How do we know if children’s social care services make a difference? Development of an outcomes framework

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Foreword

I’ve been a senior manager now in Children’s Services for a long time. Currently, I am the Director of Children’s Services for Hampshire and the Isle of Wight councils. I also have the privilege of chairing the Standards, Performance and Inspection committee for the Association of Directors of Children’s Services.

For the whole of my career as a senior manager we have been looking for the ‘Holy Grail’ of a set of key performance indicators that would quickly tell us about the organisational health of the children’s social care system. The fact that we are still looking should tell us all that it really is quite complex and nuanced and that the search for easy answers is likely to be futile. More recently, I think that in the sector and in academia we have started to look at the information that we hold in a more rounded way, what Professor Munro termed the ‘intelligent use of data’. Increasingly, that has involved trying to capture simple questions requiring a lot of data and intelligence to answer satisfactorily.

Similarly, emerging Regional Improvement Alliances, consisting of local authorities working together for mutual improvement, are developing data sets that they are sharing with each other in order to benchmark.

This is all to the good and this project makes a further valuable contribution to the debate. I hope you won’t be disappointed if I say that it doesn’t provide us with the ‘the answer’. If the last twenty years have taught us anything it is that there is no one single answer. It is, though, an important first step on the journey – and as such I commend it to you.

Steve Crocker OBE
Director of Children’s Services, Hampshire County Council and Isle of Wight Council.
Summary

Do we know if children’s social care services make a difference?

Our study has found a consensus that children’s social care services (CSCS) need better evidence to make well-informed decisions about service planning and delivery, particularly given the increased pressures due to a rise in demand for CSCS at a time of declining resources.

A first step to improve the local evidence base has involved the development of an outcomes framework for CSCS. The framework presented in this report is based on the views of those who plan, deliver and use these services, as well as the research evidence.

The outcomes framework is meant to complement, rather than replace, national administrative data collected by the Department for Education (DfE). If the framework proves useful locally, consideration could be given to adapting it for use with partner agencies and aligning it with DfE and Ofsted data requirements. This would provide a more cohesive approach to our understanding of the effectiveness of CSCS and their impact on the lives of children and their families.

Developing an outcomes framework for CSCS

Deciding which outcomes should be measured to assess whether services have the intended impacts requires setting out: first, what changes for users are expected from these services (i.e. user outcomes); and second, how these changes can be achieved (i.e. intermediate outcomes).

Our findings show that monitoring intermediate CSCS outcomes would require addressing the following questions:

- Do CSCS leaders create the right conditions and the right culture to support good social work practice?
- Do CSCS reach the children and families who need their help, appropriately assess their needs and provide the level of support they require and are entitled to?
- Do children and their families feel valued and empowered by services and the support they receive?

Assessing whether CSCS achieve the expected outcomes for their users (i.e. children for whom they have a statutory responsibility) would require addressing the following questions:

- Are children in need safe where they live, both at home and in their community?
- Have they been supported by CSCS to be healthy and happy, that is achieve developmental, physical, cognitive, social and emotional milestones?
- Have they been supported by CSCS to make progress in education and to have positive educational experiences?

Figure 1: Mechanisms through which CSCS make a positive difference to the lives of children in need and their families

Leaders create the right conditions and culture that support good social work practice

CSCS reach children and families who need support, and offer them the level of support they are entitled to

Relationship based practice that values children and families and involves them in identifying the support they need

Children in need:
- Are safe where they live
- Are healthy and happy
- Progress in education and have positive experiences

Learning from the experience of staff, children and families
As indicated at the bottom of figure 1, our findings show a growing consensus that service planning and provision must be informed by the views and experiences of those who deliver and use services.

Our framework focuses on the work of CSCS and how to measure its effects. There are, however, other important influences to consider in analysing the data that would be generated by this framework, including:

- The context within which families live and services operate. Contextual influences to consider include the pressures of poverty, homelessness and other disadvantages, and how users from different socio-cultural backgrounds may receive a different response from agencies.

- The level of corporate support, which plays a key part in enabling CSCS to work effectively, primarily through the allocation of an adequate budget and by prioritising the needs of vulnerable children across departments.

- The role of other agencies in helping to identify children and families who need help from CSCS. Furthermore, while CSCS must be effective ‘service coordinators and advocates’, much of the input that can make a difference to children in need comes from other children’s services and from adult services their parents and carers require support from.

**What outcomes from CSCS should be measured?**

The following table shows in the last column the expected measurable outcomes for children, and in the other columns the intermediate outcomes necessary to achieve these ultimate goals. The outcomes framework covers all children in need i.e. children for whom CSCS have a statutory responsibility.
### Table 1: Outcomes from CSCS

<table>
<thead>
<tr>
<th>The right conditions and culture to support good practice</th>
<th>Reaching children and families who need help</th>
<th>Children and families are valued and involved</th>
<th>Child outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effective leadership</td>
<td>Partner agencies are able to identify children who are potentially in need</td>
<td>Children trust staff and have a stable and supportive relationship with them</td>
<td>Children are safe where they live (at home/placement and their community)</td>
</tr>
<tr>
<td>Commitment to social work values and ethics</td>
<td>Effective identification of children in need</td>
<td>Parents/carers trust staff and have a stable and supportive relationship with them</td>
<td>Children are settled and happy where they live</td>
</tr>
<tr>
<td>Culture that supports reflective learning</td>
<td>Effective identification of children at risk of harm</td>
<td>Children are involved in identifying their needs and planning their support</td>
<td>Children achieve stability and permanence</td>
</tr>
<tr>
<td>Effective multi-agency working</td>
<td>Effective identification of children who cannot be cared for safely at home</td>
<td>Parents/carers are involved in identifying their needs and planning their support</td>
<td>Children make good progress in their behavioural, emotional and social development</td>
</tr>
<tr>
<td>Adequate support infrastructure</td>
<td>Support is appropriate to meet a child’s needs</td>
<td>Children think services are responding to their needs</td>
<td>Children have their mental health needs met</td>
</tr>
<tr>
<td>Shared understanding of what good practice looks like</td>
<td>Care leavers continue to be supported by their corporate parent</td>
<td>Parents/carers think services are responding to their needs</td>
<td>Children engage in early years education</td>
</tr>
<tr>
<td>Stable workforce at all levels</td>
<td></td>
<td></td>
<td>Children engage in education</td>
</tr>
<tr>
<td>Motivated workforce</td>
<td></td>
<td></td>
<td>Children have stable and positive educational experiences</td>
</tr>
<tr>
<td>Workforce with the right skills</td>
<td></td>
<td></td>
<td>Children make progress in education</td>
</tr>
</tbody>
</table>

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To assess if the intermediate and child outcomes outlined above are achieved, it is necessary to identify specific, observable and measurable indicators, which are described in the report. Some of these indicators already exist (e.g. in the National Pupil Database), others could be developed with existing local data (e.g. from case files and audits), while some would require new data to be collected from CSCS staff and users.

**Making sense of the data**

It should be noted that none of the measures in the framework are designed to be used in isolation. **Triangulation** of multiple measures from different data sources is needed to capture the complexity in which CSCS operate and the support they deliver to the most vulnerable children and families in our society.

The framework could be used internally to **monitor business as usual**, as well as to identify areas for **improvement** and then assess if improvement plans have had the intended effects. The framework would also provide evidence that local authorities may find useful to share, for example, in the annual self-assessment for Ofsted or in the regional improvement alliances.

**What next?**

The framework is the first step in the journey required to improve the statistical evidence available to assess the impact of the complex context in which CSCS operate and the variable packages of support delivered by CSCS. The next stage would require a pilot to further develop and test the feasibility of compiling the proposed indicators and how useful the data is in informing service planning and delivery. With time, it may be possible to demonstrate which of the proposed indicators are reliably associated with improved outcomes and could form a sub-set of vital signs of the health of CSCS.
1. Introduction

The report presents the findings from a study that aimed to develop an outcomes framework for children’s social care services (CSCS) based on the views of those who plan, deliver and use these services, as well as the research evidence. The framework has been designed to help local authorities to make well-informed decisions about service planning and delivery, and it is meant to complement, rather than replace, national statistics collected by the Department for Education (DfE). The outcomes framework shows how a combination of new and existing data could help local authorities to understand how well their CSCS are doing and what difference they make to children and their families.

In this chapter we discuss the background to the study, its aims and purpose. We also outline how the study was carried out.

1.1 Why we carried out the study

In 2016 we conducted a feasibility study (La Valle et al., 2016) that aimed to assess whether there is valid and reliable national data to carry out robust analysis of:

- CSCS capacity to identify and reach the children and families who are entitled to social care services
- The quality of CSCS
- The impact CSCS have on the lives of children and families who use these services

A review of the evidence found that assessments of the performance of CSCS focus largely on procedures and compliance with statutory processes. The review identified some evidence on what can help to achieve positive outcomes for children in need and their families. However, this evidence is largely based on narrative descriptions of what good social work practice should look like, rather than standard indicators that can be used systematically to measure quality and establish correlations with positive outcomes.

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1 We are using the Children Act 1989 definition of ‘children in need’ to mean those children for whom children’s social care services have a statutory responsibility.
for CSCS users. Similarly, whilst the evidence indicates a growing consensus about the organisational features that support good practice and effective service delivery, there are multiple tools for measuring these, rather than a single, standardised approach to facilitate comparison (La Valle et al., 2016).

We analysed the main national data sources currently used to monitor CSCS i.e. Ofsted judgements and the DfE children’s social care data [the Children in Need (CiN) Census (DfE, 2018b) and the Looked After Children SSDA903 data (DfE, 2019)]. This analysis found no consistent relationships between DfE children’s social care data and the Ofsted Single Inspection Framework judgements. For example, we found that among the six authorities where data on key DfE child outcome indicators suggested they were performing well, two had been rated as ‘inadequate’ and one as ‘requires improvement’ (La Valle et al., 2016).

