

Phil Norrey
Chief Executive

To: The Chairman and Members of
the People's Scrutiny
Committee

County Hall
Topsham Road
Exeter
Devon
EX2 4QD

(See below)

Your ref :
Our ref :

Date : 8 June 2016
Please ask for : Stephanie Lewis

Email: 01392 382486

PEOPLE'S SCRUTINY COMMITTEE

Thursday, 16th June, 2016

A meeting of the People's Scrutiny Committee is to be held on the above date at 2.00 pm in the County Hall, Topsham Road, Exeter to consider the following matters.

P NORREY
Chief Executive

A G E N D A

PART I - OPEN COMMITTEE

1 Apologies for Absence

2 Minutes

Minutes of the meeting held on 21 March 2016 (previously circulated).

3 Items Requiring Urgent Attention

Items which in the opinion of the Chairman should be considered at the meeting as matters of urgency.

[NB: Please note that the times shown below are indicative and while every effort will be made to adhere thereto they may vary although, normally, items will not be taken before the time shown]

MATTERS FOR CONSIDERATION OR REVIEW

4 Public Participation: Representations

Members of the public may make representations/presentations on any substantive matter listed in the published agenda for this meeting, as set out hereunder, relating to a specific matter or an examination of services or facilities provided or to be provided.

- 5 Children's Standing Overview Group (Pages 1 - 4)
Report of meeting held on 27 April 2016 (CS/16/25), attached.
- 6 Adults' Standing Overview Group (Pages 5 - 6)
Report of meeting held on 14 April 2016 (CS/16/24), attached.
- 7 Child Sexual Exploitation Task Group (Pages 7 - 8)
Report of the Head of Children's Social Work and Child Protection (CP/16/01), attached.
- 8 Child Sexual Abuse (Pages 9 - 34)
Report of the Head of Children's Social Work and Child Protection (CP/16/02), attached.
- 9 Internal Audit Annual Monitoring Report (Pages 35 - 52)
Report of the County Treasurer (CT/16/47), attached.

- 10 Performance Report (Pages 53 - 130)
Report of the Strategic Director, People (SCC/16/49), attached.

- 11 People's Scrutiny Committee Work Programme and Council/Cabinet Forward Plan
In accordance with previous practice, the Committees is requested to review the list of forthcoming business (previously circulated) and to determine which items are to be included in the Work Programme. The Work Programme is also available on the County Council's website at:

<http://new.devon.gov.uk/democracy/committee-meetings/scrutiny-committees/scrutiny-work-programme/>

The Committee may also wish to review the content of the Council/Cabinet Forward Plan (available at <http://new.devon.gov.uk/democracy/how-the-council-works/forward-plan/>) to see if there are any specific items therein it might wish to explore further.

MATTERS FOR INFORMATION

- 12 Briefing Papers, Updates & Matters for Information
Members are asked to advise the Scrutiny Officer if they wish to raise any matter or ask any question in relation to this item in order that arrangements may be made for appropriate Heads of Service or their representatives to be available.

- 13 Dates of Future Meetings
PART II - ITEMS WHICH MAY BE TAKEN IN THE ABSENCE OF THE PUBLIC AND PRESS

Members are reminded that Part II Reports contain confidential information and should therefore be treated accordingly. They should not be disclosed or passed on to any other person(s). Members are also reminded of the need to dispose of such reports carefully and are therefore invited to return them to the Democratic Services Officer at the conclusion of the meeting for disposal.

MEMBERS ARE REQUESTED TO SIGN THE ATTENDANCE REGISTER

Membership
Councillors S Randall-Johnson (Chairman), E Barisic, F Biederman, A Connett, A Dewhurst, A Eastman, R Hannaford (Vice-Chair), A Hannan, J Hone, R Hosking, J Mathews, R Rowe, P Sanders, M Squires and C Channon Mrs Christina Mabin and Mr John Mannix
Declaration of Interests
Members are reminded that they must declare any interest they may have in any item to be considered at this meeting, prior to any discussion taking place on that item.
Access to Information
Any person wishing to inspect the Scrutiny Work Programme or any Reports or Background Papers relating to any item on this agenda should contact Stephanie Lewis on 01392 382486. The Work Programme, Agenda, Reports and Minutes of the Committee are published on the Council's Website
Webcasting, Recording or Reporting of Meetings and Proceedings
The proceedings of this meeting may be recorded for broadcasting live on the internet via the 'Democracy Centre' on the County Council's website. The whole of the meeting may be broadcast apart from any confidential items which may need to be considered in the absence of the press and public. For more information go to: http://www.devoncc.public-i.tv/core/ In addition, anyone wishing to film part or all of the proceedings may do so unless the press and public are excluded for that part of the meeting or there is good reason not to do so, as directed by the Chairman. Any filming must be done as unobtrusively as possible from a single fixed position without the use of any additional lighting; focusing only on those actively participating in the meeting and having regard also to the wishes of any member of the public present who may not wish to be filmed. As a matter of courtesy, anyone wishing to film proceedings is asked to advise the Chairman or the Democratic Services Officer in attendance so that all those present may be made aware that is happening. Members of the public may also use Facebook and Twitter or other forms of social media to report on proceedings at this meeting. An open, publicly available Wi-Fi network (i.e. DCC) is normally available for meetings held in the Committee Suite at County Hall. For information on Wi-Fi availability at other locations, please contact the Officer identified above.
Public Participation
Devon's residents may attend and speak at any meeting of a County Council Scrutiny Committee when it is reviewing any specific matter or examining the provision of services or facilities as listed on the agenda for that meeting. Scrutiny Committees set aside 15 minutes at the beginning of each meeting to allow anyone who has registered to speak on any such item. Speakers are normally allowed 3 minutes each. Anyone wishing to speak is requested to register in writing with Stephanie Lewis (stephanie.lewis@devon.gov.uk) by 0900 hours on the day before the meeting indicating which item they wish to speak on and giving a brief outline of the issues/ points they wish to make. Alternatively, any Member of the public may at any time submit their views on any matter to be considered by a Scrutiny Committee at a meeting or included in its work Programme direct to the Chairman or Members of that Committee or via the Democratic Services & Scrutiny Secretariat (committee@devon.gov.uk). Members of the public may also suggest topics (see: https://new.devon.gov.uk/democracy/committee-meetings/scrutiny-committees/scrutiny-work-programme/) All Scrutiny Committee agenda are published at least seven days before the meeting on the Council's website.

Emergencies

In the event of the fire alarm sounding leave the building immediately by the nearest available exit, following the fire exit signs. If doors fail to unlock press the Green break glass next to the door. Do not stop to collect personal belongings, do not use the lifts, do not re-enter the building until told to do so.

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If you need a copy of this Agenda and/or a Report in another format (e.g. large print, audio tape, Braille or other languages), please contact the Information Centre on 01392 380101 or email to: centre@devon.gov.uk or write to the Democratic and Scrutiny Secretariat at County Hall, Exeter, EX2 4QD.



Induction loop system available

Children's Standing Overview Group

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The Children's Standing Overview Group (CSOG) of the People's Scrutiny Committee meets bi-monthly to review performance/service matters relating to children's safeguarding and social care services respectively. At the last session on the 27 April 2016 the following issues were raised:

### Technology and Functionality Provided to Children's Social Work

- Following the conclusion of the Lean Review in 2015 the number of forms social workers had to complete on Care First was reduced, which has made a significant difference to staff.
- The need for a single system for children, not just for Children's Social Care, but one that also interfaces with Adult Services, Health and most importantly across Education.
- Staff migration will continue to be a big challenge to the Council and represents a costly piece of work to address. The reduction in the forms that need to be completed within Care First is one piece of the puzzle to help address the issue of migration.
- Skype Business will shortly be available to all parts of the County Council.
- Members thanked the Cabinet Member for Performance & Engagement and the Head of Business Strategy and Support for the considerable progress made since the 2013 Ofsted.

### Performance Report: Children's Social Work and Child Protection

- Concern about the inappropriate use of Devon Assessment Framework (DAFs).
- The challenge of academisation, and concerns around consistency.
- The need to reduce social worker caseloads, as currently these are at an unacceptable level.
- Thresholds are not yet right at almost every stage of the system. The system in Devon has not properly addressed all the intermediary steps prior to a Child Protection conference.
- Placement stability is a huge challenge.
- Need to articulate a vision for Children's Social Care as to how it should look. The Team Manager position is absolutely crucial in the articulation of this vision.
- There needs to be adequate resistance within the system and social workers need to feel safe.
- Need to protect resource for early help. Early help may be the only place to get additional money out of the budget but it is not a sensible area to cut, and will risk higher end costs.
- Parents will struggle with the current system in terms of SEND and is an area for development.
- There is a significant difficulty accessing specialist mental health support services for the most vulnerable. There is little evidence of whole system CAMHS thinking.

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## Site Visits to Newton Abbot, Totnes and Exeter Social Care Offices

CSOG members undertook site visits to Newton Abbot and Totnes social care offices on 26 April 2016 and met staff from the Exeter offices on 27 April 2016. Members found through their site visits that considerable improvements had been made since their last visits in 2014 and thanked all concerned.

During discussion with a wide range of Children's Social Care staff the following issues were however raised:

- Staff spoke of the improvements in IT and mobile technology. The reduction in Care First forms has certainly been of benefit. There are difficulties in Devon in terms of mobile networks and internet connections but IT support is good.
- Huge pressure that Child Protection social workers are under, where staff are overwhelmed by their caseload and are leaving after a short period of time.
- The need to recruit more permanent staff in Child Protection. It remains a problem where agency staff leave in terms of disruption and gaps, which is at the detriment of the service and ultimately the children concerned. It is a difficult part of the business and there needs to be more support going into the teams to improve the consistency of workers. AYSEs and other staff are not always leaving to get more money elsewhere but to move into another area of work which is less pressured. It is difficult to escape the worry 'that you have not done enough to keep a child safe'. Staff in Child Protection are often working at nights at home, at weekends and cannot use up their toil and have significant difficulties taking leave.
- Staff that remain in post often feel isolated with people leaving around them. One member of staff advised that after only 12 months she was the longest serving member of staff in her team.
- Caseloads are going up. Some staff are doing 60/70 hours per week. An AYSE advised that she had a caseload of 26 while also having to find time to do coursework – she also did not feel that she was being given the appropriate level of support from her line manager.
- Cases though are moving through the system and are not being re-referred which is a good sign.
- Not enough experienced staff, with some of the more experienced staff moving to become agency workers. Agency staff are in some instances earning £20,000 a year more to undertake the same job as a member of County Council staff. Agency staff reported not being able to afford the drop in pay it would necessitate by joining the County Council on a permanent contract.
- Management pay is less in Devon than neighbouring authorities. Members highlighted the need for a peninsula approach to social work pay scales to reduce the movement of staff from Devon elsewhere.
- Early help is not embedded as well as it might be yet.
- The MASH remains inconsistent.
- A lot of people move to Devon because of its AYSE scheme, which was widely reported as outstanding.
- Vital to have balance though between AYSEs/NQSWs and experienced staff. Positive initiative to bring older social workers back into work to utilise that experience.
- One social worker advised that she had received 2 supervisions in April, but prior to this she had not had supervision for more than 5 months. The quality of supervision is also an issue.
- The hot desking policy dislocates a team and its' manager. The loss of reassurance of being near your line manager is quite significant in terms of feeling properly supported.
- There are difficulties in terms of getting support for children subject to a Child Protection Plan without going to Panel. There is a particular gap for children between the ages of 6-11, all the support is provided earlier in the system for those children with lesser need.
- Children's centres are largely fantastic though there have been some issues with their restructure.

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- In terms of fostering, there has been really good early performance, fewer placement moves, and a successful foster to adopt scheme. It was however a mistake last year when for a period the County Council stopped recruiting for foster carers.
- Private fostering feels in safe hands, although given the size of the team the loss of any member of staff would be significant.
- Car parking is a huge issue for staff at County Hall with considerable time wasted as a result of the difficulties. Social workers need to have a car available for Section 47 visits, yet there are no allocated spaces or access provided. There are duty passes but these do not provide access to the car park once it is full, which it generally is by 9.00am and staff are not allowed to use the visitor's car park. It makes working life even more stressful than it already is. The parking arrangements put off social workers from working for the County Council. Approximately 50 spaces are needed to alleviate the problem.
- There should be some provision in terms of social workers being equipped with a panic button/alarm particularly for those in Initial Response on their first visit to a property. NHS staff were reported to be equipped with a panic button for home visits.
- There is an issue at County Hall in terms of there being only one small room for meetings with clients, which is not fit for purpose. The room is difficult to book and has no panic button facility.
- Communication with schools needs to improve. It is apparent that schools often do not want to hold the risk and are referring DAFs back to the MASH. There is real value in having social workers linked to schools in helping to address these types of issues.

**Cllr Sara Randall Johnson**  
**Chair**





## Adults' Standing Overview Group

The Adults' Standing Overview Group (ASOG) of the People's Scrutiny Committee meets bi-monthly to review performance/service matters relating to adult's safeguarding and social care services respectively. At the last session on 14 April 2016 the following issues were raised:

### Adult Social Care Performance Framework

- With the outcome of the Cheshire West judgement, there has been a significant upturn in Deprivation of Liberties Standards applications, which is a growing pressure on the system. The County Council has a better understanding of the level of anticipated demand on this area of the business now and work is underway to try to deal with the significant increase in workload, prioritised by need.
- Work has been undertaken with partner organisations in terms of the threshold for a safeguarding concern such as with the Ambulance Service, but need to do more with the Police.
- Need to know how quickly work is undertaken within the system to put a protection plan around someone and understand how swiftly Adult Social Care is able to make an individual safer once holding information that a person is at risk.
- It is estimated that there are 80,000 carers in Devon, with the County Council in contact with approximately 13,000 of these. In terms of contact to carers this places Devon as not only a regional leader but one of the leading authorities nationally. The fall in recent performance against carer assessments is largely attributable to the implementation of the Care Act.
- It is vital that the County Council is doing more to help people within their communities before they get to the point of greater intervention.

### Prevention

- A joint commissioning strategy for prevention, Living Well and Ageing Well has been developed, which recognises the need to have a concerted focus on preventive action.
- A self-help tool has been designed online as a part of a package of support to provide targeted information, advice and signposting to individuals. It is hoped that the tool will also be used by providers and that members are provided with an information pack to share with their parishes.

### Integrated Care Exeter

- The ICE project is initially for Exeter but a similar approach could potentially be rolled out across Devon. ICE aims to improve the delivery of community services for adults with complex needs by joining up and integrating services into a single pathway.
- The project puts GPs in contact with a range of community/voluntary groups in terms of social prescribing/community connecting. There are often far better outcomes for people where they are not moved into statutory services. There are also those in mid-life who need to be encouraged to make the right life choices as part of keeping people well for longer. The ICE model is about helping to create a change in the primary care approach. ICE should enable more people to be cared for in their own home as alternative to being admitted to hospital.
- Work is being undertaken with Exeter City Council on homeless people's care as this is an area where there has not been enough of a holistic approach.

**Cllr Sara Randall Johnson**  
Chair



## DSCB CSE SUB GROUP UPDATE

### Report of the Head of Childrens Social Work and Child Protection

#### 1. Introduction and background

In March 2015 the Devon Safeguarding Children's Board (DSCB) set up a new Missing and Child Sexual Exploitation (CSE) Sub Group. The Sub Group is accountable for the delivery of the Devon Child Sexual Exploitation Strategy and Action Plan 2015-16.

This report updates on the progress made against each area of the plan in addressing the recommendations made in the Scrutiny Committee report as well as giving updates with regards to work that has been generated as the group has evolved and we understand more about CSE in Devon.

#### 2. Progress in delivering the Devon CSE Action Plan

##### Overall Planning

Agencies are engaging well with regards to tackling CSE. There is clearly a high motivation across Devon amongst all partner agencies to develop innovative ways of safeguarding children with regards to CSE. This is well demonstrated by the attendance at CSE sub group meetings, MACSES and related task and finish groups.

##### Prevent

Bespoke single and multi-agency learning and development has been rolled out. Every agency can report on take up levels of formal training and other development opportunities.

Devon Youth Service (DYS) completed a CSE survey to enhance our knowledge of young people's understanding of CSE. 168 young people participated in the survey. 68% of respondents felt they had an understanding of CSE, 23% thought they knew someone suffering from CSE; 40% felt that it was a significant issue on social media platforms; and 63% felt they knew how to access support about CSE for themselves or a friend if required. This is an encouraging picture of the impact of prevention activity in Devon.

Research indicates that children from seldom heard groups are more likely to be abused or exploited. To date there has been no co-ordinated activity to raise awareness amongst children in these groups. The following groups have been identified as the focus for more targeted prevention activity:

1. Children with Disabilities (physical, learning, deaf, blind, communication difficulties)
2. LGBT (focus on boys at risk)
3. Migrant workers
4. Travelling community
5. International students.

DCC in collaboration with its partners redesigned the MACSE (missing and child sexual exploitation forums). This introduces a new co-ordination post, new chairs and vice chairs. This has resulted in a far more organised structure that allows the forums to deal with CSE in their respective areas. There is good multi-agency representation at all 3 MACSE's in Devon.

MACSEs are a truly multi-agency group of professionals who together form the hub of knowledge relating to CSE risk and activity within that MACSE area. The MACSE information sharing process supports those responsible for protecting children and pursuing offenders by ensuring all agencies pool their collective knowledge of individuals and situations when a concern is first raised. These have been running since November 2015 and are proving effective in sharing information, safety and disruption planning. They have raised awareness in practitioners of CSE and are improving skills.

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The Organised Crime Local Profile for CSE and CSA (appended) is the first multi-agency problem profile of CSE that agencies have had to work with. This provides the baseline for partners to measure progress. This profile will develop as we learn more about this difficult and complex subject.

## **Protect**

The CSE screening tool has been re-designed. Its purpose is to identify young people at risk of sexual exploitation or who are already being sexually exploited so that appropriate interventions can be put in place.

Three year Big Lottery funding has enabled a CSE worker in the Exeter Sexual Assault Referral Centre (SARC) and 3 more CSE workers employed by Childrens Society around Devon. The role of these workers will be to support and treat children who have been victims of CSE.

Embedding workers' knowledge and skills in working with and managing CSE in open cases is a priority in Devon.

## **Disrupt**

A multi-agency CSE disruption manual has been produced. The manual highlights traditional methods of disruption that may be open to law enforcement agencies, but also non-traditional methods using legislation open to partner agencies. This disruption manual has been passed to attendees of MACSE's to help give the MACSE chairs some guidance in terms of directed intervention within that forum. It has also been passed to all the chairs of policing tasking meetings.

Over the last 9 months there have been a number of successful and ongoing joint operations combating CSE. Examples include Operation Juke, (two lead offenders were subjected to a total of 21 years in prison) and Operation Pangram (lead offender) received an 8 ½ year sentence.

A Strategic Governance Group (SGG) has been set up in the South West region to help deal with the police and multi-agency response to CSE. Practice from Devon has been identified as best practice by this group and the level of involvement and interaction has been good, resulting in key inputs to the regional strategy being developed by this group.

## **3 Conclusion**

Good progress, led by the DSCB sub group, has been made across the partnership to respond to the challenge of CSE. Levels of awareness of professionals and of young people have been raised and Devon is in the embedding practice stage of development. We need to satisfy ourselves that we have a shared understanding of what best practice looks like so that we accurately benchmark and accelerate improvement.

Jo Olsson

## **Electoral Divisions: All**

Cabinet Member for Children, Schools and Skills: Councillor James McInnes

Strategic Director, People: Jennie Stephens

## **LOCAL GOVERNMENT ACT 1972: LIST OF BACKGROUND PAPERS**

### *Contact for Enquiries:*

Jo Olsson, Head of Service for Childrens Social Care and Child Protection

Email: jo.olsson@devon.gov.uk

Tel No: 01392 381093

Room: 130, County Hall

## **Child Sexual Abuse in Devon**

Report of the Head of Children's Social Work and Child Protection and the Senior Manager, Safeguarding and Children's Specialist Services

### **1. Introduction**

In the 1980's recognition of child sexual abuse in the profession and publicly developed. The Cleveland Enquiry 1987 marked a watershed

More recently, high profile cases of celebrities abusing children have resulted in the establishment of IISCA (independent Inquiry into child sexual abuse).

This report explores the issue of sexual abuse for children in Devon, its prevalence and progress in the identification and safeguarding of children.

### **2. National Profile on the prevalence of child sexual abuse**

Research undertaken by the NSPCC identified the following facts:

- 1 in 20 children in the UK have been sexually abused
- 1 in 3 children sexually abused by an adult did not tell anyone
- Over 90% of sexually abused children were abused by someone they knew
- Over 2,800 children were identified as needing protection from sexual abuse last year
- Disabled children are over 3 times more likely to be abused than non-disabled children
- Nearly 30,000 registered offenders have been convicted of offences against children.
- Over a third of sexual offences recorded by the police are against children

In July 2014, the Children's Commissioner highlighted that it is likely that only 1 in 8 victims of sexual abuse come to the attention of the police and children's services and that up to two thirds of all sexual abuse happens in and around the family.

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The commissioner endorsed the NSPCC findings and also that:

- Children are sexually abused from a very young age, but most victims do not come to the attention of the police or children’s services until they reach adolescence.
- Most victims of child sexual abuse do not come to the attention of statutory authorities, the criminal justice
- child protection systems are largely disclosure-led
- Many victims do not recognise that they have been sexually abused until much later in life.
- Many victims are sexually abused by more than one person.

## 4. Prevalence of child sexual abuse in Devon.

In this context it is likely that sexual abuse in Devon is under-reported and under-recognised.

### 4.1 Children on child protection plans for sexual abuse

We capture data on the number of children who are subject of a child protection plan where sexual abuse was the main or sole factor. The total number of children subject of a child protection plan at the year-end was 750. The number of children subject for a plan for sexual abuse is low (see table).

We are performing better than our statistical neighbours, the SW Region and nationally but we know that we face significant challenges in the identification and protection of children who have been sexually abused.

| Year end | No. of children on CP plan for sexual abuse | Per 10,000 population. | Benchmarking |          |
|----------|---------------------------------------------|------------------------|--------------|----------|
| 2014/15  | 42                                          | 2.97                   | England      | 1.83 per |
| 2015/16  | 51                                          | 3.6                    | 10,000       |          |
|          |                                             |                        | SW Region    | 2.06 per |
|          |                                             |                        | 10,000       |          |
|          |                                             |                        | DCC          | 2.97 per |
|          |                                             |                        | 10,000       |          |
|          |                                             |                        | Stat Neigh   | 1.83 per |
|          |                                             |                        | 10,000       |          |

## **4. 2 Assessments where sexual abuse was a factor**

In 2014/15, sexual abuse factors were recorded in 7.53% of assessments (provisional data for 2015/16 6.37%). This is higher than the 5% (1 in 20) expectation of the NSPCC research. Attached as an appendix (Appendix 1) is a police report outlining and analysing their activity (the data in the report does not distinguish between CAS and CSE)

## **5. Identification and safeguarding children.**

In the last three years there have been two serious case reviews on children who had been sexually abused by members of their family (CN10 & CN11), There has also been a management review on two children living with a convicted sex offender (MR02).

CN10 - <http://www.devonsafeguardingchildren.org/documents/2014/06/serious-case-review-cn10-report.pdf>

CN11 - <http://www.devonsafeguardingchildren.org/documents/2016/01/dscb-scr-cn11.pdf>

All three of these reviews have highlighted the considerable challenges for all practitioners working with children

## **6. Social Care Improvements**

Bespoke training on sexual abuse has been delivered to all social work staff.

Multi-agency training on child sexual abuse has been delivered.

Work continues to develop practice confidence and expertise

The assessment of relatives as part of a special Guardianship application has been strengthened with a discrete team undertaking these assessments.

The voice of the Child and their experience of living in their family and environment has been a major feature of children's social work improvement plan. This is work in progress.

Work is underway to strengthen child protection enquiries to ensure rigour and penetration

The identification and protection of children being sexually abused relies upon effective working together across partners. This is a major theme for the DSCB

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who have set up a task and finish group to address the issues arising from the themed review.

## **Summary/Conclusions/Reasons for Recommendations**

Child sexual abuse is a very challenging area of practice. The abuse usually takes place in secret, with no witnesses and with victims who are groomed into silence. Non abusing partners are often needy and targeted by predatory paedophiles.

The successful protection of children requires collective professional curiosity and tenacious practice.

The priorities for social work remain around developing professional curiosity and developing multi agency working together arrangements that will help improve the protection of children. The work of the task and finish group will be fully incorporated into the social work practice.

## **Recommendations**

That this report is noted and the work of the task and finish group reported to scrutiny.

Jo Olsson

**Electoral Divisions:** All

Cabinet Member for Children, Schools and Skills: Councillor James McInnes

Strategic Director, People: Jennie Stephens

## **LOCAL GOVERNMENT ACT 1972: LIST OF BACKGROUND PAPERS**

*Contact for Enquiries:*

Jo Olsson, Head of Service for Childrens Social Care and Child Protection

Email: jo.olsson@devon.gov.uk

Tel No: 01392 381093

Room: 130, County Hall





**Devon and Cornwall  
Police**

OFFICIAL



# Peer on Peer Child Sexual Abuse & Exploitation

**Devon**

May 2016

Information within this document can be shared with relevant partnership forums. Please contact the author at [Hannah.robins@devonandcornwall.pnn.police.uk](mailto:Hannah.robins@devonandcornwall.pnn.police.uk) if you have any queries.

## Background of document and aims

Following Home Office instruction, a Peninsula Overview on Child Sexual Abuse and Exploitation (CSA/E) was written by Devon and Cornwall Police, and then disseminated in July 2015. This was the first publicly shared description of the type of CSA / E being reported to the Police within the Peninsula. This was the first in an incremental series of partnership products, to build a better understanding of the extent and nature of sexual offences against our young people. The second step in this series was the Serious and Organised Crime Local Profiles for each of the 4 areas within our force, Devon, Cornwall, Torbay and Plymouth. The aim of these profiles was to develop a common understanding among local partners of the threats, vulnerabilities and risks relating to serious and organised crime, provide information on which to base local programmes and action plans, support the mainstreaming of serious and organised crime activity into day to day policing, local government and partnership work and allow a targeted and proportionate use of resources. The third stage is a series of these types of reports focused on drilling down into the key issues or gaps highlighted by the local OCLPs

### Aim

Provide a more in-depth look at peer on peer CSE offending within Devon with a focus on identifying significant areas for further action or analysis, to continue to inform preventative approaches and allocation of resources and further identify any significant intelligence gaps that can feed back in to inform the strategic intelligence requirement and the next iteration of the OCLPs.

### Why focus on Peer on Peer CSA/E?

National findings have shown that around a third of sexual abuse is committed by other children and young people (Hackett,S. (2014)<sup>1</sup> and that in 2013-14 over 4,200 children and young people were reported as perpetrators of sexual abuse (NSPCC (2014) FOI request)<sup>2</sup>. In the Barnardos Puppet on a string report a quarter of services identified peer based exploitation as becoming more common<sup>3</sup>. On a local level the Devon CSE OCLP found that the most common relationship between victim and offender was peers, where both were under the age of 18. Out of the Devon exploitative data sample peer was the relationship between victim and offender in 30% of the cases with the next nearest being stranger online at 14%. With Peer on Peer CSA/E being identified as a threat both nationally and locally it is important to increase our understanding of it, identify gaps in our knowledge and identify what further pieces of work are required to fill these gaps.

# Methodology and Limitations

## Method

- Comparative case analysis of 95 sexual offences where both the offender and victim were recorded as being under the age of 18. These crimes were predominantly offline CSE/A reported between Feb 14 and July 15 in Devon. Based in the main on the exploitation data sample from the researchers within the Force Intelligence Centre that featured heavily within the CSE OCLP.
- Semi structured interviews with REACH Social worker, 2 x Detective Sergeants from within the Public Protection Unit and the Babcock LDP Adviser for Personal Social Health and Education & Citizenship
- 3 small case examples of high risk offenders

Devon and Cornwall Police have launched the use of a CSE flag for crimes and enquiries and CSE flags for potential perpetrators and victims which will allow for the far easier identification of CSE related data to analyse. The re-launch of the Devon MACSE process and the data collection from the use of the Devon CSE risk assessment at these meetings will provide a possible new multi agency data set for future analysis.

## Strengths

- A smaller data sample is manageable for the resources available and allows an in depth look at each of the crimes
- Using some quantitative and qualitative methods allows for the identification of trends to be combined with details about human behaviour and emotion
- Less structured interviews allow for detailed answers and flexibility in the questions and topics that could be covered

## Limitations

- The data set contains crimes that would fall into both the definitions of CSE and CSA. The document is primarily based on recorded Police crimes and therefore not necessarily representative of the full picture. Some victims and offenders appeared more than once within the data sample
- The data set is limited in size so needs to be considered when interpreting any findings
- Semi structured interviews can be difficult to compare as each is unique and the small number means they may not be representative of people's views.

## Key Findings and Considerations

Around 50% of offenders had previously been known to a service and of these 33% had been linked to a safeguarding enquiry and 30% had been the victim of an assault. It is recommended that there is further work into any common vulnerabilities amongst victims and offenders, and learning from Avon and Somerset's predictive analysis which could help in the early identification of potential victims and perpetrators.

The MOSAIC data indicates that there is a particular household type that is more at risk of this type of offending. It is advocated that this work be expanded so more confidence could be given to the results which would allow the targeting of intervention and communications to areas most at risk.

Peer on Peer CSA/E is most likely to take place in the residential addresses of victims or the offender. It is suggested that there is a focus on awareness raising and preventative messages to parents and guardians about keeping their children safe from this offending within their homes.

The school environment was a key location linked to Peer on Peer CSA/E. It is recommended that education providers consider an assessment of levels of understanding amongst staff members of this model of CSE and of any materials available to Devon Schools to gauge to what extent this model of CSE is understood.

There appeared to be an absence of the gift giving grooming behaviour in this data set of Peer on Peer CSA/E crimes and alcohol and drugs did not seem to play a significant role. There did seem to be an element of violence, peer pressure and bullying behaviour. Speaking to young people directly about their understanding of consent, exploitation, coercion and the influence of peers would further our understanding of what might lead to this type of offending and how to better target intervention.

Even though there were recording issues in relation to disabilities, this data set still seems to show that those with a learning disability are over represented amongst victims of peer on peer CSA/E. It is advocated that further work to understand vulnerabilities and offending, specifically into this seldom heard group, would increase the level of understanding around the context of this offending.

All agencies should consider how a more holistic approach to Peer on Peer CSA/E investigations could be implemented in order to work with the environments the offences have taken place within as well as the individuals involved. What work could be completed with a school, a peer group or the home environment of a victim or offender to address any worrying behaviour or attitudes to reduce future offending and which agency might be best placed to complete this.

Focusing analysis on just those convicted of Peer on Peer CSA/E may provide more insight into the highest risk offenders.

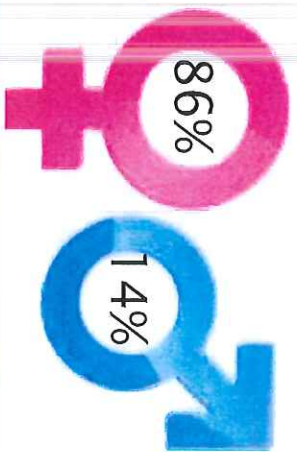
Studying victims and offenders over time could show if they have a propensity to be involved in other crime types as adults.

