

The Highland Council
Education, Children and Adult Services Committee
11 February 2015

Agenda Item	9i.
Report No	ECAS 23/15

Performance Report – Children’s Services

Report by Director of Care and Learning

Summary

This report provides an update on the performance framework for Children’s Services.

1. Background

- 1.1 Highland Council and NHS Highland have agreed a performance framework for children’s services as outlined in *For Highlands Children 4*. This performance report is presented to the Education, Children & Adult Services Committee, as well as to NHS Highland.
- 1.2 All of the performance measures in the current framework have been allocated to *For Highlands Children 4* Improvement Groups.
- 1.3 The full scorecard is included at **Appendix 2**. A number of baselines and targets are still to be established although significant progress has been made in determining these. Some processes also require to be established for collecting data for new outcome targets. In addition, discussions are taking place with NHS Highland to seek earlier access to child health surveillance information.
- 1.4 Other data for new outcome indicators will only be collected on an annual or other basis, and as a consequence is not yet available.
- 1.5 Commentary is provided below on the following measures where performance is either not on target, better or otherwise of note.

2. Performance Measures

2.1 Achieve 36% of new born babies exclusively breastfed at 6-8 week review

- 2.1.1 The rate of new born babies who are exclusively breast fed at 6-8 weeks has remained largely unchanged over the last 5 years with figures ranging between 30.8% and 32.9%. Improvement work is being progressed through the maternal infant nutrition feeding group. It is envisaged that the additional investment of £2m in early years staffing in the Family Teams will begin to impact in this area.
- 2.1.2 Further, Highland Council has invested additional preventative spend from 2015 in infant feeding support workers within NHS Highland, who commenced employment in January 2015 and will be co-located with local midwifery teams but working alongside health visitors and breastfeeding mothers. They will be available to support mothers for as long as they want this support. Local evaluation will be integral to this development and will be formally evaluated in October 2015.

2.2 **The delay in the time taken between a child being accommodated and permanency decision will decrease**

2.2.1 The delay in the time taken between a child being accommodated and permanency decision has slipped from 9 months to 12 months. Action has been taken to increase management oversight leading to further actions, and a report on current improvement activity is attached at **Appendix 1**.

2.3 **% of statutory health assessments completed within 4 weeks of becoming LAC will increase to 95%**

2.3.1 Initial health assessments for LAC within 4 weeks of becoming LAC, in September were at 64.3% (target 95%). An exception report was provided to the last meeting of this committee. The Lead Nurse for Looked after children is proposing changes to the delivery of the service to improve performance.

2.4 **The number of LAC accommodated outwith Highland will decrease**

2.4.1 Analysis shows usage of residential placements to be high in Highland, at 16.5% (31/07/2014), compared to a Scottish average of 9%. The focus is on both returning young people to Highland and reducing the total number in residential care.

2.4.2 Previously Performance Management reporting included spot-purchased placements whether in or out of the Highland area. As the focus is on returning young people to Highland, the reporting now highlights spot-purchased placements outwith Highland. This clarifies the low figures shown in the performance reporting table. It is important to note that previously reported purchased placements were also showing a reduction.

2.5 **Waiting times for AHP services to be within 18 weeks from referral to treatment by December 2014**

2.5.1 Although the length of time children are waiting is reducing, there is still significant variation across individual AHP specialities. This picture is reflected nationally.

2.5.2 There has been some additional preventative investment in these services by Highland Council. All AHP Services have vacancies, albeit two occupational therapist and one dietician posts have been appointed recently.

2.5.3 All services are working towards an 18 week waiting Time Target. Work is ongoing in service redesign to achieve this,

2.5.4 Performance reporting remains based on manual measures, which indicate that:

- Speech and Language Therapy Wait times have reduced from 56 weeks to 36 weeks (2013-2014)
- Occupational Therapy Wait Times have reduced from 72 weeks to 43 weeks (2013-2014)
- Physiotherapy Wait Times reduced to 12 weeks (2014)
- Dietetics Wait Times reduced to 19 weeks (2014)

2.5.5 A joint meeting has been held with NHS Service Planning Services and they are “rebuilding” the naming conventions in order to improve the accuracy of the data

into the future.

