

**Social Care, Health and Wellbeing**

**Specialist Children's Services  
Performance Management Scorecard**

**May 2014**



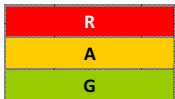
# Guidance Notes

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## POLARITY

H	The aim of this indicator is to achieve the highest number/percentage possible.
L	The aim of this indicator is to achieve the lowest number/percentage possible.
T	The aim of this indicator is to stay close to the target that has been set.

## RAG RATINGS



No RAG Rating

A red rating indicates that the current performance is significantly away from the target set.
An amber rating indicates that the current performance is close to the target set.
A green rating indicates that the current performance has met the target that has been set.
RAG ratings are not applied to activity based indicators. Also, if the denominator is 0 no RAG rating has been applied

## DIRECTION OF TRAVEL (DOT)



A green arrow indicates that performance has improved this month when compared to last month. Depending on the polarity of the indicator, an improvement in performance could either be a reduction or increase in numbers/percentage.



An amber arrow indicates that performance has remained the same as last month.



A red arrow indicates that performance has worsened this month when compared to last month. Depending on the polarity of the indicator, a worsening in performance could either be a reduction or increase in numbers/percentage.

## KEY TO ABBREVIATIONS

YTD	Year to Date (April to March)	IA's	Initial Assessments
Num	Numerator	CA's	Core Assessments
Denom	Denominator	CIN	Child in Need
R12M	Rolling 12 Months	CP	Child Protection
CAF	Common Assessment Framework	LAC	Looked After Children
TAF	Team around Family	SGO	Special Guardianship Order
PEP	Personal Education Plan	UASC	Unaccompanied Asylum Seeking Children
QSW	Qualified Social Worker	SS	Snapshot

## PERFORMANCE INDICATOR GRAPHS AND CHILD LEVEL DATA

The latest graphs and Child level data are published on the SCS Performance Management website

## KEY CHANGES MADE TO THE REPORT THIS MONTH

New indicator showing percentage of agency Team Managers now included

## SMALL DENOMINATORS

Caution should be applied in the overinterpretation of all RAG ratings for those performance measures which are calculated against low numbers. In order to highlight this, any denominators with a value between 1 and 9 have been highlighted in light blue.

## YTD DATA

Many of the performance indicators on the scorecard are measured using a Year to Date (YTD) approach - April to the end of the current month. For the first few months, it is advisable to treat the results of these indicators with a little caution as they are often based on a small cohort of children and therefore the percentages can be easily skewed.

## DISTRICT LEVEL PAGES

Please note that as a result of the move to Liberi, we are currently unable to provide accurate district level pages and therefore they have been temporarily removed. These will be re-instated as soon as possible.

## MANAGEMENT INFORMATION CONTACT DETAILS

Maureen Robinson 7000 6328	Gareth Harris 7000 4886
Chris Nunn 7000 6010	Pete Stockford - 7000 4582
Paul Godden 7000 1577	

# Scorecard - Kent, inc UASC

May 2014

Indicators	Polarity	Data Period	LATEST RESULT				PREVIOUS RESULT		OUTTURN RESULT	
			Latest Result and RAG Status	Num	Denom	Target for 14/15	Previous Reported Result	DoT from previous to latest result	Outturn (March 14) Result	DoT from outturn to latest result

REFERRAL AND ASSESSMENTS												
1	Number of Referrals per 10,000 population under 18		R12M	629.3		20314	322813	522.6	623.2		611.8	
2	Percentage of referrals with a previous referral within 12 months	L	YTD	29.4%	A	1025	3484	25.0%	29.3%	↓	26.6%	↓
3	Percentage of C&F Assessments that were carried out within 45 working days	H	YTD	73.8%	A	2080	2817	85.0%	71.8%	↑	72.9%	↑
4	C&F Assessments in progress outside of timescale	L	SS	181	R			100	216	↑	317	↑
5	Percentage of Children seen at C&F Assessment (excludes unborn/missing)	H	YTD	96.3%	A	2647	2750	98.0%	96.2%	↑	97.2%	↓

CHILDREN IN NEED												
6	Number of CIN per 10,000 population under 18 (includes CP and CIC)		SS	327.7		10580	322813	315.0	325.4		330.1	
7	Numbers of Unallocated Cases	L	SS	29	R			0	75	↑	0	↓

