People's Scrutiny Committee 21 March 2016

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 3 (December) for 2015-16.

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

Adult social care performance continues to perform well against national benchmarks, with the exception of Delayed Transfers of Care. However the service is showing an overall deterioration in performance on key local indicators relating to care management such as the timeliness of assessment and reviews. Recent benchmarking of incidence and spend also indicates a higher comparative number of people being assessed and supported in some service areas and work is ongoing to better understand and address this.

The service has recently reorganised with the learning disability and older peoples and physical disability teams being integrated to form new community health and social care teams; integration of the learning disability function into Care Direct Plus centres is now underway. The staffing establishment has been a significant concern but following concerted activity, including a regrading for social workers, the establishment is returning to more normal vacancy levels. The focus now needs to be on improvement of the key performance areas and the action will be to:

- set targets and monitor against them to improve productivity;
- improve efficiency by eliminating duplicative/unnecessary processes;
- improve demand management, pre-contact, at point of contact and when people are receiving services.

In relation to Delayed Transfers of Care, agreement has finally been reached with NHS organisations as part of the Better Care Fund group to record delays consistently across the Eastern system and ultimately across Devon. This may have a beneficial impact on the indicator but this is not clear as yet. There is a DCC action plan in place and assured with partners regarding improvement in particular in addressing the minority of delays attributable to social care with emerging signs of beneficial impact

A new Adult Social Care Performance Framework has been introduced and should be embedded by April. It gives particular emphasis to quality assurance of practice, quality and sufficiency in the market, and robust information about safeguarding. It is based around the priorities and key questions addressed in the 'Adult Social Care in Devon Annual Report 2015', also on this agenda. The latest report will be presented to the Adult Social Care Standing Overview Group on April 14th 2016 to seek their guidance on which information in what format is presented to People's Scrutiny Committee on June 16th 2016.

4.2 Quality assurance of commissioned services

Performance reporting on regulated services for adults (residential, nursing and domiciliary care) for the period 1 October to 31 December 2015 is based on the summarised data on CQC ratings attached in Appendix B. During October 2014, the CQC changed its inspection framework, introducing an overall inspection rating judged from Outstanding to Inadequate. Whilst old style inspections are no longer taking place they will continue to be reported until all providers have been inspected under the new framework which in Devon CQC anticipates being by the end of this calendar year.

Devon commissions services from 427 of the 499 regulated providers in Devon. As at December 2015, of the 201 social care providers in Devon assessed under the new framework, DCC commissions from 186 of which 113 (60.8%) were rated as Outstanding or Good overall, 66 (33.5%), Requiring Improvement and 7 (3.7%) as Inadequate. This is an improving trend on Quarter 2 with Devon providers nearly at comparator levels for Outstanding or Good ratings (England 62.3% and South West 63.3%).

Any service that is rated as Inadequate (or any with serious concerns under the old inspection framework) is immediately suspended from accepting new referrals from the Council or NHS whilst the Council, together with its NHS partners, works with the providers to take action for improvement. In each case, agreement will also usually be reached with the provider to cease accepting any self-funded placements until the necessary improvements have been achieved.

As at the end of December, 5 providers in the DCC area were suspended as a result of failing to meet our Quality Threshold with another 3 under Advisory Notice; 7 of which were working with the Quality Assurance & Improvement team (QAIT) to address concerns. There were 6 Devon providers that had a

Safeguarding placement suspension and a further 2 under Advisory Notice; all of which were working with the QAIT.

5. Children's Social Care

5.1 Performance Management

The performance within Children's Social Work remains stable.

Areas of concern relate to the level of enquiries and referrals to the MASH. This remains at a high level but multi-agency work is underway to improve risk management at lower levels in other agencies and ensure full information at referral. The numbers of children subject to Child Protection Plan continues to rise and work is underway with case conference chairs to ensure that appropriate risk assessment leads to the right decisions. The number of children coming off a plan quickly (within 3 months) is high and the number of cases which close following Single Assessment is also very high. All of these indicators are impacted by partners' capacity to hold and support families. This work is underway through Early Help development and DSCB.

The number of looked after children is reducing. Work to review children subject to voluntary accommodation (care) shows that recent practice is positive but young people who have been in care for a while have not always had robust plans – this is now being addressed.

The caseload levels look high in some teams as we have not aligned all practitioners to the correct teams yet.

In terms of audit all low scores have been audited. The main areas of development identified are proactive work with Care Leavers and lack of challenge, reflection and SMART planning in supervision. As a result of this Practice Standards have been re-set to clarify expectations and rigour.

5.2 Quality assurance of commissioned services

Children's placement services are quality assured at a sub-regional level by five authorities working collaboratively through the Peninsula Commissioning and Procurement Partnership, this is governed by a Board drawn from all five Authorities and supported by a Project Team of individuals with expertise in different areas of quality assurance. Providers are put through a robust procurement process to be awarded a Peninsula Framework Contract.

The Peninsula Commissioning and Procurement Partnership have an agreed process to address any concerns regarding providers to whom a contract has been awarded or providers who are in the sub-region. If concerns are raised by routine site visits, social workers, Independent Reviewing Officers, Education Team or where an Ofsted judgement from a full inspection of inadequate is made, the provision maybe immediately suspended or an advisory notice placed upon them. This results in a range of actions including:

- a review of current placements to ensure that quality thresholds are achieved or alternative plans for placements need to be made
- liaison with other Local Authorities where children are placed from out of area
- suspension of any new placements
- immediate action/support plan agreed with the provider
- co-ordination of information between education and Clinical Commissioning Groups.

The suspension is only lifted when the Board agree that quality compliance has been achieved.

Quarter Three 93% of all Devon children placed are with good or outstanding providers this continues to rise from 90% in quarter one.

One Special School was judged inadequate and we are supporting an improvement plan on leadership and management and safeguarding.

Of the Children placed out of Devon 90% of children are placed with good or outstanding provision at Quarter Three an improvement from 83% at quarter one of this year.

There are currently 69 organisations in total on the Peninsula Framework Contract for Placements. There are currently 6 provisions suspended from the Peninsula Framework Contract 1 is soon to be lifted due to satisfactory completion of quality improvements resulting in improved Ofsted grading. Two of these are in Devon. We are undertaking increased site visiting, closely monitoring action plans and working closely with Social Work staff to monitor the quality of the care for the children placed while the provider achieves the required improvements.

During Quarter Three 37 provisions have been site visited and monitored. This almost a 50% rise in activity since last quarter. Of these there are ongoing quality improvement plans with 9 providers some have multiple homes within their company.

6. Education and Learning

Results in the national tests are improving with performance above the national average at every key stage. Gaps in outcomes for disadvantaged students and their peers are closing and in 2015 they were at least in line or better, than those found nationally. The percentage of schools judged to be good or outstanding is now at 89% which is 5% above the national average. Devon's improvement trend is also above that seen nationally.

Take up of education places for two year olds has improved despite a decline in the number of eligible children. This upward trend in take up is largely due to recent changes to the application process which is now less bureaucratic for both the parent and the provider.

The number of students leaving mainstream education to be home educated is rising but this reflects a national trend. The percentage of home educated children in Devon is around 0.4% which when calculated as a percentage of the total student population, has been stable since 2010. Whilst rises in Elective Home Education (EHE) are evident across every key stage there is a marked increase in the number of older and more vulnerable children leaving the system.

The number of 'in year' admissions is approximately five thousand with around half of these designated as new students moving into the county during the academic year. Despite high levels of inward migration, over 90% of new arrivals are offered places in a local school.

Implementation of The new Special Educational Needs and Disabilities (SEND) Code of Practice continues to be challenging but there are marked improvements to performance with nearly half of all Education Health and Care Plans (EHCPs) issued within the allocated timeframe. This compares to only 31% in the last quarter. Delays have mainly been due to the lateness of information provided by partner agencies, the need to involve families throughout the assessment process and issues around service capacity to meet both volume and demand.

The volume of referrals and transfers from statutory statements to EHCPs remains very high as over 4,500 students currently have Statements of SEN. There have been 489 new referrals to the 0 to 25 SEND team which have been progressed for formal assessment from the 1077 referrals made to the Educational Psychology Service.

The local authority receives an annual grant to implement these new statutory assessment arrangements for SEND. This grant is not ring fenced which means that a business case will now need to be presented to secure additional funding to expand current capacity for transferring all students with statements onto other plans.

The percentage of NEETs (not in education, employment or training) remains low when compared to national and regional benchmarks but the percentage of NEETs has remained static over the past three years. In Devon, NEETs are over represented by young mothers, students with disabilities and care leavers. Work is underway through a new post 16 project to develop more employment pathways for these specific groups of young people and to raise the attainment of disadvantaged students at Key Stage 5.

