

ANNUAL QA AND PERFORMANCE REPORT 2023



BIRMINGHAM
CHILDREN'S TRUST

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1. Our Context

Birmingham Children's Trust (the Trust) is the largest provider of children's social work services in Europe. Our size brings both opportunities and challenges. We employ over 2,000 staff, with approximately 800 front-line social workers. We serve up to 10,000 children at any one time.

2. Our approach to quality assurance and management and performance information

At Birmingham Children's Trust we **give our best, so that children and young people can achieve their best.**

The Trust is committed to making a positive and real difference to children, young people and families every day. As a learning organisation, we want to continually assure ourselves that we are offering the right help at the right time to our children and their families and improving their situations. As such, continuous service improvement is at the heart of what we do. We know that to do this we need to 'know ourselves'. Effective management and performance information and robust quality assurance are critical to this.

We strive to create a supportive learning environment to enable our workforce to support vulnerable children and families to be happy, safe and healthy, inspired and able to succeed. We do this by providing a clear vision to our workforce and an environment where we regularly remind our staff of the important role that they have in the help, protection and support of the most vulnerable children in our city.

We also know that good practice does not exist in isolation. Our approach to management and performance information and the Trust's Quality Assurance Framework are therefore inclusive of all. Everyone in the Trust has responsibility for the development and effective use of management and performance information, and for quality assuring their own practice and the practice of others. We want to ensure that our practice makes a tangible and quantifiable difference to the lives of children and their families. We encourage dialogue, debate and reflection at all levels, as this will help us agree how we can be better.

2.1 Our approach to management and performance information

In the last 12 months we have further reviewed our management and performance information delivery in the following areas:

- The architecture of the Trust's data warehouse to ensure industry standard practice.
- Harnessed the potential for enhanced reporting technology – Power BI from a variety of 'source' data, adopting a flexible systems approach that supports reporting on internal, external and combined datasets.
- Enhanced our delivery model through the development of how we present information to support bespoke self-service for managers and leaders in respect of the areas for which they are responsible.
- Ensured that our data is as accurate, complete and as timely as possible.
- Established a governance structure and framework to oversee our data use, our reporting landscape, and our compliance with legal requirements.

Our ultimate aim is to have 'industry standard' governance, functionality and reporting mechanisms.

Our priority for the coming year is to ensure our capacity to deliver this objective. Throughout this year, the Practice Hub and ICT Services have developed a strong working relationship to underpin the conditions for success through effective collaboration and co-design. We have invested in a lead officer for case management systems and have 4 dedicated data quality officers to ensure our 'input' is the best it can be. We are also investing in additional data cleansing and training capacity to achieve this end. The ICT re-design has also been scoped and is the first stage of creating the required infrastructure and capacity.

Management Information

The majority of our management information is delivered through Power BI. Power BI, as a reporting tool, affords us with almost 'real time' accessible management information (within one working day). This helps leaders and managers at all levels to access, understand, analyse and act on available management information. Leaders appreciate this as they use the information to support their practice oversight. We are in the process of further developing and enhancing the 'reach' of Power BI so that it covers more and more of our services.

Our business analysts also produce a range of management information bespoke to those service areas where we are still in the development stages for Power BI reporting.

Performance Management

Performance information helps us to understand how well we are meeting key performance indicators and benchmark ourselves against statistical, regional and national performance. For us, this is about making the best use of data so that we 'know ourselves' and use this to continually improve. Increasingly we are using our performance information to help us to be curious. We are getting better at formulating and testing out hypotheses. Our aim is to equip managers with the reporting framework (systems and processes) to support effective decision-making based on sound data and track our progress through business intelligence driven by that data.

Power BI supports us in ensuring management oversight and grip and accountability for performance from the 'ground up'. As we strengthen this functionality our business analysts produce a full range of performance information that is used in local performance meetings Trust-wide, including Executive level.

2.2 Our approach to quality assurance (QA) and our guiding principles

Our approach to quality assurance is ever evolving and developing, as we learn. The Trust uses a number of tools and methods to understand and assure our practice. These tools provide a combination of quantitative and qualitative information from a range of sources to help us to understand ourselves and tell our story.

We conduct meaningful quarterly evaluations of our practice, and the progress and experience of our children. We include feedback from children, families and partners, in recognition that their experience of our services is vitally important to help us understand what we need to improve. We moderate our evaluations to assure ourselves that we are applying consistent judgements. This helps us to achieve consistency and a collective understanding of 'what good looks like'. We also recognise the need to be dynamic and responsive to emerging hypotheses. Therefore, we complete thematic dip sampling as the need arises. What our children and families tell us is of vital importance to us. We incorporate feedback from compliments, complaints and user feedback to enrich our understanding about the quality of what we do. Our emphasis is on progressive momentum and incremental improvement over time.

Our practice evaluation methodology is "sit alongside, tell me – show me". Our aim is for this to be a learning opportunity in itself, through reflective consideration by the evaluator and the worker about the children's experiences and progress. Our evaluations are centred around our four pillars of practice: the child's voice, assessment, planning, management oversight and supervision. Our approach will provide us with a holistic view of the child and the impact of our practice on children. The collation of our findings from individual children's experiences and feedback, provide us with organisational learning and a secure platform for continuous learning and improvement.

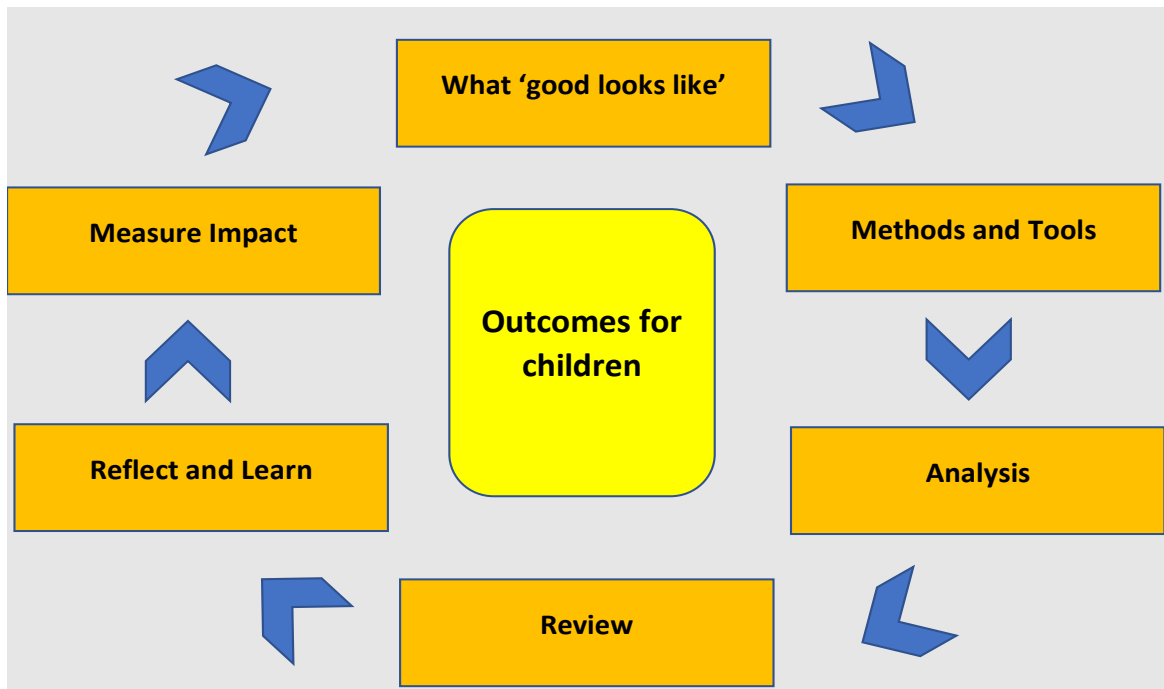
We work within a relationship-based practice framework, Connections Count. We work collaboratively with children, families and partner agencies to understand children’s needs and what actions are needed to make a positive difference to their lives.

The underlying principles of our QA framework are:

Child-centred and outcome based	Understanding children’s experiences and their progress. Are we improving their situation? Are we listening to our children? Are we focussing on children’s outcomes, not just processes!
Restorative and reflective	Restorative by design. We reflect and learn together. We have courageous but respectful conversations about the difference we are making to children’s lives or what more we might need to do and/or improve.
Positive and impactful	We take collective responsibility for improvement. We progress actions for individual children. We share and act upon system and practice learning.

Embedding our learning

Our ‘sit alongside – tell me, show me’ practice evaluation approach encourages joint learning through the evaluation conversation. Our moderation panels provide an opportunity to ‘test’ our collective understanding of what good looks like. We collate our findings and triangulate this with feedback and other intelligence from across the Trust. We seek to measure ourselves against what ‘good’ looks like. We draw from inspection grade descriptors and our own practice standards to help us with this.



Our evaluations are tabled for discussion in supervision for individual children considered. This means the learning identified is reflected on and management oversight of recommendations is maintained.

The system learning that arises from our evaluations and thematic dip sampling is analysed and feeds into our Trust development plans and shapes our improvement priorities.

We produce written learning briefings after each evaluation cycle. These are shared through our regular Trust communications and through line management reporting.

We hold regular Trust-wide webinars to communicate key learning and improvement messages. We also hold regular Trust-wide and localised practice forums to create opportunities to collectively discuss and reflect on what good looks like and what we need to improve. We are responsive in commissioning specific blended learning and development activities where we identify gaps in our offer.

In every round of our practice evaluations we revisit a proportion of children evaluated in the previous round. This helps us to hold ourselves to account for progressing actions and helps us to consider impact, both for the individual child and the wider system. We hold a centralised record of recommendations arising from practice evaluations in the Practice Hub to enable the routine revisiting of children's files, ensuring that 'the loop' has been closed.

It is this commitment to understand the experience and progress of our children and the difference we are making to their lives that helps us to continually improve the service provided.

3. Our activity over the year

This has been the second year of the practice evaluation progress. We have continued to refine this process as learning has emerged. Strengthening systems, increasing quality and processes, that ensure impact can be evidenced in wider system learning and for individual children. We have strengthened our dynamic responses to key lines of enquiry emerging from our data with increased capacity and thematic dip samples providing assurance

We have undertaken assurance work into children's residential provision, for children with disabilities. A quality and safety review and overview report were completed by the Trust in November 2022 in line with the urgent recommendations from the National Review. Five Birmingham children were identified as falling within the scope of the review and none of them were found to be at any risk. No Birmingham children were in the identified settings, however historically 2 children from Birmingham had been placed there. The recommendations from the Phase 2 report will have implications across a number of service areas of the Trust. This will include Children with Disabilities Service, Children in Care, Early Help & Prevention, Practice Hub, Commissioning, LADO, Independent Review Service, Residential Homes and SEND (City Council).

A task and finish group will meet in June to discuss the report in detail and begin action planning. We have also continued some centrally managed thematic dip-sampling alongside the service specific and locally managed audit activity.

We have continually updated our Power BI management information and produced regular performance reports. Locality based performance meetings 'drill down' and consider key performance indicators in each of our three geographical delivery areas. Strategic lead Assistant Directors for the front door/ASTI, Safeguarding and Children in Care consider thematic performance through city-wide management meetings. Trust-wide performance meetings provide opportunities for further deep-dive and forensic discussion on key areas of practice. Work is ongoing to create dashboards so that social workers will be able to view their own data and performance enabling them greater oversight of their work.

4. What do we know

In the Trust we have a practice hub that coordinates the practice evaluations. In addition to this activity the practice hub also offers support by providing deep dives into themes for the service areas in line with their identified development points. All service areas also carry out their own quality assurance audits and compliance audits. The practice hub leads on consistently pulling together all activity tracking themes that may be emerging and identifying activity to support staff development, updating policy and procedures and ensuring children and families receive a good service. There is also a series of rolling feedback opportunities for children, families and partners. This report pulls together an overview of performance data, practice evaluations, audits and feedback to provide a holistic overview and clear narrative of practice in the Trust.

