

**Manchester City Council
Report for Resolution**

Report to: Children and Young People Scrutiny Committee - 5 September 2017
Subject: Proxy Indicators and other measurements to evaluating performance
Report of: Deputy Director of Children's Services

Summary

This report is to provide high level information to members on the performance in managing contact, referral and assessment activity. The report also provides some analysis of the overall quality of professional social work practice and outcomes for children who require the service. The report notes the methodology in reporting performance including the use of proxy indicators.

Recommendations

Committee members are asked to note and make comment on the performance and the mixed methodology used to measure and report on performance in managing both contact referral and assessment and quality of social work practice.

Wards Affected: All

Contact Officers:

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Background documents (available for public inspection):

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

1 MCC Children's services Performance data.

1.0 Overview

1.1 Children's services in partnership with performance research and innovation colleagues have been developing our performance management framework. The current performance framework comprises of proxy measures, use of standards, professional judgements, analysis of statistical performance compared with national performance indicators as well as comparative analysis of our performance compared with statistical neighbours.

1.2 Performance in contact, referral and assessment (table 1 below) is measured through a combination of statistical analysis and internal performance measurement activity and external monitoring ; the recent monitoring visit by OFSTED commented that our activity in the Multi Agency Safeguarding Hub was both appropriate (in terms of decisions made) and were timely.

1.3 Table 1 below illustrates our performance across contact, referral and assessment. When the detailed individual measurements for contact, referral and assessment and are combined they act as a good proxy indicator for how well the service is managing both the initial phases of contact with children who are referred to the children's social care service and to a lesser extent reflect how well both universal and targeted services are performing to mitigate against referral to children's social care.

Table 1

Measure	National Average	June 2014	June 2016	Present	12 Month Progress	Progress Against National
Rate of Contacts (per 10,000 population under 18)	Data not collected nationally	3200	2820	2531		N/A
Rate of Referrals (per 10,000 population under 18)	532	1076	988	628		
MASH referral to outcome within 72 hours	Data not collected nationally	Data not available	91.8% 61.3% (24 hrs)	94.5% 62.9% (24 hrs)		N/A
Repeat Referrals within 12 months	22.3%	34.6%	26.1%	24.6%		
Referrals to NFA	9.9%	24.4%	8.9%	10.1%		
Rate of Sec. 47 enquiries (per 10,000 pop)	147.5	165.9	152.5	88.0		
% of S47 going to ICPC	44.6%	53.3%	73.4%	69.9%		
S47 to ICPC within 15 days	76.7%	6.0%	56.4%	85.0%		
Number of Assessments completed (Predicted Year End)	Data not comparable	8564	12256	12660		N/A
% Children and Family Assessments completed in 45 days	83.4%	56.6%	82.7%	81.7%		

No significant change

Increasing / decreasing and getting better

Increasing / decreasing and getting worse

Achieved or bettered

Below

Significantly below

1.4 Table 1 demonstrates our activity over 10 indicators by comparing rates of activity, total activity, repeat referrals and demonstrates our performance against both internal and national targets over a three year period. In both the quantitative and qualitative measurements over the last year our performance against the 10 indicators 6 of the indicators are showing increasing or getting better, 3 are reporting no significant change. In comparing our performance against national indicators we are showing we have achieved or bettered the national indicator and in another 3 we are below this indicator and in one instance we are significantly below the national indicator. An analysis of this performance data set is decisions and interventions are more timely and illustrates positively the rate of progress since 2014.

1.5 There has been a number of investigations undertaken to understand the recent pattern of rates of referral into the service which have seen a gradual increase since May 2017. These investigations indicate there are a number of reasons for the

recent increase in referrals, mainly due to an increase rates of referral from schools but no one particular theme has been identified as the cause for this increase. As part of our work into understanding the increase in referrals we consulted with other Councils, of those Councils who replied they too reported a noticeable increase in referrals from schools for services from children's services.

2 Assessing the Quality of Professional Practice

2.1 The service has developed its practice standards drawn from national and best practice standards, these standards are used to benchmark cases against our practice standards. This is done through auditing activity which when complete identified learning is spread across the service.

2.2 The comprehensive auditing activity across our child protection activity , children in need and looked after children provides a structured judgement, validated by a senior member of staff as to whether the practice standards are met , part met or not met.

2.3 Table 2 below demonstrates an analysis of our performance across the three discreet areas of child care activity across a nine month period. On average across the nine month reporting period 83% practice standards in child protection, child in need and looked after children were either met or partially met. Our performance in this area is not consistent enough and requires ongoing improvement; we are determined to eliminate this inconsistency.

RATING GUIDE:

MET: Practice Standards are Met fully.

PART MET: Practice Standards are Met in some areas but not all, practice is variable.

NOT MET: Practice Standards are Not Met.

Table 2

Combined percentage from:	Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb 2017	Mar 2017	Apr 2017	May 2017	June 2017
Child Protection, Child in Need and Looked After Children	Met 63.3 %	Met 52.7 %	Met 62.4 %	Met 66.3 %	Met 69.6 %	Met 57.7 %	Met 54.5 %	Met 58.8 %	Met 63.0 %
	Part Met 18.6 %	Part Met 25.8 %	Part Met 25.7 %	Part Met 21.6 %	Part Met 18.6 %	Part Met 26.5 %	Part Met 25.3 %	Part Met 25.9 %	Part Met 26.0 %
	Not Met 11.8 %	Not Met 15.6 %	Not Met 12.4 %	Not Met 10.2 %	Not Met 11.0 %	Not Met 15.8 %	Not Met 20.2 %	Not Met 15.3 %	Not Met 11.0 %

Note: The above table demonstrates combined results across three case types, displayed as averages

2.4 The quality of professional practice is assisted by regular professional supervision , both the frequency and quality are measured. We have developed a coaching , reflective approach to audit which is now assessed as embedded into practice. Our generalised findings from audit is that practice is improving but quality remains variable. We are working on the main factors that influence quality and consistency this includes; auditing against standards, recruitment and retention , good quality professional supervision , engagement of partners, promotion of consistent use of Signs of Safety model and effective are planning with a specific focus on throughput .

2.5 Our auditing activity is informed by our practice standards and in turn is supported by a “closing the loop” exercise which is completed on all audits where remedial actions are identified to reinforce learning. All of these actions are tracked and monitored prompting management actions taken in respect of any poor or non compliance.

2.6 The audit cycle drives the services approach to its learning and development programme, this in turn ensures that learning taken from auditing is fed back into the service thus ensuring continuous improvement.

3 Conclusions

3.1 By using a mix of proxy measures, professional judgement against published standards, data analysis, promotion of high quality practice, benchmarking with other local authorities and auditing activity the service is confident of its capacity to accurately report on our performance. This is essential as it provides the service with

the level of assurance and provides a mechanism to ensure accountability, challenge scrutiny and improvement.

4.0 Next Steps

4.1 The service has taken a number of steps to manage the issues identified through its own auditing and self assessment. This has included a commissioned support service to support consistency of good social work practice, a review of recruitment process, a robust approach to performance management, analysis of patterns and trends of referrals, and our approach to closing the loop of audit to ensure continuous improvement. These combined activities assist in ensuring, over time, appropriate management oversight and grip of the service as well as highlighting particular areas for focussed improvement.