

Children and Families Overview and Scrutiny Committee

Agenda

Date:	Monday, 28th November, 2016
Time:	2.00 pm
Venue:	Committee Suite 1,2 & 3, Westfields, Middlewich Road, Sandbach CW11 1HZ

The agenda is divided into 2 parts. Part 1 is taken in the presence of the public and press. Part 2 items will be considered in the absence of the public and press for the reasons indicated on the agenda and in the report.

It should be noted that Part 1 items of Cheshire East Council decision making and Overview and Scrutiny meetings are audio recorded and the recordings will be uploaded to the Council's website

PART 1 – MATTERS TO BE CONSIDERED WITH THE PUBLIC AND PRESS PRESENT

1. **Apologies for Absence**

2. **Minutes of Previous meeting** (Pages 5 - 8)

To approve the minutes of the meeting held on 31 October 2016

3. **Declarations of Interest**

To provide an opportunity for Members and Officers to declare any disclosable pecuniary and non-pecuniary interests in any item on the agenda.

For requests for further information

Contact Katie Small

Tel: 01270 686465

E-Mail: katie.small@cheshireeast.gov.uk with any apologies

4. **Whipping Declarations**

To provide an opportunity for Members to declare the existence of a party whip in relation to any item on the agenda

5. **Public Speaking/Open Session**

A total period of 15 minutes is allocated for members of the public to make a statement(s) on any matter that falls within the remit of the Committee.

Individual members of the public may speak for up to 5 minutes, but the Chairman will decide how the period of time allocated for public speaking will be apportioned, where there are a number of speakers.

Note: In order for officers to undertake any background research, it would be helpful if members of the public contacted the Scrutiny officer listed at the foot of the agenda, at least one working day before the meeting to provide brief details of the matter to be covered.

6. **Local Authority Designated Officer Annual Report 2015/2016** (Pages 9 - 20)

To give consideration to the annual report

7. **Children and Families Performance Scorecard - Quarter 2, 2016-17** (Pages 21 - 28)

To scrutinise the performance across the Children and Families Service for quarter 2 of 2016-17

8. **Progress Report on the Children and Young People's Improvement Plan** (Pages 29 - 50)

To consider the progress against the Children and Young Peoples Improvement Plan

9. **Children's Social Care Recruitment and Retention** (Pages 51 - 58)

To update the Committee on recruitment activity and workforce stability

10. **Forward Plan** (Pages 59 - 60)

To give consideration to areas of the forward plan which fall within the remit of the Committee.

11. **Work Programme** (Pages 61 - 70)

To give consideration to the work programme

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CHESHIRE EAST COUNCIL**Minutes of a meeting of the Children and Families Overview and Scrutiny Committee**

held on Monday, 31st October, 2016 at Committee Suite 1,2 & 3, Westfields,
Middlewich Road, Sandbach CW11 1HZ

PRESENT

Councillor Rhoda Bailey (Chairman)
Councillor S Pochin (Vice-Chairman)

Councillors B Dooley, D Flude, G Merry, A Moran, J Saunders and
S Brookfield

27 APOLOGIES FOR ABSENCE

An apology for absence was received from Councillor L Jeuda

28 MINUTES OF PREVIOUS MEETING

Consideration was given to the minutes of the meeting held on 26 September 2016.

RESOLVED

That the minutes be approved as a correct record and signed by the Chairman

29 DECLARATIONS OF INTEREST

There were no declarations of interest

30 WHIPPING DECLARATIONS

There were no whipping declarations

31 PUBLIC SPEAKING/OPEN SESSION

There were no members of the public wishing to speak

32 INDEPENDENT REVIEW OFFICERS (IRO) ANNUAL REPORT 2015/16

Consideration was given to the Independent Review Officers (IRO) Annual Report 2015/16. The report provided qualitative and quantitative evidence relating to the IRO service in Cheshire East as required by statutory guidance. It was noted that the priorities for 2016/17 related to Strategy; prevention and performance; anti oppressive practices; communication and collaboration.

The following comments were made:

- With regard to staffing, it was noted that there had been a number of changes which had had an impact on implementing some of the 2014/15 priorities, this was now being addressed, however further work was required.
- It was noted that child participation in review rates were down slightly from previous years, which because of the high turnover of staff, may be due to recording inconsistency between IRO's.
- It was agreed that a lot still needed to be done in relation to special educational needs and emotional health.
- Members raised concern that 34 care leavers were not engaged in work, training or education. It was agreed that further details on how they are supported and the reasons for not being in work, education or training would be considered by the committee at a future meeting.
- There appeared to be communication and data issues throughout the report, which were also evidenced in the performance scorecard.

Members agreed that as the performance of the service had clearly been affected by staffing and recruitment issues, an update report would be received in 6 months time.

RESOLVED

That an update report including details of the 34 care leavers not in training education or work, be received in 6 months time.

33 FORWARD PLAN

Consideration was given to the items of the forward plan which fell within the remit of the Committee. It was noted that the description of item CE 16/17-20 – Crewe Nurseries was incorrect and would be amended.

RESOLVED

That the items be noted

34 WORK PROGRAMME

Consideration was given to the work programme. The following amendments were made:

- That the update on the children and young persons improvement plan be considered on 28 November 2016 and not on 19 December.
- That an update on the IRO annual report and progress made be considered in April 2017.
- That a progress report on the cabinet resolution relating to available routes to schools be considered in April 2017.

Members agreed that as the agenda for November was too large, in consultation with the Chairman, some items would be deferred to the December meeting.

RESOLVED

That the work programme be amended to reflect the items highlighted above.

The meeting commenced at 2.00 pm and concluded at 4.10 pm

Councillor Rhoda Bailey (Chairman)

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ANNUAL
REPORT
2015-2016

Local Authority Designated Officer

Introduction

The role of the Local Authority Designated Officer (LADO)

Working Together to Safeguard Children 2015 (WTSC 2015) requires local authorities to have a particular officer or a team of officers to be involved in the management and oversight of allegations against people who work with children. The officer or team of officers should be sufficiently qualified and experienced to fulfil this role effectively. It also requires newly appointed officers to be qualified Social Workers.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Together_to_Safeguard_Children.pdf

The LADO oversees individual cases, provides advice and guidance to employer's, voluntary organisations and liaises with the Police and other agencies as required. The LADO has a responsibility to monitor the progress of individual cases to ensure they are dealt with quickly, fairly and consistently, as well as identifying significant patterns and trends across the workforce.

In Cheshire East there are currently two part time LADO's and a dedicated Business Support Officer; they sit within the Children's Safeguarding and Quality Assurance Unit.

Context

WTSC 2013 provides the threshold criteria for the management of allegations regarding individuals who work with children and young people. The guidance not only applies to allegations where it is considered that a child has suffered or is likely to suffer harm but also allegations, which suggest that a person has:

- Behaved in a way that has harmed, or may have harmed, a child.
- Possibly committed an offence against, or related to, a child; or
- Behaved towards a child or children in a way that indicates that they may pose a risk of harm to children.

These procedures should be applied where there are allegations or concerns that an individual may pose a risk of harm and they are employed on a paid or voluntary basis including casual, agency, commissioned and self-employed workers. The procedures capture concerns, allegations or offences emanating from outside of work, as well as within a person's paid or unpaid role working with children.

WTSC clarifies that the guidance applies in its entirety to all schools, including independent schools, academies and free schools, who all have duties in relation to safeguarding and promoting the welfare of pupils, consistent with Keeping Children Safe in Education.

LADO Performance Data: 2015/2016**Referrals**

The LADO's response to referrals are categorised into 3 areas:

- **Consultation:** Referrals where the LADO threshold is not met (as per WTSC 2015 guidance).
- **No Further Action after Initial Consideration:** This relates to a referral where some preliminary investigation is required by the referrer or employer to determine whether further action is required under LADO procedures.
- **LADO Threshold is met:** An investigation with LADO oversight is required and a strategy meeting was held.

During 2015/16 there have been 171 referrals relating to allegations about adults who work with children in Cheshire East.

Table 1: Comparison Referrals April 2012-March 2016

	2012/2013	2013/2014	2014/2015	2015/2016
*Referrals met LADO threshold	78 (38%)	63 (19%)	46 (19%)	72 (42%)
Not met LADO threshold	127 (62%)	262 (81%)	193 (81%)	99 (58%)
Total	205	325	239	171*

There is some difficulty providing comparative data as the recording systems of the LADO service has changed several times since 2012. It does appear from the table above that the numbers of referrals to the LADO this year have significantly decreased from 2014/15, however this is not the case. The recording of contacts and referrals has changed: in 2014/15 all contacts with LADO were reported as referrals; however this is no longer the case and inappropriate referrals and additional tasks completed by the LADO such as Safe Recruitment checks are now recorded separately.

*In addition to the referral numbers above, in 2015/16 there have been a further 151 contacts with the LADO service, these contacts range from general complaints about settings to safe recruitment checks. This increases the total figure to 322 indicating an increase in the total number of contacts to the service.

Referrals by Referring Agency (the agency making the referral)**Table 2: Comparison Referrals by Referring Agency April 2012 – March 2016**

	2012/2013	2013/2014	2014/2015	2015/2016	Total
Early Years	6	4	4	5	19
Education	25	17	20	14	76
Fostering	12	13	1	12	38
Health	0	1	0	2	3
Leisure LA	0	1	1	2	4
Ofsted	4	2	3	2	11
Police	5	5	6	4	20
Residential	4	11	3	8	26
Social Care	18	7	5	17	47
Transport	3	1	1	3	8
Vol Organisations	1	1	2	3	7
Total	78	63	46	72	259

- Most referrals were received from Children's Social Care (24%), Education Settings (21%) and Fostering Agencies (17%).
- There has been a decrease in referrals from schools who made the most referrals in the previous 4 years. However, this may well reflect that school's increased understanding of LADO thresholds as there has been a 13% decrease in the referrals from schools where threshold for LADO involvement was not met. This reflects the work undertaken by the LADO and SCIES with schools. To ensure that this trend continues there will be targeted training/awareness sessions during 2016/17 with Cheshire East Head Teachers, including academy and Independent Head Teachers. Further details of how this will be achieved are recorded within the 2016/17 Business Plan (appendix 1).
- The increase in referrals from Children's Social Care (25% increase) is also likely to be partly attributable to raising awareness of the LADO role with CSC Managers.
- 35% of referrals made by CSC relate to their own employees, with the remainder relating to professionals across partner agencies.

Referrals by Employing Agency (the agency where the adult is employed)**Table 3: Comparison Referrals by Employing Agency April 2012 – March 2016**

	2012/2013	2013/2014	2014/2015	2016/2015	Total
Early Years	7	5	4	9	25
Fostering LA	7	10	1	13	31
Fostering Non LA	7	5	0	6	18
Social Care	2	2	1	6	11
Other	1	0	0	0	1
Leisure LA	1	1	1	0	3
Health	0	2	0	3	5
Residential	8	11	3	7	29
Education	32	19	23	18	92
Self Employed	7	4	5	3	19
Transport	3	2	2	5	12
Other	0	0	1	0	1
Vol Organisation	3	2	5	2	12
Total	78	63	46	72	259

- The majority of referrals, 26%, relate to foster carers; 18% of whom were Cheshire East Local Authority Foster Carers. The remainder were those employed by other Local Authorities or Private Fostering agencies whilst being resident in our area.
- Referrals about foster carers have increased significantly in comparison to 2014/15 (24%), however the increase is less pronounced in comparison to the two previous years (17% and 11% respectively) it is therefore likely that 2014/15 was an anomaly.
- 25% of referrals relate to education professionals, with early years professionals accounting for 13% and residential child care workers accounting for 10% of referrals. These four agencies have had the highest amount of referrals in the previous four years. This trend is mirrored in other northwest local authorities and relates directly to these settings having high levels regulated activity with children and young people.
- There has been a 5% increase in referrals relating to transport (taxi drivers, coach drivers and escorts). The need to scrutinise this increase is reflected in the LADO Business Plan (appendix 1) as is the need to strengthen the links between the LADO and Cheshire East Transport Solutions and Licencing.

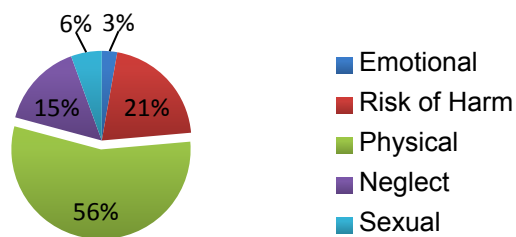
Categories of Harm

Table 4: Comparison Categories April 2012 – March 2016

	2013 / 2012	2014 / 2013	2015 / 2014	2016 / 2015
Emotional	2	4	0	2
Risk of Harm	38	25	11	15
Physical	31	27	22	40
Sexual	7	7	13	4
Neglect	not categorised			11
Monthly Total	78	63	46	72

- Referrals relating to physical harm continue to account for the majority of referrals: 56% in 2015-16 and 48% in the previous year.
- The amount of referrals relating to the more general category 'risk of harm' has remained static at approximately 20%. This category is often used when there is not an allegation about one specific child, but there is significant concern about an adults suitability to work with children.
- There has been a decrease in the referrals relating to sexual harm from 28% of referrals in 2014-15 to 15% in 2015-16. Scrutiny of the data and case records does not provide any apparent themes or explanations for this reduction.

Referrals by Category of Harm April 2015-
March 2016



Outcomes

The LADO needs to be informed of outcomes of any investigations undertaken under the LSCB Managing Allegations against Staff or Volunteers Working with Children Protocol and the following national categories and definitions are used.

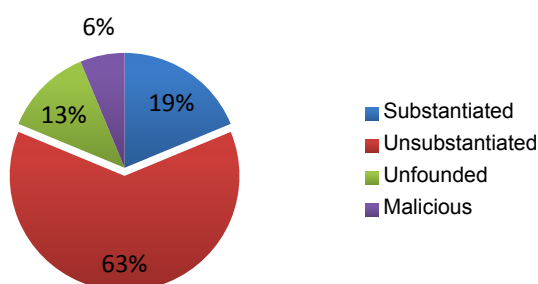
1. **Substantiated:** there is sufficient identifiable evidence to prove the allegation;
2. **False:** there is sufficient evidence to disprove the allegation;

3. **Malicious:** there is clear evidence to prove there has been a deliberate act to deceive and the allegation is entirely false;
4. **Unfounded:** there is no evidence or proper basis which supports the allegation being made. It might also indicate that the person making the allegation misinterpreted the incident or was mistaken about what they saw. Alternatively they may not have been aware of all the circumstances
5. **Unsubstantiated:** this is not the same as a false allegation. It means that there is insufficient evidence to prove or disprove the allegation; the term therefore does not imply guilt or innocence.

NB. Keeping Children Safe in Education 2015 has removed the definition 'unfounded'. The North West LADO forum has made a decision to keep this definition

- The majority of allegations, 62%, were unsubstantiated with 19% being substantiated. This contrasts sharply with the previous year when 52% of allegations were substantiated. However, internal audit by the Safeguarding Manager has provided assurance that current practice is consistent and robust. A peer review will be undertaken early in 2017 to offer independent scrutiny.
- In addition, shared data from the North West Regional LADO Group confirms 5 out of the 9 reporting authorities recorded unsubstantiated as the most common outcome.

