

CABINET	AGENDA ITEM No. 8
23 SEPTEMBER 2013	PUBLIC REPORT

Cabinet Member(s) responsible:	Cllr Sheila Scott	
Contact Officer(s):	Sue Westcott – Executive Director of Children’s Services	Tel. 01733 863606

CHILDREN’S SERVICES DIRECTOR’S UPDATE

R E C O M M E N D A T I O N S	
FROM : Sue Westcott, Executive Director of Children’s Services	Deadline date : N/A
<p>1. To note the contents of this report:</p> <p>Key points:</p> <ul style="list-style-type: none"> • Rise in contacts • Continued decrease in re-referrals • Initial/Core Assessments in timescales • Number of CAFs increased • Raising quality and new vision 	

1. ORIGIN OF REPORT

1.1 Quarterly updated Director’s report to Cabinet.

2. PURPOSE AND REASON FOR REPORT

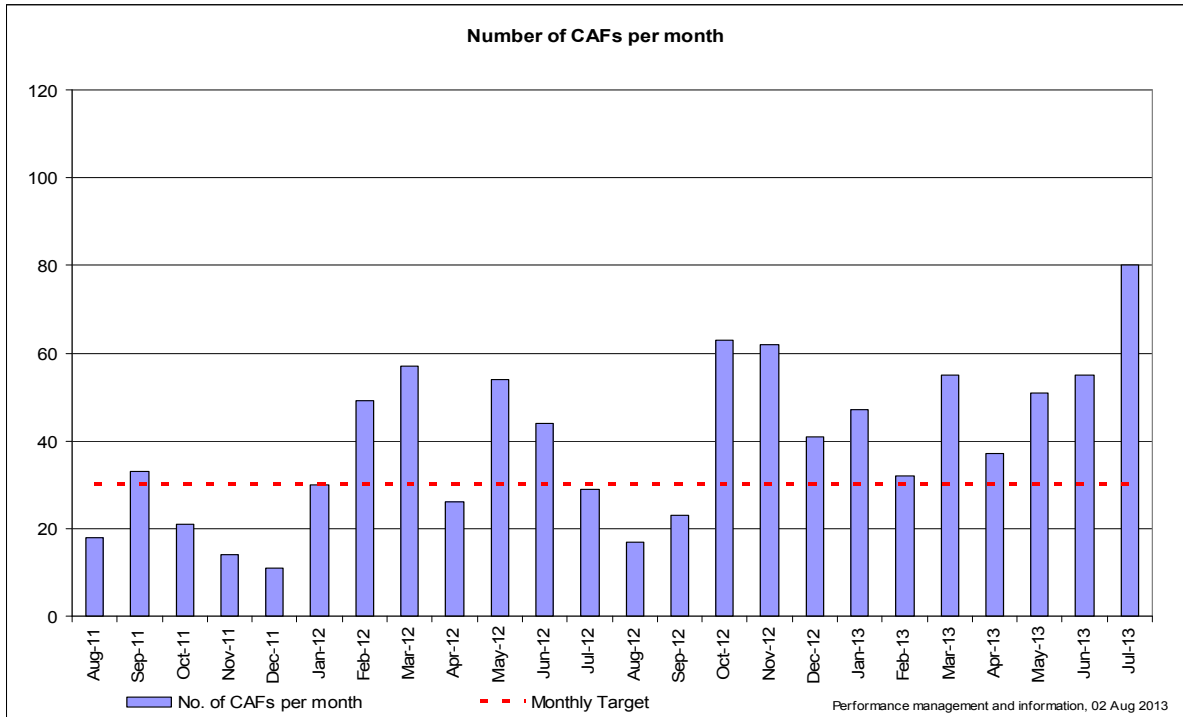
2.1 To report to Cabinet on Children’s Services improvement.

3. SOCIAL CARE PERFORMANCE

3.1 CAFs (early intervention assessments)

The number of early intervention assessments has increased by 25 from the previous month to 80 completed. The rate is 125.1 per 10,000 which is 54.8 % higher than our target of 80.8%.

