



OUR
FOCUS

Children's Services Ofsted Improvement Board Priority Indicators

November 2017



CROYDON
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Directors Summary

Workforce

There has been no movement in the overall vacancy rate of 43%, although we continue to have internal variations with more substantive staff in the permanence service. November saw a slight improvement in caseloads within the assessment service, with the introduction of the sixth (Best Start) team, but this is being rapidly eroded by the accelerating increase in work volumes. We are starting to see the benefit of the additional staffing in care planning, where average caseloads have reduced, and the figures in permanence and CWD are satisfactory. There has been a substantial decline in ASYE caseloads as the 2017 cohort complete graduation.

Contact and Referral

Volumes of contacts and referrals have continued to increase in November, resulting in a slight reduction in 24-hour completion. Some changes have also been made in practice so that personal callers to BWH are now dealt with by MASH rather than the assessment service. Re-referral rates are stable and within acceptable limits.

Assessments

The assessment service is under considerable pressure as a result of a substantial increase in assessment volumes since publication of the Ofsted report (xx%). This is impacting adversely on caseloads across the service and completion timescales within the regulatory 45 working days. This position is becoming critical as the number of family cases requiring allocation at the end of every duty week is beyond the capacity of the current team sizes.

Child in Need

There has been no change in visits in timescale and CIN reviews which have remained stable in November (62% and 69% respectively). The improved staffing levels in care planning should provide further impetus in these areas in the New Year

Safeguarding

There has been a small increase in ICPCs held within 15 working days (+5%), but this figure remains low and is a cause for concern. Analysis has indicated a range of factors, including CP Chair capacity which has been addressed, but we continue to experience difficulties with notice periods being required by some agencies.

We have seen a further smaller increase in CP visits within timescale (+2%) and this indicator is moving towards the amber banding. The number of children on CP plans for 2+ years remains healthy.

The new missing team is now fully operational and undertaking return home interviews. We are yet to see the full benefit in completion rates, but processes and data integrity are being strengthened to provide further impetus in this area.

Volumes of care proceedings have remained high in November (109), with significant volatility in completion within 26 weeks of issue.

Looked after Children

Visiting patterns for looked after children remain healthy, and timeliness of LAC reviews has stabilised in year. Placement stability, both short and long-term, remains strong, and the figures on consistency of social work support (70% 12+ months) are good. Fostering indicators continue to require improvement, with a slight downturn in annual review completion (-3%), but adoption indicators continue to hold up.

Performance indicators in respect of care leavers remain good for NEET and accommodation outcomes, but need to be improved for currency of pathway plans.

Quality Assurance

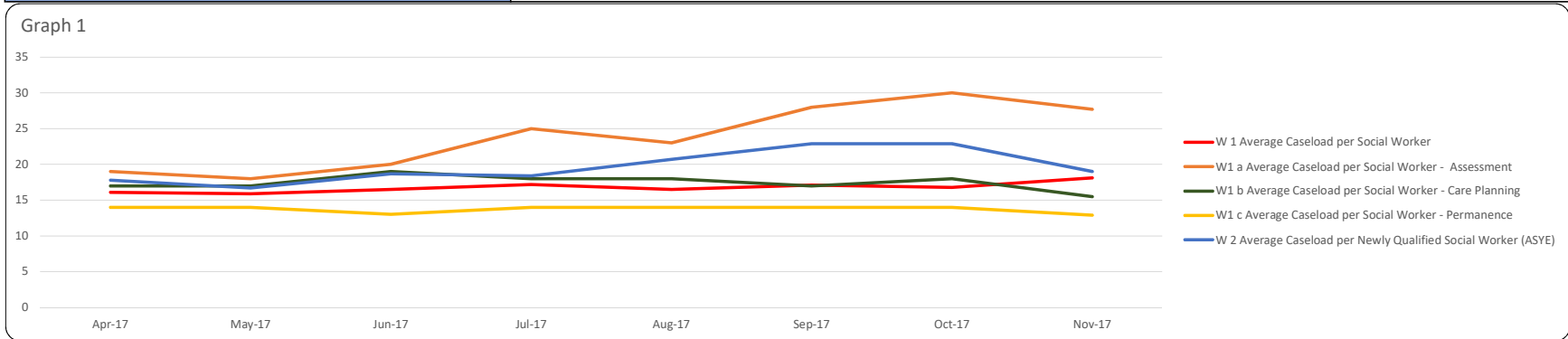
We will be in a position to report on audit grading outcomes from January onwards, but the majority of cases remain at the lower end of the spectrum (inadequate/ requires improvement). Management footprint on cases is a priority going forward into 2018 so we need to see a substantial increase in respect of indicator QA1.

Priority Indicators Action Log

REF	ACTIONS	WHEN?	COMPLETE?
Oct-01	Two additional care planning teams in place and third being recruited to. Additional Unit Manager is being sourced for permanence.	Dec-17	Ongoing
Oct-02	Audit activity on contacts and referrals has been undertaken as part of our Ofsted monitoring visit preparation.	Nov-17	Y
Oct-03	Re-referrals have been added to the audit programme for 2018	Nov-17	Y
Oct-04	The Best Start social work team has gone on rota as a sixth assessment team until the end of March	Nov-17	Y
Oct-05	Transfer process and cases remain subject to review.	TBC	Ongoing
Oct-06	Management scrutiny on CIN visiting and plans continues.	TBC	Ongoing
Oct-07	The two additional CP Chairs are in place and arrangements are being made for off line review of 12+ months CIN cases between January – March 2018.	Mar-18	Ongoing
Oct-08	Review of all 12+ month child protection cases is being led by the conference chair manager.	TBC	Ongoing
Oct-09	Authorisation levels for re-scheduling of LAC reviews has been re-set with Head of Service	Nov-17	Y
Oct-10	Additional business support capacity is in place for initial health medical notifications and this will be monitored going forwards.	TBC	Ongoing
Oct-11	Work in relation to completion of PEPs and link to CRS is ongoing.	TBC	Ongoing
Oct-12	Meeting scheduled for 1st December to discuss introduction of fostering reviewing officers as part of 2018/19 budget build.	Dec-17	Ongoing
Nov-01	Analysis to be undertaken of delayed ICPCs to identify and address causal factors for delays.	Feb-17	Ongoing

