### **Departmental Quarterly Monitoring Report**

**Directorate:** Children's Services

Departments: Children Social Care and Early Help, Education

**Period:** Quarter 1 – 1<sup>st</sup> July 2025 – 30<sup>th</sup> September 2025

#### 1.0 Introduction

This quarterly monitoring report covers the **Children's Services Directorate's** second quarter period up to 30 September 2025.

It describes commentary and progress against 'key' milestones for the service in line with the Halton children and young people's plan.

### 2.0 Data Quality Statement

The author provides assurance that the information contained within this report is accurate and valid and that every effort has been made to avoid the omission of data.

Where data has been estimated, it has been sourced directly from partner or other agencies, or where there are any concerns regarding the limitations of its use, this has been clearly annotated.

### 3.0 Appendices

Appendix 1: Progress Against Objectives / Milestones

Appendix 2: Explanation of Symbols

Appendix 3: Progress Against Performance Indicators

Appendix 4: Financial Statement

### **Appendix 1: Progress Against Objectives / Milestones**

## Halton Borough Council Corporate Plan 2024 – 2029 Our Community, Our Priorities, Our Future

## Plan on a Page

Supporting Halton's residents to live in decent and affordable homes, surrounded by safe and thriving communities.

Working with everybody to keep our neighbourhoods clean and tidy, and create a sustainable environment for current and future generations.

Addressing inequalities by helping the people of Halton to receive the good quality and accessible advice, information and services that they need to achieve their aspirations and ambitions.



Encouraging good quality health, wellbeing and social care, by involving everyone in our community. To support the people of Halton to feel safe, be active, happy and lead their best lives.

Fostering a strong, diverse local economy where there is access to good jobs and successful businesses in our community, providing opportunities for all.

Supporting families to nurture and protect every child and young person and raise their aspirations. We will invest in Early Years, education and youth provision to ensure they reach their full potential and help Halton families flourish.

Corporate Priority	Priority 1 – Improving Health, Promoting Wellbeing and Supporting Greater Independence. Priority 3 – Supporting Children, Young People and Families Priority 4 – Tackling inequality and helping those who are in most need
CYP P1	Safely reduce the number of children needing to be looked after by the Local Authority and improve safeguarding.

Milesto	Milestone		Supporting Commentary
P1.1	Increase in the number of families accessing support through the Family Hub on a quarterly basis (Source – Early Help)	✓	In Q2 2025/26 Family Hub Attendances increased to 12128 - a 2% increase on the previous quarter. Q2 0225/26 individuals attending a Family Hub rose by 23.5% to 3940 individuals in the quarter. This would suggest that reach is also improving  'Fun Days' and the summer activity programme in August 2025 may account for some of the increase, but there is a steady increase in people using the Hubs month on month. Strong partnership work, outreach and community engagement would account for this continued increase and that the Hubs are now well embedded in the community
P1.2	Increase the number of successful Public Law Outline/Pre-proceedings outcomes i.e. prevent Children entering care  (Source – Children in Need and Child Protection)	<b>✓</b>	During Q2 2025/26, Pre-Proceedings ceased for 22 children. Of these, 55% (12 children) concluded with an outcome to issue care proceedings, whilst 45% (10 children) stepped down to continue receiving support through Child Protection planning. This represents an increase in the proportion of successful step downs compared to Q1 2025/26, where only 35% stepped down. At the end of Q2 2025/26, there were 15 children with ongoing Pre-Proceedings.
P1.3	Decrease the number of Children in Care (CIC) on a quarterly basis (Source – Children in Care)	U	Halton have an improved emphasis on achieving permanency for our children and young people by way of discharging care orders where appropriate, ensuring stable and lasting arrangements that support their long-term wellbeing.  It's fair to say we have a journey ahead of us, and achieving permanency for our children and young people remains a key area of focus. Halton are committed to continuous improvement, ensuring that every decision supports long-term stability, belonging, and wellbeing.

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		The Permanency Panel serves as a key mechanism for reviewing the care plans of our children and young people. Through this process, each child's individual permanency pathway is considered, and timescales are agreed that reflect their unique needs and circumstances. The panel ensures that planning remains focused, timely, and aligned with our commitment to securing stable, long-term outcomes.  At the end of September 2025 384 children in care, which is an increase on the number at the end of March 2025. This is as a result of an increase in entrants to care and a reduction in the number exiting care. Analysis is undertaken quarterly on entrants to care to understand the rationale. Development of the Edge of Care service, launched in June 2025, has already seen some positive impact with less children entering residential provision as a result of the intensive support.  25 children were discharged from care in Q2 2025/26.
P1.4	Increase the number of partner led Multi Agency Plans (MAPS) (Source – Early Help)	We have completed a further two MAP training sessions in September 2025 aimed at external settings. 22 practitioners attended the training.  Virtual School has secured funding for six Education Support Practitioners on fixed term contracts. The posts will support education settings in building their confidence around Eclipse and the MAP process. The workers will link in with the Locality Teams for support and guidance and then work with named schools across the Borough with MAP cases that are identified from Integrated Contact and Referral Team (ICART). The focus will be attendance and educational neglect. The workers will be able to support external users in ensuring any data in Eclipse is being recorded correctly, which will support our performance data. Workers will be MAP trained and this will support any MAP training offered via the partnership.  A task was recently undertaken to complete a data tidy up of external MAPS to ensure the data we have on external MAPS is correct. This entailed closing down historical forms, completing forms that were showing as incomplete and adding closure forms to cases where this was required. There are currently 32 open MAPS to external settings. However, the report is not currently showing MAPS open to nurseries or pre-schools. Work is being undertaken to ensure these setting are captured in future.

