



People Overview and Scrutiny Committee

26th February 2025

Item

Public



Performance Monitoring Report Quarter 3

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Cabinet Member (Portfolio Holder):	Cecilia Motley, Portfolio Holder Adult Social Care and Public Health; Kirstie Hurst-Knight, Portfolio Holder Children's Service		

1. Synopsis

- 1.1 This report provides an update to Scrutiny committee members on key areas of performance across Adult Social Care, Children's Social Care and Education services under the People's Directorate including the directorates work on prevention and early intervention.

2. Executive Summary

- 2.1 The report will show data on key performance areas across the People's Directorate, highlighting the areas of focus for the directorate.

3. Recommendations

- 3.1 The committee considers the report and identifies specific areas of focus that it may want to explore in more detail to be included in their work programme.

Report

4. Risk Assessment and Opportunities Appraisal

4.1 Risk Table

<i>Risk</i>	<i>Mitigation</i>
Demand across social care	Demand in Adult Social Care and complexity. Focus remains on prevention, early intervention and quality of care.
Capacity meeting demand to support people at home	Increase use of Reablement and technology to support people to remain at home.
Increase in demand across social care	Continued focus on prevention and early intervention
Capacity meeting demand to support people at home	Increase use of technology to support people to remain at home and be as independent as they can; annual fee reviews to support recruitment and retention.
Increased demand for EHC Needs Assessment leading to increases in the numbers of EHC plans, requests for specialist provision and delays to issuing new and amended EHC plans/identifying suitable provision.	<p>Review completed by the SEND and AP Partnership Board in April 2024 with clear action plans identified to recover EHCP timeliness (decisions within 20 weeks) and recover Annual Review timeliness (review every 12months). Annual Review Recovery Team (ARRT) commenced work mid-December 2024 the progress of the team are being reported weekly.</p> <p>Progress in delivering the action plans is reported to the SEND and AP Partnership Board every meeting, along with waiting time information for all services.</p> <p>Expansion of specialist provision has already taken place in Shropshire (30%/c.150 pupil increase in special school places since Sept 22).</p> <p>Expansion of SEND Hub provision is also underway since April 2024. An additional 48 Hub places were created by September 24 in Hubs attached to mainstream schools. This programme will continue at pace during the 24/25 academic year onwards.</p> <p>Review of top-up funding levels for 25/26 onwards is also underway to promote inclusive mainstream practice in all state-funded schools and academies, ensure sufficient resources are available and</p>

	<p>encourage movement away from placement in high cost independent special school provision.</p> <p>Refocussing of the Early Years Early Intervention Grant (EIG) and Graduated Support Pathway (GSP) to promote a strong inclusive mainstream approach to identifying and meeting the SEND of CYP. Changes to the process for requesting and agreeing funding was shared with Schools Forum in January 2025.</p>
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5. Financial Implications

5.1 Shropshire Council is currently managing an unprecedented financial position as budgeted for with the Medium Term Financial Strategy approved by Council on 29 February 2024 and detailed in our monitoring position presented to Cabinet on a monthly basis. This demonstrates that significant management action is required over the remainder of the financial year to ensure the Council's financial survival. While all Cabinet Reports provide the financial implications of decisions being taken, this may change as officers review the overall financial situation and make decisions aligned to financial survivability. Where non-essential spend is identified within the Council, this will be reduced. This may involve

- scaling down initiatives,
- changing the scope,
- delaying implementation, or
- extending delivery timescales.

5.2 Dedicated Schools Grant (DSG) funding implications

The review of education top up levels for 25/26 will have a financial impact on the Dedicated Schools Grant (DSG) High Needs Block, as resources will need to increasingly be focussed towards state-funded education settings to promote inclusive mainstream practice and strong state-funded SEND Hub and special school provision. A 4-5 year plan is in development to deliver a shift in spending on high cost independent special schools to greater numbers of children and young people being successfully educated in mainstream, mainstream with Hub or where necessary, state-funded special school provision. The principles of the approach were shared with Schools Forum in January 2025 for discussion, including recognising that we are successfully slowing the number of children and young people placed in high cost independent special school provision as confidence in the state-funded special school provision in Shropshire continues to increase. The most recent example of this is Severndale Special School being judged as 'good' by Ofsted in all areas in November 2024. This plan is a key strategy to bring the DSG back into a balanced position over the next 4-5 years commencing in April 25/26. In 2024/25, High Needs Block pressure is driving a forecast in-year overspend of £9.033m. Overall, the in-year DSG deficit across all 4 blocks of the DSG is forecast to be £9.174m which will result in a cumulative DSG deficit of £11.479m as at the end of the 2024-25 financial year.

6. Climate Change Appraisal

- 6.1 The People's directorate is working to support people within their communities to reduce the need to travel and therefore reduce carbon emissions.
- 6.2 Climate consideration is embedded in all commissioning reviews.

7. Background

Adult Social Care

Deprivation of Liberty Safeguards (DoLS) & Safeguarding team

- 7.1 The Dols and Safeguarding teams have merged under one management structure. The functions of the team have their distinctions but now offer streamlining opportunities and mixed skillsets within this area.
- 7.2 We have maintained a zero wait list in safeguarding. Due to local and national trends identifying domestic abuse as the highest abuse concern, the service is undergoing a qualitative and quantitative review of concerns raised with this abuse type. As part of this work the safeguarding team are monitoring all referrals received that have a domestic abuse type, senior staff review the approach and appropriateness of actions taken and correlate this with the persons desired outcomes in line with Making safeguarding personal. Findings will be shared across Adult Social Care and wider partnerships.
- 7.3 In DoLS we have addressed the backlog of 2022 DoLS applications. Work is underway to for the completion of 2023 and 2024 applications. The team has a robust process in place to ensure that red rag rated cases are considered by regular contact, this includes work with wider social work teams who will be reviewing support to individuals and escalate any DoLS specific issues with the team. A priority system is in place where an urgent assessment is required. The team continues to receive a high number of applications each month which impacts on the waiting list in this area.

No. DoLS referrals (Form1) by ADASS RAG system

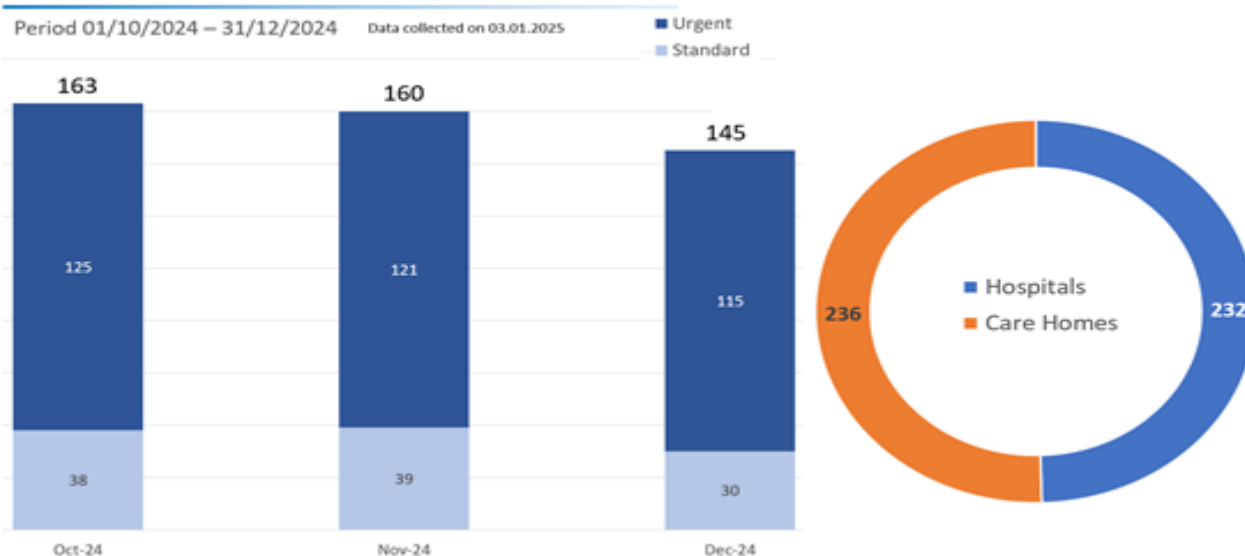
Period 2023 - Current (03.01.2025 09:00) Data collected on 03.01.2025

	Red	Amber	Green	Total number
2023	131	34	90	255
2024	392	76	193	661
2025	9	0	1	10
Total	532	110	284	926

Urgent / Standard Applications Received

Period 01/10/2024 – 31/12/2024

Data collected on 03.01.2025



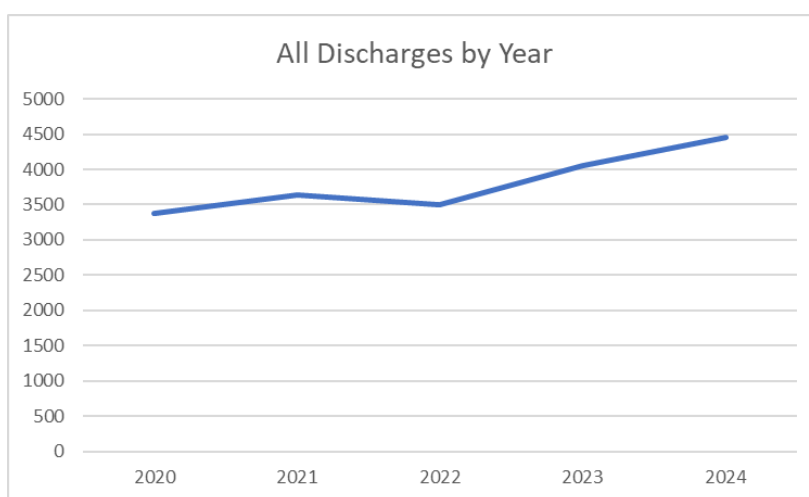
Occupational Therapy Service (OT)

- 7.4 We are pleased to report a 20% decrease from August 2024 in the waiting list for the OT service. Contacts have been reduced due to a change in the initial assessment stages.
- 7.5 The OT service have reduced the waiting list by considering alternative ways of working including adopting a whole service approach, centralised triage process coordinated by a senior OT. The team has also been able to recruit to vacancies (2 OT and 1 senior OT) in the last quarter.

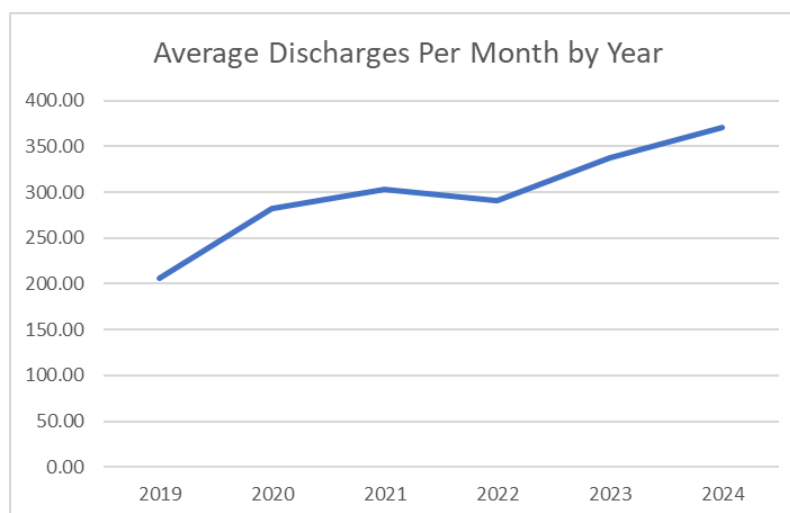
- 7.6 At the point of transfer (August 24) the OT service had 1048 people waiting for assessment compared to 800 people waiting on 22nd January 2025. The reduction in the waiting list represents good performance considering the service received 334 new requests for support in the last quarter.

Hospital Discharge

- 7.7 Shropshire Council Continues to deliver improved discharge performance year on year, we have increased the number of people we have supported through complex discharge in 2023 by 16% when compared to 2022, using the same comparison, we increased by 28% in 2024:

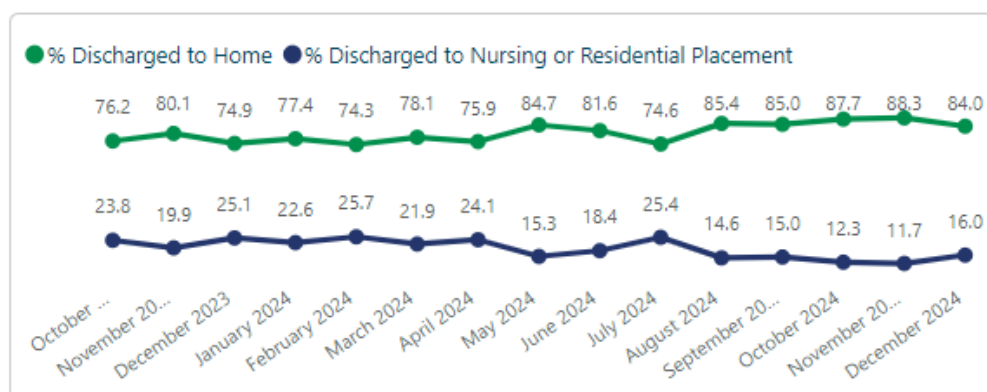


- 7.8 This sustained position of growth has been delivered by significantly increasing the average discharges per month:



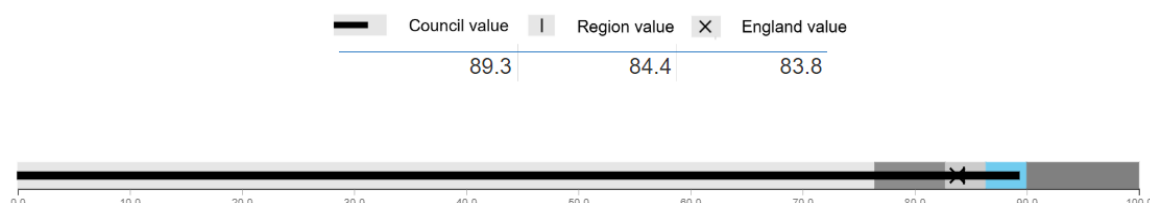
- 7.9 This winter has been challenging, largely due to the high numbers of Flu and Norovirus which has created national pressures for numerous systems.

