People's Scrutiny Committee 22 June 2015

Performance report on People's Services

Report of the Strategic Director (People)

1. Recommendations

- a) Note the content and current status of key performance areas
- b) Consider including items for greater scrutiny in the Forward Plan.

2. Summary

This report outlines performance for People's services in the remit of this committee to the end of quarter 4 (March) for 2014-15.

3. Introduction

This performance report is an exception report based on a range of key performance indicators (Appendix A) and provides a snapshot of progress against stretch targets identified at the start of the year.

4. Adult Social Care

4.1 Performance Management

Quarter 4 performance is based on provisional results from the annual Adult Social Care statutory returns, which this year include survey outcomes for both service users and carers together with the new Short and Long Term Sequels to Care (SALT) return. On the whole performance for adult social care has declined marginally. However, as previously highlighted to members there have been changes to a number of the national indicator definitions, which have as expected had both positive and adverse impacts on performance when compared to Quarter 3. Due to timing, there is no national comparator information available, but it is anticipated that Devon's performance trend will be mirrored nationally.

Performance has declined marginally as outlined above. The number of new clients assessed within 28 days has declined to 74.5%, which is consistent with the normal ebb and flow within the system. Performance is however variable across all team types and areas. Assessment timeliness for Care Direct Plus averages at 80.5% compared to 60.9% for Complex Care Teams, where there is evidence of increasing waiting lists. Alongside this annual review performance has declined to 62.0% from 63.5% in Quarter 3 representing 5,070 reviews undertaken out of a potential 8,175 service users. The number of reviews outstanding 91 days or more continues to increase from 2,462 to 2,500 representing a 1.5% increase between quarters: an

improvement on the Quarter 2-3 increase of 4.4%. During 2014-15, the number of overdue reviews has increased by 17.7% compared to the March 2014 baseline of 2,124. As this is a local indicator there is no available national benchmarking information. Assessment and review performance is variable across services and teams and is actively monitored and reviewed alongside workloads and waiting lists. The service view is that the complexity of needs of people being supported is increasing and impacting on all the indicators mentioned above. In addition, staff recruitment has become more challenging over recent months, particularly for social work staff. The service is running with a number of vacancies and future reports will seek to include this information.

Personalisation is measured nationally against ASCOF 1C, which is a two part measure looking at take up of self-directed support and direct payments. Quarter 4 performance has been computed by reference to the revised national guidance and definitions, which further drill-down performance between service users and carers. Devon's Quarter 4 performance is good:

- Self-Directed Support: 89.9% (service users) 89.4% (carers)
- Direct Payments: 33.5% (service users) 56.2% (carers)

It is now theoretically possible to achieve 100% performance against these measures due to the definitional changes. No national benchmarking data is available, but it is anticipated that all authorities will be showing an improvement in performance.

Delayed transfers from hospitals remain a concern. The rate of delayed transfers from care from hospital (all sources) has deteriorated to 17.1 per 100,000 (65 and over) population from 16.4, which is in excess of the annual target (11.1) and 2013-14 national and regional benchmarks. A similar decline is also evidenced for social care only attributable delays, which at a rate of 4.1 per 100,000 (65 and over) population is now in excess of the 2013-14 outturn (3.3) and national average (3.1). It should be noted that a similar trend in both parts of this indicator is evident nationally and is currently the subject of both regional and national focus.

A Performance Plan is in place to actively address performance and recording issues. Recent analysis confirms the main reason for delays remains 'further non-acute NHS care', including rehabilitation and reablement: impacting on 499 people (39.4%) and accounting for 12,330 days (39.3%) delayed in the period to 31 March 2015. The largest number of people delayed in an acute setting were at the RD&E (626 or 49.4%) and there are current discussions with NHS England re recording issues in this respect and in non-acute settings were at NDHCT (233 or 18.4%), which covers all community hospitals in Northern and Eastern localities.

Three hundred and twenty six people in the year had delays attributable to social care: 117 (35.9%) were waiting a care package in their own home, 83 (25.5%) were waiting a residential care placement and 72 (22.1%) were waiting completion of an assessment.

The number of clients supported in residential/nursing care continues to reduce with 3,195 supported at the end of the quarter. ASCOF 2A is a two part indicator which measures the rate of permanent admissions to residential/nursing care for both younger and older adults. Quarter 4 performance is computed by reference to revised national definitions and guidance, which include service users who would previously have been excluded as they were subject to "12 week disregards" (i.e. short term), which increased the size of the year end cohort and have adversely impacted upon performance.

- Permanent admissions (18-64): 20.0 per 100,000 population (aged 18-64)
- Permanent admissions (65 and over): 616.2 per 100,000 population (aged 65 and over)

As this is a nationally prescribed change, all Local Authorities will be subject to the same potential dip in performance. There is no published 2014-15 benchmarking data, but compared to 2013-14 (which is not directly comparable) permanent admissions for older adults remains below England (668.4), Statistical Neighbour (642.3) and South West (656.2) averages. Performance for the 18-64 age group is marginally below 2013-14, but still in excess of all comparator averages.

Devon continues to perform well with regard to the effectiveness of reablement/rehabilitation services with 88.8% of people (aged 65 and over) discharged from hospital into these services still at home after 91 days. Performance against the second part of this indicator which measures service coverage is poorer, but there are plans to expand capacity so improvement is anticipated over the coming year.

This indicator is subject to a national change in definition and at Quarter 4 has been calculated as a snapshot indicator tracking people discharged from hospital in the period October to December 2014 during January to March 2015.

As a result of the new SALT return, a new national indicator ASCOF 2D has been introduced which measures the outcome of short term services by reference to sequels to those services. A higher value represents good performance. As this is a new indicator there is no available benchmarking data, but Devon performance for 2014-15 was 85.6%, which represents a good outcome.

4.2 Quality assurance of commissioned services

Performance on regulated services for adults (residential, nursing and domiciliary care) is based on summarised compliance data to the end of March 2015 (Appendix B). During October 2014, the CQC changed its inspection framework providing an overall inspection rating judged from Outstanding to Inadequate. Whilst old style inspections are no longer taking

place they will continue to be reported on until all providers have been inspected under the new framework.

Devon commissions services from 484 of the regulated in-house and external providers in Devon. At the end of March, 82.5% of providers inspected under the old regime were graded complaint (no or minor concerns) by CQC. To date, 50 providers have been inspected under the new framework. Devon commissions services from 47 of these providers with 30 (63.8%) being judged as outstanding or good, 15 (31.9%) requiring improvement and 2 (4.3%) inadequate.

Members should note that services with serious concerns may be temporarily closed to new admissions with the Authority working with non-compliant providers to take action for improvement as part of a risk assessment.

At the end of March, there were 7 Devon homes in a quality threshold placement suspension of which 5 were actively working with the Quality Assurance and Improvement Team. There were 6 homes in Devon with a safeguarding placement suspension with 5 working with the Quality Assurance and Improvement Team.