CHILD PROTECTION												
8	Numbers of Children with a CP Plan per 10,000 population under 18		SS	38.3		1237	322813	35.7	37.5		36.5	
9	Percentage of Current CP Plans lasting 18 months or more	L	SS	6.0%	G	74	1237	10.0%	4.5%	↓	3.6%	↓
10	Percentage of children becoming CP for a second or subsequent time within 24 months	T	YTD	4.9%	A	13	266	7.5%	3.4%	↑	8.0%	↓
11	Child protection cases which were reviewed within required timescales	H	SS	96.9%	A	838	865	98.0%	97.6%	↓	90.2%	↑
12	Child Protection Plans lasting 2 years or more at the point of de-registration	L	YTD	2.4%	G	5	208	5.0%	1.7%	↓	4.8%	↑
13	Percentage of CP Visits held within timescale (Current CP only)	H	SS	91.2%	G	5634	6176	90.0%	89.0%	↑	-	-
14	Number of S47 Investigations per 10,000 population under 18		R12M	136.1		4393	322813	100.9	131.7		130.7	
15	Percentage of S47 Investigations proceeding to Initial CP Conference	T	YTD	33.4%	A	293	878	45.0%	38.0%	↓	46.7%	↓
16	Percentage of Children seen at Section 47 enquiry (excludes unborn)	H	YTD	98.3%	G	822	836	98.0%	96.9%	↑	97.4%	↑
17	Number of Initial CP Conferences per 10,000 population under 18		R12M	51.8		1671	322813	47.4	52.8		51.6	
18	Percentage of ICPC's held within 15 working days of the S47 enquiry starting	H	YTD	71.9%	G	189	263	70.0%	66.9%	↑	78.8%	↓
19	Percentage of Initial CP Conferences that lead to a CP Plan	T	YTD	92.4%	G	266	288	88.0%	89.7%	↓	89.4%	↓

Indicators	Polarity	Data Period	LATEST RESULT				PREVIOUS RESULT		OUTTURN RESULT	
			Latest Result and RAG Status	Num	Denom	Target for 14/15	Previous Reported Result	DoT from previous to latest result	Outturn (March 14) Result	DoT from outturn to latest result

### CHILDREN IN CARE

20	Children in Care per 10,000 population aged under 18 (Excludes Asylum)		SS	49.6		1600	322813	48.0	49.9		50.3	
21	Percentage of LAC Starters who have had a previous episode of care in Kent		YTD	5.9%		8	135	-	8.2%		14.6%	
22	CIC Placement Stability: 3 or more placements in the last 12 months	L	SS	7.3%	G	132	1820	9.0%	8.2%	↑	8.9%	↑
23	CIC Placement Stability: Same placement for last 2 years	H	SS	64.9%	A	348	536	70.0%	66.0%	↓	66.6%	↓
24	Percentage of CIC in KCC Foster Care	H	SS	64.1%	G	1025	1600	60.0%	63.0%	↑	63.2%	↑
25	Percentage of CIC in Foster Care placed within 10 miles from home (Excludes Asylum)	H	SS	62.4%	A	818	1310	65.0%	63.0%	↓	62.1%	↑
26	Participation at CIC Reviews	H	YTD	91.4%	A	581	636	95.0%	91.7%	↓	94.2%	↓
27	CIC cases which were reviewed within required timescales	H	SS	92.5%	A	1625	1757	98.0%	89.0%	↑	-	-
28	CIC Dental Checks held within required timescale	H	SS	97.3%	G	1659	1705	92.0%	97.5%	↓	96.6%	↑
29	CIC Health assessments held within required timescale	H	SS	85.4%	A	1456	1705	92.0%	86.5%	↓	85.6%	↓
30	Ave. no of days between bla and moving in with adoptive family (for children adopted)	L	YTD	567.7	A	20436	36	426	664.6	↑	650	↑
31	Ave. no of days between court authority to place a child and the decision on a mat	L	YTD	213.8	A	7696	36	121	251.9	↑	217	↑
32	% of Children who wait <14 mths between bla and moving in with adoptive family	H	YTD	38.4%		93	242	-	40.3%	↓	35.9%	↑
33	Percentage of Children leaving care who were adopted	H	YTD	24.0%	G	36	150	13.0%	17.9%	↑	16.1%	↑