Outcome of Investigation: Closed Cases April 2015-March 2016

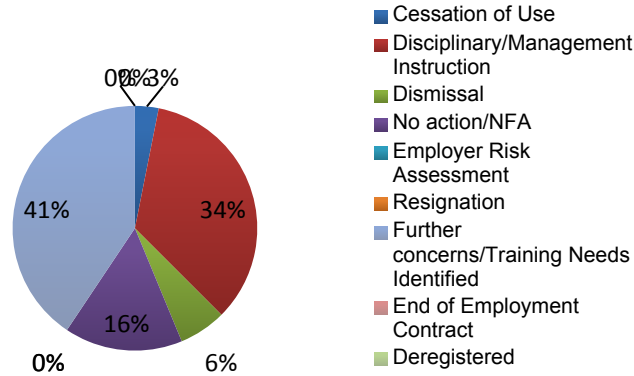


Employer Action Following Investigation on Cases Closed April 2015-March 2016

- There were a high proportion of disciplinary procedures/management instructions and identification of further training needs, 69% combined; this correlates with the high proportion of unsubstantiated cases. It is likely that investigations have concluded that there is not enough evidence to substantiate allegations that a child was wilfully harmed, but there was an

element of misconduct in the employee's actions which can be addressed via training.

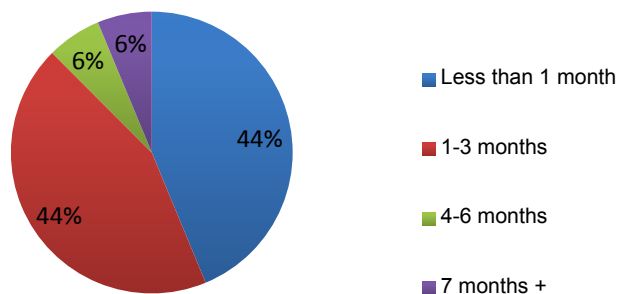
**Employer Action following Investigation of Cases
Closed April 2015-March 2016**



Time from Referral to Completion April 2015-March 2016

- The LADO has continued to ensure that allegations are managed in a timely way and between 2015-16 88% of referrals were concluded within 3 months; a slight improvement on the previous year's 82%.
- Those cases that extend beyond 6 months are most frequently cases where there is a complex or lengthy police investigation, when there has been, for example, an historical allegation of sexual abuse.
- The LADO completes a 4 weekly review on all open cases to ensure there is no unnecessary delay and drift. When investigations are not completed within agreed timescales and there is no reasonable explanation, the LADO escalates their concerns, seeking resolution with the designated senior manager of the agency causing delay. The LADO also reports unnecessary delays to the agency's regulating body.

Time from Referral to Completion April 2015-March 2016



Service Delivery, Reflection and Improvement

- Staff changes within the LADO service has brought about a natural review in service delivery and reflection on how the service can be improved to deliver best quality practice to children and the children's workforce in Cheshire East.
- Implementation of a simplified, more transparent data recording and collection system has enabled effective, shared working arrangements between two or more people covering the LADO duties and supported greater management oversight.
- 2016/17 will see the launch of the Cheshire East LADO practice standards, setting out shared expectations between LADO and organisations providing services to children in Cheshire East.
- The LADO has developed a joint protocol with Cheshire Police ensuring that disagreements between the respective services can be addressed, escalated and resolved, quickly, fairly and consistently.
- The LADO is in the process of developing a pathway to ensure that children and young people who have been assaulted by a professional can access a child protection medical without the unnecessary involvement of children's social care.
- The LSCB procedure 'Managing Allegations Against Adults Who Work and Volunteer with Children' has been updated and Cheshire East LADO will meet with PAN Cheshire LADOs within the next 6 months to ensure that procedures remain up to date; reflecting current legislation, shared local practice and the development of shared regional and national LADO standards.
- The LADO One Minute Guide has been updated to reflect changes from WTSC 2015 and to include information on the LADO / managing allegations process and is available on the LSCB website.
- The LADO delivers Managing Allegations training twice a year, with the support of the LSCB Training Manager. The training content was updated ahead of the most recent training event in June 2016 and now offers more succinct advice and guidance with increased delegate interaction via group exercises. Feedback has been positive with delegates citing trainer knowledge and experience as key aspects of their learning experience. Delegates also commented on the benefit of being trained by practitioners:

being able to put a face to the name and meet the LADO gave them greater confidence in approaching the LADO for advice.

- Cheshire East LADO continues to attend quarterly North West Regional LADO meetings and participates in joint development initiatives via a shared regional work plan. Current Work Plan activity includes the development of a shared threshold in relation to LADO strategy meetings.
- The North West Regional LADO Group has developed a peer review process which Cheshire East will be undertaking in early 2017.
- Cheshire East LADO attended the National LADO conference in March 2016 and continues to provide feedback on development initiatives which aim to provide a collective LADO voice regarding the development of legislation and statutory guidance regarding the managing of allegations.

Summary

- Development in the LADO service over the past 12 months, and in particular how LADO receives and records contacts, has resulted in positive feedback from partner agencies in the latter part of the 2015/16 with greater accessibility being most cited.
- The improved recording of consultations with LADO, where the threshold for further action has not been met, is ensuring that information regarding individuals who potentially pose a risk of harm is being collated for future reference. This provides greater safeguards for children in Cheshire East.
- Improving relationships and promoting the LADO role with partner agencies will remain a priority in the coming year. Further analysis of the 2015/16 LADO performance and training data is being carried out to identify which agencies would benefit from targeted training, advice and support. This will be reported in more detail in the LADO business plan (appendix 1).
- Analysis to date shows that referrals from voluntary agencies and faith organisations remains low and LADO will therefore prioritise the promotion of the LADO/managing allegations procedures with relevant local agencies and organisations.
- The increase in referrals about foster carers and transport services staff will be addressed via meetings/task and finish exercises with appropriate service managers to ensure that agencies are providing safeguarding and positive behaviour management training to foster carers and adults involved in the transportation of children respectively.

Appendices

Appendix 1: LADO Business Plan 2016/17



LADO Business Plan
2016 - 17.docx

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Children and Families Overview and Scrutiny Committee

Date of Meeting: 28 November 2016

Report of: Kath O'Dwyer, Executive Director of Children's Services and Deputy Chief Executive.

Subject/Title: Children and Families Performance Scorecard – Quarter 2, 2016-17

Portfolio Holder: Cllr Liz Durham

1. Report Summary

1.1. This report and the attached performance scorecard provide an overview of performance across the Children and Families Service for quarter 2 of 2016-17.

2. Recommendation

2.1. Scrutiny is recommended to:

- a) Note the contents of the report and scorecard; and
- b) Scrutinise areas where expected levels of performance are not being met.

3. Other Options Considered

3.1. Scrutiny may want to consider the performance of the Service more or less frequently.

4. Reasons for Recommendation

4.1 One of the key areas of focus for the Children and Families Overview and Scrutiny Committee is to highlight areas of poor performance and to scrutinise the effectiveness of plans in place to improve services. Overview and Scrutiny has an important role to play in the performance management systems of the local authority. The Children and Families performance scorecard provides essential data, along with qualitative information, to measure the effectiveness of services within children's services. This report and scorecard will be provided to Scrutiny on a quarterly basis to enable the Committee to maintain an overview of performance across the Service.

5. Background

5.1. This is the fourth performance scorecard presented to the Children and Families Overview and Scrutiny Committee following Ofsted's inspection of Children's Services in July 2015. This report and scorecard sets out the performance against the agreed measures across the Children and Families Directorate for quarter 2 (1st July – 30th September 2016).

5.2. The performance scorecard details the following:

- Measure – details of each performance measure
- Polarity – whether it is good to have the measure high or low
- Statistical neighbour average – gives a comparator against local authorities with similar characteristics to Cheshire East. Cheshire East's statistical neighbours in rank order are:
 - Cheshire West and Chester
 - Warwickshire
 - Central Bedfordshire
 - Warrington
 - Hampshire
 - North Yorkshire
 - East Riding of Yorkshire
 - Solihull
 - North Somerset
 - West Berkshire
- National average – gives a national comparator figure
- Target – this is either a national target, eg, adoption timeliness, or a local one set by the service to provide a 'good/outstanding' service
- Year end 2015-16 – enables Members to compare existing performance to that in the previous year
- Quarterly performance – enables Members to compare performance from quarter to quarter
- RAG – this is a rating of red, amber, green based on current performance against the expected level of performance
- Direction of travel – this provides the direction of travel this quarter and whether this is positively or negatively in an upward/downward trajectory or static
- Comments – this provides a general commentary on the information presented
- C&YP Plan Priority – links the measure to the relevant priority within the Children and Young People's Plan
- Corporate Priority – links the measure to the relevant priority within the Council's Corporate Plan

5.3. Since quarter 1 additional data has been provided with regards to targets. Statistical neighbour and National average data has also been amended to reflect the statistical first releases from the Department of Education relating to the CIN census (SFR52 – 2016) and the SEN2 return (SFR17 - 2016). One indicator, around vulnerable children accessing children's centres, has been removed; further amendments will be made to the children centre indicators for quarter 3.

6. Performance Overview

- 6.1. The performance scorecard at Appendix 1 includes 69 separate measures covering all areas of the service. Some of these measures are non-performance related, eg those that relate to population cohorts. In total, 52 of these measures relate to performance and have been RAG rated. A breakdown summary is set out follows:

Performance Measures	Red	Amber	Green	n/a	Total
This quarter	3	19	30	17	69
Previous quarter	6	20	27	17	70

- 6.2. The above table shows that there has been some improvement in Children and Families performance from the previous quarter; there has been an increase in those measures judged green or amber and a reduction in red rag rated measures. Of the 3 red RAG rated measures, actions are underway to address all of these. Two measures relate to the health of cared for children; whilst needing further improvement, the percentage of initial health assessments completed by paediatricians within 20 days is showing significant improvement from 36% in Quarter 1 to 58% in Quarter 2. A new Cared for Nurse has been in post since July 2016 to drive the improvements around the health of cared for young people.

- 6.3. Whilst it is important to look at the current performance around particular measures, it is equally important to look at the direction of travel and to RAG rate this in relation to performance, ie, whether this is improving (green), staying broadly the same (amber) or getting worse (red). A summary of the direction of travel of performance across the service is detailed below.

Direction of Travel	Red	Amber	Green	n/a	Total
This quarter	2	19	42	6	69
Previous quarter	5	17	44	4	70

- 6.4. The direction of travel shows broadly that most measures of performance are on a positive trajectory, and this trajectory has remained in line with the previous quarter. The increase in the number classed as n/a is due to validation of attendance data at schools in the month of September which takes longer due to the new intakes in reception and year 7 at secondary school.

7. Wards Affected and Local Ward Members

- 7.1. The performance measures relate to all ward areas.

8. Implications of Recommendation

8.1. Policy Implications

- 7.1.1 There are no direct policy implications, although low or high performance in a certain area may lead to suggest changes in policy to address them.

8.2. Legal Implications

- 7.2.1 There are a no direct legal implications.

8.3. Financial Implications

- 7.3.1 Although there are no direct financial implications related to this report, performance measures may be used as an indicator of where more or less funding is needed at a service level.

7.4 Equality Implications

- 7.4.1 Members may want to use the performance scorecard to ensure that services are targeted at more vulnerable children and young people.

9. Access to Information

- 9.1. The background papers relating to this report can be inspected by contacting the report writer:

Name: Gill Betton
Designation: Head of Service, Children's Development & Partnerships
Tel. No: 07764 166262
Email: gill.betton@cheshireeast.gov.uk

Children's Services Scorecard - Quarter 2, 2016-17

PI Ref	Measure	Polarity	Stat Neigh Av	National Av	Target	Yr. end 15-16	Qu 3	Qu 4	Qu 1 16-17	Qu 2 16-17	Yr. end 16-17	RAG	Quarterly dir of travel	Comments	C&YP Plan Priority	Corporate Priority
Safeguarding																
1.1	Number of contacts				2600-2800	9842	2707	2710	2713	2648			➡	The rolling 12 month period suggests that between 2600 and 2800 contacts a quarter is reflective of the demographic of Cheshire East. This represents a rate of between 346 - 373 referrals per 10,000 children in any given quarter. It is difficult to compare this with other local authorities due to the differing front door arrangements.	2 Feel & Be Safe	Outcome 5
1.2	Number of referrals				850-950	3749	895	970	940	931			⬇	Based on a rolling 12 month period an expected target range for referrals would be between 850-950. Cheshire East rate of referral per 10,000 remains comparable with our closest statistical neighbour, Cheshire West and Chester (CWAC).	2 Feel & Be Safe	Outcome 5
1.3	% contacts to referrals				35%-40%	38%	33%	36%	35%	35%			➡	This has remained constant over the last two quarters having reduced from the previous year. This is due to the introduction of Early Help Brokerage, which provides an effective pathway for early help contacts.	2 Feel & Be Safe	Outcome 5
1.4	Number of repeat referrals					829	194	225	239	232			➡	The rate of re-referrals has remained constant for the last 2 quarters. This continues to illustrate the need to embed early help for families, together with the complex dependency multi-agency assessment and intervention and to support agencies in continuing their lead role with the family.	2 Feel & Be Safe	Outcome 5
1.5	% repeat referrals	Low is good	20.8%	22.3%	<20%	22%	22%	23%	25%	25%			➡	Cheshire East remains within statistical neighbours' performance based on 2014-15 published benchmarking data. The latest regional comparable data from quarter 4 showed repeat referrals ranged from 9.9% in Halton to 36.6% in Liverpool with a regional average of 22.6%.	2 Feel & Be Safe	Outcome 5
1.6	Number of children that went missing 5 times or more from home (quarterly figure is 5 or more times in any month in that quarter)	Low is good				13	supressed	supressed	supressed	supressed			➡	In the second quarter of 2016-17 the figure has been suppressed because it is so low. This is a positive picture as it indicates that where there are issues, the appropriate multi agency plan is in place and that individuals are not at risk from the dangers associated with going missing from home. In the first 6 months there have been 6 individuals who have gone missing 5 or more times in total.	2 Feel & Be Safe	Outcome 5
1.7	% of assessments completed within 45 days	High is good	84%	83%	85%	89%	89%	85%	85%	83%			⬇	There has been a small drop in the number of assessments completed within 45 days in this quarter but overall performance remains strong and slightly ahead of NW and England published averages.	2 Feel & Be Safe	Outcome 5
1.8	Number of children in need (CIN) - local definition					1133	1215	1133	1133	1054			⬇	The local position has remained consistent across the last 12 months and is broadly in line with the expected levels of CIN based on Cheshire East's demographic profile.	2 Feel & Be Safe	Outcome 5
1.9	Rate of children in need (CIN) per 10,000 - local definition				145 - 165	150.9	161.8	150.9	150.9	147.4			➡	Rate of children in need is calculated using the population figure of 75,100. The local position has remained consistent across the last 12 months and is broadly in line with the expected levels of CIN based on Cheshire East's demographic profile.	2 Feel & Be Safe	Outcome 5
1.10	% initial child protection conference (ICPC) within 15 days of Section 47 enquiry (S47)	High is good	88%	77%	100%	68.0%	89%	67%	75%	80%			⬆	Whilst lower than our statistical neighbour average, Cheshire East's performance is better than the national average and a substantial improvement on the 2015-16 outturn. The first 2 quarters of 2016-17 have seen continual improvement. This suggests that the action plan around timely notification to the Safeguarding Unit is working. Any cases not meeting the 15 day target are closely scrutinised and reported weekly to	2 Feel & Be Safe	Outcome 5
1.11	Number of children subject to child protection (CP) plan [includes child sex exploitation (CSE) Plans]				260-300	273	271	273	268	282			➡	Whilst at the lower end of our statistical neighbour cohort, audits suggest that the right individuals are on a plan the right children are being stepped up to child protection and that this is a number reflective of our demographic	2 Feel & Be Safe	Outcome 5
1.12	Rate of children subject to child protection (CP) plan per 10,000		41.5	43.1	35-40	37.2	36.1	36.3	35.7	37.5			➡	Whilst at the lower end of our statistical neighbour cohort, audits suggest that the right individuals are on a plan, the right children are being stepped up to child protection and that this is a number reflective of our demographic	2 Feel & Be Safe	Outcome 5
1.13	% children becoming subject to a child protection (CP) plan for 2 nd / subsequent time	Low is good	17.3%	17.9%	<15%	22.9%	11.1%	22.4%	23.3%	23.9%			⬆	This is showing a continued upward trend. Scrutiny of cases is indicating a small number of families with large sibling groups coming onto plans for a 2nd or subsequent time (in Q2 there were 22 individuals from just 9 families). Most recent comparison data in the NW in terms of performance over the last year (2015-16) indicates percentages ranging from 10.5 % to	2 Feel & Be Safe	Outcome 5
1.14	Number of child protection (CP) plans over 2yrs	Low is good	supressed	2.1%	0%	0%	0%	0%	0%	0%			➡	All children subject of a plan for 12 months+ are actively tracked with robust independent oversight. This current performance is positive and indicates that these vulnerable children do not experience drift.	2 Feel & Be Safe	Outcome 5
1.15	Number of children on a child sexual exploitation (CSE) plan					8	6	8	6	7			➡	This number represents the individuals who are on a specific child sexual exploitation (CSE) plan. There are other individuals we are supporting where CSE actions form a part of an overarching CIN/CP/LAC plan. In addition, where any agency has concerns around individuals they are brought to the multi-agency CSE group for discussion and possible tracking.	2 Feel & Be Safe	Outcome 5
1.16	% child protection (CP) children reviewed in timescales (year to date fig)	High is good	95.8%	93.7%	100%	99.5%	90%	100%	99%	99%			➡	The improvement on the performance in this area has been maintained for 3 quarters and is ahead of statistical neighbour and national average. This is reflective of improved practice around timely notification and arrangement of review conferences. It is important to note that there will always be the occasional unforeseen circumstance that will prevent performance being 100% continually.	1 Having A Voice	Outcome 5
Cared for Children																
2.1	Number of cared for children				350-400	387	394	387	400	398			➡	It is being reported nationally and locally that numbers of cared for children are increasing. Cheshire East remains at the lower end of our statistical neighbour group, with latest figures from CWAC and Warrington showing much higher rates. We have amended our target to reflect a range in which we consider our cared for population to be appropriate.	2 Feel & Be Safe	Outcome 5