**Victims and  
vulnerabilities**

# Agenda Item 8

## Who is at risk of Peer on Peer Child Sexual Abuse and Exploitation within Devon?

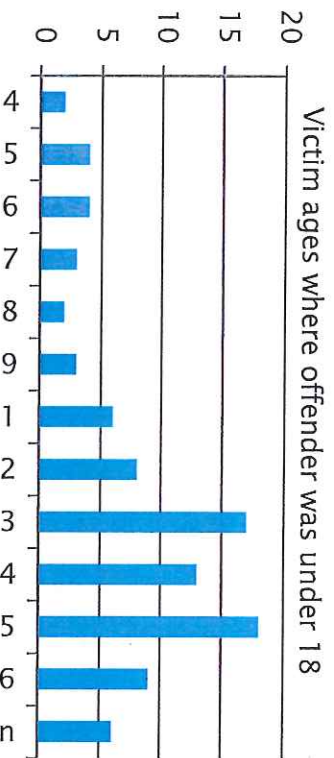
### Gender of victims



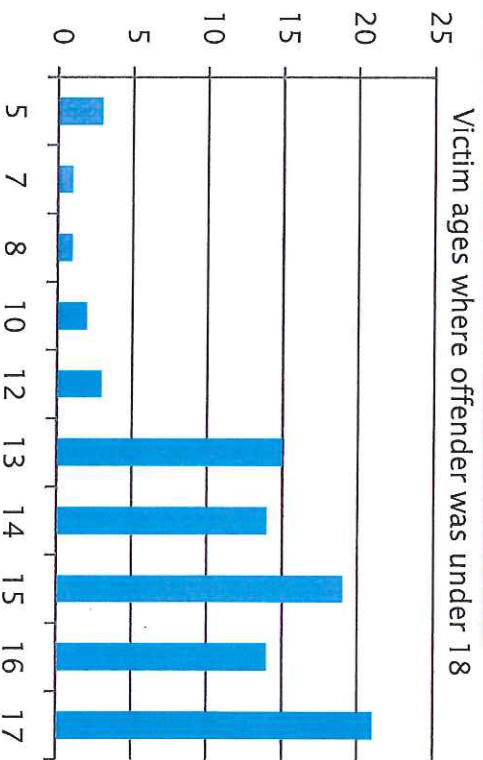
This is the exact same figure as found in the 'all sexual offences data' in the Devon CSE OCLP. It again shows that females in Devon are more at risk of being the victim of Peer on Peer CSA/E.

Male victims are likely to be under-reporting and interestingly when looking at 6 months worth of submissions into the Devon MACSEs, although for all types of CSE, the figure is 21%. This could be something to monitor over time. Could the higher submissions for males into the MACSEs be due to males having more confidence to report to other agencies rather than the police, or other agencies being better at identifying the risks

### Age of victims



50% of the victims in this data set are aged between 13-15. 15 years of age was the most frequently occurring age.



When compared with 93 crimes where the offender was over 18, 89% of victims were 13 or over compared to 55% above. 17 year olds also featured when the offender was over 18 but not when the offender was under 18

### Ethnicity of victims

Where ethnicity was recorded, 78% of victims were White British. A further 20% were recorded as White European and White North European, both likely to be recording errors.

This finding is unsurprising given 95% of the Devon population is white British.

There being no recorded Black or Asian victims could be an issue with the data sample size. Peer on Peer CSA/E amongst Devon's BME communities could need further analysis to understand any issues specifically affecting them

## Vulnerabilities

Was incredibly difficult to be confident in knowing you had found the correct information on victim and suspects vulnerabilities from Police crime data.

### Disabilities

Of those where it was recorded, 13% of victims had a learning disability and 1 victim had a physical disability

Public health England data shows that Devon has similar or slightly lower amounts of children with learning disabilities known to schools, with 25.5 out of 1000 compared to 33.7 nationally<sup>4</sup>. In the Devon JSNA it suggests the total number of people with a learning disability will increase by 14% up to 2021<sup>5</sup>.

Using the above information it suggests 3% of Devon school children have a learning disability yet they represent 13% of this data set suggesting they are over represented

Clearly establishing this information and recording it on crimes and enquiries will help future analysis. It's a clear section on the Devon CSE risk assessment which will provide a good opportunity for future analysis in this area

Learning disabilities and CSE were well covered in the Devon CSE OCLP<sup>6</sup>

### Known to Services

55% of the victims were known on the Devon and Cornwall Police Unifi system prior to this recorded sexual offence

48% of the victims were known on the Devon Social Services system Carefirst<sup>6</sup> prior to this recorded sexual offence

20% of these victims had been recorded as the victim of a previous sexual offence by Devon and Cornwall Police

Further analysis into this could turn it into an early intervention opportunity. Looking at what they were known to services for, and when, could help to predict future vulnerability to offences. Avon and Somerset Police are trialling a predictive analysis model, a report on which is going to be shared regionally

In comparison to the data set where the offender is over 18 this rises to 31%

### Other vulnerabilities

This was difficult to establish but of those seen some of the main vulnerabilities included issues around the home, witnessing domestic abuse, parental neglect and parental mental health problems

Practitioner experience also points to loss, bereavement or coming into care, attachment disorders and speech and language difficulties

Further analysis with multi agency information could expand learning in this area

### Missing

20% of victims in the Peer on Peer data set had a missing episode prior to this sexual offence

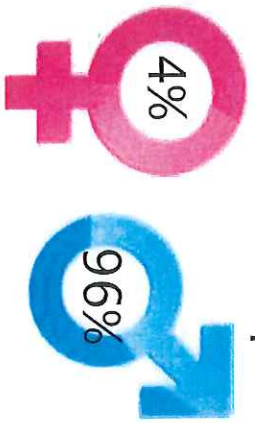
Is the link with missing related specifically to the high risk cases rather than a common denominator across all CSA/E?

**Offenders**



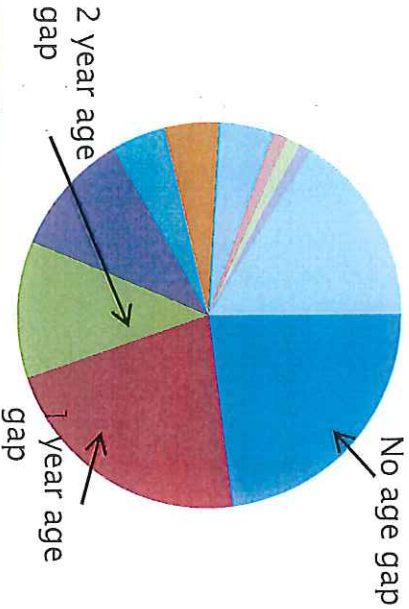
## Which young people pose a risk in Devon?

### Gender of suspects



In 10 out of the 95 crimes the victim and offender were both male. There were no female on female crimes.

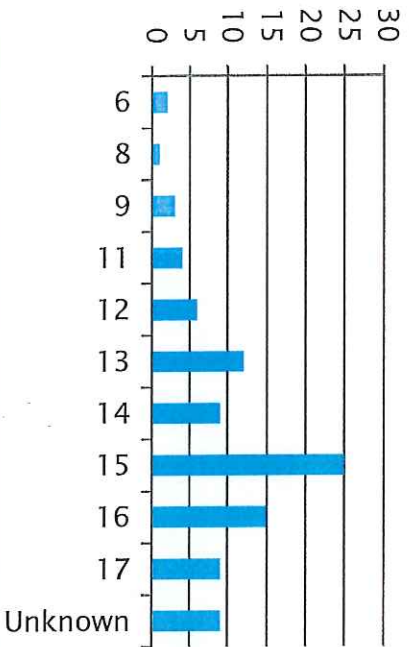
### Age gap between victim and suspect



In 60% of these crimes the age gap between victim and suspect was between 0-2 years

In only 8% of these crimes was the offender younger than the victim

### Age of suspects



26% of suspects are aged 15. 13-16 year olds account for 61%

### Ethnicity of suspects

62% of suspects were white British where this was recorded.

### Disabilities

Of those where it was recorded, 11% of suspects had a learning disability and 2 suspects had a physical disability

In 97% of these cases the offender and victim were known to each other

### Known to services

67% of suspects were previously known on the Devon and Cornwall Police Unifi system prior to this recorded sexual offence.

51% of suspects were known on the Devon Social Services Carefirst6 system prior to this sexual offence

47% of suspects were known on both

16% had previously been recorded as the offender on a sexual offence by Devon and Cornwall Police

11% had previously been recorded as the victim of a sexual offence by Devon and Cornwall Police

33% of suspects had previously been linked to an enquiry in relation to safeguarding domestic, physical or neglect

Of the 67% of suspects previously known to Devon and Cornwall Police, 30% were linked as the victim of an assault

# Which young people pose the greatest risk?

**Case A**  
 Offender, 14 years of age, was given a conditional caution for cause / incite a girl under the age of 13 to engage in sexual activity no penetration x 2 and sexual assault of a male under 13, this placed him on the Sex Offenders Register for 12 months and they are currently being managed as a very high risk.  
 He had not previously been linked on Devon and Cornwall Police systems to any crimes or enquiries. The only intelligence received prior to the disclosure of the offences was from 2012 where the offender had made a nuisance 999 call and the report of a domestic incident whereby concerns were raised for children sleeping on mattresses on the floor and being up in the early hours of the morning.  
 There were multiple victims in this case, ages 7, 8 and 9. They were known to each other from all living in the same locality and the offences happened in parks and other outside spaces near to their homes. The offender in this case sometimes turned the offending into a game to persuade the victims and sometimes used threats

**Case B**  
 Offender, 14 years of age, was convicted of Rape of a child under 13, Sexual activity with a child x2 and engaging in sexual activity in the presence of a child, they were sentenced to a 3 year youth rehabilitation order and given a Sexual Harm Prevention Order for 5 years. They are currently being managed on the Sex Offenders Register with a risk assessment of high.  
 The victims of these offences were aged 11, 10 and 14 years of age. Two were intra-familial, the other known as a friend, 2 of the victims were male and 1 was female. The offences took place in various residential settings. The offender had not previously been linked to any crimes or enquiries by Devon and Cornwall Police and there was no previous intelligence. Various reports on this offender said he showed no remorse for his offending and had no empathy for the victims

**Case C**  
 Offender, 16 years of age, was convicted of Sexual Activity with a child, assault of a child under 13 by penetration and cause or inciting child prostitution or pornography x 10.  
 The victims in this case were aged 11, 12 and 13 and were schools associates and friends of friends. The offences took place in various locations including a public park. There was alcohol used as part of this offending and the offender used pressure, force, violence and blackmail to commit the offences.  
 Prior to these sexual offences the offender had been reprimanded for using threatening, abusive insulting words or behaviour and possessing a knife in a public place. Warned for ABH and found guilty of battery. He had also been linked as the suspect to a burglary offence and as the victim in numerous assaults.

The Exeter and East Devon MAPPA team reported a rise in Registered Sex Offenders under 18 that they are managing. Good work is already taking place to address the issue but is this a new threat that needs to be explored further and practice and procedures reviewed?

A study into just those young people who have been convicted of a sexual offence against another young person as opposed to all crimes may pick out the highest risk from the volume

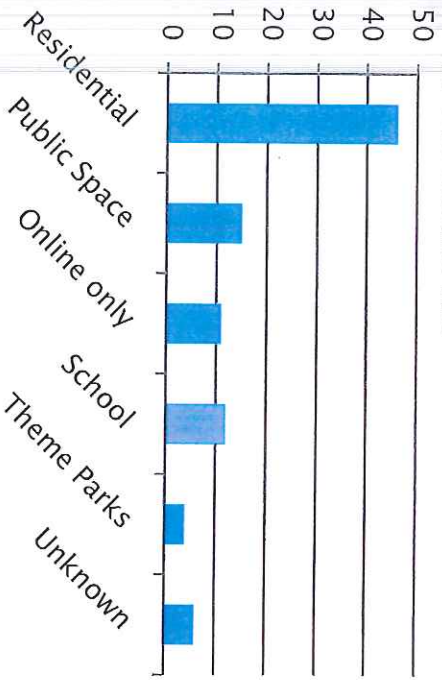
An additional piece of work, over time, looking at the offenders and victims of peer on peer exploitation and their journeys could identify if they become more likely to commit or be the victim of certain crime types as adults



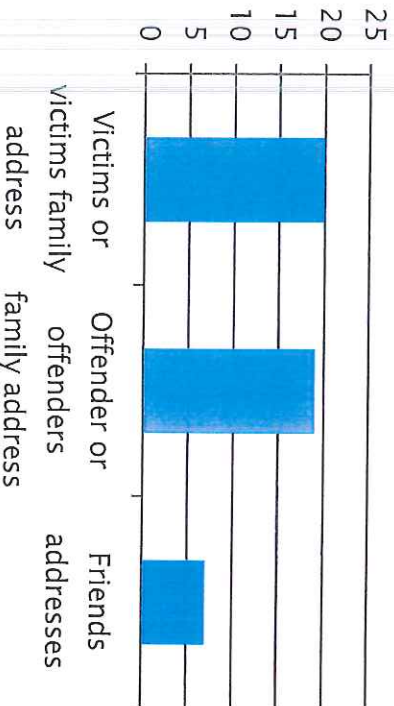
# Locations

## Where are Peer on Peer sexual offences most likely to happen?

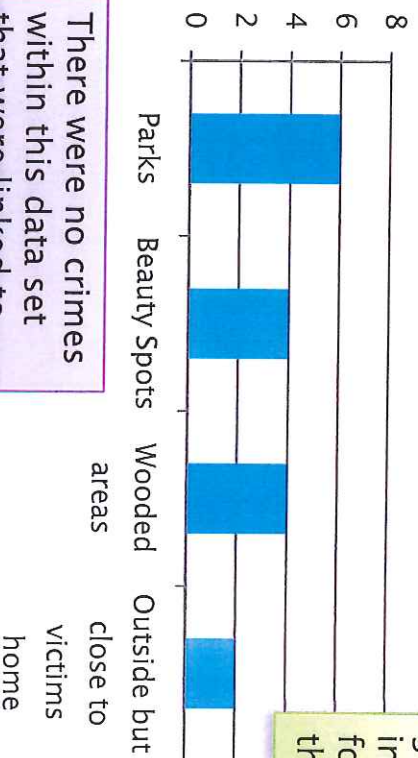
### All Locations



### Of the residential addresses



### Of the Public Spaces



There were no crimes within this data set that were linked to the Evening & night time economy.

There were many good suggested intervention ideas for public spaces in the Devon CSE OCLP

### Other significant locations

Amongst this data set, and from professional comment, it would appear that this type of offending is more opportunistic. If the relationship between offender and victim doesn't develop over a long period of time, will there be other locations that are significant?

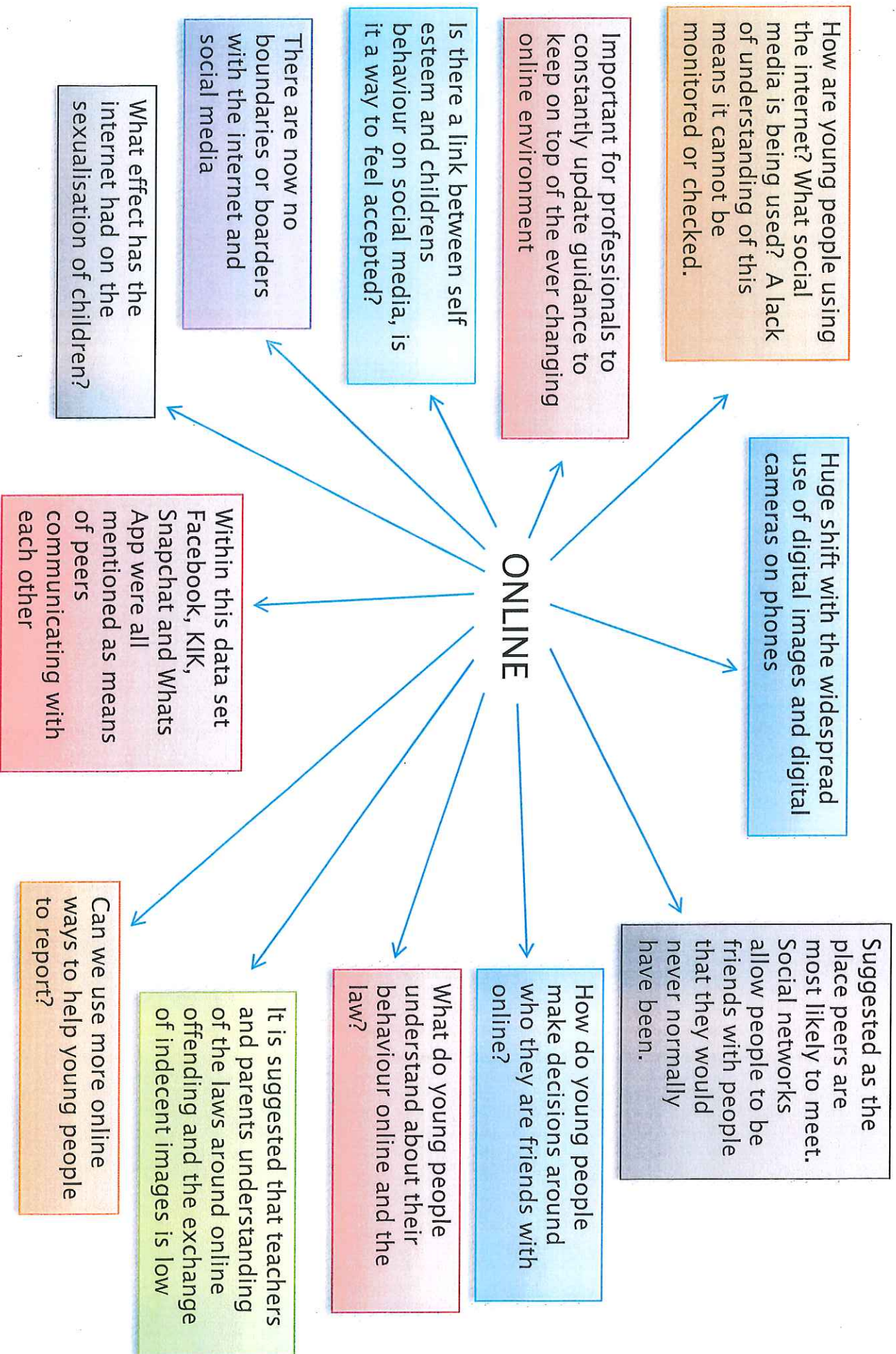
Who else is in the house at the same time that this is happening? Is it a chaotic household or an unhealthy home environment? Consideration should be given to consultation with parents / carers or awareness raising amongst parents as to the possible danger of sexual offences amongst peers within the home environment. How receptive would parents / carers be to messages?

As with the findings from the CSE OCLP most offences are likely to take place in a residential setting. This is split quite evenly between the victims address and the offenders address.

Having said that, Police crime information focuses primarily on the time of the offence, therefore some of the detail around the relationship between offender and victim and the lead up to any offence is missing and other locations difficult to establish. This is reflected regionally.

# Agenda Item 8

Due to how this data set was produced it focused primarily on offline offending, however it is widely accepted that Peer on Peer online offending happens frequently, that online connections can lead to offline offending and that there are information gaps around how peers communicate with each other online.



## The school environment

In 48% of the crimes in this data set the victim and offender were recorded as knowing each other from school. If you exclude the crimes where this information was not recorded, it increases to 67%.

13% of the crimes were recorded as taking place at school

In 21% of these crimes the school played some role in the disclosure of the offence, either victim directly to school staff, parents to school staff or other peers of the victim to school staff

Anecdotally school staff in Devon are reporting more concerns with Peer on Peer CSA/E and are asking more questions about it. It's believed the issues relating to it are less well known amongst school staff

Schools are a key environment for engaging, educating and raising awareness of issues around Peer or Peer CSA/E and elements of this should begin at Primary school level given the age distribution of victims

Schools and teachers are likely to have a better knowledge and links to a young persons family compared to other agencies

There are very good practice documents provided to Devon schools in relation to Personal, Social and Health Education (PSHE) and Social and Emotional aspects of learning (SEAL) from Babcock LDP. These are 'Combining PSHE and SEAL in the primary school, using the every Child Matters Framework'<sup>7</sup> which is used in 95% of Devon Primary schools and 'A whole School Approach to Addressing Child Sexual Exploitation'<sup>8</sup>

Leadership and management are key to there being good PSHE and Sex and Relationship Education within Schools.

One off events or inputs around CSE, although can be informative, are not seen as good practice as the impact is difficult to monitor and assess

Threats to this area include the announcement in February that PSHE will not be made compulsory in all schools despite strong campaigning from various groups

More and more secondary schools within Devon becoming academies mean less direction around what and how PSHE is delivered can come centrally from Babcock LDP

Cuts in neighbourhood policing have meant there are less opportunities for Police to work with schools. Finding the right services to fill this gap or being smarter at identifying which schools would benefit most from input or support would be helpful

It is important to keep highlighting what resources already exist. The importance of PSHE. The need to update programmes and policies so they reflect current patterns and trends such as the difference in the Peer on Peer CSA/E type and the advances in technology that influences this offending

# Agenda Item 8

In September 2015, a BBC News report based on freedom of information requests revealed there were 5,500 sexual offences recorded in UK Schools between 2011 and 2014

In April 2016 it has been announced that an inquiry into the scale of sexual harassment and sexual violence in England's schools is to take place. Research for the committee suggests sexualised behaviour among pupils is a social norm<sup>9</sup>

Pressure and Peer pressure featured quite highly amongst this data set. Professionals also commented on young peoples expectations around sex and relationships, their understanding of what is and isn't ok from both victim and offender, all play a significant role in this type of CSA/E. With children's friendship groups being so intrinsically linked to school and the time they spend there, how this plays out within the school environment would be crucial to our learning around this type of CSA/E

If attitudes towards sex and relationships and peer pressure play a part in this type of CSA/E, what work is done or could be done with the peer group of victims and offenders after an incident to identify and address this to prevent further incidents? What processes are in place to address the wider context of this offending type during and after an incident is reported?

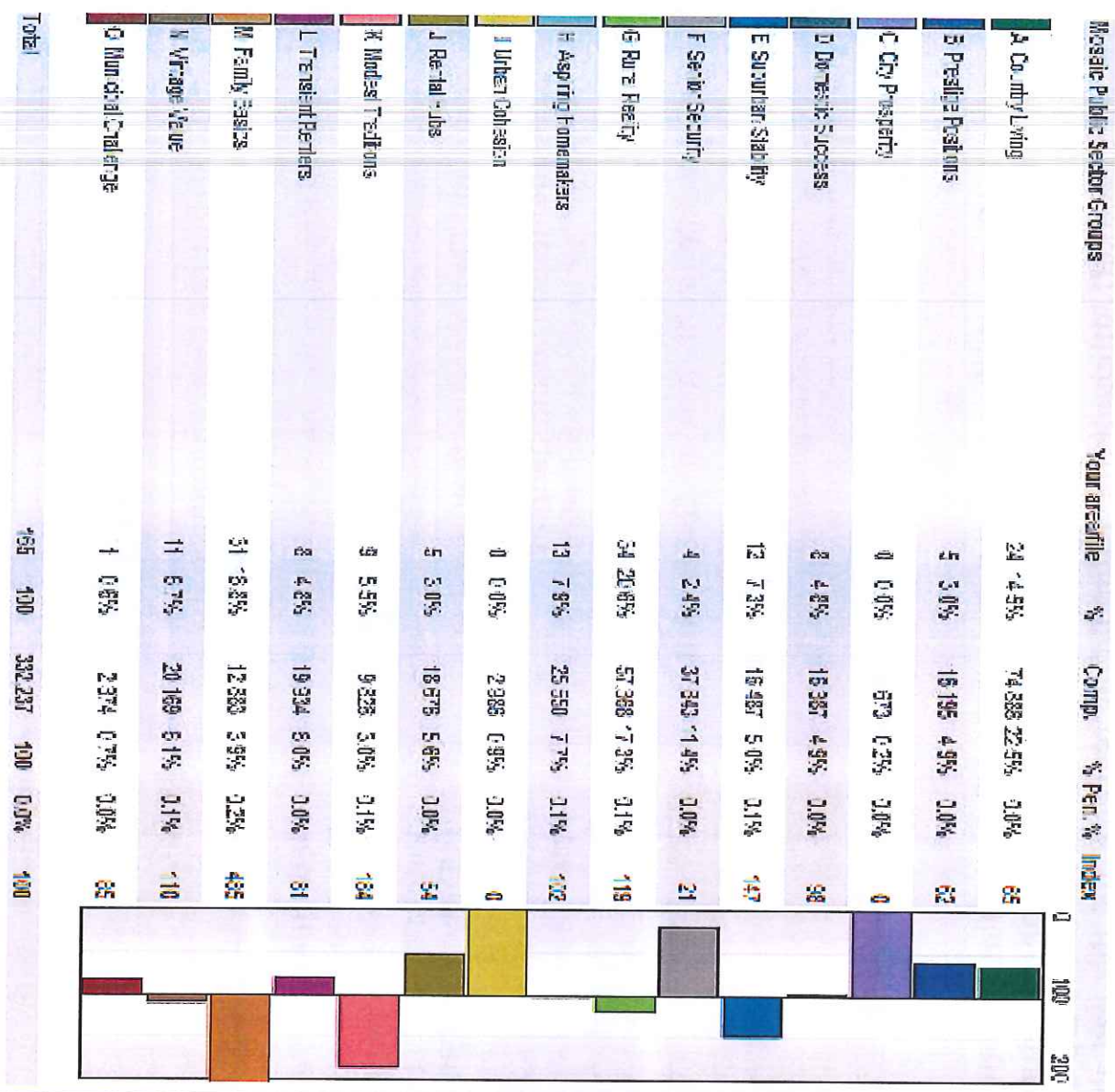
These questions echo current research into the contextual nature of peer on peer abuse. In Carlene Firmins thesis on the safeguarding implications of contextualising abuse between young people<sup>10</sup>, it was found that most schools wanted support to manage the behaviour of individual students, rather than to alter the school environment itself. It also highlighted how the abuse between young people in school could not be looked at in isolation and the interplay between what students were experiencing at home and elsewhere needed to be considered.

With there being a very recent national focus on sexual harassment and violence within the school environment and this data showing the significant role schools play, understanding Devon's childrens experience of the issue could significantly help improve policy and practice in this area.

Victim, a 16 year old female and the suspect, a 16 year old male both attended the same school. During an English lesson the offender left the classroom to go to the toilet, on his return he stopped directly behind the victim, reached under her left arm and grabbed her left breast over the top of her shirt and held it for 3-4 seconds, giggled and skipped off. Although the victim did not perceive that this had a sexual motive, she was highly embarrassed by the incident and had not given the offender permission to touch her in anyway. This incident appeared to be part of an ongoing bullying issue that the school was dealing with. The victim did not wish to take the report any further in terms of a Police investigation as she was just about to start her GCSE exams and did not want the additional stress, there were also no witnesses to the incident. The school gave the offender a warning and he was subsequently excluded on connected matters. The Police spoke to the offender and strong words of advice were given.

# Is there a particular household type at risk?

Data used for this was a combination of victim and offender home addresses. The data sample was therefore 165, Experian recommends a minimum of 300 to use the types with any confidence so this is being shown at just group level. The small data sample should still be taken into consideration when looking at groups, this is a possible indicator to explore further and to show what could be done.