2.6 The percentage of 5 year olds will have no obvious dental decay will increase to 80%

2.6.1 The National Dental Inspection Programme Data 2001–14 indicates that the majority of dental decay is in a small proportion of the population. Whilst the gap between deprivation quintiles has not been closed, it has not widened, with all groups improving at the same rate. Evaluation of the Childsmile Tooth brushing Programme carried out in Glasgow evidenced that improvements coincided with the roll out of the Programme.

2.7 Child Fluoride Varnish Applications: 60% 3-4 year olds to receive 2+ applications per year

2.7.1 National issues relating to this measure show that systems for recording and accessing remuneration have meant that under reporting has occurred. Nationally the target has not been met, although it is likely that actual activity is higher.

3. Implications arising from Report

3.1 **Resources:** there are a range of resource implications with regard to these performance indicators, but in most cases, performance can be addressed within current resources.

3.2 There are no **legal, equality, risk, climate change/carbon clever, rural or Gaelic** implications.

<p>4. Recommendation</p>

<p>4.1 Members are asked to note this performance information.</p>
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Designation: Director of Care and Learning

Date: 2 February 2015

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Permanence Project – Caithness Family Team.

Situation

The Caithness Family Team had 10 permanence cases which were all out with timescales and there was no plan in place to address this.

Background.

The team has had long standing vacancies in its social work staff group. The staff members who were in place were not all experienced enough to take this work on so this created another pressure for the staff members who were.

This meant that some statutory work, particularly permanence work, was not being completed in the expected timescales. The impact on the children involved and their families was that the children were not being placed with long term carers timeously and although some children had been placed with their prospective adopters the delay in getting cases heard in Court was stressful for everyone concerned.

The staff group were very aware of this and there were obvious signs of stress with one member off sick for this reason and two others were receiving medical advice for this.

Actions.

The Area and District Managers arranged a meeting with all staff involved and explained that this situation could not continue and that there was a need to take a whole team approach to resolving it. It was stressed that the meeting was not to focus on individuals but to look at what was impeding progress on this work and to look at solutions that involved everyone, including business support and new members of the team.

Issues identified were;

- Too many Joint Child Protection Interviews being completed by the same members of staff with permanence cases which impacted on planned time to complete this work.
- A duty system that also impacted on time available to complete the work.
- Children placed so far from Caithness that statutory visits could take up to 2 days, again impeding progress on work.
- A child's plan meeting arranged 3 months following permanence decision made which was the same timescale for completion of paperwork for the permanence panel.
- Kinship Assessments - (staff identified that some family members are only put forward or come forward when permanence looks to be actually happening)
- Contact – whilst subject to a supervision order contact can still be many times per week/month. Children being so far away compounds this issue and the organisation required can take up a lot of time.
- Complaints – increasing challenges from solicitors and families.
- Lack of protected time to research and plan.

- Prioritising the face to face work required with children who are progressing through permanency with the paperwork required.
- Lack of protected time to research and plan.
- Workloads – have been short staffed for quite some time and this has impacted on caseloads.