5. Children's Social Care

5.1 Performance Management

Following the OFSTED inspection and the publication of the report on 12th May 2015, Children's social care continues to focus on improving services with particular focus on the issues raised by the inspection. An action plan has been submitted to OFSTED with clear targets that complement the Department for Education scorecard that was already work in progress.

The number of enquiries into MASH fell from 1,587 in March to 1,286 April (the lowest since June 14 at 1,282), with national data indicating widespread increases in enquiries concerning the safeguarding of children. Around 37% were referred on for a social work assessment (38% in March) with a proportion of 20% being de-escalated to Early Help (29% in March). In total, 1,890 DAF1s have been recorded on Holistix up to 27/04/15. Data cleansing continues to address DAF1 assessments input with incorrect start dates and the new step-down guidance from DSCB will assist with this. The re-referral rate reduced again from 24.0% to 21.1% - below the comparator average (23.4%) and target (25%). 77.1% of single assessments were authorised by the Initial Response function in association with a new referral in April (75.6% in March) and the authorisation within 45 days for this cohort was 94.6% (83.6% in March), with 90.8% of assessments authorised on open cases elsewhere in the service being authorised within this timescale.

The number of single assessments started in the year to March 2015 was 7,723, of these 2,002 were started in quarter 4. In January, February, March these were at a high level of 637, 688 and 677 compared to most of the year. The numbers authorised across these three months are 793, 692 and 725.

The rate authorised within 45 days is respectively 58.5%, 74.7% and for March 79.0%. The final rate of 69% authorised in time against the target of 85% represents a considerable improvement during the year when in October the rate was 54.3%. This is partly due to new Management Information monitoring processes which are giving managers and teams up to date information which can then be acted upon to improve timeliness. The trend so far in the new monitoring year is continuing at a high level with April and May having respectively 620 and 685 single assessments started and the authorised in time rate being 93.7% and 92.3%.

The percentage of authorised Single Assessments where a section 47 has been undertaken which were authorised within 45 days for quarter 4 has been 100% for January, February and March.

The number of Children in Need (CiN) fell for a third month in a row from 4,442 to 4,429. This will reduce further due to work underway with disabled children and remains considerably less than was the case last autumn, reflecting work within the children's with disabilities to ensure that all their open cases are actively worked. Work is in hand to reduce the unallocated Children in Need to zero – these are mainly finance only cases within ICS or cases in the process of being allocated in other teams.

2 of the 7 case audits completed in April related to Children in Need, with 75% or better (same March). judged acceptable as "Management scrutiny/oversight", "Assessment & needs analysis" and "Recording and report writing" were at 100% (all improved from March's 88%, 88% and 75% respectively) whereas "Experience of child/young person", "Practitioner contact" and "Planning for children" were at 50% (a fall from March's 75%, 88% and 88% respectively). The audit data for other categories of cases below indicates that more attention is being given to cases where higher risk is identified. However, further work is required to strengthen practice around CiN work.

The number of children subject to a Child Protection Plan rose from 484 to 509, still below the statistical neighbours (578) and England (596) averages as well as below target (575), with all cases appropriately allocated. 77.8% of Initial Child Protection Conferences were held within 15 working days (down from 89.5% in March) - statistical neighbour and England averages are 74% and 70% respectively. However, some cases are delayed for sign off due to quality issues, this is an area of immediate focus for the new Area manager role to ensure transfer of cases doesn't impact negatively on planning for children. IRU are currently investigating all Initial Child Protection Conferences that are out of timescale. The proportion of child protection cases visited in the last 30 days was 94.3% (up from 89.3% and above the 85% target) and the proportion of children subject to a Child Protection Plan being visited in line with the plan based on the IRU sample data collected was 86%, down slightly from 87%. The number of children on a Child Protection Plan for more than 2 years decreased from 4 to 1, a rate of 0.2% which remains below the England (2.5%) and Statistical Neighbour (3.2%) averages. The number over 12 months' duration increased from 75 to 78, a rate of 15.3%. Attendance at child protection meetings by health professionals was at 59.0% (down slightly from 63.6% in March), with a further 6.3% that did not attend providing reports (up from 4.0% in March). This includes AMHS, CAMHS, Child Health, Parental Health and GPs. 3 of the 7 case audits completed in April related to children subject to a Child Protection Plan, with 95% being judged acceptable or better (improved from 88% in March). All areas were at 100% except for "Recording and report writing" at 67%.

The number of Children in Care increased from 698 to 704 - remaining below the England (850) average. All cases were appropriately allocated. The proportion recorded as having been visited within the last 42 days continued to exceed the 85% target level at 91.8% (compared with 88.3% in March). Management review has identified that disabled children may not always be properly identified as looked after and further work is underway on Regulation 24 and Friends and Family placements, an issue also picked up in the Peer Review. The Independent Reviewing Unit reported an increase in the proportion of Children in care experiencing a change in social worker since the last review from 13% in March to 20% in April. This coincides with an intake of new ASYE's which will mean better stability of allocation in the medium term. 2 of the 7 case audits completed in April related to Children in Care, with 71% judged acceptable or better (compared with 100% in March). "Practitioner contact", "Planning for children" and "Recording and report 100% writing" were at (same as March), whereas "Management scrutiny/oversight", "Independent Scrutiny", "Experience of child/young person" and "Assessment & needs analysis" were at 50% (a fall from 100% for all in March). This correlates with higher expectations of these functions.

Workforce data regarding vacancies and caseloads are currently in development following a data cleansing exercise – the following figures are for April: The average caseload is 21.5, adjusted to include case-holding staff only, with ASYEs treated as 0.6FTE. In Children and Families, the team with the highest average caseload per FTE is South Team 1 (32.7 vs. 20.5 in January) and the lowest is now North Team 3 (16.1 vs 16.2 in January). For Initial response the highest is North Team (26.9 vs 21.3 in January) and the lowest is Exeter Team (18.3). For Permanency and Transition the highest is Exeter Team 1 (21.3 vs. 13.7 in January) and the lowest is still Mid & East Team 1 (17.4 vs. 25.6 in January).

Since the last Scrutiny report efforts have been concentrated on:-

Early Help: Governance and leadership for this area of work is now becoming clear. Governance is via the Early Help Operations Group and Children, Young People and Families Alliance. Within DCC a new Operations Manager has started in post. Officers have drawn together the needs and outcomes framework to support the delivery of the service. A review is underway to align management arrangements. Data is now becoming more available and this has had positive impact so that elements of the services are now more actively ensuring that work is entered into the system.

There is now a Holistix end user group including partners which is beginning to have impact in developing the system to be more effective. There is more work to do on ensuring quality.

The local practitioner forums are now working under new Terms of Reference and agendas. A nominated Childrens Social Care Team Manager is cochairing. This is enabling more discussions about social care thresholds and problem solving. We are also using these to ensure improved communications across the system, undertake training and consider step down cases. As the services for the Early Help offer from the council are joined into a more coherent service, these forums will also allocate a greater range of services and resources to families subject to DAF/TAC. We now have a quarterly multi-agency group meeting the next focus is Workforce Development.