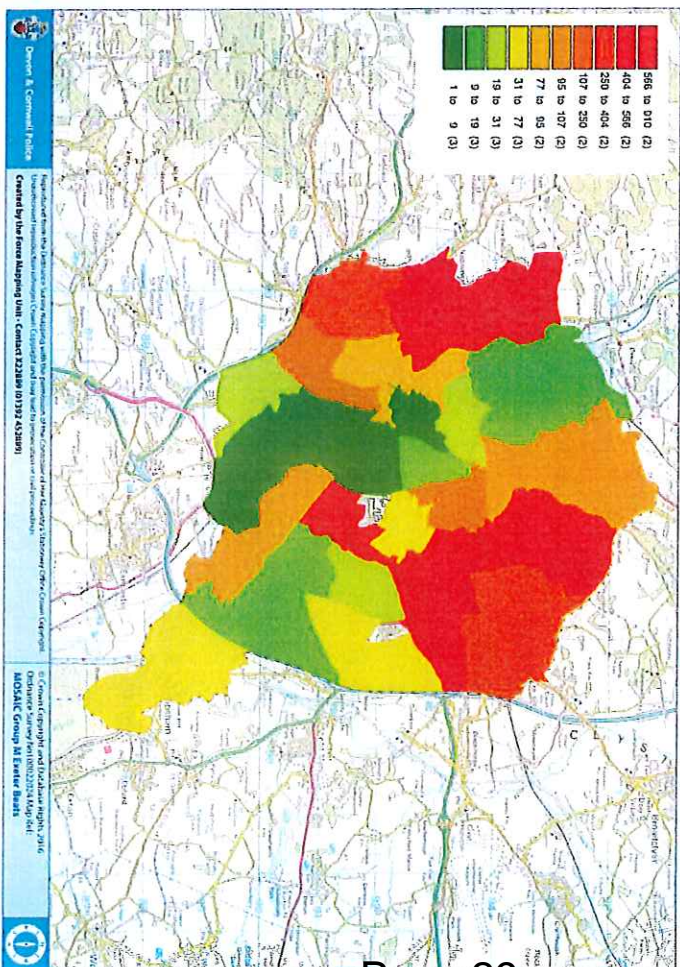
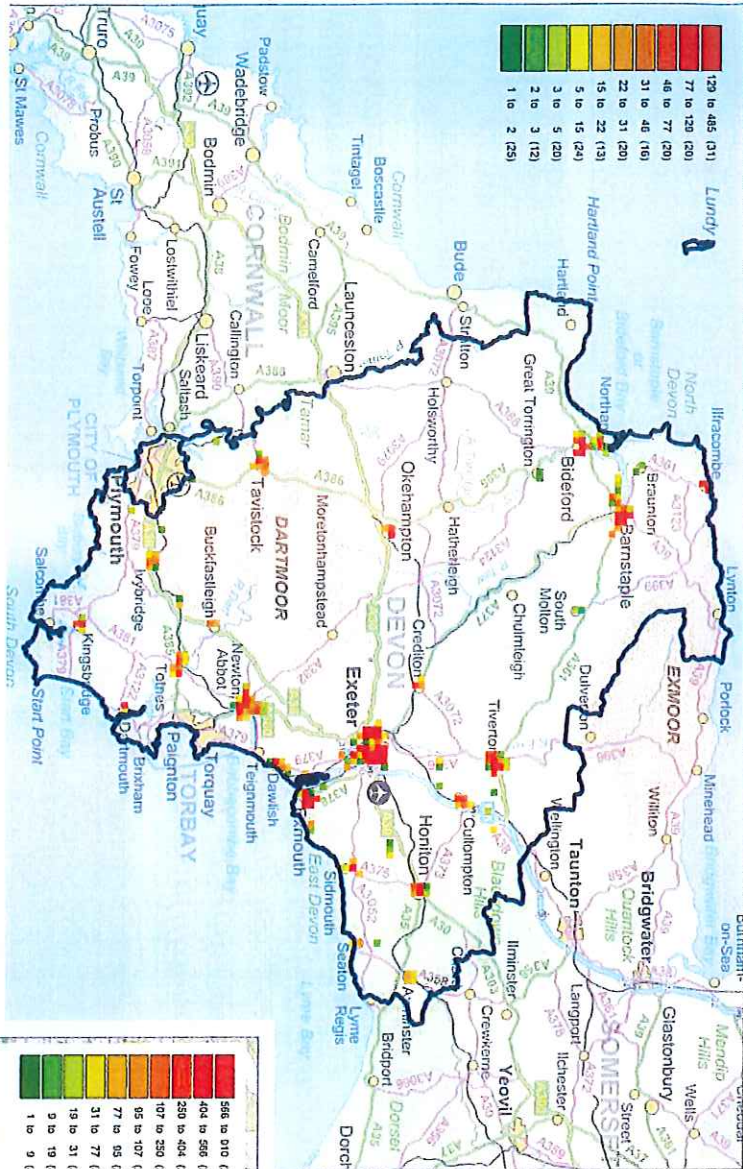
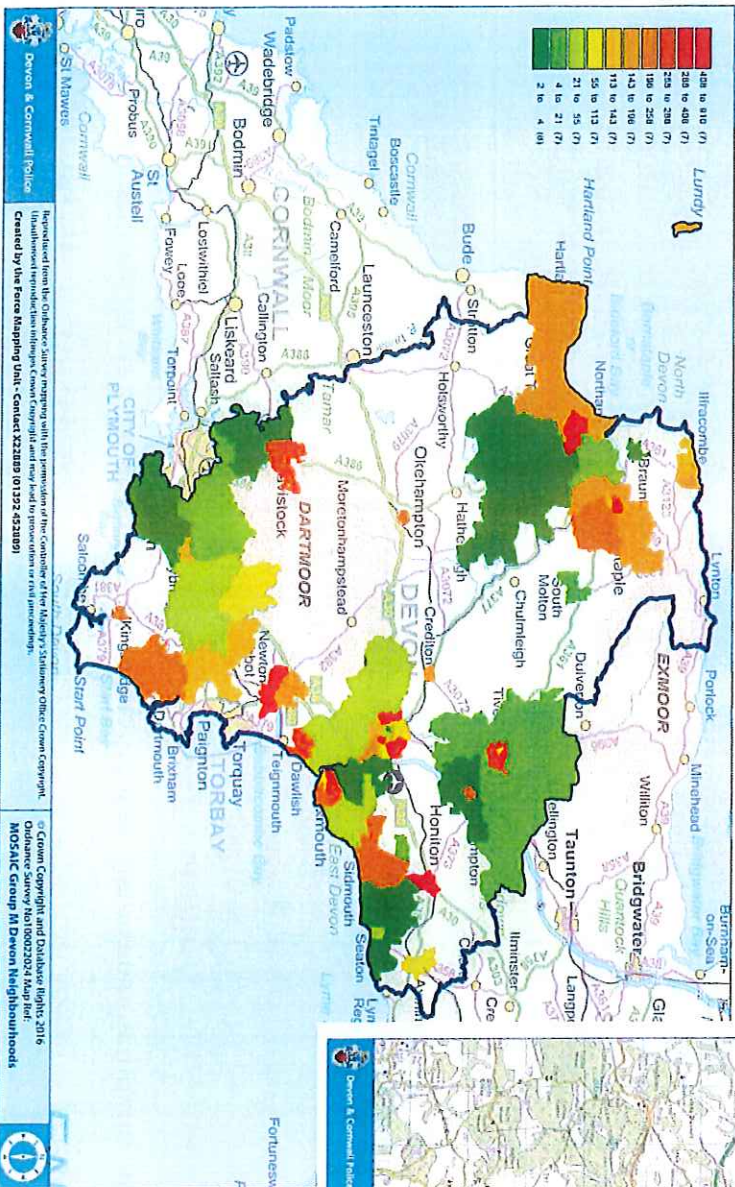


MOSAIC is a cross channel classification system that synthesizes over 850 million pieces of information to segment households into 15 groups and 66 types. This can then be used to identify where your 'customers' may be and how best to engage with them <sup>11</sup>

The most frequently occurring groups were Rural Reality, Family Basics and Country Living but two of these groups are also the most prevalent household within Devon. The interesting group is group M, Family Basics. It accounted for 18.8% of the data sample but this household group makes up only 3.9% of the households in Devon, it's quite over represented in this crime type

The Family Basics group is described as families with children who have limited budgets and can struggle to make ends meet. Their homes are low cost and often found in areas with fewer employment options. They are typically aged in their 30s and 40s and have school age children. They send large amounts of texts and are keen social networkers. This groups' fear of being the victim of crime is higher than the norm and they are the group with the least confidence in the police and in the Criminal Justice System <sup>11</sup>





These maps represent where other group M households are within Devon. Using choropleth maps you can see which neighbourhood areas have the highest amount and within a more localised area, which beat codes have the most. You could then focus on these areas, or schools and health centres etc within these areas for communication and preventative efforts.

Expanding this work to look at a larger sample of sexual offence crime data or using it to look at CSE submissions would allow us to see if this result is replicated and to have more confidence in the results

## Situation / Context

The main data set for this piece of work included offences that would fit into the abuse definition as well as exploitation.

The link between CSE and gift giving is not evident amongst this data set of Peer on Peer sexual offending. There were no crimes where any tangible exchange of any items e.g. food, alcohol, money could be seen

In 49% of these crimes it was difficult to establish what, if any, extenuating factors played a part in the commission of the offence. There were many reasons for this, including recording issues, however some were due to the victim not believing they were a victim

Victims appeared involved in crimes without having to be 'groomed' into them. *I sent him a picture of myself in my underwear as I felt a bit sorry for him and it was no different than someone seeing me in my swimming costume.*

In 17% of these crimes the victim and offender were at some point in a girlfriend / boyfriend relationship

In 28% of these crimes the victim and offender would describe each other as friends

In 32% of these crimes the victim and offender could be described as associates, at school together but not in the same friendship group, friends of friends, known through family connections

In only 8% of these crimes did alcohol and drugs appear to play any part in the offence

Where an extenuating factor could be identified there were 3 main areas that were seen. Some level of violence or force, threats, bullying and intimidating behaviour and pressure / peer pressure

*Victim was girlfriend to 16 year old suspect, at some point during the day suspect has pressured victim into having sex with him and she ended up complying*

*Offender said to victim that if she touched his willy she would be popular and cool*

Looking at the intelligence picture around a victim or offender on top of what's recorded in a crime could add to the context of the offending

Professional comment in this area would suggest that there are issues amongst the expectations of peers as to what is right and wrong.

*Victim stated she gave the offender oral sex because she thought it was expected*

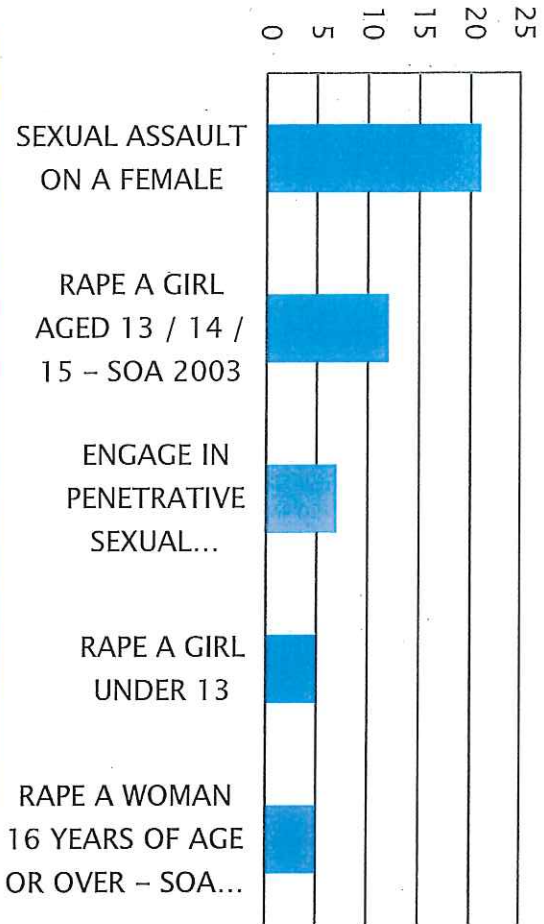
Victims not knowing they are a victim and equally offenders not knowing that what they are doing is wrong is evident in this data set

It is believed children are sexualised at a younger age due to social media and celebrity culture and there are more expectations around being in a relationship. Are children aspiring to be more grown up?

As suggested in the OCLP, particularly with Peer on Peer CSA/E an evaluation of children's understanding of consent, exploitation and coercion would be key to answering some of these questions and being able to target and evaluate the education and awareness raising that's completed around this specific type of offending.

It's important to remember when looking at crime types that the data sample was largely drawn from the FIC exploitation sample, therefore an element of 'screening' out crimes had already taken place.

## Top 5 Offence Types

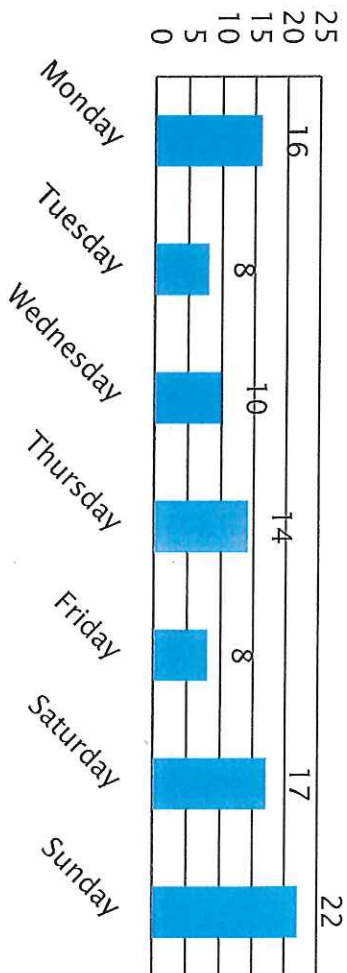


Sexual assault on a female is also the top occurring offence in the sample of crimes where the offender was over 18. After that the next 4 are different. Offender 18 or over engage in penetrative sexual activity with a girl 13 to 15 is second and Rape a woman 16 years of age or over is third.

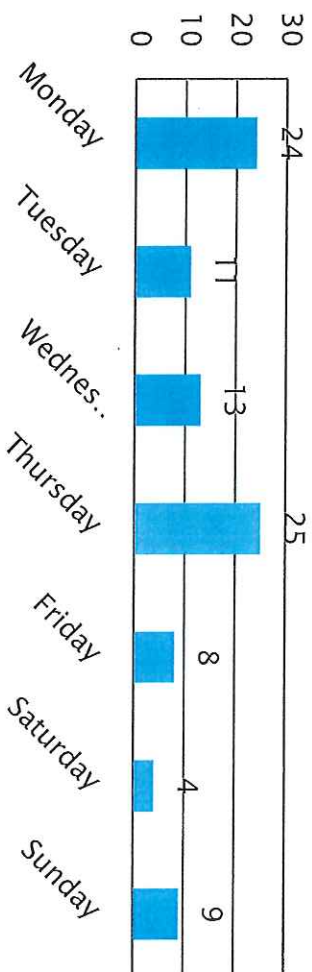
The time offences were committed are not recorded in a way that can be researched and are often not recalled accurately by those involved.

A larger data set over a longer period of time could be looked at for trends linked to seasons or school holidays

## Days of the week offences were committed



## Days of the week offences were reported



Using a much bigger data sample would make it easier to draw a conclusion around trends regarding days of the week that offences are most likely to take place. If it remains higher on the weekend this could change the messages that are given around safety or the targeting of resources

Is there a possible barrier to reporting on the weekend? Do young people wait until they are at school?

## Criminal Justice outcomes, Police investigations and Safeguarding considerations

80% of the crimes within this data set were not proceeded with, professional opinion would suggest that was a proportional response to the volume and nature of offences seen

There were many examples of good safeguarding outcomes

*The suspect has been referred to YISP for early intervention in a hope and expectation that he can be taught sexual awareness and appropriateness in order to prevent an escalation of behaviour, this is more in the public interest than a prosecution whilst balancing the victims wishes of course.*

There appeared to be a particular problem with victims not wanting to proceed, not wanting to participate in ABE, or family not wanting the victim to proceed

*Father of victim 'Any outcome the Police may achieve is far outweighed by the fallout from her peers, with whom she is just starting to fit in and that would be detrimental to her emotional and mental well being.'*

*Victim does not want to make a formal allegation against the suspect or for the police to pursue an investigation as she doesn't want to become the centre of attention at school or amongst her friends and wishes to concentrate on her school work and move forward with her life*

*Victim 'just wanted to get back to normal'*

What services or options are available in Devon to work with those displaying lower level sexually harmful behaviour? Would it be useful for Police Officers and decision makers to have a menu of options for interventions for when a criminal justice outcome is not going to be possible or not in the public interest but worrying attitudes or behaviour still need to be addressed?

What are children's understanding of the criminal justice process and what will happen after a disclosure? It is suggested that young people think that reporting to the Police will be the only thing they have to do, they don't realise there will be a whole process afterwards and this can spook them, there are also issues with events being too traumatic to keep re-telling

Is it possible to have targeted group work for vulnerable young people?

Is a Police officer the right person to make initial contact with the victim?

Who would be available to complete targeted one to one work with people that have come to Police attention?

# Agenda Item 8

Decision making on these offences is subjective and it's a decision that could change a young persons life forever

Decisions need to be proportional and in the best interest of those involved, not criminalising young people when it's not necessary

Some offenders are troubled young people who need supporting through the situation

In some cases of Peer on Peer sexual offending it's difficult to know who was the offender and who was the victim

If a complaint is withdrawn yet a clear disclosure has been made and there is supporting evidence the investigation would be proceeded with. Decisions are subjective and perhaps a management view on dealing with complaint withdrawals amongst Peer on Peer offending could be useful, could policies around domestic offences help within this arena?

There is still some confusion within the Police as to who deals with CSE cases, they can be allocated to a variety of different people and teams

The knowledge of safeguarding procedures outside of the PPU is still limited, this can sometimes lead to issues when different departments are leading on different elements of the same operation

Lack of staff trained in the triage of computers and other devices can lead to long wait times for investigations. With young people using more apps and online forums expertise in this area is key

CSE cases can be resource intensive, there is a feeling that currently the Police are only able to act on live acute cases

Can many of the issues mentioned on the last two pages be addressed with a multi-agency CSE team? Or ever closer working relationships with partners? This would provide a consistent response to CSE crimes, allow the most appropriate partner to work with those involved at the most appropriate times and allow for ease of information sharing

In Carlene Firmins research, as mentioned earlier<sup>10</sup>, she points out the need for identification, assessment and intervention to broaden to sufficiently respond to peer on peer abuse. Multi agency working was used to manage investigations and individuals rather than to address the fields, e.g. School, home, to which the abuse was associated and that Police investigations failed to recognise the significance of social norms and behaviours within peer groups, schools and neighbourhoods.

Rather than multi-agency working around an individual practice needs to shift to multi agency working around a case. An example used was that rather than a complainant being moved to a different school, professional could work with that school to challenge any harmful, gendered school cultures to improve the pre-existing school environment. She raises the need for LSCBs to consider their strategic oversight of these social environments and the need for collecting data around the different fields these cases are associated to

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5. Joint Strategic Needs Assessment Devon, 2015
6. Unprotected, Overprotected: meeting the needs of young people with learning disabilities who experience, or are at risk of sexual exploitation', was commissioned by Comic Relief, and undertaken by Barnardo's, The Children's Society, BILD, Paradigm Research and Coventry University.
7. Dr Annette Lyons and Mark Davis, Combining PSHE and SEAL in the primary school, using the Every Child Matters Framework
8. Dr Annette Lyons, A Whole School Approach to Addressing Child Sexual Exploitation
9. <http://www.bbc.co.uk/news/education-36071502>
10. Firmin, C.E. (2015) 'Peer on Peer Abuse: Safeguarding Implications of Contextualising Abuse between Young people within Social Fields'.
11. <http://www.experian.co.uk/marketing-services/products/mosaic-uk.html>

## Acknowledgements

Jenny Harris, Social Worker CSE and Missing  
DS Vicky Lewandowski, MAPPA Team Exeter, East & Mid Devon Public Protection Unit  
DS Zoe Taylor, Child Protection, Public Protection Unit  
Dr Annette Lyons, Advisor for personal Social Health Education & Citizenship Babcock LDP  
Devon and Cornwall Police Corporate Communications Unit

## Internal Audit Monitoring Report 2015/16 Report of the County Treasurer

Please note that the following recommendations are subject to confirmation by the Committee before taking effect.

The attached report summarises internal audit activity with People and sets out the assurance opinions given on the reviews undertaken during 2015/16.

**Recommendation:** members of the committee are requested to consider:

- the opinion statement within this report;
- the completion of audit work against the plan;
- the overall performance and customer satisfaction on audit delivery;
- consider how the assurances given support the work of the committee for assurance purposes.

Mary Davis

Electoral Divisions: All  
Local Government Act 1972

List of Background Papers

Contact for Enquiries: Robert Hutchins  
Tel No: (01392) 382437 Larkbeare House

| <u>Background Paper</u> | <u>Date</u> | <u>File Ref</u> |
|-------------------------|-------------|-----------------|
| Nil                     |             |                 |

There are no equality issues associated with this report





Internal Audit

People

Annual Report 2015/16

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Devon County Council

May 2016  
Official



Auditing for achievement

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## Devon Audit Partnership

The Devon Audit Partnership has been formed under a joint committee arrangement comprising of Plymouth, Torbay and Devon councils. We aim to be recognised as a high quality internal audit service in the public sector. We work with our partners by providing a professional internal audit service that will assist them in meeting their challenges, managing their risks and achieving their goals. In carrying out our work we are required to comply with the Public Sector Internal Audit Standards along with other best practice and professional standards.

The Partnership is committed to providing high quality, professional customer services to all; if you have any comments or suggestions on our service, processes or standards, the Head of Partnership would be pleased to receive them at [robert.hutchins@devonaudit.gov.uk](mailto:robert.hutchins@devonaudit.gov.uk).

## Confidentiality and Disclosure Clause

This report is protectively marked in accordance with the National Protective Marking Scheme. It is accepted that issues raised may well need to be discussed with other officers within the Council, the report itself should only be copied/circulated/disclosed to anyone outside of the organisation in line with the organisation's disclosure policies.

This report is prepared for the organisation's use. We can take no responsibility to any third party for any reliance they might place upon it.

## Introduction

This report provides a summary of the performance against the internal audit plan for the 2015/16 financial year, highlighting the key areas of work undertaken and summarising our main findings and recommendations aimed at improving controls.

The key objectives of the Devon Audit Partnership (DAP) have been to provide assurance to the Director on the adequacy, security and effectiveness of the systems and controls operating within the People service area and to provide advice and assurance to managers and staff.

The Internal Audit plan for 2015/16 was presented to and approved by the Audit Committee in March 2015. The following report and appendices set out the current position; reviewing work undertaken within 2015/16 and providing an opinion on the overall adequacy and effectiveness of the service area's internal control environment. The Public Sector Internal Audit Standards require the Head of Internal Audit to provide a report providing an opinion that can be used by the organisation to inform its governance statement. This report, when consolidated with those of other service areas, provides a position statement at year end with regard that opinion.

The level of risk associated with each of the areas in Appendix A has been determined either from the Local Authority's Strategic / Operational Risk Register (LARR), or the Audit Needs Assessment (ANA). Where the audit was undertaken at the request of client, it has not been risk assessed. Assurance and recommendations should be considered in light of these risk levels and the impact this has on achievement of corporate / service goals.

### Expectations of the Director and Senior Management from this annual report

The Director and Senior Management are requested to consider:

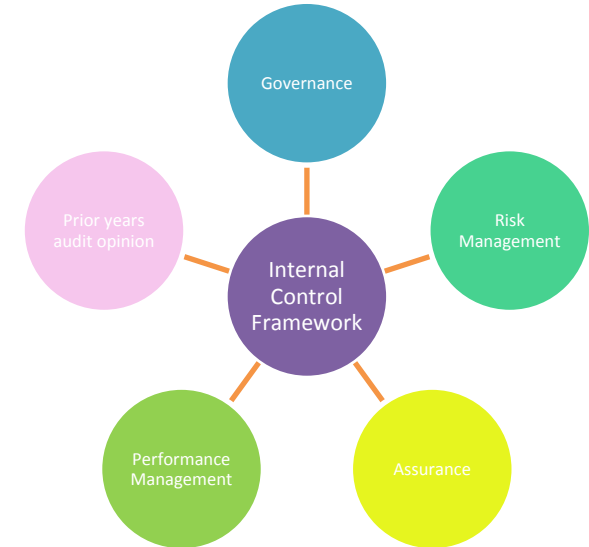
- the opinion statement within this report;
- the completion of audit work against the plan;
- the scope and opportunity of audit to complete the audit work;
- progress impact against strategic aims;
- audit findings provided;
- the overall performance and customer satisfaction on audit delivery.

In review of the above Senior Management are required to consider the assurance provided alongside that of the Corporate Risk Management and satisfy themselves from this assurance that the internal control framework continues to be maintained at an adequate level to mitigate risks and inform the Executive for governance requirements.

## Audit Opinion

**Overall, and based on work performed during 2015/16 and that of our experience from previous years audit, Internal Audit is able to provide significant assurance that adequate controls are in place to control operations in the People service area.**

**This statement of opinion is underpinned by our consideration of:**



Where weaknesses have been identified management have agreed these findings and have either agreed the recommendations or accepted the associated risks. Where management actions have been agreed, as appropriate we shall undertake follow up work to ensure that the identified risks have been mitigated

*(This opinion statement will provide Senior Management and Members with an indication of the direction of travel for their consideration for the Annual Governance Statement).*

The Strategic Director and senior management have been provided with details of Internal Audit's opinion on each audit review carried out in 2015/16. All audit reports include an action plan which identifies responsible officers, and target dates, to address control issues identified during a review. If significant weaknesses have been identified in specific areas, these will need to be considered by the Authority when preparing its Annual Governance Statement for inclusion within the 2015/16 Statement of Accounts.

|                       |                                                                                                                                                                                                                                                                                                                           |
|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Assurance        | Risk management arrangements are properly established, effective and fully embedded, aligned to the risk appetite of the organisation. The systems and control framework mitigate exposure to risks identified & are being consistently applied in the areas reviewed.                                                    |
| Significant Assurance | Risk management and the system of internal control are generally sound and designed to meet the organisation's objectives. However, some weaknesses in design and / or inconsistent application of controls do not mitigate all risks identified, putting the achievement of particular objectives at risk.               |
| Limited Assurance     | Inadequate risk management arrangements and weaknesses in design, and / or inconsistent application of controls put the achievement of the organisation's objectives at risk in a number of areas reviewed.                                                                                                               |
| No Assurance          | Risks are not mitigated and weaknesses in control, and / or consistent non-compliance with controls could result / has resulted in failure to achieve the organisation's objectives in the areas reviewed, to the extent that the resources of the Council may be at risk, and the ability to deliver the services may be |

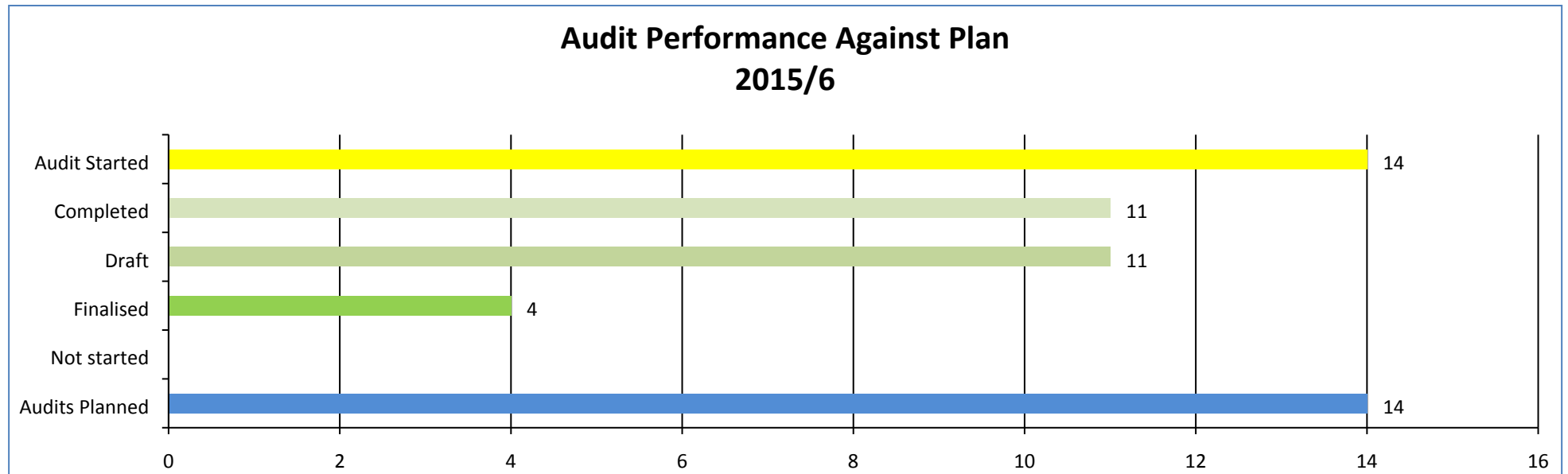
|  |                     |
|--|---------------------|
|  | adversely affected. |
|--|---------------------|

## Performance against Plan

This report compares the work carried out with the work that was planned through risk assessment, presents a summary of the audit work undertaken, includes an opinion on the adequacy and effectiveness of the People service area's internal control environment and summarises the performance of the Internal Audit function against its performance measures and other criteria. The bar chart right shows delivery of the plan against target. Progress during the year also included completion of work from 2014/15 necessarily spanning year end, undertaking follow up audits on areas where significant findings were made in the previous year and reporting to committee thereon, and progressing assignments in accordance with timescales agreed with management.

A table showing the status of planned audits and their associated reported executive summaries is contained at Appendix 1. In addition to this year's planned work, consultancy and advice continues to be provided where required.

Progress against plan was as expected. Changes were made to plan at the start of the year post Audit Committee approval and also within the final six months of the financial year. As in 2014/15, work undertaken has continued to involve responding to Safeguarding Alerts concerning allegations of financial abuse against vulnerable adults; such work does significantly impact upon the agreed plan.



## Progress Impact Assessment

The audit fieldwork completed during this financial year provides assurance that identified risks are being minimised or mitigated where appropriate.

At the commencement of the financial year an audit plan is agreed which has to be both proactive and reactive to changes as they occur and as such Audit has to be flexible responding to management requests. Work envisaged to be completed at the start of the financial year may not therefore actually have been completed by financial year end.

Work upon agreed audits within the 2015/6 audit plan was significantly impacted upon by a major lengthy and complex piece of work undertaken during the year which related to the undertaking and completion of a second commissioned review upon a further sample of service users receiving domiciliary care services from a care provider previously reviewed in 2014/15. The findings and conclusions within the report produced have been the subject of a number of meetings with the directors of the company and their consultant. Review on site of prime documents relating to the care of individual service users fully substantiated findings detailed within the audit report.

Our work in connection with various safeguarding alerts provides opportunity for DAP to give independent objective assurance regarding relevant documentation and financial records reviewed and assists the safeguarding process in scenarios of allegations of financial abuse against vulnerable people.

A protocol has now been agreed whereby rather than individual teams contacting DAP directly and asking for assistance with safeguarding scenarios a request is submitted to the Head of Adult Social Care who then makes the decision as to whether to authorise audit involvement.

Those audit reviews not undertaken during 2015/16 will be subject to audit in future years if required.

## Value Added

Our internal audit activity has added value to the organisation and its stakeholders by:

- providing objective and relevant assurance;
- contributing to the effectiveness and efficiency of the governance, risk management and internal control processes.

Our work has identified specific added value benefits in key areas and in mitigating key risks. Notable benefits have been reported in the following area:

- Providing assurance during the evaluation and moderation of the Living Well at Home tender submissions
- Reviewing the tender evaluation process used in the original tendering of the DILIS contract, which resulted in a number of recommendations for improvements;
- Providing advice and support to the project responsible for the re-running of the DILIS procurement exercise.

Senior Management has found our engagement, support as a “trusted advisor” effective and constructive in these significantly changing times.

## Executive Summary - Audit Findings

In our opinion, and based upon our audit work completed we are able to report that internal controls continue to operate effectively and where recommendations for improvements have been made, action plans have been agreed with management.

Any concerns identified through our work leading to recommendations for improvement are responded to positively by management.

Appendix 1 details the assurance opinions for individual audits. Definitions of the assurance opinion ratings are given in Appendix 2.

Findings from work in connection with our involvement in the various safeguarding alerts in which Audit has been involved are being collated and will shortly be provided in the form a report to management.

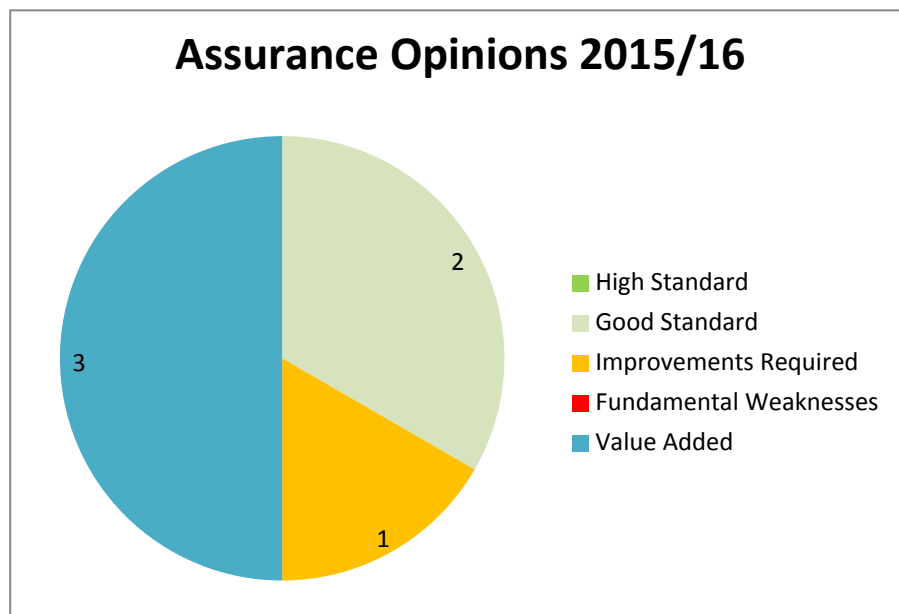
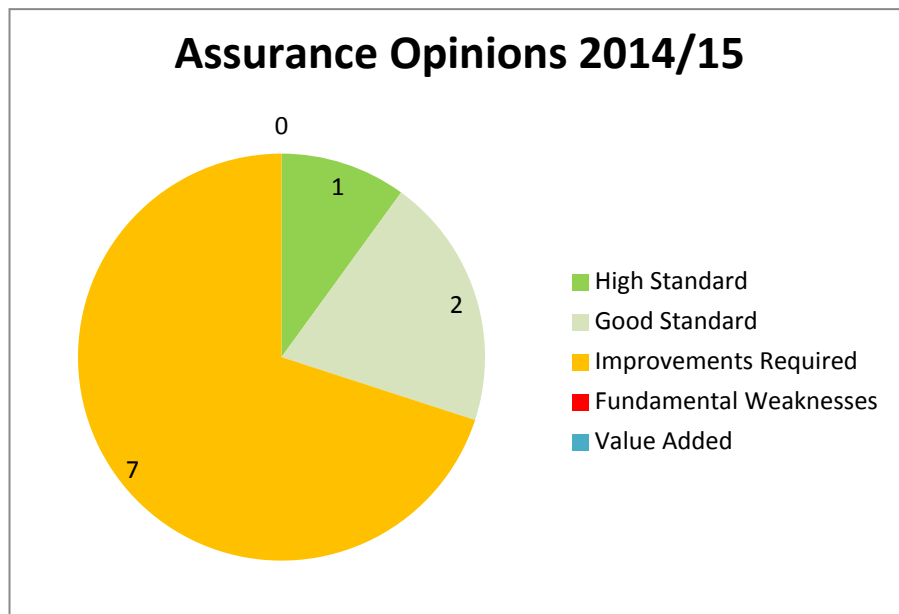
## Key Risks / Issues

DAP has been involved both within the tender preparation for the five year £200m 'Living Well at Home' personal care contract and also with regard subsequently providing assurance during evaluation of the tender bids submitted back to the authority. We found the evaluation and moderation of the bids was conducted in an appropriate manner and had been accurately recorded.