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 the following changes are noted since Quarter 2:

- Devon Safeguarding Children's Board (DSCB): following the appointment of a new Board Chair and a new direction of travel for the Board this risk has been removed from the Corporate Risk Register and will be managed on the People Risk Register.
- School Transport: that due to continuing overspends on home to school transport, which are having deleterious effects on Education and Learning core budgets and initiatives that are currently absorbing this significant overspend this risk has been escalated following review to the Corporate Risk Register.

Jennie Stephens Strategic Director (People)

Appendices:

Appendix A: People's Services Performance Scorecard - Quarter 3 (2015-

16), 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

APPENDIX A

		2014-15	2014-15			2015-16			Ī	
Indicator	Definition	England Average	Q4	Target	Q1	Q2	Q3	Q4	Direction of Travel since 2014-15	
	Adult Services		ļ	ļ.		l				L
ASCOF 1C (part 1a)	Proportion of people using social care who receive self directed support (service users)	82.60%	89.90%	NEW	83.56%	89.00%	87.98%		Declining	Quality of life measure. Good performance is HIGH
ASCOF 1C (part 1b)	Proportion of people using social care who receive self directed support (carers)	76.60%	89.40%	NEW	98.58%	98.50%	98.15%		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)	26.00%	33.50%	NEW	28.81%	28.60%	29.33%		Declining	Quality of life measure. Good performance is HIGH
ASCOF 1C (part 2b)	Proportion of people using social care who receive direct payments (carers)	66.70%	56.20%	NEW	71.80%	63.80%	56.89%		Improving	Quality of life measure. Good performance is HIGH
ASCOF 2A (part 1)	Rate of permanent admissions to residential and nursing care per 100,000 (18-64) population	14.20	19.80	17.00	19.21	16.50	16.47		Improving	Delaying and reducing care needs. Good performance is LOW
ASCOF 2A (part 2)	Rate of permanent admissions to residential and nursing care per 100,000 (65 and over) population	658.50	616.20	540.5 (per BCF - to be reviewed)		514.80	522.86		Improving	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)	82.10%	88.80%	81.5% (per BCF - to be reviewed)		91.00%	90.59%		Improving	Delaying and reducing care needs. Good performance is HIGH
ASCOF 2C (part 1)	Delayed transfers of care from hospital per 100,000 population (ALL)	11.1	17.0	10.5	17.61	19.4	19.43		Declining	Delaying and reducing care needs. Good performance is LOW
ASCOF 2C (part 2)	Delayed transfers of care from hospital per 100,000 population (Social Care/Joint with NHS)	3.70	4.7	3.0	5.4	5.48	5.48		Declining	Delaying and reducing care needs. Good performance is LOW
ASCOF 2D	The outcome of short term services: sequels to services	74.90%	85.60%	NEW (to be set in October)	88.58%	89.37%	87.42%		Improving	Delaying and reducing care needs. Good performance is HIGH
	Early Years									
	Percentage of 2 year olds in care accessing 2gether funding within terms	Not published	66.70%	78.30%	N/A (3 termly)		83.3%		Improving	Take up percentage is above previous quarter and year performance

	Percentage of 3 and 4 year olds in care accessing the Early Years entitlement within the term	Not published	94.40%	100.00%	N/A (3 termly)	100.00%	100.0%		Improving	Take up percentage is above previous quarter and year performance
	Percentage of Early Years and Child Care Providers graded Good/Outstanding at their last Ofsted inspection	Not published	88.70%	No target set	88.40%	87.60%	86.6%		Declining	The percentage of early years and childcare providers graded as good or outstanding has gone down slightly but remains higher than the national and south west average.
	Percentage of children's Centres graded Good/Outstanding at their last Ofsted inspection	Not published	54.00%	No target set	57.50%	57.50%	57.5%		Improving	The percentage of children's centres graded as good or outstanding is static, but ahead of pervious year performance.
	Social Care Provision (compliance	e)	l l					l		
	Percentage of in-house services graded by Ofsted as Good/Outstanding (residential only, excluding special schools)		Not available	No target set	66.60%	66.60%	100.00%		Improving	In-house provision
	Percentage of in-house services graded by CQC as Compliant (OLD inspection regime)	Not published	95.20%	No target set	100.00%	100.00%	100.00%		Improving	In-house provision
	Social Care Commissioning (com	pliance)	<u> </u>	[
	Proportion of residential/fostering childrens care providers in Devon that are registered with Ofsted and judged good or outstanding	Not	Not available	No target set	65.00%	76.30%	76.80%		Improving	Commissioned services
	Percentage of commissioned services in Devon graded by CQC as Compliant (assumes no/minor concerns): OLD inspection regime	Not published	82.50%	No target set	96.70%	97.90%	98.00%		Improving	Commissioned services
	Percentage of commissioned services in Devon graded by CQC as Compliant (assumes outstanding/good): NEW inspection regime	NEW	63.80%	No target set	57.00%	52.00%	60.80%		Declining	Commissioned services
	Education and Learning									
				2012	2012	2014	2015	Tucad		Nietes
SEC5	Percentage 5+ A*-C or	1	rea von	2012 10.2 %	2013	2014	2015 15.3%	Trend See notes		Notes nnual indicators)
SEC5	Percentage 5+ A*-C or equivalent including English and Maths (Children in Care)	South	von West onal	10.2 % 12.4% 14.9%	5.8% 12.6% 15.5%	6.0% 9.2% 12.0%	15.3% Mar 2016 Mar 2016	see notes	Commissione Babcock LDP educational s implemented plan to impr 2014/15 prov significant im now above la and National National info	ed services from and internal

SEC5	Percentage 5+ A*-C or	Devon	58.5%	59.6%	56.7%	58.1%	See notes	Education (annual indicators):
3EC3	equivalent including English and	South West	57.5%	59.5%	56.7%	58.0%	See notes	Final 2015 data shows an
	Maths (All learners)	National	59.4%	59.2%	53.4%	53.8%		improvement on last year. Previous years National figures have been amended to show Total State Funded Only data in line with the Devon and South West data. 2014 results are not comparable to previous years due to changes in curriculum.
	% absence in secondary schools (all categories)	Devon South West National	5.8% 5.9% 5.9%	5.8% 6.1% 5.9%	5.1% 5.4% 5.2%	5.2% 5.4% 5.2%	See notes	Education (annual indicators): Latest figures for autumn 14 + spring 15 terms. Total secondary absence has increased slightly. However, targeted work to reduce persistent absence, including targeted vulnerable learners, is being delivered by commissioned Education Welfare Services.
	% absence in primary schools (all categories)	Devon South West National	4.4% 4.5% 4.4%	4.7% 4.7% 4.7%	3.6% 3.9% 3.9%	3.9% 4.0% 4.0%	See notes	Education (annual indicators): Latest figures for autumn 14 + spring 15 terms Total primary absence has increased slightly. However, targeted work to reduce persistent absence, including targeted vulnerable learners, is being delivered by commissioned Education Welfare Services.
	% of fixed term exclusions	Devon South West National	3.91% 3.82% 4.05%	3.04% 3.33% 3.52%	3.00% 3.51% 3.50%	Jul-2016	Improving	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 South West National	0.07% 0.06% 0.07%	0.08% 0.06% 0.06%	0.08% 0.07% 0.06%	Jul-2016	Static [See Notes]	Education (annual indicators): Permanent exclusions have remained at the same rate over the past few years. National and regional trends have seen a decline. Devon is now above the national and regional average. There are an expected 73 permanent exclusions in 14-15 compared to 74 (rate of 0.08) in 13-14.
	Percentage of LA maintained primary learners with Ofsted judgement of Good/Outstanding in the acedemic year	Devon National			86% 82%	88% 83%	Improving [See Notes]	December 2015 data from DfE Ofsted MI Report, LA Maintained Schools only, does not include Academies and Free Schools
	Percentage of LA maintained secondary learners with Ofsted judgement of Good/Outstanding in the acedemic year	Devon National			70% 72%	91% 77%	Improving [See Notes]	December 2015 data from DfE Ofsted MI Report, LA Maintained Schools only, does not include Academies and Free Schools