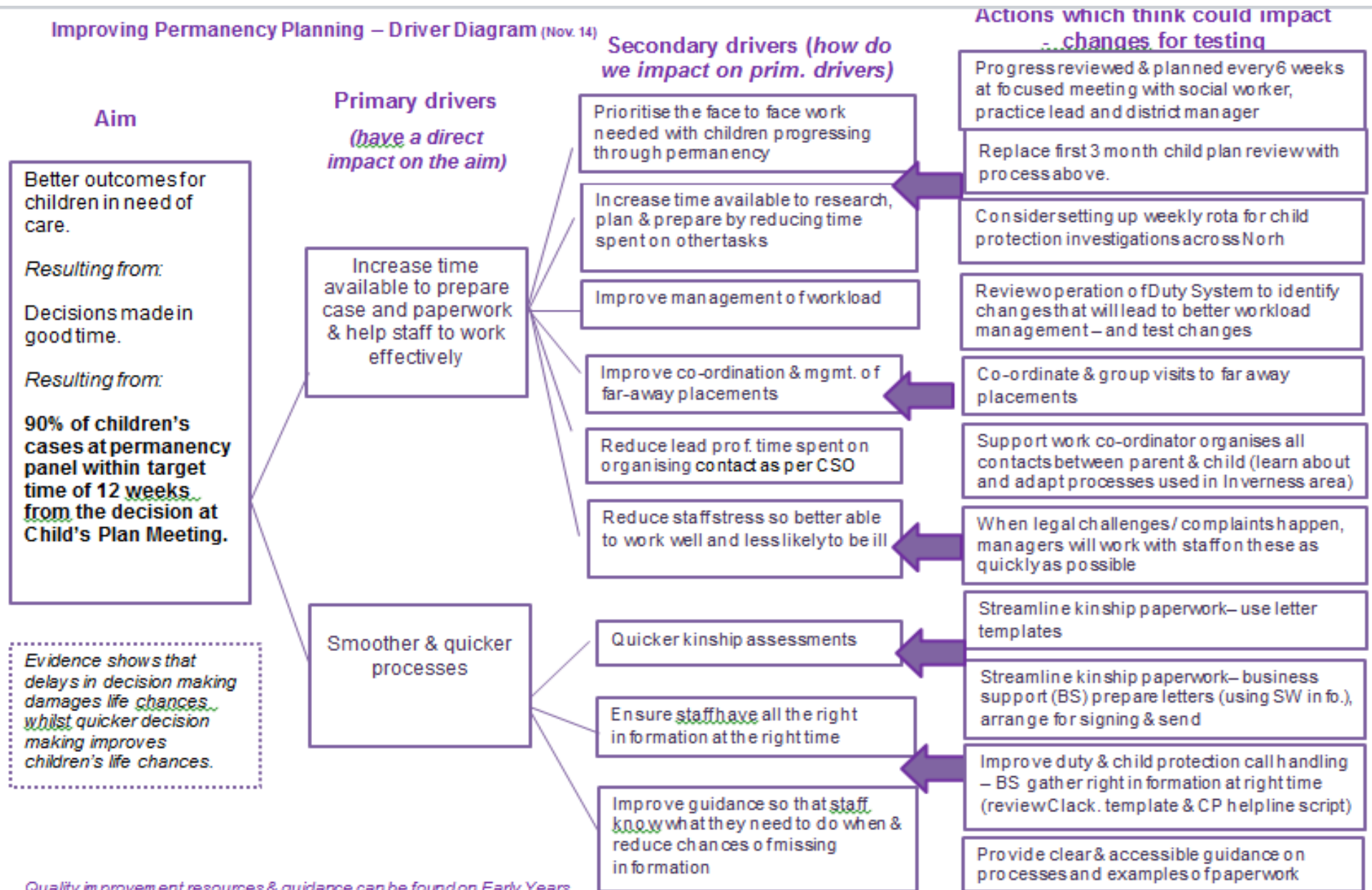
Solutions considered and taken forward.

- A Driver Diagram (attached) was drawn up to help identify immediate and longer term actions to address the issues identified.
- Planning process developed with District Manager taking responsibility for meeting regularly with staff to consider progress with each individual case and plan appropriately.
- Three monthly child's plan review replaced with the meetings described above.
- Continuing meetings held to consider small tests of change using the PDSA process.

Progress.

- 50% of paperwork for permanence panel has been completed and submitted.
- Remaining 50% on target for completion and submission to the February meeting.
- Staff report feeling more supported, in control and less stressed.
- 7 new permanence decisions are expected to be made in January and this will test the process being tried to see if it helps to meet the timescales without any delay.

Improving Permanency Planning – Driver Diagram (Nov. 14)



FHC4		2010/11	2011/12	2012/13	2013/14	2014/15										Improvement Group	
						April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan		target
Safe																	
1. Children are protected from abuse, neglect or harm at home, at school and in the community																	
1	The number of young people in unplanned emergency accommodation will reduce															not set	Head of CS and Head of Housing
2	% children on child protection register previously registered Highland		5.89%	2.80%	5.31%	5.16%	5.36%	5.06%	4.01%	2.58%	3.37%	3.35%	3.14%	3.7%	5.89%	Child Protection	
3	% children on child protection register previously registered Mid		1.42%	0.80%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.39%	0.37%	not set	Child Protection	
4	% children on child protection register previously registered North		0.41%	1.60%	1.22%	1.19%	1.15%	1.17%	1.09%	1.11%	1.50%	1.49%	0.39%	0.37%	not set	Child Protection	
5	% children on child protection register previously registered South		1.83%	0.40%	2.45%	2.38%	2.68%	2.33%	2.19%	0.74%	1.12%	1.12%	1.18%	1.85%	not set	Child Protection	
6	% children on child protection register previously registered West		2.24%	0.00%	1.63%	1.59%	1.53%	1.56%	0.73%	0.74%	0.75%	0.74%	1.18%	1.11%	not set	Child Protection	
7	Gap between agency recording & self reporting rates for domestic abuse decreases															Data required from 2015 Lifestyle Survey	Public Health and Wellbeing
8	The percentage of children who report they feel safe and cared for in school is maintained															Baseline required	Schools
9	Gap between formal and self-reporting of bullying decreases															Data required from 2015 Lifestyle Survey	Equalities working group