We continue to provide support and challenge during re-procurement of the DILIS contract through comment on price evaluation models and service specification.

The Virtual School report identified PEPs being completed for all Children in Care up to 16 years of age but little or no system in place for those CIC over 16 years of age. The Virtual Head stated this was a task in hand to ensure a continuity of care or receipt of support required.

Work undertaken regarding a care provider the subject of a safeguarding alert has been lengthy and consumed a large amount of audit resource across a large part of the financial year. Work has been included in the 2016/17 plan to review such scenarios are negated in the new personal care contracts shortly being introduced.





## Fraud Prevention and Detection

### Fraud Prevention and Detection

Counter-fraud arrangements are a high priority for the Council and assist in the protection of public funds and accountability. Work has continued in 2015/16 reviewing the various data sets involved with the National Fraud Initiative (NFI) which includes Direct Payments and Private Supported Care Home Residents. Most data matches have been reviewed but a small number have yet to be completed, relating mainly to Blue Badges and Direct Payments. A meeting has recently taken place with the appropriate officers to move forward the review of the Direct Payment data matches. There are a small number of queries outstanding on some of the other reports but these are not significant and we still await the results of investigations by relevant teams across the Council.

**Irregularities** - During 2015/16, Internal Audit have carried out, or assisted in a total of 12 irregularity investigations within the service area. Analysis of the types of investigation and the number undertaken shows the following:-

Page 45

| Issue                  | Number |
|------------------------|--------|
| Financial Irregularity | 6      |
| Employee Conduct       | 2      |
| IT Misuse              | 2      |
| Tenders and Contracts  | 2      |

Following on from previous investigation work, Internal Audit were requested to examine further alleged overcharging by a Community Care provider. This has identified over £20,000 of potential overcharges and currently no more clients are being allocated to the provider.

With regard to the two IT-misuse investigations, concerns were raised that an employee was sending and receiving work related emails to and from their personal email account we investigated and provided HR with evidence in relation to this. The second investigation concerned excessive telephone call charges being incurred at an establishment where it is suspected that the telephone line was hacked. The office is now closed so the issue will not reoccur.

DAP has assisted with two employee conduct investigations. The first related to preferential treatment of certain members of staff, the second related to a complaint by a job applicant who alleged inappropriate sharing of personal information during the recruitment process. We did not identify any evidence to support the allegation.

A number of alleged financial irregularities were reported to DAP during the year including a third party employee allegedly booking a course in the name of the County Council. In addition, DAP learned of banking going missing from Learn Devon and were able to provide support to the Investigating Officer. DAP also were made aware of an overpayment of salary to an employee who left following the closure of an establishment. It is understood that the debt is being repaid.

## Customer Value

### Customer Service Excellence

DAP maintains accreditation by G4S Assessment Services of the CSE Standard during the year.

During the period we issued client survey forms with our final reports. The results of the surveys returned are, although low in number, very good and again are very positive. The overall result is very pleasing, with 99% being "satisfied" or better across our services. It is very pleasing to report that our clients continue to rate the overall usefulness of the audit and the helpfulness of our auditors highly.

Recent feedback received across our partners includes

- 'face to face meeting was very good',
- 'useful to show the Board',
- 'a useful check for us on our processes'
- 'the planning and conduct of the report was informative and allowed for some self-reflection on processes',
- 'useful to confirm some areas for improvement and prompted us to progress action in them', and
- your input has helped 'sell' the new system.

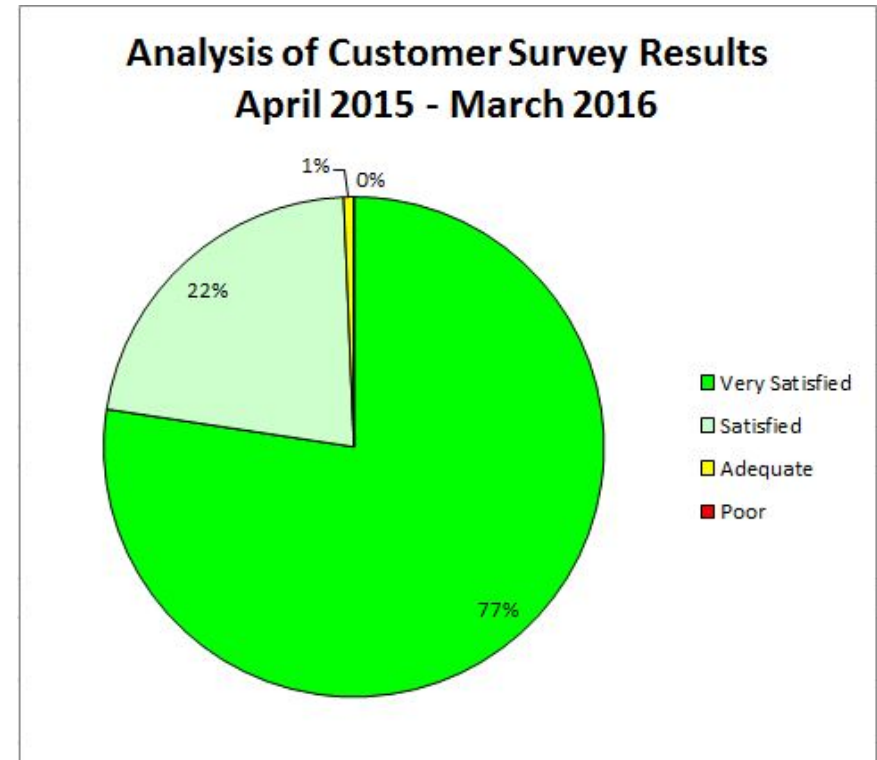
### Inherent Limitations

The opinions contained within this report are based on our examination of restricted samples of transactions / records and our discussions with officers responsible for the processes reviewed.

### Acknowledgements

We would like to express our thanks and appreciation to all those who provided support and assistance during the course of the audits.

**Robert Hutchins**  
**Head of Audit Partnership**






## Appendix 1 - Summary of audit reports and findings for 2015/16



### Risk Assessment Key


LARR - Local Authority Risk Register score Impact x Likelihood = Total & Level  
 ANA - Audit Needs Assessment risk level as agreed with Client Senior Management  
 Client Request - additional audit at request of Client Senior Management; no risk assessment information available

### Assurance Progress Key

Green - action plan agreed with client for delivery over an appropriate timescale;  
 Amber - agreement of action plan delayed or we are aware progress is hindered;  
 Red - action plan not agreed or we are aware progress on key risks is not being made.  
 \* report recently issued, assurance progress is of managers feedback at debrief meeting.

| People                                                                                                                   |                                          |              |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                       |
|--------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| Risk Area / Audit Entity                                                                                                 | Risk Assessment / Audit Needs Assessment | Audit Report |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Assurance Progress RAG Score                                                          |
|                                                                                                                          |                                          | Status       | Assurance Opinion     | Executive Summary                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                       |
| Charging for Care Team (Corporate Services) / Care Management (People) - Client Contributions - Non Residential Services | ANA - High                               |              | Improvements Required | Findings reported in September follow up reviews. Action plan agreed.<br><br>Close liaison needed between Care management staff and the Charging for Care Team to ensure good progress continues to be made.<br><br>2016/17 DCC Audit plan includes audit of 'Finance - Non Residential Financial Assessments'.                                                                                                                                               |    |
| Personal Care Contract 'Living Well at Home'                                                                             | ANA - High<br>Client Request             | Complete     | Value Added           | Audit involvement has been requested to support key / significant elements of the tender. This includes <ul style="list-style-type: none"> <li>- 'needs analysis' and forecast of volumes and types of business (personal care, rapid response, learning disabilities);</li> <li>- financial evaluation and</li> <li>- quality of supply</li> </ul> Further support will also be provided around the tender evaluation process and final award recommendation |    |
| Personal Care Contract 'Living Well at Home'<br><br>Tender Evaluation Process / Final Award Recommendation               | ANA - High<br>Client Request             | Complete     | Value Added           | Internal Audit was asked to provide assurance during the evaluation of the Living Well at Home tender bids. The evaluation and moderation of bids was conducted in an appropriate manner and recorded accurately. We provided guidance on minor improvements to the recording of scores and evaluator comments.                                                                                                                                               |  |

| People                                      |                                          |              |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                       |
|---------------------------------------------|------------------------------------------|--------------|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| Risk Area / Audit Entity                    | Risk Assessment / Audit Needs Assessment | Audit Report |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Assurance Progress RAG Score                                                          |
|                                             |                                          | Status       | Assurance Opinion | Executive Summary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                       |
| DAPH / DASH / SHAD                          | Client Request                           | Ongoing      | Good Standard     | <p>The DAPH annual accounts prepared for the four financial years 2012/13 - 2015/16 inclusive.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |    |
|                                             |                                          |              |                   | <p>The Association's involvement in National Primary Headteachers Ltd. (NPH) has resulted in a potential write off of £14,922 (net of VAT). A bad provision has been established in the NPH commissioned work statement of accounts as at 31 March 2016. This sum will have to be written off in the March 2017 accounts against the Business Development Activities accounts as it is unlikely that any dividend will be received following the liquidation of this company.</p> <p>With the ever changing landscape of the membership of the Association between maintained and academy schools, the Executive Committee has started to look at alternative service delivery vehicles for the Association. This could mean that the Association moves away from the financial umbrella of the County Council but this raises significant issues on financial management and procedures. Based on this review of the last four years' accounts, additional expenditure would be incurred by the Core Activities.</p> |                                                                                       |
| The Virtual School - CIC (Children in Care) | ANA - High                               | Final        | Good Standard     | <p>PEP's are completed for all Children in Care up to the age of 16 but there seemed to be little or no system in place for those Children in Care who are over the age of 16. On speaking to the Virtual Head this is a task in hand to ensure a continuity of care and or involvement with these adolescents to ensure they receive the support they need.</p> <p>In interviewing a number of people connected with social care and the Virtual School, there was a mixed response to the role of the Virtual School. It was clear in many areas that its profile and role had become more apparent. However this increased profile needs to be reiterated and continually promoted to ensure that the new reporting lines and responsibilities are distributed to all areas of social care, as for instance not all Independent Reviewing Officers (IRO's) knew who they should be reporting any concerns to or where to go if any information or</p>                                                              |  |

| People                                                   |                                          |              |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                     |
|----------------------------------------------------------|------------------------------------------|--------------|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| Risk Area / Audit Entity                                 | Risk Assessment / Audit Needs Assessment | Audit Report |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Assurance Progress RAG Score                                                        |
|                                                          |                                          | Status       | Assurance Opinion | Executive Summary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                     |
|                                                          |                                          |              |                   | <p>assistance is required. The IRO's advised they reported to previous post holders under previous reporting lines, even though these members of staff are no longer responsible for that concern or issue. Once the new Virtual School structures have been affirmed to all social care teams and embedded, the potential for better educational achievement and child welfare is apparent.</p> <p>The appointment of a separate strategic Head and also a Manager of the Virtual School must be seen as a positive move to enable the Authority achieve its desire of promoting the educational welfare of it's looked after children.</p>     |                                                                                     |
| Procurement - Review of Tender Evaluation Model<br>DILIS | ANA - High Client Request                | Ongoing      | Value Added       | <p>The award of a significant contract within People was challenged by an unsuccessful bidder with a counter challenge by the successful bidder. We were asked to examine the evaluation process and assessments undertaken by members of the evaluation team. Our findings have been reported to management within Procurement, Finance and People and we facilitated a subsequent workshop to examine the lessons learnt.</p> <p>Internal Audit has provided, and will continue to provide, support and challenge during the re-procurement of the DILIS contract, providing comment on price evaluation models and service specification.</p> |  |
| Adult Residential Care Bandings                          | ANA - High Client Request                | Ongoing      |                   | Draft report meeting scheduled for early June 2016.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                     |
| SEND                                                     | ANA - High Client Request                | Ongoing      |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                     |
| Grants                                                   |                                          |              |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                     |
| Autism Innovation                                        | N/A                                      | Completed    | Certified         | No issues identified                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | N/A                                                                                 |

| People                                                 |                                          |              |                   |                      |                              |
|--------------------------------------------------------|------------------------------------------|--------------|-------------------|----------------------|------------------------------|
| Risk Area / Audit Entity                               | Risk Assessment / Audit Needs Assessment | Audit Report |                   |                      | Assurance Progress RAG Score |
|                                                        |                                          | Status       | Assurance Opinion | Executive Summary    |                              |
| Local Sustainable Transport Fund - Access to Education | N/A                                      | Completed    | Certified         | No issues identified | N/A                          |
| Transforming Care                                      | N/A                                      | Completed    | Certified         | 1 issue reported     | N/A                          |
| Targeted Family Support Programme x2                   | N/A                                      | Completed    | Certified         | No issues identified | N/A                          |

The following audit was cancelled as it was no longer required

- Adoption Support

## Appendix 2 – Definitions

### Definitions of Audit Assurance Opinion Levels

### Confidentiality under the National Protective Marking Scheme

| Assurance                          | Definition                                                                                                                                                                                                                                                                                                                                                                                                                                              | Marking                                             | Definition                                                                                                                                                                                                                                                                                                                                                                 |
|------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| High Standard.                     | The system and controls in place adequately mitigate exposure to the risks identified. The system is being adhered to and substantial reliance can be placed upon the procedures in place. We have made only minor recommendations aimed at further enhancing already sound procedures.                                                                                                                                                                 | Not<br>Protectively<br>Marked<br>or<br>Unclassified | Documents, information, data or artefacts that have been prepared for the general public or are for the public web pages or can be given to any member of the public without any exemptions or exceptions to release applying, have the classification NOT PROTECTIVELY MARKED. Some organisations will also use the word UNCLASSIFIED for publicly available information. |
| Good Standard.                     | The systems and controls generally mitigate the risk identified but a few weaknesses have been identified and / or mitigating controls may not be fully applied. There are no significant matters arising from the audit and the recommendations made serve to strengthen what are mainly reliable procedures.                                                                                                                                          | Official                                            | The majority of information that is created or processed by the public sector. This includes routine business operations and services, some of which could have damaging consequences if lost, stolen or published in the media, but are not subject to a heightened threat profile.                                                                                       |
| Improvements required.             | In our opinion there are a number of instances where controls and procedures do not adequately mitigate the risks identified. Existing procedures need to be improved in order to ensure that they are fully reliable. Recommendations have been made to ensure that organisational objectives are not put at risk.                                                                                                                                     | Secret                                              | Very sensitive information that justifies heightened protective measures to defend against determined and highly capable threat actors. For example, where compromise could seriously damage military capabilities, international relations or the investigation of serious organised crime.                                                                               |
| Fundamental Weaknesses Identified. | The risks identified are not being controlled and there is an increased likelihood that risks could occur. The matters arising from the audit are sufficiently significant to place doubt on the reliability of the procedures reviewed, to an extent that the objectives and / or resources of the Council may be at risk, and the ability to deliver the service may be adversely affected. Implementation of the recommendations made is a priority. | Secret and<br>Top Secret                            | The most sensitive information requiring the highest levels of protection from the most serious threats. For example, where compromise could cause widespread loss of life or else threaten the security or economic wellbeing of the country or friendly nations.                                                                                                         |





SCC/16/49

People's Scrutiny Committee  
16 June 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 4 (March) for 2015-16.

### **3. Introduction**

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

### **4. Adult Social Care**

#### **4.1 Performance Management**

A new Adult Social Care Performance Framework has been introduced and continues to be embedded. 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. Following discussion with Adult Social Care Standing Overview Group on April 14<sup>th</sup> 2016, it was agreed that the full performance framework report (Appendix A) would form the basis of future reporting to this Committee. References in the performance commentary below refer to this appendix.

Adult social care performance continues to perform well against national benchmarks, with the exception of Delayed Transfers of Care (3.2.1). 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 (4.1.1 and 4.1.2). Recent benchmarking of incidence and spend also indicates a higher comparative number of people contacting us for support. Work is on-going to better understand the impact on assessments and support planning to ensure that we only assess and provide services for people who we really need to; and everyone else is appropriately supported to stay safe and well in their local community.

The care management aspect of 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

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normal vacancy levels. The focus now needs to be on improvement of the key performance areas and the action will be to:

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

It is recognised that with a backlog of work, the timeliness of assessments completed may get worse before it gets better; we will closely monitor the number of assessments and reviews completed to ensure that the underlying trend is improving. As part of our new performance framework, and following the Peer Review of June 2015, we have introduced more systematic quality assurance of practice (4.1.3) and the Principal Social Worker is using this to target areas of improvement.

In relation to Delayed Transfers of Care (3.2.1), agreement has been reached with NHS organisations on a revised version of the multi-agency Better Care Fund plan. This includes a commitment from NHS providers to record delays consistently across Devon which 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: the number of people waiting packages of care in their own homes is reducing, people are being assessed in hospital at weekends.

## 4.2 Quality assurance of commissioned services

Performance reporting on regulated services for adults (residential, nursing and domiciliary care) is also embedded within the Adult Performance Framework (Appendix A).

The trend in Care Quality Commission inspection outcomes for providers registered in Devon is improving (1.2.2), with the proportion rated Good and Outstanding in line with comparators, and the trend in whole home safeguarding investigations down over the previous year. We are addressing ensuring sufficiency of service at the right quality and an affordable price through the implementation of a new personal care framework, with lead providers now identified through a competitive tender process, through reconsidering our approach to commissioning residential/nursing care and through agreeing increases in price to recognise inflationary pressures in the market including that of the National Living Wage.

## 5. Education and Learning

**Early Years:** take up of education places for two year olds continues to improve despite a slight decline in the number of eligible pupils. In the spring term 84% of eligible 2-year-olds took up Early Years education places, an increase from 79% in the autumn and 72% in the previous summer. Changes in the application process have had a positive impact on the take up of places as can be seen by the continuing upward trend.

**Closing the Gap:** the attainment gap between Devon's disadvantaged pupils and their peers is closing. Gaps in outcomes for Free School Meal pupils have narrowed and are now in line with national figures for KS2 and KS4. Attainment levels for

Children in Need and Looked After Children are also improving, with Devon now performing close to or better than the national picture. Devon's Looked After Children are performing better than the national picture at KS2 (56% compared to 53% nationally) whilst Devon's Children in Need are performing better than nationally at KS4 (17.3% compared to 14.9% nationally).

**Post 16 Provision:** the percentage of 19 year olds qualified to Level 2 has improved in Devon and is now slightly above the national picture (68.5% compared to 67.9% nationally). Whilst the attainment gap is closing for our vulnerable students at Post 16 (Free Schools Meals, Special Educational Needs), the achievement of these students continues to fall below that of their peers.

**Quality of Provision:** the quality of state funded education provision in Devon continues to be higher than the national picture. The percentage of Devon schools judged to be Good or Outstanding has risen to 90% compared to 85% nationally. Whilst the percentage of Primary and Secondary schools judged to be good or outstanding continues to be above the national average, there has been no change for Special schools (70% compared to 93% nationally). Provision in Devon's specialist independent sector is well below the state funded sector. 54% of Devon Independent and Non Maintained Special Schools are judged to be Good or Outstanding compared to 76% nationally.

**Access (Admissions and School Place Planning):** Devon continues to perform well in meeting the continued demand from increased demographics in primary and housing demand. Strategic planning of pupil places and work closely with individual schools has underpinned the high levels of parental preference met through the normal admission round for its primary and secondary schools. Nearly 95% of primary school applicants and 98% of secondary school applicants were offered a place at their first preferred school. Numbers are likely to rise after the second round of applications and appeals. This is an improvement on last year where 94% of primary school applicants and 96% of secondary school applicants were offered a place at their first preferred school.

Migration into Devon remains a challenging area, especially where schools are full. This can and will have an impact on the home to school transport budget, in particular where there is local housebuilding and high parental preference.

**Special Educational Needs & Disabilities (SEND):** The volume of requests for assessments and transfers from statutory statements continues to be high. During the last year there were 467 new requests for SEND assessments, of which 296 (63%) met statutory thresholds for assessment whilst 171 (37%) did not.

Whilst the new SEND Assessment process is now embedded within the 0 to 25 SEND team, it is recognised that there is a need to improve volumes processed and timeliness of EHCPs issued. An analysis of the new assessment process has been put in place to improve practice and timeliness of information provided by partner agencies.

**Not in Employment, Education or Training:** The percentage of NEETS in Devon continues to be low, with 4.0% NEET at Mar 16. This compares favourably to the latest national rate of 4.7%. The vulnerable groups of SEND, teenage parents and care leavers continue to be over represented within the NEET group. Work is underway through the post 16 project to develop more employment and training pathways for these specific groups of young people.

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**Attendance:** Devon has the lowest absence rate of all LAs in the South West. The overall absence rate for Devon schools is 4.4%, lower than the national rate of 4.6% and the South West rate of 4.7%. Devon also has a low level of persistent absentees and has the lowest rate in the South West. Devon is in the best 10% of LAs in England for its low level of persistent absentees. Only 2.9% of pupils miss 15 per cent or more school sessions, compared to 3.7% nationally and in the South West.

## 6. Children's Social Care

All figures in this report quoted as relating to March 2016 or year-end are to be regarded as provisional.

Partly as a result of feedback from the People's Overview and Scrutiny Committee (OSC), we have recognised the need to develop the quality of our performance reporting.

In the Quality Assurance Framework (Appendix B) we report on some key performance indicators (KPI) for Children's Services but not on all. As a consequence, in this report I have provided a commentary on some, but not all.

We are developing a revised performance book covering all of our KPIs that managers will receive monthly. From this we will put in place action plans to improve our performance in line with 'good' Local Authorities. We will also identify hotspots. We will report to OSC and/or the Children's Working Group as required with the most recent available performance tables, set out in a readable format with an accompanying commentary report that provides an overview, explains performance and focuses on hotspots and on areas identified by OSC for focus.

In this report I have identified in italics the key areas of performance improvement and performance concern.

**Early Help:** The Early Help Service provides integrated support to children, young people and their families. The key objective of the service is to offer practical advice, support and direct case work to prevent issues escalating and requiring statutory intervention. The aim is to intervene early in terms of the age of a child, and early in terms of an issue arising in the life of a child – from pre-birth to nineteen. The Early Help service works with children, young people and families who are experiencing difficulties, and provides a service for children who need extra help with their learning, social, emotional, behavioural, developmental and attendance needs.

Activity in this service is currently measured by the number of Common (Devon) Assessment Frameworks (DAF) that are recorded – the Devon Assessment Framework is an early help inter-agency assessment that offers a basis for early identification of children's additional needs. For the period April to September 2015, the number of DAF's being opened had been far greater than that in the same period the previous year, such that activity levels were 90.6% higher. However, since October 2015, for the first time, activity levels have been falling, and this trend has continued to date whereby at the end of March 2016, that overall increase in comparative activity has reduced to just 2.9%.

*The performance indicator on the number or rate of DAFs needs to be treated with some caution, as DAFs are currently used for a range of purposes:*

- for their intended purpose as an early help assessment of need; leading to an early help plan, early help intervention and improved outcomes for the child

or, if outcomes do not improve, as a tool to aid decision making on subsequent steps and

- for unintended purposes as a record of basic information, as a MASH Enquiry, or as a referral form to other services.

The data on its own can give an unhelpfully misleading picture of practice providing false assurance about the quantity and quality of Early Help in Devon. There is significant development required if Early Help in Devon is to meet the quality standards achieved in 'good' local authorities.

Work is underway to simplify the early help tools, to improve compliance and iron out all purposes other than the intended ones. At this time we are very cautious about what can be inferred from the reported data

**Referrals into statutory children's service:** Referrals have remained relatively consistent over the year to date, except around the periods of school holidays where historically we see a drop in activity, and when comparing year to date activity with last year's data, there has been just a 1.0% increase in 2015-16. At a rate of 439 per 10,000 under 18 population, this compares favourably with national figures (548), those of the other South West authorities (515) and statistical neighbours (541). Re-referrals to the service, defined as those children being re-referred to social care with 12 months of their original referral are equally comparable; 22.9% in February 2015, and 22.4% currently. Again, latest comparison figures sees national figures at 24.0%, South West Authorities at 24.6% and DCC's statistical neighbours at 24.3%.

**Assessments:** The vast majority of accepted referrals lead to an assessment to determine needs and risks, clarify the desired outcomes and, where required, allocate resources to achieve them. These assessments must be timely. The maximum timeframe for the single assessment to conclude, such that it is possible to reach a decision on next steps, should be no longer than 45 working days from the point of referral.

Although variable on a month by month basis, the conversion rate of referral to assessment currently stands at 94.2% year to date. The year to date rate at the same point last year was 94.4%. Such a high conversion rate has led to 7,510 single assessments being completed and authorised, of which 89.6% have been authorised within the 45 working day threshold. *This is an aspect of the service that has seen a significant improvement in performance* as outturn in the previous year 2014-15 had been 68.0%. Comparing DCC's performance against the latest available published data, the national figure for assessments completed on time was 81.5%; other South West Authorities 79.3% and statistical neighbours 77.9%. While this performance is good and a great improvement; we need to set the right benchmarks, so, in future, we will benchmark against authorities rated good or better by Ofsted.

*40% of the assessments are closed with no further involvement from the statutory social work service. This suggests that too many families are being brought into the statutory service.* There is always a risk of a production line mentality in this part of the service and developing an 'erring on the side of caution' culture as though that were a neutral or even positive position (it isn't, it consumes very expensive resource and, if unnecessary, is damaging to families).

**Child Protection Enquiries:** Section 47 of the Children's Act 1989, places a duty on a local authority, in circumstances where they have reasonable cause to suspect that a child in their area is suffering or is likely to suffer significant harm, to make such

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enquiries as they consider necessary to enable them to decide whether they should take any action to safeguard or promote the child's welfare. The number of such enquiries initiated to March 2016 is 2,279, an increase of less than 1% on the same period last year. The decision to undertake enquiries under S47 is made after multi-agency consideration of the issues and risks in a strategy discussion. The enquiries should not automatically lead to a child protection conference, though a conference should be convened in all cases where it is judged that a multi-agency protection plan is required to reduce the risk to the child, meet his/her needs and improve the outcomes.

**Child Protection Conferences:** The Initial Child Protection Conference (ICPC) brings together family members, the child, where appropriate, and those professionals most involved with the child and family. Historically in Devon, 45 to 50% of all Section 47 enquiries lead to the initiation of an ICPC. Year to date that rate has increased to 52.4% with 1,194 such conferences being held. The purpose of the ICPC is to decide what future action is required to safeguard and promote the welfare of the child, how that action will be taken forward, and with what intended outcomes. Where the conference outcome determines that a child is at continuing risk of significant harm, a multi-agency child protection plan is formulated to protect the child.

*The number of children who are actually the subject of such a plan has risen from 464 to 724 in the twelve months to March 2016, an increase of 56.0%, though at some point during the year that figure was as high as 764. Work is currently underway to better understand the reasons behind these increases; it could be that more risk is being identified, it could be a culture of risk-averse practice, it could be a production line culture, it could be a combination. In order to bring the numbers of children subject to a child protection plan back into line with statistical neighbours, there is a need to reduce by 25% or have 193 children less. Also, whilst not a new phenomenon, there is a trend whereby almost a third of those children made subject to a child protection plan, are removed from it either on or before their first review within 3 months of the ICPC decision; this strongly suggests that the increase in children subject of a plan does not relate to increased risk but is more strongly correlated to cultural issues. We have taken action to clarify the decision making responsibility of the chairs of conferences, to strengthen the threshold decision making. Again, it is highly damaging to families to subject them to unnecessary statutory intervention.*

I have appended a draft report prepared for the Devon Safeguarding Children Board (Appendix C). The report shows how we are using our year end data to begin a challenge and change process in Devon County Council and across the whole partnership.

**Looked After Children & Adoption:** The term 'looked after' refers to children and young people in the care of the Local Authority or in care commissioned by the Local Authority for more than 24 hours. It places specific responsibilities on the local authority to safeguard and promote the child's / young person's welfare. Numbers in Devon for the year to date have remained relatively constant despite showing an increase at the beginning of the year and falling to a low of 679 in February. Figures indicate that the year-end outturn figure will be higher than last year at 712. The current rate per 10,000 under 18 population is 50.1 and this compares favourably with the latest national figures (60.0), other South Western authorities (52.0) and our statistical neighbours (50.9).

Wherever a Looked After child is placed, the child's social worker must visit the child in the placement within the first week, and at least every 6 weeks thereafter. These are minimum requirements and the looked after review may recommend more frequent visits. The frequency of visits should always be determined by the circumstances of the case and visits should be made whenever reasonably requested by the child or foster carer regardless of the status of the placement. *DCC's performance against this measure has been good throughout the year averaging 88.0% of all visits made within timescale, although this would fall just short of the intended target of 90%.*

The stability of a child's placement is an important measure of the quality of care that a child has experienced. Stability and local placement are associated with better outcomes. Proper assessment of a child's needs and an adequate choice of placements to meet the varied needs of different children are essential if appropriate stable placements are to be made. Inappropriate placements often break down and lead to frequent moves. Historically DCC has been at the higher end of the threshold in respect of short term placement stability (3+ moves in the year) averaging over 15% over the last 10 years or so, and whilst this year's outturn is expected to be lower, coming in at 12.9% (91 children) after some data cleansing, *the Authority does not compare favourably with the latest benchmarking figures.*

National rates are at 10.0%, the other South Western authorities at 12.0%, and statistical neighbours at 9.5%. Good authorities will be aiming at 8% or less.

A high population of teenagers in care will increase the risk of 3+ moves as will a relatively inexperienced workforce, both of which are Devon factors. That is not to excuse poor performance. The Corporate Parenting Board rightly has this as a priority indicator. *I would suggest OSC has a focus on front door activity, rates of children subject of a plan and rates subject of a plan for a short period, as these are priorities for management action.*

## 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 D to this report. Risks are reassessed on a monthly basis and the following changes are noted since Quarter 3:

- One risk (TG24: HR Management Information) has been de-escalated and closed during the period as progress has been made in integrating HR data into the Adult Performance Framework.
- Three new risks have been escalated following review by the Leadership Team People to the Corporate Risk Register:
  - KS19: Continuing Health Care has been escalated due to concerns about the impact of significant delays in assessments and determinations around eligibility resulting in operational inefficiencies, potential clinical risk for people with primary care needs resulting from inappropriate NHS case management; and financial risk to the council and impact on individuals and families.
  - SC13: National Funding Formula and White Paper Implications has been escalated due to the significant financial implications of the consultation proposals to remove funding allocation for school improvement from September 2017. There is a potential time lag

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between proposed withdrawal of funding and changes in Local Authority roles and responsibilities.

