

Bath & North East Somerset Council

MEETING:	Health and Wellbeing Board (Shadow)
MEETING DATE:	13 th June 2012
TITLE:	Children's Safeguarding Report
AN OPEN PUBLIC ITEM	
List of attachments to this report: Appendix 1: Child Protection Performance Indicators	

1 THE ISSUE

- 1.1 To provide the Board with a progress report in respect of the key indicators of child protection activity, as included in the Annual Report and Business Plan of the Local Safeguarding Children Board (LSCB). Progress is shown in relation to previous years and in comparison with other Local Authorities and is reported at the end of each quarter. This report details the position at the end of 2011/12.
- 1.2 The Report also details progress made in identifying local performance indicators which will provide more evidence of the quality and impact of child protection services for the child and their family, to supplement the national performance indicators which are fundamentally output measures.

2 RECOMMENDATION

- 2.1 The Partnership Board for Health and Wellbeing is asked to note the report and actions being taken and receive updated performance reports at each meeting of the Board.

3 FINANCIAL IMPLICATIONS

- 3.1 There are no direct financial considerations arising from this report.

4 THE REPORT

- 4.1 Appendix 1 details Bath and North East Somerset's performance in respect of the key performance indicators for child protection activity, as reported to the Local Safeguarding Children Board. The following paragraphs provide a commentary and performance summary in respect of each indicator, together with remedial actions where appropriate. Proposals for local performance indicators and how these will be collected and recorded are outlined in paragraph 4.9.

4.2 Number of children subject to child protection plans

- 4.2.1 This is not a national performance indicator, but a significant indicator of child protection activity, though it should be interpreted with caution. A child

protection plan is made following a multi-agency case conference and assessment that a child is at continuing risk of significant harm or impairment of health and development. Early intervention and the provision of services can result in a child's needs to being met any earlier stage, thereby preventing the escalation to risk of significant harm and the need for a child protection plan – resulting in a smaller number/percentage of children with plans. On the other hand, small numbers could be the result of inappropriately high thresholds for intervention.

- 4.2.2 Our thresholds for intervention are monitored by the LSCB's Safeguarding Children Sub Committee and reported to the LSCB. The Children's Service regularly audits thresholds for interventions. These are considered to be appropriately and consistently set and understood by other agencies.
- 4.2.3 There was a steady increase in the number of children with protection plans throughout 2010/11 with a marked increase in the final quarter – 106 represented the highest number since the late 1990's. The Children's Service investigated this position and determined that the increase has been the result of a combination of factors (the complexity of new cases and risks being identified: cases where long standing but low level concerns have increased to become risks of significant harm: the quality of some assessments and multi-agency evaluations of the risk of harm resulting in some cautious decisions about the need for some protection plans) – and took actions to address these factors which have resulted in an appropriate reduction in the number of children with protection plans throughout 2011/12 and more children in need plans – whilst ensuring that protection plans are in place for all who require them.
- 4.2.4 The current figure (78) is close to the average for the past five years. Whilst it is likely that the figure for 2010/11 represented a spike within overall figures, it is probable that the current figure will steadily increase over the next few years in line with the recent trends and projected increases in the demands for Children's Social Care Service, and the number of initial and core assessments undertaken and will probably reach 100 – 105 by 2014/15. These trends and projections are in line with comparator authority and national positions.

4.3 Child Protection Plans lasting two years or more (NI 64)

- 4.3.1 This national performance indicator is used to indicate the effectiveness of the child protection plan in eliminating and significantly reducing the risk of significant harm – and is based upon research evidence that this is most likely to be achieved within a two year period. If not, the Local Authority should consider whether action is required to remove children from care in which they are assessed as being a continuing risk of significant harm. There are circumstances in which plans may exceed 2 years – for example when there have been changes in household composition that required further assessments: when addressing issues of neglect and improvements in parenting are being effected but further improvements are required and the assessment is that these can be achieved; when working with parents whose mental health difficulties impact upon their parenting.
- 4.3.2 For this performance indicator, a low score is indicative of good performance.
- 4.3.3 The improvement noted throughout 2010/11 (which resulted in the end of year figure being only slightly off target), was maintained in 2011/12 and the end of year target achieved. It must be noted that these percentages

represent a small number of children and families. We have processes in place to review the circumstances of each child. Each child protection plan is reviewed by a multi-agency case conference, and the decision to continue with child protection plans quality assured by the LSCB's Safeguarding Children Sub Committee.

4.4 Children becoming subject to a child protection plan for a second or subsequent time (NI 65)

- 4.4.1 This national indicator is used to measure the effectiveness of child protection plans in eliminating risks of significant harm – i.e. the risks have been eliminated, do not reappear and necessitate a further child protection plan. In practice, this is determined by the quality of services provided and work undertaken with parents and child(ren) through the plan: the quality of assessment of risks of significant harm and actions taken: the provision and accessibility of any support services subsequent to the child protection plan.
- 4.4.2 For this performance indicator, a low score is indicative of good performance.
- 4.4.3 Our performance in this area had been strong for a number of years – exceeding both the national and family of Local Authorities' performance. As noted in previous reports, performance throughout 2010/11 was off target (and above national and comparator positions). Gradual improvements were achieved throughout 2011/12 but the end of year target was not achieved. We are nonetheless now closer to the level of comparator authorities.
- 4.4.4 Absolute numbers are small but performance did raise questions about the overall effectiveness of the services provided by agencies at the conclusion of child protection plans to prevent risks from re-emerging. Ensuring that these are in place and consistently accessed by families is central to the re-design of Children's Social Care Service currently underway and has been reported to the LSCB. This should effect further improvements in the longer term.