The evidence review found very little statistical evidence on the changes to the lives of children and families one would expect when CSCS services intervene, and no consensus on the expected outcomes from CSCS or how those outcomes could be measured (La Valle et al., 2016). A more recent analysis by the National Audit Office indicated that there is no link between local authority spend and Ofsted rating (National Audit Office, 2019).

These findings were discussed at a seminar in 2016 with representatives from the sector, academic experts and policy makers. The recommendation from this consultation was that there is a need to develop a framework of expected outcomes from CSCS, which reflects the views and expectations of key stakeholders, as well as the research evidence.

1.2 Aims of the study

The overarching aim of the study was to develop an outcomes framework for CSCS based on the views of those who plan, deliver and use these services, as well as the existing evidence base. More specifically the study aimed to:

- Develop a framework showing what are the expected measurable outcomes for children from CSCS, and what intermediate outcomes (e.g. organisational and social work practice features) and improvements in services are necessary to achieve these ultimate goals.
- Identify a set of indicators that can be used to measure intermediate outcomes and outcomes for children who access CSCS, and that can help to answer the question of if and how these services have made a difference to their lives.

- Consider to what extent recommended outcomes could be measured using existing indicators, whether new indicators could be developed with existing data and what new data will be required.

Our proposed framework is meant to complement, rather than replace, national administrative data collected by DfE. As a recent DfE report noted:

‘National level performance information can only provide part of the picture. Questions about quality and experiences of those who are part of the system need to be asked at the local level.’ (DfE, 2015 p.3)

The framework is designed to be used internally to help local authorities to make well-informed decisions about service planning and delivery. As we will see later, the framework will show how a combination of new and existing data could help local authorities to understand how well their CSCS are doing and what difference they make to children. The framework could be used to monitor ‘business as usual’, as well as to identify areas for improvement and then assess if improvement plans have had the intended effects.

The framework would provide evidence that local authorities may find useful to share with others. For example, this evidence could be used to compile the annual self-assessment for Ofsted. There is also considerable interest among local authorities in comparing outcomes from their services, for example, in the regional improvement alliances. The framework could generate data to inform regional or national sector improvement work. However, while our proposed framework could facilitate systematic comparative analysis, it would be up to local authorities to decide what data to share and what data may be more appropriate for internal use only.

If the framework proves useful locally, consideration could be given to adapting it for use with partner agencies and aligning it with DfE and Ofsted data requirements to provide a more cohesive approach to our understanding of the effectiveness and impact of CSCS.
1.3 How we carried out the study

The study involved four research components: a rapid evidence review; four in-depth case studies; consultations with CSCS users; and, workshops to validate the emerging research findings.

We carried out a rapid review of relevant policy documents, research studies and other CSCS data frameworks (35 items were reviewed). The review focused on items published since our feasibility study (La Valle et al., 2016) through to May 2019, although key studies outside these parameters were also considered. The review focused on publications about the English children’s social care system and did not include international literature.

Between May and December 2018, we carried out in-depth case studies of CSCS in four local authorities. The authorities included those that had made a considerable investment in collecting evidence to inform service planning and those with an interest in improving the available intelligence to inform their decision-making process. The case studies included focus groups with frontline staff and middle managers, and in-depth interviews with senior managers and performance management teams. A total of 37 respondents covering different services (e.g. disabled children, care leavers, looked after children)
took part in the focus groups, and 13 informants were involved in the in-depth interviews. Respondents were asked how they thought CSCS should operate to make a positive difference to the lives of children and families who use them, and what information they would ideally like to assess if services are working as intended. We also explored what data is currently used locally to plan and monitor CSCS, and views on how adequate this data is.

Between June 2018 and March 2019, we carried out consultations with young people, parents and carers with experience of using CSCS. These respondents were selected to reflect experiences of different services (e.g. care leavers, disabled children, child protection, foster and family carers). A total of 17 young people, and 33 parents/carers and foster carers took part in ten focus groups. The groups explored how we would know if CSCS meet the needs of those who use these services and make a difference to their lives.

Between January and June 2019, ten workshops gathered feedback from over 100 sectors’ representatives on our emerging research findings and outcomes framework. The feedback from these consultations was used to further develop and refine our outcomes framework. The workshops were carried out with local authorities included in the case studies; the Children and Young People’s Board of the Local Government Association; the DfE; the Association of Directors of Children’s Services; the CSC data user group; the CSCS national performance and information management group; and, the What Works Centre for Children’s Social Care.

**1.4 What the report covers**

In chapter 2, we discuss the findings from the rapid review of the evidence. Our review of the literature highlights the complexities and nuance in the children’s social care system and the importance of understanding the context in which services operate.

In chapter 3, we present our conceptual framework i.e. the mechanisms through which CSCS can make a positive difference to the lives of children in need. The framework was developed with evidence collected from CSCS leaders, staff and users. In this chapter we also explain what criteria we used to select outcome indicators to be included in our framework and what types of data will be required to measure these indicators.
In chapter 4, we outline the combination of indicators required to measure the intermediate and child outcomes outlined in our conceptual framework. Our recommendations are based on consultations with CSCS leaders, staff and users, as well as existing research and a review of relevant data frameworks and tools. The chapter also discusses the range of ways in which these indicators could be analysed to answer different questions.

In chapter 5 we conclude by summarising how our outcomes framework could improve the statistical evidence available to plan and monitor CSCS, and next steps for testing the framework.

Below we provide some key points one needs to bear in mind in considering the findings presented in the rest of the report.

- The outcomes framework covers all children in need i.e. children for whom CSCS have a statutory responsibility

- The framework focuses on CSCS and their duties and responsibilities for children in need and their families and includes measures to explore if the needs of CSCS users are being met. The lives of these children and families are also affected by other factors, such as socio, economic and cultural influences and services provided by other agencies. Our framework does not include any measures of these other important influences, but we have suggested how these influences can be considered and explored in the analysis

- None of the measures in the framework are designed to be used in isolation. No single statistic or small set of statistics can capture the complexity in which CSCS operate and the support they deliver to some of the most vulnerable children and families in our society. Triangulation of multiple measures from different data sources is needed to capture this complexity
The framework is designed to highlight the important role that robust and appropriate statistical evidence can play in strategic and operational decision-making and to challenge assessments based on data which is not fit for purpose.

The framework is the first step in the journey required to improve the statistical evidence available to assess the impact of the complex package of support delivered by CSCS. The next stage would require a pilot to develop instruments required to collect new data and to test measures that can be developed from existing data. A fully developed framework would also require regular revision to ensure it can accurately capture changes in policy, practice and the needs of children and families.
2. The policy and research context

To complement the fieldwork and consultation activities detailed in the previous chapter, we also carried out a rapid literature review. The review and findings from the literature detailed in this chapter build on our previous rapid review included in the report from our previous feasibility study (La Valle et al., 2016). As such, the aim of the review was to explore whether there had been any subsequent literature which focused on the following:

- Defining effective children’s social care: what does it look like in terms of children and young people’s outcomes and what indicators can be used to monitor these outcomes?
- Identifying the key elements of effective children’s social care: what activities and processes are associated with achieving and maintaining an effective children’s social care service and how these can be implemented and embedded

Within this chapter we provide a brief outline of the national legislative and policy context and also provide an overview of the inspection framework for children’s social care, which has changed since we published the findings from our feasibility study. We include an update on the literature about the context in which CSCS operate and the latest evidence about outcomes and impact. We also include a section about the nature and availability of data which is fundamental to the development of the outcomes framework and our recommendations.

2.1 National legislation, policy and guidance

In England, local authorities have a statutory duty to provide CSCS to all children identified as being in need. The term ‘in need’ is defined in the Children Act (1989) as being a child or young person who is ‘unlikely to achieve or maintain, or have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him/her of services by a local authority’ or if his or her ‘development is likely to be significantly impaired, or further impaired without the provision of such services’ or ‘if he or she is disabled’. Some of these ‘children in need’ receive support and services from local authority children’s services departments while remaining at home with their families. Others become ‘looked after’ and are placed with foster carers, kinship carers or in residential provision. Looked after children are either
accommodated on a voluntary basis at the request of, or in agreement with their parents
(section 20) or are subject to a Care Order (section 31), where the local authority has
parental responsibility for that child. The process for assessing children in need and their
families describes the developmental needs that all children share, and the elements of
parenting capacity and their wider family/environmental context that will impact on their
needs and should all be included in an assessment (HM Government, 2018 Working
Together to Safeguard Children).

Recent analysis published by the DfE (2018a) indicated that there were 1.5 million
children referred to children’s services as potential children in need or open children in
need cases between 2014-15 and 2016-17. Of these, 1.1 million children were classed
as being in need in at least one year and 0.4 million were deemed not to be in need.
Over a third of children who were in need in 2014-15 were in need in 2016-17 (38%).
There were 200,000 children who were in need for at least one day in all three years
between 2014-15 and 2016-17.

An important factor in considering the effectiveness of CSCS is whether it is working with
the right children and families. The above data shows that significant numbers of children
are referred to the service but not considered to be in need. There may also be children
who are receiving a service that is insufficient or, conversely, too intensive for their level
of need. This has been highlighted in recent research by Forrester (2017) whereby the
difficulties of assessing the right families and proportionate involvement are considered.
Forrester argues that we cannot evaluate outcomes without addressing the issue of
proportionality and whether CSCS are working with the right families, but provides no
solution for how one can identify these families and what difference help makes.