FHC4		2010/1 1	2011/1 2	201 2/13	2013/1 4	2014/15											Improvement Group
						April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	target	
10	More young people say they know where to get help with bullying		90.2%		91.0%											92%	Equalities Working Group
11	More young people say they would tell someone if they were being bullied		59.8%		61.1%											63.8%	Public Health and Wellbeing
2. Children are well equipped with the knowledge and skills they need to keep themselves safe																	
12	Self reported incidence of alcohol misuse will reduce (P7)		8.0%		2.9%											2%	Public Health and Wellbeing
13	Self reported incidence of alcohol misuse will reduce (S2)		23.4%		12.8%											12%	Public Health and Wellbeing
14	Self reported incidence of alcohol misuse will reduce (S4)		46.3%		30.9%											30%	Public Health and Wellbeing
15	Self reported incidence of drugs misuse will reduce (P7)		5.0%		1.9%											2%	Public Health and Wellbeing
16	Self reported incidence of drugs misuse will reduce (S2)		6.0%		4.4%											4%	Public Health and Wellbeing
17	Self reported incidence of drugs misuse will reduce (S4)		13.0%		8.1%											8%	Public Health and Wellbeing
18	Increased support for children & young people who display sexually harmful behaviour														5	100% increase by December 2015	Youth Justice
19	Reduce the number of RTAs resulting in avoidable injuries to children and young people															Awaiting Data from NHS Highland	Road Safety Unit
20	Hospital admissions for drug related reasons will reduce															Awaiting Data from NHS Highland	Public Health and Wellbeing
21	Hospital admissions for Alcohol related reasons will reduce															Awaiting Data from	Public Health and Wellbeing

FHC4		2010/1 1	2011/1 2	2012/13	2013/1 4	2014/15										Improvement Group		
						April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan		target	
																NHS Highland		
3. Young people & families live in safer communities where antisocial & harmful behaviour reducing																		
22	The number of children reporting that they feel safe in their community increases															Data required from 2015 Lifestyle Survey	Public Health and Wellbeing	
23	The percentage of school staff who have up to date child protection training increases															Baseline required	Schools	
24	The number of children and Young people reported to SCRA on anti social behaviour grounds reduces														90 (Cumulative from April)	20% reduction by December 2015	Youth Justice	
25	The number of restorative justice warnings used for Young people who offend increases														68 (Cumulative from April)	10% reduction by December 2015	Youth Justice	
26	Increase use of interventions for young people at risk of becoming serious / repeat offenders	12	6	7	6	6	6	6	6	9	6	6	6	6		11	Youth Justice	
27	The number of young people referred to youth action who have an asset assessment completed increases										77%					90% by June 2015	Youth Justice	
28	The number of offence based referrals to SCRA reduces	878	781	528	417	27	35	37	27	17	36	31	32	26		5% reduction by December 2015	Youth Justice	
29	The percentage of 16 to 18 year olds entering the criminal justice service decreases															8%	5%	Youth Justice

FHC4		2010/1 1	2011/1 2	2012/13	2013/1 4	2014/15										Improvement Group	
						April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan		target
Healthy																	
4. Children and young people experience healthy growth and development																	
30	% of children reaching their developmental milestones at their 27 – 30 month review will increase															not set	Early Years
31	% of children achieving their key developmental milestones by time they enter school will increase															90%	Additional support Needs
32	% of children who reach their developmental milestones at entry to Primary four will increase															not set	Early Years
33	Reduce % gap between the most and least affluent parts of Highland for low birth weight babies															not set	Early Years
34	Improve the uptake of 27-30 month surveillance contact from the baseline of 52% to 95% by March 2016				65.4%			73.4%			76.9%					95%	Early Years
35	95% uptake of 6-8 week Child Health Surveillance contact							84.7			82.4					95%	Early years
36	Uptake of 6-8 week Child Health Surveillance contact shows no variation due to affluence															95%	Early years
37	Uptake of 6-8 week Child Health Surveillance contact shows no variation due to LAC status															95%	Early years
38	Achieve 36% of new born babies exclusively breastfed at 6-8 week review March-17 (annual cumulative)	30.8%	30.9%	32.4%	31.2%			31%								36%	Maternal infant nutrition
39	Reduce % gap between most & least affluent areas for children exclusively breastfed at 6-8 weeks															Awaiting Data from NHS Highland	Maternal infant nutrition
40	Maintain 95% Allocation of Health Plan indicator at 6-8 week from birth (annual cumulative)			97.3%												95%	Maternal infant nutrition
41	Maintain the 95% uptake of primary immunisations by 12 months				95.60%											95%	Public Health and wellbeing

