

Improvement Report

Southampton Children and Learning Service Improvement Board November 2021

Stuart Webb, Head of Quality Assurance Jo Feeney, Performance Manager







Priority Areas

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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 partnership 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.

Survey

Steph Murray
Deputy Director
Children's Social Care



Effective Assessment and Intervention

Aug-21

26%

Sep-21

31%

90%

Oct-21

24%

85

Target

23

87

Southampton Southampton

20/21

22

86

19/20

28

65

Statistical

Neighbours

28

87

South East

23

89

England

N/A

N/A

518

88

What the data tells us

Jul-21

33%

94%

Number of Early Help assessments completed	NUMBER	417	319	351	428	338	297	264	250 per month	N/A	N/A	N/A	N/A	
Rates of Single Assessments completed per 10,000	RATE	55	118	182	237	292	333	392	637	898	672	637	554	

Analysis

Indicator

Percentage of re-referrals

within 12 months

Percentage of C&F assessments completed within 45 working

days

Outturn type

PERCENTAGE

PERCENTAGE

Apr-21

27%

91%

May-21

28%

87%

Jun-21

26%

89%

The percentage of re-referrals shows a reducing trend overall, in comparison to the previous year. However, there has been a notable fluctuation in some months. Audit activity identified that step down work is not always robust enough and this can leave outstanding needs for families, which can then translate into escalation of concerns at a later stage. Early help local performance is variable and comparison data is currently limited This will be addressed as the new requirements for the Early Help Service are developed. Single assessment timeliness remains good and aligned with statistical neighbours. We need to have an average of no more than 352 assessments per month if we are to come in line with SN's.

86%

- Greater focus on Early Help performance as part of Destination 22 programme. KPI's are being drafted for D22 Programme Board.
- Development of exemplars for the 'focus five' practice priorities 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. Training will also consider findings from Hampshire Partners in Practice CiN audit.
- teams. Planning has commenced. Training will also consider findings from Hampshire Partners in Practice CiN audit.
 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

Indicator	Outturn type	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Target	Southampton 19/20	Southampton 20/21	Statistical Neighbours	South East	England
Percentage of children subject to a Child Protection Plan seen in the last 15 working days.	PERCENTAGE	100%	83%	88%	83%	74%	88%	89%	100	N/A	N/A	N/A	N/A	N/A
Percentage of CLA for whom a visit has taken place within statutory timescales (6 weeks or less visits)	PERCENTAGE	82%	84%	85%	80%	72%	74%	60%	100	95	TBC	97	53	67
CIN on a plan visited within 4 weeks	PERCENTAGE	85%	82%	79%	76%	70%	69%	87%	100	N/A	N/A	N/A	N/A	N/A

Analysis

Data shows that we are not consistently meeting our visiting requirements in respect of our children who are either looked after or subject to CiN planning and we have drilled down into service / team / SW performance for these cohorts of children. There is better performance for 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 IRO Service 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.

- Identifying 'good practice' case exemplars to support staff to know what good looks like. 'Why am I in care?' training is being rolled out for staff.
- 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, with regular communication to ensure staff continued interest.
- Purchase of direct work toolkits for staff and PDT sessions has been approved.
- 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 stories. 160 staff attended SAR Alice presentation. Development of staff induction programme which also underscores the need for the above.

Management Support for better Practice

What the data tells us

Indicator	Outturn type	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Target	19/20	20/21	Neighbours	South East	England
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
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
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
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

Analysis

Our data shows us that supervision practice across the board remains inconsistent (although there are pockets of improvement, for example in PACT where timeliness has recently increased from 65 to 81%. Our employee Survey and SWORD (Social Work Organisational Resilience Diagnostic Tool) completed with a focus on wellbeing, supervision frequency and leadership also found that staff thought practice to be 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.

- Practice Development Team-led reflective sessions with teams and managers across the service have commenced. PSW has also commenced training some management groups in a) facilitating reflective groups b) facilitating a reflecting team approach to daily practice. 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.
- We will continue to interrogate supervision performance in the assurance clinics (at a service, team and social worker level).