At the time of publishing the findings from our earlier feasibility study, the DfE published
their strategy for children’s social care: Putting Children First (2016). The strategy aims to
achieve transformation through three fundamental building blocks: people and
leadership; practice and systems; governance and accountability. Under the strategy
there have been a number of new initiatives across all aspects of children’s social care
and an emphasis on innovation as part of the Children’s Social Care Innovation
programme. The first round of projects and associated evaluations were completed in
2017 (Sebba, Luke, McNeish, & Rees, 2017) and subsequent projects are ongoing. The
strategy and associated funding have also led to the creation of the What Works Centre
for Children’s Social Care. Despite the financial investment and comprehensive focus of
the Putting Children First strategy it has been subject to scrutiny in a recent National Audit Office report (National Audit Office, 2019). The report suggests that the DfE does not fully understand drivers of demand for CSCS. The report also highlights that in their analysis they did not identify a link between spend on CSCS and the quality of services, as assessed as part of Ofsted inspections.

### 2.2 Inspection framework

CSCS in England are inspected and regulated by Ofsted. In 2018 the new ILACS (Inspections of local authority children’s services) framework was introduced with the aim of facilitating a more targeted and proportionate approach to the inspection of local authorities. Ofsted also indicate that the ILACS framework allows the identification of areas at greatest risk and as a consequence they focus their inspection activities accordingly (Ofsted, 2019). The new approach is intended to be more proportionate, risk-based and flexible than before and allows the prioritisation of inspection(s) according to where it is most needed. The approach to the inspection of local authority children’s services is further underpinned by three principles that apply to all social care inspections. Inspection should focus on the things that matter most to children’s lives, be consistent in their expectations and prioritise their work where improvement is needed most. The underpinning principles are focused on improvement and ‘catching’ local authorities before they fall. ILACS attempts to take a proportionate, whole system approach.

In our earlier feasibility study, we identified a lack of association between Ofsted ratings and 11 child outcomes (as determined in the national administrative datasets), and three workforce variables (La Valle et al., 2016). Subsequent studies have also explored the relationship between Ofsted ratings and children’s social care national measures. Hood and colleagues (2016) carried out an analysis of national administrative datasets and census returns for a 13-year period and identified that a small number of indicators (such as rate of Section 47 enquiries and social worker vacancy rates) were able to predict an inadequate Ofsted rating, highlighting the value of adopting a longitudinal approach to analysing data, with the recognition that CSCS and the children and families they support are not static. A more recent analysis (Wilkins & Antonopoulou, 2019) of performance indicators and Ofsted judgements suggests that there is no clear pattern of better or worse performance between local authorities with different Ofsted ratings. Although, those local authorities rated as either good or outstanding were found to outperform other
local authorities on some procedural variables, such as having fewer overdue assessments. As detailed above, the recent NAO analysis (National Audit Office, 2018) indicated that there is no link between local authority spend and Ofsted rating, raising questions about the quality and value of services and support.

Furthermore, when considering outcomes for children and families the literature suggests that interventions to support CSCS in poor performing authorities (i.e. those with an Ofsted rating of either requires improvement or inadequate) are unlikely to result in many (if any) changes in outcomes for children and families in the first and second years (e.g. Beninger & Clay 2017; Beninger, Newton, Digby, Clay, & Collins, 2017; Bryant, Parish, & Rea, 2016).

2.3 Impact and outcomes

As we highlighted in our feasibility study there has been an over-reliance on process output indicators (La Valle et al., 2016), and it would seem that this remains. There has been little published in the intervening period about outcomes for children and families who have received support from children’s social care, and systematic ways in which these are, or can be measured. Furthermore, where impact studies have been carried out these tend to focus on specific interventions rather than CSCS holistically. Sebba and colleagues (2017) in their analysis of the DfE Children’s Social Care Innovation Programme evaluations identified 13 hard outcomes, i.e. those indicators that are routinely available as part of statutory data returns. The inclusion and measurement of these varied across the individual evaluations, and also once again highlighted the over-reliance on process output indicators, rather than an indication of the quality of practice, or whether the right outcome was achieved, in the right way, for the right children. For example, the most commonly cited outcome for the evaluations in the Innovation Programme was a reduction in the number of children looked after.

More recently work has been carried out by the newly established What Works Centre for Children’s Social Care to develop an Outcomes Framework for their research and evaluations2. The framework places an emphasis on a rights-based approach and also highlights the complexity and challenges of delivering a rights-based approach alongside

2 Further information about the What Works Centre Outcomes Framework is available here: https://whatworks-csc.org.uk/research/outcomes-framework-for-research/
simplistic outcomes-based approaches. The What Works Centre also places an emphasis on the views and experiences of children and young people, referring to the inclusion of child-defined outcome measures, although these have not yet been defined.

Forrester (2017) has also argued for the greater use of user-defined measures of progress with issues, as well as a focus on how adequate CSCS are in helping to deal with the issues. For example, the Goal Attainment Scaling (GAS) which provides service-user definitions of outcomes that could be applied across the diversity of issues a family needs help with and a measure of engagement.

A recent study (Selwyn, Wood, & Newman, 2017) has focused on domains and indicators identified by children and young people in care. These include a broad range of factors such as relationships with birth parents, siblings, friends, carers, teachers, and pets; to be free from abuse, bullying, stigma and discrimination; have an age appropriate account of personal history; feel loved; have a sense of belonging and happiness.

Recent literature has also highlighted the importance of direct work with children and families, and an association between direct work, relationship-based practice and improved outcomes for children and their families. The (2018) Care Crisis Review emphasised the importance of skills, confidence and time to carry out effective direct work with children and their families. This is an emphasis that is strongly advocated across a number of recent studies (Baginsky, Moriarty, Manthorpe, Beecham, & Hickman, 2017; Fauth, Jelicic, Hart, Burton, & Shemmings, 2010; Sebba et al., 2017), with the recognition that time for direct work facilitates the development of relationships with the whole family. Specific ways of working have also been cited in the literature, namely, the use of plain language, the inclusion of practical help for families and approaches that share power.

As detailed above, there is some research to indicate that higher levels of direct working with children and families facilitates better relationships, and in turn leads to improved child level outcomes. Increasingly there has been an emphasis on the voice of the child, and mechanisms to capture their views and experiences. Beninger and Clay (2017) utilised performance monitoring data to assess the inclusion of the voice of the child, for example, by exploring the % of children and young people contributing to their review and also the % of parents and grandparents attending Child in Need meetings. Selwyn and Briheim-Crookall (2017) highlight the importance of children’s subjective wellbeing.
and the role of social workers to be mindful of their wellbeing and support children and young people to talk about their feelings and involve them in decisions about their lives, such as contact arrangements and care planning. Fauth and colleagues (2010) emphasise the need for active listening, demonstrable genuineness and respect when working with children and families and associated better outcomes if parents feel that they have had a say in deciding on the support package.

2.4 Contextual factors

Since the completion of our feasibility study there have been a number of studies and reviews that have highlighted and raised concerns about the increased demand for CSCS, at a time when budgets are increasingly constrained. A recent review of the evidence of children’s vulnerability and social care (Crenna-Jennings, 2018) highlighted an increase in the number of Child Protection Plans, cuts to early intervention services and growing pressures on children’s social care. The latest Safeguarding Pressures survey results published in late 2018 (Association of Directors of Children’s Services, 2018) also report evidence of historical, current and projected demand pressures on CSCS. This sixth phase of the Safeguarding Pressures study presents findings from 140 local authorities (92%) and makes use of the data from the previous years (dating back to 2007-08) to facilitate the use of predictive modelling to estimate future demand.

Concerns about the increased demand for CSCS led to a recent sector-led review which confirmed a crisis across children’s social care and Family Justice (Care Crisis Review, 2018). The review considers the factors that have contributed to the increase in the number of children being placed in care and increase in referrals and also sets out 20 options for change (ibid). The review highlights the complex interplay between a range of factors that impact on thresholds and referral rates. The review of evidence highlighted an association between socio-economic and environmental factors, and rates of children in need. However, the review also highlighted that ‘statistical neighbours’ sharing similar economic and demographic pressures can have marked differences in their rates of children coming into care. In a recent evidence review, Bywaters and colleagues (2016) argue that socio-economic factors partly influence the likelihood of children suffering abuse and/or neglect. They present consistent and robust evidence mainly from outside the UK on the link between poverty and child abuse and neglect, with the more limited evidence base from UK supporting the transferability of these findings. There is a substantive discussion about socio-economic or socio-cultural factors that should be
collected from CSCS users to build the evidence base on the link between poverty and abuse and neglect, including Index of Multiple Deprivation; free school meals; unemployment rates and take-up of out of work benefits; possibly disability and ethnicity but there were concerns about the reliability of these data.

2.5 Nature and availability of data

Research has highlighted that the data submitted to government departments (for example, the DfE) as part of national statutory returns, such as the SSDA903 (DfE, 2019) and Children in Need (CiN) Census (DfE, 2018b) constitute a small proportion of the data held and utilised within local authority children’s services departments (Holmes & McDermid, 2012; Ward, Holmes, & Soper, 2008).

In a recent Research in Practice Change Project (Bowyer, Gillson, Holmes, Preston, & Trivedi, 2018) work was undertaken with 19 local authorities to explore their data usage at a local and regional level to inform strategic and operational planning and decision making. The focus of the project was on support for children and young people at the edge of care, but included an exploration of data to understand the throughput and trajectory of cases from early intervention, through statutory CSCS (including child protection, children in need, looked after children and care leavers). The project identified a range of practices and initiatives whereby local area data sets are linked and matched, either between agencies or across different parts of the children’s social care system. The study identified a particular paucity of data about the services that children (and their families) received, with data often not recorded in a systematic way across the local authorities, and instead being recorded in separate, non-centralised databases, and/or spreadsheets. These findings highlight that many of the difficulties associated with the availability of data highlighted by McDermid in 2008 still remain.

