

	So what does this tell me?	NW Av*	National Av**	RI	Good	Outstanding	Year End Target	Baseline April 2017	Q1	Q2	DoT	
Rate of referrals to Children's Social Care per 10,000 population (12 month rolling period)	A proxy indicator that early help, intervention and prevention services are having the desired outcome of	583.6	532.2		Below regio	nal average		517.0	487.0	487.5	¢	
Percentage of those referrals that were re-referrals (rolling 12 month period)	A proxy indicator that one contact counts, that churn is minimised and that children and families get the right help at the right time.	21.9	22.3	20-25	19-15	<14	16	21.6	22.6	21.5	Û	
Percentage of children and young people seen within 5 days of the referral (rolling 3 months)	Children are being effectively safeguarded once concerns			65-74	75-83	85+	84			23.6	Û	This sectors as
Percentage of children and young people seen within 10 days of the children and family assessment start date (rolling 3 months)	have met threshold for social care intervention and receive a timely response			65-75	75-84	85+	85	61	60	53	Û	This performance re this
Percentage of assessments completed within 15 days	Children and families receive a timely response, concerns			30-39	40-49	50-100	40	17	18.0	16.0	Û	
Percentage of assessments completed within 35 days	are responded to and there is no drift and delay. Families are not subjected to ongoing lengthy assessment			65-74	75-80	85+	75	44	41.0	47.0	Û	This performance re
Percentage of assessments completed within 45 days	processes.			75-80	81-89	90+	81	72	73.0	70.0	Û	this
Percentage of assessments audited that meet or exceed good (audit measure)	Assessments are of a good quality and the help provided as a result has a positive impact on the child's outcomes			50-60	61-80	81+	61	40.0	66.7*			
Percentage of assessments that are completed as NFA	The partnership understands threshold levels for social care intervention. Children and families are not subjected to unwarranted, intrusive assessment processes. Resource in assessment is being utilised effectively.			40-50	49-26	>25	50	57.0	57.0	54.0	Û	This performance Service and S Performance Me month p
The proportion of Children Looked After (CLA) who have had an assessment completed within the latest 12 month period	That plans are being formulated on an up to date assessment of children's need.			50-60	61-80	81+	60	44	47.0	44.0	Û	Performance had this performanc
The proportion of Children with Disabilities who have had an assessment completed within the latest 12 month period	That plans are being formulated on an up to date assessment of children's need and that children with			50-60	61-80	81+						To be reported
The proportion of CP plans ending that are accompanied by a C & F assessment that has been completed within 3 months of plan ceasing.	That decision making is being informed by an up to date			50-61	61-81	81+	60	22.5		22.5		This is the first tim
Percentage of supervisions that met the practice standard for frequency (audit measure)	multiagency assessment of need. That supervision is regular			70-79	80-89	90-100	70	71.0	45.0	45.0	Û	Supervision had be
Percentage of supervisions that met the practice standard of good quality and reflective (audit measure)	That the quality of supervision meets good and supervision positively impacts on practice and children's outcomes.			70-79	80-89	90-100	70	57.0	85.0	85.0	Û	
Percentage of staff report that supervision is beneficial to them with supervision from the annual survey	That staff agreed that the quality of supervision meets good and staff value supervision and supervision positively impacts on practice and children's outcomes.			70-79	80-89	90-100	70	57.0		69.0	Û	The annual staff s
Percentage of cases that meet good for Decision Making (audit measure)	Decision making is evidenced based, there is a clear recorded rational and it positively impacts on case direction and outcomes for children.			65-79	76-89	90-100	65	33.0	53.3*			
The proportion of all CLA 5 and over who participate in the annual pledge survey	That children's voices are being listened to and influence service provision and practice			25-33	34-66	67-100	25	26				
The percentage of cases closed in Early Help because we have not engaged the family (rolling 12 months)	That families understand the early help offer and parents are supported and helped at the earliest opportunity. That workers are skilled at engaging families.			25-21	20-16	<15	20	25.4	22.3	19.0	Û	
Timeliness of allocation of Lead Practitioner from referral date	That children are being effectively safeguarded and risk is mitigated by tight partnership arrangements and working			65-79	80-89	90-100						
Percentage of cases that met good for children and young people appropriately involved (audit measure)	That children, young people and families are listened to and that their views inform assessment and planning			65-79	76-89	90-100		40.0	80*			
Percentage of plans meet or exceed good across all service areas (audit measure)	That plans are of a good quality, SMART, based on a robust assessment of need and are positively impacting on children's outcomes.			65-79	80-89	90-100	65	20.0	40*			
Percentage of children and young people with an up to date plan in line with practice standards CIN * excluding CWD	That quality of recording is good and plans are being kept up to date.			65-79	80-89	90-100	80	87.3	87%		¢	Cannot be reported
