.2 Each vital sign has a lead officer, who is directly accountable for performance, and a data owner, who is responsible for collating and analysing the data on a monthly basis. The names and positions of these people are clearly specified on the report cards.
- 1.2.3 Vital signs are reported to committee on an exceptions basis. The exception reporting criteria are as follows:
- Performance is off-target (Red RAG rating or variance of 5% or more)
  - Performance has deteriorated for three consecutive months/quarters/years
  - Performance is adversely affecting the council's ability to achieve its budget
  - Performance is adversely affecting one of the council's corporate risks.
- 1.2.4 Vital Signs performance is reported on an exception basis using a report card format, meaning that only those vital signs that are performing poorly or where performance is deteriorating are presented to committee. To enable Members to have oversight of performance across all vital signs, all report cards will be made available to view through Members Insight. To give further transparency to information on performance, for future meetings it is intended to make these available in the public domain through the Council's website.

## **2. Education**

- 2.1 The Education performance reporting for this committee focuses on post 16 outcomes. As there is a more in depth paper on Post 16 this performance analysis is within the Post 16 paper.

## **3. Early Help**

- 3.1 EH MI data for December 2017 and January 2018
- 3.2 From a county wide perspective the data indicates that Family Focus teams are providing a more consistent service to children, young people, families and partners, as there are fewer peaks and troughs in the data set.
- 3.3 The caseload increased slightly in January, to 654 cases, supporting 1502 children and young people. These caseloads are being managed well across the localities. The complexity of family issues and volume of work in Kings Lynn and West Norfolk and Great Yarmouth localities is impacting on the timely allocation of work; we have responded by realigning resource from other teams which have less demand and will monitor the data closely.
- 3.4 The low rate of re-referrals continues, which means that families experience less 'bouncing' between services, and get the right support at the right time to meet their needs, and enable them to move back to the universal pathway.
- 3.5 The number of new Family Focus cases that are step downs from social care remains high, and is approaching 1/3 of cases across the county. In some localities, most notably North and Breckland we have seen a steep increase in step downs coming to the early help teams, which indicates improving relationships between the interface between early help and children's social care teams. The step downs in Norwich were low in January, but this is due

in part to the work undertaken in November and December to ensure families were being supported at the right threshold level.

- 3.6 The South team has seen an increase in cases as a result of the boundary change between the City and South localities. The Head of Services and Partnerships in the South is aware of this increase, and will be monitoring closely over the next few months.
- 3.7 We need a more robust understanding of where the requests for Family Focus support are coming from across the 6 localities, and this data will be provided by teams with the February data set and the MASH, and will provide valuable insights about how Early Help partners understand the service across the County and inform priority areas of work.
- 3.8 The early help service has been looking at workforce development for its staff on a number of levels including the introduction and establishment of a competency framework for all job roles. Current priority areas include providing a more comprehensive induction and support programme for new early help family focus staff, development of the new child and family practitioner apprenticeship and producing and delivering a series of practice workshops on assessment, planning, interventions and learning from service user feedback.
- 3.9 The induction for new staff pack has been refreshed, the practice workshops are being delivered from this week (w/c 19/2/2018) to all EHFF teams and looking at how the new apprenticeships can be introduced to the early help service is being explored over the next three months. It is recognised that as targeted whole family support work is now within level 3 of the Norfolk threshold guide, the skills, knowledge and ability to safely manage risk by practitioners and managers will need to be further developed. Further exploration of internally and externally sourced support for teams is now be actively pursued so the service can continue to provide a good level of service to all the families we are involved with ensuring their needs are met.
- 3.10 Development of key performance indicators for Early Help Family Focus and the Early Help system are being finalised in line with liquid logic timescales, service planning and a refresh of the Norfolk Early Help Partnership Strategy.