The Children’s Services Analysis Tool (ChAT) provides a recent example of secondary use and meaningful visualisation of existing data. The ChAT uses child-level data from Annex A (Ofsted’s Single Inspection Framework) and the last five years of published statistics for children in need, children looked after, and adoptions, to provide an aggregated analysis for the local authority as well as comparisons with its statistical neighbours and England. ChAT was developed as a part of the collaborative Data to Intelligence project between Waltham Forest Council, Hackney Council, and Ofsted and has been made available to all local authorities as a free resource.
A majority of the information that the ChAT displays is captured using the LAIT\(^3\), which also displays data annually in national, regional and statistical neighbour contexts over the past seven years (where data is available). ChAT provides the information in a dashboard format. As with LAIT, ChAT is reliant upon existing annual, administrative datasets and so does not provide up-to-date analysis of a local authority. There is a facility to import data sets on a more regular basis, however this would be reliant on local authorities routinely and more frequently extracting the necessary data from their management information systems to then import into the tool. Although the ChAT has been found to provide useful visualisations of existing data, the concerns about the underpinning data being process, and output focused remain.

In addition to the availability of data, a fundamental consideration is the effective use of data. Beninger and Clay (2017) have highlighted the use of performance monitoring data for internal auditing purposes. The need for a rigorous and strategic approach to self-appraisal coupled with an open and honest response to feedback and inspections has also been highlighted (Bryant et al., 2016). The use of evidence, and analysis of local performance data locally within children’s services departments was highlighted as part of round one of the DfE Innovation Programme, with examples of increased analytical capacity within local authorities or the positive impact of the use of embedded researchers to help to build capacity and capability (Sebba et al., 2017). The intelligent use of data to support better decision making has also been highlighted in the recent Care Crisis Review (2018).

\[\text{LAIT (Local Authority Interactive Tool) is an on-line tool developed by the Department for Education that features comparable information at national, regional and statistical neighbours’ level, so that local authorities can assess their performance against national and regional trends. It includes information such as: Child Protection, Looked after Children (LAC), Children in Need (CiN), early years and youth offending. LAIT is driven by data received from mandatory returns such as the SSDA 903 data and CiN Census data. The limitations are that it only features data for a full year and this data takes time to get onto the system.}\]

\[\text{LAIT is available at:} \]

2.6 Organisational structures and context

In our previous literature review we indicated the importance of organisations being fit for purpose and also highlighted that in the literature there is consistency about the kind of organisational features that are required to support good quality practice and effective service delivery, but little consistency about how these should be measured (La Valle et al., 2016). Research carried out by the ISOS Partnership (2017), commissioned by the Local Government Association explores the enabling features that need to be in place within a children’s services organisation for any improvement to be successful. This led to the identification of seven enablers of improvement in children’s services: strategic approach; leadership and governance; engaging and supporting the workforce; engaging partners; building the supporting apparatus; fostering innovation; judicious use of resources.

2.6.1 Is leadership effective?

As detailed above, leadership and the people working within CSCS have been identified as one of the fundamental building blocks of effective children’s services in DfE’s Putting Children First (2016). An emphasis is placed on bringing the best people into the profession and giving them the right knowledge and skills for the incredibly challenging but hugely rewarding work they are expected to do, and developing leaders equipped to nurture practice excellence. Leadership is also cited as a factor that contributes to improvements in local authorities rated as inadequate by Ofsted.

More recently, the Care Crisis Review (2018) highlighted the need for effective leadership to be embedded into the system, to establish the ethos underpinning the work and generate strong multi-agency commitment, as well as connecting well with staff at all levels across children’s social care and the children and families who are supported.

Effective leadership and the establishment of stable and focused leadership have been highlighted in a number of recent studies (Baginsky et al., 2017; Beninger & Clay, 2017; Bryant et al., 2016).

2.6.2 Does the organisational culture support effective practice?

Organisational culture within CSCS has been cited in a number of recent research studies. Ofsted (2019) cite the importance of a culture of high support and high challenge for staff, to facilitate a learning culture where staff benefit from a sense of shared
ownership and openness. The impact of a positive culture across the workforce, particularly on staff morale, has been referred to in a recent study by Beninger and Clay (2017). Other recent studies highlight the need to embed organisational commitment to practice and create a positive organisational culture (Baginsky et al., 2017; Bryant et al., 2016). Furthermore, Baginsky and colleagues refer to the creation of a culture where it is permissible to admit mistakes. In terms of linking organisational culture to outcomes a number of studies have explored the relationship between culture and specific indicators related to staff retention and/or staff sickness (Beninger and Clay, 2017; Bryant et al., 2016).

2.6.3 Are partnerships with other agencies working?
The use of multi-agency teams has been emphasised as supporting effective partnership working between agencies (Sebb et al., 2017). The alignment of thresholds between agencies and the use of multi-agency audits to review practice have also been cited as facilitators to effective partnership working (Bryant et al., 2016).

2.6.4 Is the support infrastructure adequate?
In addition to factors and conditions detailed above, a number of recent studies have also sought to explore the support infrastructures within CSCS, to ascertain whether they are adequate, what constitutes adequate, and the necessary infrastructure to achieve positive outcomes for children and their families. Research, such as the work of Baginsky and colleagues (2017) highlights some of the complexities and difficulties faced by CSCS with high levels of referrals and constraints on budgets. These issues were also cited more recently in the Care Crisis Review (2018). Reorganisations have also been highlighted as having a negative impact on infrastructures, with the need to recognise the amount of time and resource that reorganisations take (Baginsky et al., 2017).

2.7 Quality of practice outcomes
Predictably, the literature consistently shows that changes in social work practice are at the heart of service improvement, with evidence of links between improvements in practice and improvements in outcomes for children and families (e.g. Care Crisis Review 2018; Fauth et al., 2010; Forrester, 2017; La Valle et al., 2016; McNeish, Sebba, Luke, & Rees, 2017; Munro & Hubbard, 2011; Sebba et al., 2017). In addition, children’s social care practice, is, (or should be) underpinned by the British Association of Social Workers
(2014) code of ethics, which places an emphasis on principles of human rights; social justice and professional integrity.

As outlined above, increasingly there is an emphasis on relationship-based practice within CSCS, and the implementation of different models and ways of working to support best practice. Research suggests elements of good practice, but often studies focus on the mechanisms and conditions to support the practice (as detailed in the Organisational structures section above). Baginsky and colleagues (2017) highlight the benefits of mapping cases and using plans to ensure consistent practice. Furthermore, Bryant and colleagues (2016) emphasise the need for robust mechanisms to monitor progress and service quality.

To a certain extent, there has been a greater emphasis on what good practice looks like for children in care. The recent Children and Social Work Bill sets out new Corporate Parenting principles for all local authorities with regards to their work with children in care and care leavers. The principles include to promote well-being, to encourage children to express their views, wishes and feelings and to take account of them. Further examples include the recent work to develop the Stability Index by the Office of Children’s Commissioner (2018) which considers three aspects of children’s experiences of care: placement moves; school moves and changes in social worker and the development of Bright Spots (Selwyn & Briheim-Crookall, 2017) to measure the subjective wellbeing of children in care and care leavers.

2.8 Conclusion

As is evident from this rapid review of the recent evidence, little has changed in the past few years in terms of measurement of outcomes and impact, particularly in relation to the identification of specific indicators. To a certain extent an understanding of the outcomes that can be achieved by CSCS is still limited by the nature and availability of data. There continues to be an increased focus on the importance of the inclusion of the views and experiences of those who receive services, and the use of subjective measures. Most fundamentally, and of particular relevance to inform the development of our framework, is the growing evidence about the complex and nuanced landscape in which CSCS operate and the wider implications of increased poverty and increased demand for children’s social care which has been highlighted in numerous studies and reviews.
3. Our findings

In this chapter we first present our conceptual framework i.e. the mechanisms through which CSCS can make a positive difference to the lives of children in need. The framework was developed with findings from consultations with CSCS leaders, staff and users, and largely reflects the research reviewed in the previous chapter. We then explain what criteria we used to select indicators to be included in the outcomes framework and what types of data will be required to measure these indicators.

3.1 Our conceptual framework

Deciding which outcomes should be measured to assess whether services have the intended impacts requires setting out what changes for users are expected from these services (i.e. user outcomes), and how these changes can be achieved (i.e. intermediate outcomes). Figure 3 illustrates our findings on the mechanisms (first three boxes from the left) through which CSCS can make a positive difference to the lives of children in need (last box on the right).
3.1.1 The right conditions and culture

Respondents strongly argued that positive outcomes for CSCS users can only be achieved if there are the right conditions and the right culture to support good social work practice. Political leaders and senior managers were considered key to creating these conditions. As detailed earlier, these findings reflect a growing research base on the organisational, practice and workforce features that contribute to creating these conditions (Beninger & Clay, 2017; Bryant et al., 2016; Canwell, Hannan, Longfils, & Edwards, 2011; Forrester et al., 2013; Kantar Public, 2017; Munro & Hubbard, 2011; Ofsted, 2015; Sebba et al., 2017).
3.1.2 Reaching children and families who need help

There was agreement among research participants that a key intermediate outcome is whether CSCS:

- Reach the children and families who need their help
- Appropriately assess their needs
- Provide the level of support children and families are entitled to

Again, as detailed in the previous chapter, our findings are reflected in both the policy (Ofsted, 2019) and research literature. For example, Forrester has argued that:

‘…understanding outcomes in Children’s Social Care is almost impossible until we can be clear whether the right families are being worked with. This is partly because this accurate or appropriate targeting of services is an outcome in its own right. It is also important because the outcomes we achieve will vary depending who we work with. We cannot evaluate outcomes without addressing the issue of proportionate intervention and whether the right families are being worked with’ (Forrester, 2017 p.12).