7.10 The work we have completed with the new Care Transfer Hub to improve the outcomes for people being discharged from SaTH has started to show sustainable trends now, more people are being supported to return home:

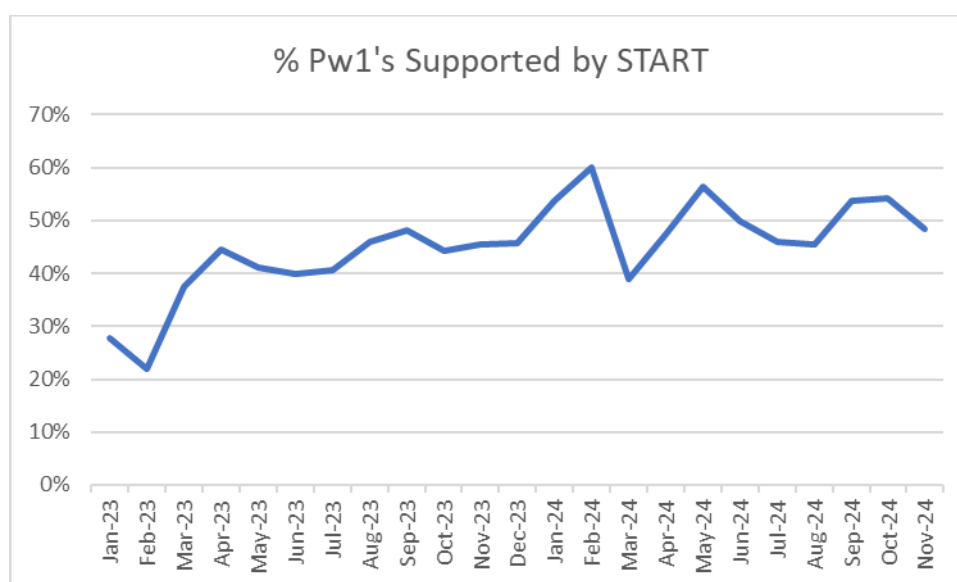


7.11 In terms of numbers, in the final quarter of 2024, we used 118 less Pathway 3 beds when compared to 2023.

7.12 Shropshire Council is significantly over the national and regional performance in respect of people being supported home and remaining home 91 days after hospital discharge:



7.13 A significant reason for this level of performance is the increased numbers of people being supported through START reablement service. Not only is START supporting more people, but also supporting more of the demand for Pathway 1 from all hospitals:

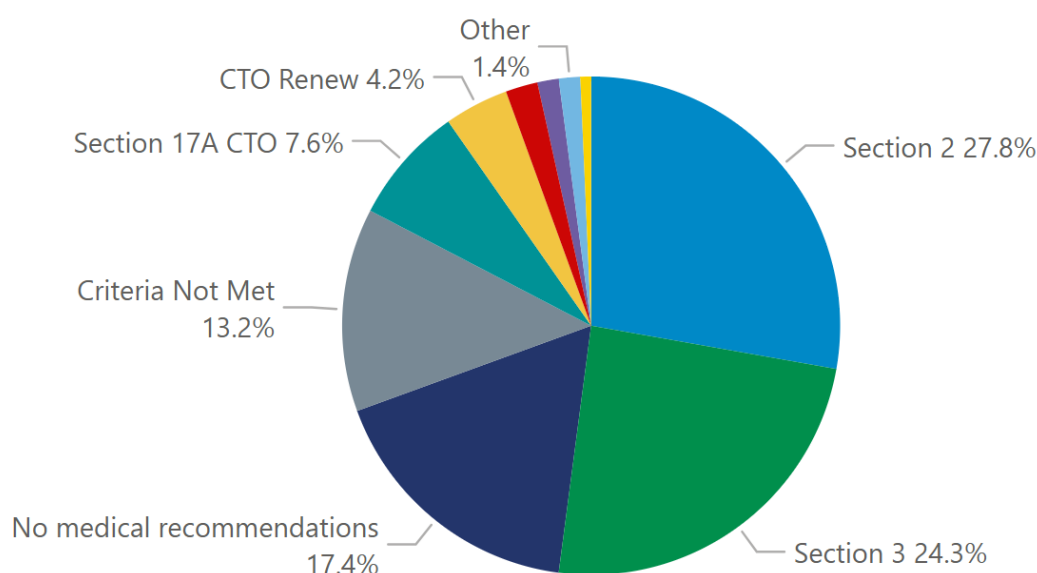


7.14 Work is ongoing to create a clear suite of reporting outcomes to demonstrate what START achieves at a more granular level. This includes a redesign of Liquid Logic to create new workflow which will have clear data collection points.

Mental Health

7.15 We have maintained a zero wait list in our Mental Health team. During this reporting period we have introduced a 'Let's Talk Mental Health' hub which provides opportunity for an earlier conversation providing advice, information and signposting but also to ensure those requiring assessment do so at the earliest point.

7.16 Performance within the AMHP team for section 13 work continues to be strong with a clear emphasis on least restrictive outcomes. Of 894 referrals received, 658 were resolved through working proactively with people and partners. 236 referrals progressed to a Mental Health Act assessment (MHA). The outcomes from the Mental Health Act assessment are shown for the reporting period November 2024-Jan 2025:

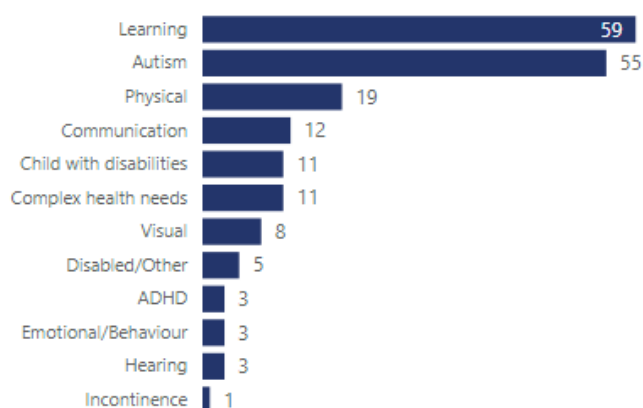


Preparation for Adulthood and Learning Disability

7.17 We last reported to the Overview committee members previously a zero wait list for all young people over the age of 17.5. We have now reduced this further by six months in the reporting period. All young people referred to us from the age of 17 years old have been allocated a named worker; an improvement by six months on the age of involvement.

7.18 We continue to see the trend of presenting needs of young people transitioning from the Children with Disability Team being learning disability and autism.

Children with Disabilities



Children Transition to Adult

- 7.19 We have further improved the referral process from children's services, we have regular meetings to review all the known children and discuss the optimum time for referral to the adult team.
- 7.20 We have established Learning Disability Lets Talk hubs in the last reporting period and are developing 'Early Help' hubs for young people and carers. This new model has ensured that we do not have a wait for new people contacting the service and is colocated with the family hub.
- 7.21 Work is in progress to build the offer within the hubs, this will include the voluntary and community sector and a strong focus on Technology linked to life skills and the four PfA outcomes of:
- employment/education,
 - good health,
 - independent living and
 - friends, family, and community
- 7.22 We are seeing improvement in assessment outcomes across PfA and Learning Disability services, which have led to 180 individuals receiving a direct payment and 103 being supported to live independently in the community.

Community Social Work

Contacts:

- 7.23 Contacts into the service continue to show 74% progressing through to a referral to a Social Work team. 35% are booked into Let's Talk Local hub appointment which are offered face to face, virtually or by telephone, with 20% ending at the conversation stage. Our hub offer has increased across the county with 2800 people seen in a hub over the last 12 months. Signposting to external agencies has increased to over 21% which is a much-improved position compared to last year, we believe this is seeing

people with lower-level needs – who would have been rag rated Green directed away rather than bought into the teams and sitting on waiting lists. The work taking place across community and family hubs will help to get advice and support to residents earlier with a hope this will reduce demand coming through to Adult Social Care.

Community & Family hubs:

- 7.24 Locality teams are embedded in neighbourhood focussed intervention, joining up with public health, children's services and primary care services to provide an integrated approach to delivering services closer to people's home, in local communities, working across health, care and the voluntary and community sector. Local hubs provide face to face assistance and support people to help themselves through digital and other community offers. Hubs are all age providing a single access point 'a front door' to universal services for families. By embedding this approach we aim to monitor demand coming into adult social care and evaluate impact.
- 7.25 There are currently 5 hubs across Shropshire delivering services to the community, the next phase of the project is to develop hub spokes in the other areas of the county.

Community & Family Hub Benefits

Customer Non- financial benefits	<ul style="list-style-type: none"> • Community & Family Hubs enables easier access to help and support for residents in Shropshire • Adults, Young People and Children have an improved customer experience by accessing support at a lower tier of support, therefore not reaching crisis point. • Increased support in the community available for residents of Shropshire to access • Improved health outcomes for babies, children, young people and adults • Customer only telling their story once and accessing the correct support, at the correct time.
Organisational Non- financial benefits	<ul style="list-style-type: none"> • Reduces the demand on children and adults social care, by providing earlier support to those that need it • Reduces pressure to the wider system –NHS services and other community services • Increased efficiency – improved connectivity of services, increased staffing efficiencies and reduction in duplication of work • Improves intelligence – a better understanding of family, understanding and community needs • Improve reputation • Increase staff satisfaction and grow talent • Enables and delivers strategy

Reviews

- 7.26 Performance across reviews at the end of Q3 were at 66% across ASC with the target for the year being 75%. Outcomes across reviews are showing increased evidence of promoting independence using technology and the voluntary sector which is evidenced in higher referrals to the TEC project and signposting to voluntary services. So far from reviews 182 individuals have been set up with TEC which has enabled us to reduce care hours thus releasing capacity back into the care market.

Supported Accommodation Strategic Planning

- 7.27 We want to ensure every person has the right to lead their own life and to determine where, how, and with whom they live, and who provides them with support. Shropshire supported living schemes allow vulnerable people to maintain their dignity and be part of a community while managing housing tenancies. Shropshire benchmarks positively compared to other local authorities in supporting people to remain within their communities, it is paramount accommodation is sustainable, delivers on quality and is cost effective.

7.28 Joint work with strategic and operational colleagues within housing is a priority, and we are working together jointly to improve many areas. Consultation last year informed the new Independent Living and Supported Accommodation Strategy to provide clarity on the focus for joint working as we move forwards - [Appendix I Draft Independent Living and Specialist Accommodation Strategy.pdf \(shropshire.gov.uk\)](#)

7.29 Further to this work, and to inform a more granular level of detail for adult social care supported accommodation requirements, a Strategic Needs Assessment has been commissioned working with industry experts the Housing Learning Innovation Network (LIN). The first draft of this Needs Assessment is under review. The scope is wider than learning disabilities and autism and will make recommendations for mental health, care leavers, and key worker housing.

New Supported Living Accommodation

7.30 The supported living model will be reviewed in line with the outcomes of the Housing LIN work.

7.31 There are currently over 200 properties in use as Supported Living across the county, with the largest proportion being in Shrewsbury. There was an increase of approx. 10% between 2019 and 2023. Over 270 people are housed across the 200 plus supported living properties. More recently we have seen some Residential providers change their service to a supported Living model.

7.32 Shropshire's Supported Living offer is set to grow further next year with new developments that we have nomination rights over. Supported living can be an expensive model of care when it is a single service in isolation. New developments will minimise single service accommodation and maximise core and cluster and alternative models will be a key consideration in the future, e.g. Shared Lives.

7.33 We are now capturing more information on desired locations for individuals awaiting accommodation to examine the demand across different towns to improve choice. Whilst the majority of the individuals are seeking accommodation in the Shrewsbury area, we also have a need for a smaller number of smaller schemes in the north and the south of the County. Accommodation units are generally supporting between 4 and 12 people, with occasional need for dispersed dwellings to meet specific and complex needs of individuals.

7.34 We can demonstrate excellent outcomes for individuals in supported living provision including 14 new supported living bungalows.