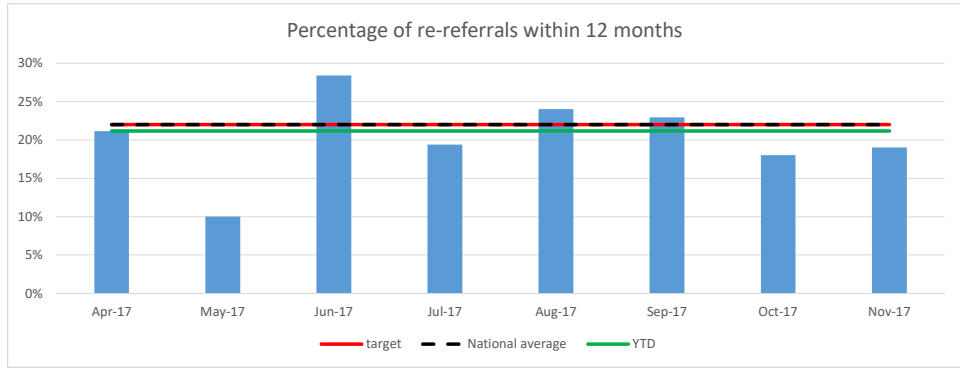
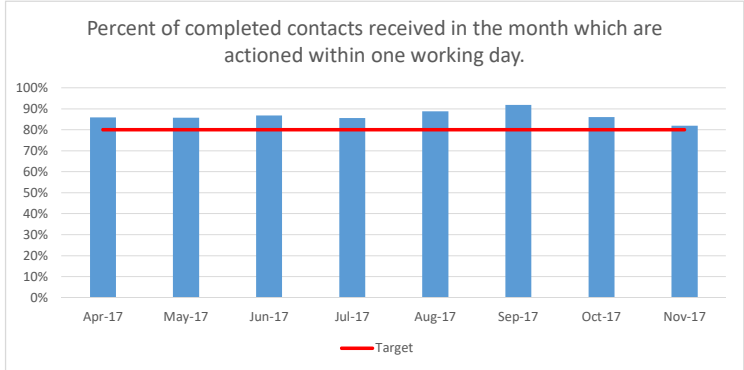
Ref	Indicator Title	RAG Last Period	Current RAG
WORKFORCE			
P1	Vacancy Rate		
W 1	Average Caseload per Social Worker		
W1 a	Average Caseload per Social Worker - Assessment		
W1 b	Average Caseload per Social Worker - Care Planning		
W1 c	Average Caseload per Social Worker - Permanence		
W1 d	Average Caseload per Social Worker - CWD		
W 1 e	Average Caseload per Newly Qualified Social Worker (ASYE)		
FRONT DOOR			
FD 3	Percentage of completed contacts received in the month which were actioned within 1working day		
FD 8	Percentage of re-referrals within 12 months		
ASSESSMENT			
AMT 2	Percentage of C&F assessments completed within 45 working days		
CHILDREN IN NEED OF HELP AND PROTECTION			
CIN 4	Percentage of CIN* for whom a visit has taken place within last 4 weeks		
CIN 5	Percentage of CIN* for who had review on time (excludes those allocated to CWD teams)		
CP 5	Percentage of children for whom CPC was held in the month within 15 working days of the Strategy discussions		
CP 13	Percentage of children subject to Child Protection Plan for whom a visit has taken place within last 4 weeks		
CP 10	Number of current Child Protection Plans lasting 2 years or more		
MC 1	Number of missing episodes in the month		
MC 6	Percentage Missing Episodes that result in a completed RHI		
LE 2	Percentage of cases concluded within 26 weeks of issue		
LE 3	Number of cases in proceedings		
LOOKED AFTER CHILDREN			
LAC 10	Percentage of LAC for whom a visit has taken place within statutory timescales		
LAC 11	Percentage of LAC cases which were reviewed within required timescales		
LAC 19	Percentage of LAC that have been in care for 12+ months, that have had same social worker for last 12 months		
LAC 20	Percentage of LAC under 16 in care for more than 2.5 years: in the same placement for 2+ years		
FOSTERING AND ADOPTION			
F 3	Percentage of Annual Reviews of Foster Carers completed on time		
AD 7	Average time between a child entering care and moving in with the adoptive family (days)		
CARE LEAVERS			
CL a	Care Leavers with Up-to-Date Pathway plan		
CL 1	Number of Care Leavers in employment, education, or training (EET) on their 17th to 21st Birthday		
CL 1a	Percentage in employment, education, or training (EET) on their 17th to 21st Birthday		
CL 2	Number not in employment, education, or training (NEET) on their 17th to 21st Birthday		
CL 3	Number of Care Leavers in suitable accommodation on their 17th to 21st Birthday		
CL 3a	Percentage in suitable accommodation on their 17th to 21st Birthday		
QUALITY ASSURANCE			
QA 1	Percentage of children who had their supervision and was within the timescales		
QA 2	Number of Cases Audited that are Good or Outstanding		
QA 3	Percentage of Cases Audited that are Good or Outstanding		

WORKFORCE														
Indicator Number	Indicator Title	Polarity	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	2017-18 Target	Target Owner	RAG	RAG Methodology
P1	Vacancy Rate	SIB							43%	43%	24%	PS	Red	24% or below Green 25%-34% Amber 35% and above Red
W 1	Average Caseload per Social Worker	SIB	16	16	17	17	17	17	17	18	17	PS	Yellow	17 or below Green 18.1-20 Amber 20.1 and above Red
W1 a	Average Caseload per Social Worker - Assessment	SIB	19	18	20	25	23	28	30	28	20	PS	Red	20 or below Green 20.1-22 Amber 22.1 and above Red
W1 b	Average Caseload per Social Worker - Care Planning	SIB	17	17	19	18	18	17	18	16	16	PS	Green	16 or below Green 16.1-18 Amber 18.1 and above Red
W1 c	Average Caseload per Social Worker - Permanence	SIB	14	14	13	14	14	14	14	13	16	PS	Green	16 or below Green 16.1-18 Amber 18.1 and above Red
W1 d	Average Caseload per Social Worker - CWD	SIB	18	18	18	16	16	19	20	16	17	PS	Green	16 or below Green 16.1-18 Amber 18.1 and above Red
W 2	Average Caseload per Newly Qualified Social Worker (ASYE)	SIB	18	17	19	18	21	23	23	19	14	PS	Red	14 or below Green 14.1-16 Amber 16.1 and above Red
Improvement Activity		There has been no movement in the overall vacancy rate of 43%, although we continue to have internal variations with more substantive staff in the permanence service. November saw a slight improvement in caseloads within the assessment service, with the introduction of the sixth (Best Start) team, but this is being rapidly eroded by the accelerating increase in work volumes. We are starting to see the benefit of the additional staffing in care planning, where average caseloads have reduced, and the figures in permanence and CWD are satisfactory. There has been a substantial decline in ASYE caseloads as the 2017 cohort complete graduation.												
Next Steps														