3.1.3 Children and families are valued and involved in identifying the support they need

There was a consensus among respondents that for CSCS to be effective, children and their families must feel valued and empowered by services and the support they receive. This is in line with the spirit of the UN Convention on the Rights of the Child, the Children Act 1989 and the Human Rights Act 2008.

Respondents argued that services that empower users and respect their rights must be underpinned by relationships between service users and staff based on trust and the active involvement of children and families in identifying their needs and the support they require. These views are supported by research that has shown the importance of relationships and co-production in underpinning effective social work practice (Care Crisis Review, 2018; Fauth et al., 2010; Forrester et al., 2013; Munro & Hubbard, 2011; Sebba et al., 2017).

3.1.4 Child outcomes

The first three boxes of figure 3 describe intermediate outcomes, that are the mechanisms through which CSCS can make a difference. However, the ultimate
measure of whether CSCS are working (the last box on the right) is if they contribute to ensuring that children in need enjoy the right to be safe, healthy, happy and fulfil their full potential. This means considering whether, as a result of CSCS' involvement:

- Are children in need safe where they live, both at home and in their community?
- Have they been supported by CSCS to be healthy and happy, that is they achieve developmental, physical, cognitive, social and emotional milestones?
- Have they been supported by CSCS to make progress in education and have positive educational experiences?

### 3.1.5 Learning from the lived experiences

As indicated in the arrow at the bottom of figure 3 respondents argued that service planning and provision must be informed by the views and experiences of those who deliver and use services. Again, there is growing evidence that this is an important component of effective service planning and delivery (Beninger & Clay, 2017; Fauth et al., 2010; Forrester, 2017; Care Crisis Review, 2018; Kantar Public, 2017; Ofsted, 2015).

As discussed later, data from CSCS staff and users is at the heart of our proposed outcomes framework.

### 3.1.6 The context

The work of CSCS does not take place in a vacuum, and the context within which families live and services operate must be considered when assessing outcomes for children in need and their families.

Research participants argued that the pressures of poverty, homelessness and other types of disadvantage make parenting a more difficult task. As noted in the literature, the ability of CSCS to reduce these pressures may be limited (Bywaters et al., 2016). Families from different socio-cultural backgrounds may receive a different response from agencies, and it is important that this is identified and addressed, by including demographic, socio, economic and cultural background data in analyses.

Respondents also stressed that the level of corporate support can play a key part in enabling CSCS to work effectively, primarily through the allocation of an adequate budget and by prioritising the needs of vulnerable children across departments. This view is
amply supported by Ofsted inspection reports that often highlight the role of the whole council in relation to the performance of CSCS.

The role of other agencies in helping to identify children and families who need help from CSCS was also highlighted as crucial. It was also argued that children’s safety and well-being are everybody’s business, and while CSCS must be effective service co-ordinators and advocates, much of the input that can make a difference to children in need comes from schools, health agencies, early help and other children’s services. Similarly, adult services are key to addressing the parental needs and circumstances that may be adversely affecting children in need.

These are factors external to CSCS and therefore are not captured in the outcomes framework presented later. However, when analysing outcomes from CSCS, it is essential that these external influences are considered in the analysis (see section 4.5).

### 3.2 Selecting outcome indicators

In the previous section we discussed the intermediate and child outcomes from CSCS that should be measured to assess if, and how, services make a positive difference to the lives of children in need. In order to measure if outcomes are achieved it is necessary to identify specific, observable, and measurable indicators. In selecting appropriate indicators, we have used the MVP principles\(^4\) i.e. we selected measures that are meaningful, valid and pragmatic.

Outcome indicators must be considered meaningful and useful by key stakeholders. In selecting appropriate measures, we addressed the widespread criticism of current national statistics [i.e. the SSDA903 (DfE, 2019) and CiN Census (2018b)], which focus mainly on processes. We have therefore proposed measures that are seen as providing an indication of the quality and effectiveness of the service. We have also tried to focus, as far as possible, on indicators that measure changes for children and their families, and their views and experiences of services.

\(^4\) The MVP principles have been used to develop a number of social policy evaluations including, for example, the evaluation of the Better Start programme.
It is essential that key stakeholders have confidence in the data used to inform service planning and delivery. The two key criteria we used in selecting appropriate measures were validity i.e. whether an indicator will generate data that measures what it is intended to measure; and, reliability i.e. measures must be based on data collected in a consistent way. Robust data would therefore require the use of standardised data collection instruments that meet these criteria.

Finally, we have been mindful of minimising the burden on local authorities, as considerable time and resources are already spent on collecting data required by national agencies. As far as possible we have recommended existing indicators that are meaningful and valid; indicators that can be developed with existing data; and, new indicators which are being developed by national agencies (for example the DfE and Office for Children’s Commissioner).

### 3.3 Different types of data

In order to measure the interim and final outcomes highlighted in our conceptual framework, a combination of four types of data will be required (see figure 4). We think that all these types of data are essential to reach an understanding of the effectiveness of a service and provide answers to different types of question about its impact.

**Figure 4: Types of new and existing data required for the framework**

- Data about the organisation, workforce and practice
- ‘Snapshot’ and trend data on cohort of service users
- Data on users’ views and experience of services and self-reported impacts
- Data on progress of individual children re: safety, wellbeing, healthy development and education
First, data on the organisation, its workforce and frontline practice is needed to establish if there are the right conditions and culture for services to make a positive difference to the lives of children and their families. There are currently only a few national measures on the right conditions in the Children’s Social Care Workforce data. While some local authorities carry out workforce surveys (see chapter 4), there are no standardised methods for collecting this data. Our framework proposes a set of indicators that could be used to develop a standardised instrument for collecting or pulling out from other sources, data from staff and senior managers.

Second, snapshot data covering a cohort of children at a specific point in time (and providing trends over time) is needed to assess if CSCS reach the children and families who need their help, adequately assess their needs and the level of involvement they require. Snapshot data can also help to monitor features of services that are considered important to support good social work practice. Some of the snapshot indicators we have proposed in the next chapter are included in the CiN Census (DfE, 2018b), SSDA903 data (2019) or the National Pupil Database (NPD). We have also suggested some new indicators that would rely on information already collected by local authorities (e.g. in case records and audits), although the format and ease of extraction of this information from case management systems will vary.

Third, data on CSCS users’ views on services and self-reported impacts is needed to establish if children and families feel valued and empowered, and whether the support they receive meets their needs, respects their rights and makes a difference to their lives. While it is increasingly common for CSCS to collect feedback from their users, the focus is usually on views about the service rather than on perceptions about the difference that services have made to their lives. Furthermore, there are no standardised tools for collecting this information and our framework includes a set of indicators that could be used to develop a standardised instrument for collecting data from users (see chapter 4).

Finally, in order to assess whether CSCS achieve their ultimate outcomes for children will require longitudinal data showing progress made by individual children in terms of safety, health and well-being, and education. Very little evidence currently collected to monitor and evaluate children’s social care relies on longitudinal data that shows if and what progress children make while they are engaged with these services. This is in contrast with other children’s policy areas, where longitudinal data plays a key role in
policy development, monitoring and evaluation. We are proposing that a set of standard ‘progress’ indicators could be developed with existing data [e.g. the CiN Census (DfE, 2018b) SSDA903 (DfE, 2019), NPD] to complement the CSCS users’ self-reported impacts mentioned above. The development of progress indicators would be methodologically challenging, but the DfE already has a programme of analytical work to develop longitudinal indicators with existing children’s social care datasets (DfE, 2018a) and there are also other pivotal studies that could be drawn on (McGrath-Lone, Dearden, Harron and Gilbert, 2017; Sebba et al., 2015; Ward, Holmes and Soper, 2008).
4 Our proposed outcomes framework

In the first part of the chapter we outline the combination of indicators required to measure the intermediate and child outcomes illustrated earlier in our conceptual framework (figure 3). Our recommendations are based on our consultations with CSCS leaders, staff and users, as well as a review of research and relevant data frameworks and tools. In the last part of the chapter we discuss how to make sense of the data, i.e. the different ways in which indicators could be analysed to address different questions.

In considering the outcome indicators presented below, it is important to bear in mind the following points:

- Our framework focuses on CSCS and their duties and responsibilities for children in need and their families and includes indicators to explore if the needs of CSCS users are being met. The lives of these children and families are also affected by other factors, such as social, economic and cultural influences and services provided by other agencies. Our framework does not include any indicators of these other important influences, but we have suggested how these influences could be considered and explored in the analysis (section 4.5).

- None of the indicators included in the framework are designed to be used in isolation. No single statistic or small set of statistics can capture the complexity in which CSCS operate and the support they deliver to some of the most vulnerable children and families in our society. Triangulation of multiple measures from different data sources is needed to capture this complexity, as illustrated in section 4.5.

- The framework is the first step in the journey required to improve the data available to assess the impact of the complex package of support delivered by CSCS. The next stage would require a pilot to operationalise the indicators by developing the instruments required to collect new data and testing measures that can be developed from existing data. The pilot could be carried out in a small number of local authorities to test the framework in diverse contexts (e.g. relating to the size, geography and socio-economic features of the local authority). In the relevant sections, we give an indication of the kind of issues that would need to be considered at the pilot stage.
4.1 Measuring the right conditions and culture

In this section and table 2, we consider which outcome indicators should be measured to assess whether there are the right conditions and culture to support good social work practice (the first box on the right in figure 3). Very few of the proposed indicators are currently available from national databases (these are in orange font), and therefore a staff survey would be required to collect most of the indicators in table 2.