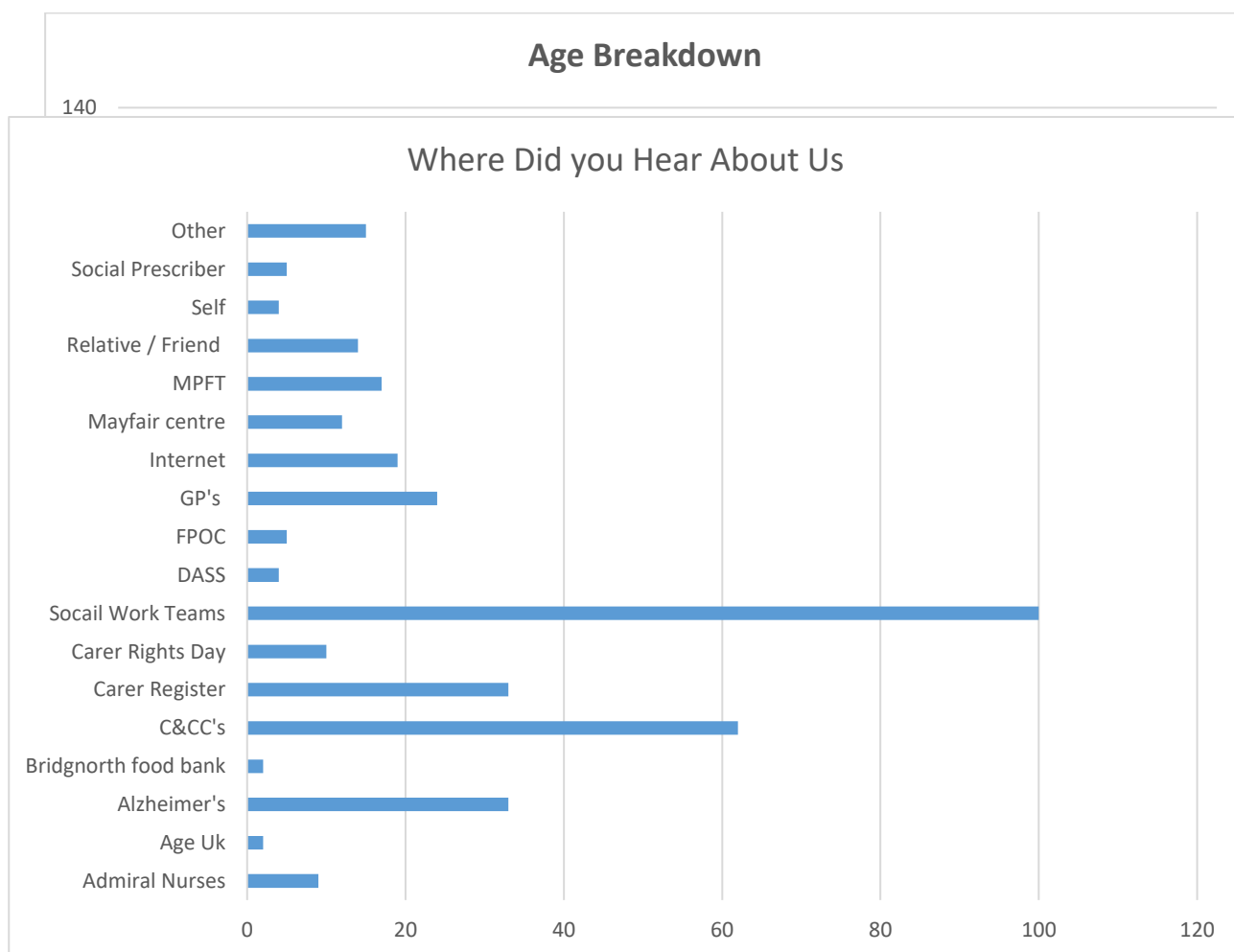
Carers Team

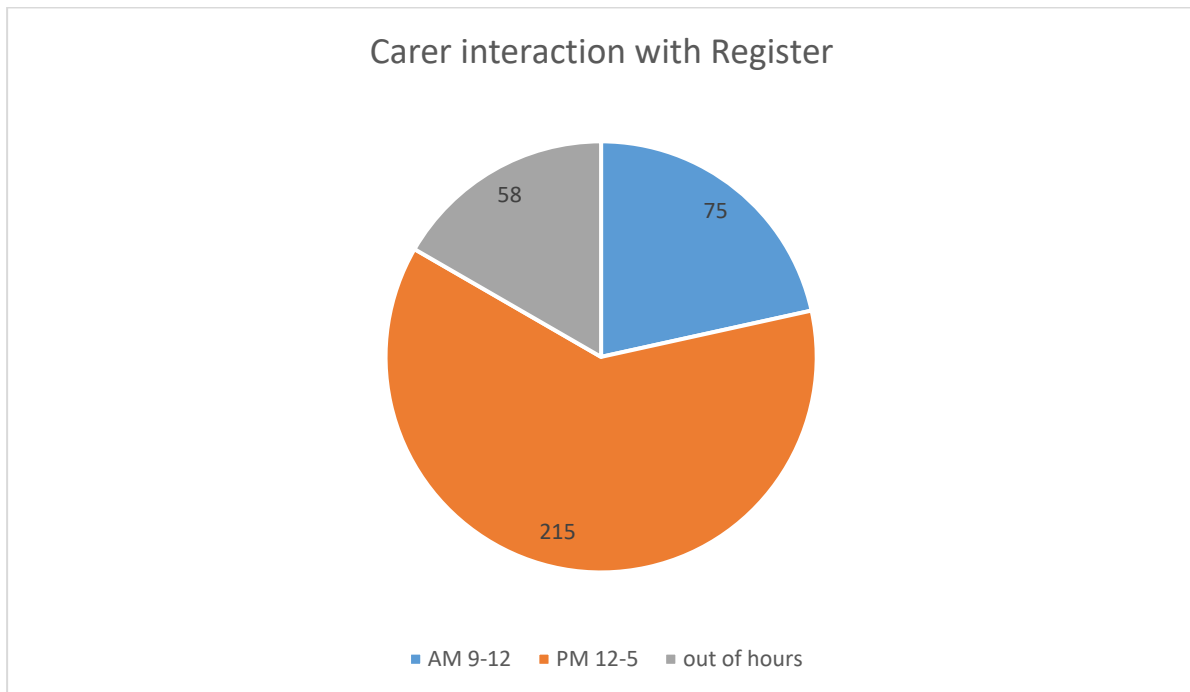
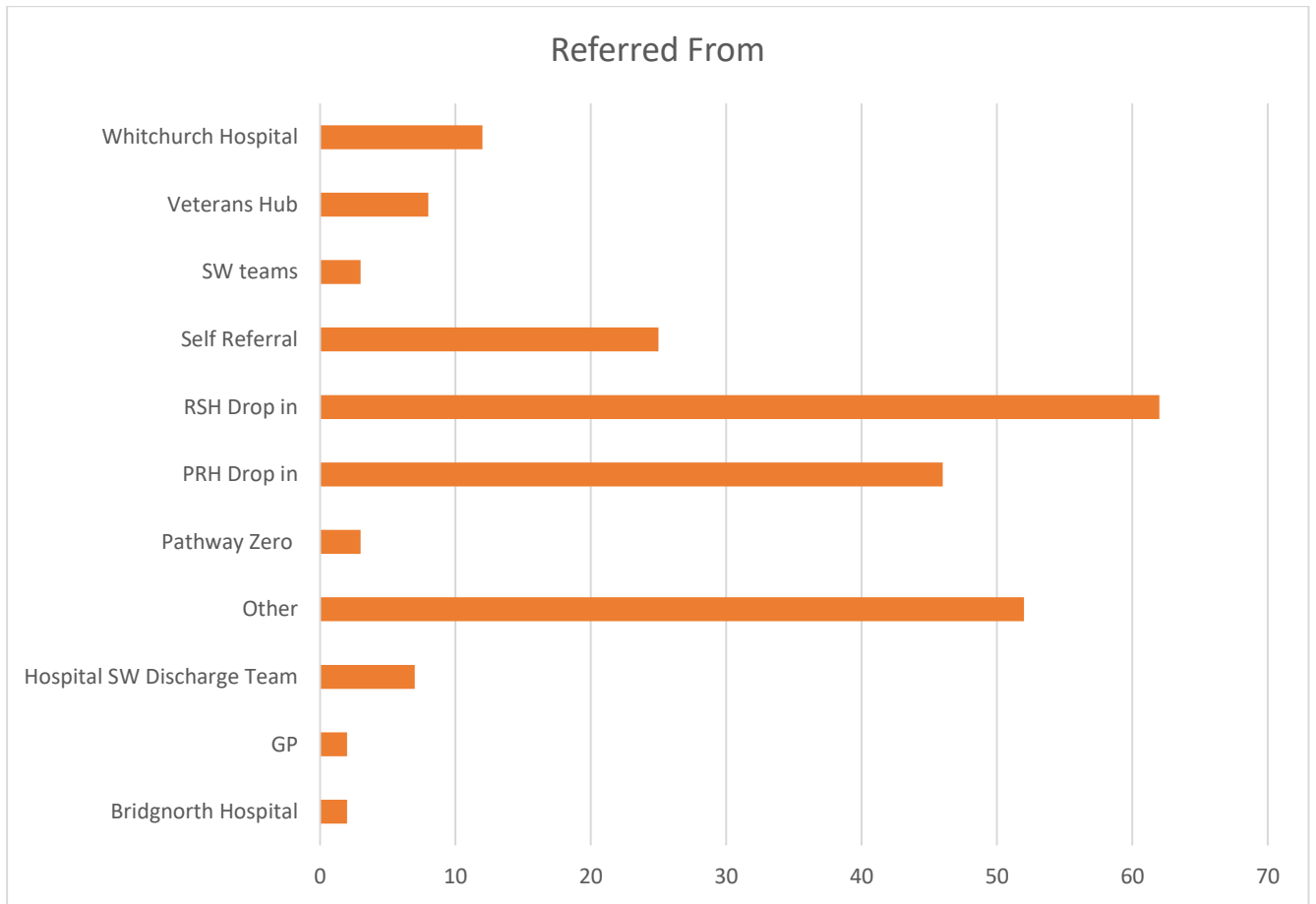
7.35 The Carers Team have undertaken various activities and support services to improve the lives of carers in Shropshire, offering a range of services tailored to carers' needs, including emergency plans, form filling, assessments, networking, advice, and engagement through peer groups, events, and face-to-face visits.

7.36 There has been a significant increase in carer registrations, largely due to referrals from social work teams and targeted efforts by Care and Community Coordinators. Most carers register between 12pm and 5pm, with an increase in out-of-hours registrations observed.

7.37 While the Team continue to work with performance colleagues to design how we measure ongoing performance, to Summarise what our current data tells us:

- most referrals for Adult Carers come from the Social Work Team
- Carers Choose to engage with the support mostly between 12pm and 5pm
- The majority of Carers needing support are over 70 years old.

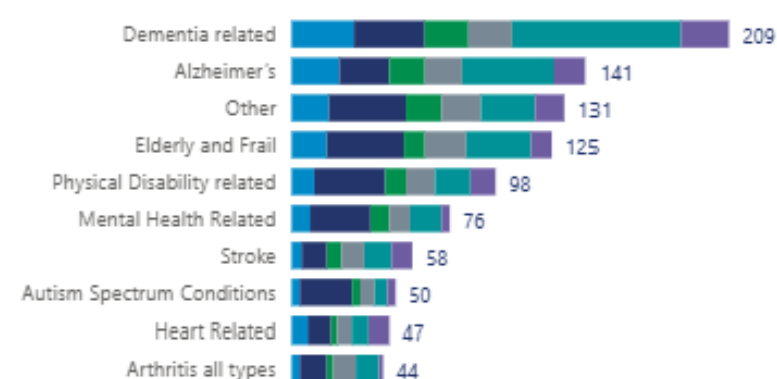




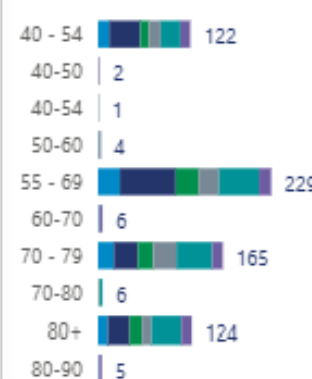
Shropshire Carers Register

Overview (grouped by region)

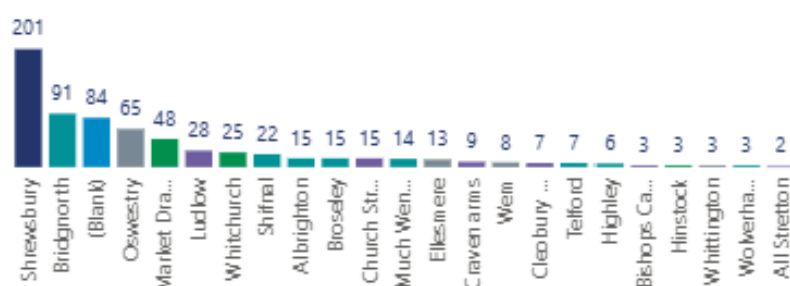
What is the Concern (groups) by Region



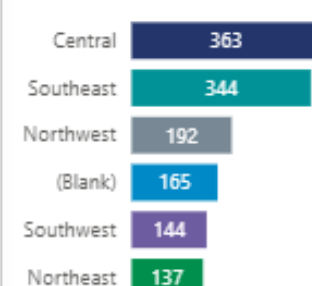
Age group



Area

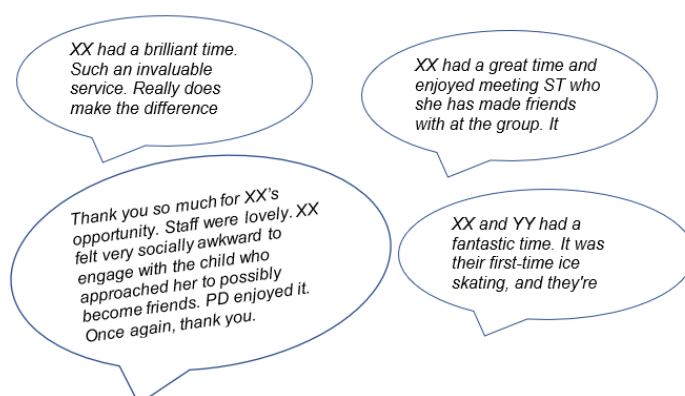


Region



7.38 The Young Carers Team focuses on respite and support through groups and activities, ensuring that young carers have time away from their responsibilities and opportunities to socialise and have fun. The Young Carers Team engages with schools and community groups to identify and support young carers, conducting school drop-ins and collaborating with various organisations. Future plans include regular monthly groups, additional activities during school holidays, a young carers ID card, and increased awareness through events like Young Carers Action Day.

7.39 There are 199 Young Carers known to the service currently. As the Young Carers Team is still new to the council, the team are still working on ways to improve how we measure our quantitative performance measures. However, qualitative feedback suggests that Young People are happy with the support offered.