Consistency of Practice: Since the last CIB audit activity has focussed on Care Leavers and children where there is a risk of Child Sexual Abuse. For the former group we have identified all youngsters inside and outside of the Childrens Social Work service training and for each one we are ensuring that needs are being met. A Senior Manager will deliver to relevant colleagues to ensure all Pathway Plans, PA and other support is in place. The data set which has now been completed shows reasonable levels of 'in touch' and suitable accommodation – with more to do. However, Employment, Education and Training is a vulnerability. This is to be addressed via the extension of the Virtual School to Care Leavers.

We have taken the opportunity to look at audit scores from across the year. These highlight in which teams and areas there are specific quality issues. As this is a whole year of data we are now looking to break down for last 6 months to ensure progress made during the year is not overlooked. In relation to the area where most vulnerability has been noted there is a new Area Manager and 2 new permanent Team Managers in post. Support to teams where there are specific weaknesses will take the form of increased audit, training, supervision and management oversight. This work has also highlighted which managers are consistently undertaking audits and which are not. We are taking remedial measures to address this issue. Within the audit system Senior Manager's moderate low and high scores; we will undertake targeted work 4 times per year to ensure low scores and corrective actions have been addressed.

Following focus on a Child Sexual abuse case we have begun a piece of work to audit relevant cases open in our system. We have also asked police colleagues to assist with MAPPA information about where offenders are living. We will be requesting specific MAPPA meetings to consider these cases. The original case which led to this activity has been referred to the SCR subgroup and multi-agency review activity is planned.

Leadership and Management: New posts within the structure have been recruited to and new arrangements came fully into place on 1st June. There is

1 Area Manager vacancy covered by an Agency Manager and 1 Principal Social Worker vacancy. Both are being nationally advertised at present.

5.2 Quality assurance of commissioned services (Children's Social Care)

The quality of regulated children's provision is monitored by Ofsted and relates to published judgements as at the start of January 2015. The percentage of Ofsted regulated providers (residential and fostering) judged good/outstanding by Ofsted has improved marginally to 66.0% from 64.6% during the last quarter: 2 previously outstanding/good provisions were judged adequate/inadequate on re-inspection, 2 previously adequate/inadequate provisions were judged outstanding/good and 1 adequate provision closed.

The Atkinson Unit was inspected during the quarter and was judged to be adequate; previously the judgement was good.

There are 57 commissioned provisions where at least one Devon child is placed and 19 of these are not within the Peninsula Framework. 27 commission provisions are outside Devon and 17 are outside the Peninsula Framework area which comprises Cornwall, Devon, Plymouth, Torbay and Somerset. Overall the proportion of commissioned provides judged by Ofsted as outstanding/good is 69.6% with the figure rising to 71.1% for commissioned provisions within the Peninsula Framework.

Children's placement services are quality assured through a peninsula team working collaboratively through the Peninsula Commissioning and Procurement Partnership, which is governed by a Board drawn from all five Authorities. Providers are put through a robust procurement process to be awarded a Peninsula Framework Contract. If a provider is then subject to an Ofsted judgement from a full inspection of inadequate; admissions are immediately suspended. The suspension is only lifted when the Board agree that quality compliance has been achieved. Suspensions may also arise from our own intelligence such as social workers, Independent Reviewing Officers, education team or following routine site visits.

The Peninsula Framework Contract process also includes un-regulated 16+ provisions. Providers are required to achieve core requirements and pas a site visit.

6. Education and Learning

Education and Learning outcomes and national benchmarks are mainly unchanged as they are annual indicators. Information on exclusions and the 2014 Annual Performance Summary are presented in separate papers.

The percentage of Devon's learners in good and outstanding schools remains above the national average for both primary and secondary phases. 85% of primary aged children attend Devon schools judged good or better compared to 82% nationally. In the secondary phase 80% of students attend good or outstanding schools. The national average is 78%.

86% of Devon's primaries are judged good or outstanding compared to 82% nationally. Devon's secondary schools, of which over half are academies, are below the national average. 70% of Devon's secondaries are good or outstanding compared to 72% nationally.

Inspections undertaken during the spring term of 14/15 reflect an improving trend from the autumn term with 78% of schools good/outstanding in spring compared to 47% in the autumn term.

A new "Excellence for All" School Improvement Strategy will be implemented from September 2015 to achieve our ambition of every Devon school judged will be either good or outstanding. The Excellence for All Programme will replace the "Targeted Intervention and Support Programme" (TISP).

Early Years take-up of 2-year-old funding is improving and broadly in line with national benchmarks. 67% of eligible 2-year-olds are accessing early years provision compared to 70% nationally. 3 and 4-year-old take-up has reduced marginally but remains high at 94.4%

The quality of Devon's Early Years PVI (Private, Voluntary and Independent) remains consistently high at 89% when compared to the national benchmark, of 82% based on Ofsted assessments.

Childrens' Centres inspection outcomes remain below the national benchmark, with 59% of Devon's Childrens' Centres judged as good or better compared to the national average of 67%. Devon's inspection outcomes are however ahead of the SW regional average of 53%. Only one childrens' centre has been inspected since September 2014 but the report from Ofsted has not yet been published.

Devon's NEET (Not in Education, Employment or Training) rates are at the lowest level for many years. In April 2015, Devon's NEET rate was 4.3%. By comparison, Devon's April 2014 NEET rate was 5.3%. National Benchmarks are due to be published in July 2015-16.

7. Risk Management

All risks recorded in the People's Services Risk Register that are escalated to the Corporate Risk Register are shown in Appendix C to this report. Risks are reassessed on a monthly basis and on this occasion this has resulted in a no changes since the previous report to People's Scrutiny Committee.

Jennie Stephens Strategic Director (People)

Appendices:

Appendix A: People's Services Performance Scorecard – Quarter 4 (2014-15), including Children's Quality Assurance Framework (April 2015)

Appendix B: CQC Compliance Scorecard Appendix C: People Risk Register

Electoral Divisions: All

Cabinet member for Performance and Engagement: Councillor B Parsons

Strategic Director: Jennie Stephens

Local Government Act 1972: List of Background Papers Contact for enquiries: Damian Furniss A108, The Annexe, County Hall Tel No: (01392) 38338

