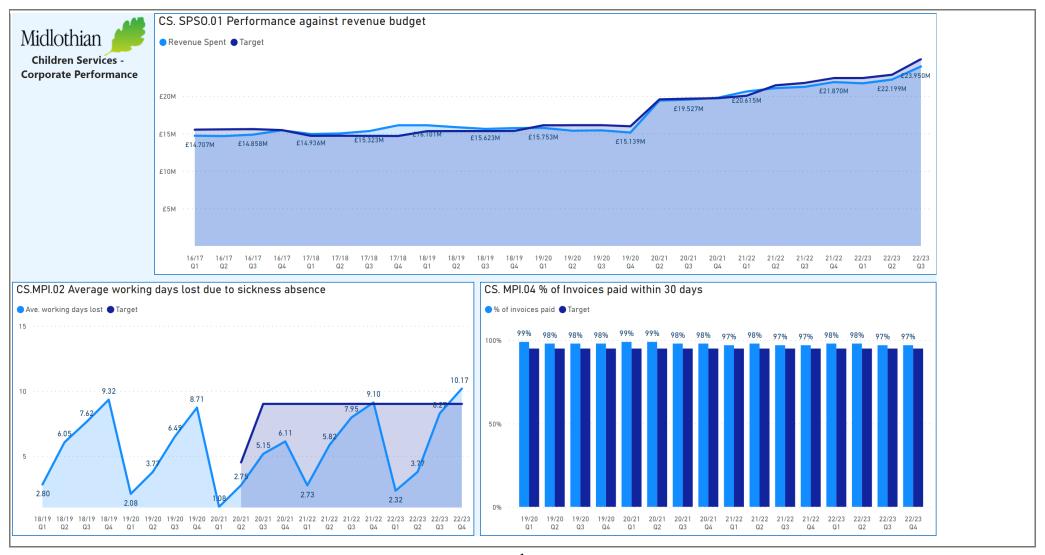
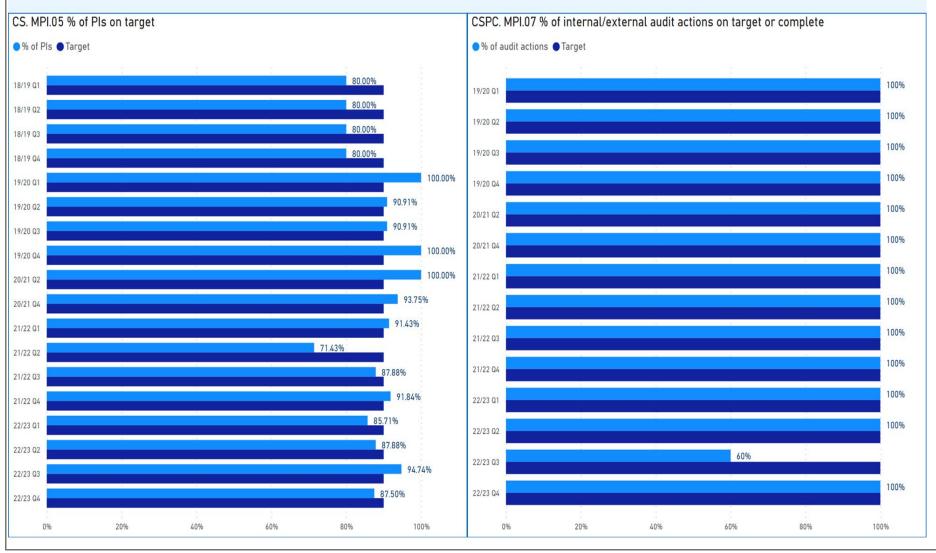
Children's Services, Partnership and Communities Performance Report 2022/23