<table>
<thead>
<tr>
<th>What the pilot stage would need to consider</th>
</tr>
</thead>
<tbody>
<tr>
<td>• A number of tools have been developed in recent years to measure the right conditions and culture, and we have reviewed some of these tools or publications related to the development of these tools where they are not publicly available. These include the Community Care’s Social Worker Retention Risk Tool; the DfE Social Work Workforce Survey; the LGA Social Work Health Check Survey; the Social Work Organisational Resilience Diagnostic Tool (which is still being developed). It is evident that there is considerable overlap between these tools and our recommendations in table 2. At the pilot stage, relevant indicators from these different tools could be combined to reflect our proposed indicators in table 2 and available evidence on the reliability and validity of measures used in the different tools.</td>
</tr>
<tr>
<td>• We would recommend that an annual staff survey is carried out. The pilot would need to consider the appropriateness and implications of conducting a survey at times when staff feel particularly challenged, for example, because of a poor Ofsted inspection or internal restructuring.</td>
</tr>
<tr>
<td>• We are proposing that data should be collected from staff at all levels, from senior managers to frontline staff.</td>
</tr>
<tr>
<td>• It should be possible to collect data from a representative sample of the CSCS workforce (rather than all staff). The pilot stage would need to take into account the analysis requirements, such as confidence intervals and what kind of sub-group analysis will be required.</td>
</tr>
<tr>
<td>• The pilot phase would also need to consider how any data collection exercises will be presented to staff to ensure the purpose of the exercise is understood</td>
</tr>
</tbody>
</table>
(i.e. to ensure that all staff are working in an environment that supports them to do a good job), and it is clear how the results will be used.

Table 2 shows:

- The proposed outcomes (first column) i.e. **what** characteristics of the organisation, workforce and social work practice should be measured
- The indicators (second column) i.e. **how** these characteristics should be measured
- The rationale (third column) i.e. **why** the evidence suggests these outcomes should be measured
Table 2: Organisational, workforce and social work practice outcomes

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Indicators</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Effective leadership</td>
<td>Views on the extent to which the council is committed to CSCS⁵</td>
<td>Leadership is key to support effective service planning and delivery</td>
</tr>
<tr>
<td></td>
<td>Views on the extent to which CSCS have clear strategic priorities</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Views on the extent to which CSCS leaders are in touch with frontline practice</td>
<td></td>
</tr>
<tr>
<td>2. Commitment to social work values and ethics</td>
<td>Whether there is a statement setting out the values underpinning the service</td>
<td>Principles of social justice and respect for human rights are an essential component in working with children in need and their families</td>
</tr>
<tr>
<td></td>
<td>If there is a statement, 1) whether it describes how these values operate; 2) to what extent staff are able to apply these values in their day to day practice</td>
<td></td>
</tr>
<tr>
<td>3. Culture that supports reflective learning</td>
<td>Views on the extent to which the organisation supports reflective learning</td>
<td>An effective service must create opportunities to learn from the experiences of staff and users in a way that does not seek to ‘blame’</td>
</tr>
<tr>
<td></td>
<td>Views on the extent to which users’ feedback informs: 1) service planning and 2) social work practice</td>
<td></td>
</tr>
<tr>
<td>4. Effective multi-agency working</td>
<td>Representatives from partner agencies routinely attend multi-agency 1) strategic meetings; and 2) operational meetings</td>
<td>Co-ordination of services is necessary to ensure effective service delivery and positive experiences for children and families</td>
</tr>
<tr>
<td></td>
<td>Views on the extent to which there is effective multi-agency working</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Views on factors that support or undermine effective multi-agency working</td>
<td></td>
</tr>
<tr>
<td>5. Adequate support infrastructure</td>
<td>Extent to which staff have access to adequate: 1) information about the children and families they work with 2) case management systems that allow efficient access to this information 3) training to effectively use these systems</td>
<td>An adequate support structure is an important influence on staff effectiveness</td>
</tr>
</tbody>
</table>

⁵ This and other indicators asking for staff’s views are likely to be in the form of a statement, with a scale indicating, for example, how strongly staff agree or disagree with the statement.
<table>
<thead>
<tr>
<th>Views on the adequacy of the physical work environment</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Shared understanding of what good practice looks like</td>
</tr>
<tr>
<td>Whether there is a framework underpinning practice and, if there is, to what extent staff are able to apply it</td>
</tr>
<tr>
<td>To what extent evidence is used to inform practice</td>
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<tr>
<td>To what extent staff are able to work with the whole network of relevant family members and friends</td>
</tr>
<tr>
<td>To what extent children and their parents/carers have a meaningful role in determining the support they receive</td>
</tr>
<tr>
<td>To what extent staff are able to establish relationships with children and their parents/carers which are based on trust</td>
</tr>
<tr>
<td>To what extent staff have appropriate autonomy in decision-making for key processes such as assessments</td>
</tr>
<tr>
<td>The indicators reflect features of good practice which support positive outcomes for children in need and their families</td>
</tr>
<tr>
<td>7. Stable workforce at different levels</td>
</tr>
<tr>
<td>Turnover and vacancy rate of staff at different levels in the past year</td>
</tr>
<tr>
<td>Stability at all levels is considered a key influence on service effectiveness</td>
</tr>
<tr>
<td>Length of service of staff at different levels in the past year</td>
</tr>
<tr>
<td>Level of use of social work agency staff in the past year</td>
</tr>
<tr>
<td>8. Motivated workforce</td>
</tr>
<tr>
<td>Satisfaction with different aspects of the job e.g. able to spend enough time with children; their intervention has improved children's outcomes</td>
</tr>
<tr>
<td>A motivated workforce is considered a key influence on service effectiveness</td>
</tr>
<tr>
<td>To what extent staff feel valued by their employer</td>
</tr>
<tr>
<td>Whether staff receive adequate supervision</td>
</tr>
<tr>
<td>Whether staff have enough learning and development opportunities</td>
</tr>
<tr>
<td>To what extent workloads are manageable</td>
</tr>
<tr>
<td>Sickness levels of staff at different levels in the past year</td>
</tr>
<tr>
<td>9. Workforce with the right skills</td>
</tr>
<tr>
<td>Reported adequacy of own skills$^6$</td>
</tr>
<tr>
<td>Staff at all levels need to be equipped with the skills to do their job well, and to have confidence in their ability</td>
</tr>
<tr>
<td>Views on adequacy of the skills of 1) colleagues; 2) middle managers</td>
</tr>
<tr>
<td>Views on adequacy of skill mix in 1) the team; 2) the department</td>
</tr>
</tbody>
</table>

$^6$ At the pilot stage the development of this and the next indicator would need to consider relevant developments with the rollout of the government’s National Assessment and Accreditation System (NAAS).
4.2 Reaching children and families who need help

In this section and table 3 we outline how to measure if CSCS reach the children and families who need their help, adequately assess their needs and the level of support they require and are entitled to (second box from left in figure 3).

Table 3 shows:

- First column: the ‘service’ outcomes that combined can help to understand if CSCS are reaching children and families who need their help, make adequate assessments of their needs and the level of involvement they require at different stages.

- Second column: the indicators needed to measure these service outcomes. Some are based on snapshot data on judgements about the type of response a child and family need, which could be developed with data that is already available (e.g. from existing children’s social care datasets or case files). We have also suggested longitudinal measures showing the journey through social care of individual children. Longitudinal indicators could be developed with existing children’s social care datasets as illustrated by DfE recent work (DfE, 2018a).

- Third column: which groups of CSCS users are covered by different outcome indicators.

- Fourth column: the rationale i.e. why the evidence suggests these outcomes should be measured.

One outcome that was considered important, but that is not included in table 3, relates to unmet needs i.e. children who meet the Children Act (1989) definition of a child in need, but who are not being supported by CSCS. We were unable to identify relevant indicators, but we agree this is an important issue that should be revisited at the pilot stage to try again to identify possible suitable measures.
<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Indicators</th>
<th>Group covered</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Partner agencies are able to identify children who are potentially in need</td>
<td>% of children with referrals leading to the child receiving a service (i.e. becoming a child in need)</td>
<td>Children referred to CSCS in the past year</td>
<td>A high proportion of referrals by other agencies leading to child receiving a service indicates both a good understanding of referral thresholds, and effective early help. Analysis of referrals by different agencies could highlight where there is more/less clarity about thresholds.</td>
</tr>
<tr>
<td></td>
<td>% of children with referrals leading to no further action (NFA)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Outcomes of referrals made by different agencies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Effective identification of children in need</td>
<td>% of re-referrals of children who had not received a service</td>
<td></td>
<td>Change over time in these indicators would suggest that services effectively identify children at risk of harm or in need (e.g. disabled children, young carers) and arrange additional or step-down support when needed.</td>
</tr>
<tr>
<td></td>
<td>% of re-referrals of children previously subject to a CiN plan</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Effective identification of children at risk of harm</td>
<td>% of children with S47 enquiries that do not lead to a plan</td>
<td>Children subject to S47 enquiry in the past year</td>
<td></td>
</tr>
<tr>
<td></td>
<td>% of repeat S47 enquiries of children previously subject to a CP plan</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>% of children with repeat CP plans</td>
<td>Children subject to CP plan in the past year</td>
<td></td>
</tr>
<tr>
<td>4. Effective identification of children who cannot be cared for safely at home</td>
<td>% of children with unplanned admissions into care</td>
<td>Looked after children in the past year</td>
<td>Entries into care should be planned to minimise trauma to the child. Unplanned admissions of children already in contact with CSCS or re-admissions may indicate weaknesses in assessment or intervention.</td>
</tr>
<tr>
<td></td>
<td>% of children re-admitted into care</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7 Referrals are defined differently in different authorities and therefore comparison with other authorities would be appropriate only if they operated the same ‘front door’ system.
5. Support is appropriate to meet a child’s needs

<table>
<thead>
<tr>
<th>% of children who have remained on the same type of plan</th>
<th>All children in need of help or protection or looked after in the past year</th>
<th>The service should be responsive to changes in a child’s level of need, including greater involvement or de-escalation when they are no longer in need</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of children whose plan was de-escalated and did not present again with unmet needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of children whose plan was de-escalated but who presented with unmet needs requiring a new plan</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of children whose plan was escalated and confirmed at the first review</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of children whose plan was escalated and then de-escalated</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6. Care leavers continue to be supported by their corporate parent

<table>
<thead>
<tr>
<th>Patterns of contact with LA services after leaving care</th>
<th>Care leavers in the past year</th>
<th>Positive outcomes for care leavers are more likely when they receive continuing help from CSCS and other agencies</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 4.3 Children and families are valued and involved

In this section and table 4 we outline how to measure what was outlined in the third box (from the left) of figure 3. That is whether children and families:

- Have a supportive relationship with staff based on trust
- Feel valued and empowered by services
- Feel that the service has respected their right to a fair process
- Are actively involved in identifying their needs and what support will help them.