PI Ref	Measure	Polarity	Stat Neigh Av	National Av	Target	Yr. end 15-16	Qu 3	Qu 4	Qu 1 16-17	Qu 2 16-17	Yr. end 16-17	RAG	Quarterly dir of travel	Comments	C&YP Plan Priority	Corporate Priority
2.2	Rate per 10,000 cared for children		56	60	46.6 - 53.3	51	52.5	51.5	53.3	53			➡	Oct 2016 - DfE produced comparator data for statutory returns as at March 2016. This places Cheshire East in the mid range of our statistical neighbour group range of between 35 -79 per 10,000 of population. Nearest neighbours CWAC and Warrington reported 71 and 78 per 10,000 respectively. NW average as at 31/3/16 was 82 per 10,000	2 Feel & Be Safe	Outcome 5
2.3	% cared for children with 3 or more placements in year	Low is good	data not yet released		<10%	12.2%	13.9%	12.2%	13.8%	13.7%			↓	This figure is a rolling year to date position and relates to 55 individuals. An audit of this cohort has been completed and identifies that the number of children placed at home subject to 38 (6) orders impacts on performance. If this group, together with a couple of other identified themes, are removed from the count then it reduces to 12%. Further work is being undertaken across the service to address the volume of Sec 38 (6) placements and to challenge placement finding processes. Children with 2 moves will now be included in the permanence tracker for overview. Work is also being	2 Feel & Be Safe	Outcome 5
2.4	% cared for children in long term stability placement	High is good	data not yet released		80%	66.7%	73.0%	66.7%	70.2%	64.8%			↓	Whilst this is slightly lower than last quarter, this can change due to the cohort of individuals in care at that point in time. Whilst long term stability is the ideal solution for individuals a change in placement may sometimes be the most appropriate action and the key is to ensure this is handled with minimum disruption for all concerned.	2 Feel & Be Safe	Outcome 5
2.5	% cared for children reviews in timescales	High is good				96%	97%	97%	97%	89%			↓	Whilst every effort is made to review individuals in good time, there will always be the occasional delay due to unforeseen circumstances. In quarter 2 there has been a drop in performance which in part has been due to the increase in the number of cared for children placing additional pressure on the workforce. This figure also reflects some anomalies where reviews have been held on time but because they have required a series of meetings they are not always reflected as such. Work has been done to improve this. With regards to the cases concerned the delays were minimal - sometimes just a day and scrutiny shows that this did not compromise individuals plan being scrutinised and making progress.	1 Having A Voice	Outcome 5
2.6	Number of cared for children in internal foster care (including friends and family placements)	High is good			215	210	199	210	191	188			↓	A number of foster carers have been on hold due to LADO or ill health issues. An audit of these is underway to ensure that, where possible, they are resolved with minimal delay.	2 Feel & Be Safe	Outcome 5
2.7	Number of cared for children in external foster care	Low is good			85	89	88	89	97	88			↓	68 children are matched permanently with their carers and their care plan is to remain with their carers, at least, until they are 18.	2 Feel & Be Safe	Outcome 5
2.8	Number cared for children placed over 20 miles from home address (Cheshire East and out of borough)	Low is good				69	74	69	77	89			➡	Although there is a slight increase in this figure, it is important to note that almost 25% of these are placed either with family/ relatives or in adoption placements.	2 Feel & Be Safe	Outcome 5
2.9	Number of cared for children that went missing 5 times or more (quarterly figure is 5 or more times in any month in that quarter)	Low is good			5	16	7	8	5	5			↓	This is positive and relates to the number of Cheshire East children who went missing from care 5 or more times in the quarter and includes individuals placed both in Cheshire East and out of the borough. Missing from care interviews are offered and the feedback used to inform changes to	2 Feel & Be Safe	Outcome 5
2.10	% of initial health assessments requested within 48 hours of coming into care	High is good			100%	11%	4%	20%	69%	66%			➡	During the first half of 2016-2017 there have been 91 children who entered the care system, 87 of which required the Initial Health Assessment (IHA) Part A completing within 48 hours of entering care. The number of IHA Part A being completed within timescale is 59 (38 in Q1 and 21 in Q2). In Q2 there were 11 requests out of timescales, the majority of which were due to late notification of placement.	4 Being Healthy	Outcome 5
2.11	% of initial health assessments completed by paediatricians within 20 days	High is good			100%	34%	29%	12%	36%	58%			↑	There has been a substantial improvement in the percentage of assessments completed within 20 working days which will is expected to improve further as more requests are completed in a timely fashion.	4 Being Healthy	Outcome 5
2.12	% of children in care over 12 months with a health check in the last year	High is good	84%	90%	100%	73.9%	73.7%	73.9%	71.2%	69.8%			➡	There is currently a review to embed effective office processes to trigger and track annual health assessments . There is ongoing work to ensure that all cared for children and young people get sufficient support and advice around their health and wellbeing. A new Cared for Nurse took up post in July 2016 to drive this but a large number of requests in quarter 2 has impacted on delivering a more improved position. There are c 50 plus to be completed in quarter 3.	4 Being Healthy	Outcome 5
Care Leavers																
3.1	Number of care leavers					225	219	225	201	202			➡	All care leavers are supported with access to a Personal Assistant (PA) to offer help and guidance as they move to independence together with financial support as appropriate to individual needs.	5 Best Skills & Quals	Outcome 3
3.2	% not In education, employment or training (EET)	Low is good			38%	42%	43%	42%	47%	40%			↓	Of the individuals not in education employment or training (NEET), over 30% are engaged in positive activities that are developing skills for the work place. Excluding those pregnant/ with parenting responsibilities and those unavailable to the workplace due to illness/ disability/custody there are only 12 individuals that are NEET and able to work. Active support is in place via Personal Assistants for these individuals.	5 Best Skills & Quals	Outcome 3
3.3	% in suitable accommodation	High is good			96%	96%	66%	95%	95%	95%			➡	There are 5 care leavers aged 18-21 known to be in unsuitable accommodation. This includes individuals currently in custody. Improved tracking in the care leavers service means that these young people are known and work continues to engage them where possible to improve their	2 Feel & Be Safe	Outcome 5
Adoption																
4.1	% of children ceased to be looked after due to adoption - year to date fig	High is good			20%	12.8%	10.6%	12.8%	21.0%	20.3%			↑	This figure reflects 16 individuals out of 79 who have left care since 1/4/2016.	2 Feel & Be Safe	Outcome 5
4.2	% of children ceased to be looked after due to granting of special guardianship order (SGO) - year to date fig	High is good			12%	18.4%	17.3%	18.4%	11.6%	11.4%			➡	This represents 9 individuals in the year to date.	2 Feel & Be Safe	Outcome 5
4.3	Number of children adopted in period	High is good			30	18	supressed	7	9	16			↑	In addition to the 16 adoptions in the first half of the year, we have an additional 27 individuals with an adoption plan, 20 of which are living with their adoptive family. Based on performance to date we are on schedule to meet target set for this year.	2 Feel & Be Safe	Outcome 5

PI Ref	Measure	Polarity	Stat Neigh Av	National Av	Target	Yr. end 15-16	Qu 3	Qu 4	Qu 1 16-17	Qu 2 16-17	Yr. end 16-17	RAG	Quarterly dir of travel	Comments	C&YP Plan Priority	Corporate Priority
4.4	% children who wait less than 16 months between entering care and moving in with adoptive family	High is good			58%	83%	79%	78%	84%	84%			➡	This continues to be a focus to ensure that timely decisions are made to ensure children and young people are in a permanent placement as quickly as possible. There is now a specific IRO identified to track the progress for these children to ensure there is no delay	2 Feel & Be Safe	Outcome 5
4.5	Average number of days between entering care and moving in with adoptive family (A1 national indicator)	Low is good			426	545	592	545	936	678			⬆	Although this has been RAG rated amber, the story behind the data is very positive. This is due to the extremely positive outcome of children and young people being adopted by foster carers after a number of years due to a freestanding application. This is reflected in the reduced figure at 4.7	2 Feel & Be Safe	Outcome 5
4.6	Average number of days between placement order and match with adoptive family (A2 national indicator)	Low is good			121	99	97	99	49	70			⬇	Whilst the number of days has increased it still remains well within the national target of 121 and ahead of last year's position.	2 Feel & Be Safe	Outcome 5
4.7	Average number of days between entering care and moving in with adoptive family/ foster carer who becomes adoptive family	Low is good			426	477	592	477	243	265			⬇	Whilst the number of days has increased it still remains well within the national target of 426 and a substantial improvement on last year's position	2 Feel & Be Safe	Outcome 5
Education and 14-19 Skills																
Virtual School																
5.1	% attendance of children in care (quarterly figure is all cared for children rather than those in care for 12mths which are published figs)	High is good	95.9%	96.1%	95%	94%	94%	94%	89%	94%			⬆	This is now in line with previous quarters and is reflective of the full cohort including those in Year 11.	5 Best Skills & Quals	Outcome 3
5.2	% persistent absence of children in care (quarterly figure is all cared 4 rather than those in care for 12mths which are published figs)	Low is good				15%	14%	15%	18%	11%			⬇	Quarter 2 includes the extended holiday period, so whilst it is positive that there is a reduction, it maybe too early to see if this can be sustained.	5 Best Skills & Quals	Outcome 3
5.3	% personal education plans (PEPs) less than 6 months old	High is good				88.4%	52.2%	88.4%	89.2%					This data will be reported termly and will be updated at the end of quarter 3. This indicator will be amended to reflect the percentage of PEPs completed on a termly basis as it is a more effective measure of quality and support to individuals.	5 Best Skills & Quals	Outcome 3
Schools																
6.1	% good or outstanding secondary schools	High is good		76%		86.4%	86.3%	86.4%	86.4%	76.0%			➡	The profile for secondary school Ofsted outcomes remains strong. The only reason for the deduction is the addition of 3 schools (includes the University Technical College, Pupil Referral Unit and Alternative Provision from September 2016) vet to be inspected.	5 Best Skills & Quals	Outcome 3
6.2	% good or outstanding primary schools	High is good		87%		92.7%	93.6%	92.7%	92.7%	94.4%			⬆	The profile for primary schools remains very strong, which is positive considering the high number of primary schools across the borough.	5 Best Skills & Quals	Outcome 3
6.3	% good or outstanding special school	High is good				80%	80%	80%	80%	80%			➡	The only reason that the data shows a reduction from 100% is due to the additional special school at Church Lawton which has not yet been inspected.	5 Best Skills & Quals	Outcome 3
6.4	Number of fixed term exclusions starting in month	Low is good				1889	593	441	432	269			⬇	The school Summer holidays and year 11 pupils leaving school fall within quarter 2, therefore the number of exclusions reported may appear to be lower than expected.	5 Best Skills & Quals	Outcome 3
6.5	Number of permanent exclusions starting in month	Low is good				37	12	13	12	7			⬇	The school Summer holidays and year 11 pupils leaving school fall within quarter 2, therefore the number of exclusions reported may appear to be lower than expected.	5 Best Skills & Quals	Outcome 3
6.6	Number of fixed penalty notices issued	Low is good				1056	421	298	189	19				Since 13th May Cheshire East has stopped issuing penalty notices for leave of absence, requesting that schools to not send through any further paperwork. Regular absence penalty notices have continued to be issued. This is reflected in the substantial reduction in quarter 4.	5 Best Skills & Quals	Outcome 3
6.7	Number of prosecutions	Low is good				118	26	55	29	14			⬇	The number of prosecutions is likely to be lower in quarter 2 due to the extended holiday period.	5 Best Skills & Quals	Outcome 3
6.8	% of pupils with less than 90% attendance in the quarter	Low is good				19%	12%	12%	13%					Data for quarter 2 is currently being validated following clarification with some schools with regards to Children on roll from the start of the new academic year. It will be available for quarter 3	5 Best Skills & Quals	Outcome 3
6.9	% of pupils with less than 90% attendance year to date	Low is good				19%	9%	11%	13%					Data for quarter 2 is currently being validated following clarification with some schools with regards to children on roll from the start of the new academic year. It will be available for quarter 3.	5 Best Skills & Quals	Outcome 3
6.10	Current number of pupils being educated at home (year fig is total number of unique individuals)					286	252	276	267	259			⬇	There has been a small reduction in the number of individuals educated at home, which is reflective of individuals in Year 11 coming off the school roll in the summer term.	5 Best Skills & Quals	Outcome 3
Prevention and Support																
Prevention and Early Intervention																
7.1	% of all 0-4 children registered at children's centre	High is good			82%	82%	82%	82%	82%	81%			➡	Registration is being maintained due to the collaborative approach with health colleagues and children's centre managers ensuring that individuals are informed of the support and offer available at the centres during their antenatal care. It is expected that with the introduction of the new 'Parent journey' programme, registrations will increase in 2017/18.	2 Feel & Be Safe	Outcome 5
7.2	% of all 0-4 children engaged at children's centre (seen in last 6	High is good			33%		27%	24%	22%	32%			⬆	The improved picture in quarter 2 reflects the range of activities offered during the summer holidays when a higher than normal number of individuals are able to access the provision. During term times due to the high take up of the 2, 3 and 4 year old offer it is inevitable that engagement at children's centres will be lower. The crucial point is that these individuals are accessing appropriate provision to give them the best start in life.	2 Feel & Be Safe	Outcome 5
7.3	% eligible children taking up 2 year old offer (termly figure only)	High is good		72%		77%	77%	77%	75%	69%			➡	There is traditionally a small dip in quarter 2 whilst we establish the final agreed provision for a number in the cohort. This is expected to improve in quarter 3.	5 Best Skills & Quals	Outcome 3
7.4	% children taking up 3 and 4 year old offer (termly figure only)	High is good					97%	99%	97%	97%-99%			➡	This is a range based on known data. We know the number of Cheshire East children taking up the offer at settings in the borough, but we are not aware of all those attending settings in other authorities. The population figures are estimates taken from two years ago and the term in which a child becomes eligible depends on when their birthday falls as they are eligible the term following their 3rd birthday. The figures given assume no children go out of the authority to claim their 3 and 4 year old funding, that the population estimates are accurate and birthdays are distributed evenly	5 Best Skills & Quals	Outcome 3