Learning and Skills

Securing Access to Education Provision

- 7.40 Promoting and facilitating access to Early Years education provision is a top priority for the partnership. This support is crucial for fostering positive social interactions, enhancing communication and language skills, and achieving broader developmental milestones at such a formative age. Additionally, we acknowledge that access to education serves as a protective factor for children and young people of all ages, especially those who are most vulnerable.
- 7.41 We are proud to have very high levels of code validation and take up for all Early Years providers. Shropshire is ranked 1st in the West Midlands and 4th Nationally for code validation for all year groups. In Shropshire 95.92% of parents who request a code convert this into free childcare provision (compared to 88% in the West Midlands and 87% nationally). The picture is similar for under 1's (91.94% vs 85% and 84%), 1-year olds (96.59% vs 89% and 88%), and 2-year-olds (96.49% vs 87% and 87%). We have also sustained our high levels of education for 3- and 4-year-olds consistently around 96%, again above the national average. As we look towards the expansion of Early Years provision of 30hrs for all children of working parents from 9 months of age, we look forward to enabling even more children to experience high quality early years education and are confident we will meet our sufficiency duty in this area by September 2025.
- 7.42 In addition to recognising high levels of access to Early Years education, we can also celebrate the high quality of provision in Shropshire, where 100% of childminders are judged to be 'good' or 'outstanding' compared to 98% nationally and 98% of settings are graded 'good' or 'outstanding' by Ofsted compared to a national average of 97%.
- 7.43 Strong access to Early Years provision encourages strong attendance at school. We can certainly see improving attendance across our school age population, with both primary and secondary age attendance showing significant improvement. These improvements are recognised across all groups of pupils, including those with the greatest vulnerabilities.
- 7.44 Work continues as a multi-agency partnership to support children and young people who are struggling to access education for various reasons, including anxiety, wider emotional, mental, or physical health needs or special educational needs or disabilities.
- 7.45 We have also seen an improvement in the percentage of 16 and 17year-old (Year 12 and 13) young people not in education or training (NEET) and those whose destinations are 'not known'. During the last 18 months we have seen both NEET and not known indicators reduce to their lowest levels for many years. Both NEET and not known indicators compare very favourably with national averages. Shropshire is currently first amongst statistical neighbours.

	Y12-Y13 NEET %	Y12 – Y13 % NK %
England	3.1%	5.5%
Shropshire	2.5%	0.9%
Wiltshire	2.5%	1.9%
Cumberland	2.9%	0.7%
Worcestershire	3.2%	5.0%
Gloucestershire	3.6%	1.4%
Somerset	3.6%	1.4%
Dorset	3.8%	1.2%
Herefordshire	4.0%	10.1%
Suffolk	4.1%	10.1%
Devon	4.4%	2.3%
Cornwall	4.4%	2.3%

Shropshire Virtual School

- 7.46 Shropshire Virtual School is supporting 696 Children Looked After from year -2 to 13 (the year in which they turn 18).
- 7.47 The academic year 2023-24 ended with 0 Permanent Exclusions for the 3rd consecutive year and this record continues into the fourth academic year to date.
- 7.48 The completion and quality of PEPs continues with strength – 99% were completed and 96% were identified to be of Good Quality for the autumn term (from Early Years through to the end of Key Stage 5).
- 7.49 Excellent attendance outcomes are being achieved for Shropshire CLA (Looked After Children). End of autumn term data indicates primary CLA attendance to be 95.22% which is **above** Shropshire and National all learners. Combined CLA is 92.6% so just under 93.4% for Shropshire all learners and 93.5% for National all learners. Specialist attendance has increased by 0.4% from end of November to end of December. There were only 3 children with no recorded school compared to 11 at the same data point last year.
- 7.50 In September 2024 the Shropshire CLA not in Employment, Education or Training (NEET) figure was 20.3%, it peaked in November at 25% and was reduced to 22% in December i.e. 78% of young people in Key Stage 5 are in Education, employment or Training (EET). Currently this NEET cohort is comprised of 44% Unaccompanied Asylum Seeking Young people (UASYP) and 56% citizen learners. A new post of Project Officer for supporting UASYP is currently in a recruitment process to drive the reduction in NEET for this group of children and young people.

Access to Education

- 7.51 Through a continued focus with school leaders and multi-agency partners there has been a significant reduction achieved in the number of permanent exclusions this academic year to date. Total Exclusions are at 19 compared to 36 this time last year. Total suspensions are also reducing by 7.4% compared to the same period for last

year and the number of days is reduced by 18%. Indications are that exclusions and suspensions are reducing for children and young people with identified SEND support this academic year, but not yet for those with an EHCP. However, the service recently supported a school and family to have an exclusion cancelled for a primary child with an EHCP and disability. The Education Access Service remains fully committed to working together with school leaders to reduce the suspension and exclusion rates at all phases, particularly secondary and we have seen greater uptake of Pupil Planning Meetings (58 to date) which schools can use to ensure that they have done all that is reasonably possible to support their children and young people.

7.52 We continue to progress developments to support the SEND & AP Change Programme - new posts to support Inclusion are in the pipeline for recruitment. These will include an Inclusion & Alternative Provision Task Force Lead, Inclusion Mentors and a Family Support Worker.

7.53 The new Inclusion Pathway for schools starts on 1st February 2025, consultation took place with schools/settings to develop this and communication has gone out to schools to support them with this change and improvement to the offer from the local authority.

7.54 The most recent DFE data for Elective Home Education (EHE) indicates that Shropshire's EHE rate is 1.6 which is above national (1.4) and the regional figure (1.2), but below that for statistical neighbours (1.9). There are currently 664 children on the local authority list of home educated children.

Shropshire	National	Statistical Neighbour	West Midlands
1.6	1.4	1.9	1.2

7.55 The Shropshire EHE Policy is being revised currently in consultation with the multi-agency Children's Safeguarding Partnership and builds in preparation for the forthcoming Children's Bill. Children on Child in Need (CIN) and Child Protection Plans (CPP) are targeted for a priority visit from the Inclusion Support Officers to support safeguarding.

7.56 The most recent DFE data indicates that Shropshire's Children Missing Education (CME) rate is 0.2 which is lower than national, statistical and regional figures. At the October 2024 DfE census date there were 75 children on the CME register. The Inclusion Team aim to support all our children and young people into an appropriate education setting and current work is taking place to review the end-to-end CME process.

Shropshire	National	Statistical Neighbour	West Midlands
0.2	0.5	0.3	0.3

- 7.57 The new 'Working Together' meetings have started in collaboration with Social Care partners, and this works to strengthen the scrutiny and action for children on CIN and CP Plans who do not have a school place or are electively home educated.
- 7.58 Both primary and secondary school attendance percentages are in line with national and regional. Current attendance stands at 93.4% overall compared to 92.9% this time last year. Data indicates attendance at end of December was 91.5% for those with identified SEN support and 86.2% for those children and young people with an EHCP.
- 7.59 EWOs have maintained 567 school contacts inclusive of special school arrangements, in context this is 191 Primary reviews and visited in person 376 secondary schools. The 10/15-day reporting requirements for school absences are in place in line Working together 2024. A new role of a Local Authority Attendance Officer is being developed to increase the support on offer to children and young people.

Admissions

- 7.60 The Admissions Team has begun the transfer group admissions rounds. The reception, junior, and secondary transfer rounds have opened and closed, with applications being processed in preparation for National Offers Days on March 1st and April 16th.
- 7.61 Additionally, the Admissions Team has continued to develop the new coordinated In-Year Admissions process for the local authority (LA) and has secured buy-in from all schools in Shropshire. This new process began on September 1st and has been very successful so far, processing 2,001 applications in the autumn term, compared to the 667 applications the LA received during the same period last year.
- 7.62 Despite the unexpectedly high number of applications, the Admissions Team has worked diligently to ensure that all applications were processed within the statutory timeframe which put immense pressure on the team. This improved process enhances the safeguarding of children, as the LA now has more comprehensive information, and the admissions team can effectively monitor the movement of children around the county as well as into and out of the county. The Admissions Team has used this information to assist School Place Planning colleagues, ensuring that children have access to the appropriate school places at the right time.
- 7.63 We would like to acknowledge the hard work, dedication, and commitment demonstrated by education settings and schools across Shropshire in keeping children safe and improving their outcomes.
- 7.64 We remain dedicated to strengthening our focus on early intervention and prevention activities. This commitment aims to increase stability for every child or young person accessing education, especially those with the greatest vulnerabilities, as we recognise the protective benefits that education provides.

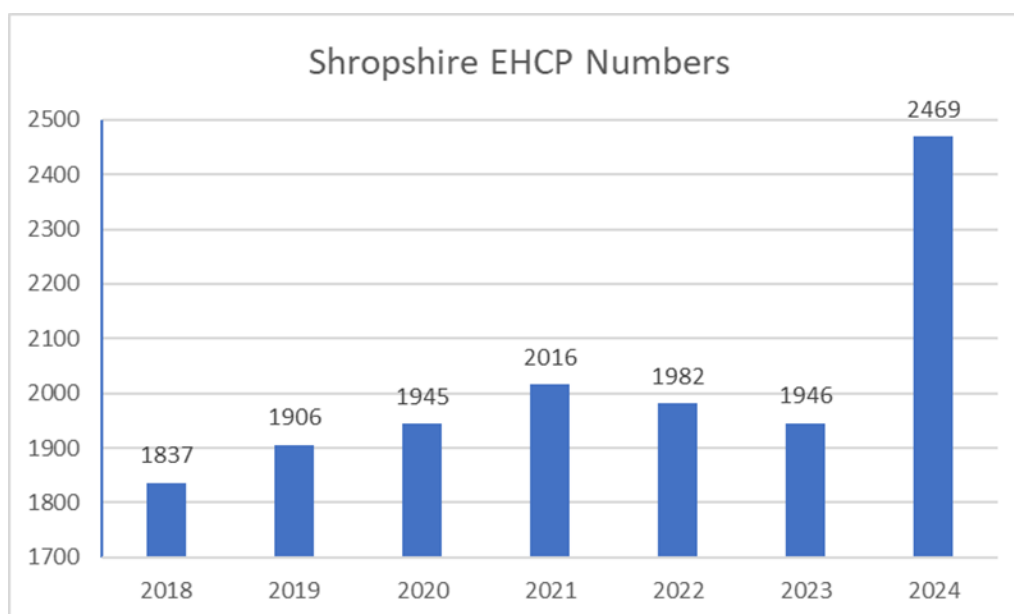
SEND Support, Inclusive Mainstream/SOAP and Education, Health and Care Plans

- 7.65 Shropshire Council has a duty to consider requests for an EHC Needs Assessment where evidence is presented that a child or young person may have special education needs and/or disabilities that will have a significant and long- term impact on their education outcomes. All requests for EHC Needs Assessments are considered through a multi-agency panel. Where it is agreed that an EHC Needs Assessment is necessary, Shropshire Council have a legal duty to complete the process within 20 weeks, including determining whether the special educational needs of the child or young person require special educational provision to be made through an EHC plan. Where an EHC plan is not agreed following assessment, the education setting is expected to continue to meet the child or young person's special educational needs through SEND Support.
- 7.66 Mainstream schools receive additional funding through a Notional SEND budget to provide support above that which is required by all children and young people. Further information is anticipated to be shared by the DfE on the allocations and guidance in this area for the 25/26 academic year, following the October 24 Budget statement.
- 7.67 In Shropshire the expectations around what should be available through high quality teaching for all children and young people, and what should be available through SEND Support, are outlined in the Shropshire Ordinarily Available Provision (SOAP) Inclusive Practice framework. The framework covers primary and secondary phases and was co-produced with the input of education settings during 2023. Further work is underway to develop the same framework covering the Early Years and Post 16 phases by the Education Quality Advisors (SEND and AP) who have commenced employment in September 24.
- 7.68 The SOAP framework is available on the Local Offer here [SEN support | Shropshire Council](#)
- 7.69 Since September 24, the Education Quality Advisors (EQA) have implemented a SEND and Inclusion newsletter for practitioners and professionals supporting Shropshire children and young people. The first edition was shared in October and will continue to be published on the Local Offer here [SEND and Inclusion Newsletter | Shropshire Council](#)
- 7.70 Work has taken place by EQAs to strengthen the quality assurance of unregistered alternative provision (AP). This has supported the effective quality assurance of providers commissioned by the Local Authority. Frameworks will be shared with schools to support their own quality assurance of AP.
- 7.71 We are encouraged that the work already underway in Shropshire to support inclusive mainstream provision across all age ranges, appears to be strongly supported as the national direction of travel to address systemic challenges within the national SEND system. The recent speech from the Secretary of State for Education outlines this here [Bridget Phillipson's Speech to the Confederation of School Trusts - GOV.UK](#)

7.72 In addition, the National Audit Office also published a recent value for money report outlining the challenges present within the current national SEND system. The report is available here [Support for children and young people with special educational needs - NAO report](#)

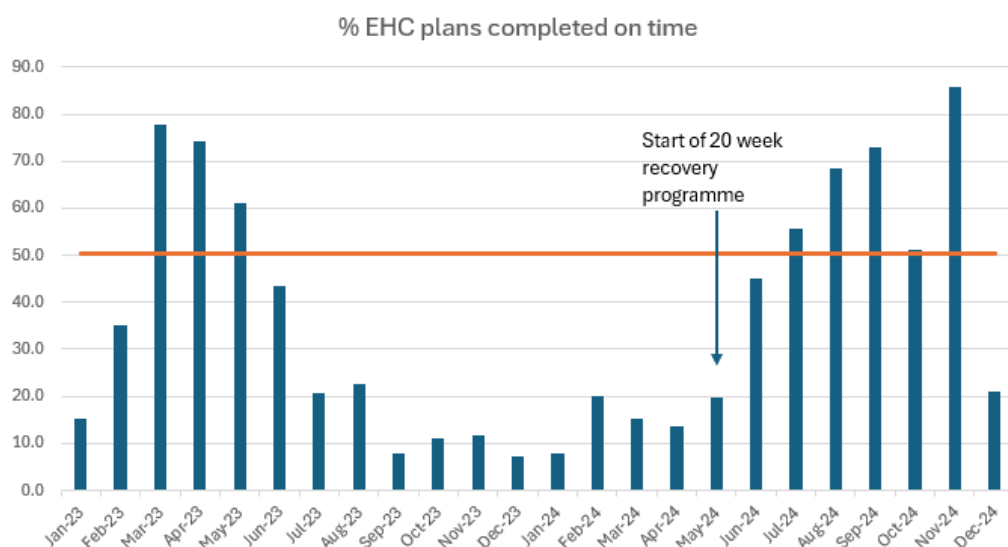
[Overall numbers of children and young people with an Education, Health and Care plan \(EHCP\)](#)

7.73 The following information is obtained from the annual national SEN2 data collection. This collection takes place in January and reflects the caseloads for the previous year.



