

Children's Social Care Improvement Board Performance Report



Date of Board 6th May 2014

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Contents

Th	eme	<u>2</u> :	Page number
1.	Safe	eguarding	4
	1.1 (CAF	4
	1.1.1	Number of CAFs per 10,000 under 18 population	4
	1.1.2	CAFs by lead professional	10
	4.3	Manliforna	4.4
	1.2	Workforce	14
	1.2.1	Proportion of social work posts filled by permanent and agency staff	14
	1.3	MASSTT, First Response Team and Locality	16
	1.3.1	Percentage of re-referrals within 12 months	16
	1.3.2	Percentage of initial assessments completed within timescale	18
	1.3.3	Percentage of core assessments completed within timescale	20
	1.3.4	Percentage of Section 47s completed within timescale	22
	1.3.5	Demand graph	24
	1.3.6	Date case allocated to date child seen	26
	127	Casa load	30

Theme: Page number

2.	Chil	dren in Care & Adoption	32
	2.1	Looked After Children	32
	2.1.1	Number of children looked after per10,000 of population	32
	2.1.2	Number of children on a child in need plan or child protection plan who have been	
		screened in relation to their emotional wellbeing	34
	2.1.3	Stability of placements – Percentage of children looked after with 3 or more	
		placements during the year	36
	2.1.4	Number of children being placed with Calderdale adoptive families and within what	
		timescales from the date of becoming looked after	38

Theme: Safeguarding

Focus Area: Outcome

1.1.1 CAF - Number of CAFs per 10,000 under 18 population

Current status:

Red

		2009/10	2010/11	2011/12	2012/13	2013/14 ytd	2013/14 full year
Calderdale	Actual	55.1	43.1	42.9	58.4	48.1	48.1
	Target				53.6	64.1	64.1
Target met?							×
Comparator	National	88.0					
average	SN						

Rate per 10,000 70.0 60.0 50.0 90 40.0 20.0 10.0 Mar May Jul Sep Nov Jan 13 Mar May Jul Sep Nov Jan 14 Mar Ruse per 10,000 — Linear (Ruse per 10,000)

Monthly breakdown

Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
11/12	42.9	44.2	42.7	40.5	40.7	39.8	42.7	43.1	43.3	41.3	43.3	42.9
12/13	43.1	43.3	44.4	47.3	47.0	47.3	47.5	51.6	53.6	57.5	59.1	58.4
13/14	60.2	63.0	63.2	61.9	63.2	63.2	61.3	55.3	53.2	52.5	48.3	48.1
Target	64.1	64.1	64.1	64.1	64.1	64.1	64.1	64.1	64.1	64.1	64.1	64.1

COMMENTARY

Data commentary:

The monthly breakdown is the number of CAFs received in a rolling 12 month period as at month end. A ratio is applied to the total number of CAFs compared to 10,000 under 18 population. The target for 2013/14 is 64.1 per 10,000 population and is based on a 25% increase of the 2012/13 target. The target for this year equates to 300 and averages 25 new CAFs per month. The rate of CAFs continues to decline since September and has seen an 18% reduction as at 31st March 2014 compared to the previous year.

The story behind the data:

The number of CAFs was growing steadily throughout 2012 and continued into 2013. CAF's completed in 2012/13 was 267, exceeding the 2012/13 target. This equated to a 36% increase on 2011/12.

CAF numbers are still below our monthly target of 25 only in the month of January 2014 did we reach our target. On checking records we have received 27 CAF's so far in the month of April and given that we are not at the end of the month this figure may well go up.

During a recent consultation of the new Early Intervention Single Assessment with family support teams it came to light that practitioners have undertaken CAFs that have never been centrally logged. The explanation around this being the family had not consented to the sharing of the document on any electronic system outside of that agency. There might well be some collective understanding of this by other agencies. Therefore as part of the launch of the new form one of the actions from this would be to re-enforce that all assessments should be centrally logged on Calderdale's electronic system. The consultation process of the new form is ongoing and so far Family Support teams, Health Professionals, some schools and members of the Locality Panels have already been consulted with. Two schools have agreed to use the form in its current form and provide feedback.

Actions:

- We are currently consulting on a new Early Intervention Assessment, which will is consistent with the ingle Assessment under section 17. The
 proposal is to introduce a more streamlined re-branded way of collating information and SMART planning, which will support multi- agency
 working.
- One of the main concerns has been the delay in CAF's being completed from the time of getting consent from the parent/carer.

 As part of the new form a target completion date has been introduced. This will allow managers and the CAF support services to follow up assessments that are not completed in a timely manner and so avoid drift in meeting best outcomes for those children and young people concerned.
- MAST are encouraging practitioners to undertake CAFs where referrals do not meet the threshold for CSC. The CAF Co-coordinator follows up calls with the referrer in order to provide guidance and support.
- MAST will make appropriate referrals to the Early Intervention panels where a family member has made direct contact with MAST and verbal consent has been obtained.
- The CAF Co-coordinator continues to target services where numbers have de-creased or where CAFs are not being undertaken at all. Currently the services being targeted are high schools (Brooksbank, Park Lane) and Health professionals. This will be extended to other services
- The CAF Co-ordinator is also scheduled to meet with the newly appointed Schools Safeguarding Officer to address barriers with schools not initiating CAF's
- Practitioners using e-CAF have encountered difficulties with the system and these are being addressed as part of the changes to the new form and re-launch.

The CAF de-escalation process was reviewed with the 4 locality CSC managers on the 31st March 2014 to address any difficulties Increase management oversight.