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	Feedback and discussions with external stakeholders indicate a positive shift in the culture surrounding the MAP process. External settings are increasingly receptive when a case is screened and a MAP is identified as necessary, and they are more willing to initiate the process.
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Corporate Priority		Priority 1 – Improving Health, Promoting Wellbeing and Supporting Greater Independence. Priority 3 – Supporting Children, Young People and Families Priority 4 – Tackling inequality and helping those who are in most need			
CY	P P2	Improve the stability of care placements.			
Milesto	one		Progress Q2	Supporting Commentary	
P2.1	Reduc placer	e the number of Children in Care (CIC) who moved between nents (Source – Children in Care)		We have implemented a new stability meeting process with external providers. The new process ensures that through the service contracts notice cannot be provided unless a stability meeting has been requested. For some of our children this process may not be appropriate for example where there is risk to or from others in the provision. stability meetings proactively consider each child's individual circumstances and support needs. By identifying risks early and coordinating timely interventions, these meetings play a vital role in reducing placement breakdowns and promoting continuity of care.  Placement stability has improved with 10.4% of children in care experiencing 3+ placements in the last 12 months. Joint working between commissioning placements service and social care to improve the quality of referrals which in turn will improve matching of placements and support placement stability.	
P2.2		e the number of Children in Care who are/were placed in out of gh in residential care (Source – Children in Care)	U	The newly established Medium Cost Placement Panel and High-Cost Placement Panel provides a structured forum to review the placements of children and young people, assessing whether current arrangements are meeting their needs and remain the right plan. It also offers a space for	

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		scrutiny and constructive challenge, particularly where alternative provision may be more appropriate to ensure better outcomes.  At the end of September 2025, 52 children are placed out of borough in Children's Homes.  Work is progressing in relation to the future provision set our in our Sufficiency Strategy which will support improvement in this measure to bring some of our children back into Halton in our own provision. One home is awaiting registration from Ofsted.
P2.3	Reduce the costs of out of borough residential placement placements (Source – Placements)	We recently held a Halton Residential and Supported Accommodation Providers Event whereby plans to work more effectively together to unlock the beds within Halton, and place more effectively within our own borough were progressed. The group will meet quarterly to progress further.  A High-Cost Placement Panel is in place to review and evaluate all placements, which captures all OOB residential placements. Through this panel, placement costs are scrutinised, and plans are put in place to assess the outcomes for children, balanced with their needs, the success of the placement in meeting these and the benefits of those children being brought back into borough. A similar exercise is completed for Supported Accommodation placements, and meetings are arranged for the Placements Team and Social Worker to review.  • Residential Cost Avoidance - TBC as finance need time to calculate the projections of the reductions and we don't have the figures. Supported Accommodation Cost Avoidance - £815,412. Finance reports continue to demonstrate a downward trajectory in the placement costs, this has been achieved through work with contracts and placement team, more rigorous challenge to providers, edge of care and downward trajectory of children entering care.  Residential placements costs forecast for end of year is £27,725,00 at end of August 2025, which is reduced from the forecast at the end of April (£28,400,096) but remains above budget of £27,517,210.

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P2.4	Reduce the number of Children in Care (CIC) who are placed in independent fostering agencies (Source – Children in Carel)	U	Internal fostering searches are undertaken for all children requiring a foster placement, ensuring we maximise the use of our in-house resources. Increasingly, we are exploring creative placement solutions with our existing foster carers, including the use of exemptions and temporary approvals where appropriate. This approach supports continuity of care and enables more flexible responses to the individual needs of children and young people.  Greater emphasis is now placed on convening family network meetings to explore the potential of family and connected persons as the first option for care and support. This approach strengthens early planning and promotes stability by identifying safe, familiar alternatives that align with the child's best interests.  The sufficiency issue of foster placements is a national issue & Halton as with other LA's have been unable to recruit to demand. It must be noted that in order to reduce the cost of residential provision and increase our cared for children's ability to live within family environments. It is therefore expected that the IFA placements will increase.  120 children are placed in foster placements with providers other than our fostering service at the end of September. We continue to work with Foster4 to increase our inhouse capacity.
P2.5	Reduce the costs of out of borough independent foster placements (Source – Children in Care)	U	There is a drive to recruit and retain more in-house foster carers to reduce reliance on external agencies, this is both internally within the Local Authority and with Foster4. Independent Fostering Agency costs forecast for end of year is £6,713,000 which has increased from the forecast in April (£5,056,476) and is above the budget of £5,469,050. It should be noted that as spend on residential decreases that spend on IFA is likely to increase (to a lesser extent) as we move children from residential to IFA placements. Resource Panel has scrutiny of externally commissioned placements and will closely monitor additional placement costs which may be agreed for individual children outside of the framework agreed rates.
P2.6	Increase the number of Halton Foster Carers and kinship carers (Source – Children in Carel)	U	A representative from the Fostering Service now attends legal advice meetings to facilitate early conversations around family and connected