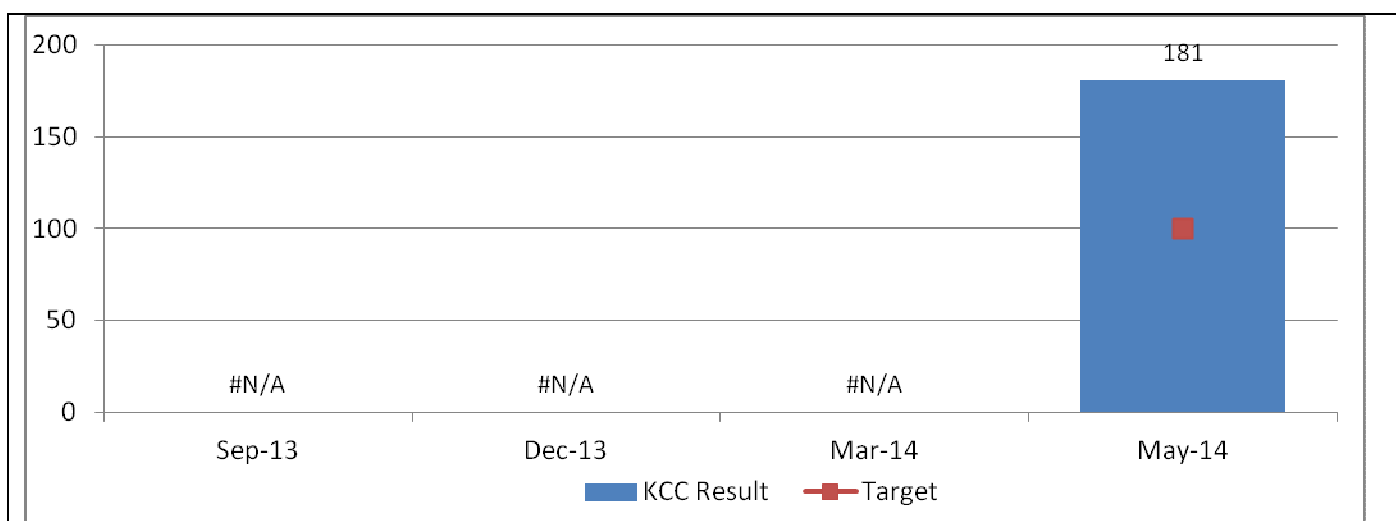
### QUALITY ASSURANCE

34	Percentage of Case File Audits judged adequate or better	H	YTD	83.8%	R	83	99	100.0%	84.5%	↓	89.5%	↓
35	Percentage of Case File Audits completed	H	YTD	72.8%	R	99	136	90.0%	84.1%	↓	64.6%	↑

### STAFFING

36	Percentage of caseholding posts filled by agency staff	L	SS	20.8%	G	99.3	477.3	21.5%	19.9%	↓	18.8%	↓
37	Percentage of caseholding posts filled by KCC Permanent QSW	H	SS	72.6%	R	346.3	477.3	78.5%	71.3%	↑	73.8%	↓
38	Percentage of Team Manager posts filled by agency staff	L	SS	17.6%		15.6	88.6	-	-	-	-	-
39	Average Caseloads of social workers in CIC Teams (District Teams Only)	L	SS	14.9	G	1246	83.9	15.0	15.4	↑	16.9	↑
40	Average Caseloads of social workers in non CIC Teams (District Teams Only)	L	SS	23.6	A	5916	250.9	20.0	23.6	↓	22.6	↓

C&F Assessments in progress outside of timescale			Red
Cabinet Member	Peter Oakford	Director	Mairead MacNeil
Portfolio	Specialist Children's Services	Division	Specialist Children's Services



Trend Data – Month End	Sep 13	Dec 13	Mar 14	May 14
KCC Result	n/a	n/a	n/a	181
Target	n/a	n/a	n/a	100
RAG Rating	n/a	n/a	n/a	Red

This is a new performance measure for 2014/15 following a change in practice from the use of separate Initial and Core Assessments to the use of a single C&F Assessment. Although all Local Authorities are moving towards a single C&F Assessment this process is not yet complete, therefore no comparative data is available.

