

# Children's Services Performance Report

Children's Health, Social Care and  
Education Overview and Scrutiny

6<sup>th</sup> July 2016

*Data Position for 15/16 outturn*

# Headline Messages from Data position for 15/16 outturn

**Contacts**– Family Contact Point records all contacts to the Council for children's services. There were 13313 contacts from Apr 15 - Mar 16, compared to 10996 in 2014/15. 3412(25.6%) contacts progressed to referral to children's social care.

The number of contacts has increased by 21% between 14/15 and 15/16.

**Early Help Record and Plan** – In 2015/16 760 records and 601 plans have been completed (provisional data). This is a large increase on the 590 records and 366 plans completed in 2014/15.

Early Help Record and Plans have increased since their introduction in June 2013. The number is higher than reported due to a number of plans not yet having been entered onto the system. This will be reflected in the next report

1408 children are receiving additional support from the **health visiting** service in addition to the universal service offering.

1071 children had an involvement with **TAMHS (Targeted Mental Health in Schools)** as at the end of March 2016. 144 young mothers are being supported through Family Nurse Partnership.

**Children looked after (CLA)** - At the end of March 2016, there were 292 children looked after. This is an increase from 252 at the end of 2014/15. 90 children (30.4%), were in externally commissioned placements at end of March 2016, an increase from 25% in Sep. 2014.

Number of CLA is now in line with national average. In previous year's it has been lower.

**Adoption** – 6 children were adopted between April 2015 and March 2016. In 2014/15 overall, 13 children were adopted. There were 26 children on placement orders, which is a lot higher than in previous years.

Adoption is a priority area of focus for the service.

**Post-16: In-learning rates** for 16 and 17 year olds, at 89%, is down from 91% and is now below the national (91.5%) and regional (91%) averages. Employment, however, is up. **NEET** rate (4.6%) declining for 16-18 year olds but still above, albeit slightly, a national average of 4.3%. **Unknowns** for 16-17s on the other hand are up (4%) – twice as high as 2014/15 (2%).

Participation in Learning is down, while employment is up. More young people with unknown post-16 activities.

**Children with SEN** - At January 2016 there were 1,376 children with statutory SEN assessments maintained by the LA (1,135 with a SEN Statement and 241 with an Education, Health and Care plan). A further 4,243 had a category of SEN Support as recorded by schools.

**School Absence** – Primary and Secondary absence at an all-time low, at 3.4% and 4.6% in the Autumn of 2015/16, with both phases broadly in line with other areas. Persistent absenteeism is also down, although at Secondary, is above England's.

**School Exclusions** – A total of 1,227 Fixed Term exclusions recorded up to March 2016, slightly down from the previous year (1,316). There were 16 Permanent exclusions up until March 2016, also down against the same period of previous year (20).

A modest drop in Fixed Term and Permanent exclusions in the 2015/16 academic year.

# Headline Messages from Social Care Safeguarding Data 15/16 outturn

## REFERRALS

**Referrals** – There were 3412 referrals from Apr 2015 to Mar 2016 compared to 2650 for the previous year. Of the 3412 referrals, 27.9% were re-referrals. Most of the re-referrals relate to domestic abuse notifications.

The demand on the ‘front door’ of social care remains very high. The national picture is variable.

## ASSESSMENTS

### Statutory Assessments

From April 2015 to March 2016, a total of 3139 statutory (social care) assessments had been completed in an average of 36 days. The national average is 28 days. The number open at any one time in Assessment & Child Protection team remains too high.

The number of statutory assessments completed has increased by 15.6% between 14/15 and 15/16.

There were 791 **child protection enquiries** (also known as **section 47 investigations**) in 2015/16. The percentage of enquiries going to the Child Protection Conference within 15 working days has increased from 69.5% between April 2014 and March 2015 to 79.6% between April 2015 and March 2016. This is now slightly above the national average.

Specific performance improvements were implemented to improve the timeliness of Initial Child Protection conferences as well as managing the increases occurring. Number of children on plans is above national and statistical neighbour average.