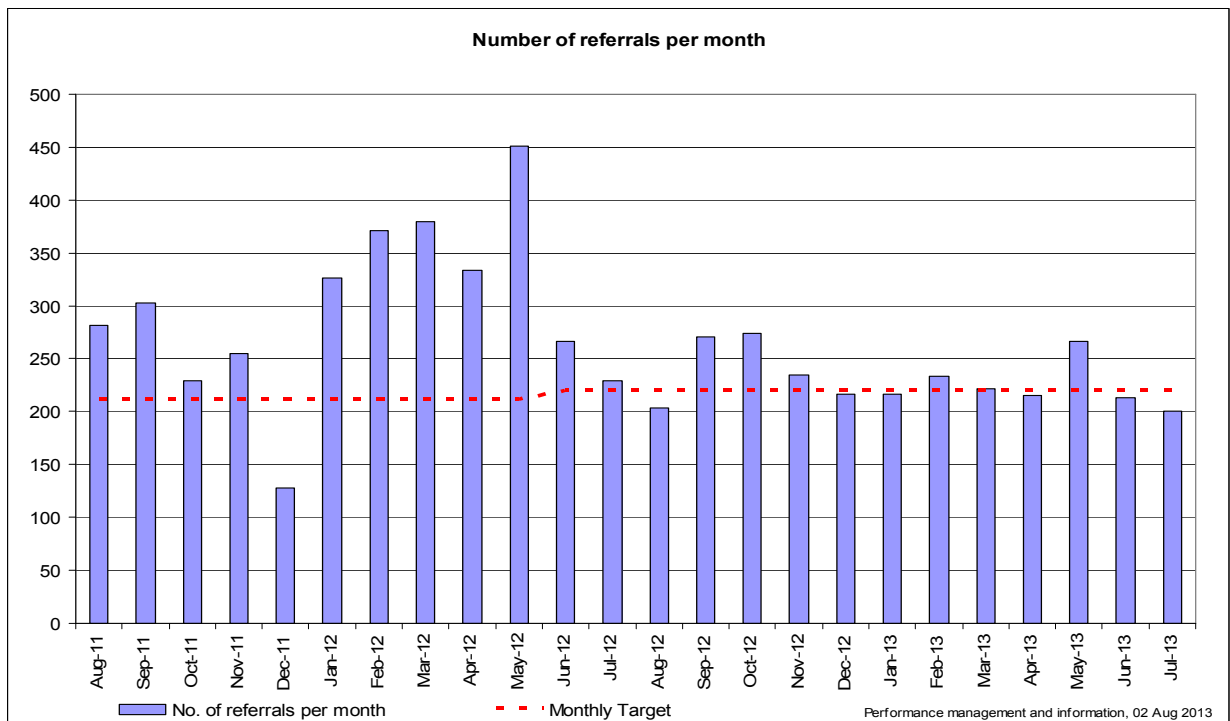
This illustrates that more assessments and interventions with family are taking place at an earlier stage and/or that a child and family’s need is being identified much sooner and support and services provided.