PI Ref	Measure	Polarity	Stat Neigh Av	National Av	Target	Yr. end 15-16	Qu 3	Qu 4	Qu 1 16-17	Qu 2 16-17	Yr. end 16-17	RAG	Quarterly dir of travel	Comments	C&YP Plan Priority	Corporate Priority
7.5	Number of families turned around (family focus) - claims made at agreed points in the year	High is good				21	supressed	19	9	62			↑	Claims under the family focus criteria now total 71 for the year to date. This is continued improvement and reflects appropriate plans and support mechanisms being provided by families to ensure sustained positive change in their lives.	2 Feel & Be Safe	Outcome 6
Youth Support																
8.1	Number of young people accessing the youth support service								1298	1006			→	The Youth Support Service works with young people aged 13-19 or 13-25 (with additional needs) providing youth work and targeted support. The total number of individuals who accessed the service in quarter 2 reduced to 1,006. This is to be expected given the extended holiday period in July/	5 Best Skills & Quals	Outcome 2
8.2	Number of young people not in education, employment or training (NEET) individuals [yr. 12-14]	Low is good				323	310	323	328	201			→	Of this cohort, 145 are available to the labour market with over 95% either actively seeking employment/ training or with start dates agreed. Of the 56 not available to the labour market 46% is due to parenting/ pregnancy and 54% to illness.	5 Best Skills & Quals	Outcome 2
8.3	% of young people not in education, employment or training (NEET) individuals [yr. 12-14]	Low is good				2.8%	2.7%	2.8%	2.8%	3.1%			→	The September position is always slightly worse as some individuals who did not perform as expected in exams change courses/ make different decisions about the future. Once these individuals are known and engaged the percentage is expected to reduce.	5 Best Skills & Quals	Outcome 2
8.4	Number of individuals where education, employment or training (EET) status not known	Low is good				45	65	45	30	N/A			↓	As at the end of September there is an extremely high number of Year 12-14 year olds where the position is tentatively known but not yet finalised as a large number of universities and colleges have not finalised intake or started. An updated position will be known once October figures have been	5 Best Skills & Quals	Outcome 2
Youth Engagement Service																
9.1	Number of young people sentenced to custody (quarterly fig)	Low is good				7	supressed	supressed	supressed				→	Quarter 1 data is suppressed due to the extremely low number. Quarter 2 data is not yet available.	4 Being Healthy & Making Positive Choices	Outcome 1
9.2	Number of young people remanded to custody (quarterly fig)	Low is good				supressed	0	supressed	0				↓	There were no individuals remanded to custody in quarter 1. Quarter 2 data is not yet available.	4 Being Healthy & Making Positive Choices	Outcome 1
9.3	Number of first time entrants - rolling 12 month figure (data from police national computer)	Low is good				94	111	94	71				↓	Quarter 1 data shows a continued reduction in the number of first time entrants which is extremely positive and demonstrates the continued success of work with those at risk of entering the system. Quarter 2 data is	4 Being Healthy & Making Positive Choices	Outcome 1
9.4	Rate of first time entrants - rolling 12 month figure (data from police national computer)	Low is good		369		281	331	281	212				↓	Quarter 1 data shows a continued reduction in the number of first time entrants which is extremely positive and demonstrates the continued success of work with those at risk of entering the system. Quarter 2 data is not yet available.	4 Being Healthy & Making Positive Choices	Outcome 1
Special Educational Need (SEN)																
10.1	Number of new education, health and care needs assessments requests in month					268	74	79	85	77				The number of requests in each quarter relate to the number received into the local authority from both parents and professionals rather than the number subsequently heard and assessed at panel in the quarter.	6 Additional Needs Additional Chances	Outcome 3
10.2	% of new education, health and care plans (EHCP) completed with 20 weeks	High is good	43.4	55.5		71.0%	49.7%	61.2%	21.7%	30.0%			↑	Of the 30 new EHCP plans completed in quarter 2, 9 were completed within 20 weeks. In addition there were 108 transfers completed of which 26% were completed within 16/20 weeks. It is possible that there were delays in information being received in the July - Sept period due to the extended school holidays. Additional staff are being recruited to the team to ensure that demand can be met and timeliness improved. SEND is a priority area for improvement within Children and Families Services. A new multi agency governance structure is now fully operational and therefore there is currently more robust scrutiny of the area	6 Additional Needs Additional Chances	Outcome 3
10.3	Number of ongoing transfers from statements of educational need/learning difficulty assessments (LDA) to education, health and care plans (EHCP)					184	273	184	301	305			↑	An additional 4 staff have been recruited to the SEND team dedicated to transfer work and this is clearly evident in the increased number of transfers in progress.	6 Additional Needs Additional Chances	Outcome 3
10.4	Total number with an education, health and care plan (EHCP) [accumulative]					794	554	794	880	982			↑	This is a steadily improving picture and has increased from 49% to 54% of the total number between quarter 1 and quarter 2. A continued momentum, as demonstrated by the number of transfers, should see this percentage improve still further in quarter 3.	6 Additional Needs Additional Chances	Outcome 3
10.5	Total number with an education, health and care plan (EHCP) or statement of educational need					1775	1689	1775	1784	1828				Total number as a proportion of our 0-17 population per 10,000 indicate that we are comparable with both the NW, Statistical neighbours and England average.	6 Additional Needs Additional Chances	Outcome 3

CHESHIRE EAST COUNCIL

Children and Families Overview and Scrutiny Committee

Date of Meeting: 28th November 2016
Report of: Nigel Moorhouse, Director of Children's Social Care
Subject/Title: Progress Report on the Children and Young People's Improvement Plan

1.0 Report Summary

- 1.1. This report updates the Children and Families Overview and Scrutiny Committee on the progress against the Children and Young People's Improvement Plan.

2.0 Recommendation

- 2.1 That Children and Families Overview and Scrutiny Committee:
- Notes the progress achieved against the Improvement Plan, as set out at Appendix 1 and 2, respectively.
 - Endorses the progress achieved so far and the proposal for the new Improvement Plan

3.0 Reasons for Recommendations

- 3.1 Children and Families Overview and Scrutiny Committee has a responsibility to ensure that sufficient progress is being made to address the 25 recommendations for improvement identified by Ofsted in its 2015 inspection report of Children's Services.

4.0 Wards Affected

- 4.1 The Improvement Plan covers all wards in Cheshire East.

5.0 Local Ward Members

- 5.1 As above.

6.0 Policy Implications

- 6.1 There are no policy implications.

7.0 Financial Implications

- 7.1 If we do not make maintain our progress against the Improvement Plan and we are re-inspected and our services are found to be inadequate, this will have a significant financial impact.

8.0 Legal Implications

- 8.1 The Improvement Plan supports the Council's statutory obligations in relation to our work with children and families.

9.0 Risk Management

- 9.1 Robust arrangements are in place for scrutinising progress against our plan; progress updates and performance are scrutinised on a bimonthly basis by the Director of People's Services, who challenges the Director of Children's Social Care and Heads of Service on progress. The LSCB, CCG Governing Bodies, and Health and Wellbeing Board receive regular updates on progress to ensure partners are held accountable for partnership progress against the plan.
- 9.2 The Department for Education (DfE) have been monitoring our progress against the Improvement Plan to ensure we continue to make sufficient improvements to our services. The DfE have confirmed that they are satisfied with our progress to date and that we will continue to drive improvements independently, and will recommend to the Minister that we no longer need to be subject to monitoring. This is good reassurance, and recognition of the fact that we are making good progress.

10.0 Background and Options

- 10.1 The Improvement Action Plan was endorsed by the Health and Wellbeing Board in November 2015 and subsequently approved by the Department for Education (DfE). Appendix 1 provides an annual review of progress since the inspection in July 2015. This review will inform the development of the new Improvement Plan for 2017. Appendix 2 sets out progress against the key quantitative measures to assess impact of the plan.
- 10.2 Progress against the plan is set out under the four key objectives below:
- Embedding listening to and acting on the voice of children and young people throughout services
 - Ensuring frontline practice is consistently good, effective and outcome focused
 - Improving senior management oversight of the impact of services on children and young people
 - Ensuring the partnership effectively protects and ensures good outcomes for all children and young people in Cheshire East
- 10.3 In summary, significant activity has taken place since the inspection, and a number of recommendations have now been fully met. The remaining recommendations concern the key cornerstones of practice and providing a consistently good quality of practice, which will require a longer timeframe to

achieve the shift in culture and practice to ensure services reach the 'good' level achieved by the Adoption Service. An expression of interest to adopt Signs of Safety as our way of working within Children's Social Care has been submitted to the DfE's Innovation Fund. This will support us to achieve the culture shift we need to deliver good, sustainable outcomes for families and ensure children and young people are at the centre of our service. This will be the focus of the Improvement Plan for 2017.

11.0 Access to Information

The background papers relating to this report can be inspected by contacting the report writer:

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Cheshire East Children and Young People's Improvement Plan to meet the Ofsted Recommendations



Creating a
great place to
be young



Progress Report July 2016

Improvement Progress Report July 2016

Overview of this Report:

This report reviews our progress to date against the recommendations from the Ofsted inspection; we are now one year on from the inspection period. This report evaluates where our key areas are for further development in order to inform the new improvement plan for November 2016-17.

Overview of the Quality of Services:

Children are safe in Cheshire East, and there is good quality practice taking place with families. Audits show that thresholds are being applied appropriately at ChECS (97%), and social workers are effectively identifying and challenging safeguarding concerns (95%), and taking the right action at the right time to protect children (94%). Action by social workers and other professionals is resulting in improved outcomes for our children and young people in the vast majority of cases (86%).

Children are being seen regularly (89%), and their views and wishes are reflected in assessments and plans (80%). The number of children being taken into care has increased, with the number of children on section 20 decreasing, this is now down to 14% in June 2016 from 18% in April 2016, which is further evidence that the protection system is operating effectively.

Overall, the majority of our social work practice requires improvement (66%) with some good practice (22%). We have high aspirations for our children and young people, and we continue to relentlessly drive improvements and scrutinise practice to continually learn, reflect and develop our services further.

There is evidence of much higher proportions of good practice when considering specific elements of work, for example the majority of child protection plans in the last audit were judged to be of good quality (64%) and 46% of plans for cared for children were judged as good quality.

In terms of overall judgements, the quality of casework has remained at roughly the same level over the last 12 months. Requires improvement is a broad category in terms of the quality of work it covers, so it will take time before we see a significant shift in terms of the quality of work. This broad category is screening significant improvements that have been achieved; new processes within teams have been introduced this year, and arrangements for driving progress and monitoring and tracking outcomes for children and young people are now much tighter than they were during and prior to the inspection.

Significant Improvements Achieved:

- Action by social workers and other professionals is resulting in **improved outcomes for our children and young people in the vast majority of cases** (86%).
- **Children are being seen regularly** (89%), and their **views and wishes are reflected** in assessments and plans (80%).
- There is **good quality work at the front door**. ChECS show a clear trajectory of progress, and around 50% of work within ChECS is good or outstanding. Thresholds are being applied consistently (97%), there is clear management oversight (100%) and decisions are informed by information from partners (80%) and family history (100%).
- **More assessments are good quality** (37% combined assessments, 40% assessments for cared for children).
- The **majority of child protection plans are good quality** (64%), and **more plans are good quality for cared for children** (46%).
- The **quality of PEPs has significantly improved** in terms of the standard of PEP completion, and improvement in the quality of targets set by the school (90%).
- **Managers are scrutinising work** and that there is evidence to support this in their authorisation of plans (88%) and direction upon the allocation of work (98%). The quality of management decision making in the Permanence and ThroughCare Team has significantly improved from a low of 45% in Q2 to 80% in Q4.
- **Step up is appropriate**
- The **timeliness of requests from children's social care for initial health assessments has significantly improved**, from 4% within timescale in Q1 to 88% in June 2016, resulting in improvements in the timeliness of completion of the assessments, from a low of 12% in Q4 to 57% in June 2016.
- **Later in life letters are now being produced to a good standard** and processes are in place to quality assure these and support consistency.
- This year we have **nearly doubled the number of privately fostered children** and young people we are aware of in Cheshire East due to awareness raising activity.
- **We have significantly strengthened monitoring arrangements within children's social care**, including but not limited to the Safeguarding Performance Challenge Sessions and scrutiny of children and young people subject to a CP plan for more than 12 months, introducing the permanence case tracking meeting, and the tracker for care leavers in unsuitable accommodation.
- **Key strategic posts within Children and Families have been filled** and are driving improvements to and join up between services, and effective scrutiny, monitoring and challenge.
- **Recruitment and retention** continues to be a challenge to our services, but we have a robust recruitment and retention strategy in place and this is attracting the right people to work in Cheshire East.
- **Cheshire East's LSCB has achieved an Investing in Children Membership Award** this year for listening and engaging with children and young people. Two of our other services also hold this award – the Safeguarding Children in Educational

Settings (SCiES) Team, and the Missing from Home and Care or at Risk of Child Sexual Exploitation Service.

Ofsted recommendations that we can demonstrate we have fully met:

We can demonstrate that we have made fully met the following recommendations:

- *11. Improve the implementation of delegated authority so that carers are clear about what decisions they can make and children do not experience delays.*
- *17. Ensure later-in-life letters provide details of all known information, are written in plain English, and are accessible to children so that they understand their stories.*
- *13. Ensure audit arrangements have a sharper focus on looked after children.*
- *14. Ensure that comprehensive and clear data and performance information are provided to managers and strategic leaders to enable them to better understand, oversee and scrutinise performance. This includes ensuring the accuracy of the information provided through the electronic recording system so that managers have effective oversight of frontline practice.*
- *16. Strengthen commissioning arrangements to ensure that services meet the needs of families and children in need of help and protection and children looked after by:*
 - *Reviewing the use of foyer accommodation for 16-17 year olds*
 - *Ensuring that rigorous risk assessments are undertaken before the placement of young people in foyer or hostel accommodation, and review the practice of using this provision*
 - *care leavers who are homeless*
 - *private fostering and connected persons' arrangements to ensure that these arrangements are suitable and comply with regulations*
 - *Ensuring sufficient health provision for older looked after children and care leavers*
 - *Increasing the capacity of advocacy services to support children and young people identified as in need.*
- *151: Complete work to develop the LSCB performance management framework so that service effectiveness can be evaluated rigorously across all agencies*
- *152a: Provide regular scrutiny of services for looked after children.*
- *154. Develop links with the Local Family Justice Board so that CESCIB can monitor how well the needs of children in public and private law proceedings are met.*
- *156: Improve the influence of CESCIB in the work of the Health and Wellbeing Board to ensure that safeguarding is embedded within its priorities.*
- *158: Implement a protocol that outlines when the National Panel should be notified about SCRs and incidents in order to strengthen scrutiny of decision-making.*

These will now be monitored through existing business as usual processes, subject to agreement from the Health and Wellbeing Board, and will no longer be monitored

through the Improvement Plan for 2016-17. A self-evaluation against all the Ofsted recommendations will be undertaken in July 2017.