## CHILD PROTECTION

**Child Protection Plans** - 238 children were on a child protection plan at the end of March 2016. The number has increased from 213 in March 2015. The number of children on a child protection plan is above the national and statistical neighbour average. 95% had their **reviews** completed on time as at the end of March 16 compared to 93.4% in 2014/15. This is based on those children on a plan at the end of March 16.

The rate of children starting a **child protection plan** for a second or subsequent time has increased to 19% between April 15 and March 16, down from 19.2% in March 15. Conference Chairs are monitoring this to explore any possible themes. Performance is also reviewed monthly by Senior managers.

Children on subsequent plans increased and is now slightly above the national average. The number of children ceasing a plan after 2 years or more has increased.

At the end of March 2016, 3.2% (8 children) of children ceasing a protection plan had been on a **plan for 2 years or more** compared to 1.5% in 2014/15.

## Early Help Services

### Performance Assessment

***There is currently a backlog of 500+ Early Help Records, Plans and Reviews waiting to be input onto Capita One. Quarter 4 data for 2015/16 and full year data for 2015/16 is therefore provisional and will change.***

**Early Help Record (EHR)** A total of 165 EHR's were completed during quarter 4 2015/16. This compares to 247 in quarter 3 2015/16. For quarter 4 the previous year (2014/15) 176 EHR's were completed.

Ofsted recognised the strength of Early Help in Swindon and the access that families have to early help before entering statutory services. Partner agencies may need to consider if their staff are appropriately starting EHR's as the proportion of those undertaken in comparison to statutory social care assessments is disproportionate (although this is not particular to Swindon and is a national issue).

In Swindon compliance with the completion of and the recording of EHR's has been identified as a service area performance "obsession". This means that a specific SMART action plan is being developed to improve performance, and this is in turn is monitored monthly at the children services management team monthly.

**Early Help Plan (Plan) and Early Help Review (Review)** The Early Help Record will always lead to a plan being created for the child. The plan may be delivered in a number of ways depending on its complexity.

In quarter 4 of 2015/16 129 plans were completed. This compares to 110 in the same period in the previous year and 177 plans completed in quarter 3 of 2015/16.

289 reviews were completed in quarter 4 2015/16, compared with 272 in quarter 3. There can be a delay in input of Early Help Records, Plans and Reviews due to schools sending in periodically. Data for the whole year will be refreshed in June to ensure these are captured.

### Strengths

- Council Early Help services are seen as a strength
- Increasing number of plans receiving a review giving confidence in the process being embedded into practice
- Outcomes for children in receipt of early help services are now being routinely reported as part of quality and performance reporting arrangements

### Challenges/Risks

- We need to increase the number of Early Help Record and Plans that are created and children supported to prevent escalation of cases to children's social care

### Performance Assessment

**Contacts** Family Contact Point records all contacts for children's services in their wider sense (i.e. includes Early Help) as well as contacts that become referrals to Children's Social Care. There were 13313 contacts to Family Contact Point between April and March 2016, compared to 10996 for the same period in 14/15.

**Referrals and Re-Referrals** 3412 referrals were received in Children's Social Care between April 15 and March 16, compared to 2650 for the same period in the previous year.. Swindon's referral rate is now higher than national and statistical neighbour averages based on the cumulative rate of referrals between April 15 and March 16. (Swindon 702.1 per 10,000 under 18 compared with 527.1 statistical neighbour and 548.3 national average).

Of the 3412 referrals between April to March 16, 27.9% (953) are **re-referrals**. This is an increase from 20.1% for the same period in the previous year. Swindon is above the national average of 24% (14/15).

**Statutory Assessments** From April 15 to March 16, a total of 3140 assessments were completed taking an average of 36 working days. The average length of time taken nationally last year was 28 working days.

**Number of children in need (section 17 social care)** The number of children in need (this does not include children subject to a child protection plan or children in care) was 1279 at the end of March 2016, down from 1283 at the end of March 2015. This is above the national (1140) and statistical neighbour (943) average. Some of these cases will be those open to assessment in Child protection, but whose needs could be met by tier 2 universal services.