3.2 Contacts/Referrals

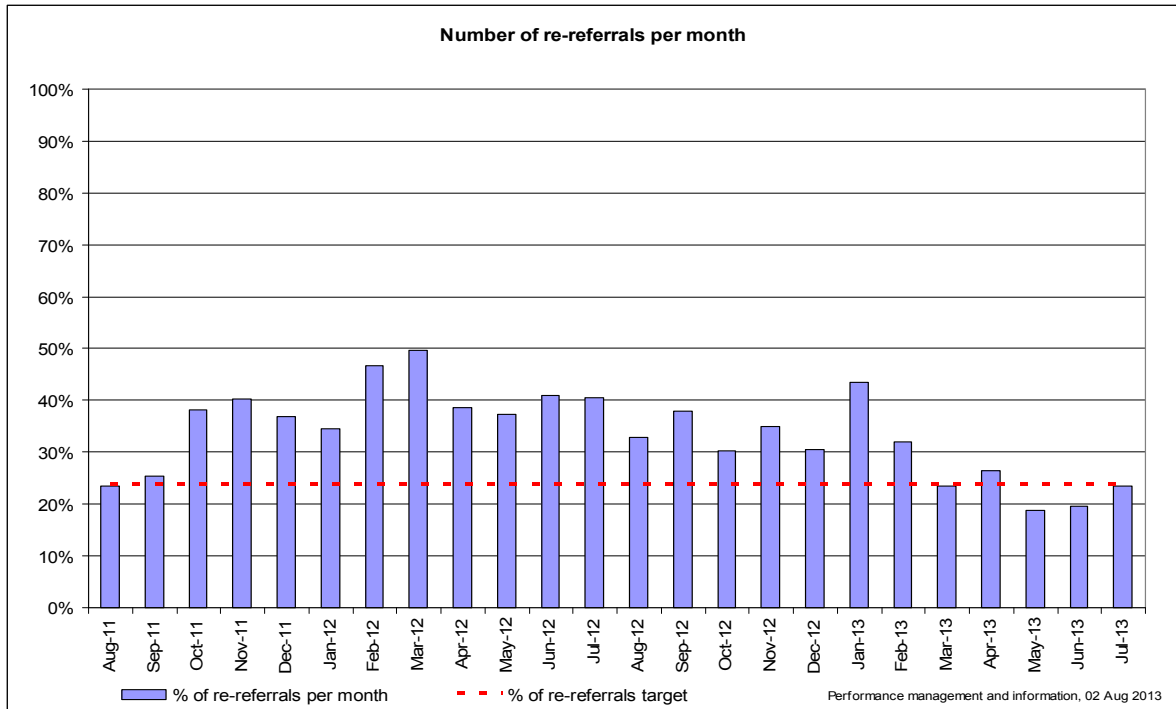
There has been a rise in contacts from 759 to 891 in a month. We are interrogating this data to see who the contacts were from and their content.

The rise in the number of contacts did not lead to a large attendant rise in the number of referrals. The number of referrals is remaining steady at approximately 220.



3.3 Re-referrals

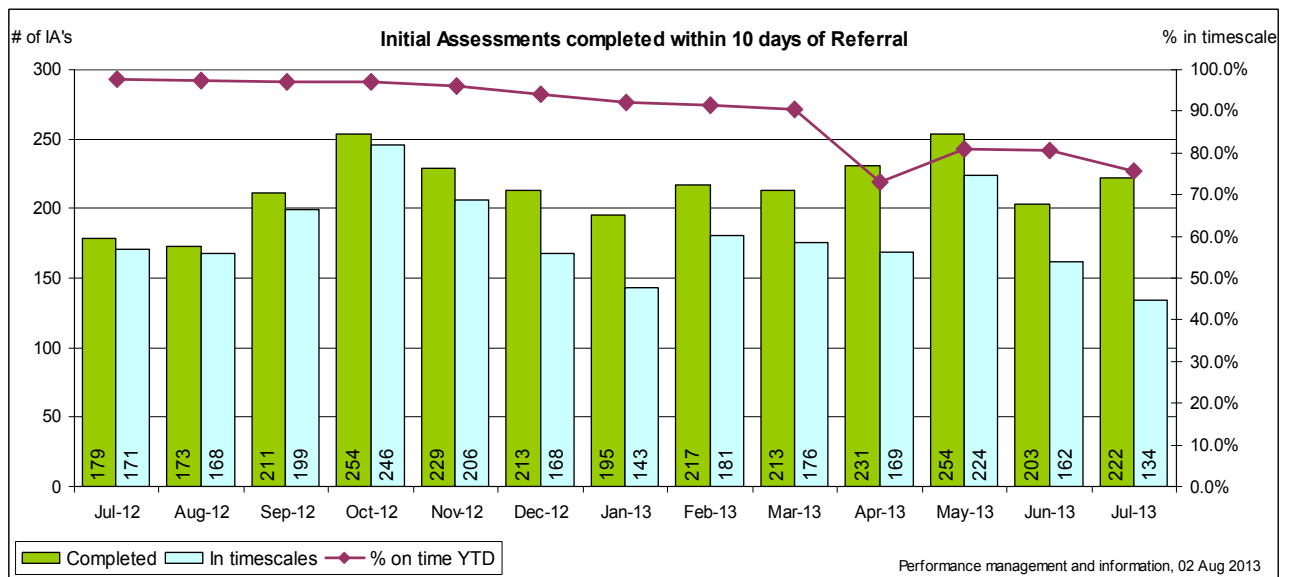
Out of the 223 referrals, 48 were repeats within 12 months. This takes the re-referral year to date percentage to 21.5% which is 2.4% lower than target for the second consecutive month and now below target. The last published national average is 26.1%. It is important to have few re-referrals because this would denote that the original referral was not adequately worked.