In addition, the White Paper sets out the Government's intention for universal academisation by 2022, which presents a risk for schools remaining in the maintained sector requiring support and removing of Council capacity. In addition there will be significant costs to the Council to facilitate each academy conversion.

- TG29: Budget Management has been escalated as part of the process to manage possible financial risk to the service.
  
- Two risks (JO13: Care Leavers in Education, Employment and Training and JO23: Children's Services Budget Pressures and Allocation) have had their current risk assessments revised upwards during the period to reflect on-going concerns about the impact of identified mitigating actions.

**Jennie Stephens**  
**Strategic Director (People)**

**Appendices:**

Appendix A: Adult Performance Framework (March 2016)

Appendix B: Children's Social Care Quality Assurance Framework

Appendix C: Education and Learning Q4 Performance

Appendix D: 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





**Devon Adult Social Care**

**Senior Leadership Team  
Adult Social Care  
Adult Performance Framework  
March 2016**

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|                                                                                                                                                           |                                                                                                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|
| <b>Vision Priority 1: To ensure that people using services feel safe</b>                                                                                  |                                                                                                                    |
| 1.1                                                                                                                                                       | <b>Are we keeping people safe?</b>                                                                                 |
| 1.1.1                                                                                                                                                     | Are people feeling safe?                                                                                           |
| 1.1.2                                                                                                                                                     | Do people who receive services think they make them feel safer?                                                    |
| 1.1.3                                                                                                                                                     | Is our use of Deprivation of Liberties Standards proportionate?                                                    |
| 1.1.4                                                                                                                                                     | Are safeguarding concerns and enquiries increasing                                                                 |
| 1.2.                                                                                                                                                      | <b>Senior Leadership Team</b>                                                                                      |
| 1.2.1                                                                                                                                                     | Is there sufficient supply for residential/nursing care, personal care and unregulated care?                       |
| 1.2.2                                                                                                                                                     | Is the supply for residential/nursing care, personal care and unregulated care of adequate quality?:               |
| <b>Vision Priority 2: To reduce or delay any need for long term social care and support</b>                                                               |                                                                                                                    |
| 2.1.                                                                                                                                                      | <b>Are we enabling people to be independent for longer?</b>                                                        |
| 2.1.1                                                                                                                                                     | How do we best measure the impact of prevention?                                                                   |
| 2.1.2                                                                                                                                                     | Is information, advice and signposting diverting people from requiring assessment?                                 |
| 2.1.3                                                                                                                                                     | How can we evidence the reducing need of people?                                                                   |
| 2.1.4                                                                                                                                                     | Do people find it easy to access information and advice?                                                           |
| 2.2                                                                                                                                                       | <b>Are we supporting carers well?</b>                                                                              |
| 2.2.1                                                                                                                                                     | Are carers saying their quality of life is improving?                                                              |
| 2.2.2                                                                                                                                                     | Are people getting enough social contact?                                                                          |
| 2.2.3                                                                                                                                                     | Are carers being assessed receiving a service as a result?                                                         |
| 2.2.4                                                                                                                                                     | What proportion of carers receiving a service do so via a personal budget?                                         |
| 2.2.5                                                                                                                                                     | What proportion of carers receiving a service do so via a direct payment?                                          |
| 2.2.6                                                                                                                                                     | Are we supporting more carers directly?                                                                            |
| 2.2.7                                                                                                                                                     | Are we supporting more carers indirectly?                                                                          |
| 2.2.8                                                                                                                                                     | How many carers are being assessed/identified?                                                                     |
| <b>Vision Priority 3: To expand the use of community based services and reduce the use of institutional care</b>                                          |                                                                                                                    |
| 3.1.                                                                                                                                                      | <b>Are we extending choice and control?</b>                                                                        |
| 3.1.1                                                                                                                                                     | Are people offered and taking up a personal budget?                                                                |
| 3.1.2                                                                                                                                                     | Are people taking up Direct Payments as the preferred personal budget option?                                      |
| 3.1.3                                                                                                                                                     | Are people using personal budgets saying they have more choice and control?                                        |
| 3.1.4                                                                                                                                                     | Are allocated budgets in line with assessed need?                                                                  |
| 3.1.5                                                                                                                                                     | Do people receive a service quickly?                                                                               |
| 3.2                                                                                                                                                       | <b>Do we help keep people out of hospital wherever possible?</b>                                                   |
| 3.2.1                                                                                                                                                     | Are delayed transfers of care reducing?                                                                            |
| 3.2.2                                                                                                                                                     | In particular are delayed transfers of care attributable to social care reducing?                                  |
| 3.2.3                                                                                                                                                     | Where there are delayed transfers of care do we understand why?                                                    |
| 3.2.4                                                                                                                                                     | Are older people discharged from hospital offered appropriate reablement and rehabilitation?                       |
| 3.2.5                                                                                                                                                     | Is the reablement and rehabilitation of older people being discharged from hospital effective?                     |
| 3.2.6                                                                                                                                                     | Is ASC contributing to minimising hospital admissions?                                                             |
| 3.3                                                                                                                                                       | <b>Do we help people to remain at home wherever possible? / Are we minimising the use of residential services?</b> |
| 3.3.1                                                                                                                                                     | Are younger adults being maintained in their own homes?                                                            |
| 3.3.2                                                                                                                                                     | Are older adults being maintained in their own homes?                                                              |
| 3.3.3                                                                                                                                                     | Are we reducing the balance of residential vs community services?                                                  |
| 3.3.4                                                                                                                                                     | Is there a balance of service provision in the market place? Are there adequate services to meet community need?   |
| 3.3.5                                                                                                                                                     | Are we increasing the number of people we support in the community?                                                |
| <b>Vision Priority 4: To ensure that people have a positive experience of social care services</b>                                                        |                                                                                                                    |
| 4.1.                                                                                                                                                      | <b>Are we delivering an effective care management service?</b>                                                     |
| 4.1.1                                                                                                                                                     | Are people assessed in a timely way?                                                                               |
| 4.1.2                                                                                                                                                     | Are people reviewed i) 6 - 8 weeks after assessment, and ii) annually?                                             |
| 4.1.3                                                                                                                                                     | Is the quality of assessment, review and care planning audited as good?                                            |
| 4.1.4                                                                                                                                                     | Is the user/carer perception of the quality of assessment, review and care planning good?                          |
| 4.1.5                                                                                                                                                     | Productivity of teams                                                                                              |
| 4.1.6                                                                                                                                                     | Is our safeguarding response timely?                                                                               |
| 4.1.7                                                                                                                                                     | Are safeguarding enquiries and concerns recurring for the same people?                                             |
| 4.1.8                                                                                                                                                     | Is our use of Mental Capacity Act assessments proportionate?                                                       |
| 4.1.9                                                                                                                                                     | What are the outcomes for the clients?                                                                             |
| 4.1.10                                                                                                                                                    | Transitions into Adult Services                                                                                    |
| 4.2                                                                                                                                                       | <b>Are we improving peoples lives? OR Are we helping people to improve their lives?</b>                            |
| 4.2.1                                                                                                                                                     | Are younger adults living independently?                                                                           |
| 4.2.2                                                                                                                                                     | Are younger adults in employment?                                                                                  |
| 4.2.3                                                                                                                                                     | Are people getting enough social contact?                                                                          |
| 4.2.4                                                                                                                                                     | Are service users saying their quality of life is improving?                                                       |
| 4.2.5                                                                                                                                                     | What are the outcomes of what we do?                                                                               |
| <b>Vision Priority 5: To ensure the social care workforce can deliver effective, high quality services</b>                                                |                                                                                                                    |
| 5.1.                                                                                                                                                      | <b>Do we have a workforce which is well trained and competent to meet the needs of service users and carers?</b>   |
| 5.1.1                                                                                                                                                     | Staff Numbers                                                                                                      |
| 5.1.2                                                                                                                                                     | Absence                                                                                                            |
| 5.1.3                                                                                                                                                     | Appraisal and Supervision                                                                                          |
| 5.1.4                                                                                                                                                     | Recruitment and Retention                                                                                          |
| 5.1.5                                                                                                                                                     | Qualified Workforce                                                                                                |
| <b>Vision Priority 6: To ensure that strategic planning and commissioning of adult social care services is integrated with the NHS and other partners</b> |                                                                                                                    |
| 6.1.                                                                                                                                                      |                                                                                                                    |

## Adult's Services APF Scorecard

|                                                                                                                  |                                                                                                                            | 2014/15 Benchmarking |                               |                            |                            | 2015/16 ACS Targets  | 2015/16 March Performance |
|------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|----------------------|-------------------------------|----------------------------|----------------------------|----------------------|---------------------------|
| Code                                                                                                             | Title                                                                                                                      | Devon Average        | Regional (South West) Average | Comparator (CIPFA) Average | England (National) Average | Devon Target 2015/16 | Performance @ Mar 2016    |
| <b>Vision Priority 1: To ensure that people using services feel safe</b>                                         |                                                                                                                            |                      |                               |                            |                            |                      |                           |
| <b>1.1 Are we keeping people safe?</b>                                                                           |                                                                                                                            |                      |                               |                            |                            |                      |                           |
| 4B                                                                                                               | Users who say services have made them feel safe and secure                                                                 | 79.5%                | 86.9%                         | 84.7%                      | 84.5%                      | 79.9%                | 79.4%                     |
| 4A                                                                                                               | Users who feel safe                                                                                                        | 65.8%                | 68.3%                         | 69.4%                      | 68.5%                      | 66.3%                | 65.8%                     |
| L24                                                                                                              | Rate of DOLS per 100,000 population                                                                                        | N/A                  | N/A                           | N/A                        | N/A                        | N/A                  | 301                       |
| L25                                                                                                              | Safeguarding alert volumes                                                                                                 | N/A                  | N/A                           | N/A                        | N/A                        | N/A                  | 2,841                     |
| L26                                                                                                              | Whole service investigation volumes                                                                                        | N/A                  | N/A                           | N/A                        | N/A                        | N/A                  | 13                        |
| APF 1.1.4                                                                                                        | Making Safeguarding Personal - meeting preferred outcomes                                                                  | N/A                  | N/A                           | N/A                        | N/A                        | N/A                  | Q3 76.20%                 |
| APF 1.1                                                                                                          | Further development of Safeguarding measures                                                                               | N/A                  | N/A                           | N/A                        | N/A                        | N/A                  | N/A                       |
| <b>1.2 Do we commission services which are affordable, sufficient and of at least adequate quality?</b>          |                                                                                                                            |                      |                               |                            |                            |                      |                           |
| APF 1.2.1                                                                                                        | Unfulfilled Care Packages                                                                                                  | N/A                  | N/A                           | N/A                        | N/A                        | N/A                  | 45                        |
| 3A                                                                                                               | Overall satisfaction of people who use services with their care and support                                                | 68.5%                | 67.4%                         | 66.0%                      | 64.7%                      | 68.0%                | 68.5%                     |
| APF 1.2.2                                                                                                        | Percentage of commissioned services in Devon graded by CQC as Compliant (assumes no/minor concerns): OLD inspection regime | N/A                  | N/A                           | N/A                        | N/A                        | No Target            | Q3 98.0%                  |
| APF 1.2.2                                                                                                        | Percentage of commissioned services in Devon graded by CQC as Compliant (assumes outstanding/good): NEW inspection regime  | N/A                  | 66.0%                         | N/A                        | 69.0%                      | No Target            | Q3 60.8%                  |
| APF 1.2                                                                                                          | Further development of Market Provision and Commissioning                                                                  | N/A                  | N/A                           | N/A                        | N/A                        | N/A                  | N/A                       |
| <b>Vision Priority 2: To reduce or delay any need for long term social care and support</b>                      |                                                                                                                            |                      |                               |                            |                            |                      |                           |
| <b>2.1. Are we enabling people to be independent for longer?</b>                                                 |                                                                                                                            |                      |                               |                            |                            |                      |                           |
| 3D part 1                                                                                                        | People who find it easy to find information about support                                                                  | 74.7%                | 76.6%                         | 74.6%                      | 74.5%                      | 71.0%                | 73.0%                     |
| APF 2.1                                                                                                          | Further development of reporting for this section                                                                          | N/A                  | N/A                           | N/A                        | N/A                        | N/A                  | N/A                       |
| <b>2.2 Are we supporting carers well?</b>                                                                        |                                                                                                                            |                      |                               |                            |                            |                      |                           |
| 1D                                                                                                               | Carer reported quality of life                                                                                             | 8.1                  | 7.9                           | 7.8                        | 7.9                        | 8.2                  | 8.2                       |
| 1I part 2                                                                                                        | Carers who reported that they had as much social contact as they would like                                                | 39.0%                | 36.4%                         | 35.6%                      | 38.5%                      | 45.0%                | 39.0%                     |
| NI135                                                                                                            | Carers receiving needs assessment/ review/ and a specific carer's service, or advice and information                       | N/A                  | N/A                           | N/A                        | N/A                        | N/A                  | 55.4%                     |
| 1C Part 1 b                                                                                                      | Carers receiving self-directed support                                                                                     | 89.4%                | 71.0%                         | 73.1%                      | 77.4%                      | NO TARGET            | 97.2%                     |
| 1C Part 2 b                                                                                                      | Carers receiving direct payments for support direct to carer                                                               | 56.4%                | 47.7%                         | 60.2%                      | 66.9%                      | NO TARGET            | 66.5%                     |
| APF 2.2.8                                                                                                        | Number of Carers being identified / assessed                                                                               | N/A                  | N/A                           | N/A                        | N/A                        | N/A                  | 3197.0                    |
| 3B                                                                                                               | Overall satisfaction of carers with social services                                                                        | 41.4%                | 41.9%                         | 40.9%                      | 41.2%                      | 46.1%                | 41.4%                     |
| 3C                                                                                                               | Carers who report that they have been included or consulted in discussion about the person they care for                   | 73.0%                | 72.2%                         | 73.1%                      | 72.3%                      | 73.7%                | 73.0%                     |
| 3D part 2                                                                                                        | Carers who find it easy to find information about support                                                                  | 66.1%                | 66.4%                         | 65.2%                      | 65.5%                      | NO TARGET            | 66.10%                    |
| <b>Vision Priority 3: To expand the use of community based services and reduce the use of institutional care</b> |                                                                                                                            |                      |                               |                            |                            |                      |                           |
| <b>3.1. Are we extending choice and control?</b>                                                                 |                                                                                                                            |                      |                               |                            |                            |                      |                           |

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## Adults Services APF Scorecard

|                                                                                                                        |                                                                                                                                         | 2014/15 Benchmarking |                               |                            |                            | 2015/16 ACS Targets  | 2015/16 March Performance |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|----------------------|-------------------------------|----------------------------|----------------------------|----------------------|---------------------------|
| Code                                                                                                                   | Title                                                                                                                                   | Devon Average        | Regional (South West) Average | Comparator (CIPFA) Average | England (National) Average | Devon Target 2015/16 | Performance @ Mar 2016    |
| 1C Part 1 a                                                                                                            | Adults receiving self-directed support                                                                                                  | 89.9%                | 79.2%                         | 83.4%                      | 83.7%                      | NO TARGET            | 83.5%                     |
| 1C Part 2 a                                                                                                            | Adults receiving direct payments                                                                                                        | 33.5%                | 24.7%                         | 28.1%                      | 26.3%                      | NO TARGET            | 30.6%                     |
| 1B                                                                                                                     | People who have control over their daily life                                                                                           | 79.9%                | 79.9%                         | 78.6%                      | 77.3%                      | 79.0%                | 79.8%                     |
| APF 3.1.4                                                                                                              | % variance from Estimated Budget to Agreed Budget                                                                                       | N/A                  | N/A                           | N/A                        | N/A                        | N/A                  | 3.6%                      |
| APF 3.1.4                                                                                                              | Average agreed budget                                                                                                                   | N/A                  | N/A                           | N/A                        | N/A                        | N/A                  | £297.00                   |
| NI133                                                                                                                  | Waiting times for Services                                                                                                              | N/A                  | N/A                           | N/A                        | N/A                        | N/A                  | 94.7%                     |
| <b>3.2. Do we help keep people out of hospital wherever possible?</b>                                                  |                                                                                                                                         |                      |                               |                            |                            |                      |                           |
| 2C Part 1                                                                                                              | DTOC (Delayed transfers of care) from hospital per 100,000 population                                                                   | 16.9                 | 15.0                          | 12.7                       | 11.1                       | 10.5                 | 19.2                      |
| 2C Part 2                                                                                                              | DTOC attributable to social care or jointly to social care and the NHS per 100,000 population                                           | 4.7                  | 5.9                           | 3.9                        | 3.7                        | 3.0                  | 5.5                       |
| 2B part 1                                                                                                              | Older people (65+) still at home 91 days after hospital discharge into reablement/rehab services (effectiveness of the service)         | 88.8%                | 84.0%                         | 82.9%                      | 82.1%                      | 81.5%                | 87.1%                     |
| 2B part 2                                                                                                              | Older people (65+) still at home 91 days after hospital discharge into reablement/rehab services (offered the service)                  | 1.4%                 | 3.5%                          | 2.8%                       | 3.1%                       | 3.3%                 | 1.4%                      |
| 2D                                                                                                                     | Received a short term service during the year where the sequel to the service was either no ongoing support or support of a lower level | 88.4%                | 76.0%                         | 77.3%                      | 74.6%                      | NO TARGET            | 87.5%                     |
| <b>3.3 Do we help people to remain at home wherever possible? / Are we minimising the use of residential services?</b> |                                                                                                                                         |                      |                               |                            |                            |                      |                           |
| 2A part 1                                                                                                              | Long-term support needs of younger adults (18-64) met by admission to residential and nursing care homes, per 100,000 population        | 19.7                 | 16.8                          | 15.1                       | 14.2                       | 17.0                 | 15.6                      |
| 2A part 2                                                                                                              | Long-term support needs of older adults (65+) met by admission to residential and nursing care homes, per 100,000 population            | 601.8                | 678.2                         | 642.8                      | 668.8                      | 540.5                | 535.2                     |
| <b>Vision Priority 4: To ensure that people have a positive experience of social care services</b>                     |                                                                                                                                         |                      |                               |                            |                            |                      |                           |
| <b>4.1. Are we delivering an effective care management service?</b>                                                    |                                                                                                                                         |                      |                               |                            |                            |                      |                           |
| NI 132                                                                                                                 | Timeliness of social care assessment - new clients assessed within 28 days                                                              | N/A                  | N/A                           | N/A                        | N/A                        | 80.0%                | 67.4%                     |
| L37                                                                                                                    | Annual review - reviewable services                                                                                                     | N/A                  | N/A                           | N/A                        | N/A                        | 75.0%                | 54.6%                     |
| APF 4.1.3                                                                                                              | Practice Quality Review - % being completed; % of managers completing them; % of assessments reviewed as 'good'                         | N/A                  | N/A                           | N/A                        | N/A                        | N/A                  | 42.3%                     |
| L74a                                                                                                                   | Proportion of safeguarding strategy meetings/agreements held within 7 working days                                                      | N/A                  | N/A                           | N/A                        | N/A                        | 80%                  | 51.8%                     |
| L77                                                                                                                    | Proportion of safeguarding case conferences held within 30 working days of strategy meetings                                            | N/A                  | N/A                           | N/A                        | N/A                        | 80%                  | 79.55%                    |
| L27                                                                                                                    | Mental Capacity Act assessments completed                                                                                               | N/A                  | N/A                           | N/A                        | N/A                        | N/A                  | 1,849                     |
| APF 4.1                                                                                                                | Productivity of Team / Worker - number of assessments completed                                                                         | N/A                  | N/A                           | N/A                        | N/A                        | N/A                  | N/A                       |

## Adult's Services APF Scorecard

|                                                                                                                       |                                                                                                       | 2014/15 Benchmarking |                               |                            |                            | 2015/16 ACS Targets  | 2015/16 March Performance |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|----------------------|-------------------------------|----------------------------|----------------------------|----------------------|---------------------------|
| Code                                                                                                                  | Title                                                                                                 | Devon Average        | Regional (South West) Average | Comparator (CIPFA) Average | England (National) Average | Devon Target 2015/16 | Performance @ Mar 2016    |
| <b>4.2 Are we improving peoples lives OR Are we helping people to improve their lives?</b>                            |                                                                                                       |                      |                               |                            |                            |                      |                           |
| 1G                                                                                                                    | Adults with a learning disability who live in their own home or with their family                     | 65.6%                | 69.5%                         | 69.9%                      | 73.3%                      | 72.1%                | 77.79%                    |
| 1H                                                                                                                    | Adults in contact with secondary mental health services living independently, with or without support | 60.9%                | 53.8%                         | 55.2%                      | 59.7%                      | 60.8%                | 65.3%                     |
| 1E                                                                                                                    | Adults with a learning disability in paid employment                                                  | 6.8%                 | 6.3%                          | 6.1%                       | 6.0%                       | 8.0%                 | 7.7%                      |
| 1F                                                                                                                    | Adults with secondary mental health services in paid employment                                       | 6.3%                 | 8.4%                          | 8.4%                       | 6.8%                       | 7.4%                 | 6.2%                      |
| 1I part 1                                                                                                             | Adults who reported that they had as much social contact as they would like                           | 42.8%                | 45.7%                         | 45.4%                      | 44.8%                      | 45.0%                | 42.9%                     |
| 1A                                                                                                                    | Social care related quality of life                                                                   | 19.0                 | 19.3                          | 19.2                       | 19.1                       | 19.0                 | 19.0                      |
| <b>Vision Priority 5: To ensure the social care workforce can deliver effective, high quality services</b>            |                                                                                                       |                      |                               |                            |                            |                      |                           |
| <b>5.1. Do we have a workforce which is well trained and competent to meet the needs of service users and carers?</b> |                                                                                                       |                      |                               |                            |                            |                      |                           |
| L21                                                                                                                   | Percentage of working days lost to sickness                                                           | N/A                  | N/A                           | N/A                        | N/A                        | 4.8%                 | 3.1%                      |
| L23                                                                                                                   | Staff supervision meetings                                                                            | N/A                  | N/A                           | N/A                        | N/A                        | 100.0%               | 89.4%                     |
| NEW                                                                                                                   | Staff appraisal meetings                                                                              | N/A                  | N/A                           | N/A                        | N/A                        | 100.0%               | not reported              |

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## Head of Service Commentary March 2016

Adult social care performance continues to perform well against national benchmarks, with the exception of Delayed Transfers of Care (3.2.1). 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 (4.1.1, 4.1.2). Recent benchmarking of incidence and spend also indicates a higher comparative number of people contacting us for support. Work is ongoing to better understand the impact on assessments and support planning to ensure that we only assess and provide services for people who we really need to – and everyone else is appropriately supported to stay safe and well in their local community.

In order to monitor on-going performance, a number of targets have been set based on benchmarked national performance and local metrics. In addition, a range of new indicators are under-development with the service to better reflect the priority areas within the Adult Performance Framework, for example:

- Safeguarding
- Market quality, sufficiency and price
- Care management productivity
- Practice quality assurance

Identified key priority areas for 2016-17 are highlighted below.

The care management aspect of 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:

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

It is recognised that with a backlog of work, the timeliness of assessments completed may get worse before it gets better; we will closely monitor the number of assessments and reviews completed to ensure that the underlying trend is improving. As part of our new performance framework, and following the Peer Review of June 2015, we have introduced more systematic quality assurance of practice (4.1.3) and the Principal Social Worker is using this to target areas for improvement e.g. through our training programme.

In relation to Delayed Transfers of Care (3.2.1), agreement has been reached with NHS organisations on a revised version of the multi-agency Better Care Fund plan. This includes a commitment from NHS providers to record delays consistently across Devon which 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: the number of people awaiting packages of care in their own homes is reducing, people are being assessed in hospital at weekends.

The trend in Care Quality Commission inspection outcomes of providers registered in Devon is improving (1.2.2), with the proportion rated Good and Outstanding now in line with comparators, and the trend in whole home safeguarding investigations down over the previous year. We are addressing ensuring sufficiency of service at the right quality and an affordable price through the implementation of a new personal care framework, with lead providers now identified through a competitive tender process, through reconsidering our approach to commissioning residential/nursing care and through agreeing increases in price to recognise inflationary pressures in the market including that of the National Living Wage.

Keri Storey, Head of Adult Social Care  
Tim Golby, Head of Social Care Commissioning

Keri Storey, Head of Adult Social Care  
Tim Golby, Head of Social Care Commissioning

**1.1 Are we keeping people safe?**

**1.1.1 Are we keeping people safe?**

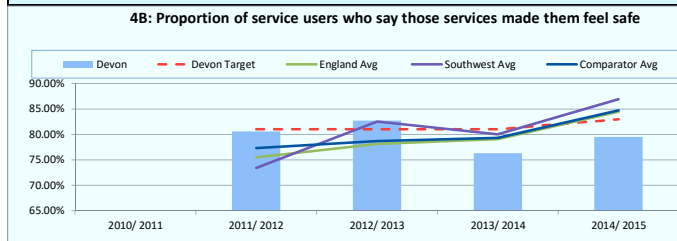
**Summary of Performance (Insight and Impact analysis) -**

Service user views are captured annually as part of the national Adult Social Care User Survey. This enables performance to be benchmarked against England, Regional and Statistical Neighbourhood authorities. Published data relates to 2014-15, where Devon performance remains below benchmarks for both ASCOF perception measures of 'safety' (4A: proportion of service users who feel safe and 4B: proportion of service users who say those services made them feel safe). Provisional outcomes for 2015-16 show improvements in both indicators. Following the Cheshire West ruling, there is significant pressure in the system with regard to Deprivation of Liberties Safeguards (DoLS) with numbers continuing to increase. Waiting lists for applications stood at 2,789 at the end of March. The number of safeguarding enquiries/concerns are slowly increasing. Local metrics are under development to better understand underlying causes.

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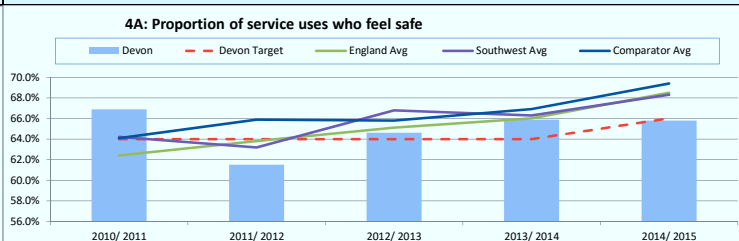
**1.1.1.1 Are people feeling safe?**

**Headline Performance for Devon**



**1.1.1.2 Do people who receive services think they make them feel safer?**

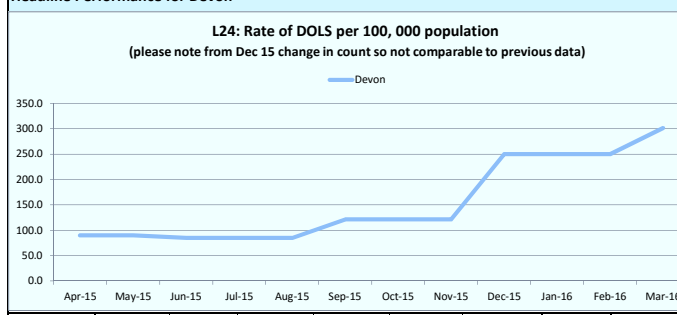
**Headline Performance for Devon**



| 4B    | 2011/2012 | 2012/2013 | 2013/2014 | 2014/2015 | Target | England Avg 14/15 | SW Avg 14/15 | Comp. Avg 14/15 | 4A    | 2011/2012 | 2012/2013 | 2013/2014 | 2014/2015 | Target | England Avg 14/15 | SW Avg 14/15 | Comp. Avg 14/15 |
|-------|-----------|-----------|-----------|-----------|--------|-------------------|--------------|-----------------|-------|-----------|-----------|-----------|-----------|--------|-------------------|--------------|-----------------|
| Devon | 80.6%     | 82.7%     | 76.30%    | 79.40%    | 83.00% | 84.50%            | 86.90%       | 84.70%          | Devon | 61.5%     | 64.6%     | 65.90%    | 65.80%    | 66.00% | 68.50%            | 68.30%       | 69.40%          |

**1.1.3 Is our use of Deprivation of Liberties Standards proportionate?**

**Headline Performance for Devon**



**Summary of DoLS applications for 2015/16**

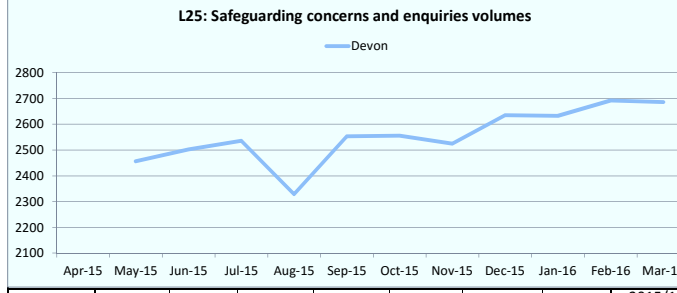
| Month     | New Applications | Closed | Granted | Not Granted | Withdrawn | Waiting List |
|-----------|------------------|--------|---------|-------------|-----------|--------------|
| April     | 223              | 69     | 17      | 50          | 2         | 1972         |
| May       | 208              | 99     | 39      | 57          | 3         | 2081         |
| June      | 270              | 115    | 24      | 87          | 4         | 2236         |
| July      | 273              | 230    | 18      | 208         | 4         | 2279         |
| August    | 214              | 138    | 31      | 106         | 0         | 2355         |
| September | 230              | 88     | 13      | 74          | 1         | 2497         |
| October   | 257              | 197    | 23      | 174         | 0         | 2557         |
| November  | 245              | 146    | 14      | 129         | 3         | 2656         |
| December  | 253              | 175    | 28      | 145         | 1         | 2733         |
| January   | 152              | 166    | 21      | 141         | 2         | 2711         |
| February  | 283              | 239    | 35      | 203         | 1         | 2747         |
| March     | 248              | 200    | 30      | 142         | 28        | 2789         |

| L24   | Mar-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|-------|--------|--------|--------|--------|--------|--------|--------|--------|
| Devon | 90.0   | 121.1  | 121.1  | 121.1  | 249.5  | 249.5  | 249.5  | 301.3  |

Please Note: L24 has been recalculated from December 2015 onwards based on outcomes in the quarter and not applications received.