### Strengths

- The service is managing a significant risk in referrals and assessment being undertaken due to the sheer volume

### Challenges

- Need to improve the prompt closure of assessment on the system to avoid distorting performance data. I.e. there remains a data recording issue. This is being addressed and progress is being made

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## Safeguarding Referral and Assessment to Social Care

### Performance Assessment

#### Workforce information for Children's Social Care:

Overall caseloads compare reasonably with the national picture. Caseloads in Advance Care Plan (ACP) team average around 30 – 35 children per social worker, and cases in this team have stabilised and remain the same since last report. In contrast the average has increased elsewhere across the service to between 25 – 32 (from 25-30 in last report). A caseload weighting analysis exercise is currently underway and is identifying both the complexity as well as the quantity of cases held across different teams, and feedback from social workers on how manageable they feel their caseloads are. This work will inform service planning priorities going forward.

We continue with our recruitment drive for social workers and social work managers. Our overall vacancy percentage has reduced further to 15% since the last report. We now have all Social Work Team Management and Independent Reviewing Officer posts filled on a permanent basis. We continue to face challenges in relation to the recruitment of Assistant Team Managers although work has been undertaken to introduce a development programme to support senior social workers to progress to management positions. This has already proved successful and two Assistant Team Manager posts have been filled through this approach. Agency workers continue to be used to cover vacant posts within the service, maternity and long term sickness.

### Strengths

- Good progress in recruiting social workers
- Social work Team Management and Independent Reviewing Officers now filled on a permanent basis
- Reduced vacancy rate overall

### Challenges

- Managing caseloads for social workers to ensure complexity of caseloads as well as quantities are considered in the allocation process

Performance Assessment

**Child Protection Enquiries (also known as Section 47) going to initial child protection conference within 15 working days** - 783 child protection enquires were completed from April 15 to March 2016. This is an increase from 595 in the same period in 2014/15.

334 out of the 783 (42.7%) of child protection enquires completed went to **child protection conference**, compared to 323 out of 595 (54.3%) , in the same period in 2014/15. The percentage of enquiries that went to initial child protection conference within 15 working days was 79.6% between April and March 16. This is above the national average of 74.7%. This performance is good given the context of an increase in the number of children on child protection plans.

**Children on Child Protection Plans** 238 children were on a child protection plan at end March 16. This is a higher than the national average (208) and statistical neighbour average (203).

**Timeliness of Child Protection Reviews**

Between April 15 and March 16, 95% of children on child protection plans had their **reviews** completed on time. This is an improvement from 93.4% in March 2015. The national average is 94% and the statistical neighbour average is 97.6%.

**The number of children having second or subsequent plans** - was 19% between April 2015 and March 2016, a slight decrease from 19.2% in March 15. This is above the national average (16.6%) and statistical neighbour (17.6%). This measure should be considered alongside a low duration, as a high % of second and subsequent plans and low duration could indicate that children’s plans are being ceased prematurely, or that intervention outcomes are not sustainable. It is also important to note that a percentage of children will have subsequent plans due to family circumstances changing and for different reasons to their original plan.

**Duration of children on child protection plans** - 3.2% (8) of children ceasing a child protection plan remained on a plan for two years or more between April and March 16, compared to 1.5% in the previous year. This is below the 2014/15 national average of 3.7% and below the statistical neighbour average of 3.6%.

**Timeliness of Child protection visits** - 65.8% of children on plans were visited within timescales during 15/16 (these are all visits for the child during the year, so if one visit is late then this counts as late overall). This is an area for improvement and actions are in place to improve performance as a priority. When just considering visits on time overall (and not per child during the year), the performance is significantly better.

Strengths

- The timeliness of child protection conferences is positive

Challenges/Risks

- Partners need to work to reduce the number of children subject to Child Protection Plans Understanding of the reasons for a relatively high number of children receiving second/subsequent plans needs to be developed to inform any practice changes required
- Timeliness of child protection visits is a priority for improvement

**Number of children in care** - 292 children were in care at the end of March 2016, this compares with 252 at the end of 2014/15. Swindon is roughly in line with the national average (291 children in care when scaled to the Swindon population). 90 children in care (30.8%) were in externally commissioned placements at the end of March 2016. This compares with 25% (63 children) in 2014/15. A major reason for the increase has been in relation to a number of unaccompanied asylum seeking children coming into the Swindon area. 18.8% of children in care were placed more than 20 miles away from their home address as at the end of March 2016, up from 16.7% at the end of March 2015; this is above the national average of 14%. This measure is a corporate priority with a target to reduce to 7% by 2019. 88.8% of Looked after Children were in family placements at the end of March 2016. This is a slight increase from 84.9% in March 2015 and is slightly above the national average of 85%.