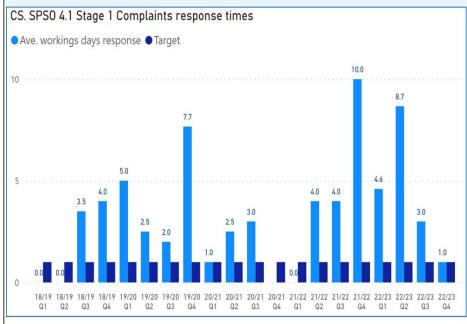


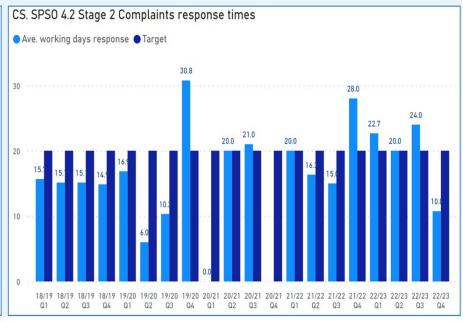












01. Progress in delivery of strategic outcomes

GIRFEC Service Priority: More children and young people are safe, healthy and resilient

Priority Action 1: Develop a Midlothian Whole Family Support Service

Progress and Achievement in Q4

• The team are in place however still a significant amount of development work to be undertaken to ensure we are utilising the service towards holistic family support at the earliest point of contact.

Plans for improvement next year ahead

- Undertake a full review of 3rd sector support which will be available to enhance this service so that we have a menu of options of support for families
- Ensure that we have a self evaluation plan in place that will evidence the impact of supporting families at the earliest point of access
- Develop a single point of access

Performance Indicator	Due Date	Target	Baseline (previous data)	Q1	Q2	Q3	Q4
Funding and resources are in place for 23/24	31/03/23	New Measure	0		12 staff recruited	All staff in place	All staff in place

Priority Action 2: Increase the number of families who benefit from Family Systemic work

Progress and Achievement in Q4

- Achievements being that workers are now trained in NVR (non-violent resistance) and beginning to support parents using coaching methods in NVR.
- Continue to manage the waiting list to keep it to a minimum
- Support to help families to improve relationships and communication. Feedback from family- 'it was better than I expected as I want sure what to expect... it was bringing the family together, identifying ideas for helping, feeling heard.'

Plans for improvement next year ahead

- Currently writing an update on the benefits of having a second worker in systemic work. However uncertainty exists about whether this post will retained or the person will return to their substantive post.
- Another member of the EIP team is due to start their systemic family training at foundational level in September 23

Performance Indicator	Due Date	Target	Baseline (previous data)	Q1	Q2	Q3	Q4
17 new families	31/03/23	17	12	4	5	29	17

Priority Action 3: Promote the use of Self-Directed Support (SDS) amongst families using services

Progress and Achievement in Q4

• We continue to make significant progress in this area of work with families having the option of us supporting the or making their own decisions about what support looks like.

Plans for improvement next year ahead

- Consolidate our learning over the past year and develop a team that is skilled and competent in what is a growing area of need
- Develop a menu of options that offer support to children and their families who have additional support needs

Performance Indicator	Due Date	Target	Baseline (previous data)	Q1	Q2	Q3	Q4
Increase by 10% the							
number of families who	31/03/23	75	68		46	67	87
organise their own support							

Priority Action 4: Further develop the supports offered to Family Group Decision Making and Kinship supports

Progress and Achievement in Q4

• The pace of growth in this area of work is a good example of us intervening earlier with families and more importantly empowering them to find their own solutions. The team has a skilled workforce who are fully committed to offering a service that is respectful and works in partnership with families to manage risk in often very complex situations.

Plans for improvement next year ahead

- To secure funding for permanent posts as most of the staff are funded via short term funding applications.
- To develop the service so that FGDM is core to all the work we undertake in children's services.
- To develop the service so that we can further support our kinship carers as and when they require this.