	!	2013-14	2013-14	1		APPENDIX				
Indicator	Definition	England Average	Q4	Target	Q1	2014-15 Q2	Q3	Q4	Direction of Travel since 2013-14	
ASCOF 1C (part 1)	Adult Services Proportion of people using social care who receive self directed support	62.10%	68.70%	70.00%	63.03%	73.75%	73.97%	74.02%	Improving	Quality of life measure. Good performance is HIGH
ASCOF 1C (part 1a)	Proportion of people using social care who receive self directed support (service users)	NEW						89.90%	New	Quality of life measure. Good performance is HIGH
ASCOF 1C (part 1b)	Proportion of people using social care who receive self directed support (carers)	NEW						89.40%	New	Quality of life measure. Good performance is HIGH
ASCOF 1C (part 2)	Proportion of people using social care who receive direct payments	19.10%	26.20%	26.00%	25.78%	30.07%	30.87%	31.19%	Improving	Quality of life measure. Good performance is HIGH
ASCOF 1C (part 2a)	Proportion of people using social care who receive direct payments (service users)	NEW						33.50%	New	Quality of life measure. Good performance is HIGH
ASCOF 1C (part 2b)	Proportion of people using social care who receive direct payments (carers)	NEW						56.20%	New	Quality of life measure. Good performance is HIGH
ASCOF2A (part 1)	Rate of permanent admissions to residential and nursing care per 100,000 (18-64) population	14.4	20.40	17.00	19.05	21.15	18.16		Improving	Delaying and reducing care needs. Good performance is LOW
ASCOF2A (part 1)	Rate of permanent admissions to residential and nursing care per 100,000 (18-64) population	NEW						20.00	New	Delaying and reducing care needs. Good performance is LOW
ASCOF2A (part 2)	Rate of permanent admissions to residential and nursing care per 100,000 (65 and over) population	668.4	556.40	592.70	523.51	506.61	446.59		Improving	Delaying and reducing care needs. Good performance is LOW
ASCOF2A (part 2)	Rate of permanent admissions to residential and nursing care per 100,000 (65 and over) population							616.20	New	Delaying and reducing care needs. Good performance is LOW
ASCOF 2B (part 1)	Proportion of older people (aged 65 and over) who are still at home 91 days after discharge from hospital into reablement/rehabilitation services (effectiveness of the service)	81.90%	89.80%	81.50%	90.47%	88.63%	90.91%	88.80%	Declining	Delaying and reducing care needs. Good performance is HIGH
ASCOF 2C (part 1)	Delayed transfers of care from hospital per 100,000 population (ALL)	9.7	14.0	11.1	14.5	14.5	16.4	17.11	Declining	Delaying and reducing care needs. Good performance is LOW

	Delayed transfers of care from hospital per 100,000 population (Social Care)	3.1	3.3	2.7	2.78	3.5	3.89	4.11	Declining	Delaying and reducing care needs. Good performance is LOW
	The outcome of short term services: sequels to services	NEW						85.60%	New	Delaying and reducing care needs. Good performance is HIGH
	Youth Offending			1		ı		1	1	
	First time entrants to the criminal justice system (rate per 100,000 10-18 population)	441	366	No targets set	366	341	345	328	Improving	Good performance is LOW.
	Rate of re-offending (binary rate)	35.30%	32.90%	No targets set	32.90%	32.00%	31.40%	32.10%	Declining	Good performance is LOW.
	Early Years					I		l	l	
	Percentage of 2 year olds in care accessing 2gether funding within terms	Not published	26.30%	100.00%	-	26.10%	68.20%	66.70%	Improving	Early Years
	Percentage of 3 and 4 year olds in care accessing the Early Years entitlement within the term	Not published	100.00%	100.00%	-	100.00%	91.70%	94.40%	Declining	Early Years
	Percentage of Early Years and Child Care Providers graded Good/Outstanding at their last Ofsted inspection	Not published	84.30%	100%	84.30%	86.20%	88.60%	88.70%	Improving	Early Years
	Percentage of children's Centres graded Good/Outstanding at their last Ofsted inspection	Not published	57.60%	No target set	54.30%	54.10%	54.10%	54.10%	static	Early Years
	Social Care Provision (compliance			1		ı		ı	ı	
	Percentage of in-house services graded by Ofsted as Good/Outstanding (residential only, excluding special schools)	Not published	80.00%	No target set	100.00%	100.00%	66.60%	Not available	Declining	In-house provision
	Percentage of in-house services graded by CQC as Compliant	Not published	96.60%	No target set	96.60%	92.30%	96.20%	95.20%	Static	In-house provision
	Social Care Commissioning (comp	liance)		<u> </u>						
	Proportion of residential/fostering childrens care providers in Devon that are registered with Ofsted and judged good or outstanding	Not published	78.70%	No target set	76.10%	64.60%	66.00%	Not available	Declining	Commissioned services
	Percentage of commissioned services in Devon graded by CQC as Compliant (assumes no/minor concerns): OLD inspection regime	Not published	89.40%	No target set	91.70%	91.80%	90.60%	82.50%	Improving	Commissioned services
	Percentage of commissioned services in Devon graded by CQC as Compliant (assumes outstanding/good): NEW inspection regime	NEW						63.80%	New	Commissioned services
	Education and Learning									
		Ar	92	2011	2102	2013	2014	Trend		Notes
SEC5	Percentage 5+ A*-C or equivalent including English and Maths (Children in Care)	Devon West	ea South National		10.2 % 12.4% 14.9%	5.8% 12.6% 15.5%	6.0% 9.2% 12.0%	Declining (Negative)	Education (ar Virtual Schoo Improvement KS4 results is & monitored School Gover expectations should see sig	Notes Inual indicators) I Report published - It Plan to address being implemented by the Virtual ning Body. Initial are 14/15 results gnificant I (Exams Summer

		,			•				
SEC5	Percentage 5+ A*-C or equivalent including English and Maths (All learners)	Devon West	South National	58.4% 57.9% 59.0%	58.5% 57.5% 59.4%	59.6% 59.5% 59.2%	56.7% 56.7% 53.4%	Increasing (Positive) [See Notes]	Education (annual indicators): 2014 results are not comparable to previous years due to changes in curriculum. A national decrease in pass rates was reported. Devon's decline was significantly less than elsewhere nationally and Devon is now above national mean.
	% absence in secondary schools (all categories)	Devon West	South National	6.3% 6.5% 6.5%	5.8% 5.9% 5.9%	5.8% 6.1% 5.9%	5.1% 5.4% 5.2%	Declining (Positive)	Education (annual indicators): Total secondary absence has improved. However, targeted work to reduce persistant absence, including targeted vulnerable learners, is being delivered by commissioned
	% absence in primary schools (all categories)	Devon West	South National	4.9% 5.0% 5.0%	4.4% 4.5% 4.4%	4.7% 4.7% 4.7%	3.6% 3.9% 3.9%	Declining (Positive)	Education (annual indicators): Total primary absence has improved. However, targeted work to reduce persistant absence, including targeted vulnerable learners, is being delivered by commissioned
	% of fixed term exclusions	Devon West	South National	4.11% 4.17% 4.34%	3.91% 3.82% 4.05%	3.04% 3.33% 3.52%	Not Published	Declining (Positive)	Education Welfare Services. Education (annual indicators): Total fixed term exclusions have improved. Strategies to further reduce exclusions are being delivered by DCC Inclusion Officers, commissioned Services and joint working with schools.
	% of permanent exclusions	Devon West	South National	0.05% 0.06% 0.07%	0.07% 0.06% 0.07%	0.08% 0.06% 0.06%	Not Published	Increasing (Negative) [See Notes]	Education (annual indicators): Permanent exclusions have increased. However, academic year 2014/15 should report an improved picture with 50 permanent exclusions to June 2015 compared to 70 in the same period in 2014. Strategies to further reduce exclusions are being delivered by DCC Inclusion Officers, commissioned Services and joint working with schools.
	Percentage of LA maintained primary learners with Ofsted judgement of Good/Outstanding in the acedemic year	Dev Natio					86% 82%	Increasing (Positive) [See Notes]	State funded primary schools in Devon have a higher percentage of learners in good or outstanding schools compared to national. Improvements to the commissioned School Improvement function has seen a higher percentage of inspections improving or maintaining their rating in the spring term of 2015 than Devon's neighbouring LA.
	Percentage of LA maintained secondary learners with Ofsted judgement of Good/Outstanding in the acedemic year	Dev Natio					70% 72%	Declining (Negative) [See Notes]	State funded primary schools in Devon have a lower percentage of learners in good or outstanding schools compared to national. However, improvements to the commissioned School Improvement function has seen a higher percentage of inspections improving or maintaining their rating in the spring term of 2015 than Devon's neighbouring LA. Half of Devon's secondary schools are