Right Service at the Right Time

What the data tells us

Indicator	Outturn type	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Target	19/20	20/21	Neighbours	South East	England
Number of contacts	NUMBER	1897	2080	2373	2202	1895	2143	1978	1400 per month	15657	17661	N/A	N/A	N/A
Number of referrals in the month	NUMBER	336	445	342	355	291	426	387	300 per month	N/A	4092	N/A	N/A	N/A
Rates of referrals per 10,000 of Under 18 Population	RATE	64	152	219	288	345	428	503	647	944	790	647	561	494
Number of CLA at the end of the month	NUMBER	494	498	501	507	507	511	530	456	486	495	615	N/A	N/A
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
Number of children who are subject of a Child Protection Plan as at the end of month	NUMBER	338	354	384	386	419	385	388	340	396	310	406	N/A	N/A

163

TBC

162

TBC

164

TBC



N/A

N/A

N/A

N/A

N/A

N/A

156

TBC

NUMBER

NUMBER

Number of care leavers

Number of cases in care

proceedings

154

TBC

161

TBC

156

TBC

N/A

N/A

N/A

N/A

150

TBC

|Southampton|Southampton|

Right Service Right Time

Analysis

There has been a notable increase in contacts between 19/20 and 20/21 and the trend is continuing. There is a risk that multi agency partnership safeguarding arrangements will not be effective due to the volume of contacts.

The rate of referrals remains high. Audit of sec.47 investigations in summer 2021 concluded that the majority of cases met the threshold for strategy discussion and, following s47 enquiry, for the majority of the families the decision made not to progress to ICPC was proportionate to meeting their needs. However, the service Destination 22 analysis concludes that it can be hard for families to access help easily and this can result in a higher tier of referral and intervention.

The rate of children in need of help and protection and looked after are all higher than Southampton's statistical neighbours; again, suggesting a context where children and families experience statutory intervention too frequently.

Proceedings data was not available for analysis before the Improvement Board. We know that this a key area for improvement and information will be shared with the Board ahead of the January 2022 meeting.

- The Executive Director is sighted on the high level of contacts and low conversion rate to referrals, alongside police colleagues at a senior level. A plan to address the issue needs to be confirmed. The service is launching We are launching its new Children's Resource Hub after consultation has concluded. This will ensure easier pathways of support for children and families. Aligned with this, the new threshold document will be launched and it will be important for safeguarding partners to support the roll out.
- The conclusion of the Destination 22 service consultation on November 19th will mean that the service can move onto the next stage of its redesign. This will support better service access for children and families through the progression of key workstreams: Early Help, Special Educational Needs and Disabilities, Young People's Service, Safeguarding).
- The service is also engaging with its Partner in Practice and another local authority to draft a business case for a local family safeguarding model.



Robust Corporate Parenting

What the data tells us

Indicator	Outturn type	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Target	Southampton 19/20	Southampton 20/21	Statistical Neighbours	South East	England
Number of CLA at the end of the month	NUMBER	494	498	501	507	507	514	530	456	N/A	N/A	N/A	N/A	N/A
Rate of CLA per 10,000 under 18 population	RATE	95	96	96	97	97	99	104	89	95	ТВС	97	53	67
Number of CLA at the end of the month who are UASC	NUMBER	18	15	17	22	25	26	25	35	N/A	N/A	N/A	N/A	N/A
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
Percentage of children in care for at least 12 months for whom health assessments are up to date.	PERCENTAGE	93%	91%	90%	88%	86%	83%	76%	100%	N/A	N/A	N/A	N/A	N/A
Percentage of initial health assessments delivered within 20 working days of date child became looked after.	PERCENTAGE	ТВС	TBC	ТВС	ТВС	ТВС	ТВС	ТВС	95%	N/A	N/A	N/A	N/A	N/A
Percentage of CLA at end of month with 3 or more placements during the year	PERCENTAGE	16%	16%	16%	16%	15%	15%	12%	8%	N/A	N/A	N/A	N/A	N/A
Number of CLA allocated to CWD	NUMBER	27	27	27	27	27	29	29	N/A	N/A	N/A	N/A	N/A	N/A
Number of Voluntarily Accommodated Section 20s (S20) at period end	NUMBER	39	32	38	39	43	54	60	40	16	ТВС	11	13	11
Percentage of Looked after Children (LAC) with a permanence plan in place within 6 months of BLA	PERCENTAGE	ТВС	100%	N/A	N/A	N/A	N/A	N/A						
Number of Looked after Children placed for adoption at period end	NUMBER	17	16	14	14	12	12	13	N/A	N/A	N/A	N/A	N/A	N/A
Percentage of CLA placed with IFAs at end of period	PERCENTAGE	31%	31%	32%	32%	32%	33%	32%	36	37	N/A	36	38	36