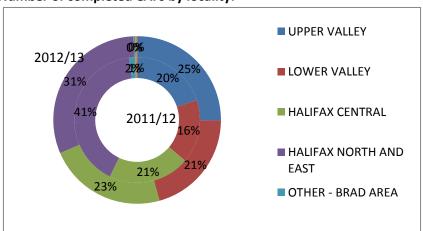
Figures continue to grow as part of the de-escalation process

LOCALITY BY CHILD'S HOMEPOSTCODE OF CAFS SENT TO CAF TEAM	APR 2013	MAY 2013	JUN 2013	JUL 2013	AUG 2013	SEP 2013	OCT 2013	NOV 2013	DEC 2013	JAN 2014	FEB 2014	MAR 2014	TOTAL CAFS BY HOMEPOSTCODE AND YR-TO-DATE TOTAL
UPPER VALLEY	4	2	2	5	3	2	3	3	1	6	3	3	37
LOWER VALLEY	6	10	5	7	5	4	2	2	3	4	2	2	52
HALIFAX CENTRAL	6	8	6	7	2	8	2	7	5	4	4	3	62
HALIFAX NORTH AND EAST	3	13	8	1	5		4	3	7	11	5	7	67
OTHER - BRAD AREA	1									1			2
OTHER - HUDDS AREA													0
MONTHLY TOTALS AND YEAR TO DATE													
TOTAL	20	33	21	20	15	14	11	15	16	26	14	15	220

Numbers in CAF have grown overall in central which would be considered appropriate given the level of need within this area. North & East lead with the most figures overall.

To better understand what tier 3 activity is taking place in each of the localities the CAF Co-ordinator will meet with services to gain a better understanding of the barriers and how these might be overcome. Information from different localities will be included in future quarterly data reporting.

Number of completed CAFs by locality:



Data Set

The main focus of the data is set on the key performance indicators:

- The numbers of CAFs/Early Intervention Assessments to increase per month.
- Locality data to be reported on in the quarterly report
- The source of the CAF/Early Intervention Assessment
- Key universal services are engaging for example (Children Centre's, Schools and Health) This needs to expand across all services
- Numbers in de-escalations from Children Social Care to Tier 3 processes are increasing.
- Outcomes and the impact evaluation sheet at the point of closure of a CAF are reported on

ACTIONS TO IMPROVE	Timescale
Review of actions from last report: (including review of whether impact made)	
 An improved oversight of multi-agency working using CAF/TAC. CAFs being undertaken in a timely manner. A target date of 15 working days will be built in the new form and followed up as an alert on the electronic system. CAF Co-ordinator and Business support to undertake monthly audits of CAFs that have had little TAC activity and will follow up by sending out monthly alerts in the form of a letter or telephone call to raise concerns and prevent drift. 	

- Random audits on CAF & TACs will be further undertaken as part of the audit process and will be a key focusover the next month. Findings from these audits will be shared as part of the data reporting.
- Family, child and young person involvement in decision making is beginning to be seen through the audits.
- Child CAF Booklet and Communication Tools to be used more in order to capture the voice of children. This is being picked up through the audit tool and will be reported on
- Partners are receiving the monthly CAF data and are being encouraged to proactively scrutinize them. This will be followed up by the CAF Co-ordinator as part of visits or in attendance at meetings.
- •
- The quarterly report has been reviewed with input from Safeguarding. It was agreed that the report needed to produce a clearer outline of what tier 3 activity is taking place in each of the four localities and the impact.
- What impact services are having on children and families and any areas of concern. The CAF Co-ordinator will meet with services to gain a better understanding of the barriers with a view to finding solutions and a better way of reporting on data.

Training

A full training programe on the core offer which includes CAF and TAC processes is well attended and is currently being offered. Changes to the training will be reflected as part of the consultation of the new form. e-CAF training is being delivered on a weekly basis. Feedback from our partners and council staff has been really positive however, there have been some IT issues which require further attention.

Actions for next period: (including impact expected)

- The CAF Co-ordinator undertake an increased number of auditsChanges to the new form to be finalized after the consultation period has ended.
- Form to be built into electronic system and tested
- Launch of Early Intervention assessment in June 2014 across Calderdale.. This will need to revisited for schools due to the Summer holidays.
- Update web page and all documentation

Over the next year we want to see:

- Improving timescales for CAF's/ Early Intervention Assessment to be completed and TAC meetings being initiated. This will be a key focus in the re-launch
- All Early Intervention Single Assessments to be centrally logged. This will be a key focus in the launch
- Data shows an increase in CAF activity and reduce referrals to MAST
- Practitioners across the partnership undertake audits of CAF TACs within their own service in order to inform good practice and highlight learning needs. This still needs to be embedded and will be shared with our partners at EI Panels when the new form has

been re-launched and the audit form is updated and reflects the key areas

• Performance data increasingly focusses on outcomes and impact.

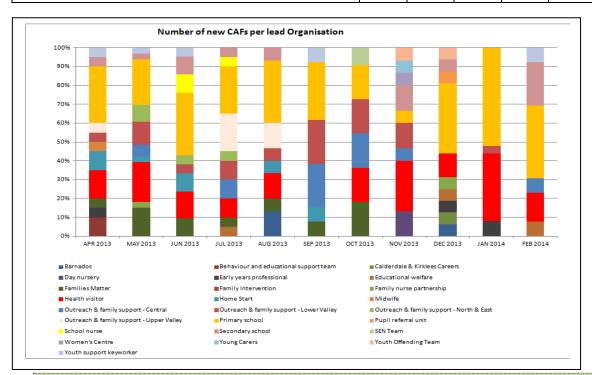
Lead officer: Parveen Akhtar/Heather Brandwood

Theme: Safeguarding	Focus Area: Output		
1.1.2 CAF – CAFs by lead professional.		Current	Red
• •		status:	Reu

Number of new CAFs by lead professional - monthly breakdown 2013/14

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Barnados					2				1			
Behaviour and educational support team	2											
Calderdale & Kirklees Careers									1			
Cornerstones						1						
Day nursery								2				
Early years professional	1								1	2		
Educational welfare				1					1		1	1
Families Matter	1	5	2	1	1	1	2					
Family Intervention												
Family nurse partnership		1							1			
Health visitor	3	7	3	2	2		2	4	2	9	2	2
Home Start	2	1	2		1	1						
Midwife	1											
Outreach & family support - Central		2		2		3	2	1			1	
Outreach & family support - Lower Valley	1	4	1	2	1	3	2	2		1		1
Outreach & family support - North & East		3	1	1								
Outreach & family support - Upper Valley	1			4	2							2
Pre-school											1	
Primary school	6	8	7	5	5	4	2	1	6	14	5	8
Pupil referral unit									1			
School nurse			2	1								
Secondary school	1	1	2	1	1			2	1		3	1
SEN Team							1					
Women's Centre								1				
Young Carers								1				
Youth Offending Team								1	1			
Youth support keyworker	1	1	1			1					1	
Total	20	33	21	20	15	14	11	15	16	26	14	15
Percentage increase compared to month 2012/13	67%	65%	5%	-23%	67%	0%	-45%	-64%	-38%	-10%	-58%	-6%

Cumulative percentage increase compared to 2012/13	67%	66%	42%	21%	25%	22%	11%	-9%	-13%	-12%	-18%	-18%
Target percentage increase	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%



COMMENTARY

Data commentary:

The presentation of the lead professional table and graph has changed compared to previous reports. This is due to the recording of lead professional now being in line with nationally recognised categories and provides a more detailed breakdown of lead agencies. The data is held centrally by the Local Authority and relates to the number of CAF assessments completed by return of key paperwork, by lead professional.