Performance Indicator	Due Date	Target	Baseline (previous data)	Q1	Q2	Q3	Q4
Number of families who are referred to Family Group Decision Making	31/03/23	increase 21/22	79		32	59	82
Number of families who participate in Family Group Decision Making	31/03/23	Increase 21/22 figs by 10%	32		16	24	42
The number of assessments by kinship worker	31/03/23	increase 21/22 fig by 15%	14		4	6	6
Percentage of kinship carers who attend engagement sessions	31/03/23	80% of Kinship carers one event	New Measure		0	0	N/A
Reduce the number of CEYP who enter homeless accommodation vs other suitable accommodation	31/03/23	2			N/A	N/A	N/A
Number of CEYP living with Foster Carers on After Care arrangement post 21 years	31/03/23	3	New Measure		N/A	N/A	1
Increase number of young people in the National Housing Project	31/03/23	10-12	New Measure		N/A	N/A	27
Average age of young people in Continuing Care	31/03/23	Age 18	New Measure		N/A	N/A	18

Priority Action 5: Develop a pathway for children and families to navigate mental health services

Progress and Achievement in Q4

 There had been an agreement 22/23 for CAHMS for give the LA £100k to develop a Single Point of Access. Due to staffing issues within our service this didn't progress and CAHMS have now withdrawn the funding for this piece of work.

Plans for improvement next year ahead

- Develop a Single Point of Access that will be led by CAMHS rather than the LA
- Continue to improve options for C&YP to access mental health services at the earliest point of need.

Performance Indicator	Due Date	Target	Baseline (previous data)	Q1	Q2	Q3	Q4
1 x Single Point of Access in place (SPOA)	31/03/23	New Measure	0		N/A	N/A	N/A

Priority Action 6: Strengthen mechanisms to support families maximise their income

Progress and Achievement in Q4

• There has been significant work over the year supporting families to access benefits/additional funding which they are entitled to, in order to ease the pressure of the cost of living crisis

Plans for improvement next year ahead

- Continue to offer this support in a flexible way that meets the needs of families
- Further work to be undertaken regarding referrals received when families have had 3 offers of support from the Scottish Welfare Fund, we need to develop a pathway that keeps them away from statutory services and identify what other offers of support they can access.

Performance Indicator	Due Date	Target	Baseline (previous data)	Q1	Q2	Q3	Q4
Number of families offered an income assessment	31/03/23	90	60		27	45	68

Priority Action 7: Children, young people and their families experience high quality services

Progress and Achievement in Q4

 We have had our inspection of our children's residential houses where we received 'Very Good' grades which is a magnificent achievement.

Plans for improvement next year ahead

- Ensure we maintain a high standard of care in all our services
- Foster care recruitment will be a focus of work in the coming year, as there is a local and national shortage of foster carers.

Performance Indicator	Due Date	Target	Baseline (previous data)	Q1	Q2	Q3	Q4
Local Adoption Service will provide high quality care and support	31/03/23	Care inspection Grading of GOOD	New Measure		N/A	N/A	N/A
Local Fostering Service will provide high quality care and support	31/03/23	Care inspection Grading of GOOD	New Measure		N/A	N/A	N/A
Local Continuing Care/Adult services will provide high quality care and support	31/03/23	Care inspection Grading of GOOD	New Measure		N/A	N/A	N/A
Hawthorn Family Learning Centre will provide high quality care and support	31/03/22	Care inspection Grading of GOOD	New Measure		N/A	N/A	N/A
Young People's Care Homes will provide high quality care and support	31/03/22	Care inspection Grading of GOOD	New Measure		N/A	VERY GOOD	N/A

Priority Action 8: Children and young people are supported to develop a strong sense of their own identity

Progress and Achievement in Q4

• We gather qualitative and quantative information regularly which supports our ethos of ensuring C&YP develop a strong sense of their own identity.