Proportion of care plans completed within 10 days of LAC review	That quality of recording is good and plans are being kept			65-79	80-89	90-100						
Percentage of children and young people with an up to date plan in line with practice standards CP	That quality of recording is good and plans are being kept			65-80	80-90	90-101	80	84.0	82%		Û	Cannot be reported
Rate of children subject to a child protection plan per 10,000 population	A proxy indicator that early help, intervention and prevention services are having the desired outcome of	55.2	43.1	45-50	40-44	<40	44	43.9	39.8	42.6	Û	There has a been must be noted that
Percentage of children and young people subject to a child protection plan for a second or subsequent time (rolling 12 month period)	preventing escalation to children's social care. A proxy indicator that one contact counts, that churn is minimised and that children and families get the right help at the right time.	17.6	17.9	25-20	19-16	<15	19	21.5	20.5	27.8	Û	Repeat plans are u had the third higher the reason why the number of the total at this time last year
Percentage of statutory CLA visits completed within timescale increases	That children are being effectively safeguarded in line with statutory guidelines.			70-84	85-94	95-100	85	87.6	83%	83%	⇔	in line with the early
Percentage of statutory CP visits completed within timescale increases	That children are being effectively safeguarded in line with statutory guidelines.			70-84	85-94	95-100	85	93.0	90%	82%	Û	This performance w
Number of notifications of cases of suspected private fostering (rolling 12 month period)	That Sefton continue to promote aware across the partnership of private fostering and encourage referral to			Increase			5	0	0	Û	There have been	
Percentage of visits and initial assessment in suspected private fostering cases undertaken within 7 days	social care. That children who are being privately fostered are being effectively safeguarded and Sefton is compliant with policy.			60-69	70-79	80	70	60%	NA			
Number of 16 and 17 year olds who presented as homeless who progressed to referral (YTD)	That Sefton is compliant with procedure and this vulnerable group are well prioritised and effectively safeguarded.				Incr	ease	1	19	1	4	Û	
Percentage of cases judged as meet or exceed good for risk (audit measure)	That risk is appropriately and effectively responded to in Sefton and this positively impacts on children's outcomes.			65-79	80-89	90-100	80	50.0	80.0*			
Percentage of cases judged to meet good or exceed good for quality of placement (audit measure)	That children are living in homes that are suitable, good quality and meet their needs.			65-79	80-89	90-100	80	53.0	73.3			
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Comments
requires improvement to be good. Teams have now been reorganised into the new structure and is has been highlighted as a priority performance matter for new team managers.
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be was targeted for improvement with team managers and following a deep dive audit by Head of d Service Managers, issues were identified and actions agreed with Team Managers in July weeting, the number of NFA has started to drop all be it slightly for the first time in the rolling 12 a period. Latest performance for the month of September shows a further drop to 53%.
ad decreased slightly but remains much improved since inspection when it was 17%. We expect the to increase as the new corporate parenting team structure reduces case loads and there is increases management oversight.
ed and back dated to September for next CYPIB when team reporting has been fixed following restructure. me this performance measure has been calculated and therefore the % at the end of September
will provide the baseline. been impacted by increased demand on teams during the summer period in increased caseload
and restructure but quality audit demonstrated good improvements in quality.
ff supervision survey evidenced an improving picture with respect to both quality and quantity of supervision.
New measure reporting being developed by Business Intelligence Team
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Reporting being developed
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en a slight increase in CP in quarter 2 and this is largely due to the impact of repeat CP Plans. It hat first time entrants to CP continues to decline and in comparison to the same period last year
there are 19 less children subject to CP in total.
e up regionally and remain a target for improvement in Sefton. As at the end of Quarter 1, Sefton yhest repeat CP plans rates regionally behind Bury and Salford who are both 'good' LA's. Part of the proportion of repeats has increased is because the total number subject to CP is lower, thus the tal as a percentage is higher. However, there are still more children subject to a repeat plan than rear indicating that whilst Sefton is becoming more successful at preventing first time CP entrants riv help and intervention offer down stream, Sefton continues to struggles with those families who
will be monitored weekly by the QA Manager as we embed the new teams and currently requires improvement.
en no private fostering notifications in the year to date. This data should trigger action from the LSCB to market awareness of PF to all professionals in the partnership again.
No private fostering notifications have been received in April or May.