Ofsted recommendations we will monitor for sustained impact:

For a number of recommendations, activity has been undertaken which has resulted in improved performance. As we cannot yet be assured that impact is sustained, performance will remain monitored over the next six months for the following recommendations:

- *15. Ensure that learning from complaints leads to clear action plans and that these are implemented, tracked and reviewed to inform and improve practice.*
- *1. Strengthen senior managers' oversight and monitoring of:*
 - *complex cases where there are historic drift and delay in taking decisive action*
- *12. Improve the timeliness of initial health assessments so that children who become looked after have their own health needs assessed within the expected timescales.*
- *155: Review the arrangements for monitoring the quality of private fostering work.*

Activity to meet these recommendations will not be included within the Improvement Plan for 2016-17, as performance indicates the action already undertaken is resulting in the improvements needed. Performance in these areas will be continued to be monitored as part of the new plan and action will be taken if performance and impact is not sustained.

The next phase in our continual development:

Some of the recommendations are regarding the core elements of practice. As discussed earlier, requires improvement is a broad category, in order to achieve good services we need a whole service culture change to one that puts children and young people first. This is more difficult to achieve than the compliance we achieved in our first phase of improvement. Based on inspections in other authorities, it is estimated that improvement from requires improvement to good takes about three years to achieve.

As we move into the next phase of our service development, we will be moving away from the recommendations prescribed by Ofsted to focus on the areas that we know are our key areas for improvement. All the Ofsted recommendations which are outstanding will remain referenced to our key areas, but we feel it is important to be driving and shaping developments to our own narrative, and focusing this around our mission to put children and young people first in our services. A self-evaluation against the recommendations will be completed at the end of next year (July 2017) to ensure our progress against these is evaluated and documented.

This year we will be implementing a new delivery model for children's social care to change the culture of our work to one that puts children and young people first.

Implementing strength-based delivery models has been shown to be effective in other local authorities in achieving culture change, improving outcomes for children and young people, reducing the number of children brought into care, and reducing demand to higher level services. We are confident that will provide the step and culture change we need to achieve consistently good quality services.

We are also implementing a targeted approach to improvement across the partnership to develop a shared culture and ambition for children and young people in Cheshire East, and improve the quality, consistency and ownership of partnership work. This approach will focus on key practice areas each month under a shared quarterly theme, and will act as a campaign for change within agencies to raise awareness of good practice and expectations, and provide professionals with the mandate and support to challenge instances of poor practice.

Areas for Improvement for 2016-17:

We need to ensure our services put children and young people first, and understand their daily lived experience. We need to work inclusively with our families - being clear about what impact situations are having on children and young people, what intervention will entail, and what we want to achieve together with them to improve outcomes for our children and young people.

We want to ensure that all our children and young people achieve good outcomes, and that families can sustain these outcomes once services are no longer involved. Supporting families to take responsibility, support each other through wider family networks, and develop the skills to solve their own problems and keep their children safe will be a key element of the new delivery model.

Our key areas for development are given overleaf along with the links to the Ofsted recommendations.

Area	Link to Recommendation
Quality of management oversight, support and challenge: <ul style="list-style-type: none"> Putting children and young people first - leading good practice and challenging delays Recording management directions and rationale for decisions Good quality supervision which evaluates CPD and links to PDPs 	<p><i>3. Ensure that supervision is reflective, challenging and consistently focuses on continual professional development.</i></p> <p><i>6. Improve the quality of recording so that all key discussions and decisions about children and their families, including management oversight, are clearly recorded.</i></p>
Quality of social work practice: <ul style="list-style-type: none"> Putting children and young people first – demonstrating an understanding of their lived experience Focused and purposeful work, and SMART plans 	<p><i>6. Improve the quality of recording so that all key discussions and decisions about children and their families, including management oversight, are clearly recorded.</i></p> <p><i>7. Strengthen frontline practice to ensure</i></p>

<ul style="list-style-type: none"> ○ Analysis of the salient issues and recording rationale for decisions ○ Plans have clear contingencies ○ Linking direct work to the plan ○ Using history to inform decisions and assessments ○ Updating assessments in response to new information, e.g. return home interviews ○ Professional curiosity and continual questioning ○ High ambition for children and young people ○ Concise recording ○ Timeliness of private fostering and connected persons arrangements 	<p><i>effective action is taken to support children at risk of child sexual exploitation and those who go missing.</i></p> <p><i>8. Ensure assessments for children in need of help and protection and children looked after are timely, consistently consider the full range of children's needs, contain thorough analysis and are routinely updated to reflect changes in circumstances.</i></p> <p><i>9. Ensure that plans to help children in need of help and protection, looked after children, and care leavers, are specific, clear, outcome-focused and include timescales and contingencies so that families and professionals understand what needs to happen to improve circumstances for children. This includes improving the clarity of letters before proceedings so that the expectations of parents are clear.</i></p>
<p>Involving families:</p> <ul style="list-style-type: none"> ○ Hearing the voice of children and young people ○ Involving families in creating the plan and identifying strengths ○ Demonstrating the views of children and young people, parents and carers on the salient issues ○ Clear communication on why we are involved and what needs to change ○ Timely information sharing ○ Working with the whole family and wider network ○ Plans are clearly evaluated ○ We are creative in our approach to support families ○ We seek feedback from and listen to families on what our areas for improvement are and take action ○ Use of family group conferencing 	<p><i>16. Strengthen commissioning arrangements to ensure that services meet the needs of families and children in need of help and protection and children looked after by:</i></p> <ul style="list-style-type: none"> • <i>Improving the use of family group conferences so that all possible options for children are consistently explored</i>
<p>Quality of oversight, support and challenge from IROs:</p> <ul style="list-style-type: none"> ○ Putting children and young people first - leading good practice and challenging delays ○ Evaluating the impact of Practice Alerts ○ 	<p><i>2. Ensure the challenge provided by child protection chairs and independent reviewing officers (IRO) addresses drift and improves planning for children</i></p>
<p>Involving key professionals:</p> <ul style="list-style-type: none"> ○ In strategy discussions 	<p><i>5. Ensure that strategy meetings and decisions are informed by relevant</i></p>

<ul style="list-style-type: none"> o In communication – including GPs o In multi-agency meetings o In evaluating plans o Improving the join up with adult services o Addressing gaps between services 	<i>partner agencies.</i>
Using the right tools: <ul style="list-style-type: none"> o Graded care profile o CSE screening tool o Toxic Trio Assessment tool 	<i>153. Evaluate the impact of the neglect strategy and disseminate the findings to help agencies improve their practice.</i>
Good early help <ul style="list-style-type: none"> o Families receive a service when they need it o CAFs are good quality o We have a good early help offer which meets the needs of our families 	<i>4. Ensure that where children do not meet the threshold for social work intervention their circumstances are considered promptly and they receive appropriate and timely early help.</i>
Sustainable outcomes and robust step down	<i>10. Ensure that decisions to step down or close cases are appropriate and that management rationale to do so is clearly recorded.</i>
Joint Strategy for Female Genital Mutilation	<i>157: Develop and implement a coordinated strategy in relation to female genital mutilation so that the impact of multi-agency work within Cheshire East can be evaluated and understood.</i>
Strengthen work to tackle Neglect <ul style="list-style-type: none"> o Use of the graded care profile o Evaluation of the neglect strategy 	<i>153. Evaluate the impact of the neglect strategy and disseminate the findings to help agencies improve their practice.</i>

Partnership Improvement:

Improvements to partnership working will be owned and driven by the LSCB. The LSCB has agreed four key priorities for 2016-18:

- 1. Implementation of the neglect strategy**
- 2. Improving the effectiveness of Child Protection Conferences**
- 3. Improving the Board's role and traction in relation to early help**
- 4. Delivery and scrutiny of the children and young people's improvement plan.**

The partnership improvement and development plan will sit within the LSCB Business Plan, and progress will be driven and scrutinised by the LSCB. Areas that will be led by the LSCB are included overleaf.

Area	Link to Recommendation
Quality of partnership practice: <ul style="list-style-type: none"> o Putting children and young people first – demonstrating an understanding of their lived experience o Focused and purposeful work, and SMART plans o Analysis of the salient issues and recording rationale for decisions o Plans have clear contingencies o Linking direct work to the plan o Using history to inform decisions and assessments o Updating assessments in response to new information, e.g. return home interviews o Professional curiosity and continual questioning o High ambition for children and young people 	<p><i>9. Ensure that plans to help children in need of help and protection, looked after children, and care leavers, are specific, clear, outcome-focused and include timescales and contingencies so that families and professionals understand what needs to happen to improve circumstances for children. This includes improving the clarity of letters before proceedings so that the expectations of parents are clear.</i></p>
Involving families: <ul style="list-style-type: none"> o Hearing the voice of children and young people o Involving families in creating the plan and identifying strengths o Demonstrating the views of children and young people, parents and carers on the salient issues o Clear communication on why we are involved and what needs to change o Timely information sharing o Working with the whole family and wider network o Plans are clearly evaluated o We are creative in our approach to support families o We seek feedback from and listen to families on what our areas for improvement are and take action 	
Involving key professionals: <ul style="list-style-type: none"> o In strategy discussions o In communication – including GPs o In multi-agency meetings o In evaluating plans o Improving the join up with adult services o Addressing gaps between services 	<p><i>5. Ensure that strategy meetings and decisions are informed by relevant partner agencies.</i></p>
Using the right tools: <ul style="list-style-type: none"> o Graded care profile o CSE screening tool o Toxic Trio Assessment tool 	<p><i>153. Evaluate the impact of the neglect strategy and disseminate the findings to help agencies improve their practice.</i></p>

Good early help <ul style="list-style-type: none"> o Families receive a service when they need it o CAFs are good quality o We have a good early help offer which meets the needs of our families 	<i>4. Ensure that where children do not meet the threshold for social work intervention their circumstances are considered promptly and they receive appropriate and timely early help.</i>
Sustainable outcomes and robust step down	<i>10. Ensure that decisions to step down or close cases are appropriate and that management rationale to do so is clearly recorded.</i>
Joint Strategy for Female Genital Mutilation	<i>157: Develop and implement a coordinated strategy in relation to female genital mutilation so that the impact of multi-agency work within Cheshire East can be evaluated and understood.</i>
Strengthen work to tackle Neglect <ul style="list-style-type: none"> o Use of the graded care profile o Evaluation of the neglect strategy 	<i>153. Evaluate the impact of the neglect strategy and disseminate the findings to help agencies improve their practice.</i>
Application of thresholds	<i>152b: Monitor and review the application by partner agencies of the threshold framework and take appropriate action where necessary</i>

Next Steps:

Engagement with staff and partners, and other key stakeholders, will take place in Autumn to inform the development of the new plan for 2016-17. This plan will be informed by feedback from children, young people and parents/ carers – the key areas they want to see improve and how they want us to support them.

Quarterly Improvement Performance Scorecard - June 2016

No	Rec	Rec Summary	Measure	Thresholds			Q1 15/16	Q2 15/16	Q3 15/16	Q4 15/16	Q1 16/17	Comment/Additional Information
				Ri	Good	Outs.						
Listening to and acting on the voice of children and young people												
1	15	Learning from complaints	Percentage of complaints resolved at stage 1	75-84	85-93	95-100	80%	94%	100%	80%	100%	Of the 25 new complaints received in Q1: 13 have been responded to and closed at Stage 1; 8 are ongoing or outstanding; 1 is suspended; and 3 have expressed dissatisfaction with the Stage 1 response and further work including meetings is underway to try and resolve at Stage 1. No complaints have been escalated to Stage 2 as yet.
Frontline practice is consistently good, effective and outcome focused												
2	2	CP Chairs and IROs address drift and improve planning	Number of Practice Alerts made				58	60	28	23	51	The number of Practice Alerts has increased. The Practice Alert Process has been revised to increase consistency in raising alerts, so it expected that the number of alerts focused on these priorities will increase in the next quarter.
3			Percentage of Practice Alerts resolved at formal stage 1 or before	75-80	81-85	86-90	100%	100%	100%	100%	100%	All were resolved without needing further escalation which is very positive and shows professionals are responding to practice alerts.
4			Percentage of Child Protection Review Conferences held within timescale	85-89	90-94	95-100	82%	92%	98%	100%	99%	The improvement on the performance in this area has been maintained for 2 quarters and is ahead of stat neighbour and national average. This is reflective of improved practice around timely notification and arrangement of review conferences. It is important to note that there were always be the occasional unforeseen circumstance that will prevent performance being 100% continually.
5			Percentage of Child Protection Plans open for more than 15 months	16-20	10-15	Below 10	11%	6%	6%	6%	7%	All CP plans over 12 months are scrutinised closely by Safeguarding and frontline teams to ensure plans are appropriate and achieving aims in a timely fashion. This equates to 19 children and young people.
6			Percentage of children and young people's views that are heard at Child Protection Conferences	70-80	81-90	91-100	87%	94%	95%	90%	88%	This measure is giving an inaccurate figure due to coding in the case management system. This is now being addressed so we should see a subsequent increase in performance. Current service information suggests performance is close to 100%. This measure reflects all children over the age of 4 where their views have been articulated via a range of participation methods at both initial and review conferences.
7	4	Timely Early Help	Percentage of decisions made within 1 working day	70-80	81-90	91-100					71%	The standard for decisions in relation to Early Help cases is within 3 working days. For this quarter 84% of cases had a decision and were passed on to services within that timeframe.
8	7	Strengthen frontline practice for CSE and MFH	Percentage of cases where return interviews have been completed following missing from home or care (Individuals)	65-75	76-80	81-90		71%	69%	71%	65%	45 return interviews were not fully completed in Q1. Some parents refuse return home interviews as they are voluntary - this accounted for 52% of those not completed, and is usually due to the incident being the first time the young person has been missing, or due to a one off incident, or as a result of mis-communication on curfews, under which circumstances parents feel an interview is not necessary. 18% were due to young people declining the service. Other circumstances where interviews were not conducted include instances when the young person was not available for the interview due to going missing on another occasion, and instances where workers were still trying to visit the child at the point of data collection. Where a Cared for Child declines the service the social worker would address the missing incident in their visits and complete a RHI form but this would not captured in this figure. Cheshire East are still receiving a high number of notifications being reported into the service with an increase this quarter of 16%. It currently takes 3 days on average to see a child/ young person, and complete a return interview which is consistent with the last quarter. The demographics of the young people going missing are the same as those in the last quarter with children averaging around 15 years old.
9	8	Quality of assessments	Percentage of children and young people seen within 10 days of the combined assessment start date	75-84	85-94	95-100	29%	54%	59%	65%	62%	Whilst an improved picture audit suggests that the figure for this is higher and work is ongoing to ensure the true picture can be readily extracted and reported
10	9	Quality of plans	Percentage of children and young people subject to a child protection plan for a second or subsequent time (cumulative)	15-20	10-14	5-9	23%	21%	21%	19%	23%	Whilst this is showing a continued upward trend our most recent comparison data in the NW (from Q3) indicated that the majority of authorities were reporting rates higher than the national average for 14-15, with %'s ranging from 5.9% to 30.3%. Repeat plans for Q1 represent a small number of families with multiple siblings.
11	10	Appropriate step down or closure	Percentage of repeat referrals (cumulative over a 12 Month Period)	25-30	20-24	Below 20	25%	22%	22%	22%	25%	Whilst there is a small increase in the number of re-referrals the rate of re-referral remains fairly constant. This continues to illustrate the need to develop better early help for complex families and to support agencies in continuing their lead role with the family. An audit was completed on all children subject to a repeat plan and the common reasons for this were identified and have been fed back to the service to improve practice.
12	12	Timeliness Initial Health Assessments	Percentage of initial health assessments requested within 48 hours of coming into care	70-80	81-90	91-100	16%	4%	4%	20%	69%	During the first quarter of 2016-2017 there were 57 children who entered the care system, 55 of which required IHA Part A completing within 48 hours of entering care. The number of IHA Part A being completed within timescale has increased each month from 42% in April 2016 to 88% by the end of June 16 with a total of 69% for Quarter 1. This is due to a review and change in process to enable operational efficiency
13			Percentage of initial health assessments completed by paediatricians within 20 days	70-80	81-90	91-100	41%	32%	29%	12%	36%	50 children in Q1 required an IHA completing within 20 working days. Seven did not require completion due to one transferring from another local authority with a completed IHA and six returned home within 20 days of entering care. The number of IHA completed within timescale has increased each month from 24% in April 2016 to 57% in June 2016, with a total of 36% for Quarter 1 2016-2017.
Senior management oversight of the impact of services on children and young people												
14	1	Senior managers' oversight of connected persons	Percentage of Reg 24 assessments presented to the fostering panel in statutory timescales	80-89	90-94	95-100	NA	100%	66%	100%	67%	3 Reg 24 Assessments were approved by the Fostering Panel in the last 3 months. Extension requested on 1 assessment due to checks not being returned within timescales.
15	1/155	Senior managers' oversight of private fostering	Percentage of Private Fostering cases visited in timescales	80-89	90-94	95-100	100%	67%	83%	93%	96%	7 young people received statutory visits within the quarter, 21 statutory visits completed, 1 visit went outside of timescales due to a failed visit.
16			Percentage of Private Fostering cases that are reviewed by the ADM within 45 working days of notification	80-89	90-94	95-100	0%	0%	0%	0%	0%	4 cases were due for sign off by ADM this quarter but none were within timescales. Further training on Private Fostering has been offered to teams
17	1	Senior managers' oversight of YP in unsuitable accomodation	Number of care leavers recorded as homeless						3	9	0	We currently have no care leavers recorded as homeless
18	16	Strengthen commissioning arrangements	Number of children and young people using advocacy				41	39	46	71	283	87 in April, 95 in May, and 101 in June. The numbers have risen due to the automatic referral by CP Chairs for Child Protection Advocacy
19			Number of children and young people using advocacy that are at risk of CSE				0	1	1	3	8	All children subject to CSE CP plans are referred for advocacy - many attend the meetings themselves and do not want an advocate. In the last quarter 2 young people have used the advocacy service.
20			Number of children who agreed to access advocacy services who did not receive the service prior to the first Child Protection review.				0	3	1	0	2	2 siblings due to not being able to make contact before conference so the advocate attended conference and made contact with family for their next review.