Source: <https://explore-education-statistics.service.gov.uk/find-statistics/education-health-and-care-plans>

7.74 Since the implementation of the timeliness recovery plan for issuing new EHC plans within 20-weeks, we have seen significant improvement. At the point of implementation in May 2024 was 19.7%, this is currently around 56.2% for Q3 2024-25. A combination of factors, including annual leave requirements as part of the 'right sizing' work within Learning and Skills, influenced the timeliness figure for December 2024. However, the average for December was still 24.1 weeks to issue an EHCP, with the average length of time to issue an EHC plan 27.1 weeks during the 2024 calendar year.



	Total	On time	% on time
Jan 2024	63	5	7.9%
Feb 2024	70	14	20.0%
Mar 2024	65	10	15.4%
Apr 2024	51	7	13.7%
May 2024	71	14	19.7%
Jun 2024	89	40	44.9%
Jul 2024	95	53	55.8%
Aug 2024	60	41	68.3%
Sep 2024	74	54	73.0%
Oct 2024	43	22	51.2%
Nov 2024	14	12	85.7%
Dec 2024	19	4	21.1%
2024 Overall			39.7%

7.75 In addition, we have also significantly reduced the number of EHC plans classed as 'very late' (already over 30 and 50 weeks), which demonstrates a clear focus across all areas of key activity.



7.76 Whilst we are encouraged by these improvements, we recognise that our recovery work must continue to ensure these improvements are embedded into business-as-usual practice moving forward so that we consistently deliver as close to 100% of EHC plans within 20 weeks as possible. This information is included in the Accelerated Progress Plan (APP) monitored by the DfE and NHSE.

7.77 EHC plan advice monitoring takes place weekly to monitor advice requests and the timeliness they are provided in. This enables strong advice timeliness and provides opportunity for follow up by area leaders where required.

Annual Reviews

7.78 Annual Reviews continue to be a key priority for the Local Authority and SEND and AP Partnership Board, following the review and updating of the Annual Review recovery plan in June 24.

7.79 The recovery plan has resulted in some fixed term additional capacity being provided for the SEND team to ensure that we accelerate the process of ensuring every EHC plan has received an annual review (within 12 months) and where necessary amendments to the EHC plan have been made and a final EHC plan issued. This team have been in place since the middle of December 24 and are beginning to focus on the c.1400 EHC plans that have not either received an annual review and/or the EHC plan has not been amended following the review. This work will focus on prioritising children and young people approaching phase transfer points (e.g. key stage moves, including primary to secondary) and those with the most complex needs.

7.80 An indication of the impact of the work that has already been completed is outlined below, with monthly monitoring underway within the Local Authority and shared with the SEND and AP Partnership Board each meeting.



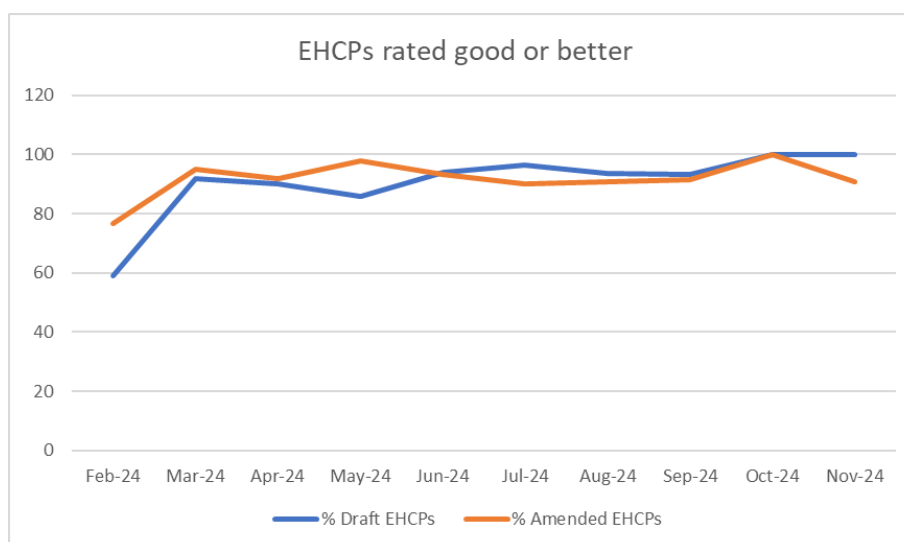
Quality of EHC plans

7.81 Despite the challenges around the significant increase in EHC plans maintained by Shropshire Council, positive work has taken place as a partnership to improve the quality of advice and the overall quality of EHC plans.

7.82 The partnership developed and implemented a consistent EHCP Quality Assurance Framework in October 2023 for all new EHC plans and those amended through the Annual Review process. The framework is based on regional and national good practice, including peer review with a local authority consistently identified as delivering high quality EHC plans.

7.83 The framework is available on the public Local Offer site through the link [EHCP quality assurance standards | Shropshire Council](#)

7.84 The graph and the table below outlines the improvements and percentage of EHC plans rated good or better.



EHCPs RATED GOOD OR BETTER	Aug-24	Sep-24	Oct-24	Nov-24
% DRAFT EHCPs	94	93	100	100
% AMENDED EHCPs	91	92	100	91

- 7.85 This improvement continues to be monitored and evaluated through the multi-agency panel and strategic quality assurance processes as we ensure this becomes embedded practice.

Feedback from children, young people, families and professionals

- 7.86 Whilst we recognise that the experience for children, young people and families is not yet consistently positive based on the feedback received from the APP survey completed in preparation for the October 24 APP review meeting and PACC (Parent Carer Council). We can see that the improvements are starting to be recognised in the direct feedback collected by the services, for example, APP parental satisfaction survey results showed an increase in overall satisfaction from 46% to 51%.
- 7.87 We remain committed to securing consistently positive experiences for children, young people, and families.
- 7.88 Some examples of direct feedback from families and professionals are included below.

"This was more straightforward than I thought it would be. I was consulted at various points though out the process of putting it in place and I was able to get questions answered quickly by the early years team" Parent Carer feedback Sept 2024

"Overall, the process to gain my child's EHCP was very straightforward and helped him get into a school that is able to help him so more than happy with this." Parent Carer feedback Sept 2024

"Everyone I have contact with has been helpful and supportive. My son's EHCNA was produced very quickly, which has made a big difference. I have been very pleased with the service I have received, Many thanks." Parent Carer feedback October 2024

"Very helpful team. Felt supported and included all the way. Thanks." Parent Carer feedback July 2024

"Very grateful that all the information was accurately collected and the outcome was as I hoped it would be and in the best interest of my Son ." Parent Carer feedback June 2024

"One particular case worker goes above and beyond and works incredibly well with other professionals. sets a perfect example of how working together can achieve the best for the child/ young person." Quote from OT Sept 2024

NB next available update of survey is due Apr/May 25 in readiness for APP 24 month review.

7.89 We are also increasingly engaging directly with children and young people to gain their views, including their views on their EHC plan and the impact this is making. Facilitated by SENCO's in settings to ensure that children, young people are identified when first issues arise. The latest feedback provided is included below and we will continue to embed this approach to increase the numbers of children and young people sharing their views.

Percent (12 responses)	I feel happy	I feel safe	I feel that I am learning	I feel listened to by the adults around me	I feel that my strengths are recognised
% Very like me	50	58	50	58	58
% a little like me	25	33	33	33	33
% Neutral/not sure	17	0	0	8	0
% Not much like me	8	0	17	0	8
% Not at all like me	0	8	0	0	0
% Very or a little like me	0	0	0	0	0

I feel that people understand me and what helps me	I feel welcomed and included by other people	I feel that I am moving towards goals that are important to me	% Overall	% Very or a little like me overall
50	75	75	59	87.5
33	25	8	28	
8	0	8	5	
8	0	8	6	
0	0	0	1	
0	0	0	0	

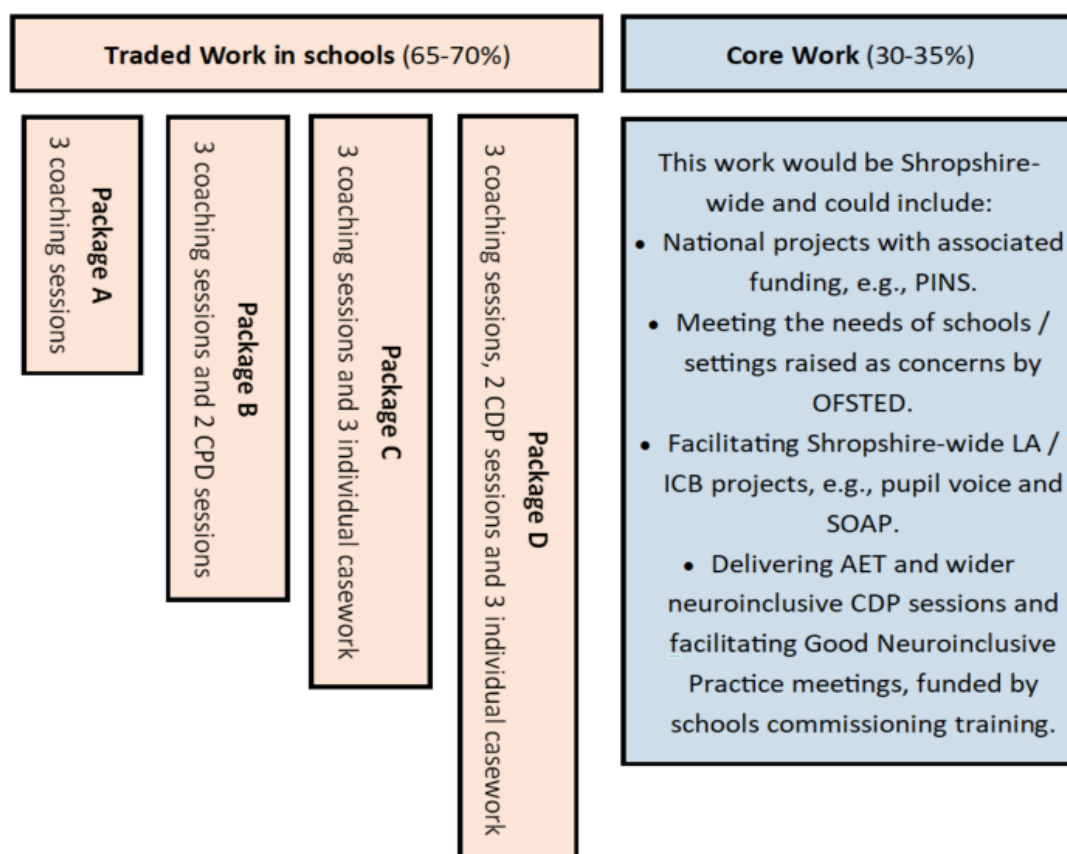
Neurodiversity Practitioners (NDPs)

7.90 The development of the NDP pilot project was an action within the Shropshire's Accelerated Progress Plan (APP). Three NDPs were appointed and started in January 2024. They were employed on one-year fixed term contracts by Shropshire Council with a three-month extension to support the facilitation of PINS (Partnerships for Inclusion of Neurodiversity in Schools). From April 2025, the NDPs will be permanent roles within the Shropshire Educational Psychology Service (EPS) structure and will continue to be supervised by the Specialist Senior Educational Psychologist for Neurodiversity.

7.91 Within the pilot, the NDPs have supported 49 schools (Key Stages 2 and 3) from targeted areas based on referral data from Bee U (77.8% uptake rate; 32.5% of schools

in Shropshire). At present, there is not a consistent offer of support for neurodiverse children and young people (CYP) across the age range nor across the geography of Shropshire. Children can be referred to the NDPs on a needs-led not diagnosis-led basis, and this will continue to be the offer. They will continue to be a preventative support offer and, therefore, CYP referred should not have an Education Health and Care Plan (EHCP) or be in the Education Health and Care Needs Assessment (ECHNA) process. The NDPs work in collaboration with school staff, families and other professional services, when needed, to promote appropriate, holistic support. Systemic work aims to empower and build capacity within the schools to enhance their offer of support to all children and those around them.

7.92 The model of NDP support has been proposed based on what has been identified as working well and established good practice from Autism in Schools, the NDP Pilot and PINS, thereby being a sustainable support offer based on the three short-term projects Shropshire has participated in. Consideration of the wider outreach support offers available in Shropshire has also been made.



7.93 The packages are organised in this fashion with the aim of being needs-led and flexible for schools but also providing a clear structure of support. This is important, considering the feedback from schools on the need to have clear offers of support. Coaching is included in each of the packages to ensure that systemic change is at the forefront of the support offer. Each session is a morning / afternoon equivalent of time, to include preparatory time and report writing, as appropriate (approximately 3 hours per session). It is planned for the support commissioned by schools to be spread over the academic year. Please note: A reduced package of support may be appropriate for the term and a half from start of April – end of August 2025.