Data on all other assessments that are used under CAF and TAC processes will be reported separately as part of de-escalation.

The story behind the data:

Actual CAFs being completed by agencies are significantly low across all areas. There has been a significant drop in CAFs being undertaken across Family Support teams however they are picking up tier 3 work using CAF processes as part of de-escalated cases at the early intervention panel..

There has also been a significant drop in CAFs by the Family Matters Keyworkers who are now picking up more tier 4/5 work.

Primary schools continue to complete the most CAFs followed by Health Visitors.

CAFs are still not completed in a timely manner from the point of getting consent and some CAFs can be open for some considerable time and only involve one or two services.

Regular data cleansing is taking place and professionals will be contacted to ensure that regular TAC meetings are taking place and up to date information is recorded on the electronic system

CAF's not progressing satisfactorily are signed posted to the early intervention panels unless there are clear safeguarding concerns.

ACTIONS TO IMPROVE	Timescale
Review of actions from last report: (including review of whether impact made)	
• To promote the use of the tier 2 assessment / CAE, we will lounch the Early Intervention Assessment, linking to the Child and	
 To promote the use of the tier 3 assessment/ CAF, we will launch the Early Intervention Assessment, linking to the Child and Family single assessment 	
The re-branding and re-launch is planned for June 2014. Lead professionals will continue to be encouraged to use early	
intervention panels and reflective sessions as a way of finding solutions to CAFs which are not progressing.	
Actions for next period: (including impact expected)	
 Managers of CSC teams to ensure social workers follow the de-escalation process. 	
• Early Intervention Panels to use the de-escalation process in order to prevent families falling through the net via CAF processes	
by ensuring that a named lead professional and correct paperwork is identified in order to take the CAF forward.	
Early Intervention Managers to feedback local barriers to the CAF Coordinator.	
Early Intervention Managers, CAF Co-ordinator and Leoni Craigie from Workforce Development to continue to target key	
agencies in the uptake of Early Intervention & CAF where figures are low or none existent in their area. CAF Co-ordinator to continue to provide data provided by the Management Information Team.	
• CAF Co-ordinator to redirect tier 2/3 referrals from MAST to early intervention panels and support where appropriate, the initiation of an assessment.	
 CAF Co-ordinator and Business Support to begin running monthly reports of CAF's in pending in order to address delays in progressing to TAC 	
CAF web page to be updated with all related forms once agreed	
Lead officer: Parveen Akhtar/Heather Brandwood	

Theme: Safeguarding

Focus Area: Input

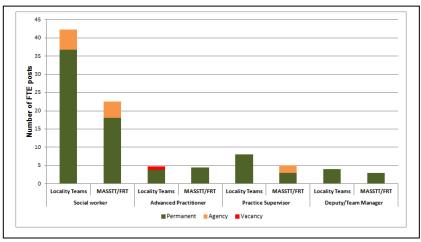
1.2.1 Workforce - Proportion of social work posts filled by permanent and agency staff (including vacancies)

Current status:

Orange

MASSTT/FRT and Locality Teams - Number of social work posts occupied by agency and permanent staff

Post type	Team	Permanent	Agency	Vacancy	Total	% occupied by permanent staff
Social worker	Locality Teams	36.7	5.6	0	42.3	87%
Social Worker	MAST/FRT	18	4.5	0	22.5	80%
Advanced	Locality Teams	3.8	0	1	4.8	79%
Practitioner	MAST/FRT	4.5	0	0	4.5	100%
Practice	Locality Teams	8	0	0	8	100%
Supervisor	MAST/FRT	3	2	0	5	60%
Deputy/Team	Locality Teams	4	0	0	4	100%
Manager	MAST/FRT	3	0	0	3	100%
	Total	81	12.1	1	94.1	86%



Monthly breakdown – Percentage of posts occupied by permanent staff

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2013/14						77%	81%	81%	84%	84%	84%	86%
Target						90%	90%	90%	90%	90%	90%	90%

COMMENTARY

Data commentary:

The data represents social work posts in all four of the locality teams, the First Response Team and MAST. It is a total of the full time equivalent posts (FTE) within these teams and summarised by each role. The above graph shows a RAG rating where permanent staff are shown as Green, agency as Amber and vacancy shown as Red.

The story behind the data:

Performance in this area is continuing to improve steadily. The team manager and senior manager group is stable, although recruitment is currently under way for a half time team manager post in EDT. There continues to be some recruitment for practice supervisors and front line social workers. However, more experienced social worker applications are being received through the rolling advert.

ACTIONS TO IMPROVE	Timescale
Review of actions from last report: (including review of whether impact made)	
• Recruitment has been ongoing including for the remaining NQSW positions and experienced social worker positions.	
Actions for next period: (including impact expected)	
Ongoing recruitment activity to fill the remaining posts	
 Agency workers being retained to cover vacancies for experienced staff where required. 	
Lead officer: Beate Wagner/Stuart Smith	4

Theme: Safeguarding

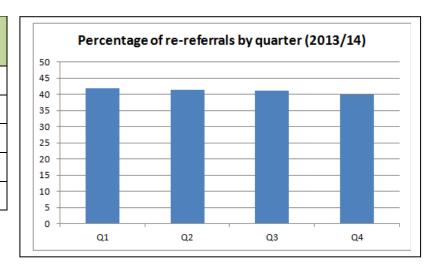
Focus Area: Output

1.3.1 Percentage of re-referrals in 12 months

Current status:

Red

		2010/11	2011/12	2012/13	2013/14 ytd	2013/14 full year
Calderdale	Actual	17.4%	34.2%	42.4%	40.0%	40.0%
	Target					
Target met?						
Comparator	National	25.6%	26.1%	24.9%		
average	SN	25.7%	23.6%	26.1%		



Quarterly breakdown:

Year	Q1	Q2	Q3	Q4
13/14	41.9%	41.3%	41.0%	40.0%
Target				

COMMENTARY

Data commentary:

The calculation of re-referrals is based on the method used by the DfE. It is the proportion of referrals which have been made within 12 months of a previous referral, measured against the total number of referrals for a 12 month period at quarter end. It is a rolling 12 month total as at the end of each quarter.