21			Average time young people wait to be matched with an independent visitor				5-6 months	4-7 months	3 months	2 months	2- 3 months	We have had 4 matches this quarter. An IV stocktake has been carried out this quarter and the report and analysis will be provided to CLT.
The partnership effectively protects and ensures good outcomes for all children and young people in Cheshire East.												
22	153	Impact of the neglect strategy	Percentage of children and young people on child protection plans due to neglect	2% reduction	5% reduction	10% reduction	56%	48%	47%	44%	47%	Slightly higher than last quarter but still comparable with Stat Neighbours
23			Percentage of plans for neglect which have had a previous plan for neglect	20% - 16%	15%-10%	Below 10%	11%	16%	13%	17%	12%	As at 31/3/2016 there were 35 individuals on a plan for neglect that had been subject to a plan previously. Of these 15 has been subject to a previous plan for neglect.

Annual Improvement Performance Scorecard - March 2016

No	Rec	Rec Summary	Measure	What it Shows	Thresholds			Annual Figure 2015-2016	Additional Information
					Requires Improvement	Good	Outstanding		
Listening to and acting on the voice of children and young people									
1	15	Learning from complaints	Number of compliments received to Children's Social Care	The number of compliments should increase as we improve services	High is good			61	The number of compliments received this year has exceeded last year's figure of 42.
2			Number of complaints around particular themes.	The number of complaints on specific themes should reduce as these themes are addressed.				99	The number of complaints received last year in 2014-15 was 98, therefore the amount of complaints has stayed more or less the same.
Frontline practice is consistently good, effective and outcome focused									
3	2	CP Chairs and IROs address drift and improve planning	Number of good Practice Alerts made	Good Practice Alerts show that there is good practice and this is being recognised by IROs.				195	More good practice alerts have been made than those that challenge bad practice (157) which is positive, and shows that there is evidence of good practice and that this is being recognised.
4	3	Supervision is reflective, challenging and focused on CPD	Percentage of PDPs in place (ensuring gaps in practice identified through supervision are addressed)	All staff in post over 6 months should have a personal development plan (PDP) in place.	70-79	80-89	90-100	69%	This is in line with the wider Council's performance which overall has 71% of plans in place. However, this does also include a large proportion of new starters, who would not have a PDP until they had completed their 6 month probation period, so performance on this measure is higher than this figure suggests. We will be working to increase our performance in this area and a workshop will be given to social work staff and managers at the Practice and Performance workshops in September on PDPs to improve engagement with process and the quality and continued use and evaluation of development plans.
5	7	Strengthen frontline practice for CSE and MFH	Percentage of Social Workers who have been trained in using the CSE tools for assessment and intervention	The amount of Social Workers who have had the training to support them to work effectively with children and young people at risk of child sexual exploitation.					The core training offer for social workers has been launched in March 2016, which includes CSE training. The takeup of this offer will be closely monitored and evaluated over the next 6 months, and reporting will be available against this measure. Sessions on CSE have been provided to social work staff through the Practice and Performance workshops in December 2015. CSE training is also available through e-learning. Members of the CSE/ MFH team also sit in the social work teams once a month to promote informal support.
6			Percentage of children and young people reporting that they feel safer at the end of the intervention for CSE	Children and young people feel safer as a result of the work that was completed to address the CSE risks	70-79	80-89	90-100	100%	This quarter saw an increase in work related to teenage boys aged between 13 and 16. Prior to this quarter it was largely girls being worked with in this age bracket. The girls coming to the attention of the service have been largely very young or in the 17-18 year old bracket with a smaller percentage being in the 13-16 age range. The service has further strengthened partnerships with other agencies and service in this quarter which has had an impact on the offer of support available to professionals working with these vulnerable young people and more seamless safeguarding.
7	8	Quality of assessments	Percentage of assessments completed within 15 days <i>*Threshold only up to 50% as any higher would not be considered outstanding</i>	The amount of assessments completed within the target of 15 days to drive improvement to timeliness for assessments.	20-24	25-29	30-50*	28%	This measure is used to drive progress and ensure there is not unnecessary delay for children and young people. Performance on this measure is good, but we know from audit that the quality of assessments still require improvement overall.
8			Percentage of assessments completed within 35 days	The amount of assessments that are completed in line with Cheshire East's practice guidance.	65-70	71-75	76-100	78%	This shows that assessments are being completed in a more timely fashion and that the majority of children and young people don't experience delays, however we know that the quality of assessments are not at the level we want them to be.
9	11	Implementation of delegated authority	Percentage of Foster Carers that are clear on what decisions are delegated to them (Foster carer annual survey)	Foster carers are clear on the decisions they can make so this does not cause delays for children and young people	70-79	80-89	90-100	98%	In the last Foster Carers' Survey in June 2016, 98% (53) were aware of delegated authority. 82% (37) felt they were supported to make reasonable and appropriate decisions using delegated authority.
Senior management oversight of the impact of services on children and young people									
10	1/155	Strengthen senior managers' oversight of private fostering	Number of open Private Fostering cases	Private Fostering is identified				14	The Annual Figure last year 2014 - 2015 was 6, this year we have nearly doubled this figure with eleven new arrangements and 3 carried forward from 2014-2015. We can attribute this to the awareness raising efforts of the LSCB Private Fostering Sub Group who have ensured that Private Fostering Recognition is on the agenda in Cheshire East. In particular we have seen an increase in education referrals regarding Private Fostering. In September 2016 a Private Fostering Refresher presentation was delivered at the quarterly Practice and Performance Workshop which impacted on the new referrals in Quarter 3. In addition to this, lots of work has been completed to improve the links and communication between the Safeguarding and Quality Assurance Unit and the CIN/CP Teams which has resulted in regular informal discussions regarding potential private fostering arrangements and requests for information and support on existing cases.
11	1	Strengthen senior managers' oversight of YP in unsuitable accomodation	Percentage of care leavers in homeless accommodation that have an appropriate risk assessment which references the risk presented by older residents	Risk assessments are being completed which consider the risks from other residents in order to protect young people	80-89	90-94	95-100		A newly revised risk assessment tool is being implemented from April 2016, as this has just been implemented reporting is not yet available for this measure. The new risk assessment tool has been sent out to every Personal Advisor and Social Worker working with these young people, and we are in the progress of re-assessing them using this new tool. Outcomes for all of these young people are being monitored by the Service Manager.
12	16	Strengthen commissioning arrangements	Number of young people placed in foyer accommodation	Young people in foyer accommodation are identified and monitored				11	We know how many young people are placed at Foyer accomodation. As of the first week of April this was 11, 5 of which are care leavers. Those that are care leavers have personal advisors who are risk assessing their placements using the new risk assessment tool. This risk assessment tool is also being rolled out to other parts of the service to ensure consistency of risk assessments for all young people placed in Foyer accomodation. A tracker reviews all young people placed at the Foyer on a monthly basis.
13			Percentage of children and young people that were pleased with the advocacy or independent visiting service they received	Children and young people felt that the service met their needs and their views were represented	75-79	80-89	90-100	94%	We carried out 39 Outcome wheels with children and young people and under Having my Say there was an increase in score in 37 of them. We also carried out a National Service User satisfaction survey in December, we had 30 returns 21 were very happy and 9 were happy. We are looking at doing this every quarter rather than twice a year and splitting it into Issue based Advocacy, CP Advocacy and Independent Visitor to give more accurate results
The partnership effectively protects and ensures good outcomes for all children and young people in Cheshire East.									
14			Number of FGM cases identified in any age group that are recorded on the FGM enhanced dataset	Evidence that healthcare professionals are identifying and recording FGM				3	

15		FGM Strategy	Number of FGM cases identified in young people undr 18 reported to Cheshire Police via 101	Professionals are reporting FGM in accordance with the Serious Criome Act (2015)		0	
16			Number of Police investigations following reported cases of FGM	Female Genital Mutilation is responded to and investigated		0	
17	158	National Panel is notified about SCRs	Number of cases referred to Ofsted	Cases are referred to Ofsted		2	Two cases were notified by CSC in 2015-16.
18			Number of cases referred for consideration for a case review	Cases are considered for case reviews		3	3 referrals were received but not met the criteria for a SCR. 2 multi-agency reviews were held and 1 single agency review. 1 True for Us exercise was carried out.
19			Number of single agency case reviews held	Number of cases meeting this level of review		1	1 case (SAR001) was reviewed this year on a single agency basis.
20			Number of reflective reviews held	Number of cases meeting this level of review		3	3 reflective reviews have been held and lessons learnt have been disseminated through LSCB communications and the Sfaeguarding Children Operational Group (SCOG)
21			Number of serious case reviews held	Number of cases meeting this level of review		0	There have been no serious case reviews held as no cases this year met the criteria.
22			Number of 'True for Us' reviews held	Number of opportunities for learning we have used to develop services in Cheshire East		1	City and Hackney true for us exercise completed and reviewed for learning
23			Number of cases referred to the National Panel	Compliance with the protocol and that cases are referred to the National Panel		1	1 case which did not meet the criteria for SCR was notified to the NPE for verification by LSCB Chair.