**Placement Stability** - Short term placement stability is measured based on those children having 3 or more placements during the reporting period as a percentage of the number of children in care at the end of March 2016. 11.3% of children in care had 3 or more placements. The national average for 14/15 was 10%. Swindon has more adolescent young people in care than the average and we know this age group tends to have a higher number of placement moves.

Long term stability of placements for children in care for 2.5 years or more has decreased to 59.4% from 66.1% at the end of March 15. Performance is below the national average (67%). The decrease is attributable to a high number of teenagers in the cohort, and 5 children having a placement move who had been in a stable placement for a long time.

**Adoption** - 6 children were adopted between April 2015 and March 2016. In 2014/15 a total of 13 children were adopted. A further 12 children also became subject to special guardianships between April 15 and March 16. Although 15/16 performance is lower than the previous year, there are 26 on placement orders which is the highest number in Swindon for a number of years. 4 adoptions have been completed in April 16 already, and a number of placement orders were given by the Courts in late 2015/16 so it is anticipated there will be a higher number of adoptions during 16/17.

**Timeliness of Adoption** - The average number of days between coming into care and being placed for adoption is high, at 941 days compared to 636 nationally based on the March 16 position. Performance has decreased since the end of 2014/15 when 847 days was recorded. We know this figure is also higher due to the legacy of poor performance in previous years as well as the complexity of the children that were found placements.

## **Strengths**

- The numbers of children needing placement outside of Swindon remains low. We have been able to adopt some children with particular/special needs this year to date, despite making the timeliness figure for adoption higher.
- The number of special guardianships show these are being used a good alternative to adoption where in the child's best interest.

## **Challenges/Risks**

- Reduction in placement stability for Children in Care



## Children, Families and Community Health Quality Assurance Framework

Children, Families & Community Health have continued to strengthen its Quality Assurance Framework and have been improving the scrutiny role of the Quarterly Performance Board which oversees the audit and performance activity. The Board reviews the Key Quality Indicators (KPIs), and its Performance indicators so that it can consider qualitative as well as quantitative information. There is also an Early Help Quarterly Performance Board and the aim is to bring the two Boards together in 2016-2017 to adopt a more joined-up approach to performance review.

We have identified five key areas for particularly focused improvement work and have developed score cards to focus our efforts on improving practice. The service is calling these 'obsessions' The five obsessions are:

- ☐ Timeliness of child protection visits
- ☐ Percentage of initial health assessment completed within 20 working days
- ☐ The number of overdue assessments
- ☐ Children Looked After (CLA ) reviews within timescale
- ☐ Number of children on a protection plan

Progress on performance obsessions is reported monthly to Children Services Senior Management Team. Specific, measurable, achievable, realistic and timely (SMART) action plans are developed to make improvements effective, and written in a way that engages front line social workers in their contribution to improvements required.

Independent Case Audits - We continue to have an independent auditor who every quarter, audits a sample of six cases using the Ofsted threshold for Good. The actions for each case are identified and a system is in place to review them. It is the auditor's opinion that while there are some areas of improvement required, the auditor can see a distinct difference in teams since the new permanent team managers came into post and staff recruitment has become more stable. In Q4, audits were graded 1 x Good; 4 x Requires Improvement and 2 x Inadequate.

The independent auditor also provided training entitled "what does Good look like" to managers who are completing case file audits on a monthly basis.

### Strengths

- The new Quality Assurance (QA) framework is identifying strengths as well as areas for further improvement.
- We have become more skilled in the auditing and the analysis of the performance information.

### Challenges/Risks

- Our focus within Quality Assurance is to concentrate on key areas so that we can make and sustain real improvements, in a consistent way. To further embed the new Quality Assurance Framework.