Devon Children's Social Work Quality Assurance Framework

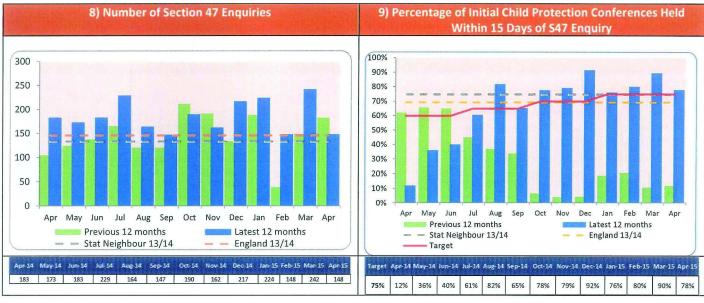
Delivery and Improvement Group Report of: April 2015

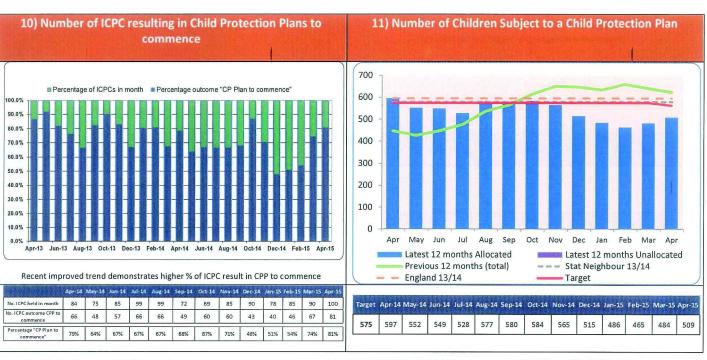
1.0 Activity and Performance Information

hildren and	Young Peop	le Population prof	ile for Devon – 2	013 Mid-Year Est	imates	Source: Office of I
Pop	ulation per a	age band				
	0	1-4	5-9	10-15	16-17	18-25
England	676,531	2,737,599	3,187,919	3,607,189	1,297,213	5,673,616
Devon	7,363	31,157	38,498	46,923	17,604	71,405
Age B	and as a Per	centage of Total P	opulation			
England	1.3%	5.1%	5.9%	6.7%	2.4%	10.5%
Devon	1.0%	4.1%	5.1%	6.2%	2.3%	9.4%

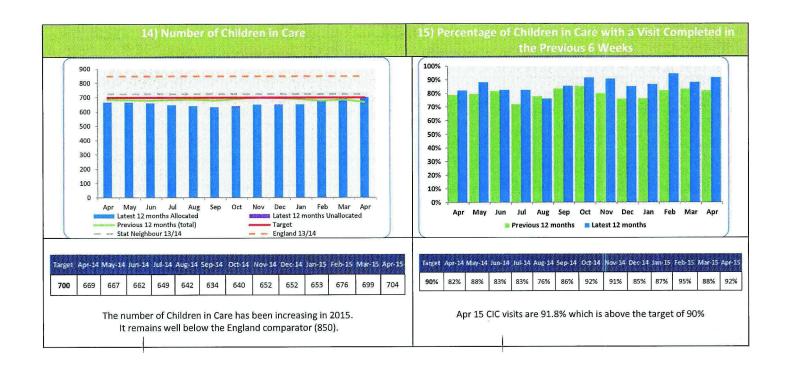












Adoption

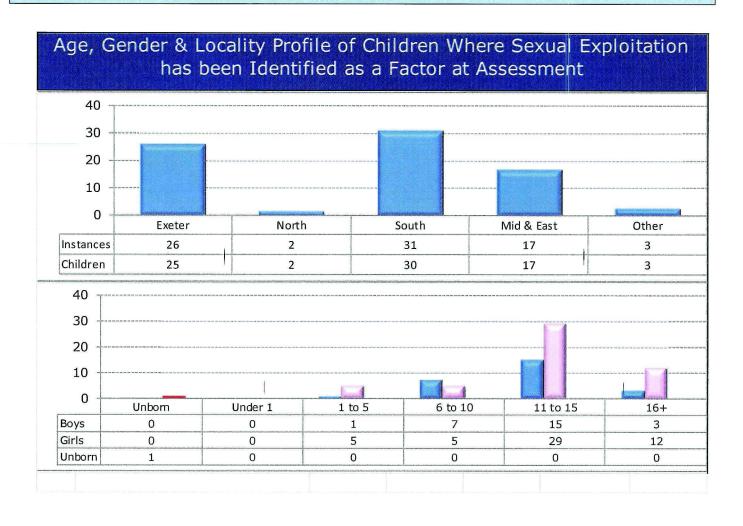
DEVON COUNTY COUNCIL ADOPTION SCORECARD PERFORMANCE ON A PAGE (2014-15 to Quarter 3) Devon County's Adoption Population Adoption Scorecard: Average Time Indicators Devon 2012-15 Quarter 3 Performance 51 Number of Children adopted (YTD) 700 Aged 5 and Over 12 23.5% 638 639 608 39 76.5% 600 Aged Under 5 552 547 528 487 77 Number of children with a decision to be placed for Adoption 500 63 485 Number of children with a placement order 400 426 26 Number of children matched to adopter but not yet placed 300 Number of children placed with adopter 18 . 213 182 12 200 Number of children ending care due to Special Guardianship order 192 137 169 157 SN average 153 Performance Measures - Adoption Scorecard (3 year -YTD) 100 average 121 121 (2011-14) (2011-14) A1: time between child entering care and placement for adoption 485 days 517 days 628 days 2008-11 2009-12 2010-13 2011-14 2012-15 Q3 2013-16 A2: time between receiving court authority to place a child and deciding on a match 192 days 217 days 152 days 3 Year Average Devon A1 ····· Target A1 = Devon A2 Target A2 A3: children waiting less than 18 months between entering care and placement for 67% 51% 61% *Data source: ALB Adoption Survey, CareFirst and Adoption Database

Care Leavers Apr 14 to Apr 15

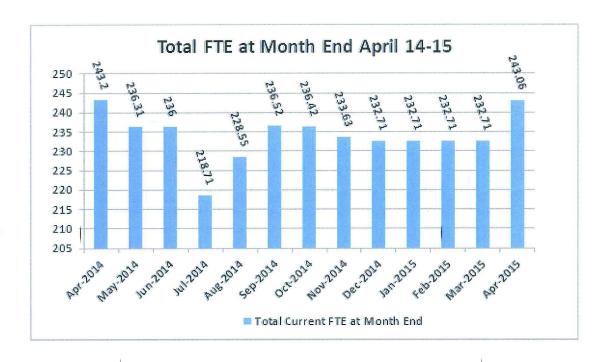




Child Sexual Exploitation (CSE)



Children's Social Care Workforce Profile



2.0 Supporting Commentary

Overall cases.