FHC4		2010/1 1	2011/1 2	201 2/13	2013/1 4	2014/15											Improvement Group
						April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	target	
42	Maintain 95% uptake rate of MMR1 (% of 5 year olds)		97.3%	94.6 %	96.9%			96.9 %			97%					95%	Early Years
43	Sustain the completion rate of P1 Child health assessment to 95%	92.7	91.1	93.1												95%	Early Years
44	% of children with significant ASN having learning planned for through a child's plan will increase		44.0%	65.0 %	70.0%										94%	95%	Additional support Needs
45	The number of 2 year olds registered at 24 months with a dentist will increase year on year				47.3%											Awaiting Data from NHS Highland	Public Health and Wellbeing
46	The number of 2 years olds who have seen a dentist in the preceding 12 months will increase															Awaiting Data from NHS Highland	Public Health and Wellbeing
47	The percentage of 5 year olds will have no obvious dental decay will increase to 80%				70.1%											80%	Public Health and Wellbeing
48	Child Fluoride Varnish Applications: 60% 3-4 year olds to receive 2+ applications per year				14.9%											60%	Public Health and Wellbeing
49	All nurseries will participate in the Childsmile Programme with 80% of the roll brushing daily				97.6%											80%	Public Health and Wellbeing
50	90% CAMHS referrals are seen within 18 weeks by December 2014			80.0 %								83 %	91%	90%		90%	Mental Health
51	% of statutory health assessments completed within 4 weeks of becoming LAC will increase to 95%		23.3%	70.0 %	66.7%	75.0%	91.7%	75.0 %	100.0 %	69.2 %	64.3%					95%	Looked after Children
52	% of initial LAC health assessments included in Childs Plans within 6 weeks will increase to 95%		73.3%	60.0 %	66.7%	41.7%	91.7%	75.0 %	55.6%	61.5 %	57.1%					95%	Looked after Children
53	Waiting times for AHP services to be within 18 weeks from referral to treatment by December 2014															95%	Additional support Needs

FHC4		2010/1 1	2011/1 2	2012/13	2013/1 4	2014/15										Improvement Group	
						April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan		target
54	95% of children will have their P1 Body Mass index measured every year		91.1%	93.1%												95%	Public Health and Wellbeing
55	Increase the number of S2 young women who receive HPV immunisation to 90% by March 2017			86.4%												90%	Public Health and Wellbeing
56	% of S2 young woman receiving HPV immunisation shows no variation due to affluence															Awaiting Data from NHS Highland	Public Health and Wellbeing
57	% of S2 young woman receiving HPV immunisation shows no variation due to LAC status															Awaiting Data from NHS Highland	Public Health and Wellbeing
58	No. of staff trained to deliver approved input on sexual health, relationships & parenting increases				16								45			25	Public Health and Wellbeing
5. Children and young people make well-informed choices about healthy and safe lifestyles																	
59	No. of hits on pages relating to children and young people on the Substance Misuse Website increases															100	Health, Wellbeing & Public Health
60	Number of staff trained in Brief Interventions and Motivational Interviewing increases												15 (BI) 8 (MI) 2014				Youth Justice
61	The number of early years providers who offer children healthy snack choices will increase															not set	Early Years
62	The number of pre school aged children who have access to energetic physical play increases															not set	Early Years
63	The volume of oily fish, vegetables, fruit and salad used in school meals per pupil increases															not set	Public Health and Wellbeing
64	School meal uptake increases beyond primary 3															not set	Public Health and Wellbeing
65	Self reported incidence of smoking will decrease (P7)		1.0%		0.5%											0%	Public Health and