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## Children, Families and Community Health Quality Assurance Framework continued...

The Annual Audit programme - is in place and has been developed for 2016-2017. Team Managers and Service Managers will be scoping audit activity directly linked to our KPI's.

**Routine Monthly Case Audits** - Social Care managers continue to review children's cases. 31 were conducted in Q4 looking at planning; supervision and management oversight; child's voice and impact of intervention. The case holding social workers were also interviewed as part of the audit. Of the cases audited in Q4, 14 required improvement; 6 were inadequate and 11 were good. Actions for each case were identified and senior managers and Independent Review Officers (IROs') are responsible for monitoring the improvements needed. A system is in place to review the improvements required. We are randomly auditing all social care cases in a way that will enable us to compare our practice within each area.

**Customer Survey Spot Checks:** Over Q3 and Q4 we have been developing telephone surveys to families that we work with to seek feedback on the service they have received from their social workers. In order to report on trends and figures more reliably, we will include these in future performance reports.

### Strengths

- Feedback from service users now routinely sought

### Challenges/Risks

- Engaging families to provide feedback can be challenging and approaches to engagement in user survey need consideration to improve response rates and sustain going forward

### Performance Assessment

#### **Fixed term school exclusions (FTEs)**

2015/16 figures, up until March 2016, show that 1,227 Fixed Term exclusions were given to pupils, fewer than 1,316 given in the same period of the previous year. This small drop, however, still puts 2015/16 on course for a higher exclusion rate than in all other years prior to 2014/15, and pertinently, on course to be well above the national exclusion rate again. There is a considerable time-lag for official DfE exclusion figures (due to appeals, reviews etc). 2013/14 figures show Swindon with an 'exclusions as percentage of school population' rate of 4.9%, in comparison to 3.5% nationally and regionally.

There has been an increase in primary exclusions: whereas in 2015/16 82% (1,006) of FT exclusions were given to secondary-aged pupils and 18% (221) were given to primary pupils, the previous year had 1,113 secondary and 182 primary exclusions. 20% (244) of exclusions in 2015/16 were given to Female pupils, while 80% (983) were given to Male pupils. Persistent Disruptive Behaviour is still the most common reason given by schools for exclusions, at 35% (433). Verbal Abuse against Adult (18%, 224 pupils) and Smoking (7%, 86 pupils) are the reasons with the highest increase in 2015/16. Exclusions are shorter in 2015/16, at 1.6 days on average for each FT, compared to 1.8 in the previous year.

#### **Permanent school exclusions (PEX)**

16 children have been permanently excluded from Swindon schools in 2015/16 (up to end of March 2016), fewer than in the same period of the previous year (20 pupils) but higher than all other previous recent years. In addition to formal permanent exclusions, parents/carers of a further 19 pupils who had reached the point of permanent exclusion, accepted their Head Teacher's offer of a 'withdrawn permanent exclusion'. This is a local agreement implemented from 2009 which is part of the Swindon Fair Access Protocol and enables pupils to move on without the stigma of a formal permanent exclusion. During the same period in 2014/15, 18 parent/carers had accepted permanent exclusion withdrawal.

12 PEXs were from secondary pupils, while 4 being primary-aged (in 2014/15 this was 19 and 1, respectively). Half (8 out of 16) of all PEX were given to pupils in Year 10, while none from Year 11. 14 pupils with a PEX in 2015/16 were Male while 2 were Female. 2015/16 continues with the trend of over representation by those pupils with certain characteristics and vulnerabilities: 13 out of 16 had SEN (although none had a Statement or an EHC Plan); 10 out of 16 were disadvantaged (eligible for the Pupil Premium); 2 out of 16 had involvement with Children's Social Care at the time of their PEX, with 1 having a Child Protection plan; and there is a rise in BME pupils PEX in 2015/16 (with 6 out of 16).

2013/14 figures show Swindon with a 'Permanent exclusions a percentage of school population' rate of 0.05%, in comparison to 0.06% nationally and 0.07% regionally.