Quarterly Improvement Performance Scorecard - June 2016

No	Rec	Rec Summary	Measure	Thresholds			Q1 15/16	Q2 15/16	Q3 15/16	Q4 15/16	Q1 16/17	Comment/Additional Information
				Ri	Good	Outs.						
Listening to and acting on the voice of children and young people												
1	15	Learning from complaints	Percentage of complaints resolved at stage 1	75-84	85-93	95-100	80%	94%	100%	80%	100%	Of the 25 new complaints received in Q1: 13 have been responded to and closed at Stage 1; 8 are ongoing or outstanding; 1 is suspended; and 3 have expressed dissatisfaction with the Stage 1 response and further work including meetings is underway to try and resolve at Stage 1. No complaints have been escalated to Stage 2 as yet.
Frontline practice is consistently good, effective and outcome focused												
2	2	CP Chairs and IROs address drift and improve planning	Number of Practice Alerts made				58	60	28	23	51	The number of Practice Alerts has increased. The Practice Alert Process has been revised to increase consistency in raising alerts, so it expected that the number of alerts focused on these priorities will increase in the next quarter.
3			Percentage of Practice Alerts resolved at formal stage 1 or before	75-80	81-85	86-90	100%	100%	100%	100%	100%	All were resolved without needing further escalation which is very positive and shows professionals are responding to practice alerts.
4			Percentage of Child Protection Review Conferences held within timescale	85-89	90-94	95-100	82%	92%	98%	100%	99%	The improvement on the performance in this area has been maintained for 2 quarters and is ahead of stat neighbour and national average. This is reflective of improved practice around timely notification and arrangement of review conferences. It is important to note that there were always be the occasional unforeseen circumstance that will prevent performance being 100% continually.
5			Percentage of Child Protection Plans open for more than 15 months	16-20	10-15	Below 10	11%	6%	6%	6%	7%	All CP plans over 12 months are scrutinised closely by Safeguarding and frontline teams to ensure plans are appropriate and achieving aims in a timely fashion. This equates to 19 children and young people.
6			Percentage of children and young people's views that are heard at Child Protection Conferences	70-80	81-90	91-100	87%	94%	95%	90%	88%	This measure is giving an inaccurate figure due to coding in the case management system. This is now being addressed so we should see a subsequent increase in performance. Current service information suggests performance is close to 100%. This measure reflects all children over the age of 4 where their views have been articulated via a range of participation methods at both initial and review conferences.
7	4	Timely Early Help	Percentage of decisions made within 1 working day	70-80	81-90	91-100					71%	The standard for decisions in relation to Early Help cases is within 3 working days. For this quarter 84% of cases had a decision and were passed on to services within that timeframe.
8	7	Strengthen frontline practice for CSE and MFH	Percentage of cases where return interviews have been completed following missing from home or care (Individuals)	65-75	76-80	81-90		71%	69%	71%	65%	45 return interviews were not fully completed in Q1. Some parents refuse return home interviews as they are voluntary - this accounted for 52% of those not completed, and is usually due to the incident being the first time the young person has been missing, or due to a one off incident, or as a result of mis-communication on curfews, under which circumstances parents feel an interview is not necessary. 18% were due to young people declining the service. Other circumstances where interviews were not conducted include instances when the young person was not available for the interview due to going missing on another occasion, and instances where workers were still trying to visit the child at the point of data collection. Where a Cared for Child declines the service the social worker would address the missing incident in their visits and complete a RHI form but this would not captured in this figure. Cheshire East are still receiving a high number of notifications being reported into the service with an increase this quarter of 16%. It currently takes 3 days on average to see a child/ young person, and complete a return interview which is consistent with the last quarter. The demographics of the young people going missing are the same as those in the last quarter with children averaging around 15 years old.
9	8	Quality of assessments	Percentage of children and young people seen within 10 days of the combined assessment start date	75-84	85-94	95-100	29%	54%	59%	65%	62%	Whilst an improved picture audit suggests that the figure for this is higher and work is ongoing to ensure the true picture can be readily extracted and reported
10	9	Quality of plans	Percentage of children and young people subject to a child protection plan for a second or subsequent time (cumulative)	15-20	10-14	5-9	23%	21%	21%	19%	23%	Whilst this is showing a continued upward trend our most recent comparison data in the NW (from Q3) indicated that the majority of authorities were reporting rates higher than the national average for 14-15, with %'s ranging from 5.9% to 30.3%. Repeat plans for Q1 represent a small number of families with multiple siblings.
11	10	Appropriate step down or closure	Percentage of repeat referrals (cumulative over a 12 Month Period)	25-30	20-24	Below 20	25%	22%	22%	22%	25%	Whilst there is a small increase in the number of re-referrals the rate of re-referral remains fairly constant. This continues to illustrate the need to develop better early help for complex families and to support agencies in continuing their lead role with the family. An audit was completed on all children subject to a repeat plan and the common reasons for this were identified and have been fed back to the service to improve practice.
12	12	Timeliness Initial Health Assessments	Percentage of initial health assessments requested within 48 hours of coming into care	70-80	81-90	91-100	16%	4%	4%	20%	69%	During the first quarter of 2016-2017 there were 57 children who entered the care system, 55 of which required IHA Part A completing within 48 hours of entering care. The number of IHA Part A being completed within timescale has increased each month from 42% in April 2016 to 88% by the end of June 16 with a total of 69% for Quarter 1. This is due to a review and change in process to enable operational efficiency
13			Percentage of initial health assessments completed by paediatricians within 20 days	70-80	81-90	91-100	41%	32%	29%	12%	36%	50 children in Q1 required an IHA completing within 20 working days. Seven did not require completion due to one transferring from another local authority with a completed IHA and six returned home within 20 days of entering care. The number of IHA completed within timescale has increased each month from 24% in April 2016 to 57% in June 2016, with a total of 36% for Quarter 1 2016-2017.
Senior management oversight of the impact of services on children and young people												
14	1	Senior managers' oversight of connected persons	Percentage of Reg 24 assessments presented to the fostering panel in statutory timescales	80-89	90-94	95-100	NA	100%	66%	100%	67%	3 Reg 24 Assessments were approved by the Fostering Panel in the last 3 months. Extension requested on 1 assessment due to checks not being returned within timescales.
15	1/155	Senior managers' oversight of private fostering	Percentage of Private Fostering cases visited in timescales	80-89	90-94	95-100	100%	67%	83%	93%	96%	7 young people received statutory visits within the quarter, 21 statutory visits completed, 1 visit went outside of timescales due to a failed visit.
16			Percentage of Private Fostering cases that are reviewed by the ADM within 45 working days of notification	80-89	90-94	95-100	0%	0%	0%	0%	0%	4 cases were due for sign off by ADM this quarter but none were within timescales. Further training on Private Fostering has been offered to teams
17	1	Senior managers' oversight of YP in unsuitable accomodation	Number of care leavers recorded as homeless						3	9	0	We currently have no care leavers recorded as homeless
18	16	Strengthen commissioning arrangements	Number of children and young people using advocacy				41	39	46	71	283	87 in April, 95 in May, and 101 in June. The numbers have risen due to the automatic referral by CP Chairs for Child Protection Advocacy
19			Number of children and young people using advocacy that are at risk of CSE				0	1	1	3	8	All children subject to CSE CP plans are referred for advocacy - many attend the meetings themselves and do not want an advocate. In the last quarter 2 young people have used the advocacy service.
20			Number of children who agreed to access advocacy services who did not receive the service prior to the first Child Protection review.				0	3	1	0	2	2 siblings due to not being able to make contact before conference so the advocate attended conference and made contact with family for their next review.

21			Average time young people wait to be matched with an independent visitor				5-6 months	4-7 months	3 months	2 months	2- 3 months	We have had 4 matches this quarter. An IV stocktake has been carried out this quarter and the report and analysis will be provided to CLT.
The partnership effectively protects and ensures good outcomes for all children and young people in Cheshire East.												
22	153	Impact of the neglect strategy	Percentage of children and young people on child protection plans due to neglect	2% reduction	5% reduction	10% reduction	56%	48%	47%	44%	47%	Slightly higher than last quarter but still comparable with Stat Neighbours
23			Percentage of plans for neglect which have had a previous plan for neglect	20% - 16%	15%-10%	Below 10%	11%	16%	13%	17%	12%	As at 31/3/2016 there were 35 individuals on a plan for neglect that had been subject to a plan previously. Of these 15 has been subject to a previous plan for neglect.

Annual Improvement Performance Scorecard - March 2016

No	Rec	Rec Summary	Measure	What it Shows	Requires Improvement	Good	Outstanding	Annual Figure 2015-2016	Additional Information
Listening to and acting on the voice of children and young people									
1	15	Learning from complaints	Number of compliments received to Children's Social Care	The number of compliments should increase as we improve services	High is good			61	The number of compliments received this year has exceeded last year's figure of 42.
2			Number of complaints around particular themes.	The number of complaints on specific themes should reduce as these themes are addressed.				99	The number of complaints received last year in 2014-15 was 98, therefore the amount of complaints has stayed more or less the same.
Frontline practice is consistently good, effective and outcome focused									
3	2	CP Chairs and IROs address drift and improve planning	Number of good Practice Alerts made	Good Practice Alerts show that there is good practice and this is being recognised by IROs.				195	More good practice alerts have been made than those that challenge bad practice (157) which is positive, and shows that there is evidence of good practice and that this is being recognised.
4	3	Supervision is reflective, challenging and focused on CPD	Percentage of PDPs in place (ensuring gaps in practice identified through supervision are addressed)	All staff in post over 6 months should have a personal development plan (PDP) in place.	70-79	80-89	90-100	69%	This is in line with the wider Council's performance which overall has 71% of plans in place. However, this does also include a large proportion of new starters, who would not have a PDP until they had completed their 6 month probation period, so performance on this measure is higher than this figure suggests. We will be working to increase our performance in this area and a workshop will be given to social work staff and managers at the Practice and Performance workshops in September on PDPs to improve engagement with process and the quality and continued use and evaluation of development plans.
5	7	Strengthen frontline practice for CSE and MFH	Percentage of Social Workers who have been trained in using the CSE tools for assessment and intervention	The amount of Social Workers who have had the training to support them to work effectively with children and young people at risk of child sexual exploitation.					The core training offer for social workers has been launched in March 2016, which includes CSE training. The takeup of this offer will be closely monitored and evaluated over the next 6 months, and reporting will be available against this measure. Sessions on CSE have been provided to social work staff through the Practice and Performance workshops in December 2015. CSE training is also available through e-learning. Members of the CSE/ MFH team also sit in the social work teams once a month to promote informal support.
6			Percentage of children and young people reporting that they feel safer at the end of the intervention for CSE	Children and young people feel safer as a result of the work that was completed to address the CSE risks	70-79	80-89	90-100	100%	This quarter saw an increase in work related to teenage boys aged between 13 and 16. Prior to this quarter it was largely girls being worked with in this age bracket. The girls coming to the attention of the service have been largely very young or in the 17-18 year old bracket with a smaller percentage being in the 13-16 age range. The service has further strengthened partnerships with other agencies and service in this quarter which has had an impact on the offer of support available to professionals working with these vulnerable young people and more seamless safeguarding.
7	8	Quality of assessments	Percentage of assessments completed within 15 days <i>*Threshold only up to 50% as any higher would not be considered outstanding</i>	The amount of assessments completed within the target of 15 days to drive improvement to timeliness for assessments.	20-24	25-29	30-50*	28%	This measure is used to drive progress and ensure there is not unnecessary delay for children and young people. Performance on this measure is good, but we know from audit that the quality of assessments still require improvement overall.
8			Percentage of assessments completed within 35 days	The amount of assessments that are completed in line with Cheshire East's practice guidance.	65-70	71-75	76-100	78%	This shows that assessments are being completed in a more timely fashion and that the majority of children and young people don't experience delays, however we know that the quality of assessments are not at the level we want them to be.
9	11	Implementation of delegated authority	Percentage of Foster Carers that are clear on what decisions are delegated to them (Foster carer annual survey)	Foster carers are clear on the decisions they can make so this does not cause delays for children and young people	70-79	80-89	90-100	98%	In the last Foster Carers' Survey in June 2016, 98% (53) were aware of delegated authority. 82% (37) felt they were supported to make reasonable and appropriate decisions using delegated authority.
Senior management oversight of the impact of services on children and young people									
10	1/155	Strengthen senior managers' oversight of private fostering	Number of open Private Fostering cases	Private Fostering is identified				14	The Annual Figure last year 2014 - 2015 was 6, this year we have nearly doubled this figure with eleven new arrangements and 3 carried forward from 2014-2015. We can attribute this to the awareness raising efforts of the LSCB Private Fostering Sub Group who have ensured that Private Fostering Recognition is on the agenda in Cheshire East. In particular we have seen an increase in education referrals regarding Private Fostering. In September 2016 a Private Fostering Refresher presentation was delivered at the quarterly Practice and Performance Workshop which impacted on the new referrals in Quarter 3. In addition to this, lots of work has been completed to improve the links and communication between the Safeguarding and Quality Assurance Unit and the CIN/CP Teams which has resulted in regular informal discussions regarding potential private fostering arrangements and requests for information and support on existing cases.
11	1	Strengthen senior managers' oversight of YP in unsuitable accomodation	Percentage of care leavers in homeless accommodation that have an appropriate risk assessment which references the risk presented by older residents	Risk assessments are being completed which consider the risks from other residents in order to protect young people	80-89	90-94	95-100		A newly revised risk assessment tool is being implemented from April 2016, as this has just been implemented reporting is not yet available for this measure. The new risk assessment tool has been sent out to every Personal Advisor and Social Worker working with these young people, and we are in the progress of re-assessing them using this new tool. Outcomes for all of these young people are being monitored by the Service Manager.
12	16	Strengthen commissioning arrangements	Number of young people placed in foyer accommodation	Young people in foyer accommodation are identified and monitored				11	We know how many young people are placed at Foyer accomodation. As of the first week of April this was 11, 5 of which are care leavers. Those that are care leavers have personal advisors who are risk assessing their placements using the new risk assessment tool. This risk assessment tool is also being rolled out to other parts of the service to ensure consistency of risk assessments for all young people placed in Foyer accomodation. A tracker reviews all young people placed at the Foyer on a monthly basis.
13			Percentage of children and young people that were pleased with the advocacy or independent visiting service they received	Children and young people felt that the service met their needs and their views were represented	75-79	80-89	90-100	94%	We carried out 39 Outcome wheels with children and young people and under Having my Say there was an increase in score in 37 of them. We also carried out a National Service User satisfaction survey in December, we had 30 returns 21 were very happy and 9 were happy. We are looking at doing this every quarter rather than twice a year and splitting it into Issue based Advocacy, CP Advocacy and Independent Visitor to give more accurate results
The partnership effectively protects and ensures good outcomes for all children and young people in Cheshire East.									

14		FGM Strategy	Number of FGM cases identified in any age group that are recorded on the FGM enhanced dataset	Evidence that healthcare professionals are identifying and recording FGM		3	
15			Number of FGM cases identified in young people undr 18 reported to Cheshire Police via 101	Professionals are reporting FGM in accordance with the Serious Criome Act (2015)		0	
16			Number of Police investigations following reported cases of FGM	Female Genital Mutilation is responded to and investigated		0	
17	158	National Panel is notified about SCRs	Number of cases referred to Ofsted	Cases are referred to Ofsted		2	Two cases were notified by CSC in 2015-16.
18			Number of cases referred for consideration for a case review	Cases are considered for case reviews		3	3 referrals were received but not met the criteria for a SCR. 2 multi-agency reviews were held and 1 single agency review. 1 True for Us exercise was carried out.
19			Number of single agency case reviews held	Number of cases meeting this level of review		1	1 case (SAR001) was reviewed this year on a single agency basis.
20			Number of reflective reviews held	Number of cases meeting this level of review		3	3 reflective reviews have been held and lessons learnt have been disseminated through LSCB communications and the Sfaeguarding Children Operational Group (SCOG)
21			Number of serious case reviews held	Number of cases meeting this level of review		0	There have been no serious case reviews held as no cases this year met the criteria.
22			Number of 'True for Us' reviews held	Number of opportunities for learning we have used to develop services in Cheshire East		1	City and Hackney true for us exercise completed and reviewed for learning
23			Number of cases referred to the National Panel	Compliance with the protocol and that cases are referred to the National Panel		1	1 case which did not meet the criteria for SCR was notified to the NPE for verification by LSCB Chair.



Children & Families Overview and Scrutiny Committee

Date of Meeting: 28 November 2016

Report of: Nigel Moorhouse, Director of Children's Social Care

Subject/Title: Children's Social Care Recruitment and Retention

Portfolio Holder: Cllr Liz Durham, Children and Families Portfolio Holder

1. Report Summary

- 1.1 The purpose of this report is to update the Committee on recruitment activity and workforce stability since these issues were last considered by the committee in January 2016. As before, we are aware from discussions around the region that the recruitment and retention of social workers and team managers remains a challenge for all local authorities. Therefore whilst improvements in our ability to attract permanent experienced staff are to be welcomed, there is still an ongoing need for a cohort of agency workers as identified below.
- 1.2 Activity is planned and monitored by the Recruitment & Retention Task Group under the leadership of the Children and Families Social Care senior management team. Membership of the group includes senior managers from across the service, representatives from Workforce Development, HR and the Communications Team. The Recruitment & Retention Strategy for 2015-17 retains four key priorities:
 - to recruit sufficient permanent high quality staff with suitable qualifications and experience
 - to retain existing employees by ensuring they have the right skills, equipment and support to carry out their roles effectively
 - achieve manageable social worker caseloads
 - increase engagement and communication with social work staff

2. Recommendation

Scrutiny Committee is recommended to:

- 2.1 Note the contents of this report and the workforce data in **Appendix 1**
- 2.2 Endorse the Recruitment & Retention activity that has already taken place to improve stability in the workforce.
- 2.3 Propose any additional recruitment and retention activity for consideration by the recruitment and retention task group.