The story behind the data:

The number of referrals in 203/14 has seen a reduction through the work with partners to reduce contacts. This is having an impact on the level of re-

referrals, although it is still significantly higher than both statistical neighbour and England averages. Domestic violence notifications dealt with by the Early Intervention Service are now classed as early intervention notifications from 10th April. Therefore, improvements will be seen next month. All contacts resolved at MAST remain as contacts and the data supports this and the next quarter will see an improvement in the re-referral rates.

ACTIONS TO IMPROVE	Timescale
Review of actions from last report: (including review of whether impact made)	
This is a new indicator. Work has been undertaken in Quarter 4 to ensure that not all contacts into MAST are classed as referrals,	
particularly those where advice and signposting in MAST is resulting in a satisfactory outcome for enquirers.	
Actions for next period: (including impact expected)	
Data cleansing and classification work to continue	
• Early Intervention referrals of domestic violence notifications to be dealt with through the Early Intervention service rather than MAST	
 Continued monitoring of outcomes achieved through early intervention 	
Lead officer: Beate Wagner/Jamiila Sims	

Theme: Safeguarding

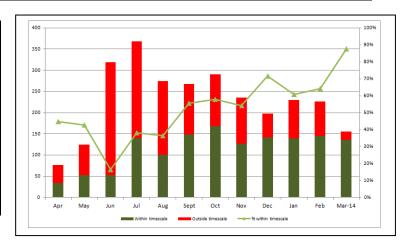
Focus Area: Output

1.3.2 Percentage of initial assessments completed within 10 working days

Current status:

Red

		2009/10	2010/11	2011/12	2012/13	2013/14 ytd	2013/14 full year
Calderdale	Actual	49.3	71.4	85.5	82.7	50.2	50.2
	Target					80.0	80.0
Target met?						×	×
Comparator	National	75.5	77.2	77.4	75.5		
average	SN	73.7	72.0	76.6	76.7		



Monthly breakdown

Year	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
13/14	44.7	42.7	17.1	38.1	38.3	56.3	59.5	54.4	71.7	60.9	64.2	87.7
Target	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0

COMMENTARY

Data commentary:

There is a 10 working day threshold for the completion of initial assessments, from start date to the date of sign off by the social worker's manager. The above figures include assessments completed by FRT, localities and DCT. September saw a marked improvement in the number completed within timescales and this has continued through the remaining part of the year. However, the year end figure is lower than the national average, given the poor performance at the beginning of the year.

The story behind the data:

Earlier in the year, ther was a concerted focus on completing a back log of initial assessments and as these were completed, they contributed to the low

number of initial assessments being completed within timescale. There is now no backlog of work within FRT and caseloads are reasonable. There has been focused attention by the service manager on a weekly basis with the team managers which has shown the increased positive performance, which exceeds the national completion rates in March.

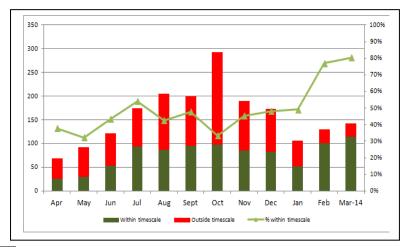
ACTIONS TO IMPROVE	Timescale
Review of actions from last report: (including review of whether impact made)	
There has been continued improvement in performance and is mainly due the reduction in backlog and additional management capacity	
in supporting signoffs. Caseloads have reduced for all workers and therefore the expectation is that the timescales will continue to	
improve. There is ongoing focus work in this area on a weekly basis which is discussed with the team managers at the MAST/FRT	
recovery meeting. Due to the new single assessment that commenced on 7 th April, there are now only two initial assessments open in	
FRT (as at 22 nd April).	
Astions for part waried. /including impact are ested	
Actions for next period: (including impact expected)	
 Continued robust performance management of open initial assessments takes place weekly with performance reports. 	
Weekly reports are received by DLT and reported to the lead member	
 Clear focus is needed not only on overdue assessments, but also assessments approaching due date to avoid these also not 	
being completed in timescales.	
A strong emphasis regarding ensuring timescales are met are being enforced within FRT and will continue with the new single	
assessment.	
Lead officer: Jamiila Sims	

1.3.3 Percentage of core assessments completed within timescale

Current status:

Red

		2009/10	2010/11	2011/12	2012/13	2013/14 ytd	2013/14 full year
Calderdale	Actual	62.2	79.7	86.6	82.7	48.4	48.4
	Target					80.0	80.0
Target met?						×	×
Comparator	National	78.1	75.0	75.5	76.7		
average	SN	68.2	71.8	78.9	79.0		



Monthly breakdown

Year	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
13/14	37.1	31.9	45.1	54.6	44.3	47.6	35.6	46.0	48.0	49.1	76.9	80.4
Target	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0

COMMENTARY

Data commentary:

There is a 35 working day threshold for the completion of core assessments, from start date to the date of sign off by the social worker's manager. The above figures include assessments completed by FRT, localities and DCT. There has been a marked improvement in performance since January and comparable with the set target. However, the outturn figure for the year end of 48.4% is lower than the target for the year, given the poor performance at the beginning of the year.

The story behind the data:

There is ongoing focus work in this area on a weekly basis which is discussed with the team managers at the MAST/FRT recovery meeting. January showed only minor improvement, but close monitoring over February shows more rapid improvement. There is now no backlog of work within FRT and caseloads

are reasonable. There has been focused attention by the service manager on a weekly basis with the team managers which has shown the increased positive performance, which exceeds the national completion rates slightly in March.