4.5 Child protection cases which were reviewed within timescales (NI 67)

- 4.5.1 It is important that all child protection plans are reviewed (by multi agency case conferences) to ensure that they are being implemented and remain appropriate to a child's needs and assessed risk of significant harm. Also to determine whether any further actions are required. Child protection plans must be reviewed within 3 months of the initial case conference and within (at least) six monthly intervals thereafter.
- 4.5.2 For this performance indicator, a high score is indicative of good performance.
- 4.5.3 Our performance is 100% and has been for the previous eight years. The reported performance for 2011/12 (98.5%) represented one case not being received within timescales. There was a child protection plan in place and this has been reviewed.
- 4.5.4 Although this indicator is no longer part of the National Indicator set for safeguarding, however, we will continue to monitor this area of performance given its importance in underpinning good and timely planning.

4.6 Referrals to Children's Social Care going to initial assessments (NI 68)

- 4.6.1 It is important that the Council responds to and addresses concerns in a timely and efficient way and ensures that all referrals to Children's Social Care be followed up where appropriate. This indicator is a proxy for several issues – the appropriateness of referrals coming into social care, which can show whether local agencies are working well together: and the thresholds which are being applied in Children's Social Care at a local level. Revisions to national guidance (Working Together to Safeguard Children 2010) has made explicit the need to ensure that all referrals receive an initial assessment. Work was undertaken throughout 2010/11 to significantly lift performance – this was achieved and exceeded targets – and was built upon in the first three quarters of 2011/12 but slipped in the final quarter.
- 4.6.2 It is important to note that the numbers of referrals received by social care has not remained static, indeed there has been a substantial increase between 2008-9 and 2011-12. 1140 in 2008-9 to 1750 in 2011-12 i.e. an increase of 53%. In addition the percentage of referrals that are subsequently taken forward to Initial Assessment has risen from 35% in 2008-9 to 74% in 2011-12. This means that the service carried out 400 Initial Assessments in 2008-9 compared to a projected figure of 1295 Initial Assessments in 2011-12. This is a three-fold increase in initial assessment workload with only three additional posts added to the social work workforce during this period.

4.7 Initial assessments by Children's Social Care carried out within ten working days of referral (NI 59) – (previously seven working days)

- 4.7.1 Initial assessments are an important indicator of how quickly services can respond when a child is thought to be at risk of serious harm or thought to be a child in need. As the assessment involves a range of local agencies, this indicator also shows how well multi-agency arrangements are established. The child or young person must be seen, and their wishes and feelings taken into account, within the completion of the initial assessment.
- 4.7.2 For the performance indicator, a high score is indicative of good performance.
- 4.7.3 Work completed to clear outstanding assessments at the end of 2010/11 meant that the Service was in a stronger position at the beginning of 2011/12 to significantly improve performance. This was achieved for Q1. That strong performance was, however, disrupted by capacity issues in the Locality Team and secondments to the re-design team during Q2 – actions were taken to address these impacts and to lift performance throughout the rest of the year. These were however undermined by staff turnover and vacancies (now resolved) at a time when the service was dealing with a significant increase in the number of referrals for services (see above). Sustaining this level of performance and also improving quality of work cannot be fully disassociated from the level of resource available to carry out this work. We are now progressing plans to establish increased front line manager and practitioner capacity in the teams.
- 4.7.4 The appropriateness of prescribed timescales for initial assessments was considered within the work of the Munro Review Group (national review of social work and child protection) with whom we have been actively engaged – and Munro has recommended that the timescale is dropped and the focus

is upon the quality of assessments as a continuous process. The Government is currently considering this recommendation and had committed to providing guidance in Spring 2012 now extended to Autumn 2012. There may be future scope for determining local indicators in terms of timeliness and quality and the service has started to give this matter consideration.

4.8 Core assessments by Children's Social Care Services that were carried out within 35 working days of their commencement (NI 60)

4.8.1 Core assessments are an in depth assessment of a child and their family, as defined in the Framework for Assessment of Children in Need and their Families. There are also the means by which section 47 (child protection) enquiries are undertaken following a strategy discussion. It is important that the Council investigates and addresses concerns in a timely and efficient way, and that those in receipt of an assessment have a clear idea of how quickly this should be completed. Successful meeting of the timescales can also indicate effective joint working where multi-agency assessment is required.