3 Background



- 3.1 By the turn of this year, it was already apparent that we had entered a new phase of our improvement plan. As turnover has continued to reduce and the workforce has stabilised, we have been able to move from a rolling programme of social worker recruitment to a more targeted approach as individual vacancies in the various parts of the service arise. We believe that Cheshire East is increasingly seen to be an 'employer of choice' in the region as evidenced by the growing number of enquiries, applications and appointments of more experienced workers: of the eighteen permanent full-time social workers that we have recruited to our front-line teams in 2016 thus far, eleven have practised elsewhere and of these, seven have joined the Child Protection Teams; in addition, we have appointed four Supervising Social Workers to the Fostering Service and two social workers to the Emergency Duty Team. The permanent appointment of two experienced Child Protection Managers to the CiN/CP Team in Crewe has also had a significant impact on stability and morale in arguably the most challenging area of the service.
- 3.2 The consequences for our vacancy position and use of agency workers are as follows:
- Two agency Service Managers are covering long term sickness absence in the CiN/CP Teams; one of these arrangements will end in December and the other will continue until early in the New Year; we also retain an agency manager at this level whilst the review of our work with children with disabilities is completed.
 - In CHECS there are two agency social workers, one covering maternity leave and another in a position that is about to be advertised; an experienced Safeguarding Manager from a neighbouring local authority was recently appointed to the position of Service Manager and she will join us in January when the current postholder leaves.
 - The CiN/CP Team in Macclesfield is essentially fully staffed and agency workers are only used to cover maternity leave.
 - In Crewe, seven agency social workers are covering vacancies, five of which have arisen through increases in the staffing establishment and two are covering maternity leave. Recruitment activity continues to prioritise this area of the service.
 - In the Permanence and Throughcare Team in Middlewich there is one agency social worker and one manager, both covering vacancies that are currently advertised.
 - In Fostering and Adoption, there are three agency social workers covering advertised vacancies; there is also an agency manager who has been retained whilst plans for the Regional Adoption Agency are finalised.
 - In the Independent Review Officers (IRO) Service, there are now only two agency workers after recruitment to the cared for children team; further



targeted recruitment is planned to fill these two vacancies. There are no vacancies or agency workers amongst the Child Protection IROs.

3.3 Feedback about our recruitment activity continues to be positive and many candidates have spoken enthusiastically about the information available to them on the microsite, the response they get to using the Register Interest button and their overall experience at interview. Our efforts have now received wider recognition in that we have been shortlisted at the 'Children & Young People Now' Annual Awards in the category of Recruitment and Professional Development. Ongoing activity includes:

- A continued focus on advertising through social media to support our programme of Social Worker, Team Manager and IRO recruitment; further interviews for these positions are scheduled.
- We are currently looking at participation in two Government schemes designed to attract and assist people into careers in social work. The 'Step-Up to Social Work' Programme provides financial assistance to people who might otherwise not be able to finance their way through a degree course; in the past year for example, we have had perhaps half a dozen enquiries from associated professionals such as teachers and nurses who could potentially benefit from this scheme.
- The 'Come Back to Social Work' Scheme aims to target social workers who for one reason or another may have left the profession and who are now interested in returning; in particular, this programme will assist people in re-establishing their eligibility to register with the HCPC.
- Interviews for the third cohort of our Sponsored Student Scheme will have taken place by the time of this meeting; this programme is designed to attract the best students from our partner Universities and successful completion of it guarantees the applicant a position as social worker.
- We anticipate that adoption and our planned 'Signs of Safety' as our underpinning model of social work intervention will further help to foster a sense of job satisfaction amongst the social work teams and therefore impact positively on retention. The model is well known throughout the sector and implementation will commence early in the New Year.
- We have joined the North-West Midlands Teaching Partnership which is coordinated through Keele University and we anticipate that this will assist us with recruitment into the south of the Borough as well as offering opportunities to better support existing employees with their CPD.
- The role of Advanced Practitioner (with an implementation date of 17th October) was established following feedback from the social work teams and will foster retention by creating a more clearly defined career pathway, particularly for those many workers who want to continue their professional development, but who do not necessarily aspire to a management position.



4 Wards Affected and Local Ward Members

- 4.1 As identified above, our recruitment strategy and activity is focused on improving the position across the borough but particularly in the Crewe Child Protection Team where historically, we have found it more difficult to attract experienced social workers and team managers.

5 Legal Implications

- 5.1 Recruitment activity supports the Council's statutory obligations in relation to work with children and families.

6 Financial Implications

- 6.1 An agreement to cap agency rates of pay has been in force across the region for a number of months and we are meeting with colleagues from other authorities in the coming weeks to review its effectiveness. Whilst there are some individual examples, the overall sense across the service is that we are now losing fewer workers to agencies. As we have noted previously, lower staff turnover benefits the Council both financially (in terms of recruitment, induction and training costs) and qualitatively in making our work with vulnerable families more effective.

7 Equality Implications

- 7.1 The recruitment and retention strategy ensures that the Council continues to improve outcomes for its most vulnerable and disadvantaged children and their families.

8 Rural Community Implications

- 8.1 There are none identified at this stage

9 Human Resources Implications

- 9.1 Colleagues in HR are fully engaged in the delivery of our Recruitment Strategy.

10 Public Health Implications

- 10.1 The strategy supports positive public health outcomes.

11 Risk Management

- 11.1 The hope expressed in January was that *'now that Ofsted have recognised our significant improvement in safeguarding and our good adoption service, this will only serve to make Cheshire East an increasingly attractive proposition for new and experienced social work staff.'* There is good



evidence to believe that this expectation is being realised, particularly in the north of the Borough where the response to our recruitment activity is always strong. However, whilst there are encouraging signs in the south now, it would be premature to believe that the challenges of attracting and retaining experienced social workers and managers have been fully met. On this basis, social worker recruitment should remain on the Council's Corporate Risk Register.

Contact Information

Contact details for this report are as follows:

Name: Nigel Moorhouse

Designation: Director of Children's Social Care and Deputy DCS

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Appendix 1: Workforce Profile

Post Qualifying Experience

		April 14	April 15	June 15	Sept 15	Dec 15	Oct 16	Optimum Profile
Grade 8	Newly qualified, less than 1 years' experience, completing ASYE.	17%	18% (22)	18%(21)	16%(19.5)	13%(16.5)	11%(13)	15%
Grade 8	More than 1 years' experience completed ASYE.		11% (13)	14%(17)	18%(21)	20%(25)	25%(31)	
Grade 9 & 10	Grade 9 – have 2 years or more experience Grade 10 – have Specialist Awards	58%	52% (62)	49%(60)	50%(60)	52%(64)	52%(63)	80%
Agency staff	All agency staff have 2 years or more experience.	25%	18% (22)	18%(22)	16%(19.5)	14%(17.5)	12%(15)	5%

Staff Turnover

Four permanent members of staff have left the authority this quarter (from 1st July 2016 to 30th September 2016), 3 were Social Workers and 1 Team Manager. In this quarter there have been 11 permanent new starters including 7 Social Workers, 2 Team Managers and 2 IROs. All Team Managers posts which are not held by permanent staff are filled by experienced agency staff who are committed to seeing through improvement in Cheshire East.

Duration with	Less than 1 year	Between 1 and 2	Between 2 and 5	Between 5 and 10	Over 10 years
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Cheshire East		years	years	years	
% staff	22%	20%	18%	14%	25%

Time in Current Role	Less than 1 year	Between 1 and 2 years	Between 2 and 5 years	Between 5 and 10 years	Over 10 years
% staff	27%	24%	28%	13%	9%

Average Caseloads of Staff

Team	Average Caseload
CIN/CP Team - Crewe	18
CIN/CP Team – Macclesfield	22
Adoption	17
Permanence & Throughcare	19
Children and Families Support Team	18

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Key Decision	Decisions to be Taken	Decision Maker	Expected Date of Decision	Proposed Consultation	How to make representation to the decision made	Private/ Confidential and paragraph number
CE 16/17-12 Expressions of Interest to the DfE Innovation Programme	<p>To authorise the Executive Director People to submit the business cases and proceed to the final stages of the bidding process to the DfE Innovation Programme, and to undertake all necessary negotiations and enter into any funding and associated agreements to secure the funding from the DfE Innovation Programme.</p> <p>To delegate the authority to make decisions on the use of funds for these projects to the Executive Director People, including the procurement of services, provision of grants, entering into partnership agreements and authorising the acceptance and use of funds.</p>	Cabinet	6 Dec 2016		Nigel Moorhouse, Interim Director of Childrens Services	No

CE 16/17-27 Determination of Local Authority Co-ordinated Scheme and Admission Arrangements 2018/19	To approve the Council's Co-ordinated Scheme and Admission Arrangements for 2018/19.	Cabinet	7 Feb 2017		Kath O'Dwyer, Deputy Chief Executive and Executive Director: People	N/A
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CHESHIRE EAST COUNCIL

REPORT TO: CHILDREN AND FAMILIES OVERVIEW AND SCRUTINY COMMITTEE

Date of Meeting:	28 November 2016
Report of:	Head of Legal Services and Monitoring Report
Subject/Title:	Work Programme update

1.0 Report Summary

- 1.1 To review items in the 2016/2017 Work Programme listed in the schedule attached, together with any other items suggested by Committee Members.

2.0 Recommendations

That the 2016/2017 work programme be reviewed.

3.0 Reasons for Recommendations

- 3.1 It is good practice to agree and review the Work Programme to enable effective management of the Committee's business.

4.0 Wards Affected

- 4.1 All

5.0 Local Ward Members

- 5.1 Not applicable.

6.0 Policy Implications including - Carbon reduction - Health

- 6.1 Not known at this stage.

7.0 Financial Implications

- 7.1 Not known at this stage.

8.0 Legal Implications

- 8.1 None.

9.0 Risk Management

- 9.1 There are no identifiable risks.

10.0 Background and Options

- 10.1 The schedule attached has been updated following the last meeting of the committee.
- 10.2 Members are asked to review the schedule attached to this report, and if appropriate, add new items or delete items that no longer require any scrutiny activity. When selecting potential topics, Members should have regard to the Council's new three year plan and also to the general criteria listed below, which should be applied to all potential items when considering whether any Scrutiny activity is appropriate.

The following questions should be asked in respect of each potential work programme item:

- Does the issue fall within a corporate priority;
 - Is the issue of key interest to the public;
 - Does the matter relate to a poor or declining performing service for which there is no obvious explanation;
 - Is there a pattern of budgetary overspends;
 - Is it a matter raised by external audit management letters and or audit reports?
 - Is there a high level of dissatisfaction with the service;
- 10.3 If during the assessment process any of the following emerge, then the topic should be rejected:
- The topic is already being addressed elsewhere
 - The matter is subjudice
 - Scrutiny cannot add value or is unlikely to be able to conclude an investigation within the specified timescale

11 Access to Information

The background papers relating to this report can be inspected by contacting the report writer:

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Designation: Scrutiny Officer
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Children and Families Overview and Scrutiny Committee 2016/17 - October 2016

Formal meeting	Formal Meeting	Formal Meeting	Informal Meeting	Formal Meeting	Informal
Date: 28 November 2016 Time: 2.00pm Venue: Committee suite, Westfields	Date: 19 December 2016 Time:2.00pm Venue: Committee suite, Westfields	Date: 30 January 2017 Time:2.00pm Venue: Committee suite, Westfields	Date: 27 February 2017 Time:2.00pm Venue: Committee suite, Westfields	Date: 27 March 2017 Time:2.00pm Venue: Committee suite, Westfields	Date: 24 April 2017 Time:2.00pm Venue: Committee suite, Westfields

Essential items

Item	Description/purpose of report/comments	Outcome	Lead Officer/organisation/Portfolio Holder	Suggested by	Current position	Key Dates/Deadlines
Child Sexual Exploitation	Task and Finish group set up in December 2014 which produced Interim report on 10 February 2015 following informal workshop held with partner organisations in Autumn 2014 to ascertain the current situation in Cheshire East.	Our local communities are strong and supportive	Deputy Chief Executive and Executive Director People Children and Families Portfolio Holder	The Committee	Task and Finish Group in final stages of the review	28 November 2016
Emotional Health and Wellbeing	To scrutinise the Local Delivery Plan in relation to emotional health and well being. (Joint presentation between partners)	People live well and for longer	Deputy Chief Executive and Executive Director People , Director of	The Committee	Invite Health and Adult Social care Scrutiny Committee	19 December 2016

Children and Families Overview and Scrutiny Committee 2016/17 - October 2016

			Public Health Children and Families Portfolio Holder and Adults health and Leisure Portfolio Holder			
Independent Review Officer Annual Report	Further to meeting held on 31 October, to receive a 6 monthly progress report	A responsible effective and efficient organisation	Deputy Chief Executive and Executive Director People Children and Families Portfolio Holder	The Committee	Update report to include details of the 34 care leavers not in employment or education.	24 April 2017
Lado Annual Report		A responsible effective and efficient organisation	Deputy Chief Executive and Executive Director People Children and Families Portfolio Holder	Deputy Chief Executive and Executive Director		28 November 2016
Budget Report	To review the budget saving within children and families	A responsible effective and efficient organisation	Deputy Chief Executive and Executive Director			30 January 2017

Children and Families Overview and Scrutiny Committee 2016/17 - October 2016

			People Children and Families Portfolio Holder			
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Monitoring Items

Item	Description/purpose of report/comments	Outcome	Lead Officer/ organisation/ Portfolio Holder	Suggested by	Current position	Key Dates/ Deadlines
Performance Monitoring – C&F Scorecard	Quarterly performance reports	A responsible effective and efficient organisation	Deputy Chief Executive and Executive Director People Children and Families Portfolio Holder	Ofsted	Quarterly	Q2 – 28.11.16 Q3 – 27.02.17
Ofsted Inspection/ Safeguarding – update/ Recruitment & retention of Staff. Social Workers/Review of	Involvement in the action plan to respond to the 2015 Ofsted report	Our local communities are strong and supportive	Deputy Chief Executive and Executive Director People Children and	Chairman	New arrangements to flow from the inspection report on the July 2015 unannounced inspection	Update on improvement plan – 28 November 2016

Children and Families Overview and Scrutiny Committee 2016/17 - October 2016

HR Policies			Families Portfolio Holder			
School Improvement/ School capacity		People have the life skills and education they need in order to thrive	Deputy Chief Executive and Executive Director People Children and Families Portfolio Holder	The Committee	Validated results 2016.	30 January 2017
Public Health – responsibility for 0-19 year olds	Presentation received on 1 December 2014 relating to how the Council implements public health responsibilities and influences children's lifestyles. This came out of Corporate Scrutiny's review of the Ofsted inspection report in March 2013	People live well and for longer	Deputy Chief Executive and Executive Director People Children and Families Portfolio Holder	Corporate Scrutiny Committee	Further progress report required in 2016	19 December 2016
SEND Reforms	To scrutinise the implementation of SEND Reforms	People have the life skills and education they need in order to thrive	Deputy Chief Executive and Executive Director People Children and Families Portfolio Holder	Director of Children's Services	Task and Finish Review	September 2017

Children and Families Overview and Scrutiny Committee 2016/17 - October 2016

Alternative Walking Routes to Schools	Further to the Call In, to receive an update on the recommendations agreed by Cabinet.		Deputy Chief Executive and Executive Director People Children and Families Portfolio Holder	The Committee	Progress report.	24 April 2017
Children's Centres	To review the February 2016 Council decision to de-designate 4 children's centres, following an informal briefing on 23 June 2016.	People have the life skills and education they need in order to thrive	Deputy Chief Executive and Executive Director People Children and Families Portfolio Holder	The Committee		March 2017
Corporate Parenting	To review the annual report of the newly a established Corporate Parenting Committee		Deputy Chief Executive and Executive Director People , Children and Families Portfolio Holder	The Committee		June 2017

Task and Finish Reviews

Children and Families Overview and Scrutiny Committee 2016/17 - October 2016

Project Crewe – To be set up on 28 November 2016

Possible Future/ desirable items

Neglect/Innovation Fund (project Crewe) (Jan 2017) and potential Review of Neglect (possibly through a task and finish group) – April 2017

Removed items

Schools becoming academies