ACTIONS TO IMPROVE	Timescale
Review of actions from last report: (including review of whether impact made)	
The percentage of open core assessments out of timescales has reduced significantly and any remaining areas of poorer practice are being monitored closely and addressed	
Actions for next period: (including impact expected)	
Continued robust performance management of open core assessments.	
Clear focus is needed not only on overdue assessments, but also assessments approaching due date to avoid these also not	
being completed in timescales.	
A strong emphasis regarding ensuring timescales are met are being enforced within FRT and the locality teams. Weekly reports	
go to the senior management team and are closely scrutinised.	
Lead officer: Jamiila Sims/Sean Walsh	

Theme: Safeguarding

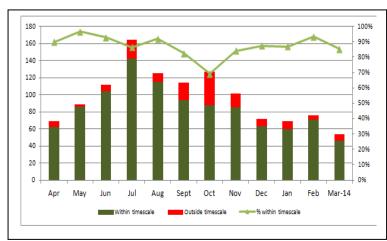
Focus Area: Output

1.3.4 Percentage of Section 47s completed within timescale

Current status:

Orange

		2009/10	2010/11	2011/12	2012/13	2013/14 ytd	2013/14 full year
Calderdale	Actual					86.7	86.7
	Target					90.0	90.0
Target met?						×	×
Comparator	National						
average	SN						



Monthly breakdown

Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
13/14	89.7	96.6	92.9	86.6	92.0	82.5	69.3	84.2	87.5	87.0	93.4	85.2
Target	90.0	90.0	90.0	90.0	90.0	90.0	90.0	90.0	90.0	90.0	90.0	90.0

COMMENTARY

Data commentary:

Section 47s have a threshold of 15 working days for completion. The table and graph above show those Section 47s completed in the month. The above figures include assessments completed by FRT, localities and DCT. Since October the completion of S47s within timescales has improved. The yearend performance was close to achieving the 90% target for the year and if performance had been stronger in October it is likely the target would have been achieved.

The story behind the data:

The vast majority of Section 47s are completed within timescales. There was a slight decline in July and this was attributable to the increased number of Section 47s taking place in the month. Since November there has been an improvement in the number completed within timescale.

ACTIONS TO IMPROVE	Timescale
Review of actions from last report: (including review of whether impact made)	
Close monitoring of S47s over February is showing significant improvement of S47s completed in the month, which has not been	
sustained in March. However, overall performance is good and continues to be subject to close monitoring.	
Actions for next period: (including impact expected)	
•	
Clear focus is needed not only on any overdue S47s, but also those approaching due date to avoid these also not being	
completed in timescales.	
 A strong emphasis regarding ensuring timescales are met are being enforced at 100% for all S47s. 	
Lead officer: Jamiila Sims	

Theme: Safeguarding

Focus Area: Output

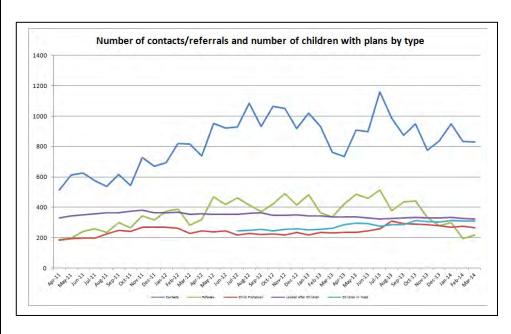
1.3.5 Demand Graph (number of contacts, referrals and children with plans)

Current status:

Orange

Number of contacts and referrals and children with plans by type:

Number of contacts and referrals and children with plans by type.										
	Contacts	Referrals	Child Protection	Looked After Children	Children In Need					
Feb-13	933	364	235	343	255					
Mar-13	761	335	230	335	263					
Apr-13	734	421	235	335	286					
May-13	908	485	236	337	297					
Jun-13	897	458	245	331	291					
Jul-13	1160	514	258	323	274					
Aug-13	986	377	308	326	286					
Sep-13	875	435	292	328	287					
Oct-13	950	443	288	333	314					
Nov-13	774	334	287	331	307					
Dec-13	835	277	278	330	303					
Jan-14	948	298	270	332	311					
Feb-14	833	194	275	327	309					
Mar-14	828	217	266	324	308					



COMMENTARY

Data commentary:

It should be noted that recording arrangements for contacts changed in May 2013 and this is reflected in the above figures. All domestic violence notifications from the police are again being recorded as contacts, as the information is otherwise not accessible in a timely way, should further referrals be made.

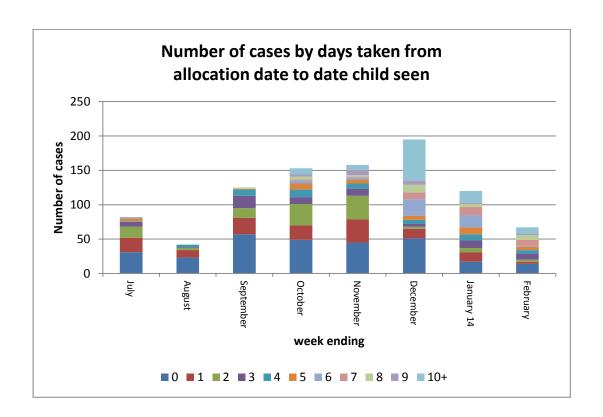
The story behind the data:

Whilst contacts remain high, the number of referrals during 2014 has been much lower than earlier in the year

ACTIONS TO IMPROVE	Timescale
Review of actions from last report: (including review of whether impact made)	
- Agreement reached between all agencies that all referrals to social care will be jointly screened within the MAST to ensure they	
can be diverted appropriately, if necessary	
- Detailed information has been provided to partner agencies on their performance	
- Partner agencies have been undertaking spot audits on their own referrals in MAST	
- Signatures of risk document has been consulted on and is being cascaded	
Actions for next period: (including impact expected)	
LSCB to continue to challenge to partners about appropriateness of referrals.	
Detailed audits being undertaken in the MAST are continuing	
Audits continuing within MAST and with partner agencies	
• Early Intervention DV notifications to be dealt with by the early intervention service and diverted from MAST and have been	
recorded as early intervention notifications from 10 th April.	
Lead officer: Beate Wagner	

Theme: Safeguarding	Focus Area: Output		
1.3.6 Date case allocated to date child seen		Current	Green
		status:	Green