As at the end of May 2014 there were 181 C&F Assessments in progress outside of the 45 day timescale for completion (2817 C&F Assessments were completed during April-May 2014). A proportion of the assessments in progress outside timescales are due to issues following the implementation of Liberi. These continue to be worked on to improve the accuracy of data and as at 23/06/14 the number of assessments in progress and outside of timescales had reduced to 105 which is close to achieving a Green RAG rating. In addition to the data cleansing work the Expert Practitioners Group are reviewing the reasons Assessments are completed outside of the timescale and those completed near to the 45 day timescale. This work will inform any actions to be taken regarding social work practice.

#### Data Notes

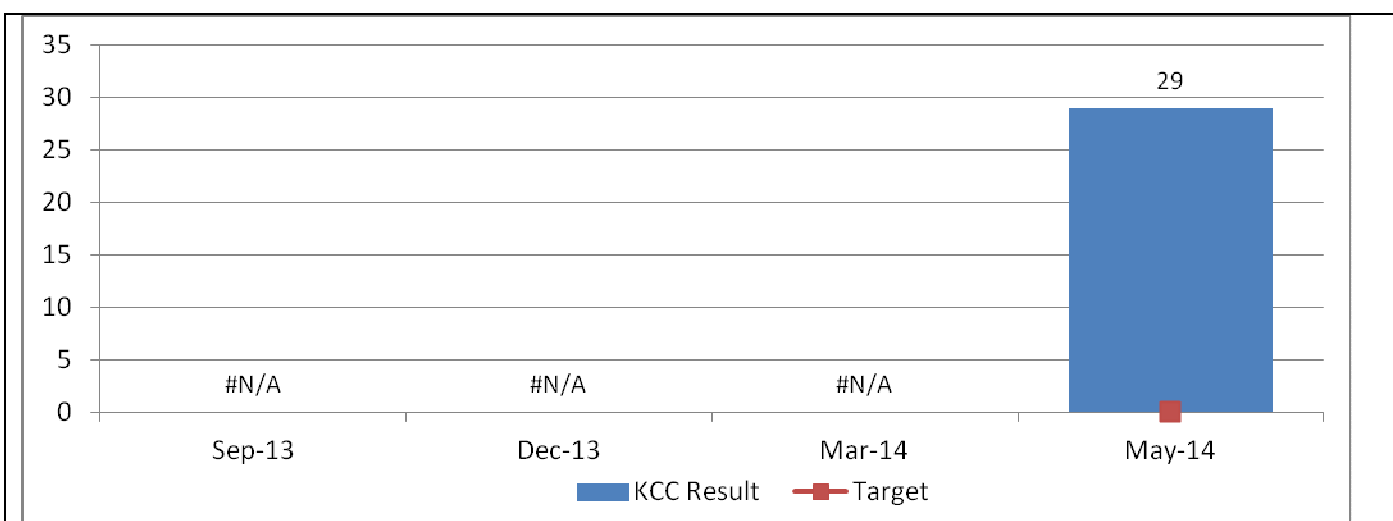
**Target:** 100. (RAG Status set as: Red above 150, Amber 100-150, below 100)

**Tolerance:** Lower values are better

**Data:** Figures shown are a snapshot as at the end of each month/quarter

**Data Source:** Liberi

Number of Unallocated Cases (for over 21 days)			Red
Cabinet Member	Peter Oakford	Director	Mairead MacNeil
Portfolio	Specialist Children's Services	Division	Specialist Children's Services



Trend Data – Month End	Sep 13	Dec 13	Mar 14	May 14
KCC Result	n/a	n/a	n/a	29
Target	n/a	n/a	n/a	0
RAG Rating	n/a	n/a	n/a	Red

The definition for this measure was changed for 2014/15, reducing the timescale from 28 to 21 working days.

Reporting of unallocated cases on Liberi was impacted upon by the process of not adding new Social Workers to Liberi until they had completed their Liberi Training. This process has been amended recently to allow for new Social Workers to be set up promptly, allowing the appropriate and timely allocation of cases. Until this change in May 2014 Team Managers held cases in their name whilst awaiting the appointment or training of a new Social Worker. The change in process will lead to fewer numbers of unallocated cases on Liberi in the future.