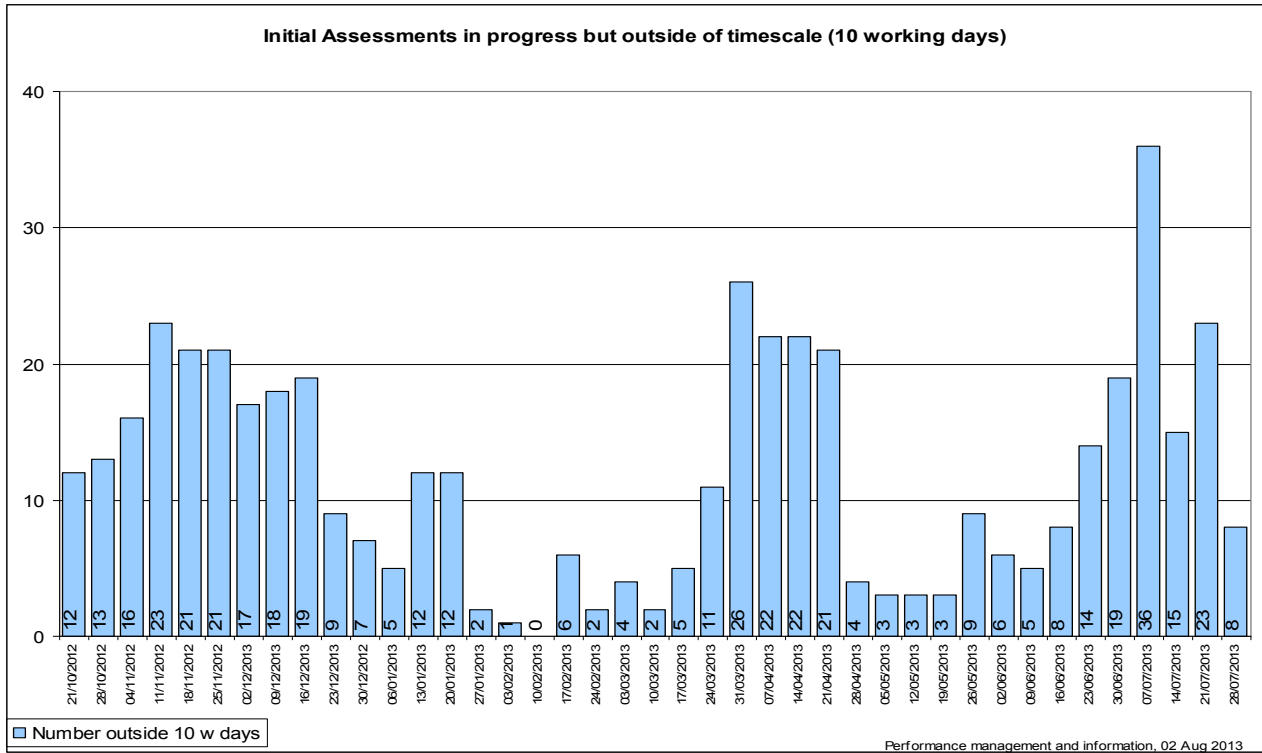


3.4. Initial Assessments

222 initial assessments were completed in the month, of which 134 were in time with 88 outside. Although this is a slight decrease in performance, many of the assessments were only over by a few days.