		Month									
Number of days	July	August	September	October	November	December	January 14	February	Total		
0	37.8%	54.8%	46.3%	32.0%	28.5%	26.2%	14.2%	20.9%	32.9%		
1	25.6%	26.2%	19.5%	13.7%	21.5%	7.2%	11.7%	4.5%	16.3%		
2	19.5%	7.1%	11.4%	20.3%	21.5%	1.5%	5.0%	4.5%	12.6%		
3	8.5%	2.4%	14.6%	6.5%	6.3%	2.1%	9.2%	13.4%	8.0%		
4	1.2%	9.5%	7.3%	7.2%	5.1%	3.1%	7.5%	7.5%	6.1%		
5	4.9%	0.0%	0.8%	5.9%	3.8%	3.1%	8.3%	7.5%	4.7%		
6	2.4%	0.0%	0.0%	2.6%	1.9%	12.3%	15.0%	1.5%	6.0%		
7	0.0%	0.0%	0.0%	1.3%	0.6%	5.1%	10.0%	13.4%	3.9%		
8	0.0%	0.0%	1.6%	2.6%	1.3%	5.6%	3.3%	10.4%	3.4%		
9	0.0%	0.0%	0.0%	2.0%	5.1%	3.1%	1.7%	3.0%	2.4%		
10+	0.0%	0.0%	0.0%	5.9%	4.4%	30.8%	14.2%	13.4%	11.7%		



COMMENTARY

Data commentary:

The table and graph above show the weekly performance of the First Response Team and how quickly the child is seen after the case is allocated to a social worker. Where a 'child is seen' it includes those in relation to initial assessment, core assessment and S47. The number of days measured are between the date the case is allocated to a social worker and the date recorded that the child had been seen by the social worker.

The story behind the data:

Where a child had been seen in relation to a S47, in the vast majority of cases the child was seen within 1 working day of the case being allocated unless a decision is made for the child to be seen the following day. There was a rise in children seen over 10 days within December and it was also noted the

increase of overdue initial assessments. Although the high number of assessments relate to children seen 10 days or over, the majority of these assessment were signed off in January. Therefore the figures for completed assessments and children being seen within timescale do not correlate for December and January.

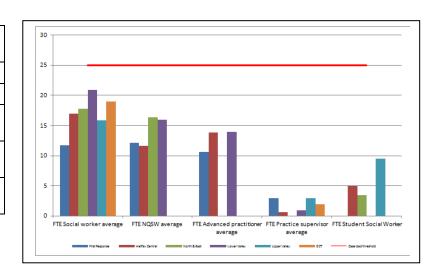
There is clear improvement in timeliness of seeing children due to the previous issue noted of timescales not correlating for December and January, there is a concern social workers may not be accurately recording within the assessment when they have seen the child. This area is to be followed up.

ACTIONS TO IMPROVE	Timescale
Review of actions from last report: (including review of whether impact made)	
Children are seen in a timely manner and therefore it is an issue regarding assessments being completed within timescale as an	
administration issue when it comes to recording on CASS, rather than children not being seen within specified timescales.	
Actions for next period: (including impact expected)	
The objective is to continue to ensure children are seen in a timely manner.	
Increased management focus on this indicator to ensure performance return to levels achieved earlier in the year	
Increase in staff and manageable caseloads is being maintained.	
Lead officer: Jamiila Sims	4

Theme: Safeguarding	Focus Area: Input		
1.3.6 Case loads		Current	Green
		status:	Green

Average case load as at 24th March 2014:

Average case load as at 24						
	First	Halifax	North &	Lower	Upper	
Role type	Response	Central	East	Valley	Valley	DCT
FTE Social worker average	12	17	18	21	16	19
FTE NQSW average	12	12	16	16	N/A	N/A
FTE Advanced practitioner						
average	11	14	N/A	14	N/A	N/A
FTE Practice supervisor						
average	3	1	N/A	1	3	2
Child Care Student Social						
Worker	N/A	5	4	N/A	10	N/A



COMMENTARY

Data commentary:

The average case loads are calculated based on the full time equivalent (FTE) posts for each role type and the cases held by each role type.

The story behind the data:

All social workers in the First Response Team have a case load below the threshold of 23 cases. Overall in the last 3 months no worker has had over 30 cases and this continues. Transfers to the localities teams remain overall timely. The locality teams have only 1 social worker who is carrying a caseload marginally above the locality team threshold of 25. This has reduced from 2 in the previous month. The overall situation is a significant improvement to workloads since the time of the last Ofsted inspection.

ACTIONS TO IMPROVE	Timescale
Review of actions from last report: (including review of whether impact made)	
- We have continued to ensure that close scrutiny is placed on families receiving the right level of intervention in the right service – ie	
clinically evidenced de-escalation when necessary; - We have continued to build productive working relationships with both internal	
and external partners;	
- We have continued to drive improvements in the stability in teams, including through the retention policy.	
Actions for next period: (including impact expected)	
Continue to build on successes in this area	
Close monitoring of the capacity required	
Average caseloads will be monitored with the aim of reducing the threshold next year.	
Lead officer: Jamiila Sims & Sean Walsh	

Theme: Children in Care & Adoption

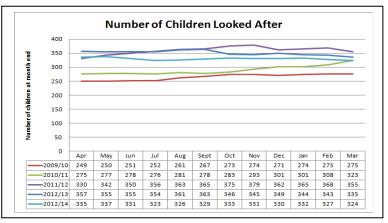
Focus Area: Outcome

2.1.1 Looked After Children - Number of children looked after per 10,000 of population

Current status:

Green

		2009	2010	2011	2012	2012/13	2013/14 ytd	2013/14 full year
Calderdale	Actual	60.0	59.0	71.0	78.0	73.3	71.1	71.1
	Target					75.0		75.0
Target met?						✓		✓
Comparator	National	55.0	58.0	58.0	59.0	60.0		
average	SN	64.0	70.5	74.3	78.4	83.6		



Monthly breakdown

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2012/13	78.1	77.7	77.7	77.4	78.9	79.4	75.7	75.5	76.3	75.3	75.0	73.3
2013/14	73.5	74.0	72.6	70.9	71.5	72.2	73.1	72.6	72.4	72.9	71.8	71.1

COMMENTARY

Data commentary:

- Since April 2009, the number of LAC increased by 52% to 379 at the end of November 2011. This equates to 82.2 per 10,000 under 18 population. Since this peak the number of looked after children has steadily reduced to 335 by 31st March 2013. This is significantly lower than statistical neighbours figure which is 83.6 compared to Calderdale's 73.3 per 10,000 under 18 population for 2012/13. The gap has also narrowed in terms of the national result of 60 per 10,000 under 18 population.
- In Calderdale, the number of LAC has fallen steadily since September 2012, to 73.3 per 10,000 at year end and is slightly better than the target figure of 75.0 for 2012/13. November has seen a slight fall in the number of looked after children back to the level it was in June and is still within the current year's target.