Liberi issues accounted for 12 unallocated cases. Of the remaining 17, 2 were as a result of staff having left KCC and 15 could not be allocated due to workload pressures with two teams.

As of 23/06/14 there were 9 Unallocated Cases on Liberi.

#### **Data Notes**

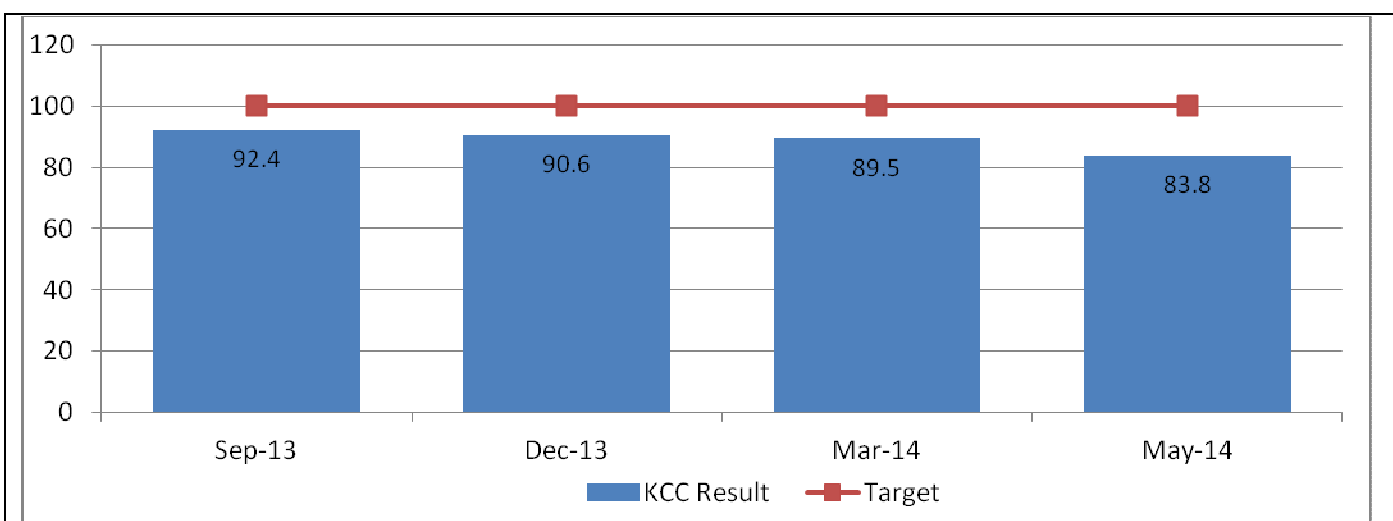
**Target:** 0 (RAG Status set as: Red for 1 and above, Green for 0)

**Tolerance:** Lower values are better

**Data:** Figures shown are a snapshot as at the end of each month/quarter

**Data Source:** Liberi.

Percentage of Case File Audits judged adequate or better			<b>Red</b>
Cabinet Member	Peter Oakford	Director	Mairead MacNeil
Portfolio	Specialist Children's Services	Division	Specialist Children's Services



Trend Data – Month End	Sep 13	Dec 13	Mar 14	May 14
KCC Result	92.4	90.6	89.5	83.8
Target	100	100	100	100
RAG Rating	Amber	Amber	Amber	Red

The drop in performance was predicted in a report presented to the Kent Integrated Children's Services Board in September 2013 on the QA online audit programme (see section 1.3 of that report). When the new Peer Review auditing system was put in place in February 2013 there was a noticeable rise in the proportion of cases graded as adequate by Team Managers. A piece of work was undertaken to match this against the findings from the separate Quality Audits which are completed by Independent Reviewing Officers (IROs) and Child Protection (CP) Chairs. Bringing together the separate auditing processes created a broader consensus of thresholds for judgements and improved consistency. This has been reinforced during a series of recent workshops. As a result audit completion rates by Team Managers and Peer Reviewers have improved significantly and current performance is now on a par with the Quality Assurance findings from IROs and CP chairs.

Performance is close to achieving the Amber rating of 85.0%.