## **4. Social Work (MI Report at Appendix 1)**

### **4.1 Contact and Referrals**

- 4.1.1 Contacts increased in January but this was not unexpected as numbers dropped in December in line with the Christmas period. The percentage of those contacts being accepted as referrals fell below 20%, the first month this has happened since July 17. It is noted that the police contacts in particular had a low conversion rate to referral (12%) which will have impacted on the overall figure. The appropriateness and timeliness of contacts from the Police continues to be a key line of enquiry.
- 4.1.2 All source types saw a drop in the percentage of contacts which progressed to referral, the most significant of which were Police (at 12% the lowest in the 12 month period) and Education Services (at 29%, the lowest this academic year). The concerns regarding police contacts, their timeliness, appropriateness and low conversion rate is an ongoing focus of data analysis and discussion between MASH partner agencies. What is positive is that the Early Help team in MASH is having an increasing impact taking cases from the Social Care MASH function to process and where appropriate refer to NEHFF locality teams or to Locality EH Process Managers who can support agencies in running their own FSPs. It is envisaged that as agencies become more confident in their judgement about safeguarding and the EH services available they will refer less cases which do not met social care threshold.

4.1.3 Referrals to our social care teams have dropped to the lowest level since April 17 which will hopefully reduce some of the pressures, especially on the Assessment teams. However, the re-referral rate across the county is a concern, particularly in Breckland & Norwich. Breckland has risen from 17.4% in December to 35% in January. The Heads of Social Work have been asked to investigate this on a case level basis, including considering the hypothesis that this rise is a result of decision making during the period of increased referral rates in Sept-Nov 17 and thus the re-referred cases include those where the Assessment Team had previously made a decision to not do an assessment. The Norwich referral rate has been over 30% since October 17 and does raise concern about decision making and functioning within the Assessment teams in the locality. The new HoSW in Norwich will look at the cases that were re-referred, interrogate why the numbers are so high and plan what action needs to be taken. Whilst not as high, North, West and Yarmouth all have re-referral rates over 25% and for West and for North this is a continuation of a number of months of increase, the reasons for which need to be considered by the HoSW and managers. Although South's re-referral rate has risen to 17%, this is still significantly lower than all other areas and we know the rise is due to recent boundary changes whereby cases that would previously have been re-referred to Norwich are now sitting in South.

## **4.2 Assessments**

4.2.1 The percentage of assessments authorised within 45 working days continues to be too low at 66.2% and is significantly lower than the Eastern Region average of 84%. The fact that there were already 190 assessments open over 45 days at the end of the month indicates we will not see an improvement in February's data. Whilst still low, Breckland and North improved their performance from last month, and Yarmouth have sustained performance at circa 68%. West continue to perform well with 80.8% authorised in timescales and at 75% South had their best performance in the past 12 months. Norwich is the most concerning locality with only 50% of assessments authorised in 45 working days and 49 assessments open over 45 days at the end of the month. The new HoSW in Norwich is looking into the reasons for this and we will report to next committee on the results.

4.2.2 It is positive that more assessments were completed with an outcome of ongoing involvement in January compared to December, although the rate is still not as high as that seen in the summer months. Step down to FSP/TS from assessment has also increased meaning that assessments closing with information and advice, whilst still high, is the lowest percentage since August 17. However, the Eastern Region average for assessments closing with no further action to social care in Q3 was 32.2% compared to Norfolk's figure of 65.3%. This indicates there are still issues regarding thresholds to be considered across the system. Performance across the county varies. North & West saw less outcomes of ongoing involvement but West continues to have higher percentages than most localities (41.8%) whilst North had more step down to FSP/TS so actually saw a reduction of assessments that closed with info & advice. Breckland have also increased the percentage of assessments with ongoing involvement to 41% from 29%. Norwich increased from a very low 14% in Dec to 36.3% assessments in January resulting in ongoing involvement, however over 50% of their assessments still had outcomes of closed with info and advice. We have been examining assessments which result in NFA through our work with the MASH and can see that decision to go to assessments are made too quickly sometimes due to the pressure of work within the MASH. Our work in this area, which will be starting imminently, will begin to show real improvements by July 2018.

## **4.3 Child Protection (CP)**

4.3.1 The new section 47 investigation forms are now embedded in practice and have been used to collate January's data. There were less section 47 investigations but more ICPCs seen in January compared to the previous 3 months which could indicate that this clearer process of recording section 47 investigations, alongside strategy discussions being held within localities

rather than MASH has led to better assessment of risk. However, given this is very early days of the system, this hypothesis will need to be tested over the coming months. There has also been some concern that strategy discussions have not been held when recommended at the point of referral. Some data analysis and dip sampling of cases will be undertaken to explore this further.