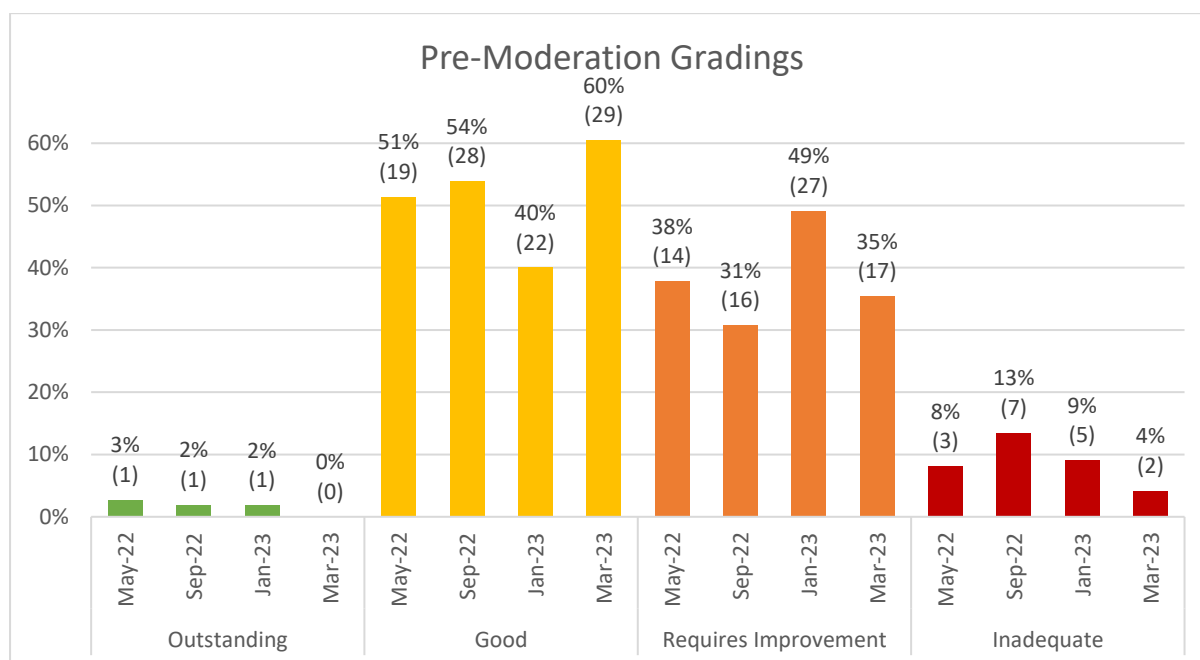
Full detail pertaining to the audit activity that sits behind this report is available in appendix 6.2.

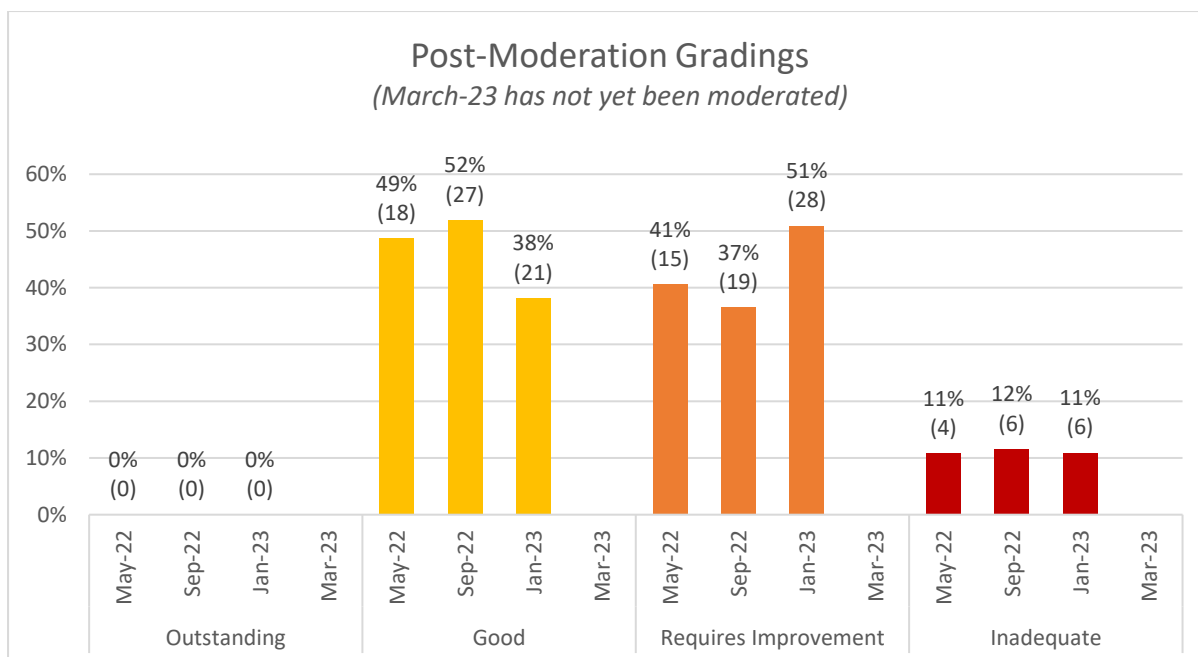
4.1 Practice Evaluations - Overall graded judgements and the experience and progress of our children

Our practice evaluations provide us with a quarterly snapshot of the quality of our practice. The graphs below show the overall grading of the practice evaluations that have taken place. What we can see across the three quarters to date is that the majority of our practice evaluations fall within the cohort between good and requires improvement, with an upward trend towards good. There is a small but consistent number of practice evaluations that have been graded inadequate; where this has happened, actions have been taken to reduce drift and make sure that children’s files are updated. A small number of our practice evaluations were graded good, with elements of outstanding, which is not reflected in the graphical representation.

Overall graded judgements

Across cycles at a glance.



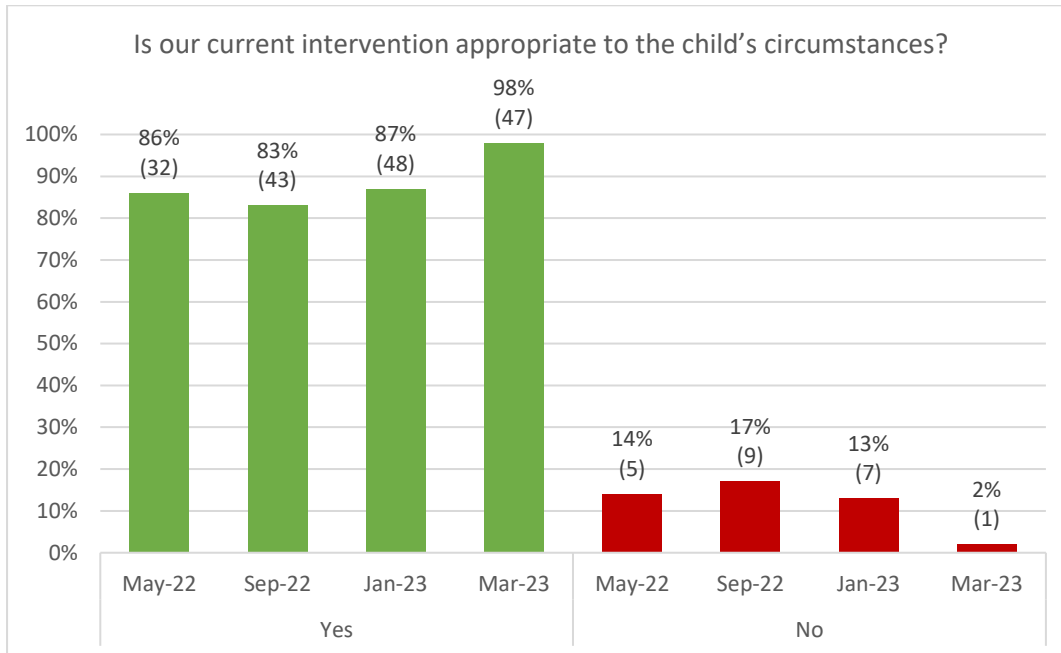


The overall trajectory of the practice evaluations indicates an upward trend in quality of interventions for children. The number of inadequate practice evaluations has fallen. This progress demonstrates that children and families are receiving continually improving services. Moderation data indicates that most practice evaluations are graded appropriately and that there is a consistency in the approach to grading applications. However, we recognise that this could be strengthened and in order to address this all leaders conducting practice evaluations, will be provided with refresher sessions on conducting practice evaluations. Further information breaking down each cycle is available in appendix 6.1.

Overall experience and progress of children

The graphical representation below considers whether our intervention is appropriate to the child's circumstances.

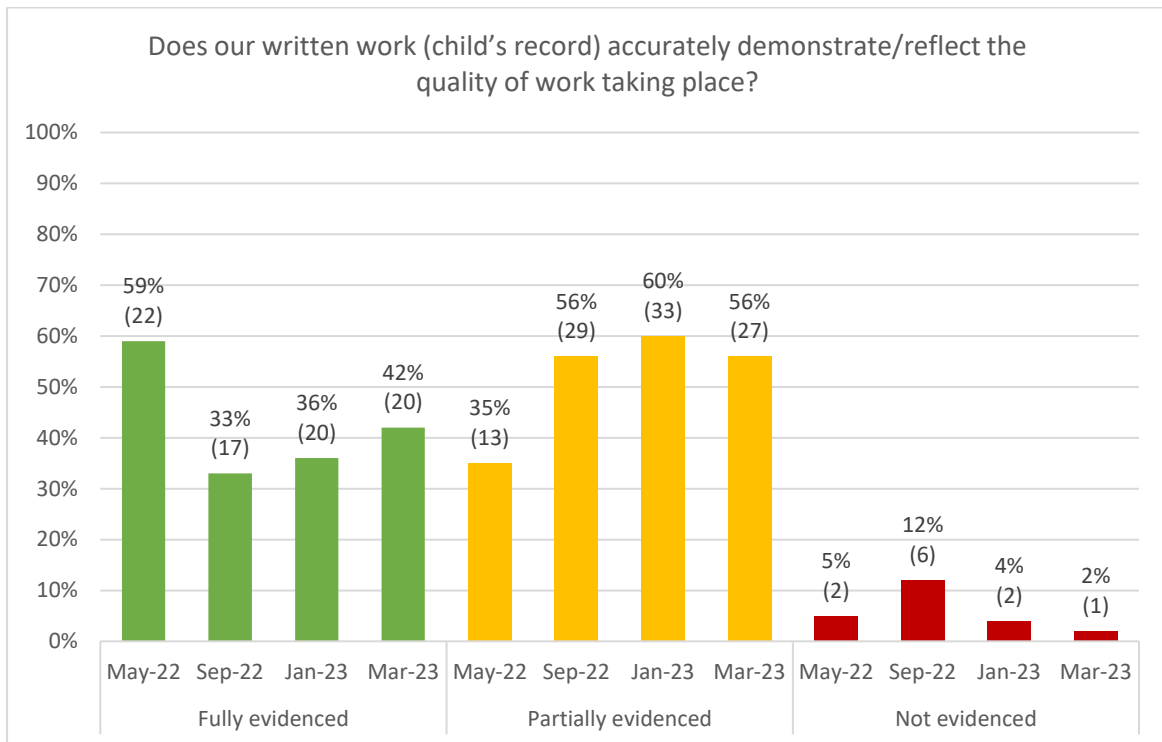
Across cycles at a glance.



The majority of children receive intervention and support that is appropriate to their circumstances. There has been a continued upward trend demonstrating that children are receiving the right intervention as needed ensuring that their needs are met. No children have been found to be unsafe. However, inadequate judgements have been appropriately applied for children whose plans are not progressing as swiftly as they should, or where we are not having sufficient direct contact with young people in custody. In all instances, evaluators and practitioners agreed timely and appropriate actions that would support practitioners to progress the plan, improve the situation, and bring about positive change for the child and their family. This is further strengthened by learning from our thematic audits.

Does our written work (child’s record) accurately demonstrate/reflect the quality of work taking place?

Across cycles at a glance:



We have more to do to ensure that our written work reflects the true quality of the help, support, protection and care we afford our children. We are, however, seeing improvements. We have implemented practice guidance for practitioners to help guide and benchmark expectations for ensuring that the child’s record accurately captures the experiences, wishes and feelings of the child. Work has begun to support practitioners to think about how they write to the child in their records. When writing to the child, practitioners are more able to hold in mind the work that they have done with children and the impact that this has had. This work is ongoing and growing at pace.

4.2 Feedback from children, parents and carers

Children, young people, parents and carers tell us through our practice evaluations that they understand why we are working with them, and that we involve them in planning and decisions. We know that strong and effective relationships lead to the most impactful intervention and sustained change. The practice model for the Trust is 'Connections Count', this practice model reinforces the role of relationships in supporting children and families who have experienced adversity and trauma. This is why all our staff in the Trust are receiving reflective learning sessions, to ensure that they are applying the practice model to work that they do with children, families and partners.