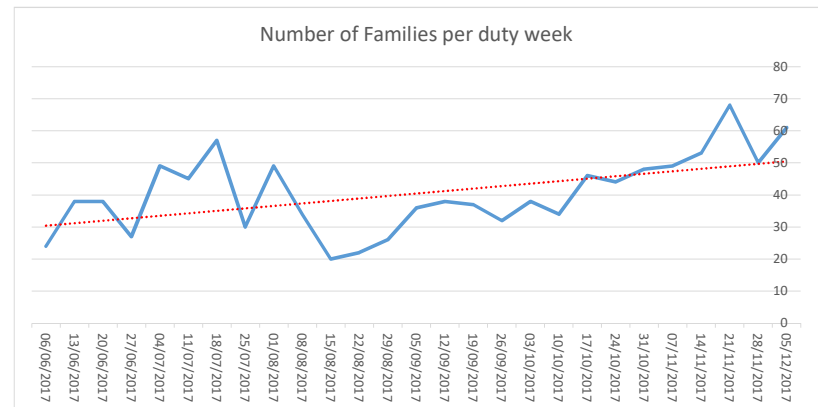
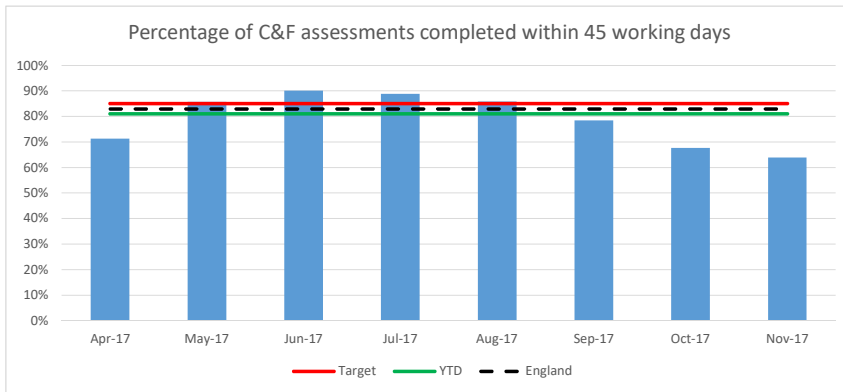
FRONT DOOR

Indicator Number	Indicator Title	Polarity	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	2017-18 Target	Target Owner	RAG	RAG Methodology
FD 3	Percentage of completed contacts received in the month which were actioned within 1 working day	BIB	86%	86%	87%	86%	89%	92%	86%	82%	90%	IL	Red	90% or above Green 85%-89% Amber 84% and below Red
FD 8	Percentage of re-referrals within 12 months	SIB	21%	10%	28%	19%	24%	23%	18%	19%	22%	IL	Green	22% or below Green 21% - 25% Amber 26% and above Red
Improvement Activity		FD3 - All contacts are actioned within 1 working day. The change of percentage reflects those contacts not completed by the MASH where additional information or work is required before a final decision can be taken on the best way to progress.												
Next Steps														



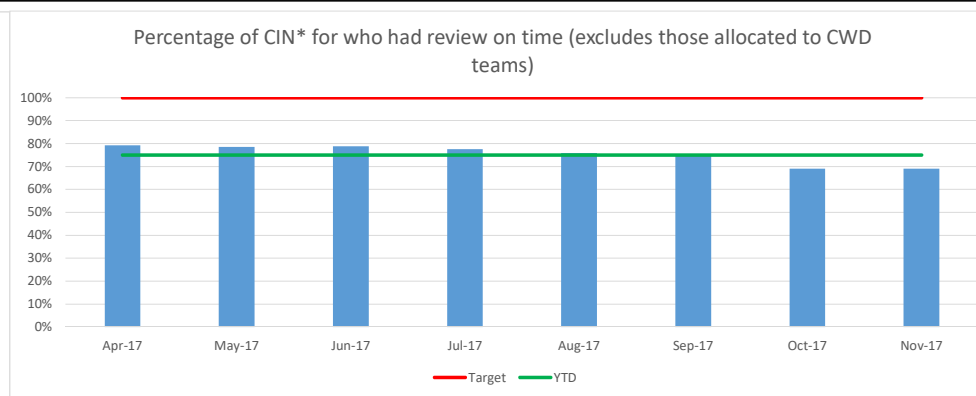
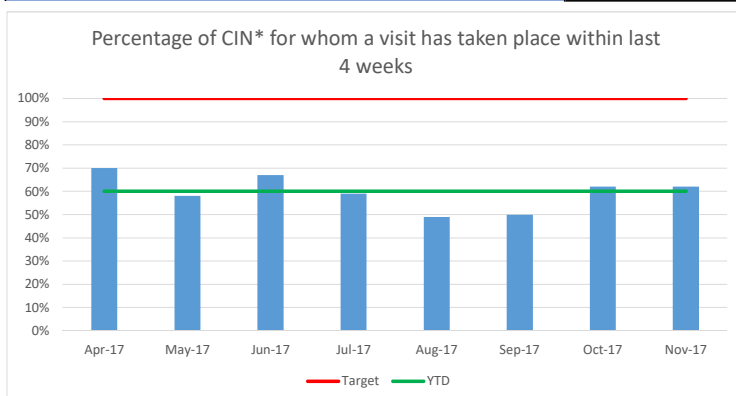
Note: Columns BELOW the target line are "good" performance

ASSESSMENT														
Indicator Number	Indicator Title	Polarity	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	2017-18 Target	Target Owner	RAG	RAG Methodology
AMT 2	Percentage of C&F assessments completed within 45 working days	BIB	71.3%	85.8%	90.1%	88.8%	85.8%	78.5%	67.7%	63.9%	95.0%	MK	Red	95% or above Green 85%-94% Amber 84% and below Red
Improvement Activity		Since our inspection in June, demand and workloads within the Assessment Service have risen markedly from an average of 35 new families identified as needing an assessment per week to 54; this equates to a 54% increase in volume, resulting in higher caseloads which are impacting the ability of staff and managers to complete and sign off caseloads within timescales.												
Next Steps		An additional team (Unit 6) has been added to the Assessment Service duty rotation to provide the existing teams with an additional week between on-duty weeks to support more timely completion of assessments. Unfortunately, the increase demand is greater than the increased staffing and therefore a further business case has been agreed for additional staffing within the service. Recruitment has commenced in this regards with the hope to have the additional resource in place in the new calendar year.												