7.94 It is proposed that the traded offer is made available to schools / settings across Shropshire and is commissioned on a first come first serve basis, thereby being available to schools who are seeking support across the age range. Over time, it may be that the NDPs specialise more in different ages ranges, but allocation is shared between them. It is hoped that the schools / settings that do not commission traded support at this time are benefitted from the wider core work the NDPs are involved in, e.g., delivery of the Neuroinclusive Practice training modules, facilitation of the Network of Neuroinclusive Practice groups and being part of the Alternative Provision (AP) Task Force, phase 3 of the SEND and AP Action Plan as recommended by the DfE.

7.95 A brochure sharing the support offers NDPs can deliver in schools / settings is under development. It is planned that this brochure and a letter to schools who have participated in the pilot project will be disseminated by February half-term.

7.96 We have an opportunity to share the work of the Neurodiversity Practitioners with the National SEND Reform group, particularly the Neurodivergence Task & Finish Group <https://www.learningdisabilitytoday.co.uk/news/send-reform-will-focus-on-inclusive-mainstream-says-education-secretary/>. A review of the impact of our Neurodiversity Practitioners and data from the first year will be shared to support the collation of evidence.

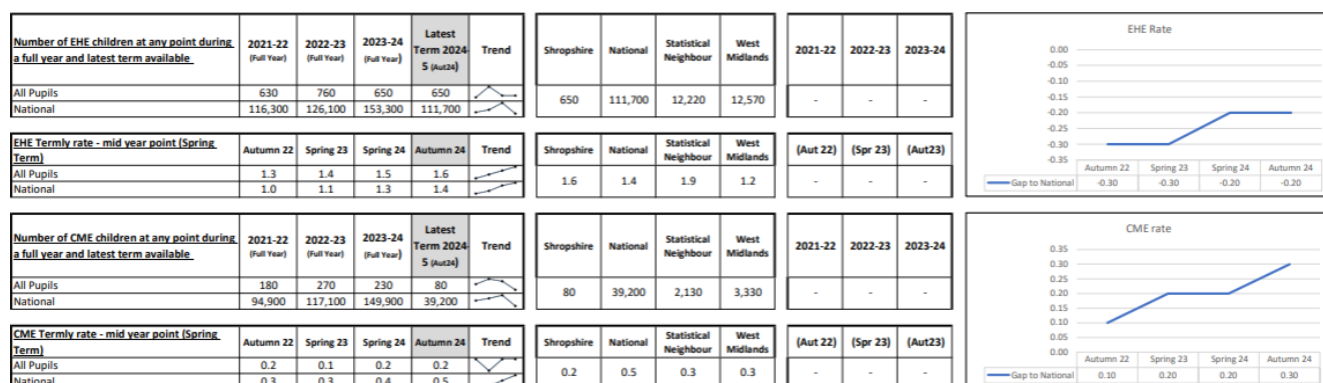
SEND Dashboard Development

7.97 As part of the transformation programme, reviewing the need to automate and digitise our data and outputs is now underway. The SEND and AP dashboard is currently being developed in line with APP requirements, considering data required for Ofsted/CQC Area SEND inspection framework Annex A to be accessible in real time and national requirements.

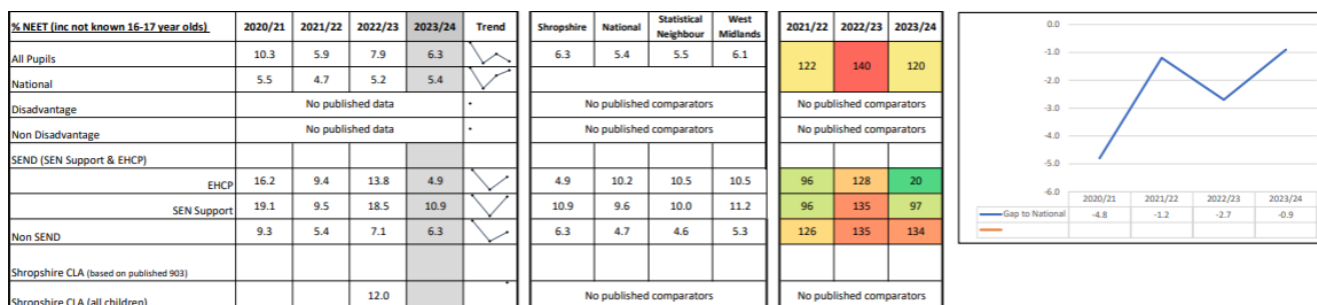
7.98 A draft of the range of indicators to be included in the dashboard has been developed and shared with the SEND and AP Partnership Board for review and comment. The draft indicators have been included as appendix 2. Officers across the local area (LA, health, education and social care/early help) are engaged in bringing the data together to provide a working example of the dashboard in early 2025.

7.99 Our data accuracy is paramount and review of efficiencies around collecting data is also being reviewed in line with Dashboard developments and Inspection Preparation.

EHE and CME Data:



NEET Data:

Children's Early Help and Social Care.

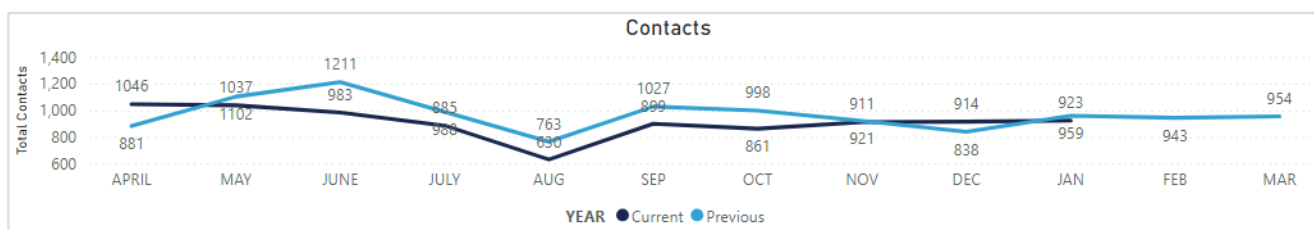
7.100 Last Quarter this report focused on the key performance indicators, with a focus on demand and activity performance of Children's Social Care. This is the focus again, with the inclusion of the impact on caseloads for social workers.

7.101 Following the Early Help Transformation Programme commenced in April 2022 and the introduction of The Early Help Front Door including The Early Help and Support Team (EHAST), it was reported last quarter that there has been a shift in demand in the contact data. The impact demonstrates the reduction and now a trajectory that would seem to be becoming the new 'norm' in relation to demand since the new process went live. There has also been a continued (83%) increase in families worked with at Targeted Early Help level, in contrast the re-referral rate to Targeted Early help is less than 10% meaning that when families receive Early Help now it is impactful and escalation to Children's Social Care is significantly reducing. This is an important factor in managing demand in that the aim is to ensure that the work completed with the family at the first opportunity is what they need and as a result is impactful and creates change.

7.102 The collaboration between Early Help and Public Health continues to be key to the strength of partnership working and developing the Family and Community Hubs. The offer across the county continues to grow and includes the development of several 'hub and spoke' models, which aim to ensure a wider reach to more rural communities. Feedback from partners and families on the work being undertaken within Early Help has been extremely positive.

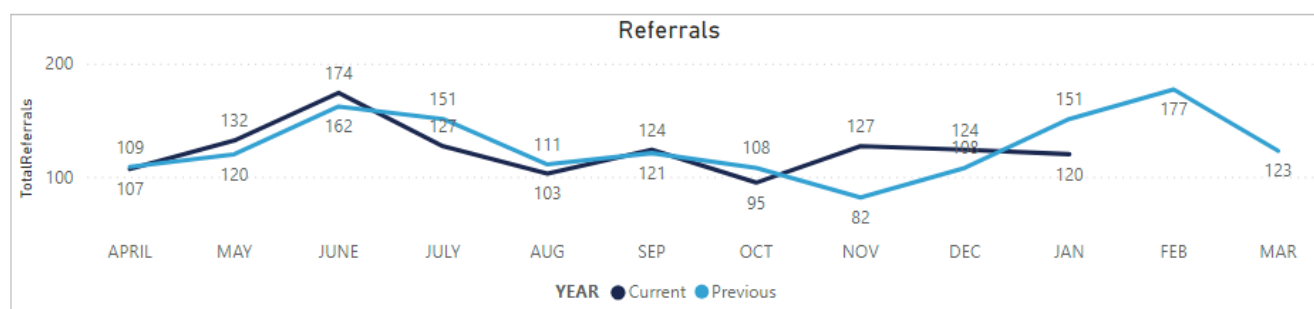
7.103 The data is starting to demonstrate that there is a shift in demand through contact and referrals:-

Contacts and Referrals



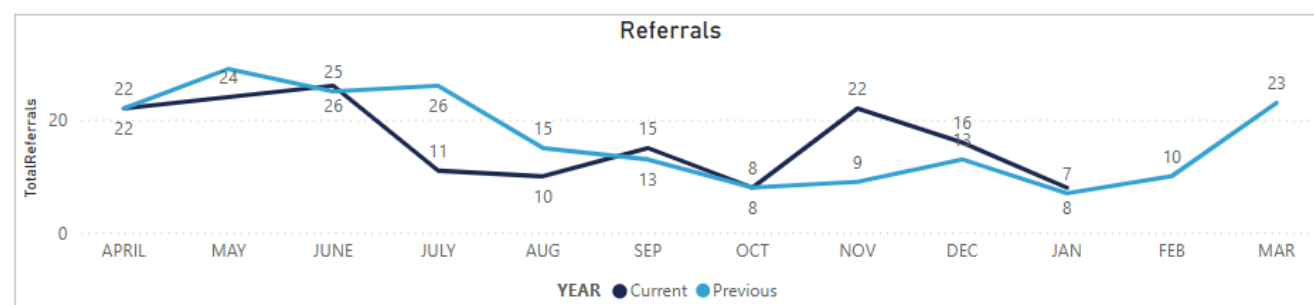
7.104 Contacts are when information is shared with Compass or a request for help and support at Level 1,2 or 3 is made. They come from a wide range of sources including partner agencies, families, members of the public etc.

All referrals:



7.105 Referrals relate to information being shared that requires consideration of a social work assessment, so a threshold is met that raises concerns about the child being 'in need' or 'at risk of significant harm', level 4 intervention.

Re-referrals:



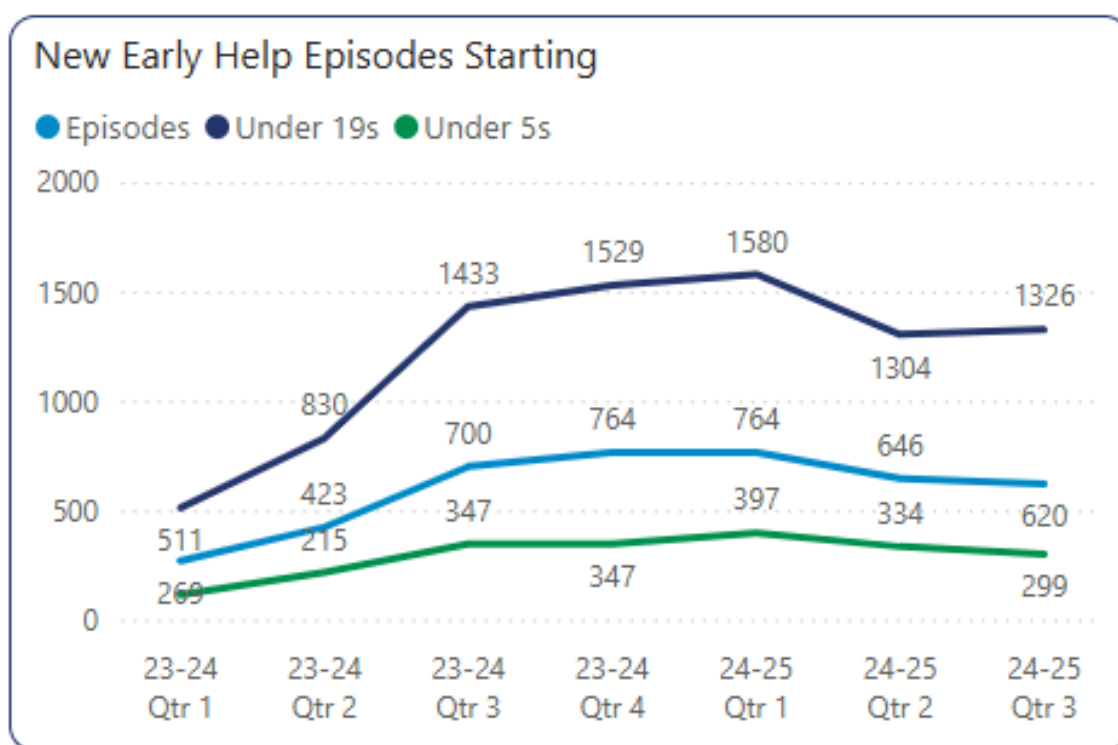
7.106 Above is re-referrals – where there has been a previous referral to the current one in the past 12 months.

7.107 Contacts and referrals have both shown similar trends to the previous year, though are lower in both. Our referrals have dropped in quarter two, with a slight rise in Quarter 3 but remaining below last years trajectory. A variation in rates is to always be expected and can be significantly influenced by large sibling groups for example.

The positive is that the rate of referrals into children's social care continues, on a rolling average to be lower than previous year, demonstrating a positive impact of Early Help. This coupled with the low re-referral rate (dropped from 13% to 11% in the month prior to the last committee meeting) also supports the theory that Early Help interventions are impactful and effective. Re-referral rate remains below national and statistical neighbour average.