Work has begun in the last year on the 'Child's Journey' this project focuses on how services operate, and meet the needs of children, families, young people, and staff. As part of this work children have been consulted with to understand what they need from our services and work is scheduled for 2023 to consult with parents.

Our practice evaluations tell us all parents we spoke to understood why the Trust was working with them and their child. The majority of the parents felt that practitioners understood the child and/or family's needs well or very well. Importantly most families that have been spoken to feel that they understand decisions and plans for their children and they have felt included in those decisions or plans. Examples of parents' feedback below:

"Doing great job, very helpful and always there when needed. Likes child A and Child B a lot, gives a lot of support"

"She always says, "I am here" and she does it from the heart."

"I was asked questions by (SW) and was involved in changes being made."

Almost all partners contacted as part of the practice evaluation process stated that they understood why the family had social worker involvement and that the practitioner understood clearly the needs of the family. In addition, almost all professionals could see an improvement in circumstances for the child and/or family since practitioner involvement. Professionals commented that they understood the actions in plans that they were responsible for, but some professionals did not feel that they were able to contribute fully to the development of plans. Most professionals shared there was little to be improved on and that they worked with practitioners well and some practitioners felt that relationships could have improved via informal catch ups. Overall partner feedback was positive.

'He is a very good representative for the Trust.'

'G's approach to working with P has been exceptional, she has built up quite a rapport with her and the way she engages with P speaks volumes. In my opinion G is an asset to the Trust and has worked very well with our young adult and so we would collectively like to say THANK YOU.'

'He is a brilliant support. His communication is on point. We share information together.'

The majority of young people understand why they have a social worker involved and they felt involved in decisions made about them. Some children believe that their social workers understand them but at times the impact of social worker changes can slow down key relationship building. Social workers forging new relationships with children do so tentatively and thoughtfully is evidenced in a number of practice evaluations. In this last year we increased the number of families, professionals and children that we contact for feedback through the practice evaluation. We are also looking at different ways of connecting with parents such as coffee mornings.

Over the last 12 months we have conducted a number of surveys and user feedback processes (appendix 6.4). Overall, surveys paint a very positive picture of our services, consistent with the last annual report. In particular, feedback highlights staff excellence in working relationally, building positive relationships with service users, and being able to support service user's needs, with the majority of service users telling us the support they receive is of excellent quality. Importantly, professionals and children and young people tell us that the child's voice is evident at most child protection conferences/review meetings (even when children and young people do not attend).

Almost all professionals understand what needs to happen next to support families, but consistently fewer parents/carers and children and young people understand what needs to happen next to best support them, suggesting there is some room to improve transparency and understanding of actions to be taken to best support families to succeed. Similar to the previous annual report, there are two main recurring themes for improvement across service areas, support around timely and accurate administration for meetings, panels etc., including correct links being sent out to the relevant people and information being shared (CP and Review; Adoption) and for longer periods of support and involvement (Families Together; Early Help). We are also seeing response rates to feedback surveys dipping more consistently across services, meaning that we are not capturing the breadth of experience of the families we work with. Discussions and alternative participation strategies are being discussed to better engage our service users, drawing on learning from services who have consistently higher response rates.

The feedback surveys are currently under review to ensure that the feedback we get is purposeful, as well as focusing on how to support the embedding of a closed learning loop consistently across services.

Through its production of annual and quarterly reporting, the Trust has a mechanism for ensuring that customer feedback is captured and helps to influence practice, as well as driving service improvement. This reporting identifies trends from both complaints and compliments which have been received.

The last reporting cycle identified a number of recurring themes which complainants were unhappy about, including:

- Staff conduct/rudeness/attitude;
- Inappropriate action taken;
- Poor quality service/support;
- Disagreement with assessments/reports/plans/minutes;
- Failure to act;
- No reply from social worker or manager; and
- Breaches of personal data

The Trust also records the positive feedback it receives from children, young people and families, as well as compliments from other professionals we work with. The compliments are evenly distributed across the area-based services and the Citywide functions. A redacted sample of compliments is regularly included in quarterly and annual reporting, so that senior leaders have sight of the positive feedback which has been received.

Compliment themes include:

- Feedback from a care leaver about her Aftercare Advisor for going the extra mile on matters concerning the care leaver's housing and university;
- Feedback from a parent who was appreciative of the support and advice provided by a Head of Service, and the time taken to explain the role of social worker to a family who had never had any previous involvement with Children's Services;
- Feedback from a parent of a homeless young person who provide help and support the young person to meet their specific needs; and
- Feedback from a professional about the quality of practice around domestic abuse, where the social worker provided tailored support in a way that was easy to understand for the family (as well as other professionals who were working with the family).

The Complaints & Information Manager liaises with Assistant Directors and Heads of Service to ensure that the trends detailed in quarterly and annual reporting are discussed locally to help ensure that there is a consistent approach to practice across the City. Reporting captures instances where feedback has resulted in improvements to practice.

Examples of actions taken include:

- Retraining for staff to ensure that information recorded within referrals is clear and reflects accurately reflects all relevant information;

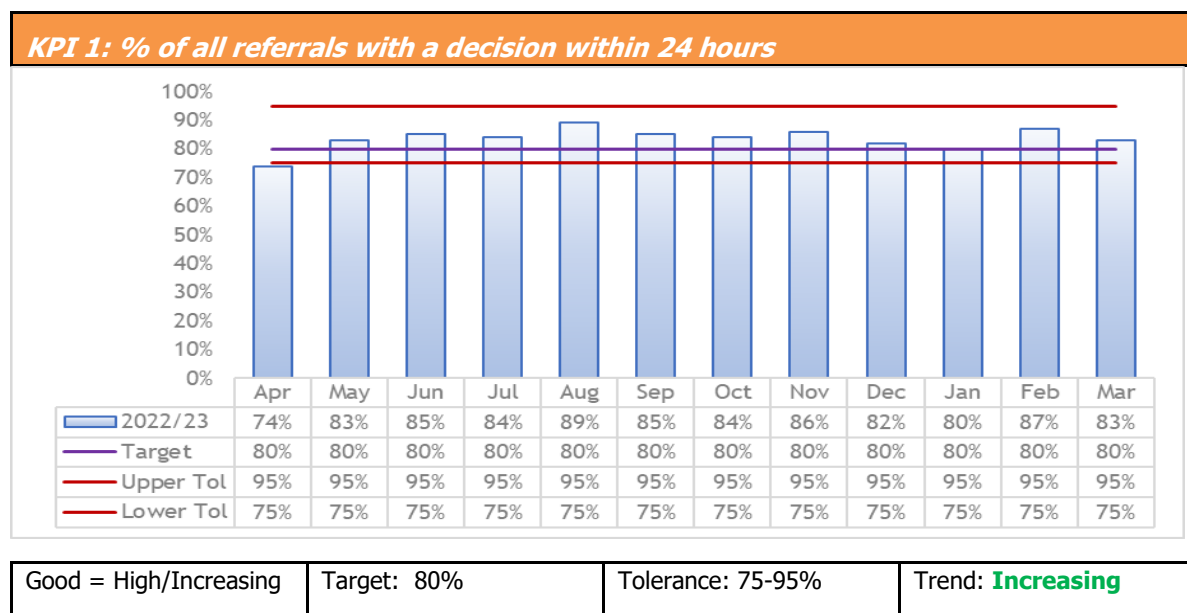
- Practice guidance to staff involved in Child Protection processes reminding them of the requirement to record the rationale for excluding parents from meetings; and
- Training for staff on reporting data breaches.

During the course of the year, the Complaints & Information manager has undertaken training sessions to help managers more effectively investigate and respond to complaints, and to focus on learning and improvement as part of complaint investigations.

The overall percentage of complaints made by children and young people continues to increase. There has also been an increase in the number of historical complaints from former children in care about their time in care. As with previous years, we remain concerned that not enough children and young people are aware of the complaints procedure and how they can complain if they are unhappy. The Complaints and Information Manager will continue to discuss this with Heads of Service for Children in Care and Independent Review to ensure that this information is routinely shared.

4.3 Our front door and assessment

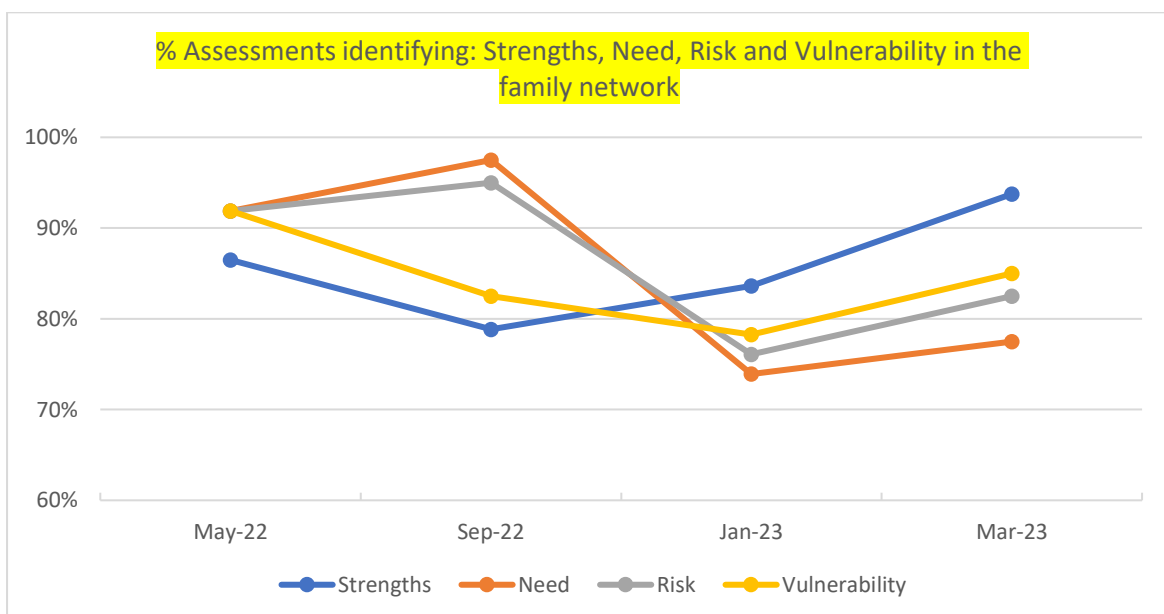
Extensive dip sampling and auditing has been completed at the front door of children’s services during 2022 – 2023. We have triangulated the outcomes from this testing with our performance. This, along with feedback from children, families and other professionals helps us to understand the quality of our work. The following key performance indicators are critical indicators:



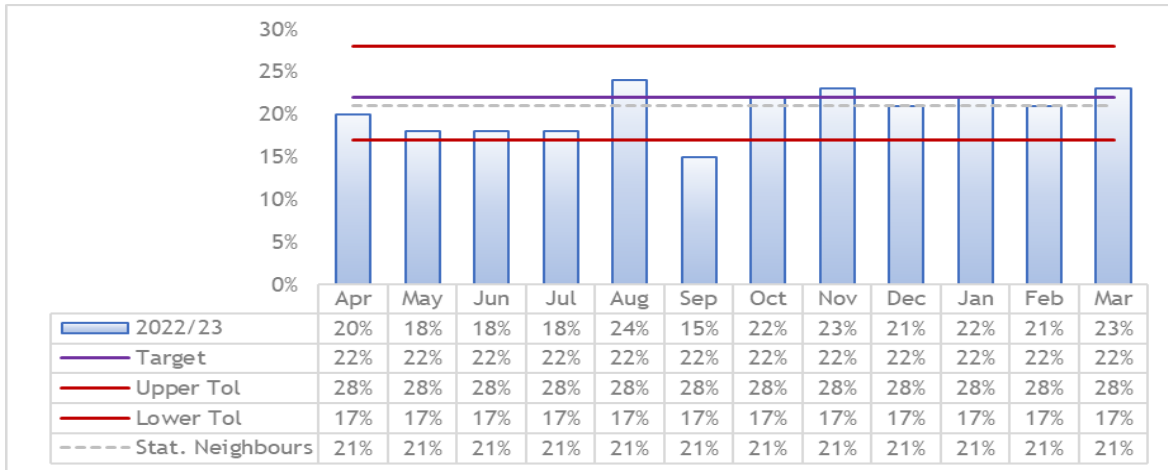
We have met or delivered above target for 11 months of the year, a significant improvement on performance in April 22. This sustained improvement is a reflection on refining practice and allocation across the service to ensure that the majority referrals are reviewed and allocated within timescales. There is still improvement to be made but 22-23 has a solid foundation on which to progress to outstanding practice in this area.