Robust Corporate Parenting

Analysis

The rate per 10,000 for looked after children remains high and has increased because of a higher level of entries in to care, against a stable number of children exiting. The service anticipates that the number of unaccompanied asylum seeking children (UASC) will increase, in line with national requirements upon local authorities. Although review timeliness is generally good, the timeliness of contact has deteriorated, as previously outlined on page 4. Data in respect of children having a plan for permanence by second review is also not available, but will be when the new case management system is implemented.

The service still needs to do much more to ensure that placements for children are stable, as the monthly trend in respect of children who have experienced 3+ placements during the year shows. Completion of health assessments shows a deteriorating picture overall and data for initial health assessments was not available at the time of writing. However, considerable work is being undertaken with health colleagues to obtain accurate data and resolve the performance issues.

Regarding the profile of our looked after children cohort, the number of children with disabilities remains stable. There is a high number of children in the sec.20 voluntarily accommodated cohort. Adoption performance remains generally consistent in Southampton.

- Extensive auditing of looked after children is underway, which will inform the self evaluation of practice and service delivery plan for that area. This has been coordinated by the Quality Assurance Unit and has involved the management team and Independent Reviewing Officers, with moderation at Panel.
- The Deputy Director is leading a project group from across the service, to deliver on a Placement Action Plan, which has three high level objectives: 1. Prevention of care and return home from care; 2. Substantially reduce the number of children in residential provision, by improving the sufficiency of in-house placements and increasing our access to IFA placements 3. Promote stability and better outcomes for children by reducing placement moves and placement breakdowns. This work is complex and time consuming, but necessary, to ensure the right permanence plan for each child and to ensure that the service is financially sustainable.
- The service has invested in participation activity, bringing additional staffing resources into the service to coordinate and develop the
 involvement of our looked after children and care leavers in the design of our service, aligned with wider service and corporate participation
 objectives. The Participation Strategic Plan will be signed of in March 2022, alongside the Corporate Parenting Strategic Plan.

Common Practice Framework

What the data tells us

Training	No. of attendees
Restorative Practice	322
Trauma Informed Practice	309

Partnership training numbers 1^{st} April – 9^{th} November 2021

Analysis

Data is encouraging, but there needs to more structure to the common practice approach; which focused on restorative practice, trauma-informed practice and Strengthening Families. There is evidence of traction being gained: Partners are now invited to the *Making the Difference* Board. The service is represented at the countywide Trauma Informed forums and the Workforce Development Manager chairs the local training delivery group. In September 2021, the service's Principal Social Worker recommended that the Safeguarding Children's Partnership endorse a common practice framework and partners expressed an appetite for a common practice framework. The Child and Adolescent Mental and Emotional Wellbeing Plan cites the core components of the framework. Practice weeks are being used to promote understanding and awareness of the practice framework.

- Confirmation of training plan with oversight of the Making the Difference Board.
- Launch of Strengthening Families training resources.
- Opening up access to practice weeks for partners.
- Service participation in the Police and Crime Commissioner sponsored Trauma Informed Practice Conference in 2022.
- Plymouth University evaluation of impact in October 2022.

Rigorous Quality Assurance

What the data tells us

PERCENTAGE

PERCENTAGE

PERCENTAGE

agency audits have continued with good engagement from partners.

learning and reflective sessions delivered by the Principal Social Worker.