CHILDREN IN NEED OF HELP AND PROTECTION

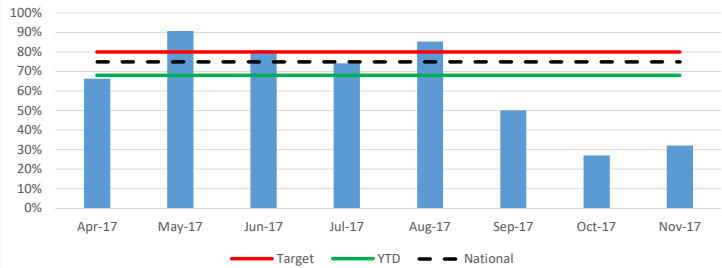
Indicator Number	Indicator Title	Polarity	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	2017-18 Target	Target Owner	RAG	RAG Methodology
CIN 4	Percentage of CIN* for whom a visit has taken place within last 4 weeks	BIB	70%	58%	67%	59%	49%	50%	62%	62%	75%	MK	Red	98% or above Green 90%-97% Amber 89% and below Red
CIN 5	Percentage of CIN* for who had review on time (excludes those allocated to CWD teams)	BIB	79%	79%	79%	78%	76%	75%	69%	69%	98%	MK	Red	98% or above Green 90%-97% Amber 89% and below Red
Improvement Activity		<p>CIN 4: Visits to children on CIN plans has been an area of focus in weekly performance clinics. This work alongside the additional staff within the Care Planning Service has seen some improvements in this area. This progress is slower than hoped which is due to the rising numbers of cases subject to Court and Child Protection plans which staff are prioritising.</p> <p>CIN 5: The increased demand in Care Planning in respect to cases subject to Court proceedings and Child Protection Plans is having an adverse impact on performance in respect to CIN cases as staff are prioritising higher risk work. Increased staffing has been allocated within the Care Planning Service and it is anticipated that performance in this area will pick up as staff come into post.</p>												
Next Steps		<p>CIN 4: Visits to all allocated children will continue to be an area of priority focus in weekly performance clinics. CIN Reviews will be included in the weekly performance clinics held with the service.</p>											CIN 5:	



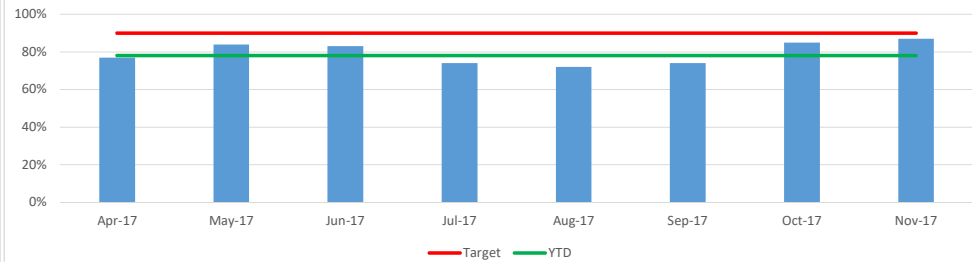
CHILDREN IN NEED OF HELP AND PROTECTION

Indicator Number	Indicator Title	Polarity	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	2017-18 Target	Target Owner	RAG	RAG Methodology
CP 5	Percentage of children for whom CPC was held in the month within 15 working days of the Strategy discussions	BIB	66%	91%	81%	74%	85%	50%	27%	32%	80%	TS	Red	80% or above Green 70%-79% Amber 69% and below Red
CP 13	Percentage of children subject to Child Protection Plan for whom a visit has taken place within last 4 weeks	BIB	77%	84%	83%	74%	72%	74%	85%	87%	98%	MK	Red	98% or above Green 90%-97% Amber 89% and below Red
Improvement Activity		CP13: Visits to children on CP plans has been an area of focus this year and this work, coupled with increased staffing in Care Planning has resulted in improvements in this area.												
Next Steps		CP13: Staff for the third additional team in Care Planning are beginning to come into post and it is hoped that these additional staff alongside the continued performance focus on visits will continue to support improvements in this area.												

Percentage of children for whom CPC was held in the month within 15 working days of the Strategy discussions

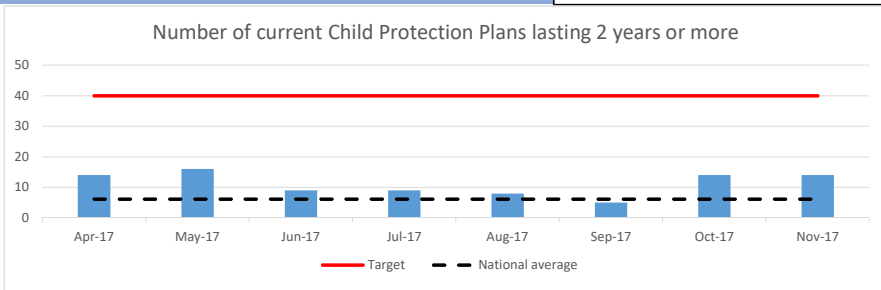


Percentage of children subject to Child Protection Plan for whom a visit has taken place within last 4 weeks



CHILDREN IN NEED OF HELP AND PROTECTION

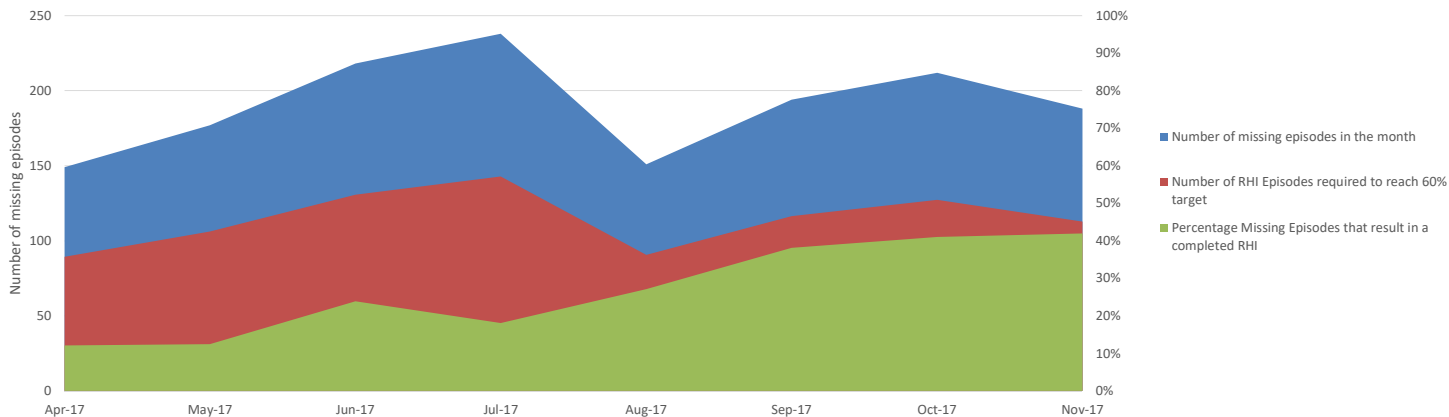
Indicator Number	Indicator Title	Polarity	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	2017-18 Target	Target Owner	RAG	RAG Methodology
CP 10	Number of current Child Protection Plans lasting 2 years or more	SIB	14	16	9	9	8	5	14	14	<10% of Cohort	MK	RAG	10% of cohort or below Green 10-15% Amber 16% and above Red
Improvement Activity														
Next Steps														