### Strengths

- Fewer pupils permanently excluded in 2015/16 than in the previous year

### Challenges/Risks

- Fixed term exclusion rates still considerably above the national average rate
- Over representation by vulnerable pupils receiving school exclusions

## Performance Assessment

Latest figure for percentage of pupils with a Statement of Special Educational Need (SEN) or Education, Health and Care Plan (EHCP) in Swindon is 3.8%. This is higher than the 2.8% reported for England and Statistical Neighbours. Although we have a high number of children with plans, there have been 45 fewer new statements/EHC Plans issued this year (22% reduction) whereas new plans being issued have increased both in England (3%) and the South West (4%).

In 2015, Swindon issued 38% of EHCP plans within the required 20 weeks (excluding exceptions) compared to 64% for England and 58% for the South West. Capacity and volume have impacted on our performance. The Special Educational Needs and Disability (SEND) reforms require authorities to convert SEN statements to EHC Plans by July 2018. So far we have converted 8% which is below conversion rates for both England (18%) and the South West (19%).

Commissioners are working closely with partners to refresh Swindon's SEND strategy and develop an action plan to drive improvement. We have developed an SEN performance dashboard and audit framework to track progress. A "turning the curve" exercise is planned for September to address the high prevalence of children who have a statement/ EHC plan in Swindon and improve our timeliness in issuing plans.

## Strengths

- Embedding the Special Educational Needs and Disability (SEND) reforms
- SEN Performance Dashboard and audit framework

## Challenges/Risks

- Higher rate of children who are SEN compared with the national average
- Timeliness in issuing ECHPs
- Conversion rate for statements to EHC plans

## Attendance, NEET, (Not in Education, Employment or Training)

### Participation in Learning and Youth Unemployment

#### Performance Assessment (PA)

*The DfE introduced a more rigorous Persistent Absenteeism threshold from 2015/16. Pupils are now classified as PA if they miss 10% or more of all possible sessions – up from 15% in 2014/15.*

**Primary School Absence** continues a steady decrease year on year, with an all-time low of 3.4% for the Autumn term of 2015/16, down from 3.7% in the previous year. This compares to 3.6% nationally and regionally. In terms of Persistent Absenteeism, 8.6% Primary pupils (1,389) hit the threshold in the Autumn of 2015/16, down from 10.1% in 2014/15 (1,595 pupils). Primary absence in Swindon compares favourably to national (9.0%) and regional (8.8%) averages. Performance is good and above the national average for the percentage of pupils attending good or outstanding primary schools (89%).

**Secondary School Absence**, likewise, continues a steady decrease, with an all-time low of 4.6% in the Autumn of 2015/16, down from 4.9% in the previous year. This is in line with the national average (4.6%) and lower than 4.8% regionally. In terms of Persistent Absenteeism, 13% Secondary pupils (1,454) hit the threshold in the Autumn of 2015/16, down from 14% in 2014/15 (1,587 pupils). However, persistent absence at Secondary level in Swindon did not fall at a rate recorded elsewhere, with the national average at 12%. Performance is low for the percentage of secondary pupils attending good or outstanding secondary schools (49%).

#### Post-16 activities of young people: NEET, participation in Learning and Youth Unemployment

March 2016 figures show that the proportion of 16-17 year-olds **in learning** (education or training) activities in Swindon, at 89%, is down on the previous year (91%) – a difference of approximately 160 young people, out of a possible 5,200. The learning rate is now below the national average (91.5%), but especially so for 17 year-olds. This drop however is not directly linked to an increase in NEET rates: it seems that a major contribution to the drop in learning is the increase in the number of young people declaring work as their main activity. When employment is taken into account, the difference between Swindon and England in terms of 16-17 year-olds in positive activities is negligible.

Local authorities have a statutory duty to track young peoples' post-16 activities, with the primary aim of identifying those not participating, so that support can be provided for those to take on positive activities. The proportion of young people in '**unknown**' activities was 4.1% (213) for 16-17 year-olds in March 2016, twice as high as in the previous year, at 1.9% (99 young people). This is above national (3.3%) and regional averages (3.6%). The proportion of 16-18 year-olds in **NEET** in Swindon as at March 2016 was 4.6% (329 young people) - lower than last year's figures of 5.6% (421), but slightly higher than England's 4.3%. However, a significant higher proportion of Swindon's 18 year-olds were in 'unknown' activities. When looking at the Raising Participation Age (RPA) cohort (16-17 year-olds), the NEET rate is down on the previous year and is in line with the national average.