The number of cases since January 2013 (7530) to April 2015 (5642) has shown a considerable decrease of 1888. (a slight increase of 17 from March 2015 figure 5625)

MASH

Enquiries to MASH in April decreased by (19%) from 1,587 in March to 1,286 in April, which has 2 week Easter holiday. The figure is above target (1150). However the number which become referrals continues to decrease considerably, (71% Jan-14 to 40% April-15)

Re-Referrals.

The percentage of social care re-referrals continues to decrease, 21% in April from 24% in March. Work in MASH indicates that there have been admin process issues which have impacted negatively on this indicator which have now been addressed.

Number of section 47 Enquiries.

The number of S47 enquiries has decreased by 94, from 242 March to 148 April. The stat neighbours and England comparator for 13/14 (133 and 146 respectively).

The number of ICPC's which result in a plan continues to increase considerably from 54% February,74% March to 81% in April.

Initial Child Protection Conferences

The percentage of ICPCs held within 15 working days is 78% during April, above the target of 70%.

Child Protection Plan Durations

The overall number of children subject to a CP plan has increased to 509 in April compared to 484 in March. April remains below the Stat neighbours 578 and England comparator 596

Child Protection Visits within 30 days

94% of Child Protection visits were completed within the previous 30 days in April compared to 89% in March.

Number of Children in Care.

The number of Children in Care has increased by 51 from the start of 2015 to 704 for April well below the England comparator (850).

Children in Care visits in previous 6 weeks.

The Devon target for visits in Q4 is 2014/15 is 100%. The April figure is 91.8% which has improved from the March figure of 88.3%.

3. Internal Case Audits

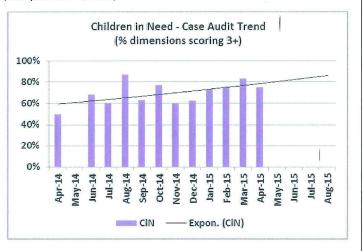
• The overarching aim of the audits is to improve the quality of practice and outcomes for children and young people. The audit considers the quality of the information and recording on the young person's file, the arrangements for the audit include discussion with the Social Worker, the quality of the decision making process, risk assessment and analysis. Accordingly, the scoring system above reflects this. Judgements are: (1) No or few standards met. (2) Some standards partially met. (3) Some standards met in full. (4) Many standards met in full. (5) All standards met in full or exceeded. The charts below show the cases that meet standards 3, 4 and 5.

CASE AUDITS: CHILDREN IN NEED

Of the **8** internal audits completed during April, **2** related to Children in Need.

Audit Dimonsian	April 15			
Audit Dimension	No's % 2 100' 1 509 1 509 2 100' 1 509	%		
1a: Management scrutiny/oversight	2	100%		
2: Experience of child/young person	1	50%		
3: Practitioner contact	1	50%		
4: Assessment & needs analysis	2	100%		
5: Planning for children	1	50%		
6: Recording and report writing	2	100%		
Number of audit dimensions scored	1	.2		
Number of audits for CiN cases		2		
Overall % judged 'Acceptable' or better	75	5%		

CiN case audits completed since April14 show a gradually improving trend in terms of the % of audit dimensions scoring 3+ (acceptable or better).

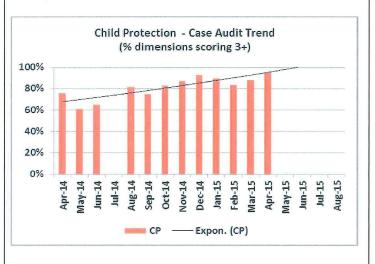


CASE AUDITS: CHILD PROTECTION

Of the 8 internal case audits completed during April 2015, 3 related to Child Protection cases.

Audit Dimension	Apr	il 15
Audit Dimension	April No's 3 3 3 3 3 2 21 3	%
1a: Management scrutiny/oversight	3	100%
1b: Independent Scrutiny	3	100%
2: Experience of child/young person	3	100%
3: Practitioner contact	3	100%
4: Assessment & needs analysis	3	100%
5: Planning for children	3	100%
6: Recording and report writing	2	67%
Number of audit dimensions scored	2	21
Number of audits for CP cases		3
Overall % judged 'Acceptable' or better	95	5%

CP case audits completed since April 14 show an improving trend in terms of the % of audit dimensions scoring 3+ (acceptable or better).

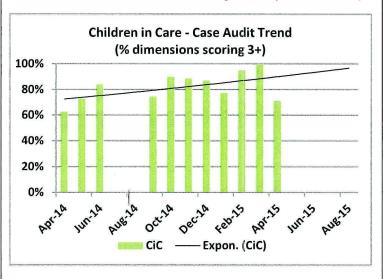


CASE AUDITS: CHUDREN IN CARE

Of the 8 internal case audits completed during April 2015, 2 related to Children in Care.

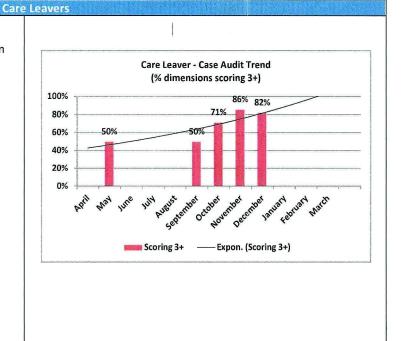
Audit Dimension	1 ! 1 ! 2 1 1 ! 2 1	il 15
Audit Dimension	No's	%
1a: Management scrutiny/oversight	1	50%
1b: Independent Scrutiny	1	50%
2: Experience of child/young person	1	50%
3: Practitioner contact	2	100%
4: Assessment & needs analysis	1	50%
5: Planning for children	2	100%
6: Recording and report writing	2	100%
Number of audit dimensions scored	1	4
Number of audits for CiC cases	:	2
Overall % judged 'Acceptable' or better	71	L%

CIC case audits completed since April14 show an improving trend in terms of the % of audit dimensions scoring 3+ (acceptable or better)



11 Care Leavers Case Audits are reviewed for 2014-15. A sample size of 39 has been positioned for audit with team managers for May 2015.