FHC4		2010/11	2011/12	2012/13	2013/14	2014/15										Improvement Group	
						April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan		target
																	Wellbeing
66	Self reported incidence of smoking will decrease (S2)		8.00%		5.50%											5%	Public Health and Wellbeing
67	Self reported incidence of smoking will decrease (S4)		20.0%		12.0%											11%	Public Health and Wellbeing
Achieving																	
6. Children & young people have skills, confidence and self-esteem to progress successfully																	
68	The number of LAC who attain qualification in any subject at level 3 or above will increase	50%	62%	61%	58%											63%	Schools
69	The number of LAC who attain qualifications in English / maths at level 3 or above will increase	39%	49%	48%	47%											50%	Schools
70	% of schools with curriculum model based on 7 principals of design / 4 contexts of learning														30%	40% to be achieved end of 14 /15	Schools
71	% of pupils who report "that staff talk to them regularly about their learning" increases				64			70%								69	Schools
72	Maintain high levels of positive destinations for pupils in Highland vs national averages			91%	93%											93	Schools
73	No. children with access to learn a second language from P1 and a third from P6 by 2020 increases				0%											5% 2015-16 25% 2012-17 60% 2017-18 80% 2018-19 100% 2019-2020	Schools
74	Increase % young people reporting positive learning environment - Lifestyle Survey				88%											80%	Public Health and Wellbeing

FHC4		2010/1 1	2011/1 2	201 2/13	2013/1 4	2014/15											Improvement Group
						April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	target	
75	No. Gypsy & Traveller children & young people attending nursery, primary & secondary school				86%											90%	Additional support Needs
76	No. children & young people who experience interrupted learning will decrease				50%											45%	Additional support Needs
7. Children and young people are supported to achieve their potential in all areas of development																	
77	The percentage of children and young people sustaining full time attendance at school will increase												99.2%		99.3%	Additional support Needs	
78	Decrease total primary non-attendance at school	5.0%		9.1%											4.3%	Transitions	
79	Decrease total secondary non-attendance at school	9.8%		5.2%											9%	Schools	
80	The number of young people who are engaged in positive economic destinations will increase														not set	Schools	
81	The percentage of schools who have a system to monitor achievement increases														5%	Schools	
82	% schools awarded an evaluation of good or better for self-evaluation in HMI inspections increases				20%			47%							40%	Schools	
83	% schools awarded an evaluation of good or better for curriculum in HMI inspections increases				20%			58%							45%	Schools	
84	The number of children achieving level 3 in literacy and numeracy increases	93%	92.69%	93.14%	93.27%			93%							94%	Schools	
85	Maintain high levels of performance against National averages and comparator schools														Baseline required	Schools	
86	% schools evaluated as good or better for Meeting learners Needs in HMI inspections increases				60%			63%							65%	Looked after Children	
87	No. Looked After Children in placements supported through the FF scheme (Highland Council) increases			14	4										Not set	Looked after Children	

FHC4		2010/1 1	2011/1 2	201 2/13	2013/1 4	2014/15										Improvement Group	
						April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan		target
88	Number of young people with complex disability tracked post school for 3 years annually increases															Baseline required	Additional support Needs
89	% children and young people in schools accessing support from substance misuse workers increases															40%	Youth Justice
90	% schools with a positive relationships framework, supported by curricular materials, will increase															not set	Additional support Needs
91	Gap between the No. of Young Carers identified by services and those who self identify will decrease															not set	Young Carers Improvement Group
92	The number of self identified young carers who report they are supported will increase															not set	Young Carers Improvement Group
93	The reduction in multiple exclusions is maintained			48	55			41								36 pupils	Schools
94	The exclusion rate for Looked After Children will decrease		155	84	98			146						155			Looked after Children
Nurtured																	
8. Children and young people thrive as a result of nurturing relationships and stable environments																	
95	No. children entering P1 who demonstrate an ability to develop positive relationships increases															95%	Additional support Needs
96	The delay in the time taken between a child being accommodated and permanency decision will decrease		9.6	12	9	12	12	12	12	12	12	12.4	12.4	12.4		9 months	Looked after Children
97	The number of respite nights provided is sustained (cumulative)	3101	3390	3612	3573	391	754	1106	1503	1865	2201	2553	2833	3068		2326 bed nights pa	Additional support Needs
98	The number of respite nights provided is sustained (monthly)	535	665	384	320	391	363	352	397	362	336	352	280	235		258 bed nights pm	Additional support Needs