Plans for improvement next year ahead

 Continue to train staff and carers to better understand life story work and the impact this has on C&YP lives

			Baseline				
Performance Indicator	Due Date	Target	(previous data)	Q1	Q2	Q3	Q4
Staff are trained and	31/03/23	20	16		N/A at this	12	
understand Life Story work	31/03/23	20	10		time		

Priority Action 9: Children and young people are supported by staff who understand the importance of trauma informed practice

Progress and Achievement in Q4

Roll out of trauma informed practice for all staff across the service

Plans for improvement next year ahead

• Ensure that trauma informed practice is embedded in all our work and our meetings with families

Performance Indicator	Due Date	Target	Baseline (previous data)	Q1	Q2	Q3	Q4
Staff are trained in using a trauma informed approach		20	15		N/A at this time	N/A at this time	N/A at this time

Children's Services, Partnership and Communities PI summary

01. Manage budget effectively

Priorities	Indicator	2021 /22	Q4 2021 /22	Q1 2022 /23	Q2 2022 /23	Q3 2022 /23	Q4 2022 /23			2022/23		Annu al Targ	Feeder Data	Value	
Priorities	mulcator	Valu e	Valu e	Valu e	Valu e	Valu e	Valu e	Valu e	Statu s	Note	Short Tren d	- 4	reedel Data	value	
01. Manage budget effectively	Performance against revenue budget	870	£21. 870 m	£21. 703 m	£22. 199 m	£23. 950 m	£18. 795 m	£18. 795 m		22/23: £248,392 underspend		£19. 044 m			

02. Manage stress and absence

Priorities Indicator		2021 /22	Q4 2021 /22	Q1 2022 /23	Q2 2022 /23	Q3 2022 /23	Q4 2022 /23			2022/23		Annu al Targ	Feeder Data	Value
		Valu e	Valu e	Valu e	Valu e	Valu e	Valu e	Valu e	Statu	Note	Short Tren d	et 2022 /23	reedel Data	value
02. Manage	Average number of working days lost						10.1	10.1		Q4 22/23: Off Target			Number of days lost	1,815. 8
stress and absence	due to sickness absence (cumulative)	9.10	9.10	2.32	3.77	8.27	7	7		Further work to be done with additional data	•	9.00	Number of FTE in service	178.55

03. Process invoices efficiently

Priorities Indicator		2021 /22	Q4 2021 /22	Q1 2022 /23	Q2 2022 /23	Q3 2022 /23	Q4 2022 /23			2022/23		Annu al Targ	Fooder Date	Value
Priorities	indicator	Valu e	Valu e	Valu e	Valu e	Valu e	Valu e	Valu e	Statu s	Note	Short Tren d		Feeder Data	value
03. Process	% of invoices paid within 30 days of	97%	97%	98%	98%	97%	97%	97%		22/23: On Target		95%	Number received (cumulative)	16,234
invoices efficiently	invoice receipt (cumulative)	9170	9170	90%	90%	9170	9170	9170		ZZIZS. OII Target			Number paid within 30 days (cumulative)	15,762

04. Improve PI performance

Duianitiaa	Indicator	2021 /22	Q4 2021 /22	Q1 2022 /23	Q2 2022 /23	Q3 2022 /23	Q4 2022 /23			2022/23		Annu al Targ	Feeder Data	Value
Priorities	indicator	Valu e	Valu e	Valu e	Valu e	Valu e	Valu e	Valu e	Statu s	Note	Short Tren d	et 2022 /23	reedel Data	value
04. Improve	% of Service PIs that are on target/ have reached their target.		91.8 4%	85.7 1%	87.8 8%	94.7 4%	91.8 9%	91.8 9%		22/23: On Target	1		Number on tgt/complete or Data Only	34
performance	(does not include Corporate PIs)	4 70	4 70	1 70	0 70	4 70	370	370					Total number of PI's	37

05. Control Risk

D :	In diameter	2021 /22	Q4 2021 /22	Q1 2022 /23	Q2 2022 /23	Q3 2022 /23	Q4 2022 /23			2022/23		Annu al Targ	Facility Data	Value
Priorities	Indicator	Valu e	Valu e	Valu e	Valu e	Valu e	Valu e	Valu e	Statu s	Note	Short Tren d		Feeder Data	Value
05. Control Risk	% of high risks that have been reviewed in the last quarter	100	100 %	100	100	100	100 %	100	②	22/23: All High risks have been reviewed	_	100	Number of high risks reviewed in the last quarter	2
	·												Number of high risks	2