---

8 While there is currently an indicator of care leavers’ contact with services, we were advised that the data quality is poor and therefore the pilot stage should consider how this indicator could be improved.
Table 4 shows:

- The outcomes (first column) that show children’s and families’ experiences of CSCS and views on the support they receive

- The indicators (second column) needed to assess these outcomes. These indicators rely on a combination of snapshot data that local authorities already collect and new data on children’s and families’ views and experiences of services

**What the pilot stage would need to consider**

- We are proposing that the outcomes in table 4 should be measured for all children receiving support from CSCS (i.e. children in need of help or protection, looked after children and care leavers). However, the pilot could consider if a representative sample (rather than all users) could be involved in the data collection exercise

- We are proposing that data should be collected annually. The pilot will need to consider how feasible this will be once it becomes evident what resources an annual exercise will require

- Methodologically and ethically robust data collection instruments will need to be developed, given the sensitivities of the issues covered and the circumstances that have led to users’ involvement with services, particularly when this involvement is not voluntary

- The pilot will need to consider statistical techniques to minimise response bias (e.g. those who feel most aggrieved may be more likely to want to provide their views)
**Table 4: Children and families are valued and involved**

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Indicators</th>
<th>Group covered</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Children trust staff and have a stable and supportive relationship</td>
<td>% of children who have changed social worker</td>
<td>Children in need of help or protection or looked after in the past year</td>
<td>Social work stability is required to establish trust and a supportive relationship</td>
</tr>
<tr>
<td></td>
<td>Child’s views on the relationship with their social worker/key staff e.g.</td>
<td></td>
<td>A supportive relationship based on trust promotes resilience, as well as being associated with higher engagement with the service and/or support</td>
</tr>
<tr>
<td></td>
<td>based on trust, supportive, empowering</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Child’s views on the extent to which communication with their social</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>worker/key staff has been open and honest</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Parents/carers trust staff and have a stable and supportive relationship with them</td>
<td>Parents'/carers’ views on the relationship with their social worker/key staff e.g. based on trust, supportive, empowering</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Parents/ carers views on the extent to which communication their social</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>worker/key staff has been open and honest</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Children involved in identifying their needs and planning their support</td>
<td>Child’s views on the extent to which they have been involved in 1) identifying their needs; 2) what support they require</td>
<td></td>
<td>Users’ active involvement in assessment and planning is associated with higher engagement, and support that is seen as suitable for their needs.</td>
</tr>
<tr>
<td></td>
<td>% of children who attended meetings to plan their support</td>
<td></td>
<td>A sense of empowerment is also an important outcome in itself because it promotes resilience.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Children and families have a right to participate in decisions that affect them</td>
</tr>
<tr>
<td>4. Parents/carers involved in identifying their needs and planning their support</td>
<td>Parents'/carers views on the extent to which they have been involved in 1) identifying needs; 2) what support they and their child require</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>% of parents/carers who attended meetings to plan</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
5. **Children think services are responding to their needs**

<table>
<thead>
<tr>
<th>their support</th>
<th>A combination of users’ views and level of complaints can help to understand if support meets the needs of children and their families</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child’s views on whether their social worker worked collaboratively with other services to get the support they require</td>
<td>Children and families have a right to complain and to have those complaints properly investigated</td>
</tr>
<tr>
<td>% of substantiated complaints from children</td>
<td></td>
</tr>
<tr>
<td>% of repeat complaints from children</td>
<td></td>
</tr>
</tbody>
</table>

6. **Parents/carers think services are responding to their needs**

<table>
<thead>
<tr>
<th>their support</th>
<th>A combination of users’ views and level of complaints can help to understand if support meets the needs of children and their families</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents'/carers’ views on whether their social worker worked collaboratively with other services to get the support they require</td>
<td>Children and families have a right to complain and to have those complaints properly investigated</td>
</tr>
<tr>
<td>% of substantiated complaints from parents/carers</td>
<td></td>
</tr>
<tr>
<td>% of repeat complaints from parents/carers</td>
<td></td>
</tr>
</tbody>
</table>

### 4.4 Child outcomes

In this section we focus on outcomes for children i.e. what has changed in their lives as a result of CSCS’ involvement:

- Are children in need safe where they live, both at home and in their community?
- Have they been supported by CSCS to be healthy and happy, that is achieve developmental, physical, cognitive, social and emotional milestones?
- Have they been supported by CSCS to make progress in education and have positive educational experiences?

Table 5 includes:

- The child outcomes (first column) that show how different children’s life domains are affected by the involvement of CSCS
• The indicators (second column) needed to measure these child outcomes. It should be noted that some indicators can be used to measure (in combination with other indicators) more than one outcome. This reflects the interconnectedness of children’s experiences and the effects of these experiences on multiple aspects of their lives.

As with previous indicators, the child outcomes indicators rely on a combination of:

• **Snapshot data** from existing data sources (e.g. from existing children’s social care datasets or case files) to measure outcomes for a cohort of children at a particular point in time, as well as trends over time.

• **Longitudinal data** showing if and how child outcomes change over time after CSCS become involved. Again, these indicators of progress could be developed with existing data sources.

• **Data collected from children and families** on their perceptions of the impact of the support they receive, as discussed in the previous section.

The ways in which these outcome indicators and combinations of them could be used for strategic and operational purposes requires exploration as part of a **pilot stage**, with feedback from participating local authorities on their experiences of developing and using the measures recommended in the framework. A further consideration that would need to be explored is the inclusion of analysis at the individual case level to track trajectories through services, as well as aggregate analysis of different groups of children.
Table 5: Child outcomes

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Indicators</th>
<th>Group covered</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Children are safe where they live</td>
<td>% of children who went missing from home or placement in the previous 6 months⁹</td>
<td>Children in need of help or protection or looked after in the past year</td>
<td>If support is working these risks should reduce whether they are at home or in care</td>
</tr>
<tr>
<td></td>
<td>% of children with more/fewer missing episodes in the past 6 months compared with the previous 6 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>% of children affected by domestic violence in the previous 6 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>% of children more/less likely to be affected by domestic violence in the past 6 months compared with the previous 6 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>% of children affected by parental mental ill health in the previous 6 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>% of children more/less likely to be affected by parental mental ill-health in the past 6 months compared with the previous 6 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>% of children affected by parental substance misuse in the previous 6 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>% of children more/less likely to be affected by parental substance in the past 6 months compared with the previous 6 months</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

⁹ We have suggested a six month reference period for most child outcomes, as this reflects good practice in terms of the review cycle (ie a child’s needs should be reviewed at least every six months). However, the feasibility and usefulness of this reference period would need to be considered in the pilot.
<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2.</td>
<td>Children are safe in their community</td>
<td>% of children affected by criminal/sexual exploitation/trafficking in the previous 6 months</td>
<td>% of children more/less likely to be affected by criminal/sexual exploitation/trafficking in the past 6 months compared with the previous 6 months</td>
</tr>
<tr>
<td>3.</td>
<td>Care leavers are safe</td>
<td>% of care leavers in suitable accommodation in the previous 6 months</td>
<td>% of care leavers who in the last 6 months have: - moved from unsuitable to suitable accommodation - moved from suitable to unsuitable accommodation - stayed in suitable accommodation - stayed in unsuitable accommodation</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Children are settled and happy where they live</td>
<td>Changes in a child’s SDQ behaviour scores</td>
<td>% of children involved with the youth justice system in the past 6 months compared with the previous 6 months</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Achieving stability and permanence</td>
<td>Children need to be settled and have a sense of belonging in order to thrive</td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------------------------------------</td>
<td>----------------------------------------------------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of case audits that confirm the child's plan 1) has been updated in the past 6 months; 2) is not being allowed to drift</td>
<td>Children in need of help or protection in the past year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of case audits that confirm there is evidence of the child’s needs being met at home</td>
<td>Children who were looked after in the past year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of children who have/do not have a long-term plan for how they will be cared for throughout their childhood within 2 years of becoming looked after</td>
<td>Disrupted placements and failed attempts at permanence may indicate poor care planning</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of children with unplanned placement moves in the past 6 months</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of children with successful/unsuccessful moves to permanence arrangements in the past 6 months</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child’s views on what is being done to achieve permanence</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parents/carers’ views on what is being done to achieve permanence</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children: 1) are clear about the plans for contact with their family; 2) feel their wishes have been taken into account</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parents/siblings: 1) are clear about the plans for contact with the child; 2) feel their wishes have been taken into account</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| 6. Behavioural and emotional development | Changes in a child’s SDQ scores:  
- emotional development  
- conduct problems  
- hyperactivity | Children in need of help or protection or looked after in the past year | If support is working, individual children’s SDQ scores should improve |
|----------------------------------------|--------------------------------------------------|-------------------------------------------------|--------------------------------------------------|
| 7. Social development                  | Changes in a child’s SDQ:  
- peer relationships  
- prosocial behaviour (ie positive, helpful, and intended to promote social acceptance and friendship) |                                                 | Children in need are at greater risk of developing mental health problems which need to be identified and addressed |
<p>| 9. Mental health                       | % of children with identified unmet mental health needs in the previous 6 months | % of children with identified mental health needs and supported by CAMHS or equivalent in the previous 6 months | Parents’/ carers’ views on the child’s: 1) positive sense of their identity; and 2) hopes for their future. |
| 10. Children engage in early education | % of 2-4 year olds in early education in the previous 6 months |                                                 | Early education is associated with positive developmental outcomes |
| 11. Children engage in education       | % of children with permanent and fixed term exclusions in the previous 6 months | % of children with unauthorised absences in the previous 6 months | Children have a right to education and engagement in education is associated with a range of positive educational outcomes as well as wellbeing |</p>
<table>
<thead>
<tr>
<th>12. Children have stable and positive educational experiences</th>
<th>Previous 6 months</th>
<th>School stability is associated with positive educational outcomes, as well as helping a child to feel settled</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of children with mid-year school changes in the previous 6 months</td>
<td>% of children with more/fewer mid-year school changes in the past 6 months compared with the previous 6 months</td>
<td>If children feel positive about their education and extra-curricular activities, they are more likely to feel positive about themselves and achieve their educational potential.</td>
</tr>
<tr>
<td>Children’s experiences of school/college</td>
<td>Children’s engagement with other activities they enjoy</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>12. Children make progress in education</th>
<th>Progress individual children make with Key Stage results</th>
<th>Progress in education and children’s aspirations can help to understand whether children’s wider needs are being met so that they are able to benefit from education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children’s aspirations for the future</td>
<td>% of care leavers in education, employment or training (EET)</td>
<td>Young people who were care leavers in the past year</td>
</tr>
<tr>
<td>Change in EET status of individual care leavers</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 4.5 Making sense of the data