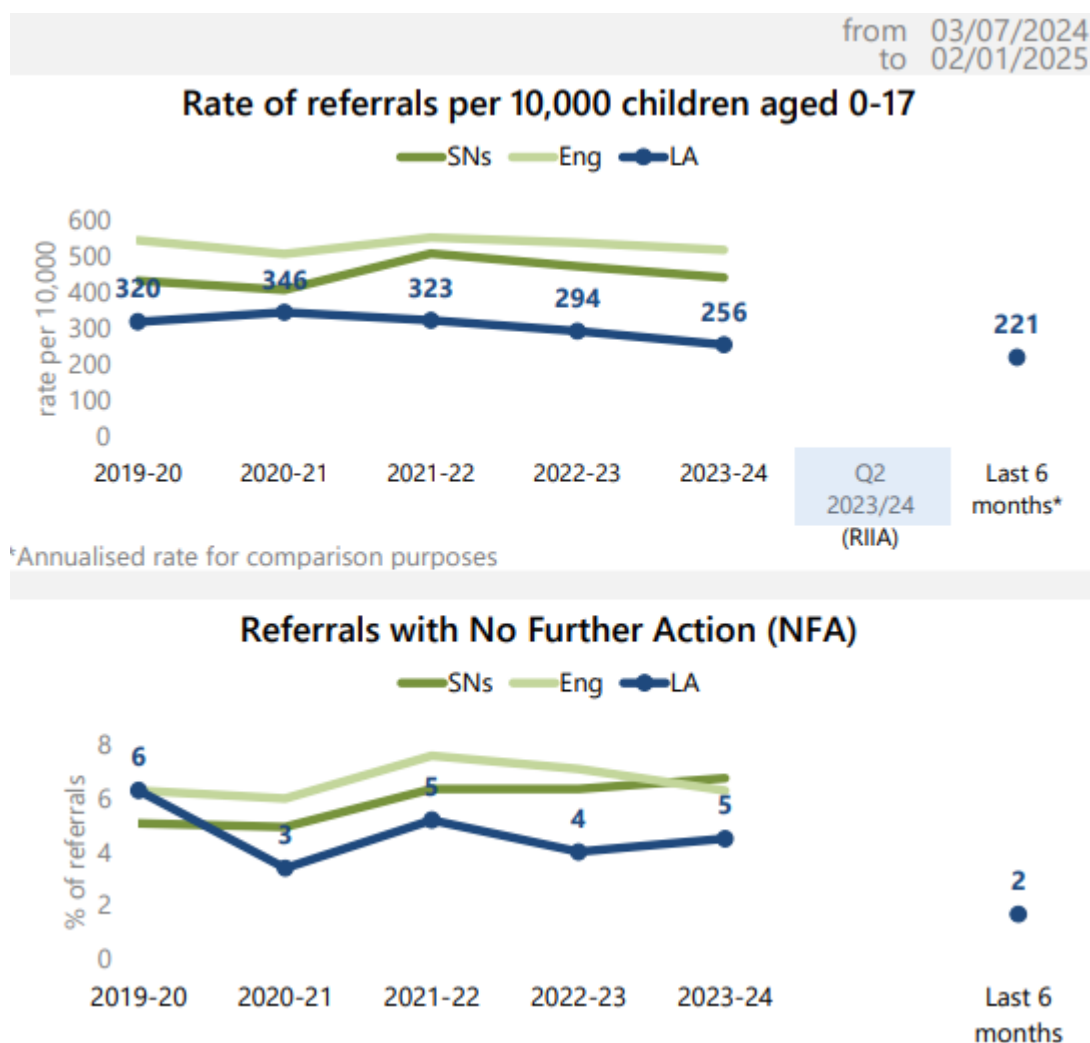
7.108 A few weeks after the Early Help Transformation went live, we saw a shift in trajectory for referrals, these are now also tracking below last year's numbers.

7.109 It remains early days, in the new service delivery model for Early help, but the combination of EHAAT and Early Help Transformation seems to be having the intended impact on demand coming into the front door, ensuring that families are offered the early help at the earliest opportunity, a crucial factor is that families have to agree to help and support, and want the intervention. This supports the work to be relationship based and can create positive change.



Referral Rates – into children's social care, having met threshold

7.110 Referral Rates over time are a key measure and for many years we have tracked below national and statistical neighbour averages, and we are seeing the drop in the last 6 months continue that trend. This report now includes the published figures for 2023-24 which was released just ahead of the last meeting.

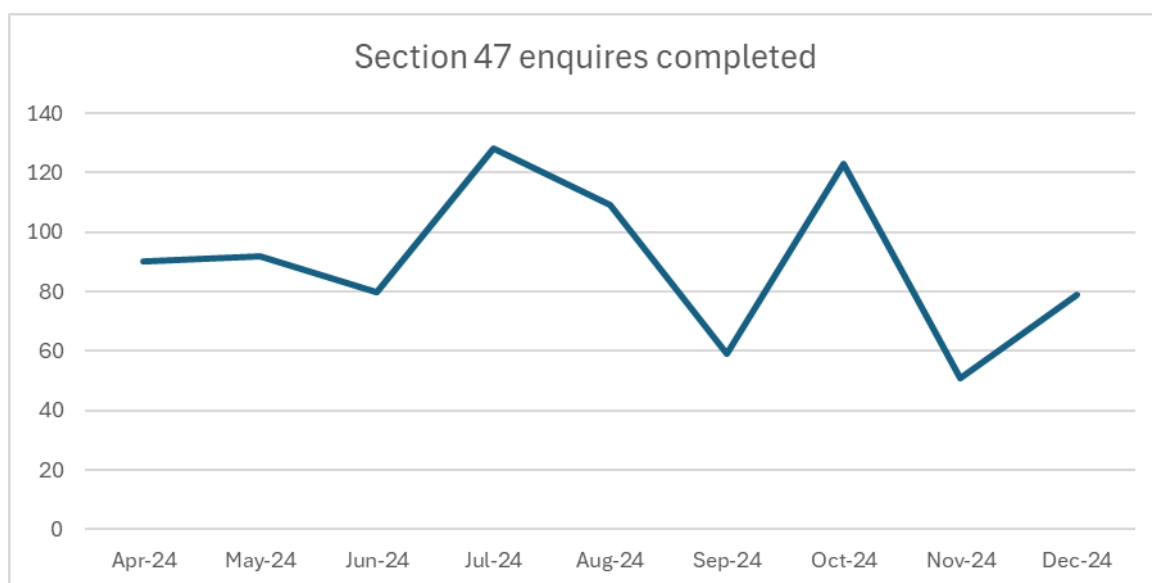


7.111 Our referral rate per 10,000 children in the population has reduced further, keeping us below our statistical neighbours' and national rates.

7.112 Our percentage of No Further Action remains very low and below our statistical neighbours' and national rates. Meaning that a decision is made and an intervention is progressed, whether that is a step down to Early Help or to open for a social work assessment or a strategy discussion. The following intervention is then likely to have impact, as families are not frequently re-referred into the service.

Section 47 Enquiries

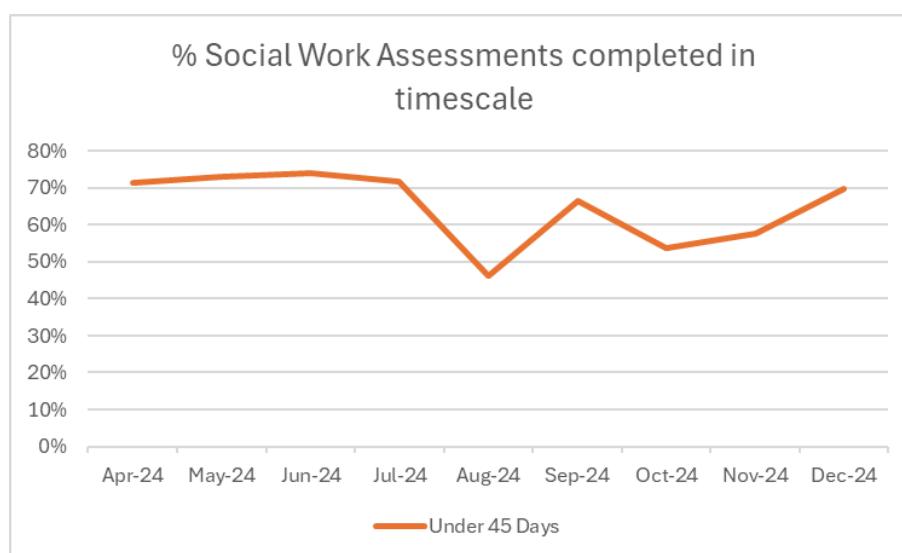
7.113 Section 47 Investigations take place following a Multi-agency Strategy discussion that considers all relevant information about a child who could be at risk of significant harm. The graph below shows that we continue to see variation in demand with spikes often around the time of school holidays. This is an expected variation in demand nationally and evidences the importance of the relationship's children have in schools and how they act as a protective factor for them.



7.114 In previous reports to People Overview Committee the issue of complexity has been raised in relation to having an impact on caseloads of social workers, the number of sets of care proceedings and the number of children that have become looked after.

7.115 This graph shows a numbers of Section 47s competed in the financial year to end Q3.

Assessment Timeliness



7.116 The performance on this measure was especially low in August, affecting the YTD figure.

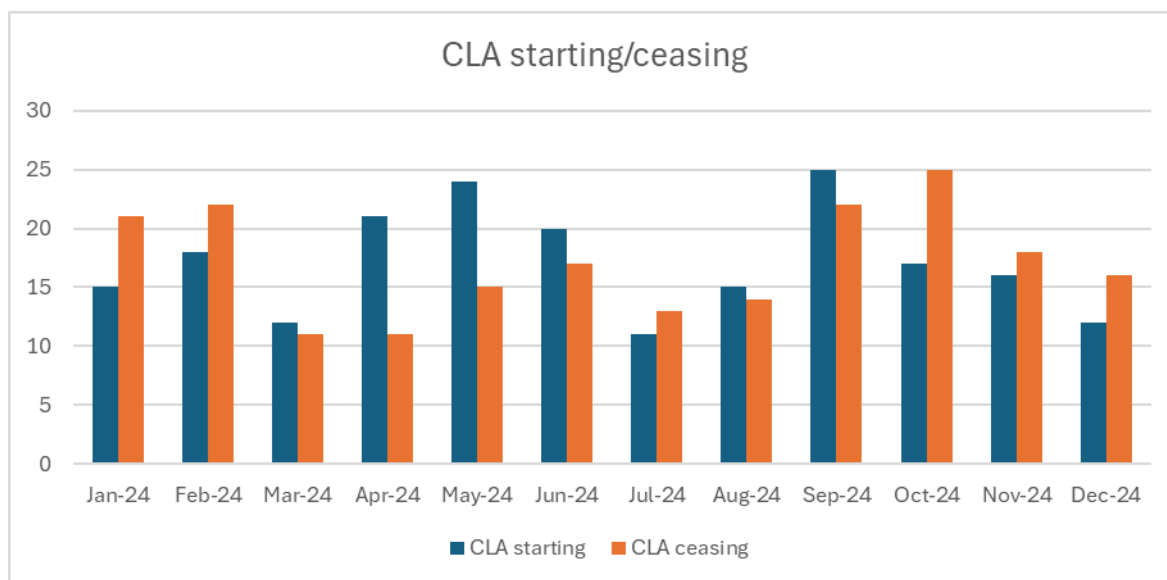
7.117 There has been a focus within the service on completing any open and overdue assessments which has explained the drop in those completed 'within timescale', however it is evident that the performance in this area is improving steadily. The number of open and overdue assessments has fallen by over 66% in the last quarter. January's data shows we are now at over 80% completion, so the continuing trajectory of progress is being evidenced.

Children Looked After numbers:

7.118 Over the past 4 years there has been an increase in the numbers of children Shropshire Look after, the reasons behind this have included:

- A rise in 0-5 year olds being harmed and becoming looked after,
- A rise in Unaccompanied Asylum-Seeking Children being cared for by Shropshire.
- An increase in court timescales and duration of care proceedings.
- Increase in families with 3 or more children becoming looked after.

7.119 The rate of children starting to become looked after is starting to slow and stabilise; the high of 41/10,000 child population was in March '22 was followed by a rate of 35/10,000 in March '23, it is now at **32/10,000**. This is positive and reflects the progress in the work to support children to exit being looked after where it is safe to do so and the right care plan for them. There has in recent months been more children exiting care than have become looked after, suggesting that along with the stabilising of the looked after children rate, we may be 'turning the curve' on the demand for children to be looked after.



7.120 Child ceasing to be Looked After by the LA rate in March 2023 was 27/10,000 child population. Current rate for children ceasing to be looked after is 38/10,000. This increase shows excellent progress in ensuring children's plans are completed and they can stop being looked after. Stepping Stones alongside the focused work on concluding care proceedings has led to this positive increase. There is an expectation that the project focused on concluding Special Guardianship conversions and Placement with Parents discharges will add to this progress, as the assessments are completed and the applications are starting to be lodged with the court. Ensuring plans are completed is central to the work to stabilise and reduce the children looked after numbers.

7.121 Children Looked After ‘as at a date’ rate is down from 127 per 10,000 at end Sep to 122 per 10,000 at end Dec, and Actual Child looked After in Shropshire numbers in this period are down from 746 to 724. This is in the context of us continuing to take a significant number of Unaccompanied Asylum-Seeking Children from the National Transfer scheme (mandatory).

7.122 78% of children looked after are cared for within family settings. Ensuring that we meet children’s needs wherever possible by them being cared for in families. 11% are living at home with their parents; this cohort of children are being reviewed and those where care orders can be discharged are being progressed.

7.123 89% of children looked after are subject to a court order, indicating the complexity and seriousness of the harm that children experience. This reflects that the court has agreed that harm has been experienced and that children need the protection of the Local Authority to ensure they are cared for safely.