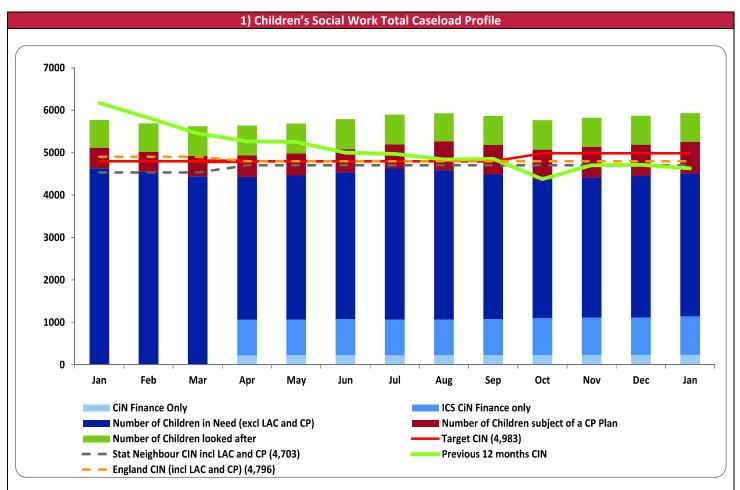


Devon Children's Social Work **Quality Assurance Framework**

Report of: January 2016

1.0 Activity and Performance Information

n and Young Pe	ople Popula	tion profile for De	von – 2014 Mid-	Year Estimates	Source: Of	fice of National S				
Population p	er age band	d								
	0	1-4	5-9	10-15	16-17	18-25				
England	664,183	2,766,774	3,272,365	3,600,234	1,288,145	5,661,728				
Devon	7,208	31,606	39,579	46,576	17,182	72,374				
Age Band as	a Percentag	ge of Total Popula	tion							
England 1.2% ♣ 5.1% ⇔ 6.0% ♠ 6.6% ♣ 2.4% ⇔ 10.4% ♣										
Devon	0.9% ₽	4.1% ⇔	5.2% 企	6.1% ⇩	2.2% ⇩	9.5% 仓				

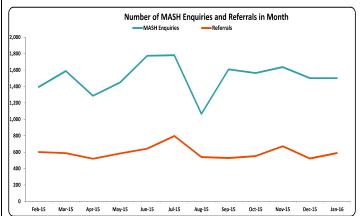


The Total CIN includes LAC 679, CP 747 and 1,144 Finance only (236 and 908 ICS Finance only) and shows Devon CiN as **5,934 in January** which is **above** the projection of **4,703 for Devon** when the rate /10000 for our Statistical Neighbours (330.7) is applied to the population of 0-17yrs in Devon. However most LA's would not count Finance only cases and with these removed Devon would be on target.

2) Number of DAF1s with start date

Total DAFs 3623 to Jan-16 250 250 150 100 50 Jan Fell May Apr May Jun Jul Aug Sep Oct Nov Dec 2016 2015 — 2014

3) Number of MASH Enquiries and Referrals in the month

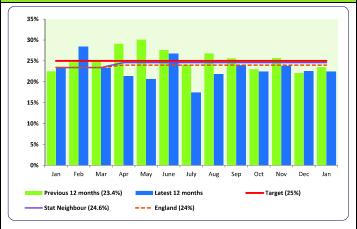


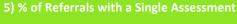
Dec-14	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
129	175	171	261	228	166	198	130	51	159	124	109	81	74

	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
Mash Enquiries	1,541	1,393	1,587	1,286	1,448	1,774	1,781	1,065	1,608	1,563	1,636	1,501	1,501
Referrals	525	601	583	529	584	642	76	540	528	551	670	522	588

Number of DAF's increased as schools returned from summer break The number of new ones each month is reducing. The amount of work referred to and held within CSC is increasing slightly. MASH enquiries remained the same 1,501 in Jan-16 as Dec-15. Referrals increased by 66 to 588 from 522 in the same period.

4) Percentage of social care referrals that are re-referrals within 12







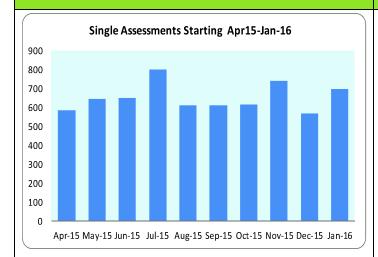
Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
25.1%	21.3%	20.6%	26.7%	17.4%	21.8%	23.9%	22.4%	23.8%	22.5%	22.4%

Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
90.3%	95.3%	96.1%	96.9%	98.4%	90.9%	89.9%	95.1%	91.8%	96.5%	97.8%	97.1%	96.1%

Repeat referrals remained the same in Jan-16 22.5% as Dec-15 22.4 % Re-referrals remain below benchmarking. This is positive.

Referrals resulting in an outcome of SA, continued to decrease by 1% in Jan-16 to 96.1% from 97.1% in Dec-15. This data can only be understood when considered with (6) (7) and (8).

6) Number of Single Assessments Starting



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500	4	┸								┺				
400	4													
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Jan-	15 Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16		

7) Cases closed at end of Single Assessment

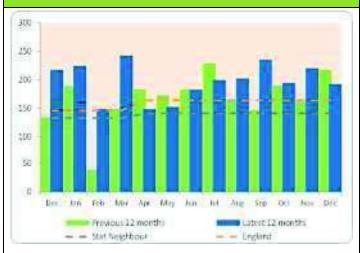
Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
588	645	651	803	610	611	616	740	568	698

Numbers of SA is increased by over 100. The number of start SA. Is being monitored especially as so many cases close after assessment is completed.

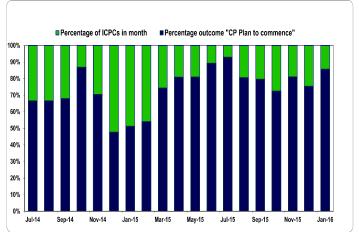
Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
44.8%	41.3%	46.4%	38.0%	44.3%	43.4%	47.3%	40.9%	44.9%	43.7%

High proprtions 40% + are closed following assessment. This indicates that thresholds are not being applied –families are not receiving EH services and lots of SW time being used inappropriately.

8) Number of Section 47 Enquiries



9) Number of ICPC resulting in Child Protection Plans to



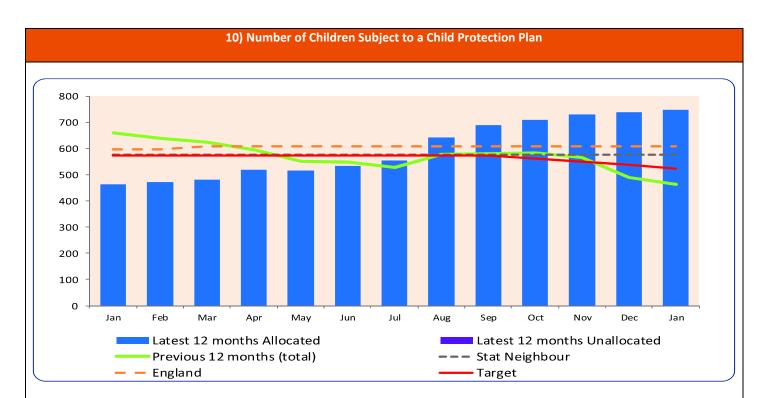
Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
224	148	242	148	152	182	199	202	235	194	220	192	235

The number of S47's has increased by 43 to 235 in Jan-16 from 192 in Dec. However remains high compared with benchmarking. This indicates risk averse practice and translates to high numbers subject to plan.

	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
No. ICPC held in month	90	100	58	75	86	119	143	102	122	110	112
No. ICPC CPP to commence	67	81	47	67	80	96	114	74	99	83	96
% CP Plan to commence	74.4%	81.0%	81.0%	89.3%	93.0%	80.7%	79.7%	72.5%	81.1%	75.5%	85.7%

The number of ICPC's for children (including siblings) increased by 2 in Jan (112) from Dec (110) and the rate of outcomes CPP to commence increased by 10.3% (Jan 85.7% from Dec 75.5%)

If this is read alongside chart 10 there is evidence that 29% of plans ended this year were in place for 3 months or less. This could mean the plan was inappropriate and made too early. There are 15 days to ICPC but 45 days to complete full assessment.



Target	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
575	464	472	481	519	516	535	556	642	690	711	730	738	747

The number of CP plans Increased by 9 children in Jan-16 747 compared to Dec-15 738.

This is at a high level. Work is underway to understand better. Risk maybe being identified or maybe being exagerated, (risk averse practice). If this was reduced by 25% (the number of children who come off plan in 3 months) our figures would be in line (see box 9) statistical neighbours.





