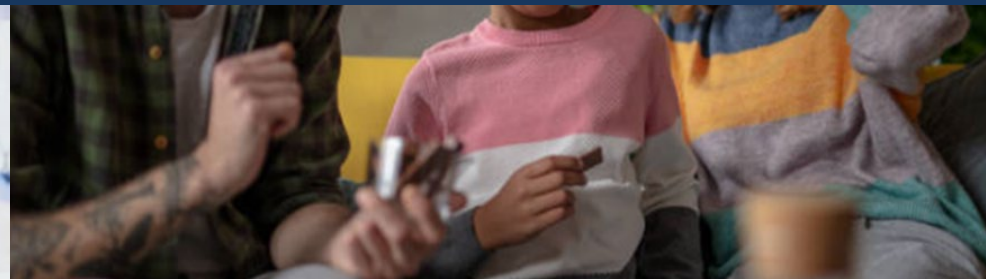




Scrutiny Performance Report

Southampton Children and Learning Service Improvement Board
25th November 2021



Practice and Performance Summary

The last two months have been extremely busy for the service, with many important foundations being set for practice improvement in the new year. The key development has been the approval of the Destination 22 business case, which has enabled us to start the staff consultation around the future service structure, begin to progress the workforce academy development and start recruitment activity in critical areas. The new permanent Heads of Service have swiftly made themselves visible within their service areas and are working extremely well together with a collective commitment to tackling critical service need and supporting the service through this time of turbulence.

We believe that the service is becoming more data-intelligent and, although in some areas improvements in the outcomes for children are frustratingly slow, we are increasingly feeling that we are 'getting a grip' of the challenges along with a more accurate understanding of what we need to do differently. Assurance clinics are proving to be successful in terms of the engagement and buy-in of managers and this model is allowing us to apply a more bespoke approach to interrogating performance. Improvements are slow in some areas, but we are seeing pockets of improvement.

Our work with Hampshire Children's Services has progressed further and we have been pleased to welcome the new DfE performance advisor. The profile of our Principal Social Worker is growing, and her energy and engagement across the service is increasing service and partner awareness of our practice framework and enabling many meaningful conversations about life on the front line.

The principal concern for us continues to be the level of demand in key service areas, exacerbated by staffing instability. This is of particular concern in the Protection and Court and Looked after Children services and we continue to see a negative impact upon the consistency of practice as a result of this. We are actively deploying further staff to these teams, including an additional service manager joining the Protection and Court Team. We have developed a structured, targeted response to the rising numbers of children in care, particularly those who are in residential placements but who could live within a family. We are also stepping up our recruitment and retention activity through improved web design and social media. We are planning to launch a major media campaign in January when we are clearer about where the vacancies are across the service post D22 restructure. Our projects team is now supporting our recruitment and retention activity, including a refresh of our strategies.

I would recommend that the key considerations for the Panel in November 2021 are:

- The level of contacts that are coming into the service, particularly from the police, and the impact upon service effectiveness as a result.
- Partnership support for the launch of the Children's Resource Hub and new threshold document.
- Continued partnership support for recruitment activity (staff and foster carers).
- A collective commitment to promoting positive working relationships on the ground between practitioners within our teams and services, particularly in relation to professional respect and trust.



Steph Murray - Deputy Director
Children's Social Care

Performance Overview

What's Going Well

- Assessments completed in 45 days
- Children on a CPP and CLA reviews in timescale
- Care Leavers with an up to date Pathway Plan
- Numbers of audits where practice is good or outstanding

Ones to Watch

- Our referral numbers have reduced from 19/20 activity in 20/21 but to bring us in line with benchmarking partners we need support the partnership and families earlier before their needs meet safeguarding threshold
- Improve visits to Children in Need on a plan
- Reduce the number open on a Child in Need plan
- Visits to CLA in timescale

What We Need to Do Better

- Reduce the number of contacts received each month from partners, especially the Police that do not meet threshold
- Reduce CLA numbers
- Care Leavers who are NEET