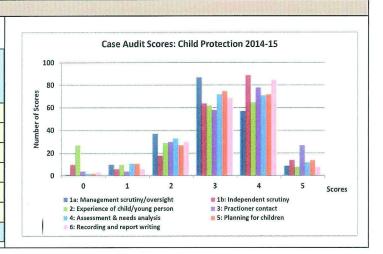
Audit Dimension	2014	4-15
Addit Dimension	3 259 8 569 6 429 9 679 6 429 10 789 9 679	%
1a: Management scrutiny/oversight	3	25%
1b: Independent Scrutiny	8	56%
2: Experience of child/young person	6	42%
3: Practitioner contact	9	67%
4: Assessment & needs analysis	6	42%
5: Planning for children	10	78%
6: Recording and report writing	9	67%
Number of audit dimensions scored	7	6
Number of audits for Care Leavers	1	1
Overall % judged 'Acceptable' or better	67	'%



Annual Trands: Calle Protection

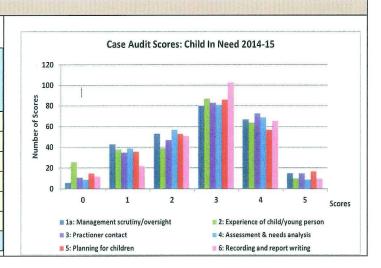
57.1% of scores across all Dimensions were 3+

Scores	Count of Dimensions	Count of 3+ Scores	3+ Scores % of Total
0	49	11	0.8%
1	58	32	2.3%
2	204	120	8.5%
3	487	274	19.5%
4	517	306	21.7%
5	92	61	4.3%
Total	1,407	804	57.1%



66.7% of scores across all Dimensions were 3+

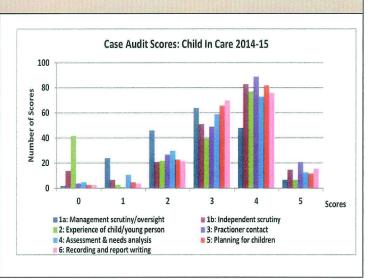
Scores	Count of Dimension	Count of 3+ Scores	3+ Scores % of Total
0	79	47	3.0%
1	213	132	8.3%
2	300	208	13.1%
3	520	353	22.3%
4	396	265	16.7%
5	76	51	3.2%
Total	1,584	1,056	66.7%



Annual Trends Calls in Care

57.1% of scores across all Dimensions were 3+

Scores	Count of Dimensions	Count of 3+ Scores	3+ Scores % of Total
0	73	15	1.1%
1	55	21	1.6%
2	191	102	7.6%
3	399	244	18.2%
4	528	320	23.9%
5	91	62	4.6%
Total	1,337	764	57.1%



4.0 Qualitative Feedback - The Independent Reviewing Unit and the Involvement Team

** INDEPENDENT REVIEW UNIT ** CHILD PROTECTION MEETING ATTENDANCE

For **Initial Child Protection Conferences**, In April the most significant non-attendance issues remain with General Practitioners, who were recorded as invited to 64 ICPC's and attended 7 (11%)

For Core Groups, (111 monitoring forms in April)

The overall attendance rate is 72% across the partnership for April (88% in March). GP's did not attend any of the 5 core groups they were invited to but child health had 77% attendance, 66 out of 88 invited. Probation attended 50%, 6 of the 12 core groups.

For **Child Protection Reviews** the data collected indicates that the Health Professionals were invited to 207 and attended 121 (59%) They provided reports on 17 cases that they didn't attend making 67% of cases were either attended or had a report provided, an improvement from March 61%.

Although the Police only attended 14 out of 104 (13%) CP reviews they provided reports for 88 resulting in 98% of cases were either attended or had a report provided, an improvement from March 87%

VOICE OF THE CHILD: CHILD PROTECTION

Parent / Carer Feedback Forms:

 30 feedback forms for 48 individual children and young people were received in April 2015 which is a downturn of 3% (1 less) than in March. The feedback covers 23 individual Social Workers. No feedback required escalating to the Customer Relations Team.

Involvement indicators (respect & courtesy; support; kept informed & views acknowledged; agreement with outcome)

 April sees a small downturn in the number of respondents reporting positive feedback against all four involvement indicators from 58% in March to 57% in April 2015. The majority of respondents reported positive feedback with parents/carers reporting they were very appreciative of the support they received.

Good Practice:

- The percentage of respondents reporting they were treated with respect and courtesy by their social worker sees an upturn of 3% to 87%
- There is an upturn of 5% to 73% compared to March 2015 for respondents reporting they were kept informed and their views acknowledged
- There is an upturn of 22% (8) to 80% compared with March 2015 for respondents reporting that they agreed with the outcome.

Areas for Improvement:

- The number of respondents reporting they felt supported by their social worker sees a downturn of 4% to 67% compared to 71% in March 2015.
- 4 (13%) respondents reported that they did not agree with the outcome.
- Where negative feedback is reported, communication is a factor with parent/carers reporting lack of information/being kept informed.
- There is an inevitable lag between case closure activity and receipt of feedback forms from families, so reporting timescales mean that the information analysed in section 3.1 is based on all forms received in the month of January 2015 rather than all cases closed in that month.

"Key Themes" Lack of communication/understanding of the process - expectations

What Parents & Carers said

"Social worker" was very supportive and helped whenever I needed it"

"I feel I was kept informed very well "

"Helped me a lot"

"Always professional and respectful"

"We had regular meetings and I was always kept up to date with what was happening"

"Only met once, not heard from since, not received information promised"

"I have still not got help, I have been left struggling"

"Thank you for the work you do on behalf of all families who want children protected"

Recommendations:

- Look at alternative options to increase parent carer feedback
- Investigate the number of cases "unclassified" on closure.
- Allocate resources to overhaul forms and integrate with wider SMS QA systems and qualitative measures.
- The full Involvement report for April 2015 is available on the QAF webpages.

** INDEPENDENT REVIEW UNIT **

Timeliness of Social Worker Reports for CiC Reviews

The April IRU report shows the percentage of social worker reports for CiC reviews that arrived before the review – as 44% compared to 45% in March.

Reports arrived on the day of the CiC Review in 42% of cases in the month a slight decrease from March which was 46%. The percentage of cases where no report was available or data not recorded 13.9% in April compared to 9% in March

Changes of Social Worker since last CiC Review

146 monitoring returns completed in April recorded data on changes in social worker. Of these, **20% show the child/young person** having **1** or more changes of social worker since the last CiC review (a total of 29 children). This is an increase from last month (18 children, 13%). In April, of these 29 children with a change of SW, 26 had had 1 change in SW, 3 had 2 changes of SW since their last review.

Teams have been working hard to provide stability in the services and have invested heavily in recruiting newly qualified social workers in order to provide a more long term stable workforce.