**1.1.4 Are safeguarding concerns and enquiries increasing?**

**Headline Performance for Devon**



**Summary from fortnightly Safeguarding report March 2016**

|                                                                   | Individual | Whole Service | Total  |
|-------------------------------------------------------------------|------------|---------------|--------|
| Total new safeguarding concerns in last month                     | 45         | 3             | 48     |
| Total open safeguarding concerns                                  | 128        | 10            | 138    |
| Number of concerns closed within last fortnight                   | 223        | 14            | 237    |
| Number of forms closed in last fortnight going on to enquiry*     | 49         | 1             | 50     |
| Percentage of forms closed in last fortnight going on to enquiry* | 22.00%     | 7.10%         | 21.10% |
| Average length of time closed concerns are open for (days)        | 21.1       | 32.3          | 21.7   |

| L25   | Mar-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | 2015/16 Target |
|-------|--------|--------|--------|--------|--------|--------|--------|----------------|
| Devon | 2414   | 2556   | 2557   | 2635   | 2633   | 2692   | 2686   | none           |

|                                                                               | East   | North  | South  | Blank  |
|-------------------------------------------------------------------------------|--------|--------|--------|--------|
| Total new safeguarding concerns in last month (individual)                    | 12     | 14.00  | 17.00  | 2.00   |
| Total new safeguarding concerns in last month (Whole Service)                 | 0      | 1      | 2      | 0      |
| Number of concerns closed within last month (individual)                      | 109    | 40.00  | 68.00  | 6.00   |
| Number of concerns closed within last month (Whole Service)                   | 5      | 3      | 5      | 1      |
| Percentage of forms closed in last month going on to enquiry* (individual)    | 28.40% | 17.50% | 13.20% | 33.30% |
| Percentage of forms closed in last month going on to enquiry* (Whole Service) | 0.00%  | 33.30% | 0.00%  | 0.00%  |

**Outcomes of closed Safeguarding Enquiries for January - March 2016**

| Completed Enquiries                  | East | North | South | Blank | Total |
|--------------------------------------|------|-------|-------|-------|-------|
| Risk reduced                         | 17   | 7     | 17    | 3     | 44    |
| Risk remains                         | 2    | 0     | 1     | 0     | 3     |
| Risk removed                         | 6    | 2     | 10    | 1     | 19    |
| No further action under safeguarding | 3    | 1     | 2     | 2     | 8     |
| Blank                                | 2    | 1     | 2     | 0     | 5     |
| Grand Total                          | 30   | 11    | 32    | 6     | 79    |

**Making Safeguarding Personal - meeting preferred outcomes**

| Completed Enquiries             | 2015/16 Q1 | 2015/16 Q2 | 2015/16 Q3 | 2015/16 Q4 |
|---------------------------------|------------|------------|------------|------------|
| Preferred outcome is recorded   | 81         | 41.10%     | 73         | 57.90%     |
| Preferred outcome had been met  | 36         | 18.30%     | 20         | 15.90%     |
| Preferred outcome partially met | 8          | 4.10%      | 8          | 6.30%      |
| Preferred outcome not met       | 72         | 36.50%     | 25         | 19.80%     |
| Total completed enquiries       | 197        |            | 126        | 104        |
|                                 |            |            |            | 79         |

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## 1.2. Do we commission services which are affordable, sufficient and of at least adequate quality?

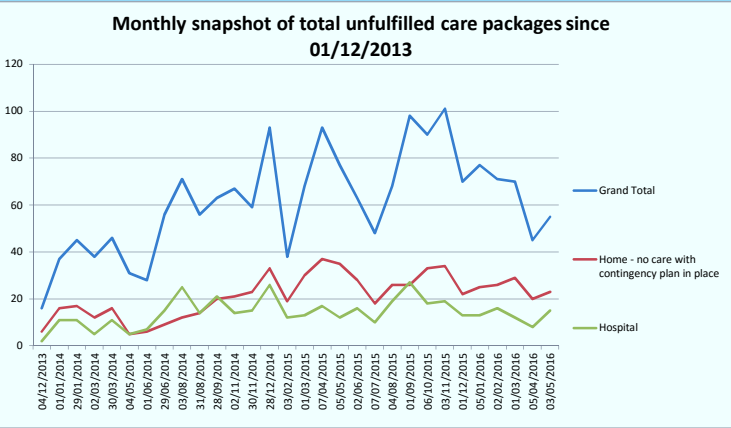
Summary of Performance (Insight and Impact analysis) -  
 The Care Quality Commission (CQC) announced its findings for region in October 2014. Quality is assessed by the percentage of all social care providers rated Good or Outstanding by CQC. Performance has steadily been improving and was at 65% (2 March 2016) which is in line with rate for England, and slightly lower than the South West region rate of 67%. Quality in the residential sector (79%) is markedly higher than for community based care providers (62%). This remains a priority areas for development along with a better understanding of market sufficiency and price.

### 1.2.1 Is there sufficient supply for residential/nursing care, personal care and unregulated care?

**Unfulfilled care packages**  
 Below is an extract from the Unfulfilled Care Packages report, dated 03/05/2016. There were a total of 55 people with unfulfilled care packages that week, of which 17 were new to the list in that week. As at the end of March 2016 there were 3,919 people in receipt of personal care, meaning UCPs represent 1.4% of personal care clients. Whilst Eastern has the most Unfulfilled packages of care, Southern has 1 case which have been waiting the longest. Opposite is a graph showing the monthly snapshot trend since 01/12/2013, and includes number of clients who are in hospital, or at home with no care.

| Length of time without supply | Eastern   | Northern | Southern  | Grand Total | New clients to the list |
|-------------------------------|-----------|----------|-----------|-------------|-------------------------|
| Less than 4 weeks             | 23        | 1        | 13        | 37          | 17                      |
| Between 4 & 7 Weeks           | 5         | 1        | 2         | 8           | 0                       |
| Between 8 & 11 Weeks          | 2         |          | 1         | 3           | 0                       |
| Between 12 & 15 Weeks         | 1         |          | 1         | 2           | 0                       |
| Between 16 & 19 Weeks         |           | 2        |           | 2           | 0                       |
| 25 Weeks                      | 1         |          |           | 1           | 0                       |
| 36 Weeks                      |           |          | 1         | 1           | 0                       |
| 24 Weeks                      |           |          | 1         | 1           | 0                       |
| <b>Grand Total</b>            | <b>32</b> | <b>4</b> | <b>19</b> | <b>55</b>   | <b>17</b>               |

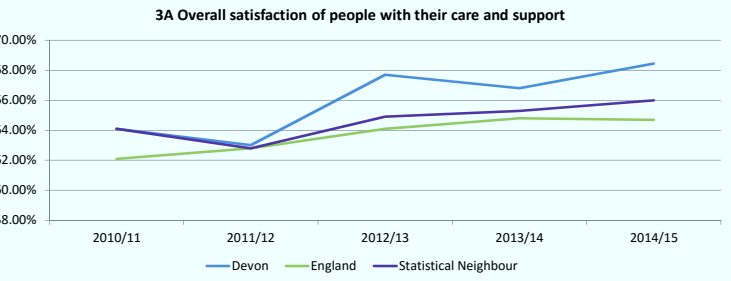
**Further areas in development:-**  
 What about DTOC specific to res nursing placements and care at home?  
 Market Position Statement  
 Area for development: commissioned care by fee levels, including market premiums  
 Area for development: commissioned care by fee levels, including market premiums  
 Compare RAS to actual spend



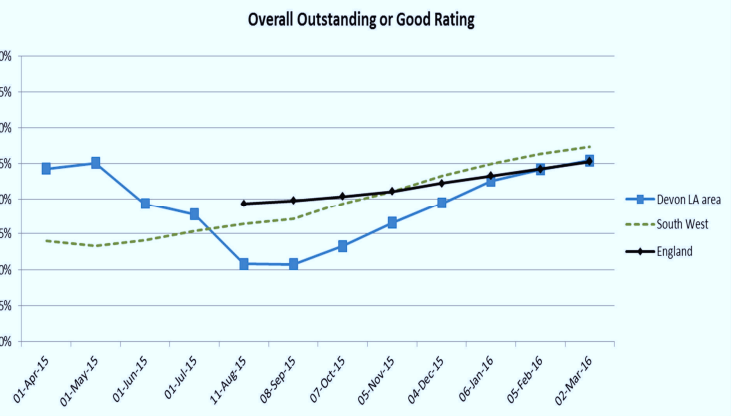
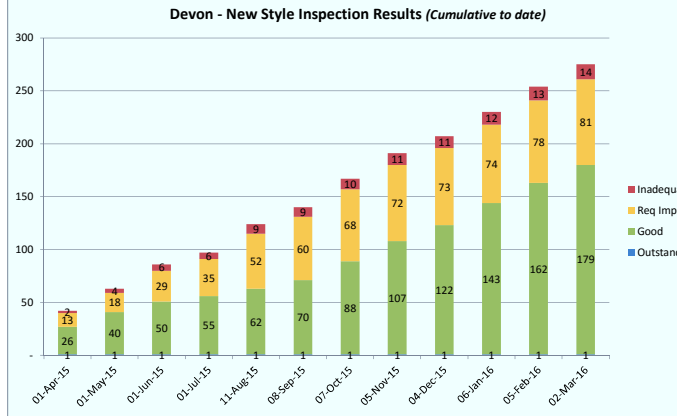
### 1.2.2 Is the supply for residential/nursing care, personal care and unregulated care of adequate quality?:

ASCOF 3A: overall satisfaction of people who use services with their care and support

| 3A      | 2010/11 | 2011/12 | 2012/13 | 2013/14 | 2014/15 |
|---------|---------|---------|---------|---------|---------|
| Devon   | 64.1%   | 63.00%  | 67.70%  | 66.80%  | 68.45%  |
| England | 62.1%   | 62.80%  | 64.10%  | 64.80%  | 64.70%  |
| SN      | 64.10%  | 62.80%  | 64.90%  | 65.30%  | 66.00%  |



### As determined by the regulator? CQC Inspections



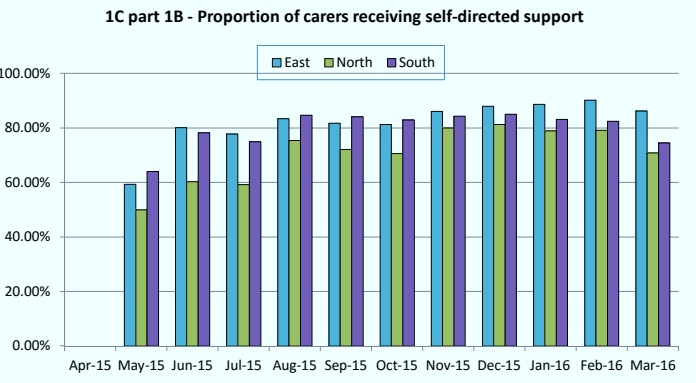
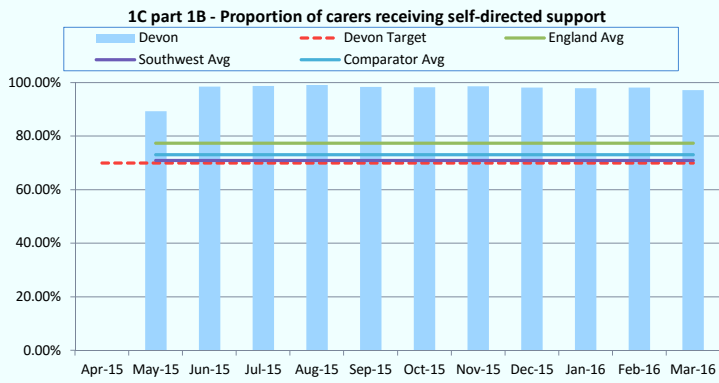
Other areas in development: Summary of QAIT team processes; As viewed by the users of the services and their carers? CQC Ratings reports; Suspension reporting from the QAIT; Healthwatch checks



| Vision Priority 2: To reduce or delay any need for long term social care and support                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |               |           |          |                                                                                                              |           |          |              |         |         |              |           |          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------|----------|--------------------------------------------------------------------------------------------------------------|-----------|----------|--------------|---------|---------|--------------|-----------|----------|
| 2.1. Are we enabling people to be independent for longer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |           |          |                                                                                                              |           |          |              |         |         |              |           |          |
| Summary of Performance (Insight and Impact analysis) -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |           |          |                                                                                                              |           |          |              |         |         |              |           |          |
| Following feedback this area is being re-developed and will be available later in Quarter 1.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |           |          |                                                                                                              |           |          |              |         |         |              |           |          |
| 2.1.1 How do we best measure the impact of prevention?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |           |          | 2.1.2 Is information, advice and signposting diverting people from requiring assessment?                     |           |          |              |         |         |              |           |          |
| Area for discussion and development<br>Primary – public health outcomes framework<br>Secondary – community capacity building, information and advice, reablement/rehabilitation/recovery etc<br>Tertiary – Social Care Reablement/Community Enabling, Time for Life                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |               |           |          | to be redeveloped with headlines from the new monthly team productivity data - content to be agreed with SLT |           |          |              |         |         |              |           |          |
| 2.1.3 How can we evidence the reducing need of people?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |           |          |                                                                                                              |           |          |              |         |         |              |           |          |
| 2.1.4 Do people find it easy to access information and advice?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |               |           |          |                                                                                                              |           |          |              |         |         |              |           |          |
| <b>Headline Performance for Devon</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               |           |          |                                                                                                              |           |          |              |         |         |              |           |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 2010/11       | 2011/12   | 2012/13  | 2013/14                                                                                                      | 2014/15   | Target   |              |         |         |              |           |          |
| 3D - Proportion of people who use services and carers who find it easy to find information about services                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 72            | 76.1      | 73.1     |                                                                                                              |           |          |              |         |         |              |           |          |
| 3D(1) - Proportion of people who use services who find it easy to find information about services                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |           |          | 74.6                                                                                                         | 74.7      | 71.0     |              |         |         |              |           |          |
| 3D(2) - Proportion of carers who find it easy to find information about services                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |           |          |                                                                                                              | 66.1      |          |              |         |         |              |           |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |               |           |          |                                                                                                              |           |          |              |         |         |              |           |          |
| 2.2 Are we supporting carers well?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |           |          |                                                                                                              |           |          |              |         |         |              |           |          |
| Summary of Performance (Insight and Impact analysis) -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |           |          |                                                                                                              |           |          |              |         |         |              |           |          |
| Implementation of the carers elements of the Care Act has resulted in a revised three tier offer for carers, which has resulted in significant practice and process changes. The Care Act provided carers with an entitlement to individual assessment and during 2015-16, 4,059 Carers Assessments have been started, of which 3,283 had been completed by 31st March 2016. Of the completed assessment forms 49.47% had an outcome of Social Care offer. Feedback from carers is captured biennially through the national Survey of Adult Carers, which enables performance to be benchmarked Nationally, Regionally and against Statistical Neighbours. Devon performance for the composite indicator ASCOF 1D, Carer reported Quality of Life is good and above benchmarks. Likewise for ASCOF 1I (part 2) % of carers having as much social contact as they would like. Devon performs well against the carers personalisation measures ASCOF 1C parts 1b and 2b and is above England and Regional Comparators for 2014/15. |               |           |          |                                                                                                              |           |          |              |         |         |              |           |          |
| 2.2.1 Are carers saying their quality of life is improving?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |           |          | 2.2.2 Are people getting enough social contact?                                                              |           |          |              |         |         |              |           |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |               |           |          |                                                                                                              |           |          |              |         |         |              |           |          |
| 1D                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Devon 2013/14 | Eng 13/14 | SW 13/14 | Devon 2014/15                                                                                                | Eng 14/15 | SW 14/15 | Devon Target | 1I pt 2 | 2014/15 | Target 15/16 | Eng 14/15 | SN 14/15 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 8.2%          | 8.1%      | 8.1%     | 8.1%                                                                                                         | 7.9%      | 7.9%     | 8.20%        | Devon   | 39      | 45           | 38.5      | 35.6     |
| 2.2.3 Are carers being assessed receiving a service as a result?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |           |          |                                                                                                              |           |          |              |         |         |              |           |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |               |           |          |                                                                                                              |           |          |              |         |         |              |           |          |
| NI135                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Mar-15        | Sep-15    | Oct-15   | Nov-15                                                                                                       | Dec-15    | Jan-16   | Feb-16       | Mar-16  |         |              |           |          |
| Devon                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 54.14%        | 59.04%    | 56.44%   | 54.10%                                                                                                       | 51.17%    | 47.16%   | 43.63%       | 55.37%  |         |              |           |          |

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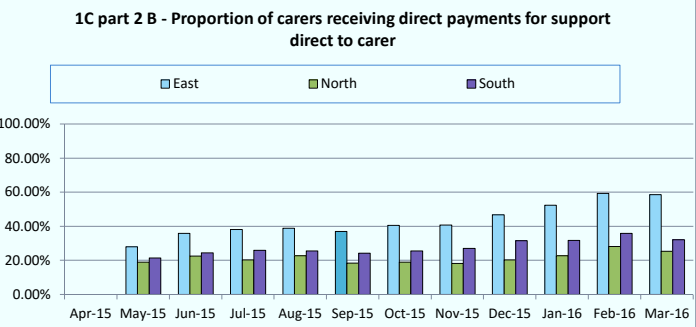
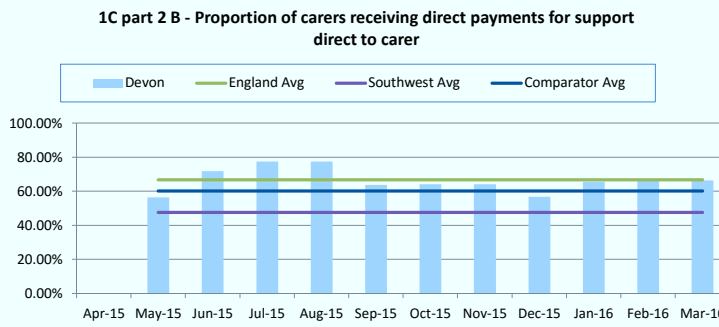
## 2.2.4 What proportion of carers receiving a service do so via a personal budget?



| 1C pt 1B | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Eng 14/15 | SW 14/15 |
|----------|--------|--------|--------|--------|--------|--------|-----------|----------|
| Devon    | 98.33% | 98.69% | 98.15% | 98.00% | 98.15% | 97.20% | 77.40%    | 71.00%   |

| 1C pt 1B | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|----------|--------|--------|--------|--------|--------|--------|--------|--------|
| East     | 83.45% | 81.82% | 81.38% | 86.18% | 87.97% | 88.70% | 90.26% | 86.22% |
| North    | 75.44% | 72.22% | 70.69% | 80.00% | 81.36% | 78.95% | 79.25% | 70.91% |
| South    | 84.69% | 84.21% | 82.98% | 84.38% | 85.15% | 83.19% | 82.52% | 74.58% |

## 2.2.5 What proportion of carers receiving a service do so via a direct payment?



| 1C (2B) | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Eng 14/15 | SW 14/15 |
|---------|--------|--------|--------|--------|--------|--------|-----------|----------|
| Devon   | 64.09% | 64.21% | 56.89% | 65.71% | 66.77% | 66.50% | 66.90%    | 47.70%   |

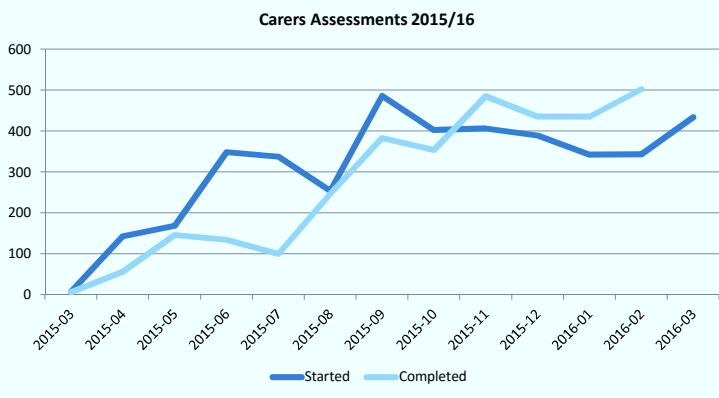
| 1C (2B) | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|---------|--------|--------|--------|--------|--------|--------|--------|--------|
| East    | 37.06% | 40.69% | 40.79% | 46.84% | 46.84% | 52.54% | 59.49% | 58.67% |
| North   | 18.52% | 18.97% | 18.33% | 20.34% | 20.34% | 22.81% | 28.30% | 25.45% |
| South   | 24.21% | 25.53% | 27.08% | 31.68% | 31.68% | 31.86% | 35.92% | 32.20% |

## 2.2.6 Are we supporting more carers directly?

## 2.2.7 Are we supporting more carers indirectly?

Area in development: Carers benefiting from a service provided to the cared for person (replacement care)

## 2.2.8 How many carers are being assessed/identified?



**Vision Priority 3: To expand the use of community based services and reduce the use of institutional care**

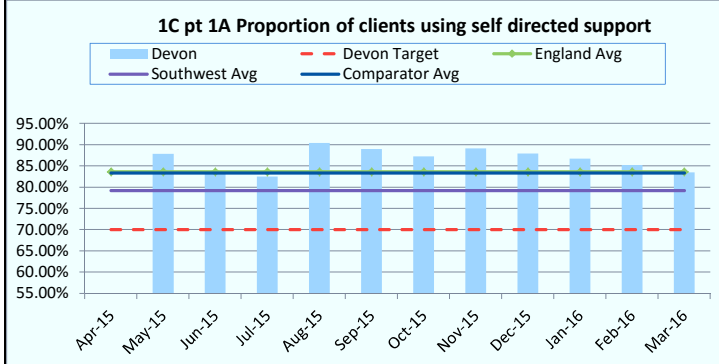
**3.1. Are we extending choice and control?**

**Summary of Performance (Insight and Impact analysis) -**

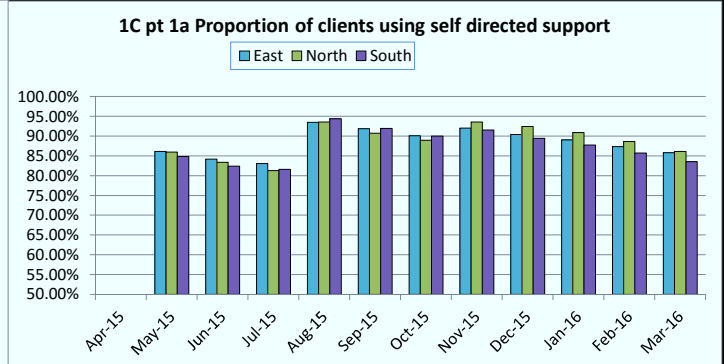
Devon performs well against the national personalisation metrics: ASCOF 1C parts 1A and 2A, which measure self directed support and direct payments; benchmarking in excess of comparators in 2014-15. Current performance against both measures has declined during 2015-16 and is currently under investigation. Service user perceptions are measured annually through the national Adult Social Care User Survey, which enables benchmarking of performance. In 2014-15, Devon performance against ASCOF 1B (Proportion of people who feel they have control in their daily lives) was above national and regional comparators. A new resource allocation system was introduced in 2015-16 to provide a more equitable and transparent basis for funding decisions. Local indicators are currently being used to monitor resources allocated to fund care packages. Data shows that for Learning Disability service users Agreed budgets are routinely lower than Estimated, whereas the converse is true for Older People and Physical Disability service users. When service users are receiving a service form, nearly 95% of Support Plans are started within 28 days from the end of the assessment.

**3.1.1 Are people offered and taking up a personal budget?**

**Headline Performance for Devon**



**Area breakdown of performance**



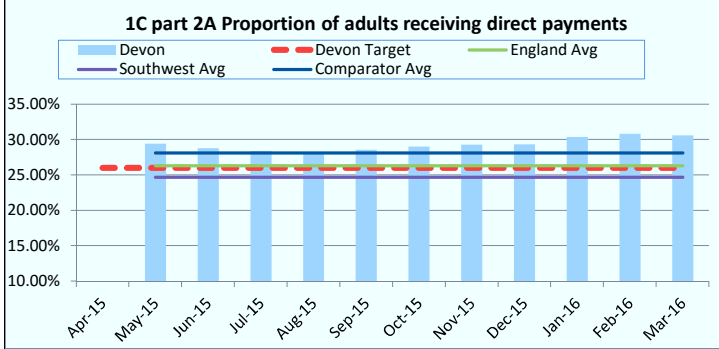
| IC 1a | Mar-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Devon 14/15 | Eng 14/15 |
|-------|--------|--------|--------|--------|--------|--------|-------------|-----------|
| Devon | 89.90% | 89.16% | 87.98% | 86.75% | 85.23% | 83.49% | 89.90%      | 83.70%    |

# Devon performance prior to March 2015 was based on the previous definition of 1c part 1

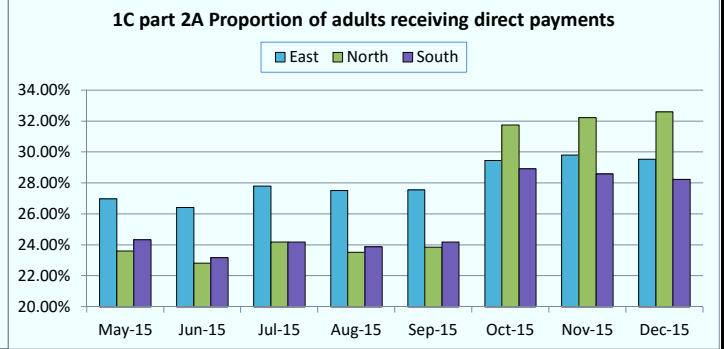
| IC 1a | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Jan-15 | Feb-15 | Mar-15 |
|-------|--------|--------|--------|--------|--------|--------|--------|--------|
| East  | 91.87% | 90.16% | 92.04% | 90.47% | 89.08% | 90.47% | 87.41% | 85.82% |
| North | 90.78% | 88.99% | 93.62% | 92.49% | 90.92% | 92.49% | 88.68% | 86.20% |
| South | 91.96% | 90.08% | 91.61% | 89.48% | 87.80% | 89.48% | 85.75% | 83.56% |

**3.1.2 Are people taking up Direct Payments as the preferred personal budget option?**

**Headline Performance for Devon**



**Area breakdown of performance**

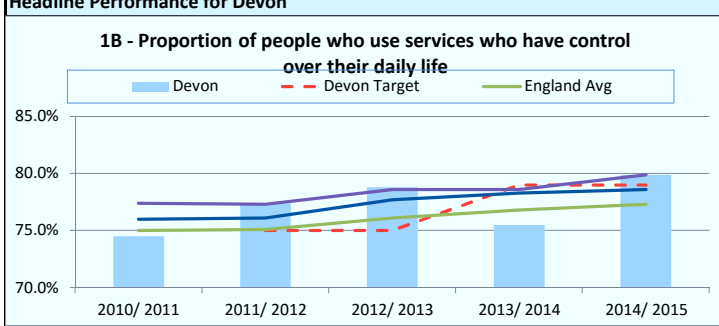


| 1C part 2A | Mar-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Devon 14/15 | Eng 14/15 |
|------------|--------|--------|--------|--------|--------|--------|-------------|-----------|
| Devon      | 31.20% | 29.33% | 30.38% | 30.81% | 30.81% | 30.62% | 33.50%      | 26.30%    |
| Target     | 26.00% | 26.00% | 26.00% | 26.00% | 26.00% | 26.00% |             |           |

| 1C part 2A | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|------------|--------|--------|--------|--------|--------|--------|--------|--------|
| East       | 27.52% | 27.55% | 29.46% | 29.81% | 29.54% | 30.44% | 30.61% | 30.63% |
| North      | 23.52% | 23.85% | 31.75% | 32.23% | 32.61% | 33.55% | 33.33% | 32.85% |
| South      | 23.88% | 24.18% | 28.92% | 28.58% | 28.23% | 28.58% | 28.63% | 28.15% |

**3.1.3 Are people using personal budgets saying they have more choice and control?**

**Headline Performance for Devon**

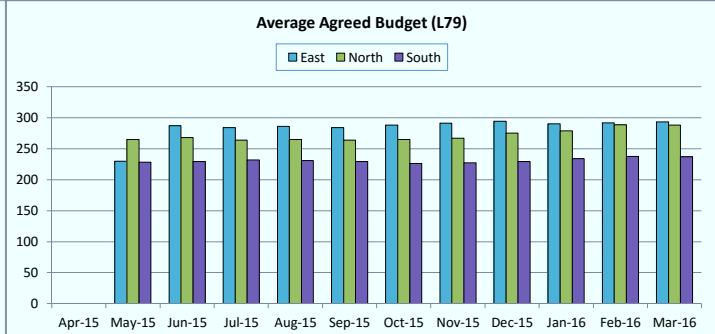
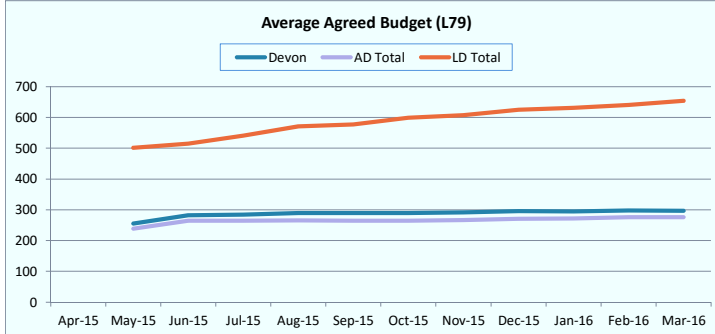
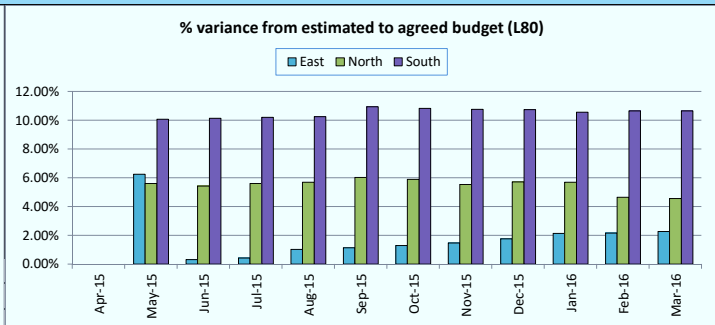
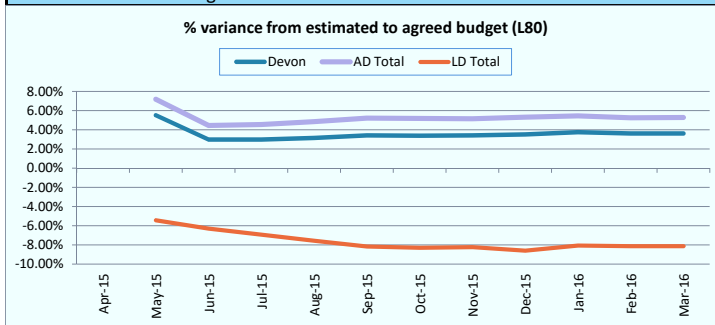


This National Indicator is taken from the Annual Users Survey. Devon's performance for 2014/15 has improved slightly to 79.9% and is meeting the 2014/15 target. Performance in Devon is higher than the 2014/15 England average of 77.3% and the 2013/14 SW regional average of 78.60%

| 1B    | 2010/11 | 2011/12 | 2012/13 | 2013/14 | 2014/15 | Target 15/16 | Eng 14/15 | Comp 14/15 |
|-------|---------|---------|---------|---------|---------|--------------|-----------|------------|
| Devon | 74.50%  | 77.40%  | 78.70%  | 75.50%  | 79.84%  | 79.00%       | 77.30%    | 78.60%     |

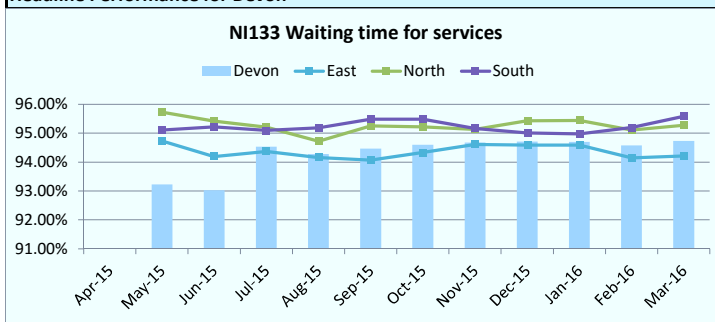
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## 3.1.4 Are allocated budgets in line with assessed need?