Scrutiny Performance Indicators

Area	Indicator	Outturn type	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Target	Southamp	Southamp	Statistical	South East	England
Early Help	Number of referrals into Early Help	NUMBER								TBC	N/A	N/A	N/A	N/A	N/A
Early Help	Number of referrals that were stepped down from CSC into Early Help	NUMBER								TBC	N/A	N/A	N/A	N/A	N/A
Early Help	Percentage of re-referrals within 12 months into Early Help	PERCENTAGE								TBC	N/A	N/A	N/A	N/A	N/A
Early Help	Number of cases (children) open to Early Help at the end of the month	NUMBER	923	902	910	929	904	903	870	1000	N/A	N/A	N/A	N/A	N/A
Early Help	Percentage of Early Help cases closed that were stepped up to CSC	NUMBER								<10	N/A	N/A	N/A	N/A	N/A
Early Help	Percentage of cases closed due to family disengaging with support	NUMBER								10%	N/A	N/A	N/A	N/A	N/A
Front Door	Number of contacts	NUMBER	1897	2080	2373	2202	1895	2142	1978	1400 per month	15657	17661	N/A	N/A	N/A
Front Door	Percentage of contacts that lead to No Further Action where the reason for contact was request to children's social care	PERCENTAGE	87%	86%	89%	89%	90%	88%	90%	70	N/A	N/A	N/A	N/A	N/A
Front Door	Number of referrals in the month	NUMBER	336	445	342	355	291	426	387	300 per month	N/A	N/A	N/A	N/A	N/A
Front Door	Rates of referrals per 10,000 of Under 18 Population	RATE	64	152	219	288	345	428	503	647	944	790	647	561	484
Front Door	Percentage of re-referrals within 12 months	PERCENTAGE	21%	28%	26%	33%	26%	31%	24%	23	23	28	22	28	23
Assessments	Percentage of C&F assessments completed within 45 working days	PERCENTAGE	91%	87%	89%	94%	86%	90%	85%	88	21	23	26	30	31
Child In Need	Number of children with an active Child in Need Plan not allocated to CWD (CIN*)	NUMBER	548	549	530	537	512	536	532	475	N/A	N/A	N/A	N/A	N/A
Child In Need	CIN on a plan visited within 4 weeks	PERCENTAGE	85%	82%	79%	76%	70%	69%	87%	90%	N/A	N/A	N/A	N/A	N/A
Child Protection	Number of children who are subject of a Child Protection Plan as at the end of month	NUMBER	339	355	385	387	420	387	388	340	396	310	430	N/A	N/A
Child Protection	Rates of children who were the subject of a Child Protection Plan per 10,000 of Under 18 Population	RATE	65	68	74	74	81	74	74	N/A	N/A	N/A	N/A	N/A	N/A
Child Protection	Percentage of Child Protection plans reviewed within required timescales who had been subject of a plan for 3 or more months	PERCENTAGE	97%	97%	97%	99%	97%	99%	94%	100	65	63	91	93	93
CLA	Number of CLA at the end of the month	NUMBER	494	498	501	508	508	517	530	456	N/A	N/A	N/A	N/A	N/A
CLA	Rate of CLA per 10,000 under 18 population	RATE	95	96	96	98	98	99	102	89	95	TBC	97	53	67
CLA	Percentage of CLA for whom a visit has taken place within statutory timescales (6 weeks or less visits)	PERCENTAGE	65%	79%	80%	77%	74%	75%	75%	100	95	N/A	N/A	N/A	N/A
CLA	Percentage of CLA children with an up to date review	PERCENTAGE	98%	96%	95%	96%	97%	96%	97%	100	N/A	N/A	N/A	N/A	N/A
Care Leavers	Percentage of Care Leavers 16+ with an Up-to-date Pathway plan	PERCENTAGE	94%	94%	96%	96%	97%	96%	96%	90	N/A	N/A	N/A	N/A	N/A
Care Leavers	Percentage not in employment, education, or training (NEET) on their 17th and 18th Birthday	PERCENTAGE	55%	58%	53%	61%	51%	52%	48%	20%	31	TBC	31	28	31
Care Leavers	Percentage not in employment, education, or training (NEET) on their 19th to 21st Birthday	PERCENTAGE	72%	77%	72%	76%	79%	76%	77%	20%	65	TBC	87	N/A	N/A
Audit	Average Caseload per Worker - All Teams	NUMBER	TBC	TBC	TBC	TBC	TBC	TBC	TBC	N/A	N/A				
Audit	Percentage of CIN who have had their supervision and within timescale	PERCENTAGE	85%	65%	55%	59%	53%	55%	67%	90	N/A	N/A	N/A	N/A	N/A
Audit	Percentage of CPP who have had their supervision and within timescale	PERCENTAGE	88%	66%	56%	66%	49%	63%	71%	100	N/A	N/A	N/A	N/A	N/A
Audit	Percentage of CLA who have had their supervision and within timescale	PERCENTAGE	80%	68%	51%	65%	66%	70%	58%	90	N/A	N/A	N/A	N/A	N/A
Audit	Percentage of Care Leaver who have had their supervision and within timescale	PERCENTAGE	81%	64%	48%	72%	83%	69%	82%	90	N/A	N/A	N/A	N/A	N/A
Audit	Number of Cases Audited	NUMBER	12	2	28	105	22	17	TBC	TBC	N/A	N/A	N/A	N/A	N/A
Audit	Percentage of cases that are Good or Outstanding	PERCENTAGE	33%	0%	36%	66%	41%	65%	TBC	TBC	N/A	N/A	N/A	N/A	N/A