11. Team breakdown of children ending CP within 3 months of starting CP (01 April 2015 to 31 January 2016).

		A	pr 2015			May	2015			Jun 2	015			Jul 2)15			Aug 20	15			Sep 20	15		Oct	2015			Nov 2	015			Dec 201	5		Jan 2	2016			Grand T	otal
Team	0-3 months	Ended 4+ months	Total Ends	% 0-3 months	Ended 0-3 months	Ended 4+ months	Total Ends	% 0-3 months	0-3 months	Ended 4+ months	Total 9	% 0-3 months	Ended 0-3 months	Ended 4+ months	Total Ends	% 0-3 nonths	Ended 0-3 months	Ended 4+ months	e i.	0-3 onths	Ended 0-3 months r	Ended 4+	otal % (Ends mon	0.3	3 4+	Total Ends	% 0-3 months	0-3 months	Ended 4+ months	Total % Ends mor)-3 : ths			tal % 0-3 ids month			Total Ends	% 0-3 months	Ended 0-3 months		Total % 0-3 Ends months
CHILDREN & FAMILIES EXETER 1	1	5	6	17%		3	3	0%		4	4	0%	1	4	5	20%	1	1	2 5	0%	2	1	3 67	6 4	1	5	80%	2	6	8 25	%		6	6 0%		4	4	0%	11	35	46 24%
CHILDREN & FAMILIES EXETER 2	1	2	3	33%		1	1	0%	2	4	6	33%							T			4	4 09	6 1	1	2	50%	2	2	4 50	%	2	4 1	6 33%	1	5	6	17%	9	23	32 28%
CHILDREN & FAMILIES EXETER 3		2	2	0%		1	1	0%		5	5	0%	2		2	100%			T			7	7 09	6 2	2	4	50%		3	3 0	6	1	3	4 25%	1	3	3	0%	5	26	31 16%
CHILDREN & FAMILIES EXETER 4										3	3	0%		1	1	0%		1	1	0%	3		3 100	%	3	3	0%	3	5	8 38	%		8	8 0%	3	2	5	60%	9	23	32 28%
CHILDREN & FAMILIES EXETER 5		1	1	0%	1		1	100%		4	4	0%	2	5	7	29%	1		1 1	00%	1	1	2 50	6	5	5	%												5	16	21 24%
TOTAL CHILDREN & FAMILIES EXETER	2	10	12	17%	1	5	6	17%	2	20	22	9%	5	10	15	33%	2	2	4 5	0%	6	13	19 32	6 7	12	19	37%	7	16	23 30	%	3	21 2	4 13%	4	14	18	22%	39	123	162 24%
CHILDREN & FAMILIES MID & EAST 1		5	5	0%		3	3	0%	2	5	7	29%		1	1	0%						3	3 09		2	2	0%	4	6	10 40	%	4	5	9 44%	1		1	100%	11	30	41 27%
CHILDREN & FAMILIES MID & EAST 2					2		2	100%			T		1	1	2	50%			T			6	6 09	6				1	2	3 33	%				1	1			4	9	13 31%
CHILDREN & FAMILIES MID & EAST 3		2	2	0%	1	2	3	33%			Ħ			3	3	0%			T						3	3	0%		4	4 0	6		5 !	5 0%	1	2	2	0%	1	21	22 5%
CHILDREN & FAMILIES MID & EAST 4					1	2	3	33%	3	3	6	50%					3		3 1	00%	2		2 100	%					2	2 0	6		1	1 0%	1	1	1	0%	9	9	18 50%
CHILDREN & FAMILIES MID & EAST 5					1	1	2	50%		3	3	0%		10	10	0%					1		1 100	% 1	1	2	50%	8	5	13 62	%		1	1 0%	3	6	9	33%	14	27	41 34%
TOTAL CHILDREN & FAMILIES MID & EAST		7	7	0%	5	8	13	38%	5	11	16	31%	1	15	16	6%	3		3 1	00%	3	9	12 25	6 1	6	7	14%	13	19	32 41	%	4	12 1	6 25%	4	9	13	31%	39	96	135 29%
CHILDREN & FAMILIES NORTH 1		2	2	0%	2	2	4	50%		1	1	0%										3	3 09	6 1		1	100%		1	1 0	6		3	3 0%		2	2	0%	3	14	17 18%
CHILDREN & FAMILIES NORTH 2		1	1	0%	1		1	100%					4	2	6	67%		1	1	0%		1	1 09	6 1	3	4	25%	3	2	5 60	%					3	3	0%	9		22 41%
CHILDREN & FAMILIES NORTH 3	2	5	7	29%	2	3	5	40%						1	1	0%					2		2 100	%					1	1 0	6		9 !	9 0%		5	5	0%	6		30 20%
CHILDREN & FAMILIES NORTH 4		8	8	0%		3	3	0%						1	1	0%					1	8	9 11	6 3	1	4	75%	1	1	2 50	%		3	3 0%					5	25	30 17%
TOTAL CHILDREN & FAMILIES NORTH	2	16	18	11%	5	8	13	38%		1	1	0%	4	4	8	50%		1	1	0%	3	12	15 20	6 5	4	9	56%	4	5	9 44	%		15 1	5 0%		10	10	0%	23	76	99 23%
CHILDREN & FAMILIES SOUTH 1	1	1	2	50%	1		1	100%						3	3	0%		1	1	0%	3	5	8 38	6	2	2	0%	1		1 10	9%				1	7	8	13%	7	19	26 27%
CHILDREN & FAMILIES SOUTH 2		1	1	0%		3	3	0%		4	4	0%		3	3	0%		1	1	0%		6	6 09	6 2	2	4	50%	1	8	9 11	%	1		1 100%	8	6	14	57%	12	34	46 26%
CHILDREN & FAMILIES SOUTH 3	2	3	5	40%	1	3	4	25%	1		1	100%		8	8	0%		6	6	0%		4	4 09	6 1	1	2	50%	1		1 10	9%	3	4	7 43%	3	T	3	100%	12	29	41 29%
CHILDREN & FAMILIES SOUTH 4		3	3	0%		2	2	0%	2	1	3	67%		3	3	0%	1		1 1	00%				2	3	5	40%		7	7 0	6		5	5 0%	4	2	6	67%	9	26	35 26%
CHILDREN & FAMILIES SOUTH 5						4	4	0%	3	2	5	60%	2	3	5	40%	1		1 1	00%	4	2	6 67	6 5	1	6	83%	5		5 10)%	4	4	8 50%	2	3	5	40%	26		45 58%
TOTAL CHILDREN & FAMILIES SOUTH	3	8	11	27%	2	12	14	14%	6	7	13	46%	2	20	22	9%	2	8	10 2	.0%	7	17	24 29	6 10	9	19	53%	8	15	23 35	%	8	13 2	1 38%	18	18	36	50%	66	127	193 34%
ICS NORTH DEVON 2									1		1	100%																											1		1 100%
INITIAL RESPONSE MID & EAST					1		1	100%																1		1	100%												2		2 100%
INITIAL RESPONSE SOUTH													1		1	100%	1		1 1	00%																			2		2 100%
TOTAL AD-HOC TEAMS					1		1	100%	1		1	100%	1		1	100%	1		1 1	00%				1		1	100%												5		5 100%
GRAND TOTALS	7	41	48	15%	14	33	47	30%	14	39	53	26%	13	49	62	21%	8	11	19 4	2%	19	51	70 27	6 24	31	55	44%	32	55	87 37	%	15	61 7	6 20%	26	51	77	34%	172	422	594 29%

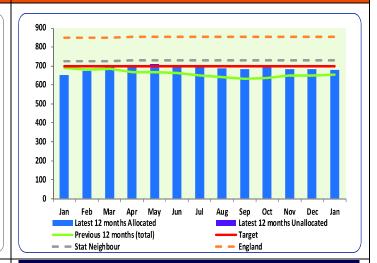


12) Children Ending CP within 3 months of starting CP

Team total breakdown of children ending CP within 3 months of starting CP (Apr 15- Jan16 total %) 5/5 No. 100% 90% 80% 70% 60% 50% 66/193 39/135 172/594 40% 39/162 23/99 No. No. 30% 20% 10% 0% Children & Families Exeter ■ Children & Families Mid & East Children & Families North Children & Families South ■ IRT/ICS

This chart relates to table 11 – IRT / ICS have very low numbers – all of which lasted 3 months. 29% of CPP's ended within 3 months.

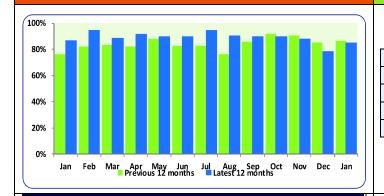
13) Number of Children in Care



Target	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
700	653	676	699	704	707	706	702	687	684	694	684	684	679

CiC has decreased slightly by 5 in Jan-16 to 679 from 684 in Dec-15.

14) Percentage of Children in Care with a Visit Completed in the Previous 6 Weeks



100%	91.8%	89.5%	91.0%	94.5%	90.1%	89.5%	90.0%	88.2%	78.3%	84.9%

Target ###### May-15 Jun-15 Jul-15 Aug-15 Sep-15 Oct-15 Nov-15 Dec-15 Jan-16

An increase of 6.6% in visits Dec-15 to Jan-16 and overall the trend continues to show an improvement compared to last year. Some data entry lag. Weekly information is in place to chase and plan work.

15) Placement Moves by Area

		Place	ements
	3+	All	Outturn
Exeter	22	180	12.2%
North Devon	14	134	10.4%
South & West Devon	27	218	12.4%
East & Mid Devon	15	145	10.3%
Other	0	1	0.0%
	78	678	11.5%

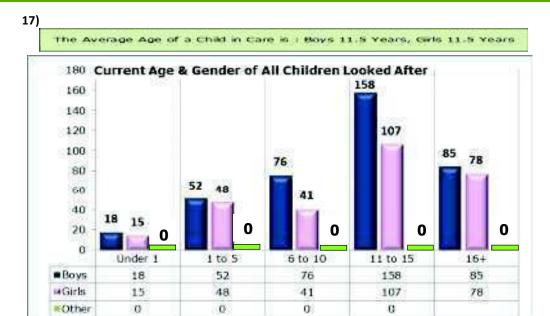
We have a high number of placement moves. More detailed analysis shows that this relates mainly to 15,16,17 year olds.