In terms of the wider cohort (16 to 24 year-olds), the **Youth Unemployment rate** - *those working out of all those 'available' for work* - was on average 11% during 2015, compared to 16% in 2014 and favourably to a national average of 14%.

#### Strengths

- Fewer absences from school & % pupils attending good or outstanding primary schools
- A drop in the NEET rates for the RPA cohort (16-17s) and in the Youth Unemployment rate (16-24s)

#### Challenges/Risks

- Persistent Absenteeism & % pupils attending good or outstanding secondary schools
- Fewer young people participation in learning activities
- More young people with 'unknown' post-16 activities

### Performance Assessment

As well as reporting NEET for the Swindon population as a whole, there are also some key measures in relation to NEET and EET that are reported to the Department of Education as part of our statutory reporting responsibilities for our care leavers. We have a responsibility to keep in touch with our care leavers up until the age of 21 and promote, encourage participation in learning opportunities. We also have a responsibility to actively monitor whether young people are engaged in Education, Employment and Learning activity. The headlines for 15/16 outturn are summarised below:

#### Care Leavers in NEET (Low is good)

Care leavers who are NEET slightly decreased from 50.7% in 14/15 to 48.3% (85 out of 176 young people) in 15/16. The 14/15 National average was 39% Statistical neighbour was 39.3%. Although a positive direction of travel since 14/15, Swindon is still above national and statistical neighbour average. It was also the highest in the South West in 14/15, where an average of 42% was reported.

#### Relevant context of NEET population:

Swindon has a higher number of NEET due to pregnancy or parenting, with 20 young people (11.4% in 15/16), compared with 6% nationally in 14/15. 9.1% (16 young people) were NEET due to disability or illness in 15/16 and this is higher than 8% nationally. In 14/15 Swindon reported 7.2%. If these are excluded from NEET then our performance is in line with the South West average.

#### Care Leavers in EET (High is good)

Care leavers EET increased from 33% in 14/15 to 48.9% in 15/16 (86 out of 176 young people) - National 14/15 comparator 48% SN 46.6%. High is good for this performance measure and we are now in line with the national average. This is positive.

**Keeping in touch with our care leavers** – It is important to note that if an authority is not in touch with the young person, their learning destination is excluded from this performance measure. Swindon has improved significantly during 15/16 with only 2.8% not in touch compared with 13% nationally and 14.1% SN (14/15). An increase in the number of young people we are in touch with means we will have a greater knowledge of their learning destinations compared with other LA's. Other LA's with a higher number of "unknowns" could have NEET potentially under reported in this respect. Being in touch with such a high proportion of care leavers is positive and helps with engagement in learning participation going forward.

### Strengths

- EET has increased significantly from last year and is now in line with the national average
- Swindon has a very low number of "unknowns" compared with others, meaning that we are in touch and actively engaged with our care leavers.

### Challenges/Risks

- Swindon has a high number of NEET with a disability compared with others, and routes to EET for this group is challenging
- Swindon has a higher number of NEET due to parenting or pregnancy and EET opportunities have to align with parenting capacity and responsibilities

### Performance Assessment

#### Reducing the number of Young People committing offences for the first time – First Time Entrants (FTE)

April 2015 to end February 2016 (Q1-Q4 data) (with the exception of March 16)

The locally set target is to maintain low numbers of first time entrants (FTEs) into the justice system. Based on the previous year's outturns, our local target is to have less than **44 first time entrants** into the justice system per quarter. These trends are in line with what is happening nationally, where there is a significant reduction in youth offending. Local data indicates a reduction from **122** the previous year (14/15) to **108 FTE** (15/16) which accords more accurately with local and neighbouring statistics (reflecting a continuing decrease over time).