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	carers. This proactive involvement supports the timely identification of potential carers and enables early initiation of Regulation 24 assessments where appropriate. Alongside this, we are increasing the use of family network meetings to explore safe and sustainable care options within the child's extended network, promoting stability and reducing reliance on external placements.  At the end of September 2025, 52 of our children in care are placed with relatives or friends in kinship arrangements and 73 are placed with Halton foster carers. This is similar position to the end of March 2025 (54 kinship placements, 70 with Halton foster carers).
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CYI	P P3	Improve SEND provision		
Milestone			Progress Q2	Supporting Commentary
P3.1		se the % of Education, Health and Care Plans (EHCP) completed 20 weeks (academic year cumulative to end of quarter)  (Source – SEND)	U	Q2 2025/26 position 57.5% (in-line with SEN2 2025 position and ahead of national position at that point). Open assessments at this stage indicate good timeliness, but this will depend upon team capacity moving forwards.
P3.2		se the % of Education, Health and Care Plans (EHCP) Annual s that are carried out within 12 months.  (Source – SEND)	<b>✓</b>	Q2 2025/26 position 67.2% - Much improved position from previous quarter and looking at regional and national available data this is well ahead of benchmarking averages
P3.3		se the proportion of children subject to an Education, Health re Plan (EHCP) placed in independent and out of borough ons (Source – Commissioning)	<b>✓</b>	Plans to develop High Needs Units have developed significantly and Expressions of Interest Applications have been distributed to Mainstream Schools to coproduce and fund Additional Resource Provisions (ARP's) which will significantly reduce the need for independent and out of

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P3.4	Decrease the spending on independent and out-of-borough (OOB) provision for Special Educational Needs and Disability Children (SEND) (Source – Commissioning)		borough provisions. The volume of which is not yet known until after the closing date of applications, however, interest and enthusiasm is high.  A dedicated Quality Assurance and Education and health care plan Reviewing Officer post has been recruited to in September 2025 to focus on these placements with a view to assess and evaluate the whole cohort. Evaluation data will be presented via the Vulnerable Learners Board. Q2 2025/26 position at 7.8% - Difficult to say what direction this will go in quarter-by-quarter as it is dependent upon the needs of the children for whom plans are being created or amended
P3.5	Speech and Language Therapy (SaLT) – Increase the number of assessments done within four weeks of referral receipt (unless assessment to be undertaken within setting/school)  (Source – Commissioning)		The Local Authority and the Integrated Care Board continue to work with the provider to improve across all aspects of the service, and the service has been realigned in terms of their priorities. The contract with the current provider is ending in October 2025 and we will be moving to a new
P3.6	Speech and Language Therapy (SaLT) Increase the number where treatment commenced within 12 weeks of referral receipt (Source – Commissioning)	<b>✓</b>	model, therefore the current provider is working on a waiting list initiative to aid with the transition. The local authority has commissioned additional resources in five independent providers to support Education Health Care Plans-related work with children with speech, language and communication difficulties and Autistic Spectrum Disorder (ASD) need. These providers have been allocated 544 young people, which is 48% of children on Education and Health and Care Plan (for speech and language. They are undertaking assessments and carrying out direct work where appropriate 57% of these assessments have been completed.

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Corporate Priority	Priority 1 – Improving Health, Promoting Wellbeing and Supporting Greater Independence.  Priority 3 – Supporting Children, Young People and Families  Priority 4 – Tackling inequality and helping those who are in most need
CYP P4	Increase number of children attending schools graded good or outstanding and improve attainment outcomes at all Key Stages.