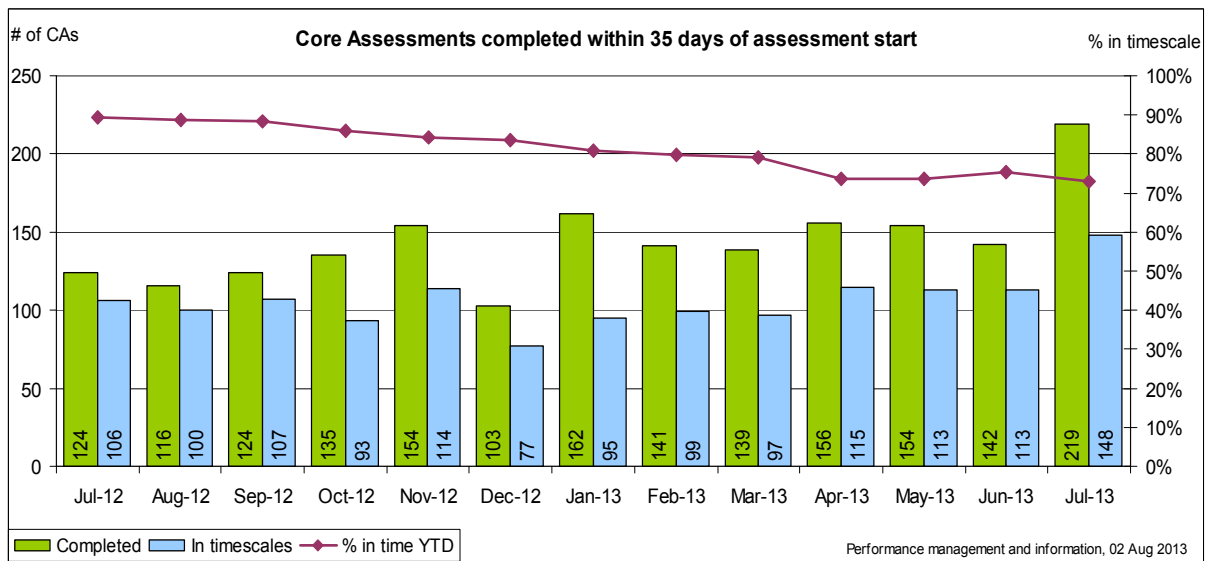
Our referral and assessment team has been reconfigured during this period, giving us a more enhanced screening function and better interrogation of the referral through greater information sharing with partner agencies. The number of initial assessments in timescale has now increased, which we will see in the next report.