06. Implement Improvement Plans

Priorities	Indicator	2021 /22	Q4 2021 /22	Q1 2022 /23	Q2 2022 /23	Q3 2022 /23	Q4 2022 /23			2022/23		Annu al Targ	Feeder Data	Value
Priorities	mulcator	Valu e	Valu e	Valu e	Valu e	Valu e	Valu e	Valu e	Statu s	Note	Short Tren d	1 .	reedel Data	value
06. Implement Improvement	% of internal/external audit actions progressing on	0%	100 %	100	100	60%	100	100		22/23: On Target		90%	Number of internal/extern al audit actions on target or complete	10
Plans	target or complete this quarter.												Number of internal/extern al audit actions	10

Children's Services, Partnerships and Communites Complaints Indicator Summary

Commitment to valuing Complaints
4. Outcomes and Customer Feedback

Indicator	2021/ 22	Q4 2021/ 22	Q1 2022/ 23	Q2 2022/ 23	Q3 2022/ 23	Q4 2022/ 23			2022/23		Annua I Target
	Value	Value	Value	Value	Value	Value	Value	Status	Note	Short Trend	2022/
Number of complaints received (quarterly)	24	6	12	18	12	13	55		22/23: Data Only		
Number of complaints closed in the year	24	6	11	11	7	5	34		22/23 : Data Only	1	
Number of complaints upheld (quarterly)	2	0	0	0		2	3	4	22/23 : Data Only	1	
Number of complaints partially upheld (quarterly)	9	3	6	2	1	3	12		22/23 : Data Only	1	
Number of complaints not upheld (quarterly)	9	3	1	1	4	1	4		22/23 : Data Only	₽	
Number of complaints Resolved (quarterly)	4	0	3	2	1	2	8		22/23 : Data Only	1	
Average time in working days to respond to complaints at stage 1	4.86	10	4.6	8.67	3	1	5.09		22/23: On Target	₽	5
Average time in working days to respond to complaints at stage 2	20	28	22.67	20	24	10.75	18.45	②	22/23: On Target	1	20
Average time in working days for a full response for escalated complaints	18.1	18.75	22.67	14.71	36	0	20	②	22/23: On Target	₽	20
Percentage of complaints at stage 1 complete within 5 working days	71.43 %	0%	80%	33.33	100%	100%	72.73 %		Annual figure has been affected by staffing issues for this responsibility in Q2, since then figures have been on target for the preceding quarters.	•	95%
Percentage of complaints at stage 2 complete within 20 working days	71.43	0%	66.67 %	100%	33.33	100%	72.73 %		22/23: Off Target Annual figure has been affected by staffing issues for this responsibility in Q3, since then figures have been on target for Q4.	•	95%
Percentage of complaints escalated and complete within 20 working days	90%	75%	0%	85.71 %	0%	100%	50%		22/23: Off Target Annual figure has been affected by staffing issues for this responsibility in Q3, since then figures have been on target for Q4.	•	95%
Number of complaints where an extension to the 5 or 20 day target has been authorised (quarterly)			0	1	1	0	2		22/23: Data Only	1	
Number of Compliments	1	0	0	1	1	0	2		22/23: Data Only	1	