Milest	Milestone		Supporting Commentary
P4.1	Increase the % of Early Years settings (pre-schools, day care, out of school clubs, childminders) with overall effectiveness of Good or Outstanding (snapshot end of quarter). (Source – Early Years)	U	There has been no change since Q1 2025/26, Halton State-funded Nursery Schools maintain 100% good or outstanding and 99% (an increase of 1% from the same time last year) of all Early Years settings (pre-schools, day care, out of school clubs, childminders) were good, outstanding or met. Currently one childminder has a requires improvement judgement.
P4.2	Increase the % of schools and settings with overall effectiveness of Good or Outstanding:  • Primary Schools  • Secondary (Source – Education)	<b>✓</b>	Primary: Year-end position for 2024-25 academic year in Q2 had 86% of primary schools good or outstanding in all areas, however of the 14 inspections of primary schools carried out in 2024-25, 100% were graded good or outstanding in all inspection areas, and 100% of ungraded inspections were classed as either standards being maintained or improving significantly.
			Secondary: Year-end position for 2024-25 academic year in Q2 had 71% of secondary schools good or outstanding in all areas, however of the two secondary schools inspected in 2024-25, one school moved to good or outstanding in all inspection areas and the other moved to good or outstanding in all but one inspection area.

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Corporate Priority	Priority 1 – Improving Health, Promoting Wellbeing and Supporting Greater Independence.  Priority 3 – Supporting Children, Young People and Families  Priority 4 – Tackling inequality and helping those who are in most need				
CYP P5	Improve pastoral and behaviour support and reduce the need for children to be excluded.				

Milestone		Progress Q2	Supporting Commentary	
P5.1	Reduce the number of incidents of School Suspensions (academic year cumulative to end of quarter) (Source – Education Welfare)	<b>✓</b>	Number of suspensions in September 2025, with September being the start of a new academic year, is 20 with a total of 64 sessions lost. Of the 20 suspensions, nine (45%) were due to persistent disruptive behaviour. This is a reduction from 76 in 2024.	
P5.2	Reduce the number of children subject to School suspensions (academic year cumulative to end of quarter)  (Source – Education Welfare)	U	The number of children subject to school suspensions in September 2025 is 18 compared to 60 last year. This would suggest there are more multiple suspensions for individual pupils this year whereas last year there were more pupils suspended but each receiving fewer suspensions. Of the 18 pupils, 2 (11%) have an EHCP and 9 (50%) were recorded as SEN Support.	
P5.3	Reduce the number of permanent exclusions (academic year cumulative to end of quarter (Source – Education Welfare)	<b>✓</b>	The number of children with a permanent exclusion in September 2025 is three a reduction from Q2 last year when four children were permanently excluded. Of the three pupils this quarter, one is a primary aged pupil with an EHCP and two are in Year 11, with one being drug and alcohol related.	
P5.4	P5.4 Increase the % of early Education, Health and Care Plans (EHCP) reviews for SEND Children subject to school exclusion (Source – SEND)		No children with an EHCP were permanently excluded in Q2 2025/26, compared to 2 in Q4 2024/2025. One exclusion was recorded in May 2025 but has since been deemed an illegal exclusion. The LA and parent are now working together to find a new school; their annual review is scheduled for October 2025.  There were no permanent exclusions recorded for Q2.	

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Priority 3 – Supporting Children, Young People and Families

Priority 4 – Tackling inequality and helping those who are in most need

Priority

CYP P6 Improve attendance at school, college and in Early Years set			ngs including sufficiency of places.			
Milesto	Milestone		Progress Q2	Supporting Commentary		
P6.1	parent	Care Expansion roll out - Increase the number of eligible working ts who access childcare support:  From April 2024, eligible working parents of 2-year-olds who access 15 hours childcare support.  From September 2024, eligible working parents of children from the age of nine months to 3-year-olds who access 15 hours childcare support  (Source – Early Years)	U	Uptake data remains unchanged from Q1 2025/06. Data is based on the termly headcount. The Autumn term headcount has not yet been finalised; this is due to be completed by 10 <sup>th</sup> October 2025. Therefore, the current data continues to reflect the May 2025 headcount.  The expansion to 30 hours of funded childcare for eligible children of working parents came into effect in September 2025. Any changes in the uptake of places due to the expansion will be reflected in the next quarter's data.  At May 2025 headcount, 507 2-Year-olds of working parents accessed funded hours. This compares to a figure of 503 at the same point last year (May 2024 headcount).  At May 2025 headcount, 551 under 2-year-olds of working parents accessed funding hours, compared to 513 at the same point last year (May 2024 headcount)		
P6.2	fundin (interr	ise number of eligible children for the vulnerable 2- year-old ing accessing Early Years (EY) provision nally collected termly information – may not match to published rom census) (Source – Early Years)	U	Uptake data remains unchanged from Q1 2025/26. Data is based on the termly headcount. The Autumn term headcount has not yet been finalised; this is due to be completed by 10/10/2025. Therefore, the current data continues to reflect the May 2025 headcount.  From April 2025, the process for accessing funding for disadvantaged two-year-olds was strengthened to reach more families who have not yet engaged with the offer. Any parents identified on the Department for Work and Pensions (DWP) list who had not yet generated their funding code can now contacted by the Family Hub team to offer support.  Between April and August 2025, 112 families were contacted through this approach.		