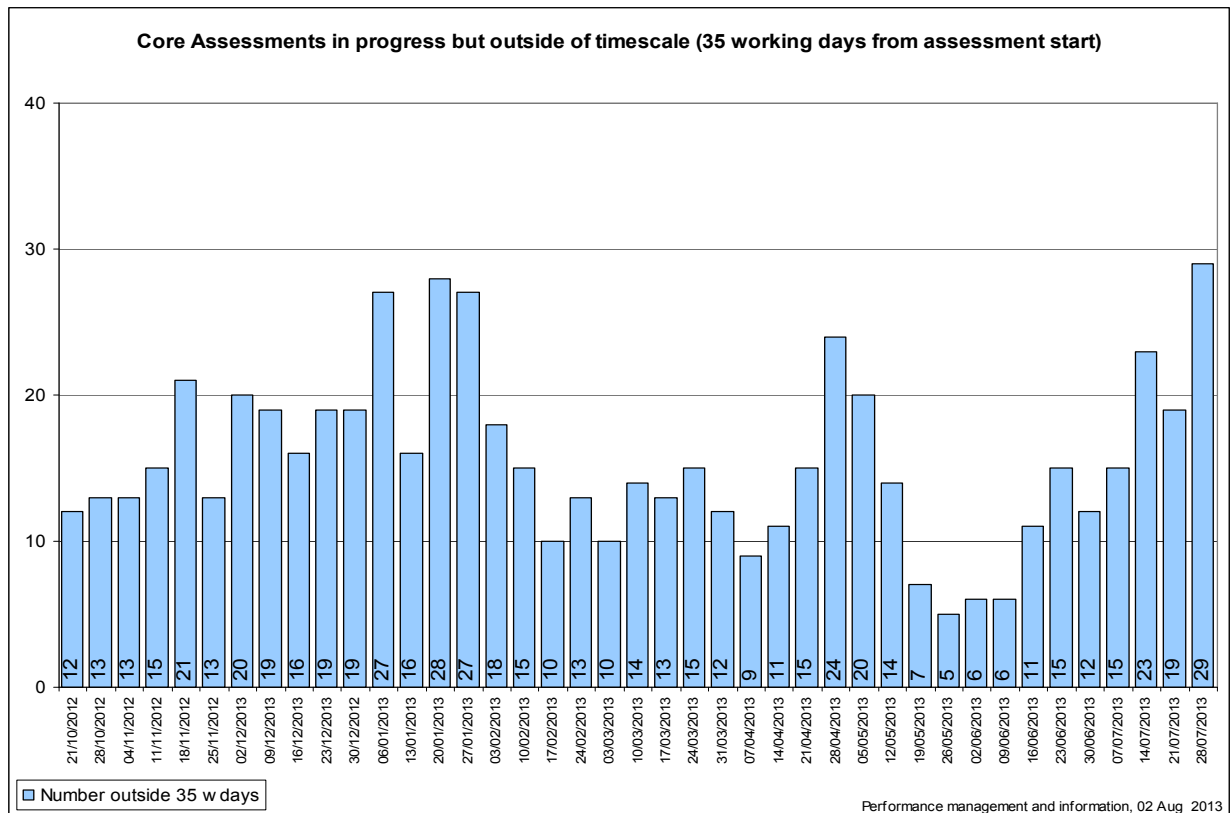




3.5 Core Assessments (complex assessments)

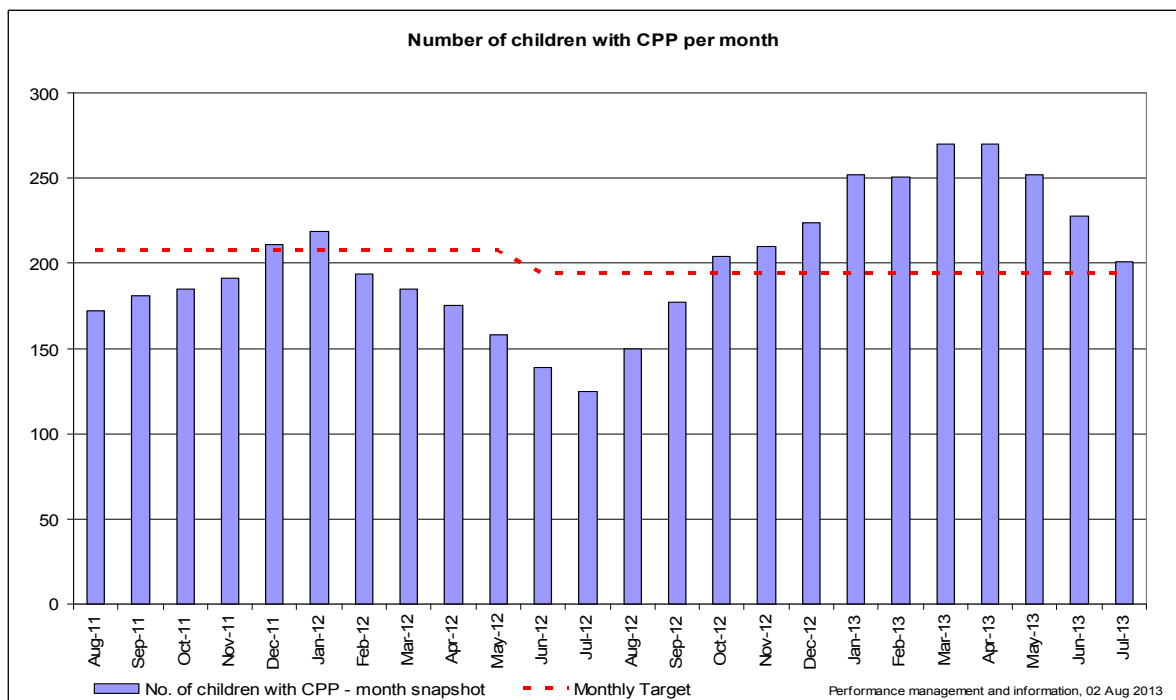
124 core assessments were completed in the month of which 106 were in timescale. The year to date figure for core assessment timescales is 77.6% which is above target by 2.5%. The number of core assessments remains relatively stable.