The story behind the data:

- At its highest point in 2011 the Looked After Population was 375. As at year end 2012/13, the number of LAC has reduced by 9% as a result of robust management of children entering the care system through such measures as the Gateway Panel. In addition, children's movement through the system has been the focus of attention and the introduction of care planning meetings and the permanence policy are reinforcing this in the Locality Teams.
- The target in the Single Integrated Improvement Plan was a 20% reduction in the Looked After Population (to 75 per 10,000) by 2013 which has been achieved. This reflects the statistical neighbour average for the year of 75.2 per 10,000 population (2011). By 2013 the statistical neighbour average had increased to 83.6. The national average is also rising, but at a lower rate and reached 60 per 10,000 population by 2013. For Calderdale to be in line with the national (rather than statistical neighbour) average it would require a reduction down to 274 looked after children.

Theme: Children in Care & Adoption

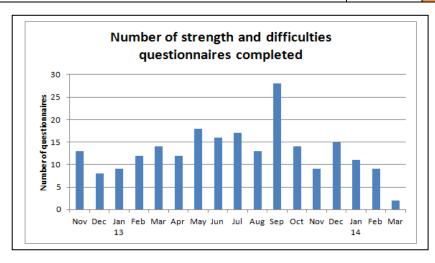
Focus Area: Outcome

2.1.2 Looked After Children – Number of children on a child in need plan or child protection plan who have been screened in relation to their emotional wellbeing.

Current status:

Orange

		2012/13	2013/14 ytd	2013/14 full year
Calderdale	Actual	56	164	164
	Target	55	180	180
Target met?		✓	✓	×
Comparator	National			
average	SN			



2012/13 Monthly breakdown:

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2012/13								13	8	9	12	14
2013/14	12	18	16	17	13	28	14	9	15	11	9	2
Target for the month	15	15	15	15	15	15	15	15	15	15	15	15

COMMENTARY

Data commentary:

The total numbers of SDQs completed are for children and young people who are a Child in Need, looked after or on a Child Protection Plan, have a CAF or are in First Response and in the process of being assessed. These SDQs have been completed by staff in First Response, Children's Social Care Central team, Barnardo's, North and Lower Family Support Teams and Family Intervention Team and School Nurses.

The story behind the data:

Following a very busy month in September, the number of SDQs completed in subsequent months has reduced and a very low number for March completed. The number of SDQs completed for the year has not reached the expected target.

Review of actions from last report: (including review of whether impact made)

- A lead for SDQ training has been identified and a programme is being developed.
- The Pilot of the online SDQ has indicated that the process could be improved if new referrals to social care are added to the system in a way that triggers an automatic reminder to the social worker to carry out the SDQ.
- Process for information governance has been clarified.

Actions for next period: (including impact expected)

• Local guidance for social workers and other case managers on the SDQ and the steps to be taken following screening is being developed.

Lead officers are working towards a clear corporate message to staff and partner agencies about the Council's approach to SDQs

Lead officer: Jeff Rafter/Rachel Pickering

Theme: Children in Care & Adoption

Focus Area: Outcome

2.1.3 Looked After Children – Stability of placements: Percentage of children looked after with 3 or more placements during the year

Current status:

Green

		2010/11	2011/12	2012/13	2013/14 ytd	2013/14 full year
Calderdale	Actual	7.5%	6.8%	7.9%	7.6%	7.6%
	Target		7.0%	7.0%		7.0%
Target met?			✓	×		✓
Comparator	National	10.7%	11.0%	11.0%		
average	SN	10.4%	9.6%	9.3%		

Stability of placements of looked after children: Percentage of children with 3 or more placement moves 9.0% 8.0% 7.0% 6.0% 4.0% 3.0% 2.0% 1.0% Apr May Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar 3+ moves 2012/13 0.0% 0.0% 0.6% 1.1% 2.2% 3.7% 3.9% 4.9% 6.7% 6.7% 7.4% 7.9% 3+ moves 2013/14 0.0% 0.0% 0.9% 1.2% 2.2% 3.2% 3.8% 5.4% 5.3% 5.6% 6.5% 7.6%

Monthly cumulative breakdown

Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
13/14	0.0%	0.0%	0.9%	1.2%	2.2%	3.2%	3.8%	5.4%	5.3%	5.6%	6.5%	7.6%
12/13	0.0%	0.0%	0.6%	1.1%	2.2%	3.7%	3.9%	4.9%	6.7%	6.7%	7.4%	7.9%
11/12	0.0%	0.0%	0.0%	0.0%	1.7%	1.5%	2.8%	3.7%	4.5%	5.6%	6.3%	6.8%
10/11	0.0%	1.1%	1.4%	2.6%	2.9%	5.1%	5.3%	6.1%	7.6%	7.0%	7.8%	7.5%

COMMENTARY

Data commentary:

This indicator measures the number of children who have experienced 3 or more moves within the financial year, as a percentage of all looked after children. The percentage progressively increases as moves take place during the year. Calderdale consistently achieves a lower percentage than statistical neighbour and national averages.

The story behind the data:

As in previous reports, the number of children experience 3 or more placement moves within the financial year remains relatively low. For many children, the 3rd or further move within this year results from increasing performance around permanency moves being secured with an increasing number of Special Guardianship, Adoption or Long Term Fostering placement matches being assessed and approved as a positive outcome for those children and young people.

There are, however, a small cohort of children and young people who demonstrate more complex or challenging needs and behaviours that can result in placement breakdown and require us to plan a further move. These placement move requests are reviewed and managed alongside partner agencies at the Resources for Children Panel to look at emerging or changing assessed needs. The necessary resources are committed by the relevant partners to offer greater likelihood of placement stability at any subsequent placement move.

Management overview and decision making on placement moves is significantly improved and provides the stability that all placements should experience to continue to manage improvements.