4.3.2 The number of children subject to CP plans rose significantly between December and January and for the first time in the past 12 months is over 600. This reflected a significant rise in Norwich which is being investigated by the Head of Social Work.

4.3.3 The rise in the number of ICPCs is in the main attributable to the 53 held in Norwich, the highest number in the past 12 months (previous high in Norwich being 36 in March 17). However all localities except North saw some rise in ICPCs. Whilst the data shows that 29.3% of ICPCS were not held in timescales, we know that historically this figure can be affected by the relevant forms not being duplicated on all children's records when there is a sibling group. More routine data checking and cleansing will commence to ensure that figures reported are more likely to reflect ICPCs that didn't happen in timescales as opposed to recording errors.

4.3.4 82.7% of children on CP plans were seen in 20 working days. This is a decrease on the previous high point (March 17) which was 93%. However South (89%) and Yarmouth (92.7%) have performed well. In the other localities HoSW and Team Managers are currently ascertaining whether this is down to recording not being completed in a timely manner rather than children not being seen.

#### **4.4 Looked After Children**

4.4.1 The number of children in our care has again increased with 50 more children starting to be looked after in January (a total of 147 in the past 3 months). Whilst the LAC rate per 10k under 18s is significantly higher than the Eastern Region average of 49.8 it is only marginally higher than the 2017 national average of 62.0. Notwithstanding this we continue to explore the reason for our increasing LAC numbers, acknowledging that for the most part when children do come into our care it is the right decision. Therefore focus needs to be on how we support families earlier to prevent children becoming accommodated and how we secure permanence options outside of the care system when that is the right decision for children, regardless of their age. Work to do this includes locality manager audits of recent LAC starts, a review of the commissioned Edge of Care Service and planned quarterly analysis of LAC and CP data/cases, alongside work streams within the Transformation Project and the reintroduction of the weekly LAC tracker.

4.4.2 Whilst LAC with an up to date care plan remains high at 94.3% county-wide, this has fallen from 98.6% seen in January 2017. This could in part be due to the move of Court Work cases from FIT to LAC teams which will have impacted on practitioners' time, especially given for many Court Work is a new experience that they needed training and extra guidance on. We see that in Norwich, which traditionally has a high proportion of court work, performance regarding up to date Care Plans has fallen since September and for the first time is below 90% (89.7%). With regards to Care Leavers with a pathway plan, no improvement has been made from the low of 85% last month. This is mainly due to a drop in performance in South locality to 68.6%. It is not immediately clear why performance has fallen and therefore the HoSW has been asked to investigate this and detail a plan to address the situation. More positively North, which had been challenged due to significant staffing issues in the Leaving Care team, saw their figures rise from 69.3% in December to 83.8%. Despite staff numbers still being low, a new interim manager and Senior SW in the team appear to have had a positive impact.

- 4.4.3 Unfortunately we have not been able to sustain the decrease in residential placements seen between May and October 2017, and in fact have more children in residential now than we did at the same time last year. This is linked to the increasing number of children who have come into our care in the past 3 months and continuing concerns about the sufficiency of in-house foster carers. Work is being undertaken to address this through the Transformation Programme and will include increased recruitment capacity, a new approach to marketing as well as the use of foster care recruitment champions.
- 4.4.4 The performance and recording of LAC reviews continues to improve. Unfortunately LAC seen in timescales figures are over 10% lower than they were this time last year. Performance in all localities is a concern except for Yarmouth which saw 94.3% of children in timescales. As with LAC plans in timescales, it is likely that the impact of having to take on Court Work has impacted on teams' ability to meet timescales either because of staff leaving due to not wanting to take on legal proceedings, or the impact of the time it takes to learn new skills. For some teams staffing issues have had a particular impact on the capacity to see children in a timely way. This was seen in the North where the Cromer LAC team for some time only had two social workers and a team manager. The issues of attracting permanent and agency social work staff to Cromer has been raised with CSLT. All HoSW and managers need to identify which children have been seen but visits not recorded and those children whose visit is overdue in order to plan and prioritise with workers.
- 4.4.5 Q3 data shows us that Norfolk has 55.4% of IHAs completed in 20 working days of a child becoming looked after, which is 13% above the regional average.. There had been recent concerns that achieving even better performance in this area was being hampered by social work teams not submitting the request in the required 5 working days timescale. Recent communications have therefore been sent to all frontline workers reminding them of processes and expectations and already we have seen some improvement. By ensuring we are following our own procedures regarding timeliness we will be able to get a better sense of where the difficulties may be within health capacity to provide health assessments in timescales. To this end the QA Hub now regularly log and analyse data regarding the reasons for any delay and share this, along with intelligence gained about capacity through regular liaison with health colleagues, with CSLT. For example, we know that some recent delays for one health provider have been caused by a lack of business continuity in the processing of requests when the regular member of staff was on leave. This is also a recommendation from our recent inspection and one that will ensure interest and external scrutiny.