#### Data Notes

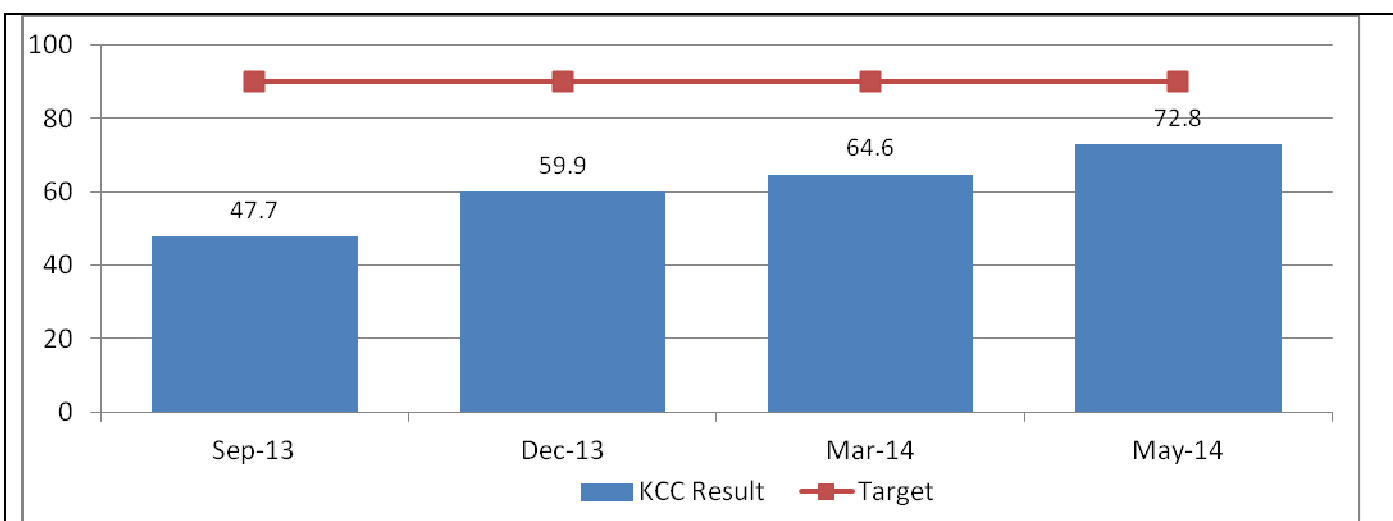
**Target:** 100% (RAG Status set as: Red below 85%; Amber 85-100%; Green 100%)

**Tolerance:** Higher values are better

**Data:** Figures shown are Year to Date. For example, the May 14 result is based on data from April 14 to May 14.

**Data Source:** Liberi

Percentage of Case File Audits completed			<b>Red</b>
Cabinet Member	Peter Oakford	Director	Mairead MacNeil
Portfolio	Specialist Children's Services	Division	Specialist Children's Services



Trend Data – Month End	Sep 13	Dec 13	Mar 14	May 14
KCC Result	47.7	59.9	64.6	72.8
Target	90	90	90	90
RAG Rating	<b>Red</b>	<b>Red</b>	<b>Red</b>	<b>Red</b>

Performance for year-to-date since April 2014 shows completion rates are at 72.8%. Although still requiring improvement this performance compares well with completion rates during 2013/14 and continues to move towards the target of 90%.

Between April 2013 and March 2014, 497 audits were completed under the monthly QA on-line audit system out of a potential 769 cases selected for auditing; giving a completion rate of 64.6% for the year with Peer Reviewer completion at 80%. The initial teething problems experienced in implementing the new QA Peer Review audit between February 2013 and June 2013 (due to the Social Worker stage impeding audit completions) was a major factor in reducing completion rates; by June completions had dropped to 17.9%.

One of the steps taken to improve completion rates is the re-assignment of those cases selected for Audit where the member of staff responsible has left KCC or changed roles. These Audits are now assigned to the incoming Team Manager to complete. There is a clear expectation from senior officers that all managers and safeguarding staff will complete their audits / Peer reviews and this is raised and challenged in Area Deep Dive Meetings.