Note: Columns BELOW the target line are "good" performance

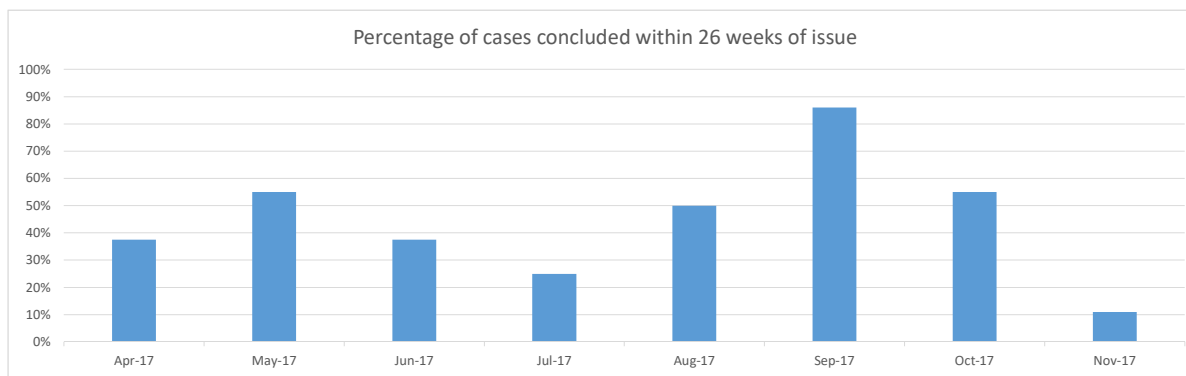
CHILDREN IN NEED OF HELP AND PROTECTION

Indicator Number	Indicator Title	Polarity	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	2017-18 Target	Target Owner	RAG	RAG Methodology
MC 1	Number of missing episodes in the month		149	177	218	238	151	194	212	188		HD		
MC 6	Percentage Missing Episodes that result in a completed RHI	BIB	12%	12%	24%	18%	27%	38%	41%	42%	60%	HD		60% or above Green 50%-59% Amber 49% and below Red
Improvement Activity		There has been a significant amount of work from the missing hub in chasing up social workers to ask them to complete interviews and upload information onto CRS. This has resulted in a modest improvement in the completed RHI return rate. In addition the HoS has tasked the team with cleaning data to highlight and address any recording issues. This work is ongoing. The HoS has also met with the performance team to look at which indicators should be reported on to ensure the most accurate reflection of return rate.												
Next Steps		The HoS is interviewing this week and next for a service leader for the missing/CSE team and will then be recruiting a further two RHI interviewers. There is a new missing process that has been agreed and will be implemented in the new year with guidance issued to staff. Most RHI interviews will then be completed and input by independent RHI interviewers. It has also been agreed that for LAC children placed outside of the borough (further than neighbouring boroughs) return interviews will be spot purchased from local providers. All of these steps should see a significant increase in return interviews offered and accepted. Once the completion rate improves there will then be a focus on completion within 72 hours.												



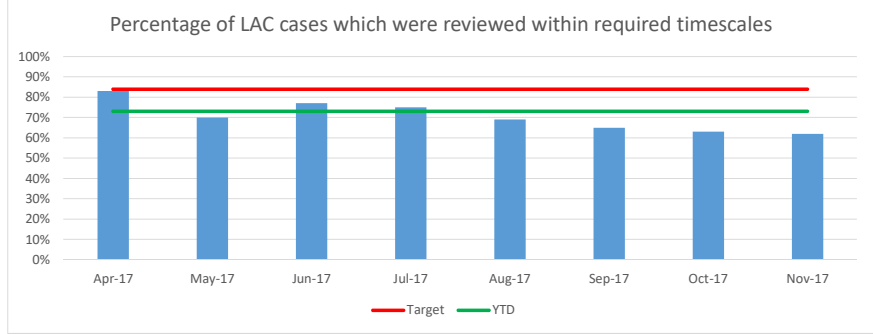
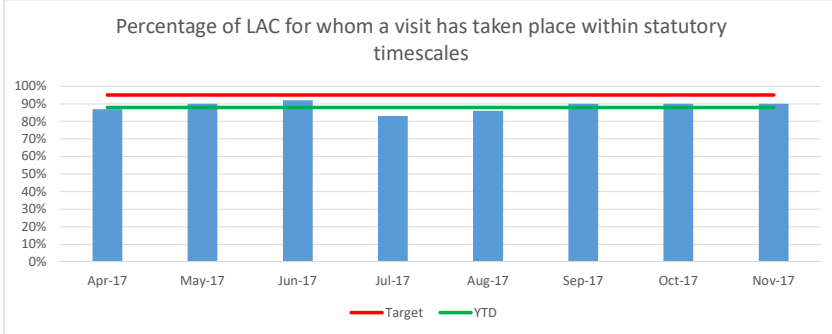
CHILDREN IN NEED OF HELP AND PROTECTION

Indicator Number	Indicator Title	Polarity	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	2017-18 Target	Target Owner	RAG	RAG Methodology
LE 2	Percentage of cases concluded within 26 weeks of issue		37.5%	55.0%	37.5%	25.0%	50.0%	86.0%	55.0%	11.0%	95%	MK		95% or above Green 85%-94% Amber 84% and below Red
LE 3	Number of cases in proceedings				67	80	87	98	98	109		MK		
Improvement Activity		Performance in respect to the percentage of cases concluded each month within 26 weeks continues to fluctuate due to changes in the number of cases reaching conclusion on a month by month basis. There are a number of factors outside the Las control that can lead to cases going over 26 weeks, including cases within the LIFT and FDAC programmes and cases where potential kinship carers are put forward by the family late in proceedings. The average length of duration of proceedings is a more reliable figure and demonstrates that despite a sharp rise in the numbers of cases in proceedings, performance in this area continues to improve.												
Next Steps		Performance continues to be monitored in monthly Legal Proceedings meetings and via the ELFJB reports												