Trend - % of cases reviewed with 1 or more changes of Social Worker since last review:-

	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Apr-15
% of QA forms completed in the month that indicate 1 or more changes in Social Worker since the last CiC review	23%	23%	16%	28%	24%	20%	24%	29%	12%	13%	20%

CQC Compliance Summary Report

Please click on the arrow above to show date parameters

 Quick Links

 Main Menu
 Trends

 Overview
 Standards

 All Compliance
 Inspections

 Provider Compliance
 Map

 Parent Organisation

Data: As at 01/03/2015 **Source:** Care Quality Commission, CareFirst **Update Frequency:** Monthly (Dependent on data from CQC),

CareFirst - End of previous month

Compliance for	Care Home and Domiciliar	y Care Service Locations in Devon:
----------------	--------------------------	------------------------------------

Whole Market:
DCC Commissioned:
In-house:

Total Providers	Not Yet Inspected	
527	69	13.1%
424	19	4.5%
25	4	16%

_	lo cerns
345	65.5%
301	71%
19	76%

	Minor Concern		erate cern
35	6.6%	25	4.7%
33	7.8%	23	5.4%
1	4%	1	4%

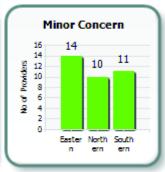
Ma Con	Insp	
2	0.4%	50
2	0.5%	41
0	0%	0

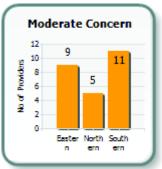
'	50	9.5%
_		
	47	11.1%
_		
	0	0%

^{*} Please click on the figures within the red box to show what providers have major concerns against one of their standards.

Whole Market Breakdown (New Style Inspections excluded):



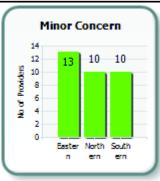


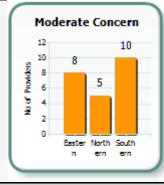


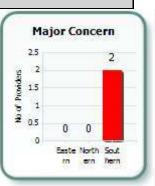


DCC Commissioned (New Style Inspections excluded):





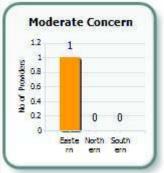


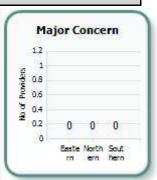


In-House (New Style Inspections excluded):









^{*} Please be aware that this is a provider count figure, not how many individual standard concerns there are.

^{*} Please click on one of the following to view a breakdown of the above data by the chosen service type.

Care Home without Nursing // Care Home with Nursing // Domiciliary Care

PEOPLE RISKS INCLUDED ON THE CORPORATE RISK REGISTER (AS AT 31 March 2014)

v	_	v	

Mitigating Controls:	Over due review	Red	Amber	Green	Completed
Risks:	Review over	Very High	High 13+	Medium 10+	Low 1+
	due 0+ (Red)	21+ (Purple)	(Red)	(Amber)	(Yellow)

Risk Code a	nd Status:	Scope of Risk:		Current position/actions tak	en/accountable officer:
TG11: Mark adult social	et capacity care	Without mitigating action there is risk the care is currently stretched in some parts		al Risk Owner: Tim Golby	
Inherent Risk: Current Risk:	30 24	→		Accountable Officer: Jennie Stephens	Jennie Stephens
Mitigating o	controls (inclu	ding RAG rating):	Direction of Travel:	Additional comments (if app	propriate):
Amber	a) Refresh of Statement	f Adult Social Care Market Position	↑	-	oing work with providers to secure
Green Green	b) Provider Engagement Network c) Performance monitoring of call-off against Framework Agreements		\leftrightarrow	inflationary award issued for	providers to encourage workforce
Amber	d) Work with	h providers to address capacity shortfalls	\leftrightarrow		
Amber	e) Investigat	ions of new solutions/new ways of	\leftrightarrow		
Green	f) Weekly SI	TREPS and escalation	\leftrightarrow		
Amber	g) Provider o	of last resort option to be explored	\leftrightarrow	†	

Risk Code an	Risk Code and Status: Scope of Risk:			Current position/actions ta	ken/accountable officer:
	Health and Social Without mitigating action there is risk that: the Authority will not		Risk Owner:	Tim Golby	
Care Act	3			•	
Inherent	25	arising from the Act. Phase 1 activiti	es have been successfully	Accountable Officer:	Jennie Stephens
Risk:		delivered, but further requirements are due for delivery in April/October 2016 with quidance still outstanding in some areas.			Jennie Stephens
Current	16				
Risk:		Risks remain relating to organisation consequences and the ability of the n	al capacity, financial		
Mitigating co	ontrols (inclu	ding RAG rating):	Direction of Travel:	Additional comments (if ap	propriate):
Green	a) Project in	place to take forward changes	1	Project management appro-	ach being taken to delivering the
Green	b) Better Ca	re Fund	\leftrightarrow	various requirements of the Care Act with dedicated project	
Green	c) Joint commissioning Coordination Group		↔	activities were successfully activity is on-going to ensur	port identified work-streams. Phase 1 delivered to prescribed timescales, but e successful delivery of further per 2016 with guidance outstanding in

PEOPLE RISKS INCLUDED ON THE CORPORATE RISK REGISTER (AS AT 31 March 2014)

v	C	v	

Mitigating Controls:	Over due review	Red	Amber	Green	Completed
Risks:	Review over	Very High	High 13+	Medium 10+	Low 1+
	due 0+ (Red)	21+ (Purple)	(Red)	(Amber)	(Yellow)

Risk Code and Status: Scope of Risk:			en/accountable officer:			
		5 5	nout mitigating actions there is a risk that: lack of acute hiatric bed capacity locally and nationally is having a		Tim Golby	
Inherent Risk:	20	detrimental impact on acutely unwell people accessing hospital care increasina the risk to themselves, carers and public		Accountable Officer:	Jennie Stephens	
Current Risk:	16			·		
Mitigating controls (including RAG rating):		Direction of Travel:	Additional comments (if appropriate):			
Amber	a) Commissioning arrangements under development		\leftrightarrow	Continuing national pressure on acute psychiatric bed provision locally and nationally for people with mental health and well be		
Green	b) Mental Health Prices Concordaat agreed with peninsula partners.		↑	issues resulting in services having to be secured Out of County. Devon's commissioning arrangements are reflective of national trends.		

9 9			Current position/actions taken/accountable officer:		
		Without mitigating actions there is risk that: potential loss of funding affecting DCC service delivery in the event of financial		Risk Owner:	Tim Golby
Inherent Risk:	erent problems arising with an external funding		, ,,	Accountable Officer:	Jennie Stephen
Current Risk:	30				
Mitigating controls (including RAG rating):		Direction of Travel:	Additional comments (if appropriate):		
Amber	a) Governin	g body of CCG	\leftrightarrow	The current risk remains assessed at 30 (VERY HIGH) as a result of	
Amber	b) Joint com	missioning Executive Group	\leftrightarrow	Recent announcement of Succ	es being experienced by NEW CCG. ess Regime and national focus on ough and remains a very high risk to