## 3.1.5 Do people receive a service quickly?

### Headline Performance for Devon



| NI133 | Mar-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|-------|--------|--------|--------|--------|--------|--------|--------|--------|
| Devon | 94.81% | 94.47% | 94.60% | 94.67% | 94.71% | 94.70% | 94.57% | 94.73% |
| East  | 95.28% | 94.07% | 94.33% | 94.61% | 94.59% | 94.59% | 94.14% | 94.21% |
| North | 95.83% | 95.25% | 95.22% | 95.13% | 95.43% | 95.44% | 95.11% | 95.27% |
| South | 94.78% | 95.48% | 95.48% | 95.16% | 95.01% | 94.97% | 95.19% | 95.58% |

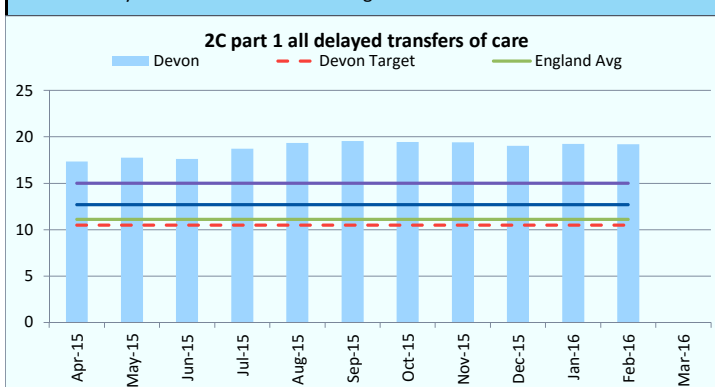
area to be developed - Waiting times for service provision; meeting most eligible need for lowest cost

## 3.2 Do we help keep people out of hospital wherever possible?

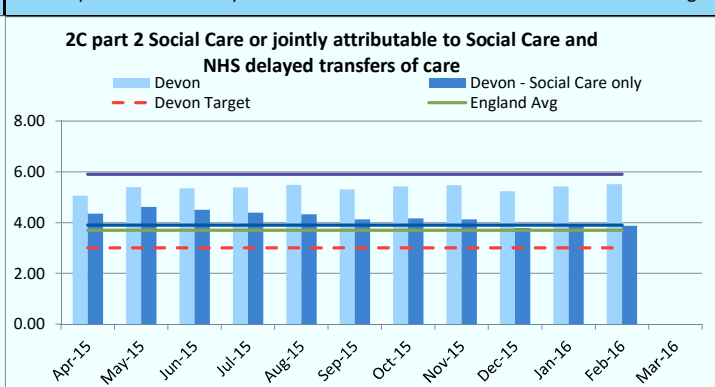
### Summary of Performance (Insight and Impact analysis) -

Understanding and improving delayed transfers of care is a priority area. Local, Regional and National performance has been in decline throughout 2015-16 and remains a cause for concern. Current performance against ASCOF 2C (part 1) Delayed Transfer of Care (all sources) has declined to 19.2 per 100,000 population and is well in excess of the 2014-15 England (11.1) and Regional (15.0) comparators. Improvement Plans are in place and actions are in-hand to improve recording consistency. Analysis shows the majority of cases for delayed discharge are waiting for further non acute NHS care which includes intermediate care and reablement. This affected the largest number of patients (561 out of 1,436) and caused the largest number of days of delay (16,534 out of 45838). For acute beds the RD&E has the largest number of delayed patients (672 out of 1,436). For non-acute beds, the provider with the largest delays is NDHT (270 out of 1,436), however, it should be noted that this covers all community hospitals in Eastern and Northern. ASCOF 2C (part 2) measures delays attributable to social care/both: current performance has declined to 5.51 and is in excess of target (3.0) and the 2014-15 national comparator (3.7). Over the last 12 months, 412 patients were delayed due to social care/both, the highest reason for delay was awaiting care package in own home which affected 87 patients (21%). 83 (20%) patients were delayed due to waiting for a Residential Home placement, 79 (19%) were waiting for completion of assessment and awaiting Nursing Home placement affected 72 patients (17%). Devon performs well with regard to the effectiveness of its reablement offer (ASCOF 2B part 1), but poorly with regard to its coverage (ASCOF 2B part 2) which is being addressed through the Better Care Fund.

## 3.2.1 Are delayed transfers of care reducing?

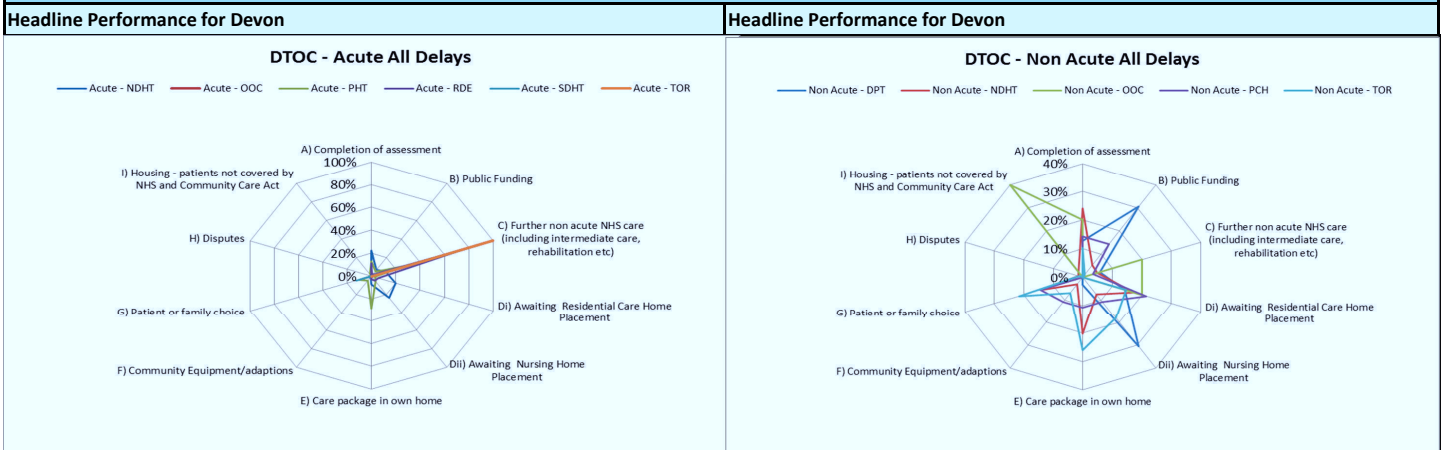


## 3.2.2 In particular are delayed transfers of care attributable to social care reducing?

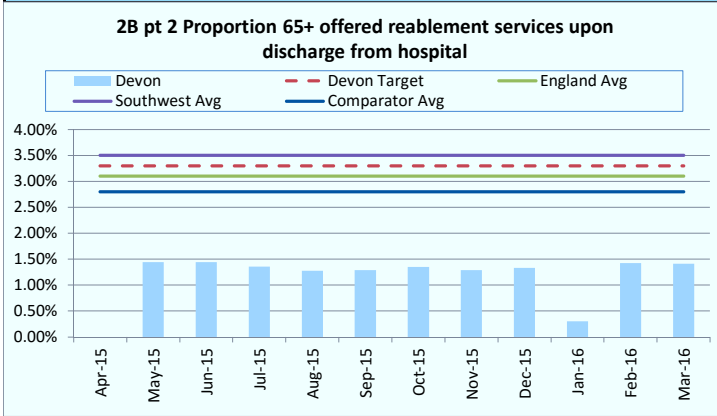


| 2C pt 1 | Mar-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Target 15/16 | Devon 14/15 | Eng 14/15 | 2C pt 2 | Mar-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Target 15/16 | Devon 14/15 | Eng 14/15 |
|---------|--------|--------|--------|--------|--------|--------------|-------------|-----------|---------|--------|--------|--------|--------|--------|--------------|-------------|-----------|
| Devon   | 17.76  | 19.43  | 19.04  | 19.23  | 19.2   | 10.5         | 16.9        | 11.1      | Devon   | 4.11   | 5.48   | 5.24   | 5.43   | 5.51   | 3.00         | 4.7         | 3.7       |

### 3.2.3 Where there are delayed transfers of care do we understand why?



### 3.2.4 Are older people discharged from hospital offered appropriate reablement and rehabilitation?

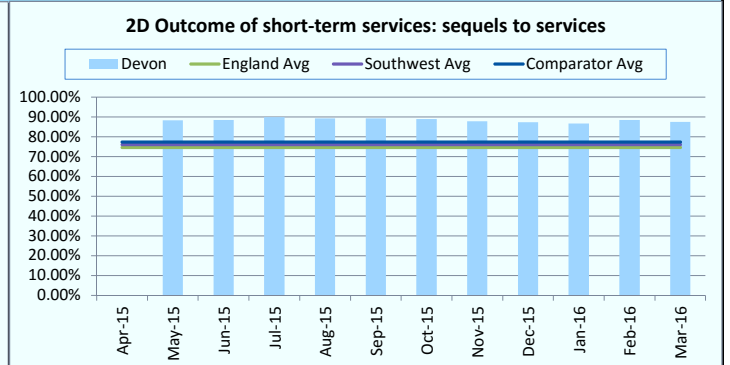
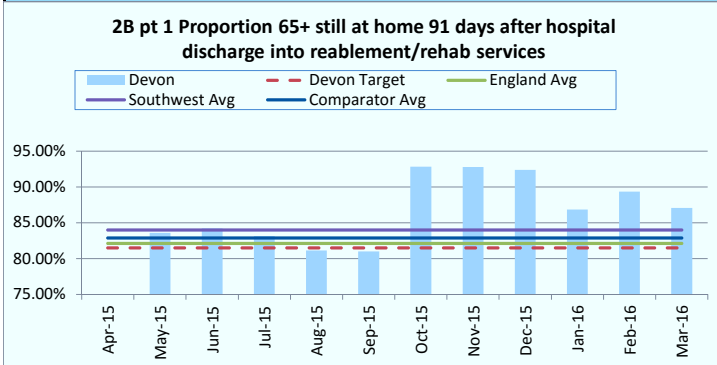


The table below shows the number of referrals across Devon into Social Care Reablement for the quarter January - March 2016. It also shows the number of clients who fully completed their SCR service and number where the outcome was NFA. 162 clients (38.39%) required no further action.

|                    | No. of new referrals | SCR Service completed as planned | SCR Service not completed - finished early | Total number of SCR Service completed with an outcome of NFA |
|--------------------|----------------------|----------------------------------|--------------------------------------------|--------------------------------------------------------------|
| Exeter             | 167                  | 61                               | 21                                         | 24                                                           |
| Honiton            | 87                   | 28                               | 11                                         | 1                                                            |
| Tiverton           | 90                   | 39                               | 16                                         | 6                                                            |
| <b>East TOTAL</b>  | <b>344</b>           | <b>128</b>                       | <b>48</b>                                  | <b>31</b>                                                    |
| Barnstaple         | 226                  | 65                               | 29                                         | 60                                                           |
| <b>North TOTAL</b> | <b>226</b>           | <b>65</b>                        | <b>29</b>                                  | <b>60</b>                                                    |
| SHWD               | 133                  | 75                               | 14                                         | 19                                                           |
| Teignbridge        | 134                  | 45                               | 18                                         | 52                                                           |
| <b>South TOTAL</b> | <b>267</b>           | <b>120</b>                       | <b>32</b>                                  | <b>71</b>                                                    |
| <b>TOTAL</b>       | <b>837</b>           | <b>313</b>                       | <b>109</b>                                 | <b>162</b>                                                   |

| 2B pt 2 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Target 15/16 | Devon 14/15 | Eng 14/15 | SW 14/15 |
|---------|--------|--------|--------|--------|--------------|-------------|-----------|----------|
| Devon   | 1.33%  | 0.30%  | 1.42%  | 1.41%  | 3.30%        | 1.40%       | 3.10%     | 3.50%    |

### 3.2.5 Is the reablement and rehabilitation of older people being discharged from hospital effective?



| 2B pt 1 | Mar-15 | Jan-16 | Feb-16 | Mar-16 | Target 15/16 | Devon 14/15 | Eng 14/15 | SW 14/15 |
|---------|--------|--------|--------|--------|--------------|-------------|-----------|----------|
| Devon   | 87.50% | 86.84% | 89.34% | 87.09% | 81.50%       | 88.80%      | 82.10%    | 84.00%   |

| 2D    | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Devon 14/15 | Eng 14/15 | SW 14/15 |
|-------|--------|--------|--------|--------|--------|-------------|-----------|----------|
| Devon | 87.81% | 87.42% | 86.67% | 88.48% | 87.53% | 88.40%      | 74.60%    | 76.00%   |

### 3.2.6 Is ASC contributing to minimising hospital admissions?

area to be developed  
 Health report on Avoidable Emergency Admissions – anything else? Do CHSC Teams reduce admissions?  
 Link to the ECM service.  
 BCF target – Emergency Admissions

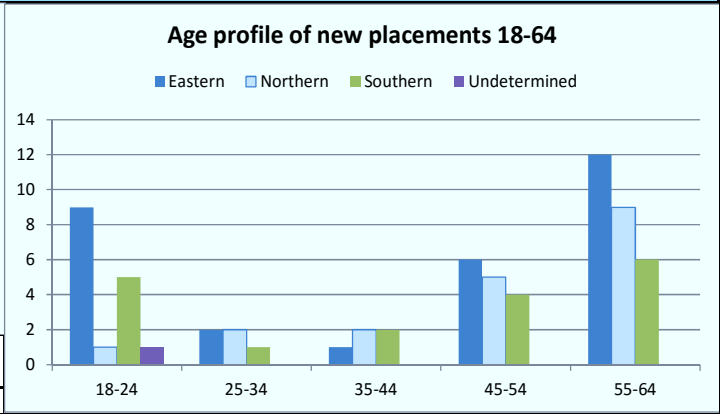
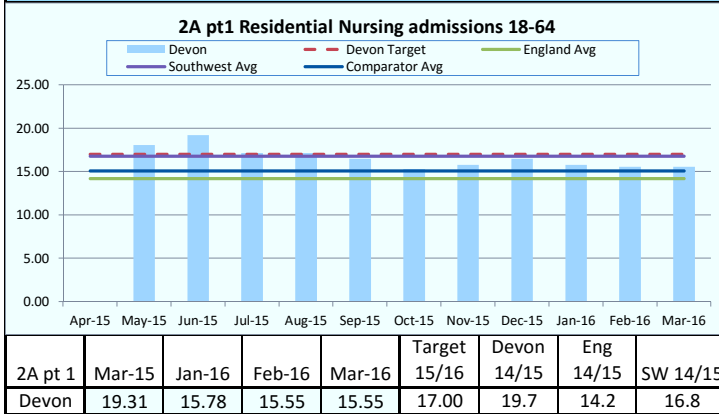
# Agenda Item 10

## 3.3 Do we help people to remain at home wherever possible? / Are we minimising the use of residential services?

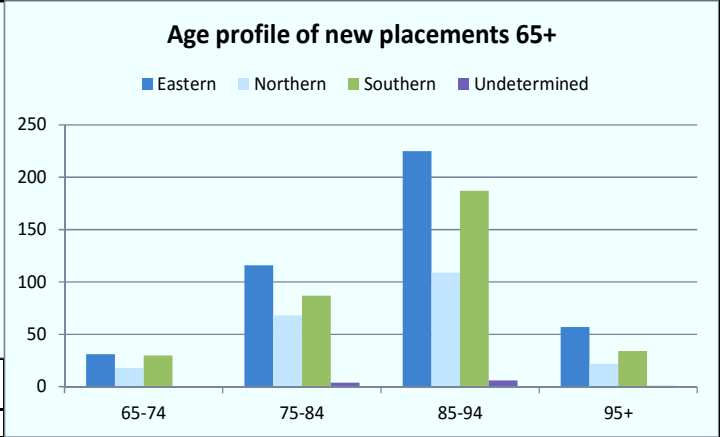
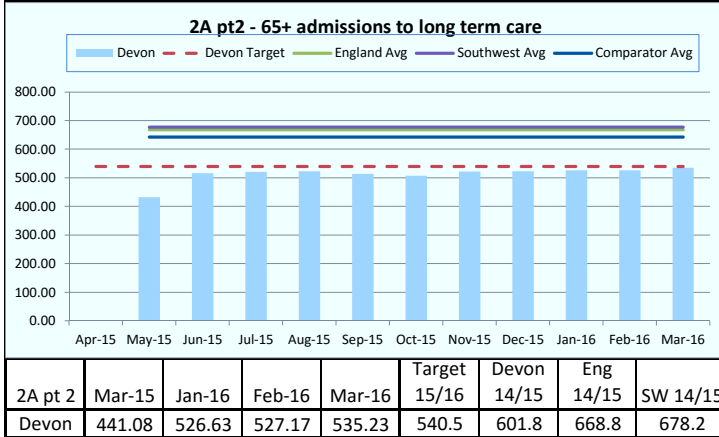
Summary of Performance (Insight and Impact analysis) -

Permanent admissions to residential and nursing care (ASCOF 2A) for service users aged 18-64 (part 1) and 65 and over (part 2) have seen an improvement during 2015-16 when compared to 2014-15. Performance for both parts of the indicator is ahead of target. For the 18-64 cohort, performance remains above the 2014-15 England comparator (14.2) and for service users aged 65 and over, performance is significantly better than 2014-15 comparators.

### 3.3.1 Are younger adults being maintained in their own homes?



### 3.3.2 Are older adults being maintained in their own homes?



### 3.3.3 Are we reducing the balance of residential vs community services?

to be developed

### 3.3.4 Is there a balance of service provision in the market place? Are there adequate services to meet community need?

Area of development-Market Position Statement

### 3.3.5 Are we increasing the number of people we support in the community?

Area for development :Rate of people receiving a community based service per 100,000;

Area for development :Rate of people receiving SCR/CE or Personal Care per 100,000

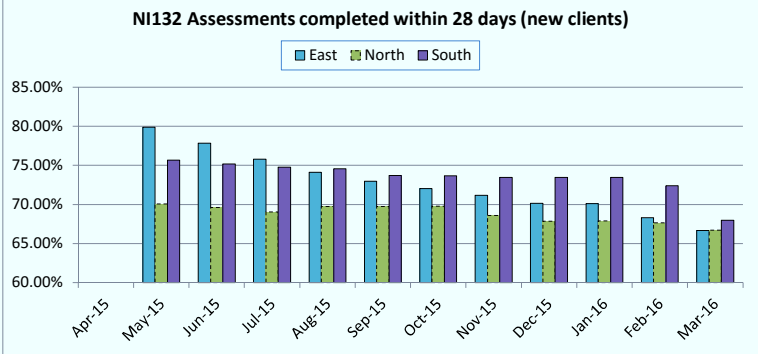
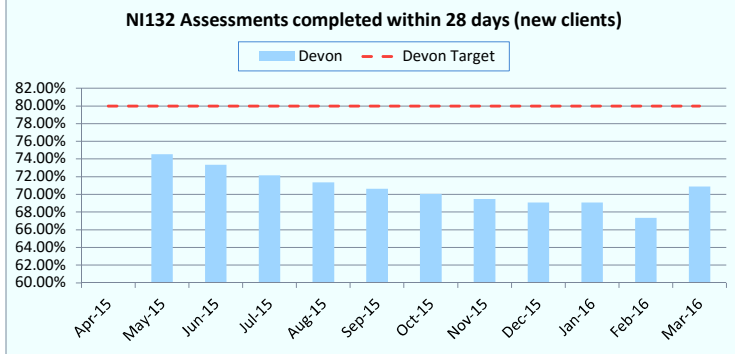
## 4.1. Are we delivering an effective care management service?

### Summary of Performance (Insight and Impact analysis) -

The care management service has recently been reorganised leading to integration of learning disability teams with older people and physical disability teams. The staffing establishment has been a previous concern, but vacancy levels have now returned to more normal levels. The focus is now on improving performance in key areas, for example, productivity, efficiency (by removing duplication) and demand management (pre-contact, at point of contact and when people are receiving services).

### 4.1.1 Are people assessed in a timely way?

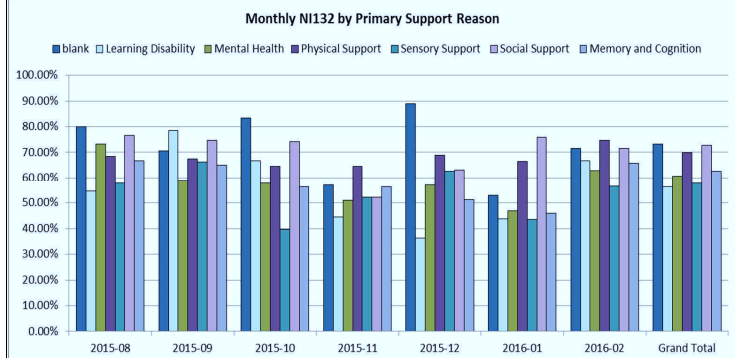
#### NI132 Timeliness of assessment



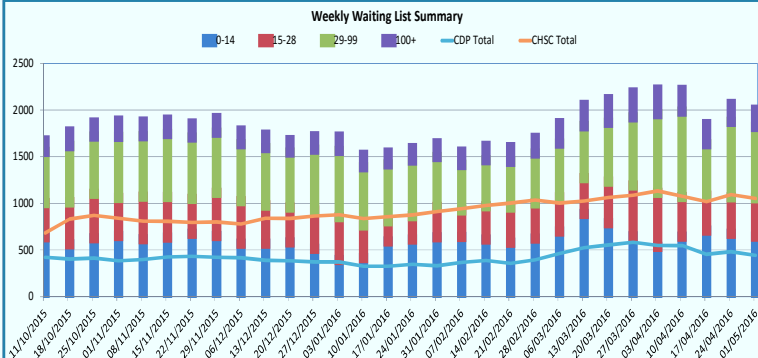
| NI132 | Mar-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | 14/15 Devon | Target |
|-------|--------|--------|--------|--------|--------|--------|-------------|--------|
| Devon | 74.50% | 69.48% | 69.08% | 69.07% | 67.36% | 70.87% | 74.50%      | 80.00% |

| NI132 | Mar-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|-------|--------|--------|--------|--------|--------|--------|--------|--------|
| East  | 79.42% | 72.96% | 72.02% | 71.15% | 70.14% | 70.12% | 68.29% | 66.66% |
| North | 69.06% | 69.73% | 69.76% | 68.59% | 67.84% | 67.88% | 67.65% | 66.71% |
| South | 76.40% | 73.71% | 73.65% | 73.45% | 73.48% | 73.45% | 72.40% | 67.97% |

#### NI132 Assessments by Primary Support Reason

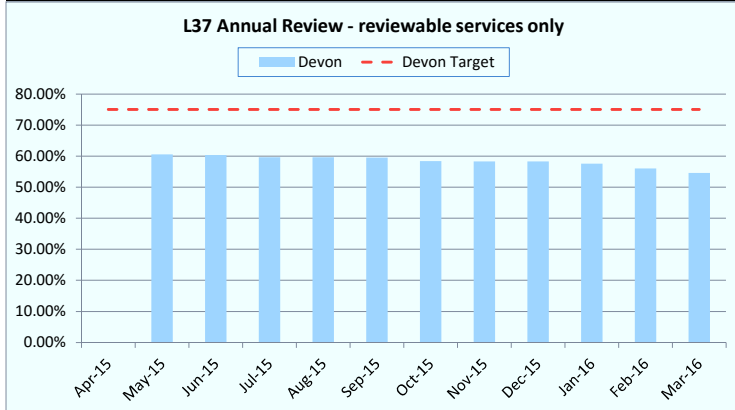


#### Waiting List for Devon



### 4.1.2 Are people reviewed i) 6 - 8 weeks after assessment, and ii) annually?

#### L37 Annual Reviews for clients in receipt of a service open for 365+ days

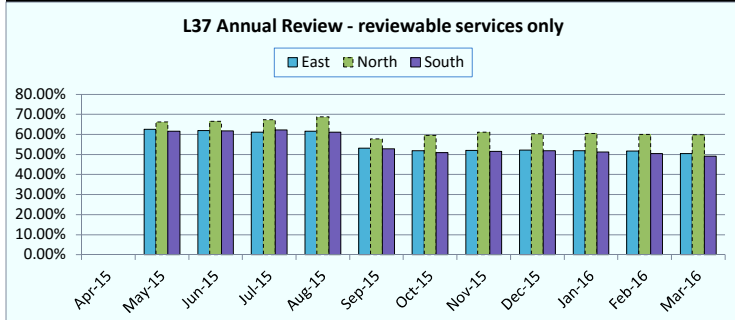


| L37   | Mar-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Target |
|-------|--------|--------|--------|--------|--------|--------|--------|--------|
| Devon | 62.02% | 58.44% | 58.28% | 58.28% | 57.58% | 56.04% | 54.55% | 75.00% |

#### Summary of Due and Overdue Reviews for 2016/17 by Area and age band

|                    | 1) Under 31 days | 2) 31 to 90 days | 3) 91 to 365 days | 4) Over 365 days | Total Overdue | Total Due   | Grand Total |
|--------------------|------------------|------------------|-------------------|------------------|---------------|-------------|-------------|
| <b>Eastern</b>     | <b>216</b>       | <b>312</b>       | <b>735</b>        | <b>426</b>       | <b>1,689</b>  | <b>2697</b> | <b>4386</b> |
| 18-64              | 86               | 131              | 368               | 261              | 846           | 730         | 1576        |
| 65+                | 130              | 181              | 366               | 164              | 841           | 1965        | 2806        |
| No DOB             |                  |                  | 1                 | 1                | 2             |             | 2           |
| Under 18           |                  |                  |                   |                  |               | 2           | 2           |
| <b>Northern</b>    | <b>141</b>       | <b>103</b>       | <b>234</b>        | <b>146</b>       | <b>624</b>    | <b>1412</b> | <b>2036</b> |
| 18-64              | 47               | 32               | 140               | 121              | 340           | 326         | 666         |
| 65+                | 94               | 71               | 94                | 25               | 284           | 1083        | 1367        |
| No DOB             |                  |                  |                   |                  |               | 1           | 1           |
| Under 18           |                  |                  |                   |                  |               | 2           | 2           |
| <b>Southern</b>    | <b>172</b>       | <b>275</b>       | <b>620</b>        | <b>435</b>       | <b>1,502</b>  | <b>1919</b> | <b>3421</b> |
| 18-64              | 57               | 106              | 229               | 196              | 588           | 484         | 1072        |
| 65+                | 115              | 169              | 391               | 238              | 913           | 1435        | 2348        |
| No DOB             |                  |                  |                   | 1                | 1             |             | 1           |
| <b>Grand Total</b> | <b>529</b>       | <b>690</b>       | <b>1,589</b>      | <b>1,007</b>     | <b>3,815</b>  | <b>6028</b> | <b>9843</b> |

#### L37 performance breakdown by Area



#### L37 performance breakdown by Area

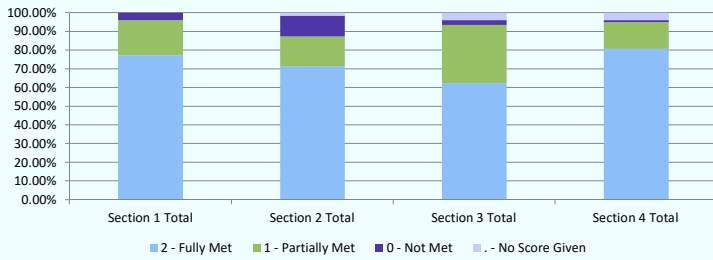
| L37   | Mar-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|-------|--------|--------|--------|--------|--------|--------|--------|--------|
| East  | 64.01% | 53.16% | 51.87% | 51.94% | 52.23% | 51.89% | 51.68% | 50.40% |
| North | 65.47% | 57.71% | 59.45% | 61.04% | 60.37% | 60.43% | 59.97% | 59.84% |
| South | 62.40% | 52.89% | 50.93% | 51.55% | 51.90% | 51.20% | 50.41% | 49.09% |

4.1.3 The quality of assessment, review and care planning audited as good?

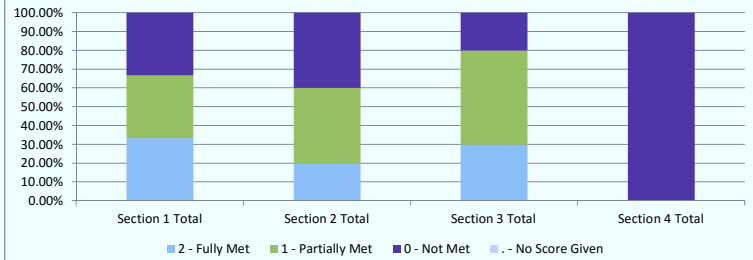
Summary of March 2016 Practice Quality Review

A new desktop process to monitor the quality of social work practice was introduced in January 2016. The process identifies a random sample of cases to be reviewed against a set of standardised assessment criteria. During March, 70 cases were identified for review with 33 completed (47.14%). The process is currently being embedded and it is anticipated that completion rates will improve over time. Of those cases reviewed in March (33), a total 75.28% of all questions are scored as Fully met, with 18.71% being Partially met. During March, 7 Safeguarding Practice Quality Reviews were requested and 3 completed (42.85%). Of these, in total 16.67% were scored as Fully met and 22.92% being Partially met. Further reporting metrics are in development with the Principal Social Worker.