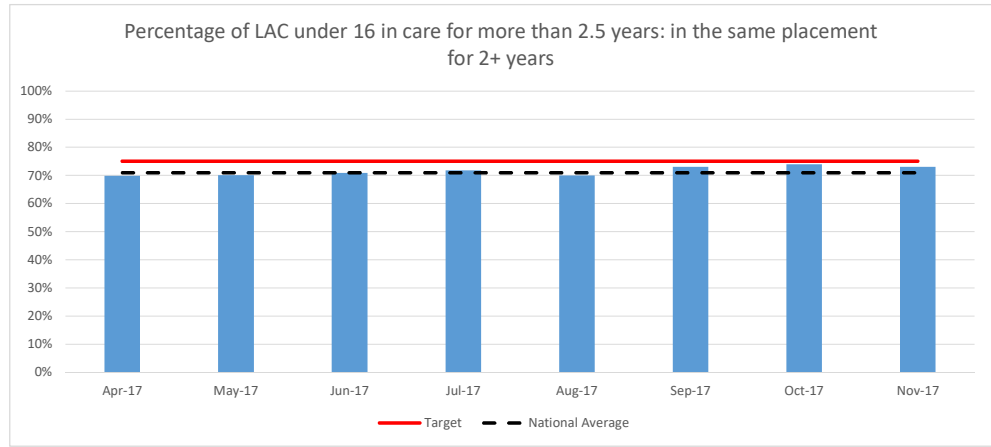
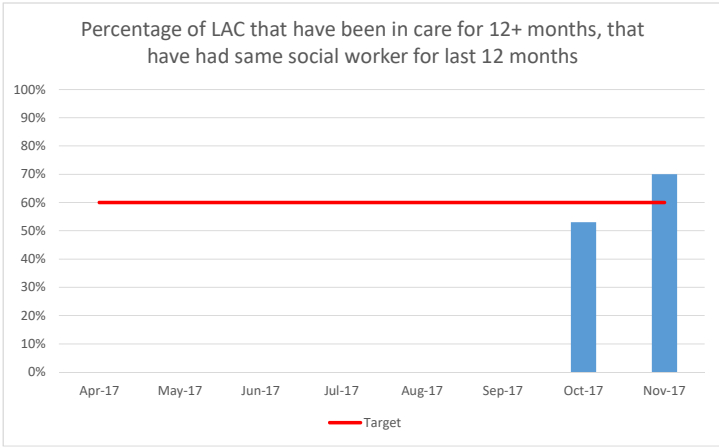
LOOKED AFTER CHILDREN

Indicator Number	Indicator Title	Polarity	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	2017-18 Target	Target Owner	RAG	RAG Methodology
LAC 10	Percentage of LAC for whom a visit has taken place within statutory timescales	BIB	87%	90%	92%	83%	86%	90%	90%	90%	98%	WT	Amber	98% or above Green 90%-97% Amber 89% and below Red
LAC 11	Percentage of LAC cases which were reviewed within required timescales	BIB	83%	70%	77%	75%	69%	65%	63%	62%	98%	WT	Red	98% or above Green 90%-97% Amber 89% and below Red
Improvement Activity		LAC 11: Noting that the figures refer to LAC reviews which are recorded as complete. In reality, there are likely to be more young people who have had a LAC review in timescale but the recording has not yet been updated to illustrate that. The social work teams and IROs are working together to update the workflow processes for individual children to reach a position where the recording is an up to date reflection of the child's journey.												
Next Steps														



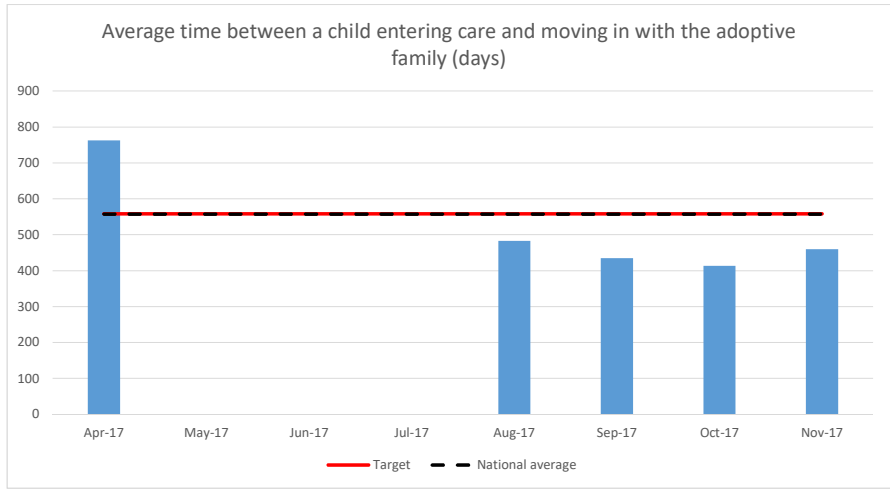
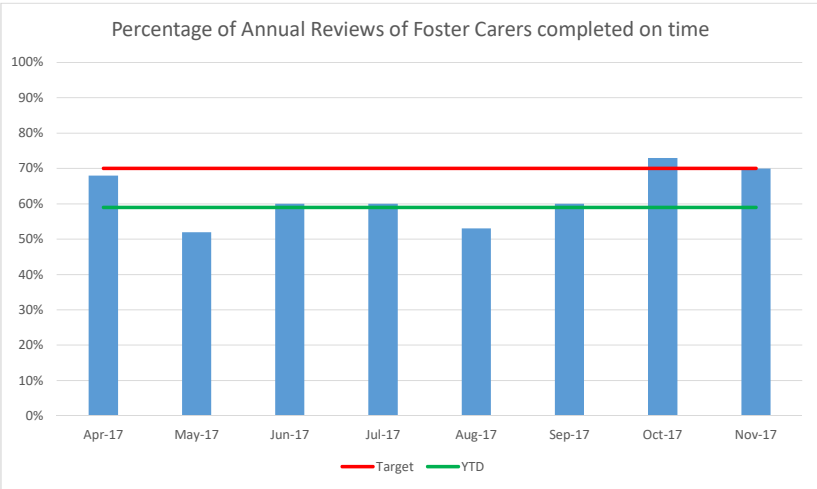
LOOKED AFTER CHILDREN

Indicator Number	Indicator Title	Polarity	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	2017-18 Target	Target Owner	RAG	RAG Methodology
LAC 19 (12m)	Percentage of LAC that have been in care for 12+ months , that have had same social worker for last 12 months	BIB	79% (6m+)	82% (6m+)	78% (6m+)	72% (6m+)	71% (6m+)	71% (6m+)	53%	70%	60%	WT	Green	60% or above Green 55%-59% Amber 54% and below Red
LAC 20	Percentage of LAC under 16 in care for more than 2.5 years: in the same placement for 2+ years	BIB	70%	70%	71%	72%	70%	73%	74%	73%	75%	WT	Yellow	75% or above Green 65%-74% Amber 64% and below Red
Improvement Activity														
Next Steps														