The % of 3+ placement moves last year was at 15% there has been some improvement this year.

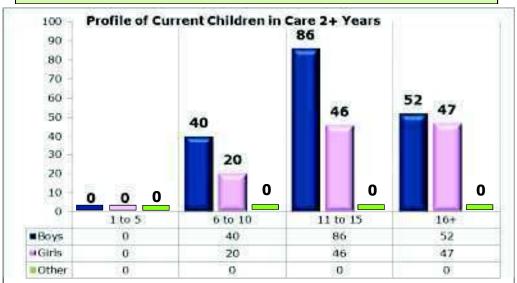
16) LAC 3+ Placement Information

	Q4	latest
	Apr14- Mar15	Apr15 to Feb16
% of children with 3+ placements in financial year to date	15.0%	11.5%

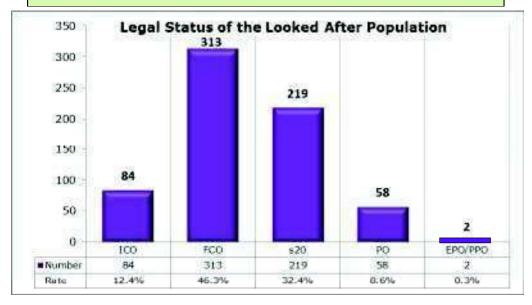
Weekly data available and planning support for Children & Young People where stability is an issue.



The Longest Current Period of Care of Any Child is: 15.8 Years



The Rate of LAC Under Section 20 Nationally in 2013-14 was 27.9%







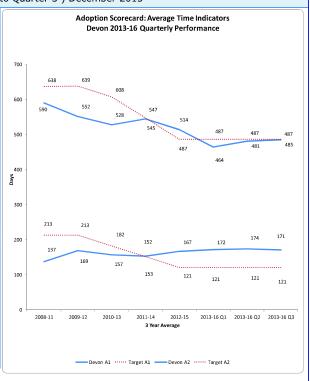


21) Adoption Scorecard

DEVON COUNTY COUNCIL ADOPTION SCORECARD

PERFORMANCE ON A PAGE (2013-16 to Quarter 3) December 2015

Devon County's Adoption Population	2015-16	Percentage	
Number of Children adopted	28	100%	
aged 5 and Over	6	21.4%	
nged Under 5	22	78.6%	
lo. of sibling groups	-	-	
lo. of children in sibling groups	-	-	
lumber of children with a decision to be placed for Adoption	58	-	
lumber of children with a placement order	40	69.0%	
lumber of children placed together in sibling group	-		
lumber of children matched to adopter	32	80.0%	
lumber of children matched & placed with adopter	8	20.0%	
lumber of children whose decision to be placed for adoption has been rescinded	13		
Number of children ending care due to Special Guardianship order	44	-	
Children Looked After and Adoption Performance measures	(2013-16 to Q3)	SN average (2012-15)	England average (2012- 15)
Adoption scorecard A1: time between child entering care and placement for adoption	485 days	517 days	593 days
Adoption scorecard A2: time between receiving court authority to place a child and deciding on a match	171 days	152 days	223 days
Adoption scorecard A3: children waiting less than 16 months between entering care and placement or adoption (NB: measure reduced from 18 months previosuly reported)	66%	n/a	47%
Adoption 1: Percentage of looked after children who ceased to be looked after who were adopted	12%	16%	14%
Adoption 2: Percentage of looked after children who ceased to be looked after because of special quardianship order	11%	10%	10%





Children's Social Care Workforce Profile

22) Worker Case Allocation and FTE Breakdown by Service and Team

Servi	ce Area		Practice Manager	Adjustment*	Total Open Cases	Of Which, Allocated to Named Worker	% Allocated to Named Worker	Ave. No. of Cases per Current FTE Total
Initial	Exeter	IRCX1	Juanita Scallan	4.7	136	134	98.5% 98.3%	29.0
Respons	Mid & East North	IRCM1 IRCN1	Kevin Kenna Geoff Haworth	10.0 6.9	229 218	225 216	99.1%	22.9 31.7
е	South	IRCS1	Jean Beynon	9.0	321	321	100.0%	35.7
Initial Re	sponse To		ocan Boynon	30.6	904	896	99.1%	29.6
		CFCX1	Anastasia Wyman (Temporary)	7.2	159	159	100.0%	22.1
Children &	Exeter	CFCX2	Phil Stagg	5.8	141	141	100.0%	24.3
Families		CFCX3	Dave Brassington	6.8	184	184	100.0%	27.1
		CFCX4	Helen Neighbour	6.8	157	157	100.0%	23.1
Children	and Familie	es - Exeter T	otal	26.6	641	641	100.0%	24.1
Chil i		CFCM1	Richard Ashdown	5.8	167	163	97.6%	28.8
Children &	Mid & East	CFCM3	Emily Hextall	4.2	124	124	100.0%	29.5
Families		CFCM4	Corrina Bryant	6.6	124	124	100.0%	18.8
		CFCM5	Helen Patten	7.8	169	169	100.0%	21.7
Children	and Familie	es - Mid/Eas		24.4	584	580	99.3%	23.9
Children		CFCN1	Roger Walter	3.3	85	85	100.0%	25.6
&	North	CFCN2	Paul Sains	4.6	110	110	100.0%	23.9
Families		CFCN3	Fran Hughes	5.4	130	130	100.0%	24.0
		CFCN4	Heather Cooper	5.2	109	109	100.0%	21.0
Children	and Familie	es - North To	otal	18.5	434	434	100.0%	23.4
		CFCS1	Lisa Jackson	6.4	148	148	100.0%	23.3
Children		CFCS2	Karen Thompson	6.2	169	169	100.0%	27.3
_ &	South	CFCS3	Soraya Pethick	5.2	8	8	100.0%	1.5
Families		CFCS4	Jacqueline Fox	6.4	198	198	100.0%	30.9
		CFCS5	Jane Anstis	5.4	218	218	100.0%	40.4
Children	and Familie	es - South T	otal	29.6	741	741	100.0%	25.0
	Exeter 2	PTCX2	Juliet Jones	13.2	276	276	100.0%	20.9
	Mid & East	PTCM1	Naomi Pollard	6.0	145	143	98.6%	24.1
	North	PTCN1	Giles Bashford	7.6	184	167	90.8%	24.2
	South	PTCS1	Nikki Evans	14.0	242	242	100.0%	17.3
Permane	ncy and Tr	ansition Tota	al	40.8	847	828	97.8%	20.8
Private Fos	_	PFC1	Elaine Newton	3.3	67	67	100.0%	20.4
		•	ing FOC Cases)	173.7	4,218	4187	99.3%	24.3
ICS Finance Cases		ICSFREME, ICSFRN & ICSFRS			909 5,363			
i otai (in	cluding FC	o cases)			5,363			

^{*} FTE Caseload Adjustment = Family Practitioners only counted in P&T teams, ASYEs throughout adjusted to be 0.6 of their FTE for case load purposes.

Minus staff shown as on long term sick leave or maternity and their post not being covered by an agency worker.

The figure 5,363 excludes ICS

The average caseload is at 24.3

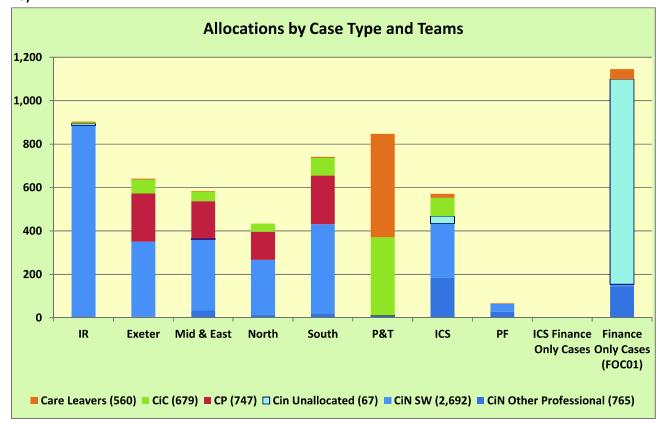
There is wide variation e.g. (17.3compared with 24.2 in P&T), (1.5 compared with 40.4 in Children & Families due to the teams being in the process of reallocating cases) and (22.9 compared with 35.7 in IR).

There is also wide discrepancy in team sizes. Work is underway to address this and ensure equity.