Alongside an overview of the performance data for CASS our audits demonstrate that the majority of decisions made at the front door are appropriate and they demonstrate a clear rationale for decision-making. There is effective management oversight at the point of decision-making. In the majority of referrals consent had been sought or appropriately dispensed with. Threshold decisions are timely and in line with the use of RHRT. This means children and families receive the right support at the right time allowing for risks to be reduced and for children and families to make progress. There is also evidence that social workers are looking beyond presenting issues for the referral to consider other risks and vulnerabilities with the use of direct work, which enables a holistic assessment of needs.

For a small number of children there has not always been consideration of the historical issues that families may have experienced; historical context needs to be recorded consistently. Work on impact chronologies is being completed to strengthen this area of practice. Rationales for 'step down' services are not always as clear as they could be this has been recognised and work is ongoing to strengthen this. Our family support teams demonstrate consistency and persistency in trying to engage with hard to reach families.



KPI 2: % of re-referrals to children's social care within 12 months

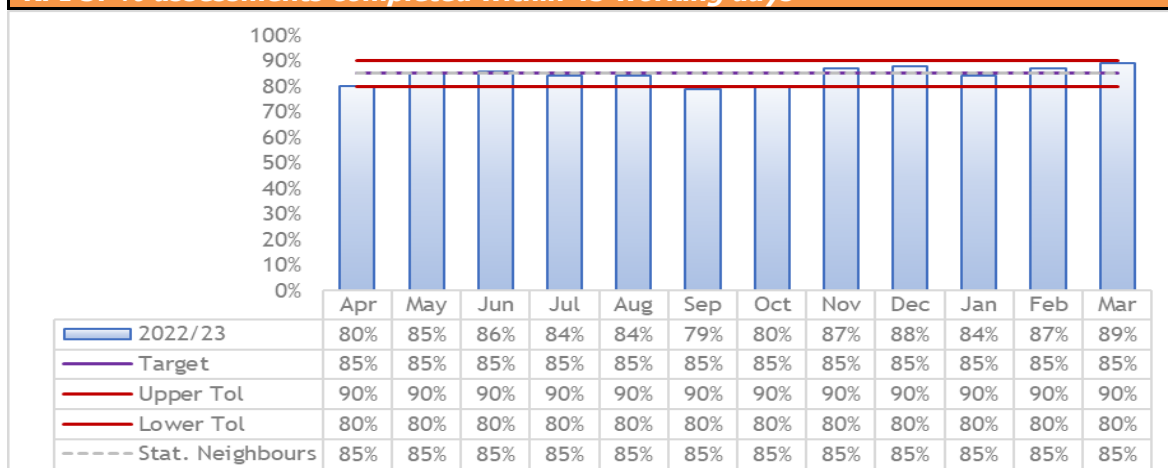


Good = Low/Decreasing	Target: 22%	Tolerance: 17-28%	Trend: Stable	National: 22% Statistical Neighbours: 21%
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Quarter 3 and 4 saw an increase in rate of referrals, however this brought us in line with regional and national averages and our practice remained well within tolerance for 11 months of the year, September noted a drop in our re-referral activity to 15%. It is better to have a low re-referral rate than high. Our performance throughout the year indicates that children and families are getting the right services and support to meet their needs at the first point of contact with us during the year.

We have a small number of children who are re-referred although this is within tolerance. We know through our audit activity that most children are referred for a subsequent time for different reasons. However, there are a small number of children who need our help again due to the same concerns. We are reinforcing the need for all agencies to be satisfied when closing and stepping down. The widening use of family group conferencing and ensuring well considered safety plans ensure that the family and network are equipped to support family when statutory services are no longer involved.

KPI 3: % assessments completed within 45 working days



Good = High/Increasing	Target: 85%	Tolerance: 80-90%	Trend: Improving	National: 85% Statistical Neighbours: 85%
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Performance with the target has been good all year, only dropping below tolerance by 1% in September. Q3 & 4 have seen practice improve consistently. We now have much better monitoring and data cleansing support within this area where overdue and all assessments about to exceed the 45-day threshold are flagged with managers and social workers. This is working well, and it is expected that performance will remain strong and continue to improve.

We know from auditing activity that most strategy discussions are attended by all key agencies and the vast majority are reaching the right decision within s47 enquiries. There is room for development when it comes to ensuring that all strategy discussions are attended by all relevant partners beyond the key partners in particular education. Information received from education in early decision making needs to be strengthened further. There is a recognition of this challenge which is affected in part by the increasing referrals at the front door and partners carrying out checks in the CASS team meaning that they are balancing checks and strategy discussions. A pre-strategy convening form has been designed as a checklist to ensure all partners have been contacted for strategy discussions and where there has been historical intervention from a partner with a family they have been invited as these partners may have valid contributions to make.

Overall, there is evidence of effective and timely decisions with the voice of the child evident within most records and their lived experiences are being understood and responded to. There is also evidence of effective partnership working during s47 enquiries and information sharing is taking place appropriately.

Communication during decision-making about police protection is improving. There are a small number of children who have been made subject to police protection where

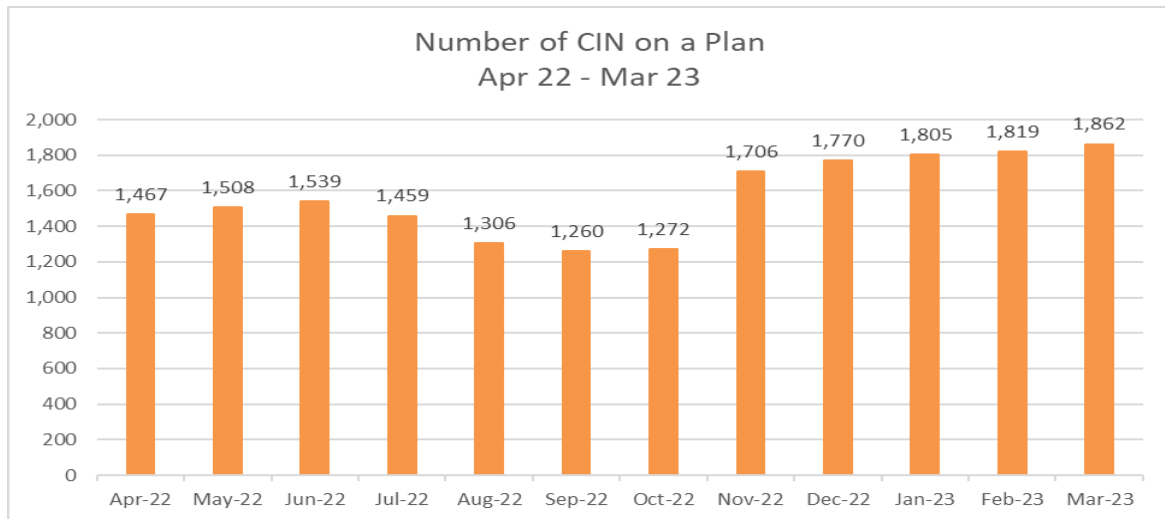
this was not deemed proportionate and could have been avoided. This could have been avoided by effective discussion and a common understanding of threshold between the police and Trust. The Trust and the police are working closely to ensure that where possible alternative care is provided to children when concerns are raised, and police protection is being considered. This highlights the continued strengthening relationship between the Trust and the Police.

Our practice evaluations tell us that the majority of assessments completed by practitioners demonstrate an application of professional curiosity and our performance tells us assessments are completed within timescales. Practitioners evidence this curiosity via assessments, home visits and hypothesis exploration in supervision. This is gradually increasing and improving over the course of the practice evaluation cycle. There remains a very small number of children where there has not been enough curiosity applied to assessments that would have benefitted from a wider exploration of risk and need either within or outside the family.

Analysis of quality has been variable over the cycles: there can be too much description and not enough analysis. The practice model provides a clear set of principles and guidance for the analysis, this training is being offered alongside the core learning offer and opportunities to reflect on analysis in group and individual supervision. Rights of children and culture are mostly explored in assessments. However, there is a lack of full exploration of equality and diversity for all children. As an organisation this has been recognised and as a result equality, diversity and inclusion learning and development opportunities are being provided for staff this includes sessions on culturally sensitive assessments, culturally sensitive direct work in addition to newly developed practice guidance for conducting culturally sensitive assessments. The majority of children following assessments, had evidenced next step plans, for the immediate and long-term future with risks reducing as a result.

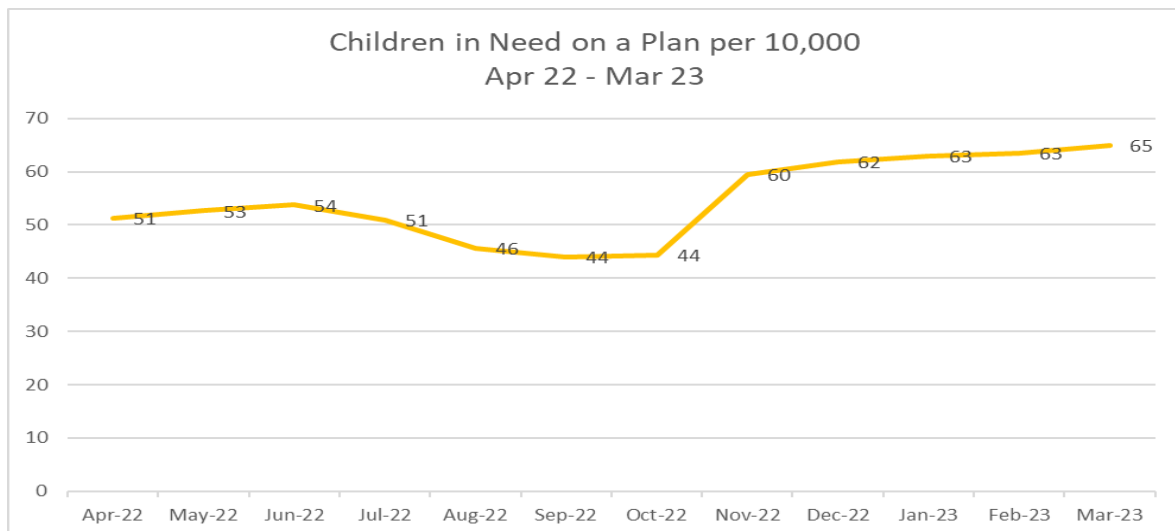
4.4 Children in need of help and protection

Number of CIN on plans snapshot as of month end



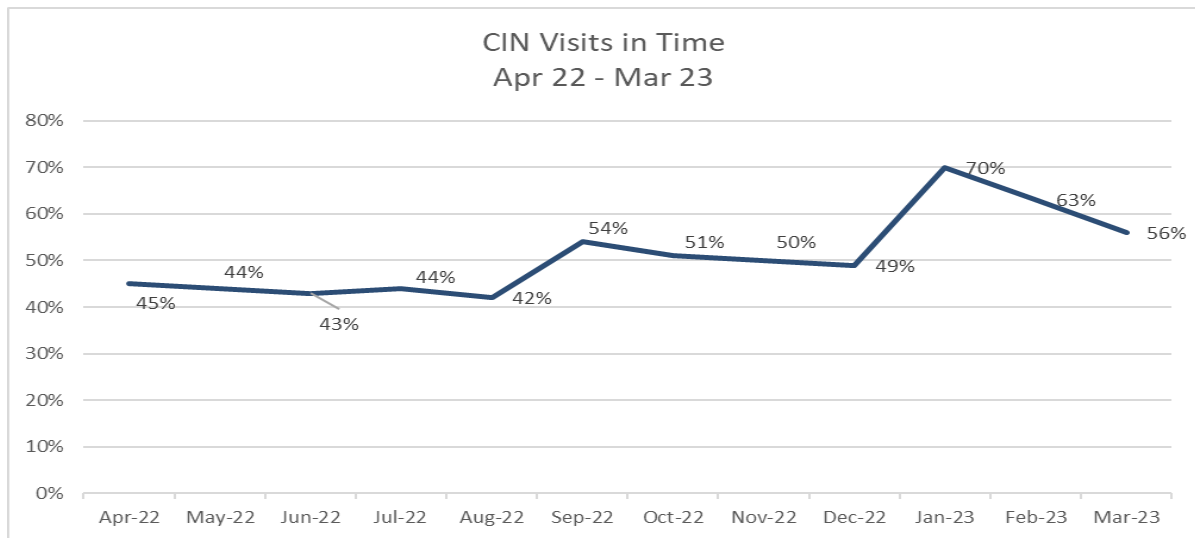
We have had a targeted approach to ensuring all CIN plans are initiated and completed within 20 working days of the CIN status being initiated. There has been a concerted effort to ensure all plans of this type are live within Eclipse which is why there is an uplift from November onwards when data cleansing occurred. This ensures we are able to monitor timeliness of reviews and plans.