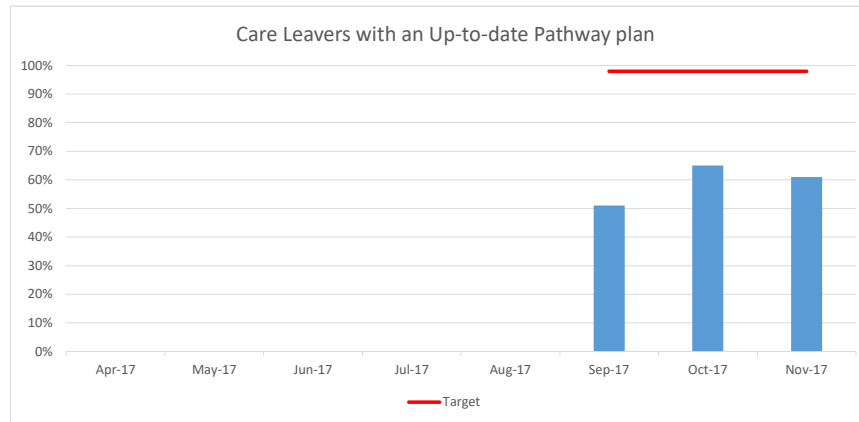
FOSTERING AND ADOPTION

Indicator Number	Indicator Title	Polarity	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	2017-18 Target	Target Owner	RAG	RAG Methodology
F 3	Percentage of Annual Reviews of Foster Carers completed on time	BIB	68%	52%	60%	60%	53%	60%	73%	70%	95%	WT	Red	95% or above Green 85%-94% Amber 84% and below Red
AD 7	Average time between a child entering care and moving in with the adoptive family (days)	SIB	763	0	0	0	483	435	413	460	558	HD	Green	558 or below Green 559 to 608 Amber 609 and above Red
Improvement Activity		F3: The percentage has taken a dip after a steady incline over the last few months. A new form has been devised with staff consultation and is proving popular among the staff team. Managers have taken note of the slight decline and are managing individual cases and staff. Of the reviews that are not in timescale, there is some evidence that more are closer to timescale than previously.												
Next Steps														



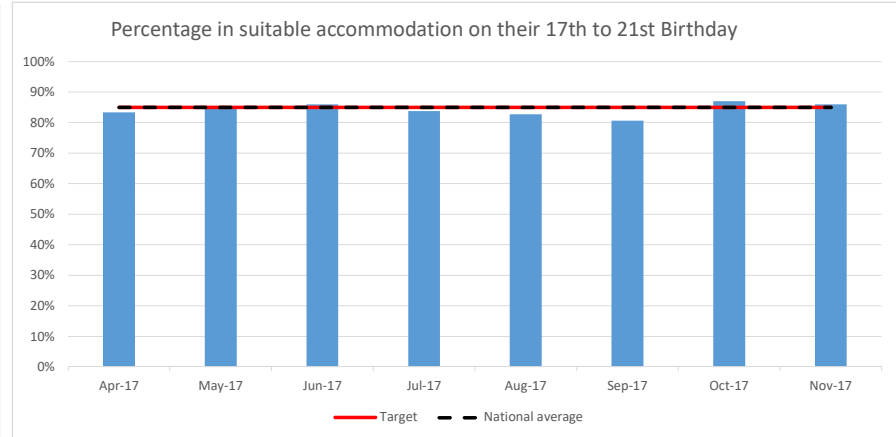
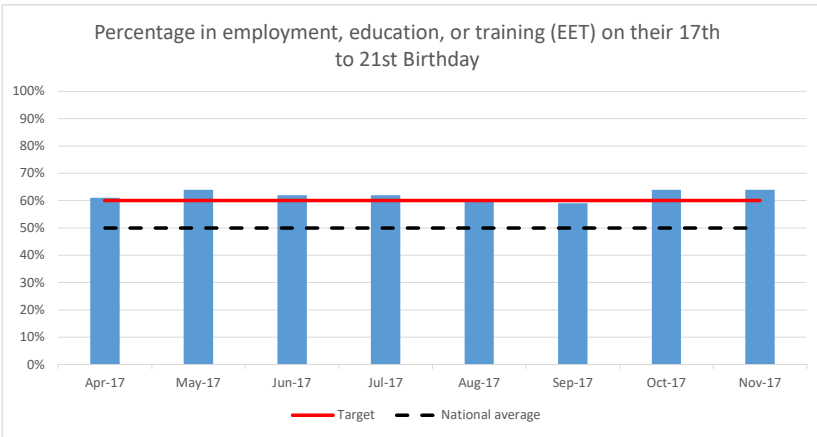
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CARE LEAVERS														
Indicator Number	Indicator Title	Polarity	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	2017-18 Target	Target Owner	RAG	RAG Methodology
CL a	Care Leavers with an Up-to-date Pathway plan							51%	65%	61%	98%	WT	Red	98% or above Green 90%-97% Amber 89% and below Red
Improvement Activity		The Leaving Care Team have a plan of action with individual staff members and individual young people's cases, to progress to a position where more of the Pathway Plans are reviewed inside 6 months. The Service Leader reports progress to weekly meetings with the HoS and is holding individual managers to account.												
Next Steps														