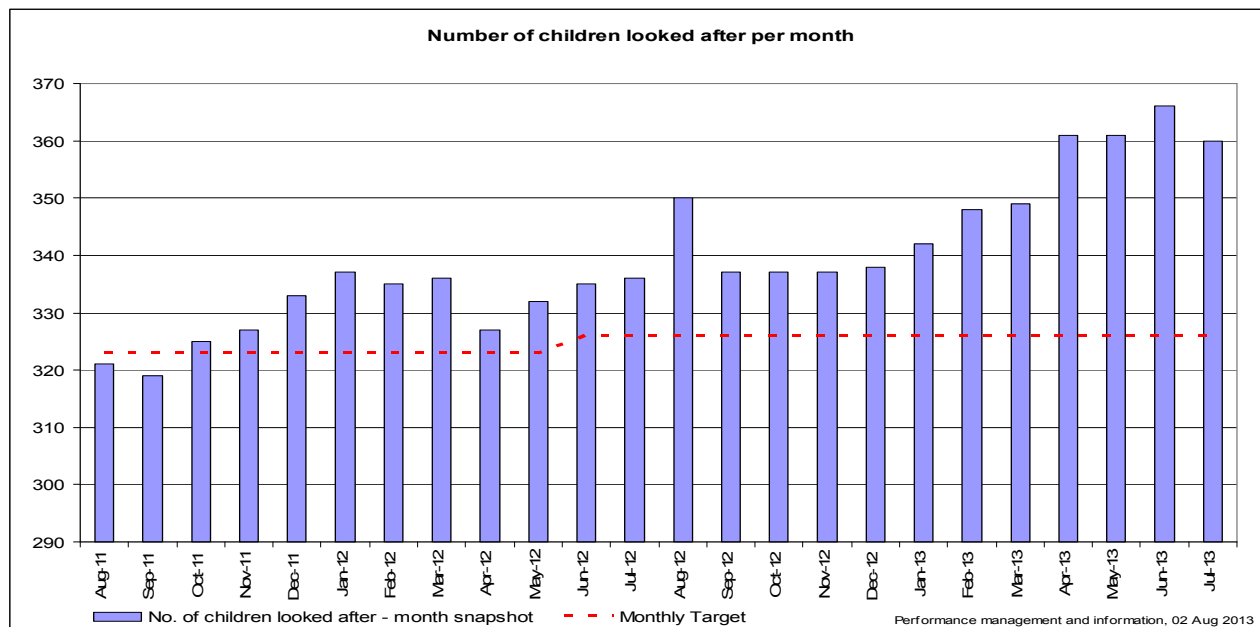
3.6 Child Protection Plans

The number of Child Protection Plans is now stabilising after an increase in March and April. All referrals to the Conference and Review Team are being scrutinised carefully to ascertain if safeguarding concerns are such that there needs to be a Child Protection Conference and/or the family could receive support services under our children in need procedures.



3.7 Children Looked After

A rise in the number of children subject to a Child Protection Plan generally denotes a rise in the number of children becoming accommodated as the threshold is lowered for care. The number of children accommodated at the end of June is at 360, a decrease of 2 compared to the previous month. The rate is at 80 per 10,000 of the child population which, given the rise in birth rate in Peterborough, is approximately the national average.



3.8 Unallocated Cases

There have been some cases unallocated at the Front Door owing to staff leaving and new staff commencing in post. Whilst we refer to these cases as 'unallocated', they are in fact triaged and prioritised according to the level of need and any potential risk. Therefore these cases are pending, awaiting a social worker commencing work which has already been prioritised.

3.9 Quality

There will continue to be a focus on timescales but it is important that the work is completed to ensure it is of high quality. We must demonstrate that our assessments and interventions are of high standard through good care planning and supervision. This drive for quality is crucial to achieving excellent outcomes for children and families and is consistent with the Munro recommendations and the development of a single assessment tool in line with the guidance in Working Together 2013.

We are now moving into our second stage of the improvement by concentrating on the content of the assessment and care planning to raise standards. The plan is not to dip below the quantitative target set whilst illustrating that the quality of the work is improving.

This will be achieved through supervision and audit:

1. Senior Managers Monthly case File Audit
2. Discrete themed audits
3. Dip sample of Quality Assurance Exemplars on each case file
4. Dip sample of contacts and referrals
5. Individual case file audit
6. Practice Alerts from Child Protection Chairs and Independent Review Officers to performance meetings
7. Peterborough Safeguarding Children Board multi agency audits
8. Feedback for Child Protection Conferences

9. Feedback from families
10. Safeguarding Assurance days
11. Audit of supervision
12. Child and family questionnaires

3.10 Reconfiguration and Moving Forward: Changing the Vision

Plans are being developed to re-shape the Referral, Assessment and Family Support service, the first stage of which was implemented in June, with some of the team managers changing teams and additional resources from the existing envelope being placed into the screening of contacts.