Rate of CIN on a Plan per 10,000 of population



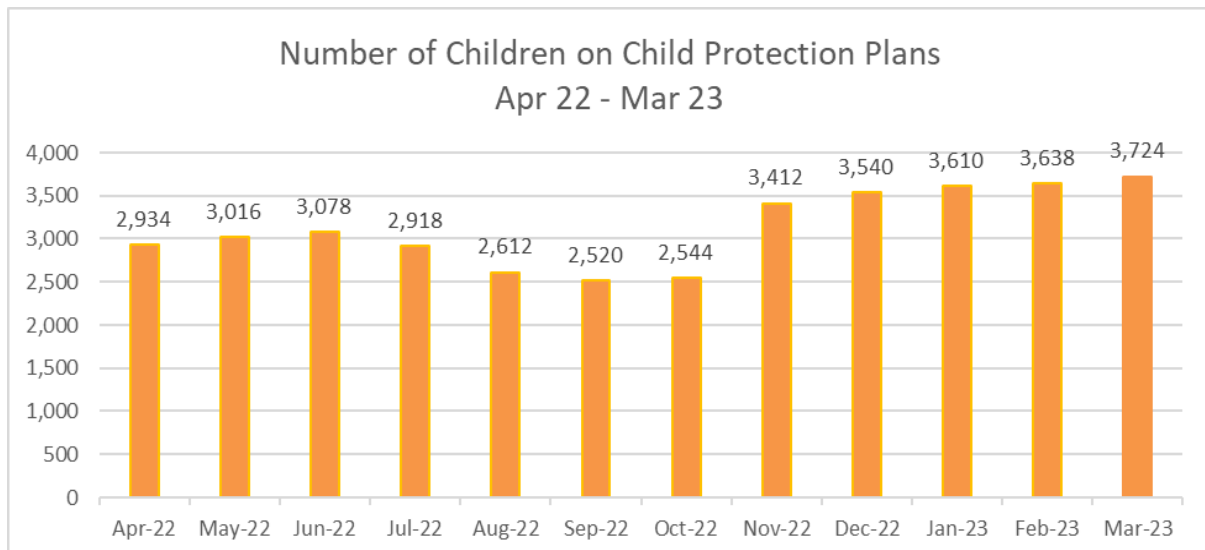
As a result of the cleansing mentioned above, we have seen an uplift in CIN on a plan per 10k.

Children in Need on a Plan Visits

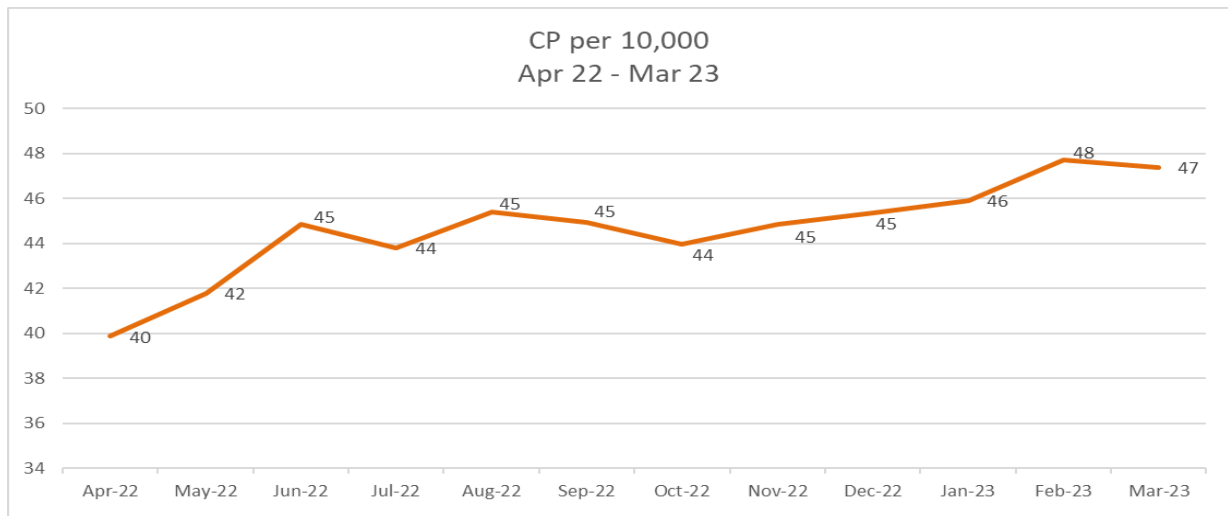


Reporting on visits to CIN on a plan is not statutory, however it is best practice within a Local Authority or Trust. We have recently started to report on visits within 20 working days for this cohort of children and as performance above shows there are improvements needed, however we have seen visiting compliance improve in the last quarter of 2022-23 which we intend to sustain and improve on.

Number of children with a Child Protection Plan - Snapshot as of month end



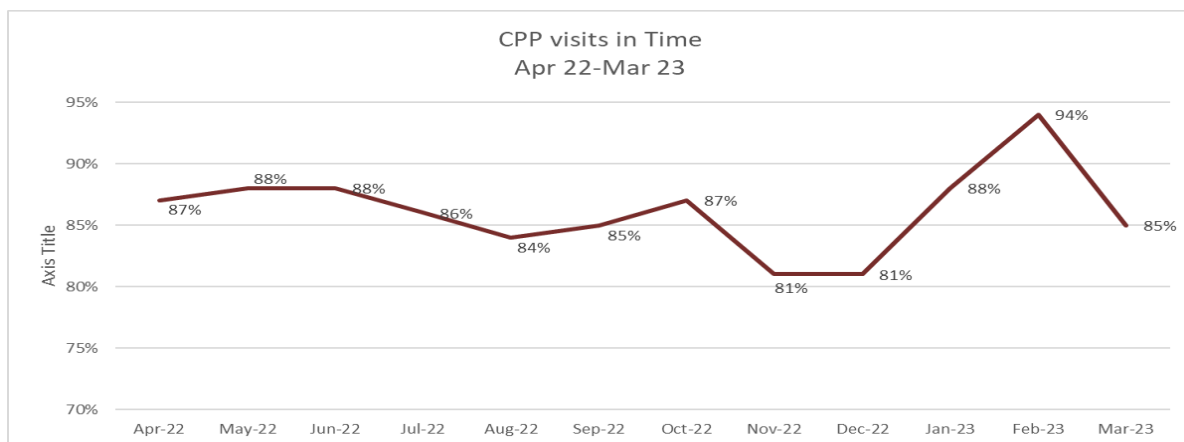
Rate of CP per 10,000 of population



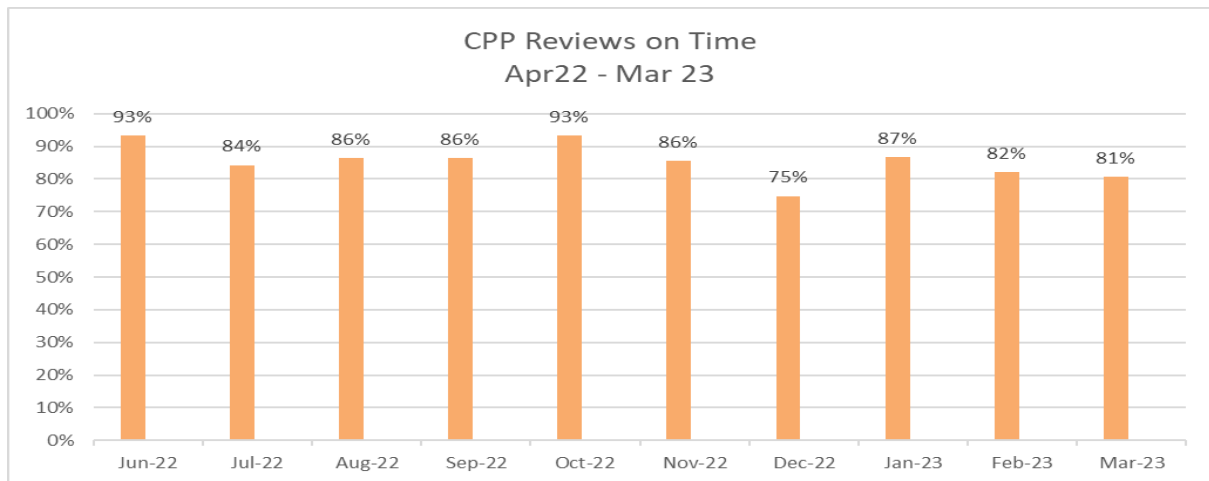
(Stat neighbours = 48 Regional average = 43 National average = 42)

Our number of children per 10,000 of the population is closely aligned to our statistical neighbours but higher than the regional or national average.

CP Visits

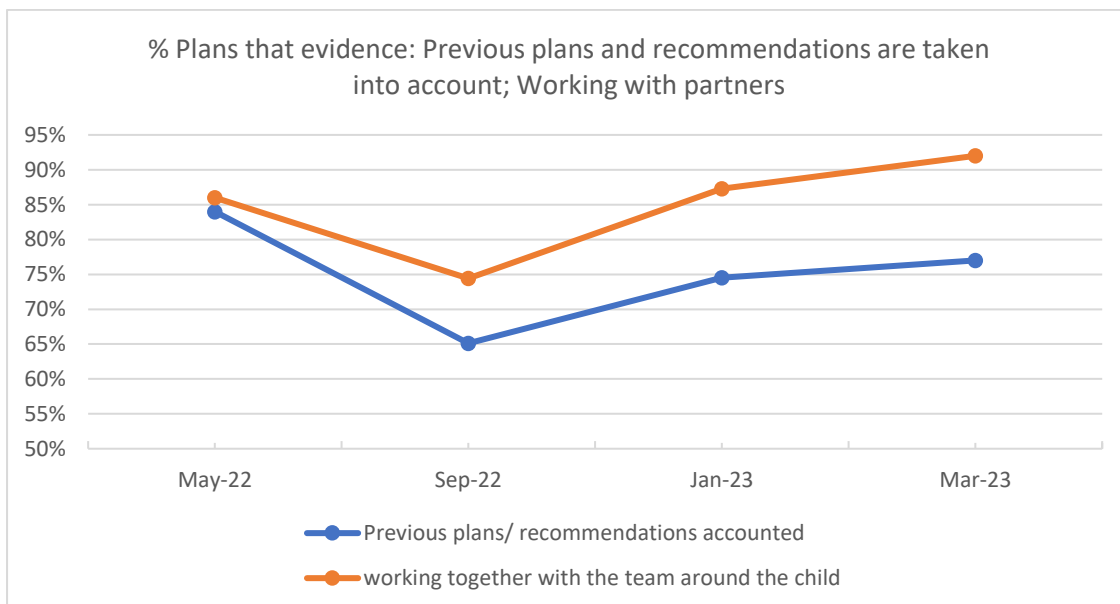


CP Reviews



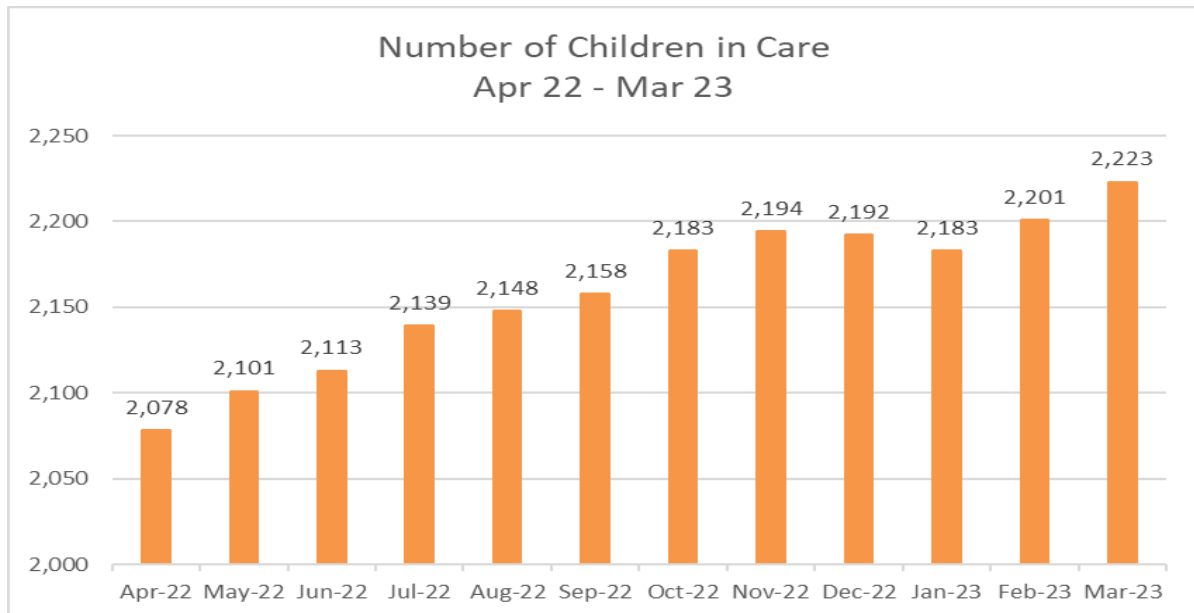
Visits to children in care and child protection reviews are within the tolerance levels for the Trust KPIs - this means that children are being seen and plans are being regularly reviewed. Social workers have remained consistent with their contact, with these most vulnerable of children.