4.8.2 For this performance indicator, a high score is indicative of good performance.

4.8.3 Work completed to clear outstanding assessments at the end of 2010/11 meant that the Service was in a stronger position at the beginning of 2011/12 to significantly improve performance. This was achieved during the first 3 quarters of 2011/12 but was not maintaining during the 4th quarter as a consequence of the staffing difficulties outlined above. We have used the learning from the Lean Review of Social Care processes to inform the re-design of our front of house services, and the proposed enhanced team will complete all core assessments. This will bring more consistency in both timeliness and quality.

4.8.4 As in the case of Initial Assessments, the number of Core Assessments undertaken has also risen between 2008-9 and 2011-12 from 205 to 307 representing a 50% increase in this workload. Again, this increase has been achieved within existing staffing levels and plans are now in place to increase manager and practitioner capacity in the front of house team.

4.9 The Service is now progressing plans to record and report on the following indicators of performance:-

- Percentage of children seen by the allocated Social Worker within 5 working days of date of the referral
- Percentage of children with whom plans / or services were shared within 7 working days
- Percentage of assessments completed within 10 working days and shared with the child / family
- Percentage of assessments completed within 15 working days and shared with child / family
- Number of days from referral to case closed
- Percentage of closed cases resulting in report referrals within 6 months
- Number and percentage of overall number of children with protection plans for more than 2 years

- Number and percentage of overall number of children with protection plans for whom step down services have been put in place, and received within 6 months
- Number and percentage of overall number of children with repeat child protection plans

Any qualitative measures, to include:-

- Percentage of children reporting that the provision of social care services had made a positive difference to their lives / made them feel safer
- Percentage of parents reporting had made a positive difference to their parenting and their child safer
- Percentage of plans incorporating the child's expressed views and opinions

And also exploring how to report on the effectiveness of services provided to children following the cessation of a protection plan – and thereby avoiding the need for future such plans.

4.10 The Service will present reports showing the performance in the first half of the year to the Board meeting in October 2012.

5 RISK MANAGEMENT

- 5.1 A risk assessment related to the issue and recommendations has been undertaken, in compliance with the Council's decision making risk management guidance.
- 5.2 The risks associated with ensuring effective safeguarding arrangements are assessed and managed by the LSCB (which receives quarterly performance reports) and its constituent members. Within the Council, these issues are identified within the Service Risk Register.

6 EQUALITIES

- 6.1 Promoting diversity and supporting individual identity and recognising and valuing the racial and cultural diversity of Bath and North East Somerset's communities and a commitment for anti-discriminatory practice are values underpinning the work of the LSCB.
- 6.2 An Equalities Impact Assessment has been completed in respect of the LSCB's Annual Report and Work Programme which incorporates these performance indicators.

7 CONSULTATION

- 7.1 Cabinet Member; Staff; Other B&NES Services; Service Users; Other Public Sector Bodies; Section 151 Finance Officer; Monitoring Officer.
- 7.2 Consultation with other BANES Services and other Public Sector Bodies via reports to and discussions at the Local Safeguarding Children Board quarterly meetings.

7.3 Discussed with staff at Team and Management Group meetings and via LSCB Stakeholders' event.

8 ISSUES TO CONSIDER IN REACHING THE DECISION

8.1 Social Inclusion; Young People.

9 ADVICE SOUGHT

9.1 The Council's Monitoring Officer (Divisional Director – Legal and Democratic Services) and Section 151 Officer (Divisional Director - Finance) have had the opportunity to input to this report and have cleared it for publication.

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Background papers	Previous reports to Health and Wellbeing Partnership Board: most recent 8 th February 2012
Please contact the report author if you need to access this report in an alternative format	

Appendix 1: Child Protection Performance Indicators

Child Protection activity / performance indicators	2010/11 England	2010/11 Family	2010/11 Actual	2011/12 Plan	2011/12 Actual	2011/12 Quarterly			
						Q1	Q2	Q3	Q4
1. Number of children subject to child protection plan			Total = 106	N/A	106	104	88	81	78
2. Child protection plans lasting 2 years or more (NI 64)	6.0%	7.0%	10.4%	8%	5.5	8.8	6.3	7.0	5.5
3. Children becoming subject to a child protection plan for a second or subsequent time (NI 65)	13.3%	15.0%	23.5%	12%	15.1	18.2	17.4	14.8	15.1
4. Child protection cases which were reviewed within required timescales (NI 67)	97.1%	96.9%	100%	100%	100	100	100	100	100
5. Referrals to Children's Social Care going on to initial assessments (NI 68)	72.0%	79.2%	73.9%	75%	65**	79.3	73	73.9	65**
6. Initial assessments by Children's Social Care carried out within ten working days of referral (NI 59) *	75.7%	68.2%	67.5%	78%	68.6	83.7	67.6	73.7	68.6
7. Core assessments by Children's Social Care that were carried out within 35 working days of their commencement	75.1%	68.9%	59.3%	80%	71.2	65.2	75.5	79.1	71.2

* Previous performance indicator was for 7 working days

** To be confirmed following data returns.

Note: This table details performance for the 2010/11 and comparisons with England and our family of Local Authorities (most recent national data available): our plans for 2011/12 and actual performance at the end of each quarter and end of year for 2011/12 (colour coded to indicate status of performance to target – Red/Amber/Green)