7.124 Grouped placement types of current CLA

Placement Type	Total	% of total
Foster Placement - other	278	39%
Foster Placement with relative or friend	202	28%
Residential	110	15%
Placed with parents	76	11%
Regulated Supported Accommodation	30	4%
Placed for adoption	17	2%
Other	4	1%

Court Proceedings and PLO (pre-court work)

7.125 PLO (the escalation step prior to entering court proceedings) has previously been identified as an area of focus by Ofsted and as a result, there has been a focused area of work undertaken around improving this. Children and families are now entering PLO earlier in their Child Protection Plan and this means that we have more opportunities to work with families to make and maintain the changes needed to keep their children safe. It also means that when we do have to go into court, we are concluding proceedings more quickly because we have already done a lot of the work in PLO.

7.126 The data shows that more children are now being escalated into PLO with 177 children in 99 families entering PLO during 2024 compared to 107 children in 63 families in 2023. We have achieved this by increasing senior management and legal oversight via case discussions and Legal Panel Meetings – in 2024 there were 305 Legal Panel Meetings held versus 192 in 2023.

7.127 The data also shows that more families are successfully ending PLO without requiring escalation into court – in 2023, 37 children in 21 families stepped out of PLO (15 children were later issued on) whereas in 2024, this number was 73 children in 39 families (7 children were later issued on). This shows that we are working more effectively with families in PLO to make changes and keep children safe within their own families. This evidences an increase in children avoiding coming into long term care of the authority.

Court Proceedings

7.128 One of the areas of pressure in demand is that of court proceedings and the increase in the number of court proceedings being issued and worked through. In recent years we have seen a significant increase in the complexity of issues facing families, alongside the complexity of some large sibling groups. The work expected by the court is significant and timescales are stringent. There has been a real focus on improving court cases being completed within the 26 weeks and the court system has recognised the significant progress Shropshire has made with this in the last 2 quarters.

7.129 At the time of writing there were 150 children in 86 families in active court proceedings; with 22 children in 11 families waiting to be issued.

7.130 Snapshot of current data: - out of the 150 children currently in live care proceedings, **110 children in 61 families** commenced proceedings since 1st April 2024. There are **159 children in 95 families** who have concluded proceedings since 1st January 2024 to date. This is a clear demonstration of the decrease in new proceedings being issued – and more families stepping down through the pre-court work (PLO).

7.131 The National timescale for all parties concluding care proceedings is 26 weeks, the new District Judge has had a refocus on this being achieved since coming into post, Out of 159 children, 35 concluded within 26 weeks (since 1st Jan 2024). Following this, 77 children concluded within 27-52 weeks (since 1st Jan).

7.132 When court proceedings go over 52 weeks, although there are many reasons this can happen, often complexity led, it does impact on case progression, includes an element of delay and impacts on caseloads overall. So far this year 47 children concluded – 53 weeks and above (since 1st Jan).

7.133 The issue of larger sibling groups has been highlighted previously, this year we have issued on 98 families since 1st January to date, 18 families that have been issued on have sibling group of 3 children or more. So approximately 20% of families have 3 children or more.

7.134 Moving on to look at how many court cases that have progressed and concluded this year, the below table sets out this data over the previous three quarters as well as the current figure likely for quarter four –

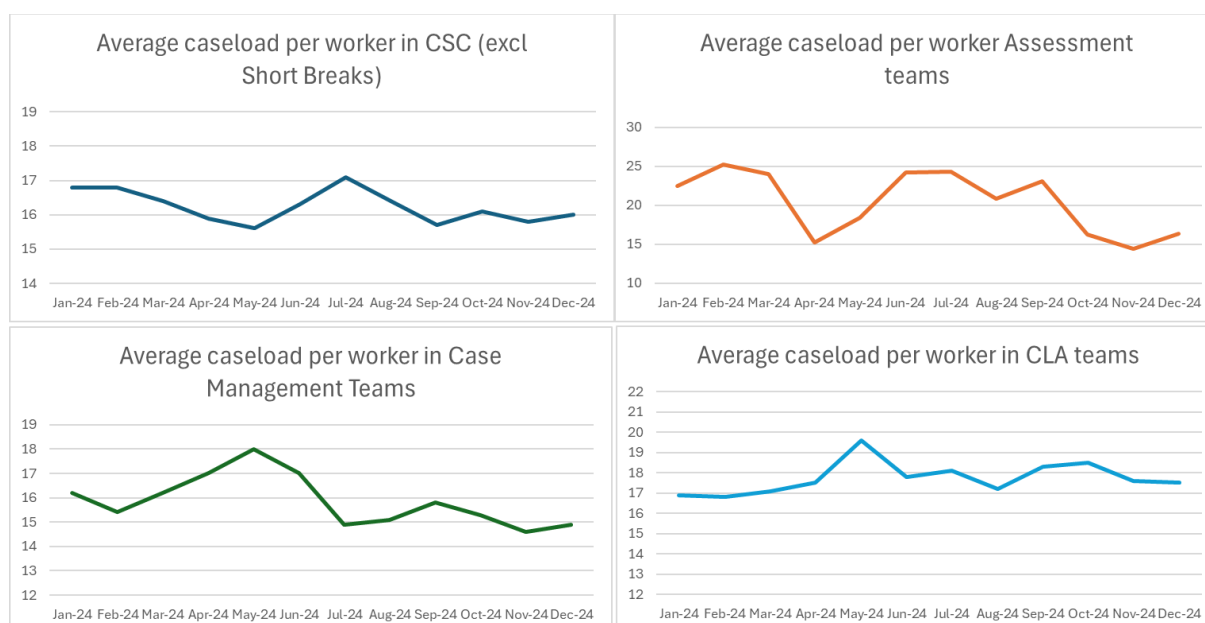
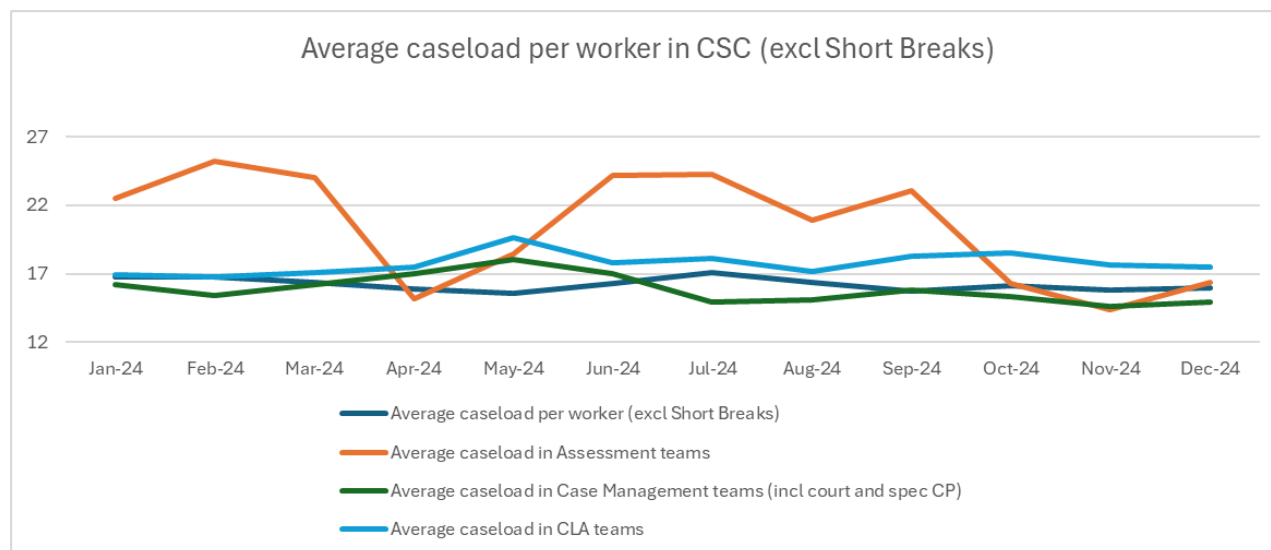
2024-2025	Children concluded court proceedings	Families concluded court proceedings
Q1	45	25
Q2	45	33
Q3	93	54
Q4	Predicted 63	Predicted 33

7.135 By comparison looking at children concluded in past 2 years – during the financial year 2023-2024, we concluded 161 children in 89 families, compared to financial year 2022-2023 when we concluded 134 children in 80 families. Therefore, over the first 3 Quarters the teams have already concluded significantly more children during 2024-2025 than in all four quarters of the last two financial years.

7.136 It can be seen from these figures that the activity in relation to Care Proceedings, some of our most complex work, is significant and progress has been made in the progression and conclusion of proceedings. This is the result of a range of measures from the Judges' approach and decision making, the improvement of management oversight and decision making and the court regional Trailblazer project that is working with all parties in the court arena and offering high quality training to all the different participants.

Caseloads of Qualified, case holding social workers.

7.137 This data demonstrates the progress in relation to the average caseloads of qualified case holding social workers in the statutory function teams of Assessment, Case Management & court and Children looked after. It does not cover the data for other qualified roles case holding different caseloads, such as fostering, adoption, care leavers.



7.138 The above graphs show the overlaid trajectory of the Teams, demonstrating the variance of the work in the assessment teams and how quickly the allocations per worker position can change. This has a significant impact especially if posts are vacant or there is annual leave / sickness in those teams. Children cannot (and are not) unallocated. The assessment teams have also been adversely impacted this year by delayed transfers from Assessment to Case Management. Managers have worked hard to address this area of practice.

7.139 Overall caseloads are gradually reducing and are within tolerable parameters. The data shows the average caseloads. The aspiration is that social workers hold 15-18 children, depending on complexity, number in court proceedings, size of sibling group, distance to visit etc. Newly Qualified social workers in their first year (ASYE) are initially capped at 10 children and go up to around 15 during that first year, as we have a number of ASYE's it does impact the average calculation. We have a few workers with 18-20 children allocated, there is management oversight of these work

loads and conversations are had with workers to progress work such as closures, transfers etc.

7.140 The progress in reducing caseloads over time is positive and supported by the reduction of work coming into the front door and the children exiting care.

8. Conclusions

- 8.1 Performance across the directorate continues to improve and action plans are in place where performance remains challenging.
- 8.2 Take up of Early Years entitlements for all ages remains strong and we are confident that we will meet our sufficiency duties for the requirements for 9 month olds by September 25.
- 8.3 Positive indicators are evident for the percentages of families securing a preferred primary and secondary school, including those securing their first preference. All of these indicators place the performance of Shropshire above the national averages and in a strong position against statistical neighbours.
- 8.4 The return of In-Year Admissions to LA control from September 24 continues to have a positive impact on ensuring the movement of children and young people between school is timely and managed consistently for families.
- 8.5 Positive improvements can be noted in attendance, suspensions and exclusions for all children and young people in Shropshire using indicative data for the 2023/24 and the Autumn term 2024/25. Positive impact of the Shropshire Virtual School supporting strong education outcomes for Children Looked After, including securing stable placements and no permanent exclusions continuing this positive trend. This was recognised by Ofsted in the Focussed Visit in July 24. The strong practice in the Virtual School is being used to inform the development of practice for all children supported by the education access teams.
- 8.6 Positive improvements in service delivery continue to deliver a reduction of 16 – 17-year-old young people (Year 12 or 13) who are NEET or 'not known' to levels better than national and statistical neighbours.
- 8.7 Governance arrangements through the SEND and AP Partnership Board are leading to improvements in the quality of EHC plans and challenging delays in the EHCP assessment and review process. This work is also being monitored by the DfE and NHSE England through the Accelerated Progress Plan (APP).
- 8.8 Increased capacity for more specialist provision has been delivered by September 24 through expansion of the mainstream SEND Hub programme, with further expansion planned. However, there remain challenges with securing some placements for children and young people, particularly with the most complex needs and movers into Shropshire where limited information is known or available.
- 8.9 Increased demand for EHC plans has increased pressure on services and education providers across Shropshire, however we should also see a corresponding increase in children and young people having their needs met and achieving positive outcomes.

- 8.10 In Childrens Social Care we are seeing the start of the evidence of impact of the recent investment in Early Help and Stepping Stones, coupled with the focus on development of management oversight and progress of work in the court system to progress cases to conclusion, we are starting to see a shift in demand. It is important, when managing demand in children's social care, that there is a focus on progression and completion of work to ensure that children's outcomes are met but that also workloads can be managed. It is early stages and could easily be influenced by sudden increases in work coming in, sickness, changes in staffing etc, but the current trends identified in this report showing that incoming demand is decreasing, exiting activity is increasing and the most complex work in the system is progressing and concluding in a more timely way, that the 3 elements combined are seeing demand being managed and reduced. The next challenge is to continue to work with partners to become involved in the more complex situations at an earlier stage. In Quarter 4 there is a partnership wide workshop being hosted by The Director of People with partners called 'Turning the Curve' and aimed at engaging partner agencies at all levels to strengthen the partnership working across the children's system to enable more children to be effectively diverted from statutory interventions.
- 8.11 In Adult Social Care managing demand and activity levels to improve outcomes across the service remains a priority. We have maintained no wait times for safeguarding, financial assessments, preparing for adulthood, carers and mental health services. We are continuing to manage wait times to our community teams, OT, sensory team through robust RAG rating and targeted actions. They have seen a reduction in wait times because of this work but require ongoing monitoring and action.
- 8.12 The reviews performance is currently on track to meet its target, and this work must be managed to reduce waits in addition to managing the wait times for people presenting to the service.
- 8.13 Hospital Discharge varies in demand coming through to the service. The team are supporting more people to return to their home following discharge, improving outcomes and reducing the time from referral to planned discharge.
- 8.14 There have been positive developments in the work across Preparing for Adulthood and the introduction of the new Learning Disability and Autism team with transition plans in place to the end of the financial year. The aim of the service to maximise independence, reduce inequalities, improving care and support, reducing hospital admissions, and facilitating discharge planning.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

Local Member:

Appendices

Appendix 1 Shropshire Education Dashboard Feb 2025