#### Data Notes

**Target:** 90.0% (RAG status set as: Red below 75%, Amber 75-90%, Green 90% and above)

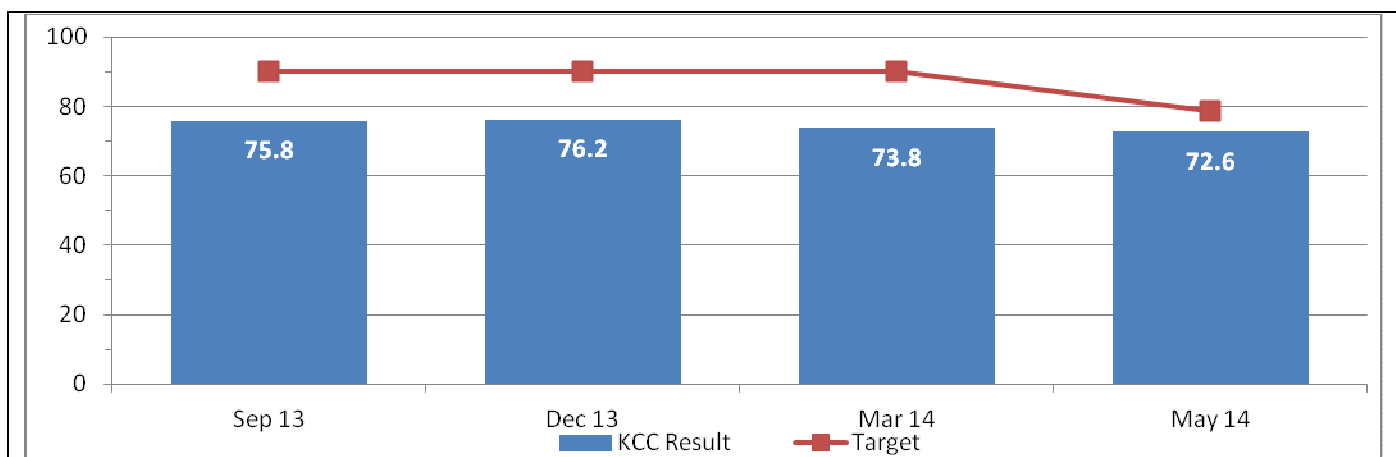
**Tolerance:** Higher values are better

**Data:** Figures shown are Year to Date. For example, the May 14 result is based on data from April 14 to May 14.

**Data Source:** Liberi



<b>Percentage of case holding posts filled by permanent Qualified Social Workers</b>			<b>Red</b>
Cabinet Member	Peter Oakford	Director	Mairead MacNeil
Portfolio	Specialist Children's Services	Division	Specialist Children's Services



Trend Data – Month End	Sep 13	Dec 13	Mar 14	May 14
KCC Result	75.8	76.2	73.8*	72.6*
Target	90	90	90	78.5
RAG Rating	<b>Red</b>	<b>Red</b>	<b>Red</b>	<b>Red</b>

This performance measure is a calculation of qualified social workers employed in 'case holding' posts within Specialist Children's Services. As at 31/05/14, 72.6% of the Establishment level for this group of staff were filled by KCC employees, 20.8% of the remainder were filled by Agency Staff who continue to be used to ensure that average caseloads remain at manageable levels. The Target for this measure is to achieve 86.0% by March 2015, incrementally increasing the target each quarter through 2014/15.

The current advertising campaign is generating good levels of applications. During April and May there were 16 applications for Senior Practitioners and 38 for experienced social workers, from which 10 and 16 were shortlisted respectively. During the same period 5 social workers accepted appointments and are expected to commence employment during July and August (subject to employment checks and notice periods). Five Senior Practitioners were appointed, although it should be noted that these were internal appointments which will result in social worker vacancies. In addition to this 50 NQSWs have been appointed and these staff will take up post when confirmation of their qualification has been received and they are HCPC registered (all are anticipated to be in post for Sept 2014)

**Data Notes: Please Note \*Change of definition and source from March 14, previous data not directly comparable.**

**Target:** 78.5 for Quarter 1; 81.0% Quarter 2; 83.5% Quarter 3; 86.0% Quarter 4 (March 2015)

**Tolerance:** Higher values are better

**Data:** Data is provided as a snapshot as at the last working day in the Month.

**Data Source:** Source is HR Establishment Spreadsheets maintained on behalf of the Assistant Directors for SCS.