What the data tells us – EH, Referrals and Assessments

Analysis

Early help local performance is variable and comparison activity is limited currently and this will be addressed as the new requirements for the Early Help Service are developed. We need to develop our ability to report on outcomes of EH intervention. This will be possible with the launch of Care Director. Single assessment timeliness remains good and aligned with statistical neighbours, but we need to have an average of no more than 352 assessments per month if we are to come inline with SN's. Re-referrals fluctuates month on month but we are in line on average with SN activity.

Action/next steps

- Greater focus on Early Help performance as part of Destination 22 programme.
- Development of exemplars for focus five is almost complete. New chronology communications has been developed – ready to be shared with staff.
- Targeted sessions with Assessment/ BIT regarding systemic approach to purposeful practice, assessment as an intervention and reflecting teams. Planning has commenced.
- Launch of systemic practice training to support reflecting team approach (with the aim being to challenge risk averse practice and to focus on purposeful assessment where assessment is viewed as an intervention in its own right) is being planned and considerable communications efforts to ensure staff continued interest.

Purposeful Direct Contact

What the data tells us - visits

Analysis

The data shows that we are not consistently meeting our visiting requirements in respect of our children who are both looked after and subject to CiN planning. We need to do better, although teams report better visiting performance and that the issue is compliance recording timeliness of recording. There is better performance in relation to children subject to child protection planning. However, the quality of direct work across the service remains variable and a recent Care Plan consultation undertaken by the Independent Reviewing Officers demonstrated that at second review 87.5% of children and young people in our care did not know what the plan is for their current or future care.

Action/next steps

- Identifying 'good practice' case exemplars to support staff to know what good looks like.
- PSW led reflective sessions with teams and managers across the service have commenced. reflective practice and embedding the systemic approach to reflecting teams into daily team practice- these will emphasise perspective of the child. Launch of systemic practice training to support reflecting team approach is being planned and considerable communications efforts to ensure staff continued interest.
- Purchase of direct work toolkits for staff and PDT sessions to support.
- Love our Children Practice Week – Presentations from SAR Alice and Lisa Cherry and launch of Narrative training to ensure that practitioners understand the need for direct work/ appropriate visiting patterns/ relationship-based practice/ children understanding their own

Management Support for better Practice

What the data tells us - Supervision

Analysis

Our data shows us that supervision practice across the board remains inconsistent. Employee Survey and SWORD (Social Work Organisational Resilience Diagnostic Tool) completed with a focus on wellbeing, supervision frequency and leadership and staff identified that practice is inconsistent across the service and staff do not feel that the culture yet fully supports attendance at reflective spaces. To date, staff feeding back in the groups find the supervision policy and tools cumbersome. Managers and staff have volunteered to be part of the redesign.

Action/next steps

- Practice Development Team led reflective sessions with teams and managers across the service have commenced. The aim is to gain further qualitative understanding of staff perspectives on supervision policy and supervision tools and their expressed needs and wishes regarding reflective practice. PSW has already commenced training some management groups This will continue and grow across the service.
- Launch of systemic practice training to support reflecting team approach is being planned and considerable communications efforts to ensure staff continued interest, for example, systemic presentations at the launch of the Making the Difference Practice Development Forum, IFT presentations at the Equality, Diversity and Inclusion Practice Week planned for December.
- Supervision policy rewrite and tool redevelopment and launch to raise the profile of supervision. This will include a review of supervision frequency to 4 weeks in line with newly authored Practice and Management Practice Standards. Audit & Practice learning days scheduled for January 2022 to link audit to systemic reflecting teams activity

Robust Corporate Parenting

Analysis

Rate remains high and has increased to increased number of entries in to care, against a stable number of children exiting. We are also seeing increasing numbers of UASC children entering care as we are part of the regional offer to Government until we reach the standard 0.07% 0-17 population which for Southampton is 35 UASC children.