Whenever possible, low level offending is dealt with, without taking young people to court, especially (but not exclusively) if the young person has not been in trouble before. In the community the Police encourage reparation by the offender direct to those affected by their offending, (paying or repairing damage or a genuine apology etc. as part of a Community Resolution). In 2014/15 there were **186 Community Resolutions**, in 2015/16 there were **110**. This is a reduction in this type of disposal however the Youth Offending Team (YOT) do not get involved in this particular activity which is wholly a local police one.

**Re-offending** data is produced by the Ministry of Justice (MoJ) using police and Youth Justice Board (YJB) data and is based on a rolling cohort identified 24 months previously. Year on year until 2012/13 Swindon Youth Offending Team, re-offending rate had been broadly in line with or better than the national average (currently 37.9%). In 2012/13 however, the local rate rose to a peak of 43.2%. Data suggested this was due to a small number of persistent offenders from 2011/12 re offending, but as they 'rolled through' the cohort timeframe, this peak has reduced (41.2% in 2013/14, 40.3% in 2014/15) and is expected, in time, to return to normal rates. It should be noted that this data is historical (with the accompanying time lag). Whilst the slight decrease shown is welcome – it does not reflect current data, trends or concerns. This is predominately why Swindon YOT have, with the approval of the YOT Management Board, moved to using the 'live tracker' YJB tool which gives contemporaneous data. This shows the predicted fall in re offending rates in Swindon as opposed to the South West and National rates which have remained static. Using this tool, the current re-offending rate (April 2015 to February 2016) shows a local current Swindon re-offending rate of **17.7%**, which is very encouraging.

### Strengths

- FTE rates remain low and continue to reduce
- Re-offending rates showing a positive direction of travel
- Post inspection action plan, well progressed

### Challenges

- Ensuring cautions are used where appropriate
- To remain vigilant in respect of FTE and re-offending rates which are predicted to rise nationally



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## Child Health

### Performance Assessment

#### Breastfeeding

In Q4 the prevalence of breastfeeding at 6 weeks was 46.0% (out of 693 Health Visitor contacts), decreasing from 49.7% (of 767) in Q3. This is still higher than the national average of 42.2%. The drop in coverage, however, was not so pronounced – 93.5% in Q4 compared to 94.5% in Q3. This means that health visitors are discussing breastfeeding with new mothers, as in coverage, but that a lower percentage are sustaining breastfeeding at 6-8 weeks. Swindon is still significantly above the national average of 85.5%.

#### Obesity

The prevalence of obesity for both Reception and Year 6 children in the 2015/16 decreased from the previous academic year and the figures were lower than those reported nationally in 2014/15: 8.5% of 2,701 Reception were classed as obese, decreasing from 9.2% the previous year. In Year 6 the prevalence was 17.4% of 2,199 children, a 2.1% decrease from 2014/15.

The combined proportion of overweight and obese children in Reception was lower in Swindon than in the whole of England (according to the 2014/15 figures) – 21.1% compared to 21.9% – yet it increased from the previous year's figure of 20.5%. The prevalence in Year 6 was also lower than the national figure (32.7% as opposed to 33.2%) and decreased from 34.3% in 2014/15.

#### Immunisations

Uptake of primary vaccinations at 24 months and 5 years has decreased since Q3 (from 97.6% to 97.5% and 98.0% to 97.9%, respectively) yet uptake at 12 months increased from 95.1% to 96.0%. Uptake of primary MMR vaccinations at 5 years increased for the second consecutive quarter and is now the highest ever reported (98.1%). All 13 measures were higher than the national figures and only three were lower than those reported for the Bath, Gloucestershire, Swindon and Wiltshire Area Team.

### Strengths

- Decrease in obesity at both reception and year 6, and lower than national average. We need to ensure that this is a sustained decrease and continue to work with our partners as this reflects the effective work being done by all agencies who contribute to this outcome.

### Challenges

- Breastfeeding prevalence has declined in this last quarter. There have been a number of changes to services locally for families with young children and we will watch this figure carefully and contribute through the various strategic and operational activities to try and ensure it is not a sustained decrease. Our recent successful Unicef Baby Friendly level 3 accreditation award suggests we have all of the right foundations in place for improving this figure locally.