Our practice evaluations and children and families feedback tell us plans are focused, address needs and risks and are regularly reviewed. There is scope for development in tracking plan progression in supervision, ensuring partners are effectively engaged and that there is consistency of plans being made available to partners, but there is evidence that we are seeing incremental improvements in this in the practice evaluations. Children's voices present in records of conference reviews; however, more can be done to ensure that children are engaged in this process. There is currently a project taking place to increase the number of children who access advocacy services during child protection and to increase the use of the feedback tool mind of my own.

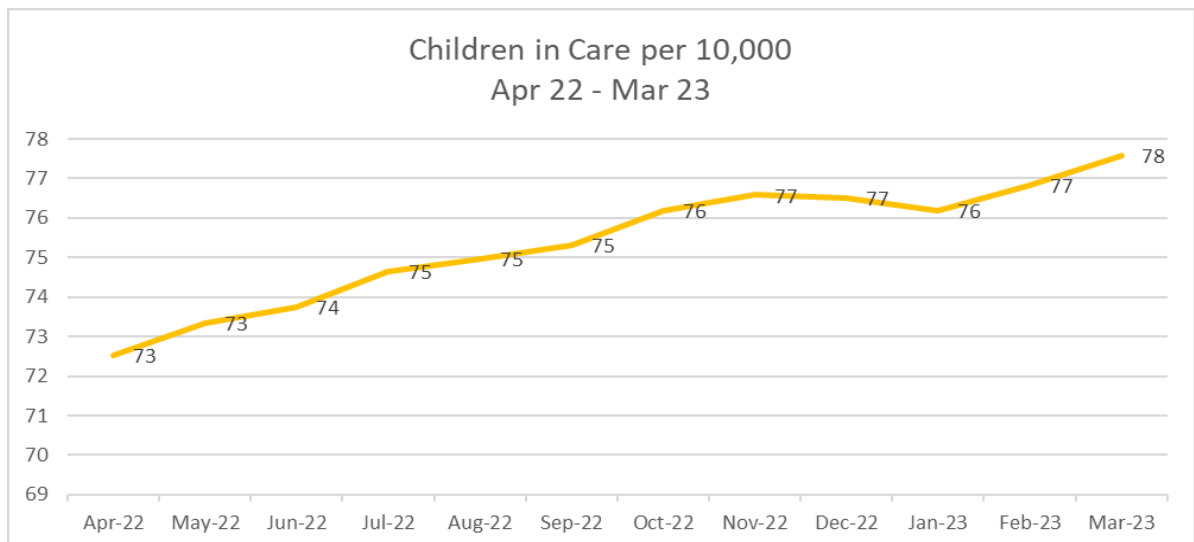


4.5 Children in care and care leavers

Number of children with a CIC Plan - Snapshot as of month end



Rate of CIC per 10,000 of population

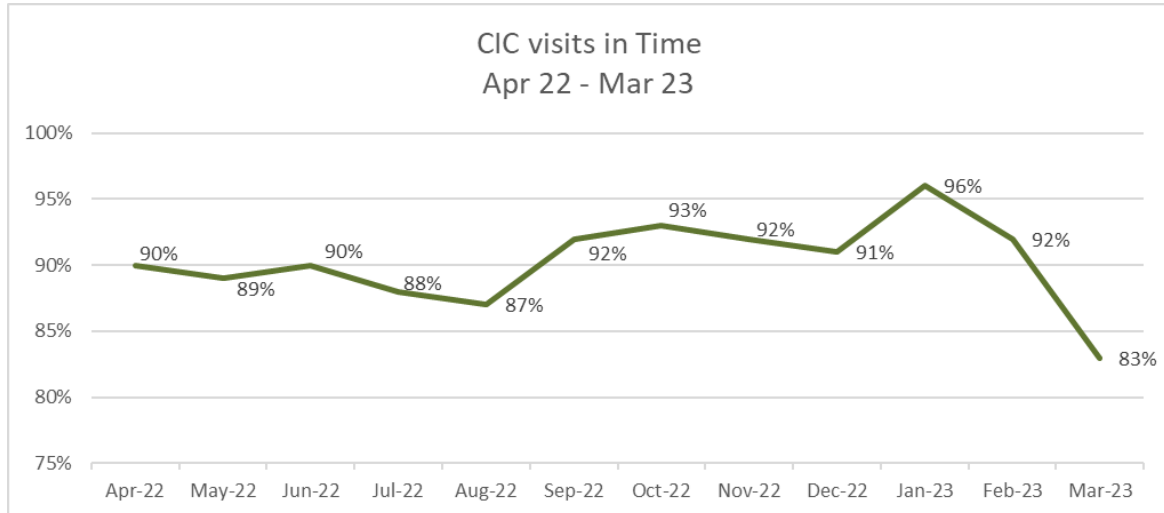


(Stat neighbours = 87 Regional average = 88 National average = 70)

We have lower numbers of children in care than our statistical or regional neighbours and we have higher numbers than the national average. Our auditing tells us that the right children come into care and nearly always do so at the right time. Families together plus, breaking the cycle and family group conferencing are being utilised to

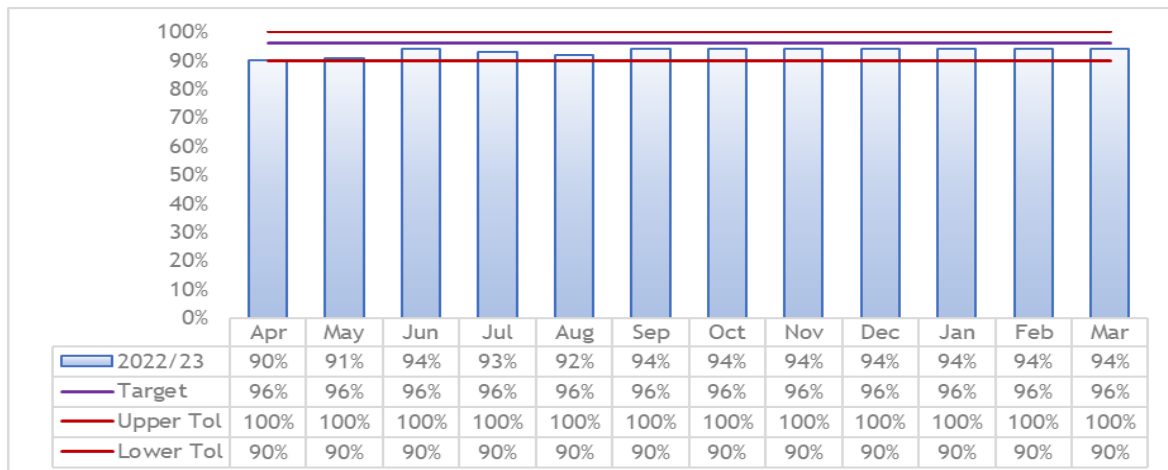
ensure that where children can return home they do so and for those families that are under pressure, support is provided to prevent children coming into care.

Visits to Children in Care



Statutory visiting timescales for children in care are 6 weekly, however there are exceptions, where appropriate for children in long term, stable placements to have longer visiting windows. Monitoring of activity on Eclipse shows us that although the majority of visits are taking place in agreed timescales Social Workers are not completing visit forms on the system and as such they remain in draft meaning that they are not picked up in reporting. Post our Ofsted inspection, CIC visit performance dropped as a result of delayed recording of visits due to a large number of staff taking time off. We are assured that children have been seen and that recordings of visits are now being entered on to the management information system. We are working towards automatic completion and closer of forms within 48 hours. This should see performance improve.

CIC Reviews



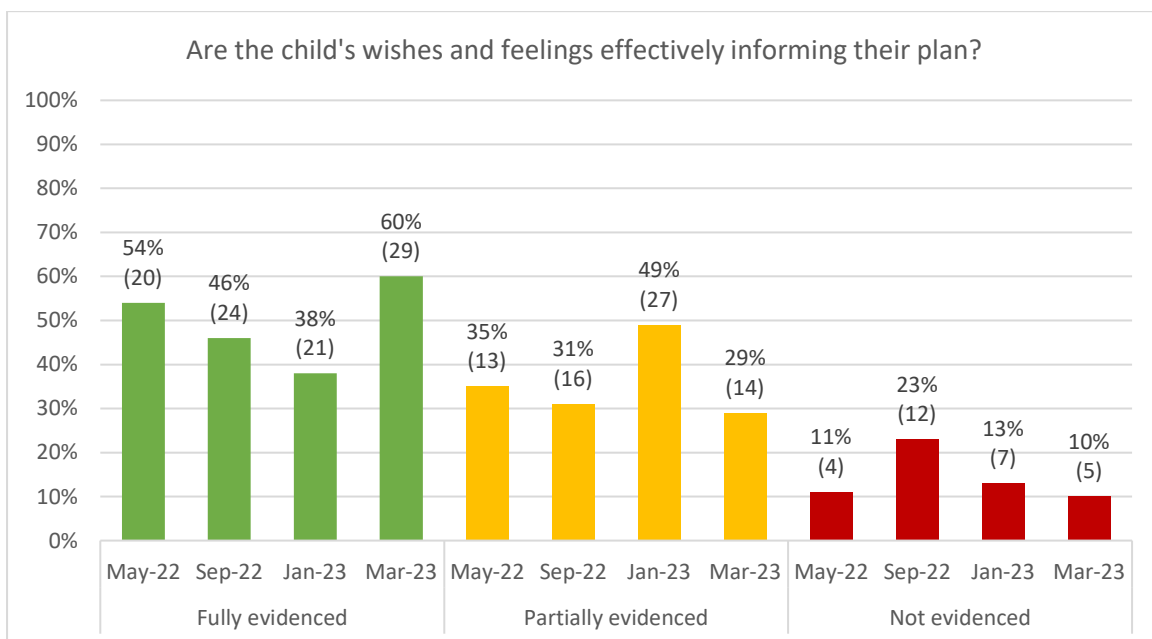
Good = High/Increasing

Target: 96%

Tolerance: 90-100%

Trend: **Stable**

Performance has been within tolerance all year, but we have seen improvements in Q3 & 4 where the service have consistently held 94% of reviews in timescale. System changes in Eclipse have made the process of completing reviews easier which has assisted in the increase in performance.