FHC4		2010/1 1	2011/1 2	2012/13	2013/1 4	2014/15										Improvement Group
						April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	
99	The number of respite day hours provided is sustained (cumulative)	2776 9	2760 3	289 53	3079 0	3117	6067	916 3	1371 6	173 70	1999 9	234 65	2622 8	2918 8	20827 day hours pa	Additional support Needs
100	The number of respite day hours provided is sustained (monthly)	6616	6025	272 9	2722	3117	2950	309 6	4553	365 5	2629	346 7	2763	2960	2314 day hours pm	Additional support Needs
101	The number of LAC accommodated outwith Highland will decrease (spot purchase placements)	37	44	44	46	46	45	48	47	49	49	41	41	40	37	Looked after Children
102	No. children needing to live away from the family home but supported in kinship care increases	18	17	19	18	17	16	15	15	15	15	15	14	15	20%	Looked after Children
103	The number of children where permanence is achieved via a Residence order increases			67	72	72	74	75	75	76	77	78	79	79	cumulati ve 82	Looked after Children
104	No. audits carried out for LAC who have three or more unplanned placement moves in 3 month period				100%			100 %			100%			100%	100%	Looked after Children
9. Families receive support, advice and guidance well-matched to their needs																
105	The number of pregnant women screened for substance misuse who are offered support increases														not set	Early Years
106	The number of pregnant women who are at risk of poor mental health who are offered support increases														not set	Early Years
107	An increase in uptake of Healthy Start scheme to 85% of eligible beneficiaries by 2016												68%		85%	Maternal infant nutrition
108	No. eligible children supported to take up their early learning & childcare entitlement increases														not set	Early Years
109	The number of staff trained in the use of approved parenting programmes increases										76				76	Supporting Parents

FHC4		2010/1 1	2011/1 2	2012/13	2013/1 4	2014/15										Improvement Group	
						April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan		target
110	No. areas producing an annual plan for delivering universal & targeted support to parents increases															4	Supporting Parents
111	The number of parents attending validated parenting programmes increases															50	Supporting Parents
112	Increase No. parents of severely disruptive 3-4 year olds participating in parenting courses															90	Supporting parents
113	No. schools offering sessions/ information to parents about child development at transition to P1															82	Supporting Parents
114	The proportion of families with children under 8 receiving income maximisation advice increases															not set	Public Health and wellbeing
Active																	
10. Children and young people are physically active																	
115	The number of children walking to school increases															not set	Road Safety Unit
116	The number of schools who offer 2 hours (or two 50 minute periods of high quality PE) increases				82%											14-15 97% 15-16 100% thereafter	Schools
117	The number of children cycling to school increases															Data required from 2015 Lifestyle Survey	Road Safety Unit
118	The number of provisions who report that children have daily access to the outdoors increases															not set	Play
119	The number of provisions that are able to provide free access to the outdoor increases															not set	Play
120	No. children achieving one hour or more moderate activity on 5+ days per week increases															not set	Public Health and wellbeing

FHC4		2010/1 1	2011/1 2	2012/13	2013/1 4	2014/15										Improvement Group	
						April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan		target
130	The number of schools with the new equal opportunities policy in place increases															75	ECS Equalities Working Group
131	The percentage of parent and carer responses to the question, "my child is treated fairly at school"				87%				91%							91%	Schools
132	% of children who report they have a say in making the way they learn in school better increases				47%				62%							56%	Schools
133	No. parents/carers who participate in the parent/carer food & health in schools programme increases															not set	Public Health and Wellbeing
134	No. families of children with ASN supported by Chip+ through the SLA is maintained or increases				1321											1321 enquiries	Additional support Needs
135	The number of schools participating in the delivery of Resilient Kids training increases															not set	Additional support Needs
136	No. adult & children's services staff accessing the getting our priorities right training increases															not set	CAPSM
137	The number of school staff participating in equality and diversity training increases															200	ECS Equalities Working Group
14. Improvement in service provision determined by participation of children young people & families																	
138	The number of children participating in the Highland Lifestyle Survey increases				66.2%											75%	Public Health and Wellbeing
139	Demonstrate involvement/engagement of service users in Improvement Group activity year on year															not set	All
140	No. consultations with children about their experiences of preschool education & childcare increases															not set	Early Years
141	The number of children & Young People completing the youth action service evaluation form increases										30%					90% by June 2015	Youth Justice