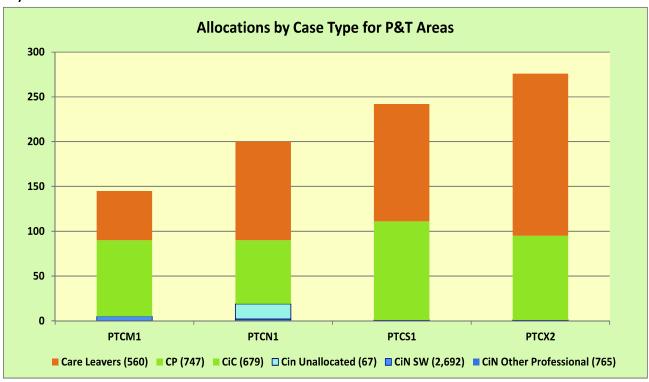
Allocation generally remains at a very high level. The proportion of permanent staff continues to increase.

Some of the high team figures are due to re-organisation where cases have been moved but staff are not sharing up in correct teams yet.

^{*}In caseload adjustment figures ASYE's and NQSW's can only carry a 60% caseload and therefore a full time (1 FTE) ASYE or NQSW is adjusted to be 0.6 FTE



24)



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

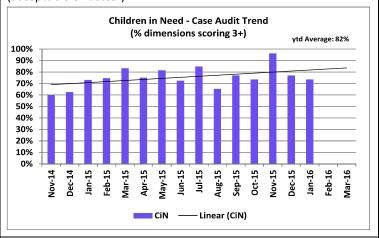
Of the **47** internal audits completed during January 2016, **14** relate to Children in Need.

% judged as 'some', 'many' or 'all standar or exceeded'	rds met i	n full
Audit Dimension	Jan.	2016
Audit Dimension	No's	%
1a: Management scrutiny/oversight	9	64%
2: Experience of child/young person	7	50%
3: Practitioner contact	11	79%
4: Assessment & needs analysis	10	71%
5: Planning for children	10	71%
6: Recording and report writing	11	79%
Number of audit dimensions scored	8	4
Number of audits for CiN cases	1	4

3+ scores down for 1a, 2, compared to December 15. Overall % 3+ scores up 7% compared to December 15

Overall % judged 'Acceptable' or better

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



Year to date % of 3+ scores is 82%.

January is 13% below the overall year to date for 3+scores.

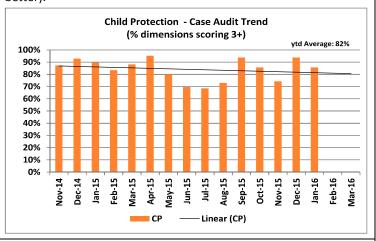
CASE AUDITS: CHILD PROTECTION

Of the **47** internal case audits completed during January 2016, **4** relate to Child Protection cases.

% judged as 'some', 'many' or 'all standa or exceeded'	ırds met	in full							
Audit Dimension	Jan.	2016							
Addit Dimension	No's	%							
1a: Management scrutiny/oversight	1	25%							
1b: Independent Scrutiny	2	50%							
2: Experience of child/young person	3	75%							
3: Practitioner contact	3	75%							
4: Assessment & needs analysis	3	75%							
5: Planning for children	3	75%							
6: Recording and report writing	3	75%							
Number of audit dimensions scored	2	8							
Number of audits for CP cases 4									
Overall % judged 'Acceptable' or better	64	! %							

3+ scores down for 1a, 1b, 3, 5 and 6 compared to December. 15.

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



Year to date % of 3+ scores is 82%.

January is **18% below** the overall year to date for 3+ scores.

CASE AUDITS: CHILDREN IN CARI

60%

69%

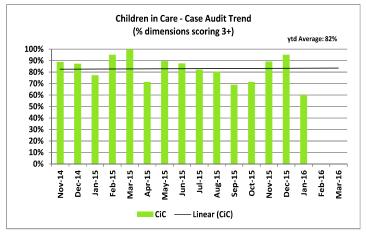
Of the **47** internal case audits completed during January 2016, **3** relates to a Child in Care.

% judged as 'some', 'many' or 'all standards met in full or exceeded'											
Audit Dimension Jan. 2016											
Audit Dimension	No's	%									
1a: Management scrutiny/oversight	1	33%									
1b: Independent Scrutiny	1	33%									
2: Experience of child/young person	2	67%									
3: Practitioner contact	2	67%									
4: Assessment & needs analysis	2	67%									
5: Planning for children	2	67%									
6: Recording and report writing	2	67%									
Number of audit dimensions scored		20									
Number of audits for CiC cases		3									

All 3+ scores are below December 15.

Overall % judged 'Acceptable' or better

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



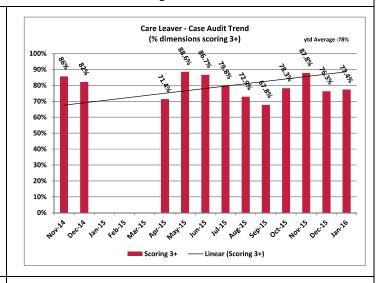
Year to date % of 3+scores is **82%**.

January is **20% below** the overall year to date for 3+ scores.

Care Leavers

Of the 47 internal case audits completed during January 2016, 26 now have a status of Leaving Care.

Audit Dimension	Jan.	2016	
Audit Dimension	No's	%	
1a: Management scrutiny/oversight	18	69%	
1b: Independent Scrutiny	12	55%	
2: Experience of child/young person	21	81%	
3: Practitioner contact 20			
4: Assessment & needs analysis	18 69%		
5: Planning for children	19	19 73%	
6: Recording and report writing	22 85%		
Number of audit dimensions scored	168		
Number of audits for Care Leavers	26		
Overall % judged 'Acceptable' or better	7	7%	



All Standards fall behind compared to December 15.

January is comparable with the % of 3+ scores for the year (78%).

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

** INDEPENDENT REVIEW UNIT ** CHILD PROTECTION MEETING ATTENDANCE

There were 112 Initial Child Protection Conferences including siblings in Jan-16. The overall attendance monitored by the IRU of 62 meetings was 51% in Jan, (49% Dec, 47% in Nov). The Health Professionals attended 33.5% ICPC's (16% Dec, 22% Nov, 25% Oct, 16% Sep)

Core Groups, (72 meetings in Jan-16) overall attendance was 74.7% in Jan, (84% Dec, 73% Nov). The Health Professionals attended 69.3% in Jan-16 (71% Dec, 79% Nov, 59% Oct, 697% in Sep)

Child Protection Reviews (121 meetings) overall attendance was 72% in Jan, (67% Dec, 75% in Nov). The Health Professionals attendance was 54% (45% Dec, 57% Nov, 54% Oct, 41% in Sep)

VOICE OF THE CHILD: CHILD PROTECTION (The full Involvement report for January 2016 is available on the QAF webpages)

Parent / Carer Feedback Forms: (The full Involvement report for January 2016 is available on the QAF webpages).

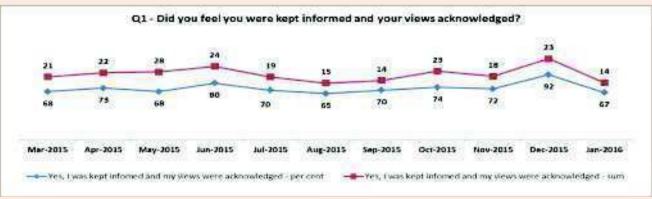
- 21 feedback forms for 32 individual children and young people were received in January 2016 which is 4 forms less than December.
- The feedback covers 19 individual Social Workers.

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

- 74% of respondents in January, report positive feedback against all four involvement indicators compared to 91% for December.
- 15 respondents reported positive feedback with parents/carers reporting they were very appreciative of the support they received

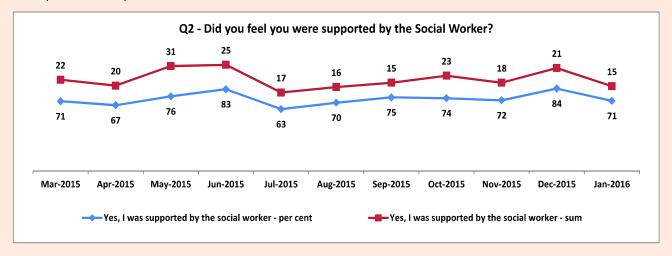
Q1 - Did you feel you were kept informed and your views acknowledged?

- 14 (67%) of respondents reported they were kept informed and their views acknowledged, a downturn of 25% compared to December (92%).
- All respondents completed this indicator.



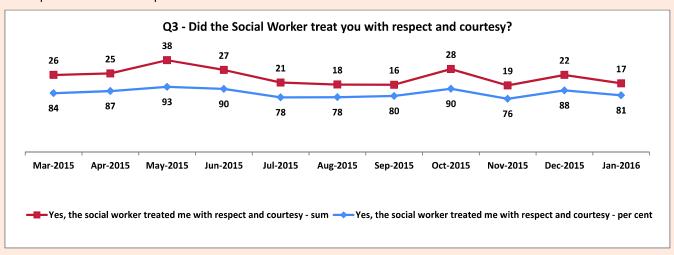
Q2 - Did you feel you were supported by the Social Worker?