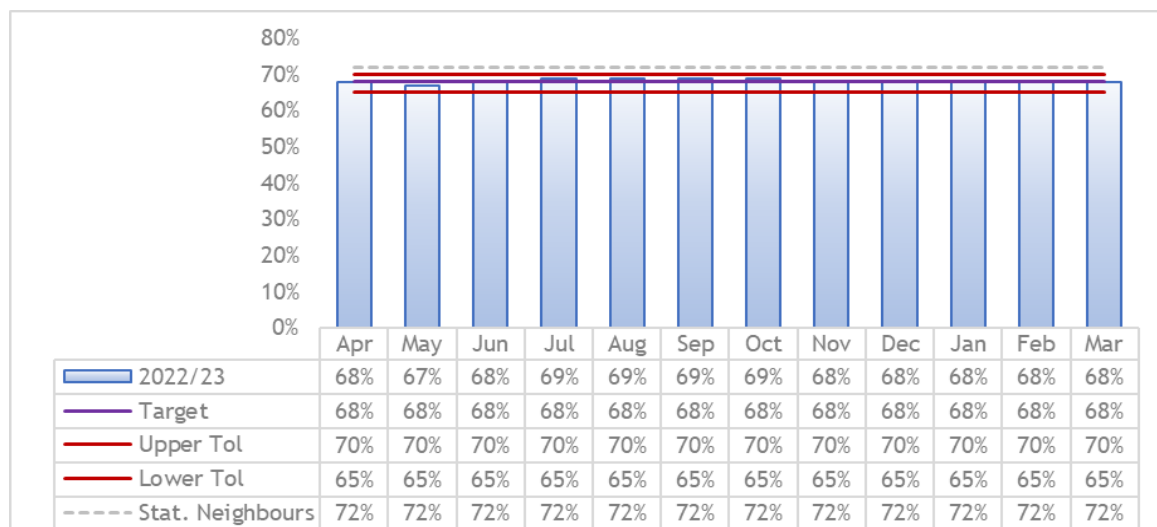
Visits to our children in care take place regularly and the feedback from our practice evaluations identifies that most children we work with have positive relationships with their social workers and they feel that their wishes and feelings have been considered in their plans.

The wishes and feelings of children are not always clearly illustrated in the plans that are written. Whilst verbally children say that their wishes and feelings are considered.

Staff within the Trust are receiving practice model training; during which the link between the child’s voice and the formation of plan is being explored to support practitioners in this area. There is ongoing work with staff to think about how this practice could be strengthened and as a result we are noting incremental improvement.

Placement stability

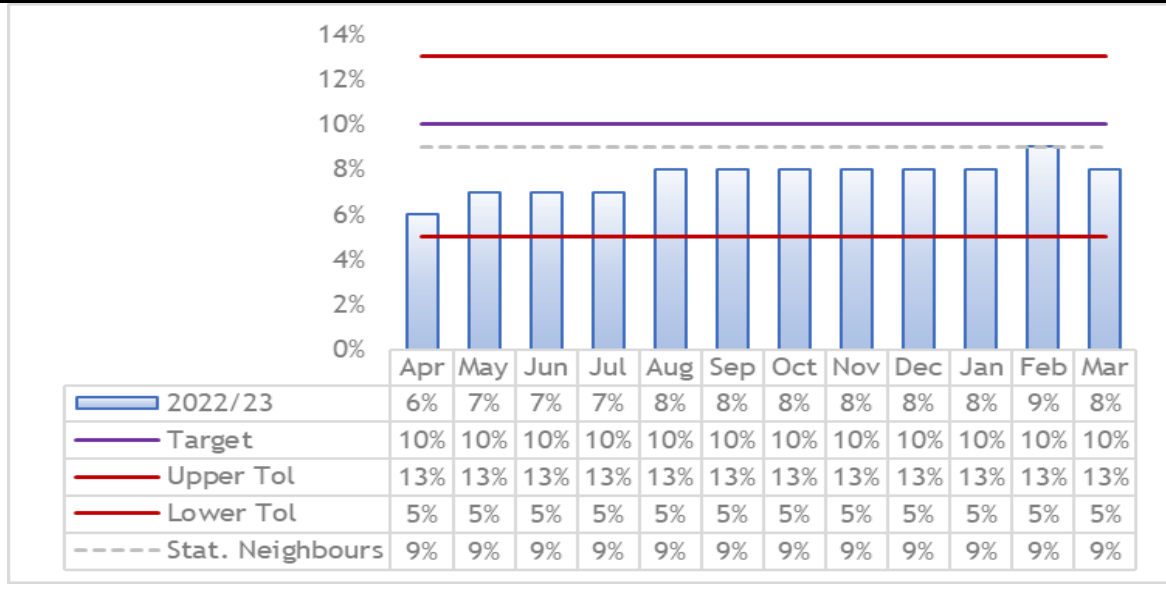
KPI 6: % of children (under 16 years) who have been looked after for 2.5 years or more, and in the same placement (or placed for adoption) continuously for 2 years or more



Good High/Increasing	=	Target: 68%	Tolerance: 65%- 70%	Trend Stable	National: 71% Statistical Neighbours: 72%
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Performance has been strong and above target for 11 months of the year, only dropping 1% below target in May 22. Good placement stability for children who have been in care for 2.5 years or more is the foundation for maximising life chances. With stable successful placements we see children achieve improved and sustained educational and health outcomes.

KPI7: % Children experiencing 3 or more moves in a year



Good = Low/Decreasing	Target: 10%	Tolerance: 5-13%	Trend: Stable	National: 10% Statistical Neighbours: 9%
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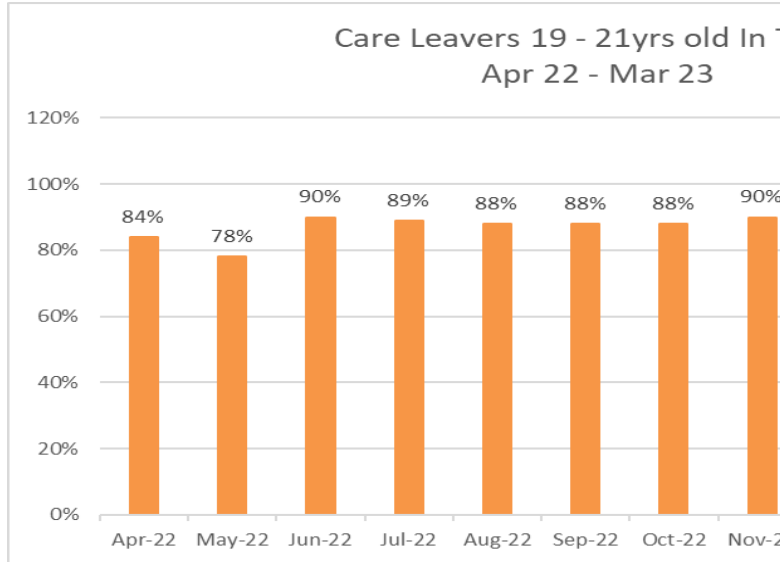
We are performing well and below target, which for this indicator is positive as it means that fewer children in care are having multiple placement moves within the year. Initial matching and achieving early permanence are key reducing placement breakdowns, and decreasing placement moves for individuals. Our performance is better than statistical neighbours consistently throughout the year.

We know from the data that our short-term placement stability is good with only 8% of children experiencing 3 or more moves in a year. For that small number of children who are experiencing repeated moves the early endings project is working to understand the challenges for this cohort and approaches needed to be taken to reduce this. Long-term matches are stable for most of our children with 68% (rolling month average as of March 2023) of children who have been looked after for 2.5 years or more living in their placement (or placed for adoption) continuously for 2 years or more. Our rolling monthly audits looking at children coming into our care tells us that the right children are coming into our care for a very small number of children this is not always at the right time. For those children where it was identified that they may not have come into our care at the right time deeper dive activity is taking place to understand why this may have happened to ensure that all children receive the right service at the right time.

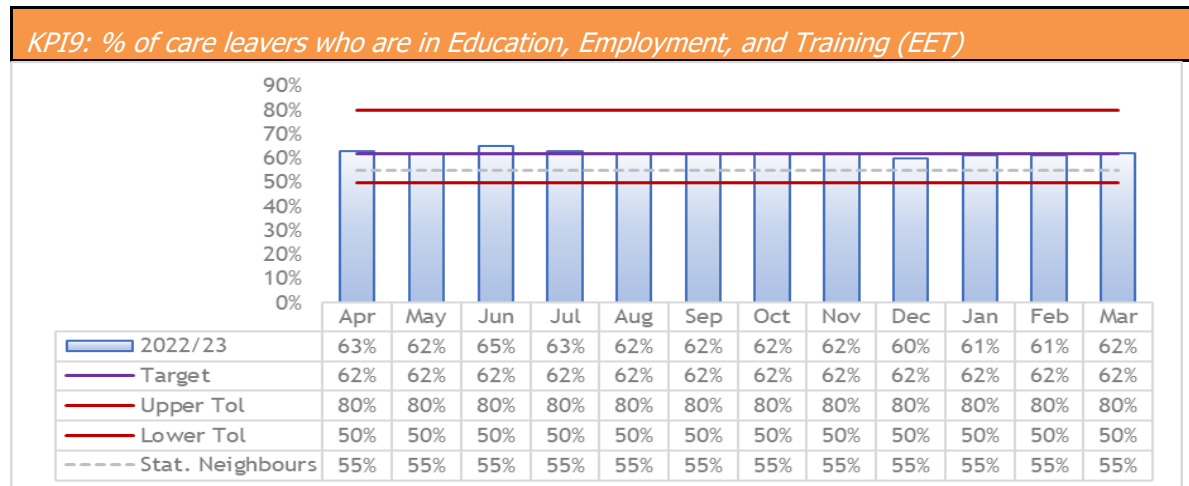
Practice evaluations tell us the majority of children are appropriately placed in accommodation and care that appropriately meets their needs. For children who have experienced early endings of long-term matches with carers, early ending meetings take place chaired by a lead IRO for this project. Learning from these meetings is shared across the Trust and has shaped a development plan in this area; this ensures

the needs of all our children are met and that fosters carers receive the right help and support.

Care Leavers Age 19-21 In Touch



YTD Percentage of care leavers who are in EET (19-21)

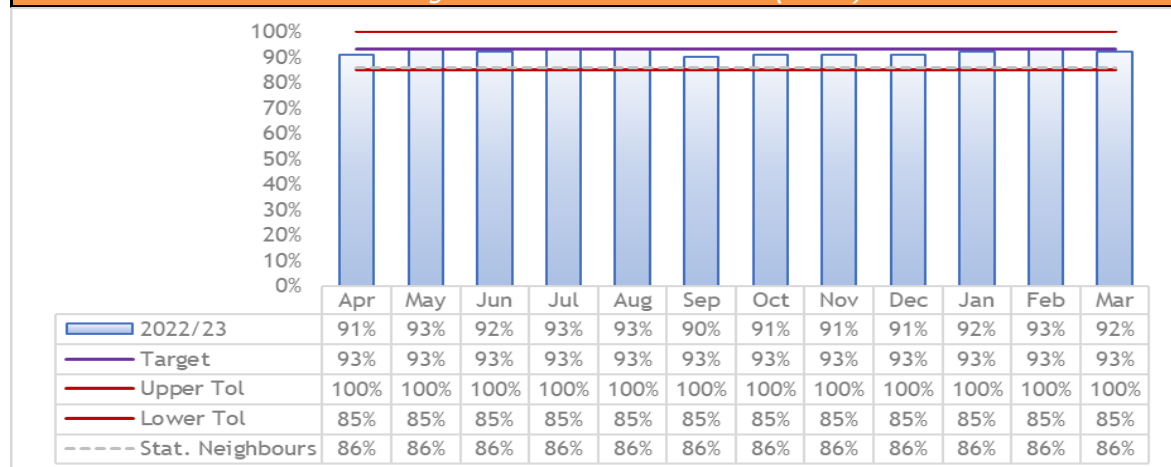


Good High/Increasing =	Target: 62%	Tolerance: 50% to 80%	Trend: Stable	National: 55% Statistical Neighbours: 55%
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Performance has consistently been on or above target all year apart from January and February 23 when it dropped by 1% below target but still well with tolerance. The Trust perform well above statistical neighbours, however there is still work to do as we aspire for excellence and the best outcomes for our care experienced young people.

YTD Percentage of care leavers who are living in suitable accommodation

KPI10: % of children who are living in suitable accommodation (19-21)



Good = High/Increasing	Target: 93%	Tolerance: 85-100%	Trend: Stable	National: 88% Statistical Neighbours: 86%
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The service has performed strongly all year and again well above statistical neighbours. There are a number of young people who are in custody and as such remain in unsuitable accommodation which the Trust have no influence in accommodation options.