Indicator	Outturn type	Apr-21	May-21	Jun-21	Jul-21	Aug-21
Number of Cases Audited	NUMBER	12	2	28	105	22

33%

42%

25%

Extensive Looked after Children 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. The Quality Assurance Unit continues to take the lead in most activity and the numbers of audits completed needs to increase. Overall, audit activity shows that the quality of practice remains inconsistent, typically falling below the 70% for case work graded good or outstanding. However, there has been positive engagement by managers in the training run by the Head of Service for Quality Assurance and colleagues from Hampshire Children and Learning Service; to support managers to accurately benchmark the quality of practice, in order to help raise standards. Capacity to undertake audits has been an issue due to staff sickness; but, service continues to flex to audit cases where there are potential concerns. MASH multi-

0%

50%

50%

36%

57%

7%

66%

30%

4%

41%

54%

5%

Sep-21

17

65%

29%

6%

Analysis

Percentage of cases that are Good or

Outstanding

Percentage of cases that are RI

Percentage of cases that are Inadequate

Case Review discussion/reflection has been introduced at Learning and Improvement Panel 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 focused audit and reflection days are being launched in January 2021. These will involve managers auditing with practitioners and
- We continue to use our Learning and Improvement Panel to review our local CHAT analysis. In this way, we are identifying areas for scrutiny either through audit or dip sample.

Performance Culture

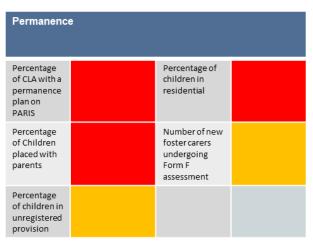
What the data tells us – Assurance Clinic Overview

Assessment		
Assessment visit within 3 days	Percentage of all visits on time	
Percentage of Assessment s NFA	Percentage of all plans on time	
Percentage of S47 NFA	Percentage of supervision visits on time	

PACT		
Visits on Time in PACT	Number of complaints and response timeframes	
Percentage of Children with an up to date plan in the past 3 months	Number of CLA reviews adjourned since April due to no plan	
Number of adjourned CPP since April in PACT	Percentage of Supervisions On Time In PACT	

CLA		
CLA with a visit within 6 weeks	Percentage of plans in timescale	
Percentage of reviews on time	Percentage of CLA 15Yrs 9mnths with a completed pathway plan	
Number of reviews adjourned since April due to no plan	Percentage of Supervisions On Time	

Pathways		
Care Leavers with a visit within 8 weeks	Percentage EET	
Percentage in suitable accommodat ion	Percentage of Supervisions On Time	
Percentage of pathway plans in timescale		



Early Help
Jigsaw to be convened

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). Assurance clinic discussions are analytical; exploring the service strengths and challenges that sit underneath performance trends.

Action/next steps

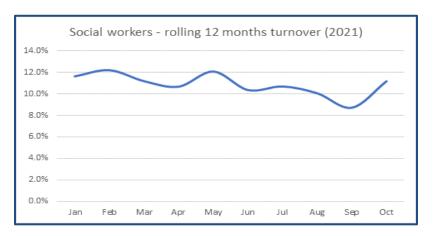
It is the intention to present the data for the improvement board as 1 dashboard from January 2022 and beyond.

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.

Workforce Academy

What the data tells us



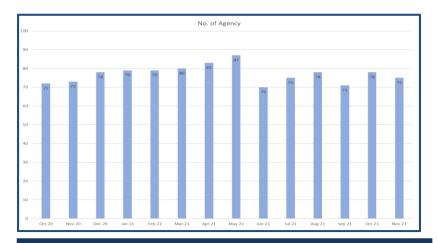
Analysis

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.



- 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.



Systems and Support Services

Care Management System Implementation

- The Care Director implementation has recently had a new Live date approved for the 31st January 2022.
- The project started UAT on Monday the 1st Nov and by 5th and will have completed 20% with HRDA, EDT, MASH, Single Assessment and CIN.
- User Acceptance Testing has commenced.
- 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