13

Quarterly Reporting CSPC

Pls - On Target

Quarterly Reporting CSPC
Pls - Off Target

36

Quarterly Reporting CSPC
Pls - Data only

Quarterly Reporting CSPC
Pls - No Data

Quarterly CSPC Service All Risks

Quarterly CSPC Service High Risks

terly Reporting Pls - Off Target						
. Code & Title	Gauge	Value	Target	Next Update Due	Last Update	History
22/23.CSPC.4e Number of CEYP living with Foster Carers on After Care arrange	ment ent	1	3	01 Jul 2023	2022/23	
BS.CSPC.LPI.04 Child Protection: % of Core Group meetings held within a 8 week	ek p	99%	100%	01 Jul 2023	Q4 2022/23	
BS.CSPC.LPI.05 Child Protection: % of Core Group meetings held within 15 days	s fo	89%	100%	01 Jul 2023	Q4 2022/23	
CSPC.MPI.02 Average number of working days lost due to sickness absence (cu	mul	10.17	9.00	01 Jul 2023	Q4 2022/23	
CS.SPSO.04.1 Average time in working days to respond to complaints at stage 1		5.091	5	01 Jul 2023	2022/23	
CS.SPSO.05.1 Percentage of complaints at stage 1 complete within 5 working da	ys	72.73%	95%	01 Jul 2023	2022/23	
CS.SPSO.05.2 Percentage of complaints at stage 2 complete within 20 working of	ays	72.73%	95%	01 Jul 2023	2022/23	
CS.SPSO.05.3 Percentage of complaints escalated and complete within 20 worki	ng	50%	95%	01 Jul 2023	2022/23	

Children's Services, Partnership and Communities PI Report



PI Code	PI	Q4 2021/22	2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23				2022/23	Annual
Pi Code	PI	Value	Value	Value	Value	Value	Value	Value	Status	Short Trend	Note	Target 2022/23
	Funding and resources are in place for 23/24 for a whole family support service				12	12	12	12			22/23: On Target	12
22/23.CSPC .2	Number of families who benefit from Family Systemic Work	15	15	4	17	29	17	17			22/23: On Target	17
22/23.CSPC .4a	Number of families who a referred to Family Group Decision Making				32	59	82	82		•	22/23: On Target A further 23 families were referred to Family Group Decision Making in Q4	80
22/23.CSPC .4b	Number of families who participate in Family Group Decision Making				16	24	42	42			22/23: On Target	35
22/23.CSPC .4c	The number of assessments by kinship worker				4	10	16	16	②	•	22/23: On Target 6 in Q4, 16 so far this year. Kinship worker has been seconded into team	16
22/23.CSPC	Percentage of kinship carers who attend engagement sessions				0	0	0	0	_	_	22/23: Off Target Kinship carer engagement event had been planned with a focus on trauma. Unfortunately this had to be cancelled due to low numbers	80

PI Code	PI	Q4 2021/22	2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23				2022/23	Annual Target
1 1 Code		Value	Value	Value	Value	Value	Value	Value	Status	Short Trend	Note	2022/23
22/23.CSPC .4e	Number of CEYP living with Foster Carers on After Care arrangement				N/A	N/A	1	1			22/23: Off Target	3
22/23.CSPC .4f	Increase number of young people in the National Housing Project				N/A	N/A	27	27		_	22/23: On Target	12
22/23.CSPC .4g	Average age of young people in Continuing Care				N/A	N/A	18	18		-	22/23: Data Only	
	Number of CEYP who enter homeless accommodation vs other suitable accommodation	1	1		N/A	N/A	N/A	N/A			22/23: Data not available This information will be available later in the year.	
	1 x Single Point of Access in place (SPOA)				N/A	N/A	N/A	N/A			22/23: Data not available Progress and Achievement in Q4 • CYP mental health strategic planning group has continued to meet Plans for improvement next Quarter and year ahead • New chair of CYP mental health strategic planning Group Single to be identified • Single point of Access to be developed. This is a significant but important piece of work that has been delayed due to staff shortages and capacity issues.	
22/23.CSPC .6a	Increase number of families offered an income assessment	68	68		27	45	68	68		-	22/23: On Target	
22/23.CSPC .7a	Care inspection Grading of GOOD - Local residential care homes	N/A	N/A		N/A	N/A	N/A	N/A		-	22/23: N/A No Inspections have been completed post COVID. Improvement plans are in place for all services.	