- **15 (71%)** of respondents reported that they felt supported by their social worker, a downturn of **13%** compared to December (84%).
- All respondents completed this indicator.



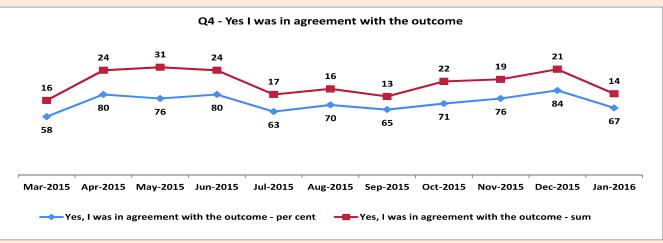
Q3 - Did the Social Worker treat you with respect and courtesy?

- 17 (81%) of respondents reported they felt their social worker treated them with respect and courtesy, a downturn of 7% compared to December (88%).
- 1 respondent did not complete this indicator.



Q4. Were you in agreement with the outcome?

- 14 (67%) of respondents reported they agreed with the outcome. A downturn of 17% compared to December (84%).
- 2 respondents did not complete this indicator.



 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 rather than all cases closed in that month.

"Key Themes"

 Lack of information and communication remain a key factor for negative feedback.

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.

What Parents & Carers said

"Thank you for supporting us in a time of need".

"I can't thank the SW enough for her help and support".

"The SW was very knowledgeable and supportive".

"The involvement of the service has really made a difference to this family".

"I'm really impressed with the SW's commitment to us".

"Without SW help and support we would still be in limbo".

"I had to chase to be kept informed".
"I feel quite dissatisfied with the service".

4 (19%) respondents preferred not to make any other comment.

** INDEPENDENT REVIEW UNIT ** Timeliness of Social Worker Reports for CiC Reviews

110 IRU monitoring reports for Children in Care received for December.

Changes of Social Worker since last CiC Review

Of the 113 monitoring forms returned in January, 99 recorded data on changes in social worker.

Of these, 32.3% show the child/young person having 1 or more changes of social worker since the last CiC review (a total of 32 children in Jan, Dec, 37 in Nov, 32 in Oct & Sept),

of these 32 children with a change of SW, 29 had 1 change and 2 had 3 changes 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. This corresponds with new permanent staff starting.

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

% of QA forms completed in the month that indicate 1 or more changes in Social 29% 12% 13% 19.9% 20.7% 18.3% 12.6% 22.2% 21.5% 24.4% 23.4% 18.6% 32 Worker since the last CiC review		Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16
	% of QA forms completed in the month													
Worker since the last CiC review	that indicate 1 or more changes in Social	29%	12%	13%	19.9%	20.7%	18.3%	12.6%	22.2%	21.5%	24.4%	23.4%	18.6%	32.3%
Worker strice the fact of order	Worker since the last CiC review													

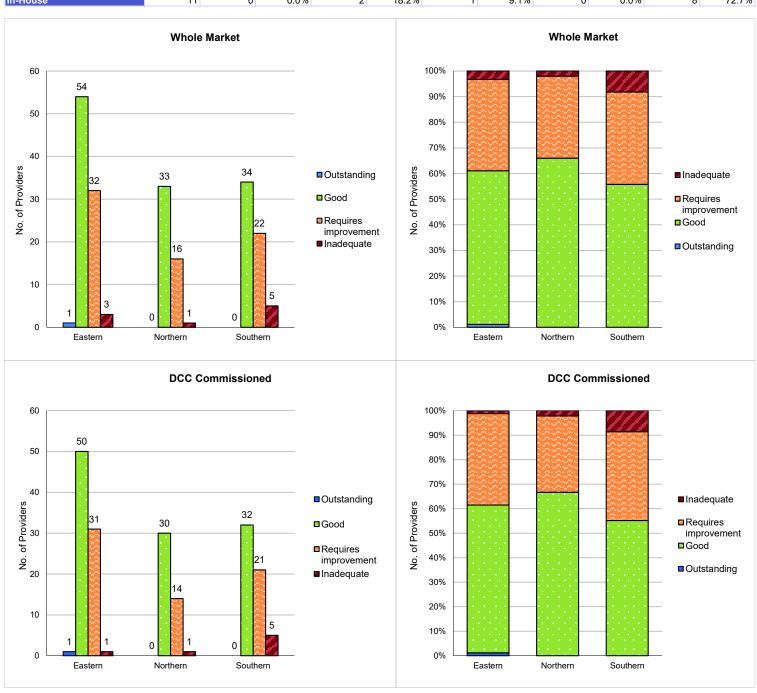
CQC Compliance Report - Summary, New Style Inspections only

Compliance for Care Homes and Domiciliary Care Services in Devon

Period: Dec 2015

Source: Care Quality Commission; CareFirst

					Overall	Rating					
	Total Providers	Outsta	nding	Go	od	Requires In	ıprovement	Inade	quate	Not Inspec New St	
Whole Market	499	1	0.2%	121	24.3%	70	14.0%	9	1.8%	298	59.7%
DCC Commissioned	427	1	0.2%	112	26.2%	66	15.5%	7	1.6%	241	56.4%
In-House	11	0	0.0%	2	18.2%	1	9.1%	0	0.0%	8	72.7%



CQC Compliance Report - Standards breakdown, New Style Inspections only

Compliance for Care Homes and Domiciliary Care Services in Devon

Period: Dec 2015

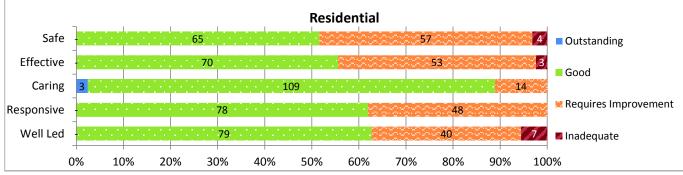
Source: Care Quality Commission; CareFirst

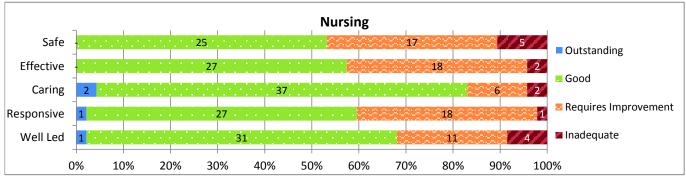
Residential	Outsta	Outstanding		od	Requires In	nprovement	Inadequate	
Nesidential	No	%	No	%	No	%	No	%
Safe	-	-	65	52%	57	45%	4	3%
Effective	-	-	70	56%	53	42%	3	2%
Caring	3	2%	109	87%	14	11%	-	-
Responsive	-	-	78	62%	48	38%	-	-
Well Led	-	-	79	63%	40	32%	7	6%
Total No. Inspected	126							

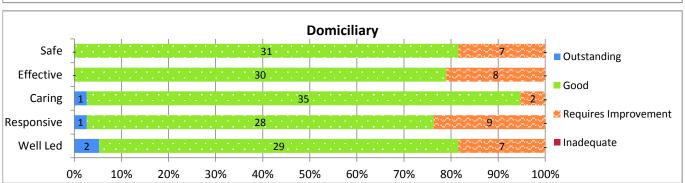
Nursing	Outsta	Outstanding		od	Requires In	nprovement	Inadequate	
	No	%	No	%	No	%	No	%
Safe	-	-	25	53%	17	36%	5	11%
Effective	-	-	27	57%	18	38%	2	4%
Caring	2	4%	37	79%	6	13%	2	4%
Responsive	1	2%	27	57%	18	38%	1	2%
Well Led	1	2%	31	66%	11	23%	4	9%
Total No. Inspected	47							

Total No. Inspected 47

Domiciliary	Outsta	Outstanding		od	Requires In	nprovement	Inade	Inadequate	
Domicinary	No	%	No	%	No	%	No	%	
Safe	-	-	31	82%	7	18%	-		
Effective	-	-	30	79%	8	21%	-		
Caring	1	3%	35	92%	2	5%	-		
Responsive	1	3%	28	74%	9	24%	-		
Well Led	2	5%	29	76%	7	18%	-		
Total No. Inspected	38								







PEOPLE RISKS INCLUDED ON THE CORPORATE RISK REGISTER (AS AT 1 MARCH 2016)

APPENDIX C

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KEY: 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	and Status:	Scope of Risk:		Current position/actions ta	ken/accountable officer:			
TG11: Mar	ket capacity	Without mitigating action there is risk th	at: the supply of personal	Risk Owner:	Tim Golby			
adult socia	l care	care is currently stretched in some parts	of Devon increasing the		Till Golby			
Inherent	30	risk that we cannot maintain all people v	who require it safely in their	Accountable Officer:	Jennie Stephens			
Risk:		own homes, achieve safe discharge from	hospital and with the		Jenne Stephens			
Current	24	potential to increase admissions to resid	ential and nursing care.					
Risk:								
Mitigating	controls (inclu	ding RAG rating):	Direction of Travel:	Additional comments (if ap	propriate):			
Amber	a) Refresh of Adult Social Care Market Position		\leftrightarrow	Bids for Framework Contrac	cts currently being evaluaed. On-going			
	Statement			work with providers to secure immediate supply with regular monitoring of position. Above inflationary award issued for curren				
Green	h) Provider	Engagement Network	\leftrightarrow					
Green		nce monitoring of call-off against	\leftrightarrow	year. Launching a promotic	onal campaign with providers to			
Green		Agreements		encourage workforce recruitment and retention across the se				
	Fiaillework	Agreements]				
Amber	d) Work wit	Vork with providers to address capacity shortfalls						
Amber	e) Investigations of new solutions/new ways of working f) Weekly SITREPS and escalation		\leftrightarrow					
Green			\leftrightarrow	1				
	,,							
Amber	g) Provider	of last resort option to be explored	\leftrightarrow	1				
	<i>O,</i>	,			ļ.			