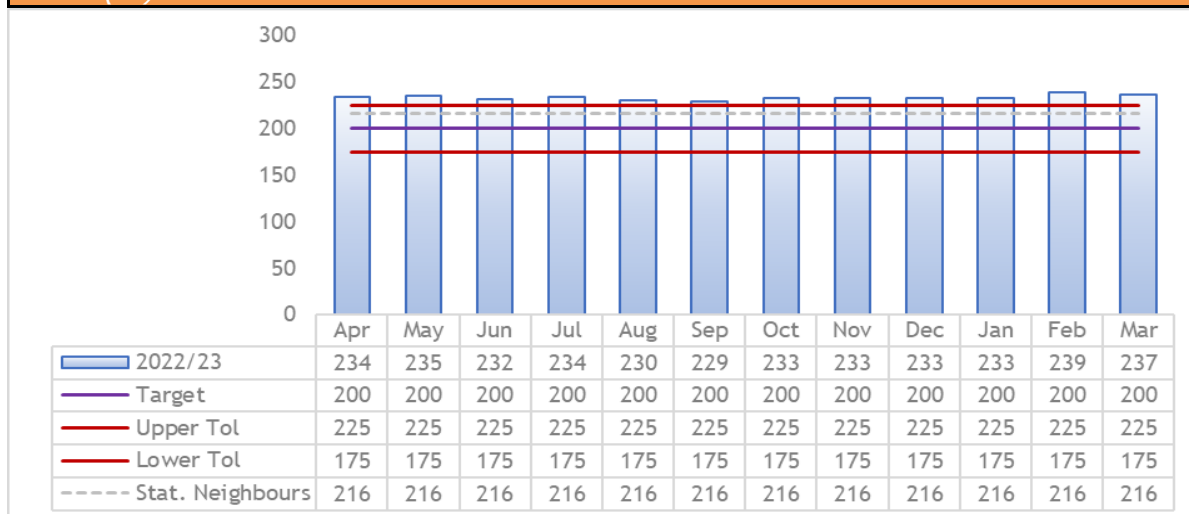
4.6 Adoption

Birmingham's 3-year average days between the Trust receiving court authority to place a child and deciding on a match, for children adopted, was 237 days for 2020-23 which is an increase of 5 days compared to the 2019-22 average.

46 out of 75 children (61%) adopted in 2022-23 can be defined as priority or 'hard to place' children (aged 5+, sibling group, BAME or disability) which is extremely positive in achieving permanence for this cohort of children; however, priority children tend to have longer waits for matches: an A2 average of 285 days compared to an average of 142 days for the 29 children with no 'hard to place' characteristics.

The rolling 12-month average for 2022-23 was 231 days for 75 children adopted compared to 279 days in 2021-22 for 74 children adopted; thus, demonstrating movement in the right direction. This is further evidenced when analysing the A2 average for the 84 children who were waiting in an adoptive placement as at 31st March 2023 – 217 days: 52 (62%) waited less than 7 months with an average of 93 days. 22 out of 32 who waited 7 or more months were placed with external adopters.

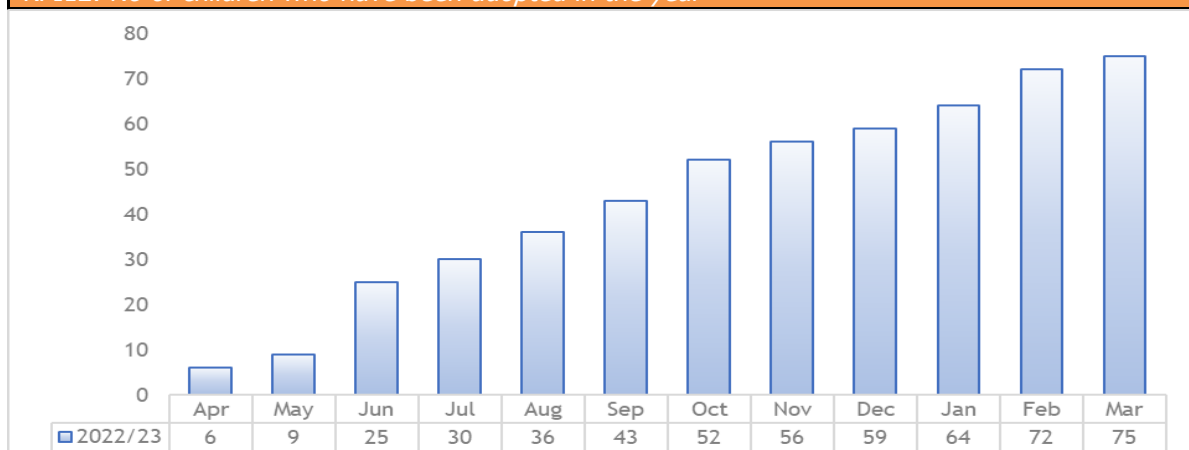
KPI11: Average time between the LA receiving court authority to place a child and deciding on a match (A2)



Good = Low/Decreasing	Target: 200 days	Tolerance: 175-225	Trend: Stable	National: 183 days Statistical neighbours: 216 days
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The Trust have been on target and within tolerance all year when an in-year average calculation is utilised. The Adoption Scorecard will be phased out this year as it is widely accepted that 3-year rolling averages are not indicative of in year performance or recent improvements in timeliness.

KPI12: No of children who have been adopted in the year

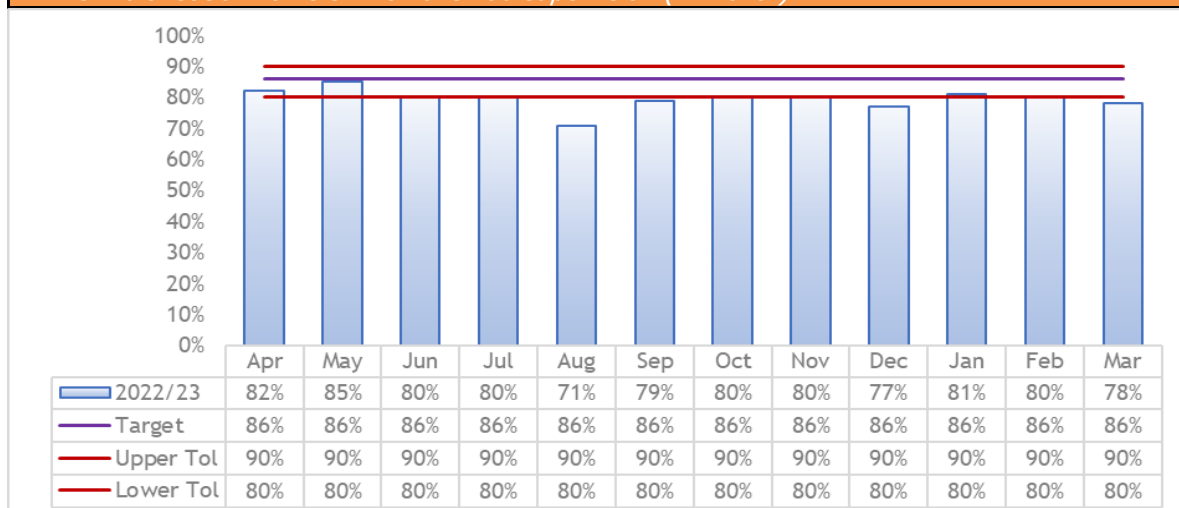


Good = High/Increasing	Target: 85	Trend: Increasing
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This has been another year of strong performance for the Trust with 75 children adopted. Delays in court dates has meant that we fell just short of the target. These delays have now eased and it is expected the number of children adopted within BCT in 23-24 will remain strong.

4.7 Management oversight and supervision

KPI15: % of social workers who have had supervision (in month)



Good = High/Increasing

Target: 86%

Tolerance: 80-90%

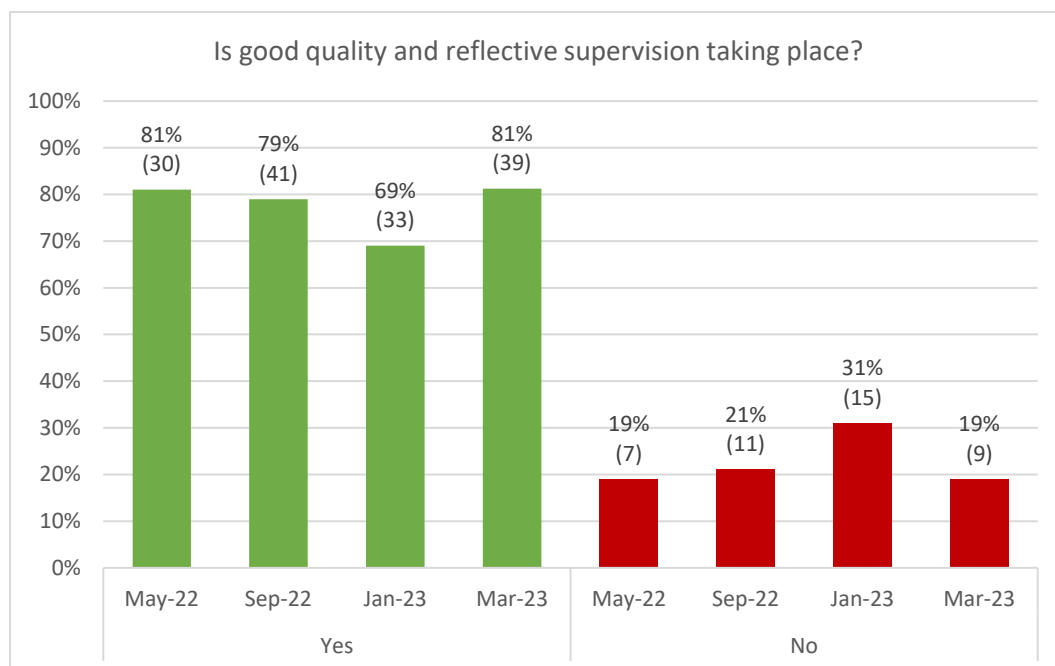
Trend: **Decreasing**

This has remained a challenging indicator throughout the year. The process for recording and reporting has not been the simplest. We have now streamlined the process to ensure Heads of Service and Assistant Directors have oversight via the new share point site.

% of social workers who have had supervision

Our target is 86% and our tolerance is 80-90%. We have been within our tolerance for the whole of the year. This means that social workers are receiving support, and a reflective space as an opportunity to discuss their professional development which ensures that they are able to provide a good service to children and families. There has been a slight dip in below tolerance in March and this is often lower due to year end for annual leave.

Is good quality and reflective supervision taking place?



Our Practice Evaluations also look at supervision, and we find that the majority of practitioners are receiving good quality and reflective supervision. As part of our approach to strengthening the offer around supervision and the recording of supervision all managers have been trained or are being trained on the practice supervisors development programme. Supervision guidance documents and templates have been updated in consultation with staff and the equalities, diversity and inclusion group.

5. Next steps

As part our ongoing development in the practice hub we are evaluating of the processes for auditing and practice evaluation. We are refining and shaping our mechanisms for capturing the volume of quality assurance activity across the Trust. There is a particular attention being paid to learning from audit and practice evaluation being evidenced on individual children’s recordings, ensuring that the loop is closed following any indicated actions. There will be a relaunched set of principles for quality assurance provided to all levels of staff in the organisation outlining their role in quality assurance, ‘quality assurance everybody’s business’, in addition to refresher sessions on what ‘good’ looks like in quality assurance and audit.

The practice hub continues to support individual services to ensure auditing activity is as robust as it can be, ensuring impact for the child is captured and refining the way in which this information is collected. We are using more refined ways of capturing information via the most advanced technology available to us. We are working with

the partnership to ensure that multi-agency learning is embedded, and we are also completing quality assurance activity in conjunction with partner agencies.

We will continue to strengthen our working relationship with the customer relations team to ensure that learning from compliments and complaints locally is actively disseminated along with lessons learnt from other authorities following ombudsman findings. Understanding ombudsman decisions within other authorities allows us to pre-empt any potential challenges in practice and ensure that we proactively make any changes that will have a positive impact on children and families.

There will be further structural changes within the practice hub to ensure that we maximise the skills of the team and bring in extra capacity to support the ongoing development of the service as this responds to the feedback from services.

To ensure good quality practice, we continue to refine our learning and development offer in line with what we see during our quality assurance processes. There is a continued focus on embedding the practice model, to enhance our approach to relationship-based practice. A significant piece of this work focuses on providing holistic learning and support to our ASYEs so that as they come into practice, so they clearly understand what good practice looks like. All ASYEs and individuals on the accredited child practitioner program take part in a practice evaluation to provide a reflective learning space and benchmark what good looks like. This is part of our ongoing commitment to growing social workers in our organisation which is inline with pillar of stable homes built on love: a valued, supported and highly skilled social worker for every child who needs one.

6. Appendices

6.1 Practice Evaluations



May 2022 Practice
Evaluation report



September 2022
Practice Evaluation re



January 2023
Practice Evaluation re

6.2 Quarterly Quality Assurance Reports



Quarter%201%20QA
%20Report%20April%



QA%20Quarterly%20
Report%20October%



QA Quarterly Report
July - Sept 2021.docx

6.3 Overview of Survey Activity



Survey overview
2022-23