PI Code	PI	Q4 2021/22	2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23				2022/23	Annual
Fi Code	FI	Value	Value	Value	Value	Value	Value	Value	Status	Short Trend	Note	Target 2022/23
22/23.CSPC .7b	Hawthorn Family Learning Centre will provide high quality care and support				N/A	N/A	N/A			-	22/23: N/A No Inspections have been completed post COVID. Improvement plans are in place for all services.	
22/23.CSPC .7c	Care inspection Grading of GOOD - Adoption services	N/A	N/A		N/A	N/A	N/A			-	22/23: N/A No Inspections have been completed post COVID. Improvement plans are in place for all services.	
22/23.CSPC .7d	Care inspection Grading of GOOD - Fostering services	N/A	N/A		N/A	N/A	N/A				22/23: N/A No Inspections have been completed post COVID. Improvement plans are in place for all services.	
	Care inspection Grading of GOOD - Local Continuing Care/Adult services	N/A	N/A		N/A	N/A	N/A			-	22/23: N/A No Inspections have been completed post COVID. Improvement plans are in place for all services.	
22/23.CSPC .8a	Number of staff trained to understand Life Story work	16	16	0	N/A	12	28	28			22/23: On Target A further 12 workers were trained in 22/23.	20

Children's Services, Partnership and Communities Risks



Code & Title	Risk Control Measure	Risk Identification	Risk Eval uatio n	Related Action	Related action latest note	Current Risk Matrix	Risk Score	Service
LEP5.6 Ensure staff levels for the operational delivery of employability programmes is sufficient including funded programmes						Impact	16	Children's Services, Partnership and Communities
MC43-08 Workforce capacity		Availability of people that can be recruited to fill posts required by the legislation, both during training regarding the legislation and in the longer term as a result of the additional duties, e.g. additional health visitors, teaching and administrative staff, early learning and childcare. There is a lead-in time between recruiting staff and them fulfilling their duties, while they are learning their role and/or studying for qualifications. Failure to				Impact	16	Children's Services, Partnership and Communities

Code & Title	Risk Control Measure	Risk Identification	Risk Eval uatio n	Related Action	Related action latest note	Current Risk Matrix	Risk Score	Service
		recruit new employees or cover training could disrupt preparations and delay implementation/compliance. Potential impacts include additional pressures on existing staff, corners being cut, reduction in quality of care, warning signs being missed. Delay in implementing could result in judicial review.						
SRP.RR.14.1 Scottish Child Abuse Inquiry	The Council have set up an Abuse Inquiry Project Team to support the Council to prepare for information requests to support the Inquiry. In addition we have a Claims Project Team who have mapped out how we shall manage any future claims reported against the Local Authority. The Inquiry Team have established a Project Plan covering: 1. Residential establishments, List D Schools and Foster Carers: identifying Children's homes, Foster Carers and any List D Schools in Midlothian over the last 100 years and researching historic records.	Risk Cause: Midlothian Council and its legacy organisations, predating the creation of Midlothian Council in 1996, have been involved in the provision of care of children going back to living memory. During this time there is the likelihood that the care children received fell below standards of care now in place. There is the further potential the some people in the care of Midlothian Council and its legacy organisations were subject to abuse by those who were employed to care for them. Risk Event: The Scottish Government began an Inquiry into cases of Child Abuse occurring prior to 17 December 2014, the intention of this enquiry is to identify historic case of abuse which		Foster Care and Residential Care File Review	Q3 22/23: Inquiry has heard all the evidence for the Sct 21 submissions around foster care. Many CSWO's were called to give evidence around abuse within their local authority. Midlothian CSWO was not called to give evidence. This part of the inquiry is now concluded with learning from this due to be written up by around March 2023. The learning will result in an action plan being developed which we shall consider and ensure that our policies and practice are updated accordingly.	Impact	16	Childrens Services, Partnership and Communities

Code & Title	Risk Control Measure	Risk Identification	Risk Eval uatio n	Related Action	Related action latest note	Current Risk Matrix	Risk Score	Service
	and electronic recordkeeping systems to identify relevant records and map them to residential establishments. This also includes, where possible, noting the Council's historic recordkeeping policies, such as retention schedules. 3. Cataloguing/Indexing: checking and updating existing recordkeeping systems for accuracy and consistency, enabling effective information retrieval when requested by the Inquiry. The Project Team have established a Project Plan covering: 4. Ascertaining the succession and insurance position in relation to potential historic child abuse claims. 5. Ascertaining and agreeing Midlothian Council's legal position/	The most recent Section 21 notice around the Foster Care Case Study is a significant piece of work. The request for information from 1930 to date is very challenging given the volume of files that require to be read and analysed. Risk Effect: If the inquiry finds historic cases of abuse in Midlothian this could damage the reputation of the Council and could place doubt in the eyes of the public as to the safety of these currently in care. There is significant scope for a substantial financial impact arising from claims of historic abuse. Some existing employees may be affected by the inquiry and subsequent claims of abuse. We have request an extension for Parts B, C & D of the last Section 21 to April 2020, which has been granted.						