Risk Code	and Status:	Scope of Risk:		Current position/actions taken/accountable officer:				
TG15: Red	uction in	Without mitigating actions there is ri	isk that: potential loss of	Risk Owner:	Tim Golby			
funding aff	fects service	funding affecting DCC service deliver	y in the event of financial		Tilli Golby			
Inherent		problems arising with an external funding bo		Accountable Officer:	Jennie Stephens			
Risk:	30	Commissioning Group or external co	ntracts.		Jennie Stephens			
Current		T .						
Risk:	30							
Mitigating	Mitigating controls (including RAG rating):		Direction of Travel:	Additional comments (if appropriate):				
Amber	a) Governin	g body of CCG	\leftrightarrow	The current risk remains asse	ssed at 30 (VERY HIGH) as a result of			
Amber	b) Joint com	missioning Executive Group	\leftrightarrow	the on-going financial pressures being experienced by NEW Co				
Amber	c) Recent ar	nnouncement of Success Regime	\leftrightarrow	Announcement of Success Re	gime and national focus on Devon is			
		-			d remains a very high risk to the Local			
				0	being experienced across other areas			
			, , ,	Children's Social Care and Education.				
				or respices services, including	Gilliaren 3 30ciai care ana Eudeation.			

PEOPLE RISKS INCLUDED ON THE CORPORATE RISK REGISTER (AS AT 1 MARCH 2016)

APPENDIX C

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

Risk Code a	ind Status:	Scope of Risk:		Current position/actions taken/accountable officer:		
TG23: Worl	kforce	Without mitigating actions there is risk that: lack of Organisational Development Plan for the Authority, which should include		Risk Owner:	Tim Golby/Sally Slade/Sue Clarke/Fiona Fitzpatrick	
Inherent Risk: Current	30 30	succession planning for Leaders and Mai skills shortages across key areas of the b Workers, Headteachers, Teachers and Hi	usiness, for example, Social	Accountable Officer:	Jennie Stephens	
Risk:		to include contracted services for care w recruitment and retention issues exist. F result in market failure and statutory no duties.	ailure to address may			
Mitigating	Mitigating controls (including RAG rating):		Direction of Travel:	Additional comments (if a	appropriate):	
Green	a) Test of A	ssurance	\leftrightarrow	Key shortages in important and risky workforce areas, including		
Green	b) Succession Planning and Grading Review (Adult SW)		\leftrightarrow	children's and adult social workers, commissioning skills and workforce supply issues with key providers of care. Risk broader		
Amber	c) Workford	ce Development	\leftrightarrow	to include contracted services for care where significant workfor recruitment and retention issues exist. Proactive engagement w		
Green	d) Social W	ork Bursaries	\leftrightarrow	NHS providers and the independent sector to address workforce		
Amber	e) Promoting care campaign launched with NHS provider and independent sector		↑	issues, including promoting care campaign. Failure to address result in market failure and statutory non-compliance with Car duties.		
Amber	f) Provider Engagement Network conversations and workshops		↑			
Amber	g) Multi-agency workforce discussions with NHS providers.		↑	1		
Amber	h) HR data under development (not sufficiently robust)		\leftrightarrow	1		

Risk Code ar	nd Status:			Current position/actions taken/accountable officer:	
		Scope of Risk:			
TG24: HR Management Information		Without mitigating actions there is risk that the HR Service is in some areas not meeting operational requirements for management		Risk Owner:	Tim Golby/Sally Slade/Sue Clarke/Fiona Fitzpatrick
Inherent Risk:	30	information		Accountable Officer:	Jennie Stephens
Current Risk:	25				
Mitigating controls (including RAG rating):			Direction of Travel:	Additional comments (if appropriate):	
Green	a) HR Redesign Project, including governance arrangements and project management capacity,		\leftrightarrow	HR Project process controls in place, which are regularly review by HR Management Team. Project will allay current operation	
Amber	b) Development of HR datasets and dashboards		\leftrightarrow	concerns.	
Amber	c) Re-procurement of HRMS		\leftrightarrow	-	

Risk Code and Status: FF13: Care Leavers in Education, Employment		Scope of Risk: Without mitigating actions there is risk that: failure to join up approach across People leads to continuing high numbers of Care Leavers not in education, employment and training (NEET)		Agred	
				Risk Owner:	Fiona Fitzpatrick
Risk:					
Current	20				
Risk:					
Mitigating	controls (includ	ling RAG rating):	Direction of Travel:	Additional comments (if appropriate):	
Red	a) Join up ac	tivity across Heads of Services and	↑	Management Information now becoming available and shows variable performance which is being addressed. Improved ICT	
	Careers Sout	h West			
		-	reporting needed for accurac	y around Care Leavers lists. Virtual	
				School extended to Care Leav	vers. Care Leaver apprentices within
				Council.	
				000	

PEOPLE RISKS INCLUDED ON THE CORPORATE RISK REGISTER (AS AT 1 MARCH 2016)

APPENDIX C

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

Risk Code and Status:		Scope of Risk:		Current position/actions taken/accountable officer:		
FF15: Attainment of Looked After Children		Without mitigating actions there is risk that: failure to join up approach across People leads to continuing poor attainment for		Risk Owner:	Fiona Fitzpatrick	
Inherent 30 Risk:		children in care of the Authority		Accountable Officer:	Jennie Stephens	
Current	20					
Risk:						
Mitigating co	Mitigating controls (including RAG rating): Dire		Direction of Travel:	Additional comments (if appropriate):		
Amber	a) Join up act	tivity across Heads of Services and	\leftrightarrow	High levels of activity which is reflected in much improved example.		
	Babcock LDP			results. Greater focus by Virtu	al School and partners showing	
Amber	b) Re-focus of Babcock LDP		↑	impact.		
Amber	c) Data analysis		1			
Amber	d) Virtual School		1			
Amber	e) Personal Education Plan (PEP) impact		↑			

Risk Code and Status:		Scope of Risk:		Current position/actions taken/accountable officer:		
		s Without mitigating actions there is risk that: the impact across People's services of budget pressures and allocation issues within children's services could threaten overall financial stability.		Risk Owner:	Fiona Fitzpatrick/Sally Slade	
Inherent Risk:	30		,	Accountable Officer:	Jennie Stephens	
Current Risk:	25					
Mitigating controls (including RAG rating):		Direction of Travel:	Additional comments (if appropriate):			
Amber	a) Regular financial performance reporting to CLT		\leftrightarrow	Signficiant overspends are currently being forecast across a rangof Education transport and children's social care budgets, which		
Amber	b) Weekly children;s social care management meetings focussing on budget pressures		\leftrightarrow	threaten the overall financi	al stability of People's Services.	
Amber	er c) Focus for LTP discussions		\leftrightarrow	7		
Amber	d) Scrutiny reporting		\leftrightarrow			
Amber	e) Task Group led by Leader of the Council		1			

Risk Code a	and Status:	Scope of Risk:		Current position/actions taken/accountable officer:	
HTS: School Transport		Without mitigating actions there is risk that: loss of financial control and political impact of homw to school transport failure.		Risk Owner:	Sue Clarke
Inherent 30 Risk: Current 30			Accountable Officer:	Jennie Stephens	
Mitigating controls (including RAG rating):		ling RAG rating):	Direction of Travel: Additional comments (if appropriate):		propriate):
Amber	a) Management actions within Transport Coordination Service (TCS) involving route analysis and efficiency savings		\leftrightarrow	Continuing overspends on home to school transport are having deleterious effects on Education and Learning core budgets and initiatives, which are currently absorbing this substantial	
Amber	b) TCS monitoring and regular review across all areas of spend		\leftrightarrow	overspend.	
Amber	c) Policy regularly reviewed and adjusted to reduce areas of discretionary spend		\leftrightarrow		
Amber	d) Actions identified through corporate transport project board		\leftrightarrow		