While it is important to have the right outcome indicators, it is equally important to consider how these indicators should be analysed to address different questions and to consider the backdrop of the local context. Analysis of the indicators discussed in the previous sections would need to consider external influences that may affect how CSCS operate and the interplay of factors (in addition to CSCS involvement) that can affect outcomes for children in need.
In this section we provide an indication of the range of analyses that could be carried using our proposed outcomes framework.

4.5.1 Triangulation

No single data item or small set of statistics can capture the complexity of the support that CSCS deliver, and multiple measures are needed to understand what CSCS are doing well and less well, and their impact on children and families. As we have seen, assessing an outcome will often require a combination of indicators to capture what are often complex experiences and needs. For example, to establish if children are settled and happy, we would expect to see a reduction in levels of disruptive and risky behaviours, as well as exploring a child’s perceptions of whether they are happy and settled.

In addition to having multi-indicator outcomes, the data can be triangulated in other ways, for example:

- Views on corporate support for CSCS can help to explain results on the right organisational conditions and culture. For example, one would expect positive views on corporate support to be associated with positive views on staff reporting that they have the support and infrastructure to do their job properly.

- Users’ views on services can be compared with the findings on indicators of the right organisational conditions and culture. Negative users’ feedback could indicate that staff are not sufficiently supported or motivated; conversely efforts to improve working conditions and staff morale should be reflected in more positive feedback from users.

- High scores on good practice indicators (e.g. staff use evidence to inform practice, use tools and models of practice that support whole family working) should be reflected in users’ views that the support they receive meets their needs, as well as improvements in child outcomes (e.g. reduction in risks, children do better and are happier at school).

4.5.2 Role of other agencies

Our framework focuses on outcomes from CSCS and does not attempt to directly measure the role of other agencies, as measuring their input and impacts was beyond
the scope of the study. However, many of the indicators we have proposed would help to raise important questions about the role of other agencies.

For example, positive views from CSCS staff and users on effective interagency collaboration should result in positive child outcomes that largely depend on other agencies (e.g. stable and positive educational experiences, suitable accommodation for care leavers, engagement in early education). Conversely, an increase in school exclusions and children reporting negative experiences at school may highlight the need for schools to do more to support children in need. Failure to reduce risks associated with family circumstances (e.g. exposure to domestic violence, parental substance misuse) may highlight gaps in some adult services. Reduction in risks in the community (e.g. sexual/criminal exploitation) may signal effective working with the police.

4.5.3 CSCS funding

As outlined in chapter 2, there is a growing evidence base of the increased demand for CSCS, at a time of continued austerity and reductions in children’s social care budgets, which have placed pressures on CSCS (Thomas, 2018; Kelly, Lee, Sibieta and Waters, 2018). Furthermore, a recent report by the Office of the Children’s Commissioner (Stanford & Lennon, 2019) has highlighted the pressures on budgets, and attributes some of these pressures to the reduction in pre-statutory services to support children and their families. Spend by local authorities is reported annually and is broken down by services for looked after children, child protection and safeguarding/family support, as per the categories defined for the purposes of reporting10.

Previous research has highlighted the limitations of children’s social care expenditure data (Beecham & Sinclair, 2007; Holmes & McDermid, 2012; Ward et al., 2008). The expenditure returns provide data for a very specific purpose and can facilitate top-down estimates of unit costs, when expenditure figures are divided by the number of children (and/or families) who receive the service, they do not sufficiently recognise the level of complexity or nuance of CSCS we have referred to throughout this report. A further limitation of organisations’ finance data and systems is that they are often not linked to data about children and families. Work to pilot the outcomes framework will need to

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10 Section 251 of the Apprenticeships, Skills, Children and Learning Act (2009) requires local authorities to submit statements about their planned and actual expenditure on education and social care.
consider the inclusion of expenditure and budget information, and ways to link it to data about the needs and outcomes of children and families to help to understand the value of CSCS services and support.

4.5.4 Socio, economic, demographic and cultural factors

As mentioned earlier, other key influences such as poverty, poor housing, living in a very disadvantaged neighbourhood will affect children’ lives and many of the child outcomes we have suggested should be measured against these factors. If existing data (e.g. CiN Census and 903 data) and any new data were linked to a child’s postcode, this would provide a very effective way of considering these influences in the analysis (e.g. differences in the outcomes of children in needs from neighbourhoods with different levels of deprivation).

Demographic, cultural and identity factors are also likely to mean that children’s outcomes from and experiences of CSCS will vary. The outcomes that we have proposed in our framework need to be analysed with the inclusion of demographic data, much of which already exists in the national administrative datasets, such as age, gender, ethnicity, and within the National Pupil database, special educational needs.

The pilot stage could consider the feasibility of using these variables in the analysis and identify whether additional demographic data is required.

4.5.5 Children with different needs and accessing different services

Our aim was to develop a comprehensive outcomes framework that could capture all the different groups of children in need. While some overarching statistical evidence will be useful, granular analysis of different groups will also be needed to inform planning and delivery of different services. For example, one may want to undertake separate analyses of outcomes for disabled children, children subject to a child protection plan, looked after children and care leavers. Outcomes for these different groups could then be linked to workforce and practice indicators collected from staff in the relevant teams.

4.5.6 Benchmarking

Evidence from this study has shown that there is considerable appetite for comparing some outcome data across local authorities. In other children’s policy areas, service planning can typically rely on an extensive body of national evidence on what good
outcomes for children should look like. However, such data is not available for children in need and CSCS rely mainly on each other and Ofsted to get a sense of what kind of improvements they should expect if their involvement has worked.

Comparison across local authorities will be more robust if the analyses control for other external factors that shape demand for CSCS and influence outcomes for children in need. For example, we would suggest comparative analysis with statistical neighbours and authorities that face similar challenges not captured by standard socio-economic indicators (e.g. high number of unaccompanied asylum seekers under 18; housing policies which result in higher than average inflow of families that are more likely to need CSCS support).

4.5.7 Supporting performance improvement

Our framework could be valuable in monitoring progress among local authorities that have embarked on an improvement journey. The range of indicators we have proposed should enable authorities to monitor how they are doing in areas they have identified as needing to improve. The breadth of our proposed indicators would also allow authorities to assess their performance at different stages of their improvement journey. For example, in the early stages one would expect improvements in the right organisational conditions and culture indicators outlined in table 2, while improvements in child outcomes outlined in table 5 will require considerably more time. It may be helpful for authorities to compare themselves with authorities that are at a similar stage in their journey or to look at the trajectory of others that are further ahead.

The improvement journey could also result in statistical anomalies that must be considered in the context of the improvement activities being implemented. For example, while de-escalation of plans would usually be regarded as a positive outcome, an authority that has recently improved the quality of their assessments may see an increase in children on child protection plans or coming into care as they become better at identifying children who need a higher level of support. Similarly, while low staff turnover would normally be seen as desirable, if staff with a different set of skills are required to improve practice this would result in a (temporary) increase in staff turnover.
5 Conclusion

Our study has found a consensus that CSCS need better evidence to make well-informed decisions about service planning and delivery. Increased pressures due to a rise in demand for CSCS at a time of declining resources means that local authorities need better intelligence on the effectiveness of their services, at a time when their data teams are being reduced due to financial pressures.

A few local authorities are experimenting with different ways of extracting and analysing more statistical and soft evidence from the information they already collect. They are also using a range of tools to collect new evidence, particularly from staff, to assess the health of the organisation and from CSCS users to understand their views and experiences of services.

These activities can provide a breadth of useful information but in a fragmented way that can make it difficult to see the whole picture and how different aspects of the service relate to each other, and to outcomes for children in need. Our aim was to learn from these experiences to develop an outcomes framework that provides a standardised way of analysing whether a service is good enough and what difference it makes to the lives of children in need.

The framework will need to be further developed and tested to assess the feasibility of compiling the proposed indicators and how useful the data will be in informing service planning and delivery. With time, we would hope that it would be possible to demonstrate which of the proposed indicators are reliably associated with improved outcomes and could form a sub-set of vital signs of the health of CSCS.
References