There will be an 'Access' team that will more robustly screen contacts and both gather and share information as appropriate, leading to more consistent and timely threshold decisions. Contacts not resulting in a social care assessment will receive a proactive response that might include: the provision of information, advice, or guidance; onward referral; or re-direction. The team will also conduct S47 Strategy discussions and hold S47 enquiries.

Assessment and Family Support teams will be developed utilising much of the resources currently in Referral and Assessment and aligned to Locality boundaries in order to strengthen partnership and locality-based working and will hold all non-S47 assessments and casework. This will reduce the number of currently built-in transfers between teams and changes in case worker and ultimately lead to a better experience for children and families. Apart from moving much of the assessment activity (S17) currently held in Referral and Assessment this means little disruption to the family support teams. A single assessment tool is being developed.

These Family Support teams will be clustered into three locality teams taking initial assessments from the area they are clustered in. This will serve to prevent unnecessary transitional points ensuring fewer social workers for the child and family. It will also mirror the proposed work in the Commissioning and Neighbourhood teams around the targeted locality provision for the more vulnerable whilst assisting with neighbourhood linkage and schools. There will also be a continuum of provision from the local targeted provision through to specialist (Social Care Provision). This will ensure the greater breadth and span of resources for both targeted and specialist services to draw upon.

To facilitate this change there will be a gradual change to the reporting of performance from one purely focussing on quantitative data to more focus on evidence of quality of assessment and intervention.

3.11 Quality Assurance

Some highlights from this activity:

Since April 2012, between 20-25 cases have been audited each month by Senior Managers from a range of different categories from children in need to child protection. The findings of this report will be presented to the next meeting of the External Improvement Board.

The Audit of Leaving Care Services will be presented to the Corporate Parenting Panel and illustrates that there has been an improvement in the completion of care plans and supervision needs to be evidenced on the care file.

The feedback from Child Protection Conferences is very positive with 100% of the parents saying they felt supported by the chair and 84% of respondents said that the social worker had shared their report with them prior to the conference. This is an increase from 62% in the last report measuring performance between 1st March and 31st May 2013.

Feedback from Child Protection Conferences is reported to the Board.

3.12 Multi-agency audit

There has been an audit of ten cases where the child had been the subject of a Child Protection plan for a second and third time. The audit concluded that the decision making was consistent and the decision to remove the child from a plan was based on clear evidence of improved family relations and functioning.

3.13 Safeguarding Assurance Day

Our Safeguarding Assurance Day was held in the Looked After Children's team and the feedback from staff was positive.

3.14 Changes to ICS

Changes are being made to the ICS forms using the tool, Form Designer. This should greatly cut down and simplify the amount of form filling and duplication for social workers.

4. EARLY INTERVENTION & PREVENTION

- Cherry Lodge and The Manor, our two homes which provide residential care and Short Breaks for children with disabilities have achieved the grade of 'good' in recent Ofsted inspections. Clare Lodge, our secure home for young women was also graded 'good' by Ofsted.
- Our local health commissioners (CCG) have agreed to look at ways we can jointly commission services to get better quality and value for the money we spend on children, stop any duplication and provide more joined up seamless services with better outcomes for children.
- Through the 'Children and Families Bill', we have a statutory duty to publish what we offer children and families with disabilities around Short Breaks, family information and special educational needs. We have developed our local offer on Short Breaks and activities to help and support families, and consulted with local parent carer groups on this. In the autumn, we are planning two stakeholder events with Healthwatch and parent carer forums to develop our offer around special educational needs with all partners and, in particular, a single assessment that builds on the Common Assessment Framework (CAF) that includes health and educational needs.

5. EXTERNAL IMPROVEMENT BOARD (EIB)

- Following the removal of Government Intervention on 6 June 2013, it was agreed that the EIB will continue to meet to provide us with external challenge and scrutiny. The EIB agreed it will continue to meet on a bi-monthly basis, with a review of that regularity at the meeting in October 2013.
- The Director of Children's Services will prepare a six monthly progress report for the Minister in December 2013.