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		At May headcount 2025, 303 children eligible for the disadvantaged Year-old funding accessed their funded hours. 381 families were identifi in April 2025 on the Department for Work and Pensions (DWP) list eligible for funding. The percentage of eligible 2-year-olds accessing place is % compared to 77% Q4 2024/25.
P6.3	Increase the % taking up of Early Years Entitlement for 3- to 4-year-olds. (Source – Early Years)	Uptake data remains unchanged from Q1 2025/26 as it is based on to termly headcount. The Autumn term 2025 headcount has not yet be finalised; this is due to be completed by 10/10/2025. There the curred data continues to reflect the May 2025 headcount.  At May headcount 1913 children accessed 3 & 4-year-old Funded Early Years Entitlement. 89% take up out of 2170 are accessing 3 & 4-Year-old Funded Early Years Entitlement in Halton.
P6.4	Increased attendance at schools:  a) Primary b) Pupil Referral Unit (PRU) c) Secondary d) Special (Source –Education Welfare)	The attendance at the end of the last academic year (July 2025) was: a) Primary attendance has dropped from Q1 at 94.8% to 94.5% in Q2 b) PRU attendance has risen from 43% in Q2 to 45.1% in Q2 c) Secondary attendance has dropped from 90% in Q1 to 89.3% in Q2 d) Special school attendance has slightly decreased from 87.9% in Q1 to 87.5% in Q2 This is a reduction in attendance in September 2025 compared to Q2 September 2024 which was: - a) 95.58% in 2024 compared to 94.5% in September 2025 c) 92.52% in 2024 compared to 89.3% in September 2025 d) 91.50% in 2024 compared to 87.5% in September 2025
P6.5	Reduce the number of children who are Electively Home Educated (EHE) including those open to Children in Need or Children Subject to a Child Protection Plan (CPP)  a) Children in need (CIN) b) Children subject to a child protection plan (CP) c) Children with special educational needs or disability (SEND)	The current number of EHE pupils is 257, which is higher than the figur in Q2 2024/25 last year of 207. It is lower than the figure at the end of July 2025, however 20% of those pupils were Year 11.  a) 7  b) 3

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	(Source – Education)	c) 12 have an EHCP, one is undergoing statutory assessment and 85 are recorded as SEN Support
P6.6	Reduce the number of children who are missing education.  a) Children in need (CIN)  b) Children subject to a child protection plan (CP)  c) Children with special educational needs or disability (SEND)  (Source – Education)	The number of children on the tracking list as of end 2025 is 22, a decrease from the previous quarter of 54.  There are however three confirmed CME cases, two of which are SEN Support.  Of the 22 CME tracking pupils there are:  a) 2 CIN b) 2 CPP c) 4 SEN Support pupils
P6.7	Reduce the number of children Not in Receipt of Full-time education (NIROFTI)  a) Children in need (CIN) b) Children subject to a child protection plan (CP) c) Children with special educational needs or disability (SEND) (Source – Education)	There are currently 48 pupils on a part-time timetable, with 14 in year 11. In comparison to 61 pupils in the Q1 2025/26 report.  a) 2 b) 2 c) 11 have an EHCP, four are undergoing statutory assessment and 19 are recorded as SEN Support
P6.8	Reduce the number of children accessing alternative provision (Bridge School) or educated other than at school.  a) Children in need (CIN) b) Children subject to a child protection plan (CP) c) Children with special educational needs or disability (SEND) (Source – Education)	The current number of pupils attending The Bridge School is 81, which is lower than the figure of 93 pupils at the end of July 2025, due to the majority of pupils being in year 11.  a) 13 b) 2 c) 7 have an EHCP, one is undergoing statutory assessment and 65 are recorded as SEN Support The current number of pupils recorded as Education other than at school (EOTAS) is 24. This is lower than the 29 at the end of July 25 and the 38 at the end of Q1 2025/26. a) 2 b) 0 c) 21 have an EHCP, three are undergoing statutory assessment and one is recorded as SEN Support

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Corpor ate Priority	Priority 1 – Improving Health, Promoting Wellbeing and Supporting Greater Independence.  Priority 3 – Supporting Children, Young People and Families  Priority 4 – Tackling inequality and helping those who are in most need
CYP P07	Improve professional practice including the quality of children and families' social work.