	So what does this tell me?	NW Av*	National Av**	RI	Good	Outstanding	Year End Target	Baseline April 2017	Q1	Q2	DoT	
Rate of children looked after per 10,000 population	An indicator that early help and help and protection services are having the desired outcome of preventing escalation of risk and of children coming in care. Families are being supported at the earliest opportunity.	82	60	85-90	80-84	<80	84	85.4	86.5	89.0	Û	LAC per 10,000 p
Proportion of children and young people looked after with 3 or more placements in a 12 month period	That permanency for children who are looked after is achieved at the earliest opportunity and children are not subject to multiple placement moves and carers which affects their attachment and can be detrimental to children's long term outcomes.		10%	11-13	10-5	<5	7	11.8	9.3	9.0	Û	After a slight increa moves impact on go finish group was se
Proportion of children placed on a full care order at home with parents	That children are not left residing in situations that are tentative and permanency is achieved for children.		5%	16-25	6-15	0-5	10	14.0	16.0	11.0	Û	Whilst there has be report), the
Proportion of children placed on a care order at home with parents interim or full	That children are not left residing in situations that are tentative and permanency is achieved for children.			16-25	6-15	0-6	15	19.0	20.0	19.0	Û	
Percentage of statutory visits for children placed at home with parents completed in timescales	That children living in this situation are effectively safeguarded in line with statutory guidelines and practice standards.			60-79	80-94	95-100	80	87.4	86%	81%	Û	
Percentage of LAC persistantly absent from education	That children who are in the care of the Local Authority have improved outcomes as a result of coming into care			20-35	10-19	<10	<20	24.0				
A reduction in Practice Alerts generated by IRO's	That practice alerts undertaken by IRO's are impacting and informing practice and that practice is beginning to improve more consistently.			Decrease								This performance completed and this quality audit. As a consistently good p will be prov
Percentage of cases that meet good for review in audit (audit measure)	That reviews are effective and are positively impacting on progressing plans and outcomes for children as a result of the help provided are improving.			65-79	80-89	90-100	65	58.8	46.7*			
Percentage of cases that meet or exceed good for impact in audit (audit measure)	That the help provided has had a positive impact on children and their outcomes are improving or improved as a result of social care intervention.			65-79	80-89	90-100	65	60.0	80*			
Percentage of Initial Health Assessment's completed (rolling 12 month period)	That Sefton is compliant with national statutory guidelines and that children are not subject to delay in relation to their health assessment.			65-79	80-89	90-100	80	62.4		69.0	Û	Performance has im The LA is satisfied t Manager. Health ac IHA details on to the
Percentage of Children Looked After Under 5 (for 12 months or more) with a health check completed within 12 months	That Sefton is compliant with national statutory guidelines and that children are not subject to delay in relation to their			65-79	80-89	90-100	80	63.0	73.8	91.0	Û	
Percentage of Children Looked After ≥5 (for 12 months or more) with a health check completed within 12 months	That Sefton is compliant with national statutory guidelines and that children are not subject to delay in relation to their health assessment.			65-79	80-89	90-100	80	70.0	98.0	65.0	Û	Drop in performanc child's record for sta
Reduction in highest caseloads	That the design of Children's Social Care allows practitioners time to develop strong relationships with families and children and undertake good quality and innovative work which improves their outcomes.			35-26	25-20	19-10	25	36.0	37.0			We are presently re and case load rep
Reduction in IRO caseload	That the IRO team is adequately resources to allow IRO's to undertake their function of overview, challenge and scrutiny to a high level of quality which reduces drift and delay, drives plans and thus positively impacts on outcomes for children.			71-89	50-70	<50	70	86.0	79.0	75.0	Û	cases are re-assign
Number of children waiting to be placed for adoption	That permanency is achieved quickly for children who are identified for adoption.			Decrease				16	20	14	Û	A larger number of
Number of children placed for adoption	That permanency is achieved quickly for children who are identified for adoption.			Increase				7	7	14	Û	
No of children adopted (cumulative)	That permanency is achieved quickly for children who are identified for adoption.			Increase				10	3	5	Û	5 adoption orders with plans progress more ad
Number of adoption disruptions (rolling YTD)	That adoption recruitment and matching is of a high quality and children do not experience further turmoil in their lives through adoption breakdown.			Reduction				1	0	1	Û	There has been independently revie pla
Percentage of care leavers living in suitable accommodation (19-21)	Care leavers are in receipt of a high quality service, their needs are prioritised and their outcomes are promoted through provision of high quality accommodation that meets	85	83	80-89	90-94	95-100	90	92.7		95.0	Û	Those in unsuitable unable to engage in are living in suitable
Number of care leavers being accommodated in emergency accommodation YTD	their needs.				Redu	uction		9		0		Т
Percentage of audit cases that score good for young people being prepared for independence (audit measure)	That children in contact with social care and on a plan are being adequately prepared and supported for transition to adulthood.			65-79	80-89	90-100	80	58.8				
Percentage of Care Leavers who are in Education, Training or Employment (19-21)	Care leavers Education, Training and Employment Needs are well prioritised and care leavers transition to adulthood and outcomes are positively impacted as a result of coming into care.	48	49	35-40	45-55	55+	60	45.1		48.5	Û	The NEET group co recorded as active Pathway to Employ people that are not