Children and Care leavers mostly have an up to date plan in place. We need to do better on visits to our children and care leavers. We need to provide improved supervision for staff and children to ensure plans are SMART, meaningful and are being delivered by all corporate parents. The impact and challenges of national recovery from the pandemic is acutely seen in our care leavers NEET figures where we see too many children and young people not in Education, employment or training.

Action/next steps

Staffing within the service remains challenging with high vacancy rates. We are acutely aware of our corporate parent and statutory requirements and contingency plans are being put into place, although colleagues report that visit performance is better than reported as there is a lag in recording. This is being looked in to. We are working closely with colleagues in Education to ensure all possible EET opportunities for our young people are explored and supported.

Rigorous Quality Assurance

What the data tells us - Audit

ANALYSIS

Extensive CLA and Care Leavers audits were completed over the Summer period of 2021 with the inclusion of LAC managers and IROs. These identified inconsistencies in the quality of practice and frequency of visits to this group of children/YP.

Quality overall and moderation. Audits are not embedded. However, Partners in Practice work

Action/next steps

- Case Review discussion/reflection has been introduced at LIP to enable learning from audits to be embedded into practice on broader scale within safeguarding teams
- Examples of good/outstanding practice are shared with PSW on monthly basis to encourage practitioners to maintain good standards where this is identified and to encourage other practitioners to emulate this with a view to improving practice within teams
- Team managers and IROs are required to participate in work to enable them to accurately benchmark the quality of practice, in order to help raise standards
- A Service discussion is required in respect of children that are on six monthly visit frequency to determine whether this level of SW input is meaningful

Performance Culture

Analysis

Assurance clinics are running on a rolling weekly schedule. Managers have been engaged in identifying the priority areas for their areas. Data is reported at team and worker manager level and used to track progress (see examples of assessment service and PACT)

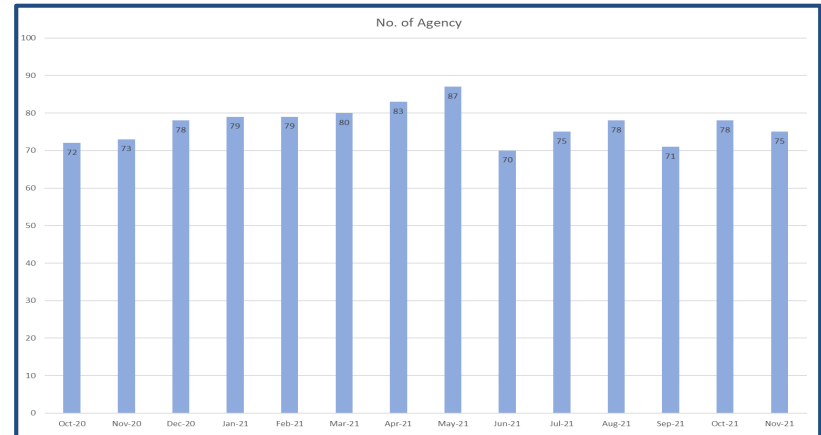
Action/next steps

This is a new suite of indicators devised in line with statutory reporting and best practice. Wherever possible our performance is benchmarked against Statistical Neighbours, SE and England averages.

The data set will also be available as a power BI report with additional indicators enabling service areas and TM's to drill down on performance to child level exception data.

The improved set of PI's, many of which we can benchmark against, the functionality of an interactive Power BI dashboard and the assurance clinics will provide a performance structure and PI information which will give Southampton the tools and insight it has long needed to drive good practice as our minimum standard

What the data tells us



Analysis

Recruitment and retention continues to be a significant issue and caseloads will need to reduce if we wish to practice in the relationship based way we aspire to. Turnover shows a recent increasing trend, with Destination 22 having an impact. Agency use remains high, but broadly stable.

We have expanded the number of placements and routes into social work training. Work is well underway in commissioning the large scale training that is required to fulfil the ambition of the practice framework. Funding has been secured. PSW is leading change to learning culture and there is evidence that this and senior leadership team engagement is having impact.

Efforts are being made in respect of recruitment, Tripod International recruitment, newly designed adverts and recruitment resources, attendance at recruitment and career fairs, lectures at universities. In order to remain competitive SCC required to develop senior social work post. JDPS completed and evaluated. Progression Panel guidance in draft.