Milestone		Progress Q2			Suppo	rting comm	entary	
P7.1	Increase the number of audits grades as good in the sub section 'Identifying & Responding to Need, Abuse & Thresholds'  (Source – Audit)	U	<ul> <li>During Q2 2025/26</li> <li>12.5% Early help were graded Outstanding</li> <li>25% were graded Good</li> <li>7% of help and protect were graded 'Good'</li> </ul>					
P7.2	Increase the number of audits grades as good in the sub section 'Providing Effective Help' (Source – Audit)	<ul> <li>During Q2 2025/26</li> <li>37.5% Early Help were graded Good or above (Down)</li> <li>14% of help and protect were graded 'Good' (Down)</li> <li>29% Children in Care were graded 'Good' (static)</li> <li>30% Care Leavers were graded 'Good' (down)</li> </ul>				led 'Good' (Down) 'Good' (static)		
P7.3	Increase the number of children who benefit from management oversight and supervision graded 'good' through the audit sub section 'Making Good Decisions & Management Oversight.'  (Source – Audit)	U	<ul> <li>During Q2 2025/26</li> <li>12.5% Early help were graded Outstanding</li> <li>25% were graded Good</li> <li>7% of help and protect were graded 'Good'</li> </ul>					
P7.4	Increase the number of children's casefiles receiving an overall grade of 'Good' through the audit process (Source – Lynette Lofthouse)		Grade		1	arly Help		
		11	Good	Q4 80%	Q1 71%	Q2 37.5%	Trajectory	
		0	RI	20%	29%	62.5%		
			IA	0%	0%	0%		

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Grade	Help &protect				
	Q4	Q1	Q2	Trajectory	
Good	14%	15%	3.5%	•	
RI	48%	70%	86%	1	
IA	38%	15%	10%	•	

Grade	Children in Care					
	Q4	Q1	Q2	Trajectory		
Good	0%	14%	23.5%	1		
RI	93%	64%	59%			
IA	7%	21%	18%	-		

Grade	Care Leavers					
	Q4	Q1	Q2	Trajectory		
Good	43%	27%	20%	•		
RI	57%	63%	60%	•		
IA	0%	9%	20%	1		

Q1 2025/26 practice has shown an upturn when compared with previous Q4 2025/26, Good has improved by 7% to 28%. RI has decreased by 2% and IA has decreased by 5%. (Q2 comments not yet available)

- > 3% of Children's audits were graded Outstanding.
- > 12.5% of audits were graded as Good +
- > 72% were graded as Requires Improvement
- ➤ 12.5% were graded as Inadequate



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			OVERALL CRADINGS 3/
			OVERALL GRADINGS %
			■Q4 ■Q1 ■Q2 ■Q3
			OUTSANDING GOOD REQUIRES INADEQUATE  12.5  14.1  12.5  12.5  12.5  13.5  14.1  14.1  15.5  16.0  17.5  18.8  18.8  19.9  19.9  10.1
P7.5	Increase the number of social workers accessing training through the Social Work Academy (Source – Social Work Academy)	<b>✓</b>	The Social Work academy have continued to offer training to support the improvement plan and practice improvement throughout children's social care. This continues to be well received.  Managers and practitioners have been provided training in the following areas:  Trauma informed practice Assessments, Plans and visits Motivational interviewing MALD specialist assessment training Report writing training ASYE training Supervision and management oversight 1:1 reflective discussions  In Q2 2025/26 a total of 164 staff accessed the above training. This is a
			slight reduction to Q1 (189) however, expected due to the holiday period. Regular training is available to staff through the Social Work

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			Academy training offer in line with the Children's improvement plan as well as: 1:1 support and ASYE programme which continues to be promoted each week.
P7.6	Increasing the number of permanent staff (Source – Children's Social Care)	Refer Comment	The sufficiency strategy to reduce agency numbers and increase permanent staff continues to be on track. The Local authority is utilising the Approach program to train and recruit social workers. This program sees multiple students (nine in the most recent cohort) to increase the permanent staff numbers. The approach program allows us to support the training of social workers and provide permanent posts to those successfully completing their ASYE. The cohort is split into two groups one in Duty and Assessment and one in Children in need/Child Protection service. Whilst the students may not stay within those teams staffing as needed. codes are allocated to each of the students in anticipation of the successful completion of the course. This will see agency numbers drop again in 12 months. Whilst this is the projected plan, the local authority continues to discuss with agency staff the benefits of permanent working to encourage transfer to permanent posts, and the recruitment campaign continues.
P7.7	Reduce the number of agency workers and associated costs.  (Source – Children's Social Care)	Refer Comment	The agency rates continue to fall for permanent posts and is down to 28.6. The new government rules whilst having a longer-term positive impact does cause some complexities in the short term. Emergency cover arrangements for situations such as sickness means that posts can be left uncovered for a period of a month due to new agency rules around notice periods. The new rules due to be introduced around three years post qualifying in a permanent role will be a positive and we are seeing a number of agency workers who do not meet this criteria converting to permanent posts, which should be reflected in the next quarter's data.