## **4.5 Care Leavers**

- 4.5.1 Our EET figures have fallen slightly, although are still higher than at the start of 2017. North and Norwich have both seen decreases over past 3 months which are likely linked to staffing issues whereby remaining staff may not have had the capacity to actively engage young people who are NEET in exploring different options. Figures have also fallen in West (to 47%), the reasons for which are not yet clearly understood and need to be explored by the HoSW and team manager. Yarmouth have also had a small dip but at 75% this is still the highest percentage of Care Leavers who are EET in the county.

## **4.6 Adoption**

- 4.6.1 Our adoption figures remain good and we are proud of the service which was judged Outstanding by the recent Ofsted inspection (Nov 17). Q3 data shows us that 18.3% of children leaving care were adopted, this is much higher than the 2017 national average of 14.8% and Eastern Region Q3 average of 13%. The slight increase in average days between a child becoming LAC and having an adoption placement can be seen as a positive as it will indicate that children with more complex needs who have been waiting a long time in care have now been placed with adopters. The service continues to strive for good practice and actions to achieve this were this discussed at the recent Performance & Challenge surgeries. These includes a rolling training programme with the Practice Lead in the PSW team for frontline staff to improve the quality of Child Permanence Reports (CPRs) and ensure



knowledge of adoption procedures, offering induction to NQSWs on the NIPE scheme and looking at ways to increase applications from potential adopters.

## **4.7 Caseloads**

4.7.1 Whilst the maximum caseload has fallen in Assessment teams, we know that 17 SWs across all the frontline teams had allocations of 30 or more children. The majority were in assessment teams, however this also included 4 FIT SWs in Yarmouth and West. More capacity is being created in Yarmouth through the creation of a new Family Intervention Team, and in acknowledgement to the increase in work in South, following boundary changes, a new FIT and Assessment team have been approved. From this month we are monitoring changes in social worker for children and young people as we know that this lack of stability can be detrimental to effective & timely planning. Some changes in social worker are right for the child (transferring from assessment to longer term intervention), however we are concerned that too many children are being subject to changes outside of transfer processes. In January 8% of all children allocated to a frontline team experienced a change of worker but not change of team. 123 children allocated to Yarmouth teams had a change of social worker but did not transfer to a new team. This is 13% of the children active to the locality. We know that there have been a number of staffing changes that have led to this, and with new workers in place disruption should lessen, however this data will help us understand & act on staff capacity and stability and the impact this has on children.

\* Eligible care leavers are young people aged 16 or 17 who are currently looked after

\*\* Relevant care leavers are young people aged 16 or 17 who have been eligible care leavers

\*\*\* Former relevant care leavers are Young People aged 18-21 who have been eligible and/or relevant care leavers

## **5. Financial Implications**

5.1 As requested this is now contained in a separate report.

## **6. Issues, risks and innovation** (Risk Register at Appendix 2)

6.1 Appendix 2 shows the list of children's services risks and mitigations.

6.2 These risks are regularly reviewed and updated as appropriate by the CS Leadership Team.

### **Officer Contact**

If you have any questions about matters contained in this paper or want to see copies of any assessments, e.g. equality impact assessment, please get in touch with:

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