Current position: 20 students with us on placement; 4 students flourishing in our Frontline Hub; 9 social work apprentices across 3 cohorts progressing well; 5 Step Up to Social Work students commence January.

Action/next steps

- Project team supporting the development of a clear recruitment and retention plan as part of Destination 22.
- Recruitment of a second CSW to facilitate an additional Frontline hub next academic year.
- Exit interview analysis to be completed for this quarter.
- ASYE caseload analysis to continue and research underway regarding usefulness of post ASYE year of additional support & review of ASYE policy in line with this .
- Business case in respect of bringing ASYE assessment and support fully in- house.
- Progression panel guidance for Senior Social Work Post to be completed and communications developed.
- Large scale training procurement activity and calendar planning.
- Working with IFT regarding implementation of systemic practice training across the service and ensuring that there is the clinical supervision structure in place.
- Launch of Practice Educator CPD Club – 13 staff have come forward wanting to undertake Practice Educator training .

Care Management System Implementation

- The Care Director implementation has recently had a new Live date approved for the 31st January 2022.
- The project started User Acceptance Testing (UAT) on Monday the 1st Nov and by 5th and will have completed 20% with HRDA, EDT, MASH, Single Assessment and CIN.
- Training planning and development underway with training Partner for January delivery.
- Cut over and Live Migration planning ongoing.

Care Director: UAT 1st November – 16th December

Training Jan 3rd – 28th

PARIS Switch off 27th Jan

Live 31st January

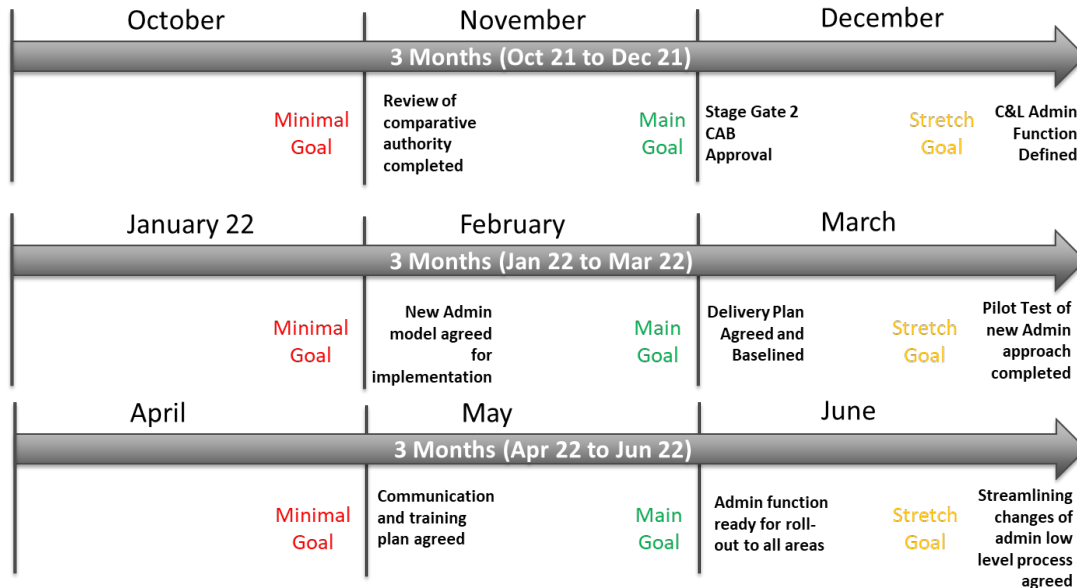
Business Support Review

Status - GREEN

- 2 of 3 Comparative authority interviews completed.
- Analysis of feedback started.
- Preparations for CAB in progress.
- Process mapping stalled awaiting introduction to Admin staff by Managers for priority areas defined in line with D22.

Critical Actions to Dec 2021

- 1) Complete comparative authority interviews.
- 2) Produce conclusions and recommendations.
- 3) Gain CAB Authorisation to continue Project.
- 4) Agree with QA the admin approach and team structures required.
- 5) Continue low level admin process mapping.
- 6) Hold Programme Board meetings prior to CAB for alignment.
- 7) Exploring a pilot business support project in PACT.



Timeline

Timeline is high level until the Admin Function is defined and the implementation plan can be formed.

The Horizon to December is fixed and baselined.