ACTIONS TO IMPROVE	Timescale
Review of actions from last report: (including review of whether impact made)	
 Reporting on Permanency Plan figures at the 2nd statutory review is a performance indicator reported into SLT. 	
• The monitoring of subsequent planning and actions around placements linked to plans are addressed through social worker	
supervision and further explored through the reviewing process as a well as at Resource for Children Panel reviews of placements	
• The plans for those children that have already experienced 3 or more moves and made up the 3.2% cohort in September 2013	
were not all reviewed at the October RfC Panel. All remaining cases have been reviewed between the December and January Panels.	
• The discussing of permanency options for children with existing foster carers continues to operate through the fostering team	
and locality teams. A small number of foster carers have begun to express interest in permanence options that are now being pursued, including adoption.	
The Looked After and Adopted Children Strategy Operations Group, will continue to review any necessary support services to	
minimise and manage potential placement disruptions and to further improve placement stability.	
Actions for next period: (including impact expected)	
Full case file checklist will be completed on all LAC children by April 22 nd . This will capture gaps in all aspects of planning and	
intervention, including permanency plans; the gaps will be targetted by service manager and team manager with firm deadlines for	
completion	
Additionally, a Permanency Planning Officer role is is to be recruited to, to ensure that there is a consistency and timeliness to all	
planning for permenance across the departments in CSC;	
This officer will also have oversight of placements and work closely with LAC Service manager.	
Lead officer: Beate Wagner / Sean Walsh	

Theme: Children in Care & Adoption

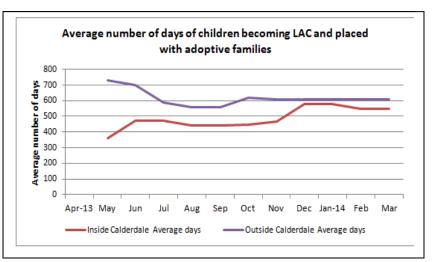
Focus Area: Outcome

2.1.4 Looked After Children – Number of children being placed with adoptive families and timescales from becoming looked after

Current status:

Orange

		2012/13	2013/14 ytd	2013/14 full year
Approved by Calderdale	Number		9	9
	Average days		550	550
Approved by another agency	Number		9	9
	Average days		608	608



Monthly breakdown:

		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Approved by	Number	0	1	1	0	1	0	1	1	2	0	2	0
Calderdale	Average days	0	360	588	0	370	0	465	545	863	0	893	0
Approved by	Number	0	2	1	2	2	0	1	1	0	0	0	0
another agency	Average days	0	731	645	425	468	0	1043	541	0	0	0	0

COMMENTARY

Data commentary:

The above graph and tables show the length of time by number days it takes for a child to be placed with adoptive parents from the date the child becomes looked after. It also compares the timescales between those children placed with Calderdale adoptive parents and those outside Calderdale. The national target for a child to be placed with adopters from the date he or she becomes looked after is 566 days.

The story behind the data:

The first quarter saw the average number of days above 600 for placements with Calderdale adopters and for those sourced through external adoption agencies. This was largely as a result of the national shortage of adopters, increasing numbers of children with plans for adoption and time delays in progressing permanence plans and decisions through the courts for children. Calderdale had a number of children who had been looked after for some time

and there was evidence of drift as a result of some, if not all, of the issues outlined above.

From July to November this improved to below 500 days. The number of days saw a significant increase in December as both children placed were matched with their existing foster carers . Following a period of unsuccessful family finding for two children who are considered 'harder to place' their carers requested to be assessed as prospective adopters. Whilst this added to the timescale for placement of the children under adoption regulations, the children were already in placement and settled with their families who will now be permanent. The overall improvement results from a review of Permanence planning for children, including regular Permanence Planning meetings and a reinvigoration of family finding for those children with plans for adoption. This includes Calderdale's involvement in regional and national exchange day where children who have waited longer for a family or may have more complex needs can have their profiles raised with prospective adopters. We have also participated in a West Yorkshire Activity Day in which adopters had the opportunity to meet children face to face. We included 10 children in this event but sadly no children were matched.

A very positive recruitment campaign was held in the autumn which included local media coverage and was well supported by Councillors and experienced adopters. The drive for new adopters for Calderdale continues to operate and is seeing increasing numbers of prospective adopters coming forward. We are on track to have increased the number of Calderdale approved adopters this year by 150%. Following assessment under the new regulations and reduced timescales for approval it is hoped that they will prove to be the 'right families' for Calderdale children. Alongside local recruitment and approval, Calderdale is a regional consortium member and also refers to the National Register much earlier for prospective adopters for Calderdale children from other areas.

ACTIONS TO IMPROVE	Timescale
Review of actions from last report: (including review of whether impact made) An adoption diagnostic took place in March by Core Assets. The diagnostic highlighted areas for improvement within the family finding pod. This specifically related to improving the sense of urgency within the pod and exploring ways of ensuring family finding social workers become involved in planning for children at a much earlier stage. To support this recommendation an additional social worker has been appointed to the family finding pod to assist in driving forward the required sense of urgency in reducing delay.	
Development of an adoption tracking tool is ongoing. The tracker will monitor children individually and collectively, providing an early warning of delay within the adoption process. It will improve delivery highlighting which specific areas of the adoption process are causing delay.	
 Actions for next period: (including impact expected) Earlier involvement by family finding social workers. Allocation of a family finding social worker to each case discussed at Gateway Panel where a possible plan of adoption was outlined. This is to include attendance by Adoption Team at all Permanency Planning Meetings. To continue to monitor recruitment and approval activity around prospective adopters for Calderdale. To continue to monitor Permanence through legal and permanency planning and assisted by the tracking tool, and challenge or support any area where delay can be avoided. 	

- To consider, where appropriate, any opportunities for children to achieve permanence, including adoption, through existing foster carers or connected carers through proactive planning, assessment and approval.
- To play an active role in the Regional Consortium recruitment drive; 'Being Family'.
- Earlier allocation of family finders to assist in the production of 'fit for purpose' CPR's
- Profiles of children to be used proactively in preparation training and to host a profiling event for Calderdale children in June
 2014
- Adoption to act as case holding social worker in all cases where a baby has been relinquinished.

Lead officer: Sue Clarke / Gary Pickles