Code & Title	Risk Control Measure	Risk Identification	Risk Eval uatio n	Related Action	Related action latest note	Current Risk Matrix	Risk Score	Service
	claims be made against the council. 7. Consideration to identifying if additional staffing will be required as expected deluge of FOI's SAR's in 2018 from solicitors of potential claimants. 8. Project team is in place with project plan with a range of identified actions which are being progressed. Monthly meetings to progress project plan. 9. The SCAI Social Worker is very competent and experienced in this area of work and provides quarterly updates on their findings from the file read. This is a real strength within this area of work. The CSWO and Principal Solicitor meet regularly with the social worker to discuss findings from the file read.							

Published Local Government Benchmarking Framework - Children's Services



Children's Services

Code	Title	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	External Comparison
		Value	Value	Value	Value	Value	Value	
CHN8a	Corporate Indicator - The Gross Cost of "Children Looked After" in Residential Based Services per Child per Week (LGBF)	£3,043.27	£4,105.31	£3,877.29	£4,268.22	£6,890.53	£6,509.46	20/21 Rank 31 (Bottom Quartile) 19/20 Rank 19 (Third Quartile) 18/19 Rank 11 (Second Quartile) 17/18 Rank 22 (Third Quartile) 16/17 Rank 8 (Top Quartile)
CHN8b	Corporate Indicator - The Gross Cost of "Children Looked After" in a Community Setting per Child per Week (LGBF)	£365.72	£373.37	£354.16	£362.23	£498.43	£466.60	20/21 Rank 26 (Bottom Quartile) 19/20 Rank 19 (Third Quartile) 18/19 Rank 17 (Third Quartile) 17/18 Rank 21 (Third Quartile) 16/17 Rank 19 (Third Quartile)
CHN9	Balance of Care for looked after children: % of children being looked after in the Community (LGBF)	89.19%	90.99%	90.37%	91.12%	92.44%	92.44%	20/21 Rank 9 (Second Quartile) 19/20 Rank 10 (Second Quartile) 18/19 Rank 13 (Second Quartile) 17/18 Rank 11 (Second Quartile) 16/17 Rank 15 (Second Quartile)
CHN22	Percentage of child protection re-registrations within 18 months (LGBF)	7.75%	7%	8.93%	3.19%	2.41%	3.45%	20/21 Rank 13 (Second Quartile) 19/20 Rank 8 (Top Quartile) 18/19 Rank 23 (Third Quartile) 17/18 Rank 23 (Third Quartile) 16/17 Rank 24 (Third Quartile)
CHN23	Percentage LAC with more than 1 placement in the last year (Aug-July) (LGBF)	26.25%	26.18%	15.6%	16.82%	23.84%	20.3%	20/21 Rank 29 (Bottom Quartile) 19/20 Rank 9 (Second Quartile) 18/19 Rank 6 (Top Quartile)

Code	Title	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	External Comparison
		Value	Value	Value	Value	Value	Value	
								17/18 Rank 23 (Third Quartile) 16/17 Rank 25 (Bottom Quartile)
CHN24	Percentage of children living in poverty (After Housing Costs) (LGBF)	23.4%	23.8%	22.5%	23.9%	19.99%		20/21 Rank 17 (Third Quartile) 19/20 Rank 17 (Third Quartile) 18/19 Rank 15 (Second Quartile) 17/18 Rank 17 (Third Quartile) 16/17 Rank 19 (Third Quartile).