Comments

00 population has increased - there is a separate paper concerning this performance submitted to board. LAC is up across the north west region and is up nationally.

crease, this performance has begun to decrease. Nevertheless, Sefton recognises that placements in good outcomes for children and young people and as an action from recent increases a task and s set up to understand how Sefton can improve this performance taking into consideration national research and best practice. Report to be provided by group for next CYPIB.

been a recent increase in the number of children placed at home on interim care orders (see LAC there continues to be a good reduction in the number placed on a full care order at home.

Performance continues to be monitored weekly

nce measure has been changed to reflect progress since inspection. Practice Alerts are routinely this performance continues to be monitored at fortnightly IRO performance clinics and picked up via As new team structures are implemented from 1st October an outcome of the structure should be out practice which should equate to less practice alerts generated. A baseline at end of December provided and performance monitored for improvement going forward from end of Quarter 3.

s improved. The LA has undertaken extensive QA work with CCG in a bid to improve performance. ed that notifications to health are sent timely and this is housekeeped every week by the QA h admin will now be based within Corporate Parenting Team during week to ensure timely entry of the child's record as part of the issue was timely recording of completed assessments.

ance is likely to be recording as recording always increases in Q1 due to data being entered on the r statutory returns. As part of meeting with Health, Service Manager for Corporate Parenting should ensure this information is routinely recorded throughout the year.

Ity reporting an average caseload of 20, however CSC has just moved into the new team structures reports are currently being redesigned as the child's record is updated with new team names and signed. We will be able to report accurately on caseloads for next CYPIB. IRO caseloads continue to reduce on target with improvement planning.

r of children have been placed in their adoptive placements which means this number has reduced.

ders have been granted to date and 14 more children are presently placed in adoptive placements ressing for adoption. Presently adoption scorecard timeliness remains reduced despite there being e adoption activity. We continue to monitor progress and score card timeliness monthly.

een one adoption disruption of a Sefton child. Swift action has been taken to ensure the case is eviewed so learning can be shared. For the child, she has been removed and already matched and placed with a foster to adopt placement within 3 weeks of the adoption disruption.

able accommodation include 7 care leavers in custody and 4 care leavers who we have been the in the care leaver service. All other care leavers including those who have returned home to live able and stable accommodation.

There were no care leavers at September end placed in B&B accommodation

p comprises of 97 young people, 33 of which no longer live in the Sefton Area, 36 young people are tively seeking employment, education or training. Also 6 young people have had interviews for the mployment Scheme and have start dates with recycling and leisure services. There are 28 young not actively seeking employment, education or training, which include young parents, young carers, and health related issues.