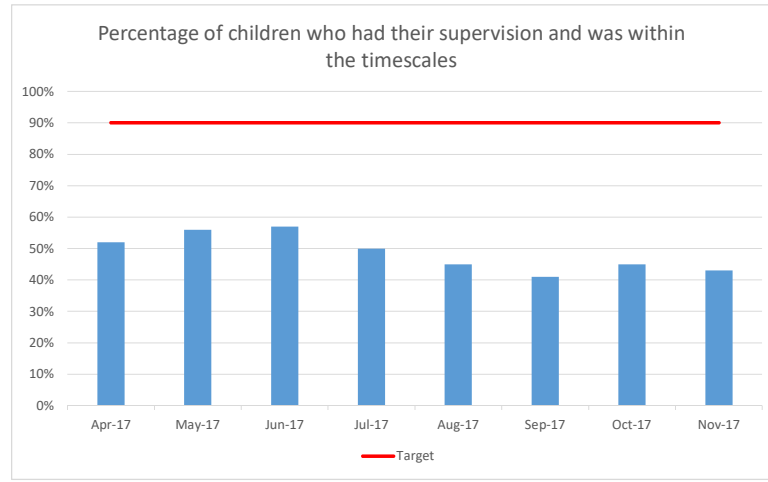


CARE LEAVERS

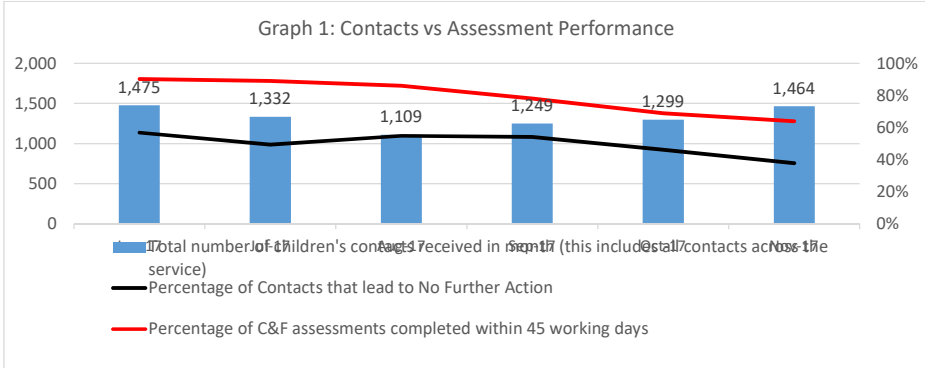
Indicator Number	Indicator Title	Polarity	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	2017-18 Target	Target Owner	RAG	RAG Methodology
CL 1	Number of Care Leavers in employment, education, or training (EET) on their 17th to 21st Birthday		350	354	363	374	364	358	388	389	NA	WT		
CL 1a	Percentage in employment, education, or training (EET) on their 17th to 21st Birthday	BIB	61%	64%	62%	62%	61%	59%	64%	64%	60%	WT	Green	60% or above Green 50%-59% Amber 49% and below Red
CL 2	Number not in employment, education, or training (NEET) on their 17th to 21st Birthday	SIB	243	221	223	242	238	248	219	221	NA	WT		
CL 3	Number of Care Leavers in suitable accommodation on their 17th to 21st Birthday		494	486	504	505	498	489	531	527	NA	WT		
CL 3a	Percentage in suitable accommodation on their 17th to 21st Birthday	BIB	83.3%	84.5%	86.0%	83.7%	82.7%	80.6%	87%	86%	85%	WT	Green	85% or above Green 75%-84% Amber 74% and below Red
Improvement Activity														
Next Steps														



QUALITY ASSURANCE														
Indicator Number	Indicator Title	Polarity	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	2017-18 Target	Target Owner	RAG	RAG Methodology
QA 1	Percentage of children's cases subject to Supervision within timescales	SIB	52%	56%	57%	50%	45%	41%	45%	43%	90%	TS	Red	90% or above Green 80%-89% Amber 79% and below Red
QA 2	Number of Cases Audited that are Good or Outstanding		Data - In progress and will be able to report on this from January 2018									TS		
QA 3	Percentage of Cases Audited that are Good or Outstanding		Data - In progress and will be able to report on this from January 2018								50%	TS		50% or above Green 40%-49% Amber 39% and below Red

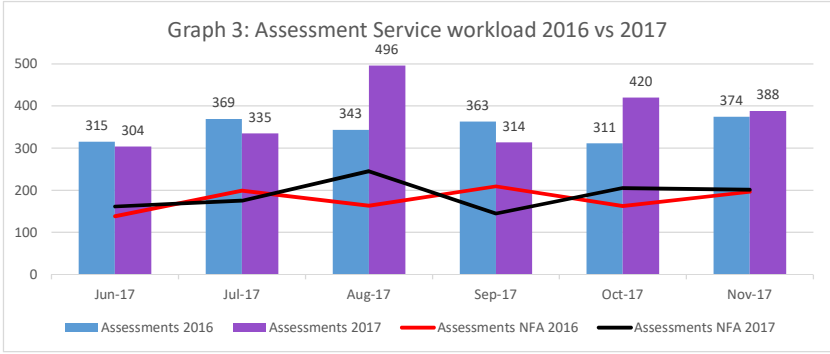
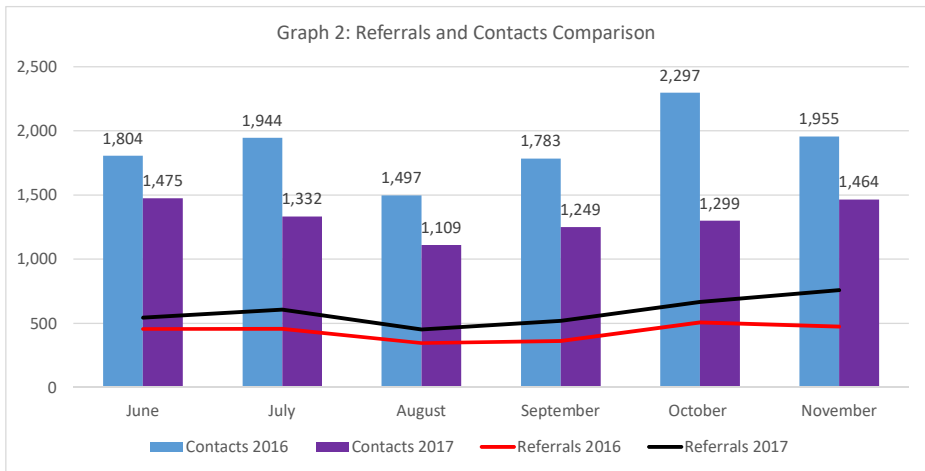


Analysis of Performance - Demands on the Service



The decline in performance of the Assessment Service is directly linked to the increased volume of contacts both being received by the Front Door and those that progress to formal intervention. This increased pressure on the Assessment Service is also reflected in the continued pressure on caseloads in the Assessment Service despite the additional team being deployed to help meet demands. (Graph 1)

Despite the number of contacts received between June and November 2017 (7928) being 30% lower than 2016 (11280) the number of contacts progressing to referral has increased by 36% compared to the same period last year. (Graph 2)



Graph 3 demonstrates that the Assessment Service completed 9% more assessments during 2017 than in 2016. The trend in assessments progressing to "No Further Action" remains broadly similar to 2016 further demonstrating the increased workload and pressure within the Assessment Service.

Note: "No Further Action" is used as shorthand for "cases did not progress to formal planning." The current configuration of CRS does not allow other outcomes to be effectively recorded so whilst some of the NFA cases may have been subject to no further action, others would have been stepped down to Early Help for additional support.

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