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CYP P8	Reducing Child obesity	
Corporate Priority	Priority 1 – Improving Health, Promoting Wellbeing and Supporting Greater Independence.  Priority 3 – Supporting Children, Young People and Families  Priority 4 – Tackling inequality and helping those who are in most need	

Milestone		Progress Q2	Supporting commentary	
P8.1	Increase % breast feeding and initiation and maintenance at 6 – 8 weeks (Source – Health Engagement)	<b>✓</b>	Target is an annual increase of 0.5% at 6-8 weeks.  Most recent data (Q1 2025/26) shows a further significant increase on 2024-25 rates:  Breastfeeding initiation: 2024/25 = 55.1%. Q1 2025/26 = 60.9%  Breastfeeding at 10-14 days: 2024/25 = 48.1%. Q1 2025/26 = 55.3%  Breastfeeding at 6-8 weeks: 2024/25 = 35.4%. Q1 2025/26 = 41.2%  Lots of ongoing work to improve the culture of breastfeeding in the borough and protect the future of breastfeeding for next generations. In addition to universal infant feeding support service offered to all families in the antenatal and postnatal periods.	
P8.2	Maintain/increase the number of schools engaging in the Healthy Schools Programme which includes whole School approaches to tackling obesity.  (Source – Health Engagement)	<b>✓</b>	New school year commenced, with 13 Healthy Schools sign up visits already completed in September 2025.  New this year — schools can opt to work towards Bronze Healthy Schools award for engaging with their annual visit. Silver awards when they evidence whole-school approaches to health and wellbeing, and Gold for completed an evidence-based self-assessment framework specifically focussing on whole-school approaches to healthy weight.	
P8.3	Increase the number of parents of children age under 5 accessing the 'HENRY' Programme (Source – Health Engagement)	<b>✓</b>	New key performance indicators agreed with 0-19 service to refer ten families per quarter.  18 referred via all routes, including self-referral this Q2 2025/26. Current course ongoing.  Training for staff to deliver additional HENRY 5-12 programme started this quarter, with the new course launching in January 2026.	

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Corporate Priority	Priority 1 – Improving Health, Promoting Wellbeing and Supporting Greater Independence.  Priority 3 – Supporting Children, Young People and Families  Priority 4 – Tackling inequality and helping those who are in most need
CYP P9	Improve access to positive opportunities.

Milestone		Progress Q2	Supporting Commentary	
P9.1	Increase the number of care leavers accessing the Care leavers group (Source – Care Leavers)	<b>✓</b>	Halton now have a hub in Liverpool supporting the unaccompanied asylum-seeking children cohort and young people out of area which has increased numbers. We have also included more services attending the hub which are providing a more variety of support which is attracting more young people.	
P9.2	Increase the engagement for Children in Need, Children in Care and Care Leavers via Barnardo's contract  Source – Commissioning)	<b>✓</b>	With support from the local authority, via the Emotional Health and Wellbeing Board, Barnardo's currently have no waiting list, and referrals are flowing effectively. Halton recently held a Residential and Supported Accommodation Providers Event whereby Barnardo's and another provider presented the service to highlight the availability and referral routes.	

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CYP P10	Improve Mental Health provision.	
Corporate Priority	Priority 1 – Improving Health, Promoting Wellbeing and Supporting Greater Independence.  Priority 3 – Supporting Children, Young People and Families  Priority 4 – Tackling inequality and helping those who are in most need	

Milestone		Progress Q2	Supporting Commentary			
P10.1	Increase the numbers of Primary and Secondary school educators being trained as 'Thrive' Licensed Practitioners.  (Source – Family Thrive)		Roll out of this training is now complete. 81% of schools took up the offer. Additional unallocated places have now been distributed to schools who wanted more practitioners. We have also been able to train a number of 'Family Thrive' practitioners with the surplus left.			
P10.2 Increase the number of strengths and difficulties questionnaires (SDQ) completed for Children in Care  (Source – Children in Care / Health)		Refer comment	This annual indicator is for children in care 12 months at year end 31 <sup>st</sup> March 2026. SDQ score required for age 4-17 at point of health assessment 2024/25 showed a reduction on previous year (2023/24). Reasons for no SDQ score is mostly out of borough not returning SDQ form or not completed and returned by carers or refused. <i>Performance Team</i> .			
P10.3	Increase the number of health assessment (initial and review) for Children in Care (Source – Children in Care / Health)		This annual indicator is for children in care 12 months at year end 31st March 2026. 2024/25 showed a reduction on previous year 2023/24. <i>Performance Team.</i>			
P10.4	Reduce the number of children who are accessing education under Section 19 (Source – Education Welfare)	U	There were two primary children who have EHCPs permanently excluded in Q2, compared to one Q1. However, one was recently overturned at an Independent Review Panel, so only one stands as a permanent exclusion in this quarter.			
P10.5	Reduce the % waiting time for Children in Care (CIC) to access  Mental Health provision  (Source – Children in Care)	Refer comment	There is an identified escalation process in place for children in Care accessing CAMHS is required. Emotional wellbeing panel takes place monthly, and Halton CAMHS attend to review any referrals.			

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Corporate Priority	Priority 1 – Improving Health, Promoting Wellbeing and Supporting Greater Independence.  Priority 3 – Supporting Children, Young People and Families  Priority 4 – Tackling inequality and helping those who are in most need
CYP P11	Strengthen the voice of children and young people.