Systems and Support Services

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

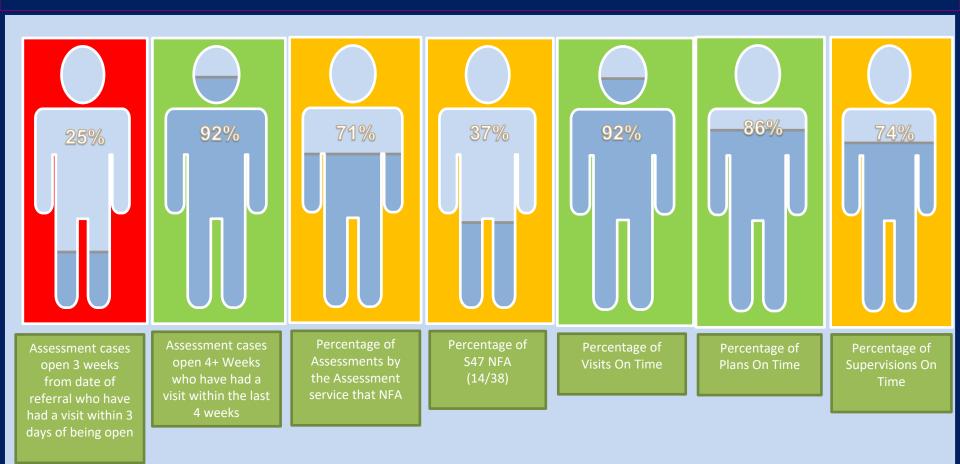
Timeline is high level until the Admin Function is defined and the implementation plan can be formed.

The Horizon to December is fixed and baselined.

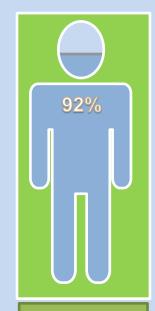


Appendices

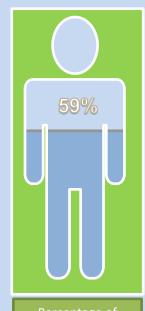
Assessment Service



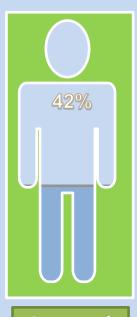
Assessment Service 3/11/21



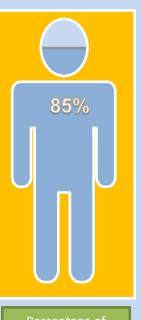
Assessment cases open 4+ Weeks who have had a visit within the last 4 weeks



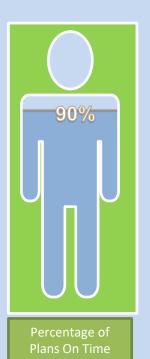
Percentage of Assessments by the Assessment service that NFA



Percentage of S47 NFA (37/89)



Percentage of Visits On Time

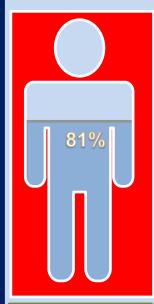


71%

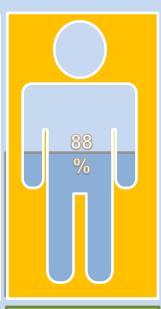
Percentage of

Supervisions On Time

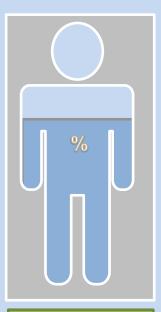
PACT Service 10/11/21



CLA with a visit
within 6 weeks
In PACT CLA 85%
(121/128)
CPP with a visit
within 4 weeks 70%
(241/357)
CIN with a visit
within 4 weeks 81%
(476/547) Combined
Total 76% (838/1032)



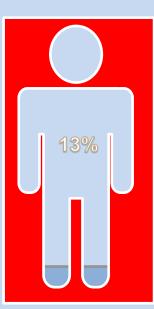
Percentage of Children with an up to date plan in the past 3 months CLA 94% (118/128) CPP 99%(337/357) CIN 80% (341/547) Combined Total 89% (913/1032)



Number of adjourned CPP since April in PACT ICPC - 8 RCPC - 62



Number of complaints and response timeframes



Number of CLA reviews adjourned since April due to no plan 69 33 in PACT



Percentage of Supervisions On Time In PACT CLA 81% (104/128) CPP 79% (281/357) CIN 82% (449/547) Combined Total 81%(834/1032)