Milestone		Progress Q1	Supporting Commentary
P11.1	Increase the number of 'good' gradings within Children Social Care casefile audits for the child's voice and how it informs their plans (Source – Audit)	<b>✓</b>	<ul> <li>During Q2 2025/26</li> <li>37.5% in Early Help were graded 'good' or above (Down)</li> <li>3% Help &amp; Protect were graded 'good' (Down)</li> <li>24% Children in Care were graded 'good' (Down)</li> </ul>
P11.2	Increase the number of children and young people involved with the Children in Care Council (CICC) (Source – Children in Care)	<b>✓</b>	We have a further five children accessing the CICC and activities. One is by use of text message and community group. Four are attending the sessions and meetings on a regular basis bringing the total now to 14 this is not counting the co-chair Care leaver. All attend informal meetings and feedback and into formal meetings via community what's app group, if they don't wish to attend the formal setting and meeting.

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Corporate Priority	Priority 1 – Improving Health, Promoting Wellbeing and Supporting Greater Independence. Priority 3 – Supporting Children, Young People and Families Priority 4 – Tackling inequality and helping those who are in most need
CYP P12	Improve pathways into meaningful employment with training and both Further and Higher Education

Milestone		Progress Q2	Supporting Commentary		
P12.1	Reduce the percentage of 16–17-year-olds not in education, employment or training or whose activities are not known to the council (Source – Education and Employment)	U	Average not in education, employment and training (NEET) and Not Known figure is 7.6%. This compared favourably to the same period in 2024 where the figure was 8.8% and continues the reduction in NEET and Not Known figures seen in Q1 2025/26  Despite this positive progress maintaining a reduction in NEET figures is threatened by the lack of post 16 provision in Halton and the withdrawal of a provider in July 2025. An application for additional post 16 provision to fill the gap has been made to the Department for Education, who have accepted there is a case for additional provision. The Department for Education is seeking further consultation with post 16 providers who would consider expanding delivery in Halton. This will take place during October 2025.		
P12.2	Increase the number of good quality pathway plans as identified through the audit process for Care Leavers  (Source – Audit)	U	Q2 2025/26 the sub-grade 'support into adulthood' which asks the auditor to consider and summarise the work that has taken place, how stability and permanence has been achieved leading to good outcomes for the child/YP and what this means for the child/YP currently sits at 20% graded as 'Good'.		

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## Appendix 3: Progress Against Performance Indicators

	STRATEGIC ISSUES	BASELINE POSITION	OUTCOMES AT	OUTCOMES AT END	INTERVENTIONS	KEY PERFORMANCE
			END OF YEAR 1	OF YEAR 3		INDICATORS
Α	Develop and embed Family Hubs and extend					
	their provision to include 19 to 25 age range					
	with additional needs					
В	Wraparound Care Programme - Submitted a					
	supply and demand analysis to the DFE, recruit					
	a Wraparound care coordinator to lead on					
	expanding the project.					
С	Pause Project - secure further funding from					
	partners for 3-5 years submit funding bud					
D	Utilise the grant of £1m from Delivering Better					
	Value (DBV) programme.					
E	Implement redevised structure for children in					
	need service.					
F	SEND - Commission a specialist equipment					
	provider to meet the needs of children and					
	young people with SEND in Halton					
	schools/settings.					
G	SEND - 'Tell it once' framework co-produced					
	and launched.					
Н	SEND - Complete a multi-agency joined up					
	review of current ICT systems and processes					
	understanding current ICT platforms used for					
	information storing and sharing and how they					
	interlink.					
I	Halton Alternative Provision Strategy and					
	Alternative Provision offer co-produced with all					
	system partners.					
J	Review the Neglect Strategy.					
K	Develop a Section 19 Policy and establish an					
	Education Inclusion Panel to determine when					

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	the LA Section 19 duty applies and education offer.			
L	Halton Priority education Action Area Plan, £1.8M allocated across 3 years to tackle attendance and attainment.	What has gone on in the quarter towards achieving that, what the update, i.e., meeting and outcome or decision making		
M	Deliver new statutory duties under the DfE 'Working Together to Improve School Attendance.'			
N	Submit a bid to the DfE for new post 16 provision in Halton			
0	Support the Right to succeed agenda - Halton Lea Cradle to Career 2024-26 for the design, delivery and reporting of a youth offer.			
Р	Establish 'The Food Active Healthy and Active Futures Pledge', a whole school approach to tackling obesity.			
Q	National Child Measurement Programme (data provided annually)			

## **Appendix 4: Financial Statements**

Attached as separate documents

# Progress Symbols are used in the following manner

Progress		Milestone
Green	$\checkmark$	Indicates that the milestone is on course to be achieved within the appropriate timeframe.
Amber	U	Indicates that it is uncertain, or too early to say at this stage whether the milestone will be achieved within the appropriate timeframe.
Red	×	Indicates that it is unlikely or certain that the objective will not be achieved within the appropriate timeframe.

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