March 2016 Practice Quality Review Scores



March 2016 Safeguarding Adults Practice Quality Review Scores



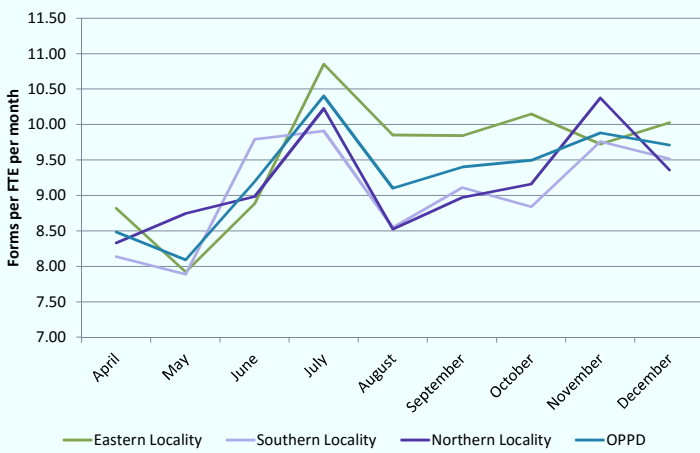
4.1.4 Is the user/carer perception of the quality of assessment, review and care planning good?

to be developed - summary of quarterly complaints / compliments

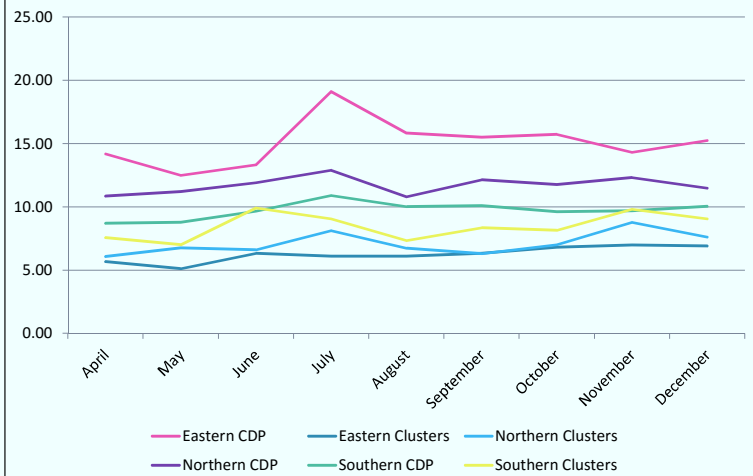
Area for development - feedback

4.1.5 Productivity of teams

Number of Assessments and Reviews completed per FTE per month by Area

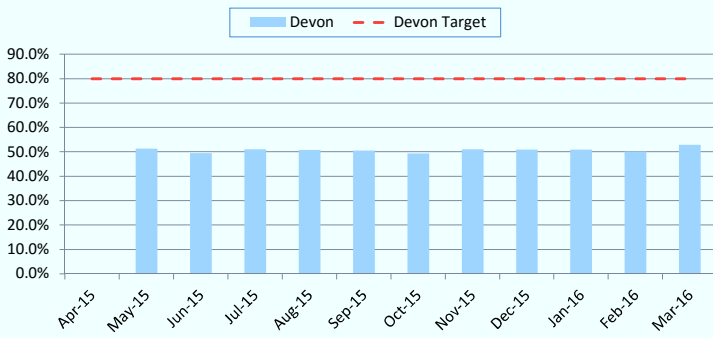


Completed Assessment and Reviews per FTE per month by team type

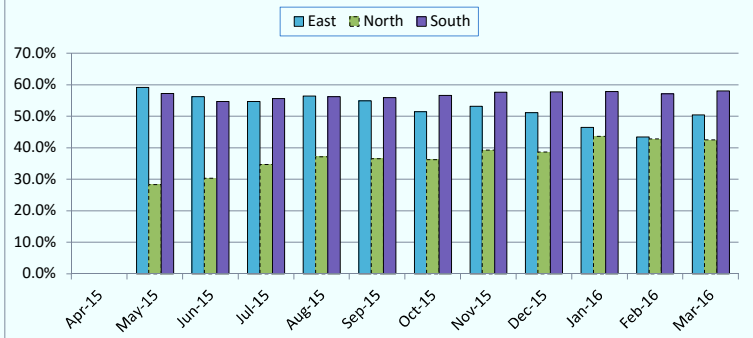


4.1.6 Is our safeguarding response timely?

L74a Safeguarding Strategy meetings held within 7 days



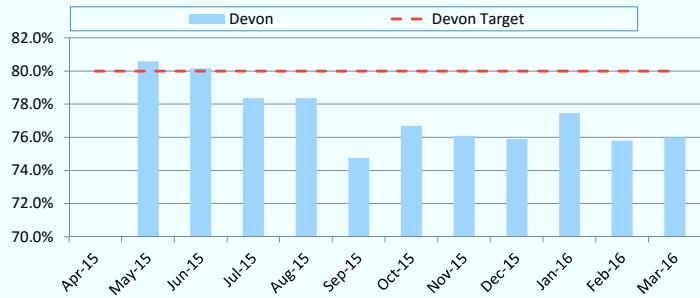
L74a Safeguarding Strategy meetings held within 7 days



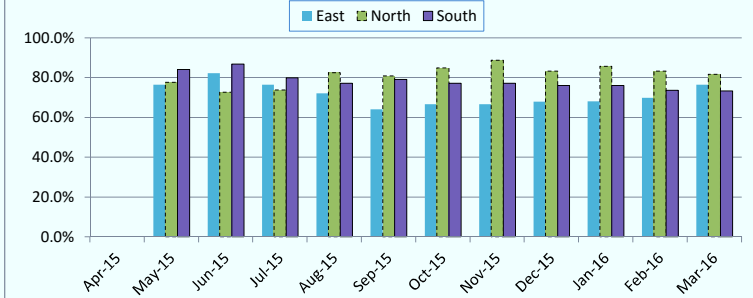
| L74a  | Mar-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Target |
|-------|--------|--------|--------|--------|--------|--------|--------|--------|
| Devon | 49.12% | 49.40% | 51.10% | 50.90% | 51.00% | 50.13% | 52.99% | 80.00% |

| L74a  | Mar-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|-------|--------|--------|--------|--------|--------|--------|--------|--------|
| East  | 57.62% | 54.97% | 51.52% | 53.23% | 51.18% | 46.55% | 43.48% | 50.46% |
| North | 21.92% | 36.62% | 36.23% | 39.34% | 38.71% | 43.64% | 42.86% | 42.55% |
| South | 56.41% | 56.00% | 56.67% | 57.73% | 57.80% | 57.94% | 57.14% | 58.06% |

L77 Safeguarding Case Conferences held within 30 days of Strategy Meeting



L77 Safeguarding Case Conferences held within 30 days of Strategy Meeting



| L77   | Mar-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Target |
|-------|--------|--------|--------|--------|--------|--------|--------|--------|
| Devon | 82.20% | 76.70% | 76.10% | 75.90% | 77.50% | 75.81% | 76.00% | 80.00% |

| L77   | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|-------|--------|--------|--------|--------|--------|--------|--------|--------|
| East  | 72.22% | 64.10% | 66.67% | 66.67% | 68.00% | 68.18% | 70.00% | 76.47% |
| North | 82.61% | 80.95% | 85.00% | 88.89% | 83.33% | 85.71% | 83.33% | 81.82% |
| South | 77.27% | 79.17% | 77.27% | 77.27% | 76.19% | 76.19% | 73.68% | 73.33% |

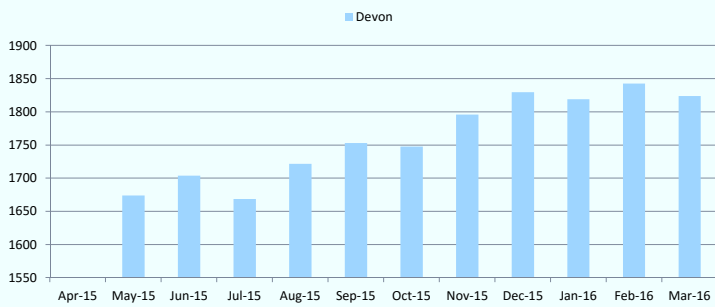


## 4.1.7 Are safeguarding enquiries and concerns recurring for the same people?

Area in development: Repeat enquiries and concerns within 12 months

## 4.1.8 Is our use of Mental Capacity Act assessments proportionate?

**L27 Mental Capacity Act assessments completed**



| L27   | Mar-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|-------|--------|--------|--------|--------|--------|--------|--------|--------|
| Devon | 1,598  | 1,753  | 1,748  | 1,796  | 1,830  | 1,819  | 1,843  | 1,824  |

## 4.1.9 What are the outcomes for the clients?

Area in development:- SALT sequels to assessment

Clients having multiple assessments through the year

Outcomes of assessments ie close/nfa; social care offer

% of population referred to social care – prevalence of need

## 4.1.10 Transitions into Adult Services

Area in development: Preparing for Adulthood activity monitoring and reporting

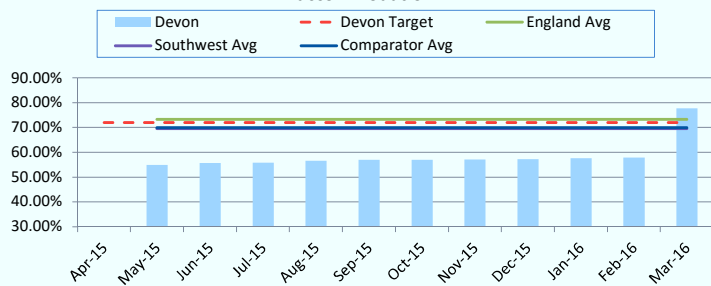
## 4.2 Are we improving peoples lives OR Are we helping people to improve their lives?

Summary of Performance (Insight and Impact analysis) -

During 2014-15, service user classifications changed from primary client group to recording the primary reason for their support. This reduced the numbers of service users receiving Learning Disability Support and adversely impacted on the 2014-15 final performance against ASCOF indicators 1E (employment) and 1G (settled accommodation). Current performance benchmarks well and is ahead of all 2014-15 comparators for both indicators. The comparable indicators (ASCOF 1F and 1H) report performance for service users aged 18-69 with a Mental Health Support reason. Current performance is below all 2014-15 benchmarks with regard to employment and in excess of 2014-15 comparators for accommodation. Service user perceptions are capture annually in the national Adult Social Care User Survey. Performance against the quality of life indicator (ASCOF 1A) is marginally below comparators in 2014-15, but overall is static against the previous year.

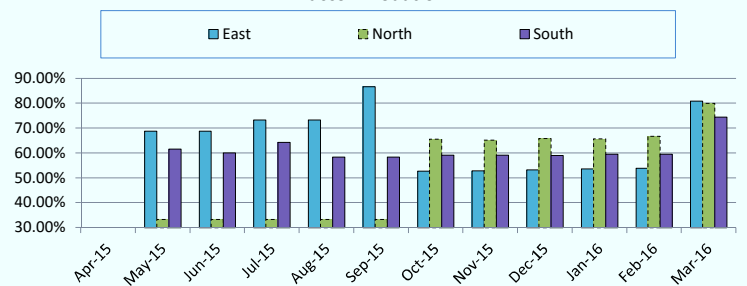
## 4.2.1 Are younger adults living independently?

**1G Proportion of adults with learning disabilities in stable accommodation**



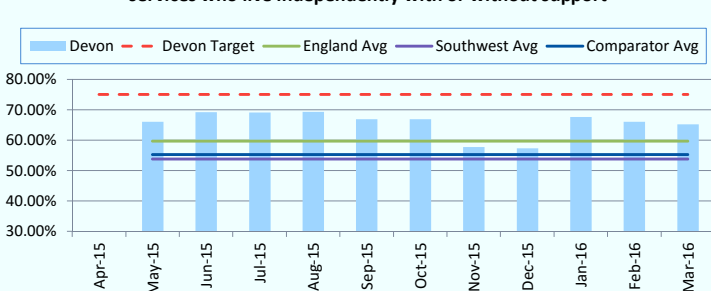
| 1G    | Mar-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Target | Devon 14/15 | England 14/15 |
|-------|--------|--------|--------|--------|--------|--------|-------------|---------------|
| Devon | 71.24% | 57.32% | 57.65% | 57.88% | 77.79% | 72.10% | 65.60%      | 73.30%        |

**1G Proportion of adults with learning disabilities in stable accommodation**



| 1G    | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|-------|--------|--------|--------|--------|--------|--------|--------|--------|
| East  | 73.33% | 86.67% | 52.71% | 52.84% | 53.30% | 53.58% | 53.87% | 80.92% |
| North | 33.33% | 33.33% | 65.56% | 65.22% | 65.85% | 65.77% | 66.76% | 79.95% |
| South | 58.33% | 58.33% | 59.17% | 59.15% | 59.06% | 59.51% | 59.60% | 74.50% |

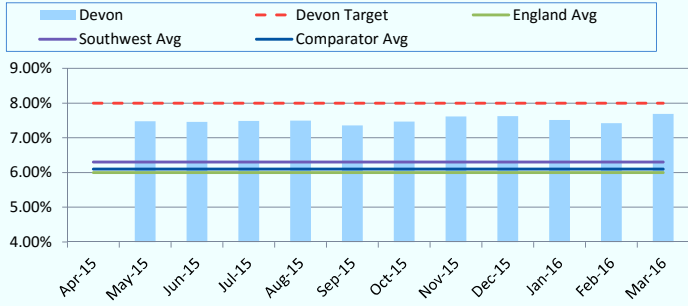
**1H Proportion of adults in contact with secondary mental health services who live independently with or without support**



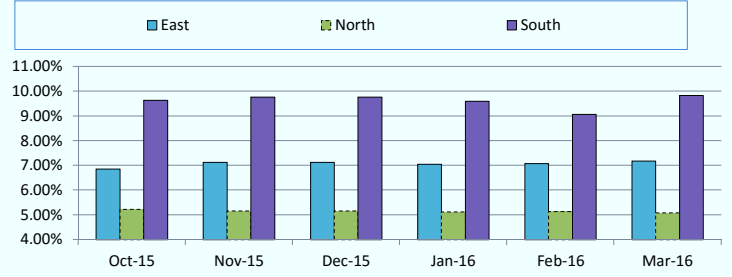
| 1H    | Mar-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Target 15/16 | England 14/15 | SW 14/15 |
|-------|--------|--------|--------|--------|--------|--------------|---------------|----------|
| Devon | 63.58% | 57.31% | 67.67% | 66.04% | 65.27% | 75.00%       | 59.70%        | 53.80%   |

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## 1E Proportion of adults with learning disabilities in paid employment



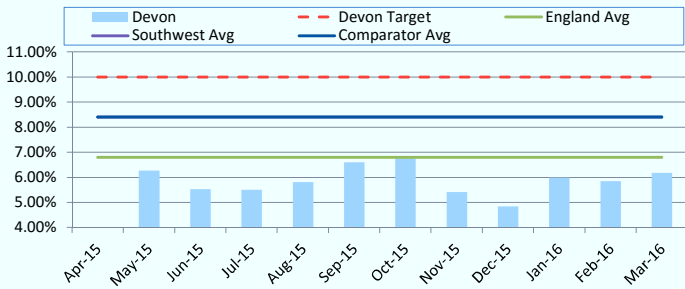
## 1E Proportion of adults with learning disabilities in paid employment



| 1E    | Mar-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Target | Devon 14/15 | England 14/15 |
|-------|--------|--------|--------|--------|--------|--------|-------------|---------------|
| Devon | 9.04%  | 7.63%  | 7.52%  | 7.42%  | 7.69%  | 8.00%  | 6.80%       | 6%            |

| 1E    | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|-------|--------|--------|--------|--------|--------|--------|
| East  | 6.85%  | 7.12%  | 7.12%  | 7.05%  | 7.07%  | 7.18%  |
| North | 5.23%  | 5.16%  | 5.16%  | 5.12%  | 5.14%  | 5.08%  |
| South | 9.63%  | 9.76%  | 9.76%  | 9.59%  | 9.06%  | 9.83%  |

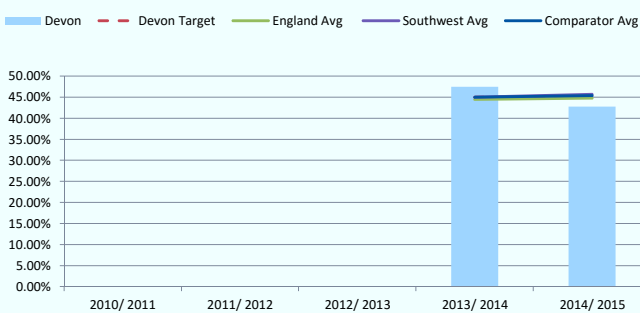
## 1F Proportion of adults in contact with secondary mental health in paid employment



| 1F    | Mar-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Target | Devon 14/15 | England 14/15 |
|-------|--------|--------|--------|--------|--------|--------|-------------|---------------|
| Devon | 6.36%  | 4.84%  | 5.99%  | 5.85%  | 6.19%  | 10.00% | 6.30%       | 6.80%         |

### 4.2.3 Are people getting enough social contact?

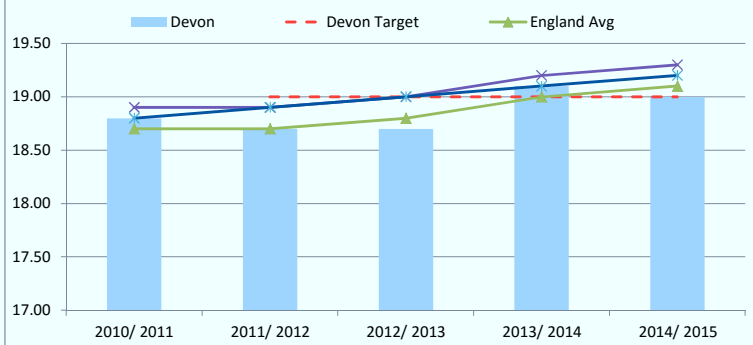
#### 1I part 1 Proportion of people who use services who reported that they had as much social contact as they would like



| 1I pt 1 | 2013/14 | 2014/15 | Target 15/16 | England 14/15 | SW 14/15 |
|---------|---------|---------|--------------|---------------|----------|
| Devon   | 47.50%  | 42.80%  | 45%          | 44.80%        | 45.70%   |

### 4.2.4 Are service users saying their quality of life is improving?

#### 1A Social Care related quality of life



| 1A    | 2010/11 | 2011/12 | 2012/13 | 2013/14 | 2014/15 | Target 15/16 | England 14/15 | Comp. 14/15 |
|-------|---------|---------|---------|---------|---------|--------------|---------------|-------------|
| Devon | 18.8    | 18.7    | 18.7    | 19.1    | 19.0    | 19.0         | 19.1          | 19.2        |

### 4.2.5 What are the outcomes of what we do?

Area for development: Information from service users annual reviews What data is on the review tab? What can it tell us? Embedding of the POET questionnaire into future practice and process

# Agenda Item 10

## Vision Priority 5: To ensure the social care workforce can deliver effective, high quality services

### 5.1. Do we have a workforce which is well trained and competent to meet the needs of service users and carers?

#### Summary of Performance (Insight and Impact analysis) -

This section of the Adult Performance Framework has been developed to monitor the quality of the Adult Social Care workforce. Its focus is to provide a combined view of the current workforce in terms of numbers, vacancies and turnover, sickness absence, qualifications, supervision and appraisal. The intention is to answer a range of important questions, for example: Is the workforce happy/unhappy? Are they supported by Managers? Do we enable them to develop? Do we make sure they have the right tools to do their jobs well? Are we able to recruit suitable staff?

Headline themes: Devon's 2014-15 turnover rates for Social Workers and Occupational Therapists is in excess of the national benchmarks published in the NMDS-SC. Internally comparing turnover between roles shows higher turnover in Social Workers than for Occupational Therapists and other assessment roles. The recent regrading of Social Workers is starting to stabilise this position. Sickness absence levels are currently good and below target, but the level of absence attributable to mental health/psychological issues (14.69%) could give cause for concern. The qualification profile of the workforce is good with over 38% qualified to NVQ Level 4 or above. There is an improving trend in the numbers of supervision and appraisals being undertaken.

#### 5.1.1 Staff FTE

The following charts aim to show the actual FTE worked during the month compared to the budgeted FTE. They also show a breakdown of agency staff employed, vacancies and FTE lost to sickness, maternity and adoption leave. The negative figure for Mar-16 Vacancy for HSCT South is because of an error where no Budgeted FTE is displayed for the Hospital Discharge Team. Agency and vacancy data is only available since March 2016

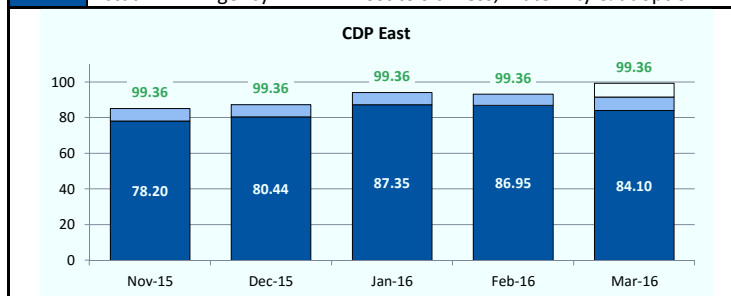
#### Key:

|                                                                      |  |
|----------------------------------------------------------------------|--|
| 999 Budgeted FTE                                                     |  |
| Vacancies                                                            |  |
| FTE lost to sickness, maternity & adoption leave                     |  |
| Actual FTE + Agency FTE - FTE lost to sickness, maternity & adoption |  |

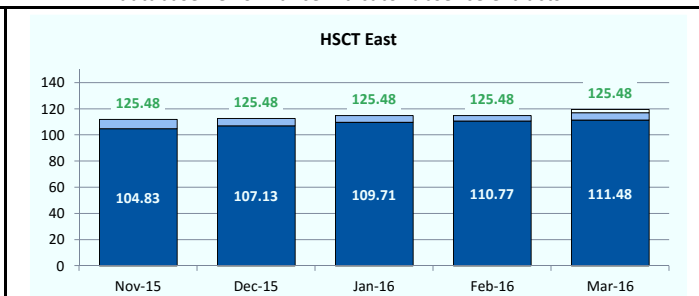
\*These figures do not take into account any annual leave taken during the period or days spent on training courses.

#### Data sources:

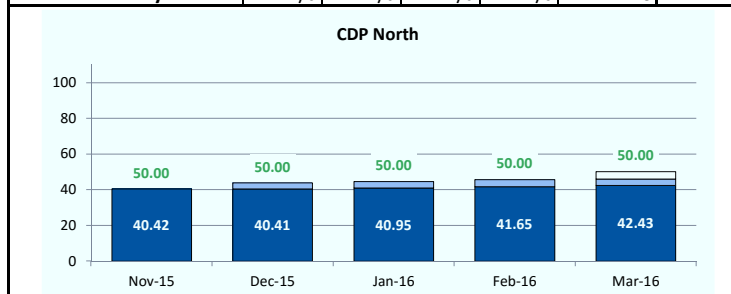
HR database Budgeted FTE monthly extract  
HR database Performance Indicator absence extracts



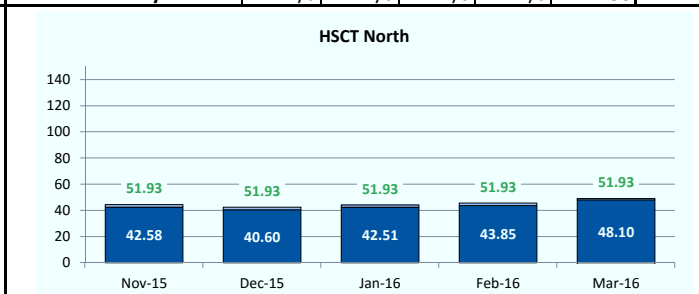
|                      | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|----------------------|--------|--------|--------|--------|--------|
| FTE Lost to Sickness | 4.07   | 3.52   | 3.18   | 2.60   | 4.91   |
| Maternity & Adoption | 2.84   | 3.41   | 3.65   | 3.65   | 2.65   |
| Agency               | n/a    | n/a    | n/a    | n/a    | 0.00   |
| Vacancy              | n/a    | n/a    | n/a    | n/a    | 7.70   |



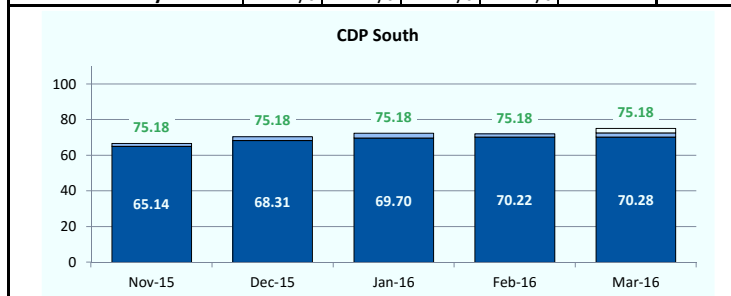
|                      | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|----------------------|--------|--------|--------|--------|--------|
| FTE Lost to Sickness | 5.42   | 3.93   | 3.66   | 2.60   | 3.91   |
| Maternity & Adoption | 1.59   | 1.59   | 1.59   | 1.59   | 1.59   |
| Agency               | n/a    | n/a    | n/a    | n/a    | 7.41   |
| Vacancy              | n/a    | n/a    | n/a    | n/a    | 2.50   |



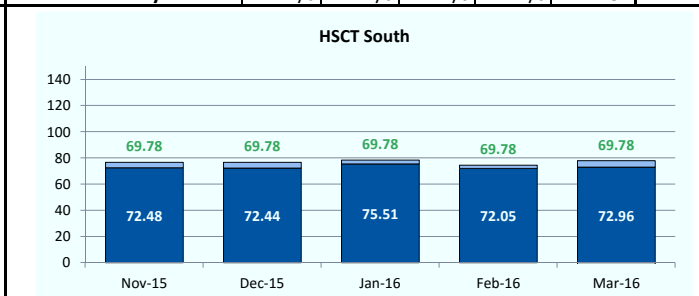
|                      | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|----------------------|--------|--------|--------|--------|--------|
| FTE Lost to Sickness | 1.83   | 1.96   | 2.97   | 2.63   | 2.45   |
| Maternity & Adoption | 1.65   | 1.65   | 1.00   | 1.00   | 1.00   |
| Agency               | n/a    | n/a    | n/a    | n/a    | 0.00   |
| Vacancy              | n/a    | n/a    | n/a    | n/a    | 4.12   |



|                      | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|----------------------|--------|--------|--------|--------|--------|
| FTE Lost to Sickness | 1.75   | 4.33   | 3.10   | 2.25   | 2.35   |
| Maternity & Adoption | 1.81   | 1.81   | 1.81   | 1.81   | 1.00   |
| Agency               | n/a    | n/a    | n/a    | n/a    | 2.00   |
| Vacancy              | n/a    | n/a    | n/a    | n/a    | -1.52  |



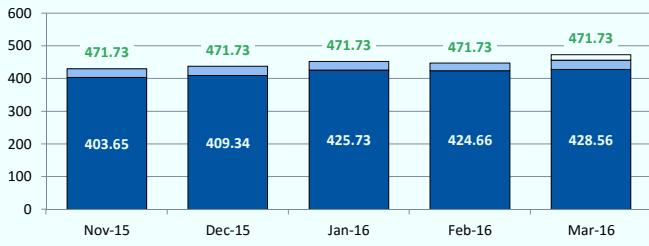
|                      | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|----------------------|--------|--------|--------|--------|--------|
| FTE Lost to Sickness | 1.44   | 2.17   | 2.79   | 1.86   | 2.26   |
| Maternity & Adoption | 0.00   | 0.00   | 0.00   | 0.00   | 0.00   |
| Agency               | n/a    | n/a    | n/a    | n/a    | 1.00   |
| Vacancy              | n/a    | n/a    | n/a    | n/a    | 2.64   |



|                      | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|----------------------|--------|--------|--------|--------|--------|
| FTE Lost to Sickness | 2.62   | 2.66   | 1.29   | 0.75   | 2.45   |
| Maternity & Adoption | 1.61   | 1.61   | 1.61   | 1.61   | 2.42   |
| Agency               | n/a    | n/a    | n/a    | n/a    | 9.50   |
| Vacancy              | n/a    | n/a    | n/a    | n/a    | -13.05 |

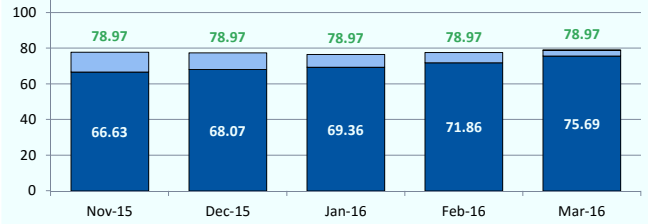
# Agenda Item 10

**Care Management**



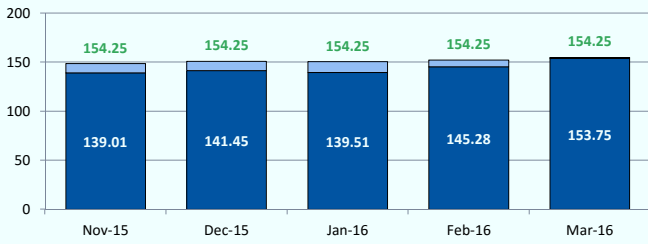
|                                 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|---------------------------------|--------|--------|--------|--------|--------|
| <b>FTE Lost to Sickness</b>     | 17.13  | 18.56  | 16.99  | 13.52  | 19.12  |
| <b>Maternity &amp; Adoption</b> | 9.50   | 10.07  | 9.66   | 9.66   | 8.66   |
| <b>Agency</b>                   | n/a    | n/a    | n/a    | n/a    | 19.91  |
| <b>Vacancy</b>                  | n/a    | n/a    | n/a    | n/a    | 16.96  |

**Residential**



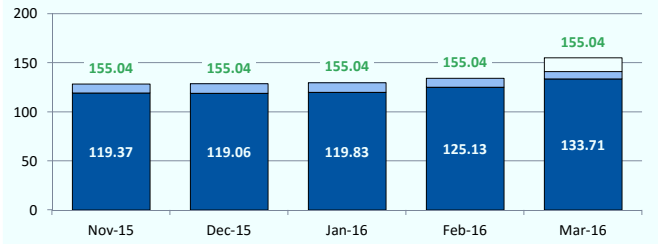
|                                 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|---------------------------------|--------|--------|--------|--------|--------|
| <b>FTE Lost to Sickness</b>     | 6.70   | 6.05   | 5.21   | 4.19   | 2.26   |
| <b>Maternity &amp; Adoption</b> | 4.39   | 3.27   | 2.02   | 1.46   | 0.87   |
| <b>Agency</b>                   | n/a    | n/a    | n/a    | n/a    | 0.00   |
| <b>Vacancy</b>                  | n/a    | n/a    | n/a    | n/a    | 0.15   |

**Community Teams**



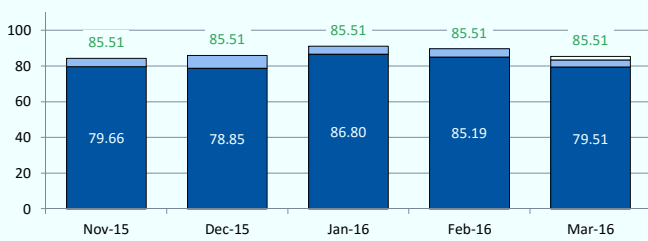
|                                 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|---------------------------------|--------|--------|--------|--------|--------|
| <b>FTE Lost to Sickness</b>     | 8.62   | 8.60   | 10.13  | 6.19   | 7.92   |
| <b>Maternity &amp; Adoption</b> | 0.81   | 0.81   | 0.81   | 0.81   | 0.81   |
| <b>Agency</b>                   | n/a    | n/a    | n/a    | n/a    | 0.00   |
| <b>Vacancy</b>                  | n/a    | n/a    | n/a    | n/a    | 0.19   |

**Social Care Reablement**



|                                 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|---------------------------------|--------|--------|--------|--------|--------|
| <b>FTE Lost to Sickness</b>     | 6.12   | 6.63   | 6.99   | 6.25   | 5.91   |
| <b>Maternity &amp; Adoption</b> | 2.95   | 2.95   | 2.95   | 2.95   | 1.30   |
| <b>Agency</b>                   | n/a    | n/a    | n/a    | n/a    | 0.00   |
| <b>Vacancy</b>                  | n/a    | n/a    | n/a    | n/a    | 14.11  |

**Social Care Commissioning**



|                                 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|---------------------------------|--------|--------|--------|--------|--------|
| <b>FTE Lost to Sickness</b>     | 3.67   | 6.08   | 3.36   | 3.57   | 3.02   |
| <b>Maternity &amp; Adoption</b> | 1.00   | 1.00   | 1.00   | 1.00   | 1.00   |
| <b>Agency</b>                   | n/a    | n/a    | n/a    | n/a    | 0.00   |
| <b>Vacancy</b>                  | n/a    | n/a    | n/a    | n/a    | 1.98   |

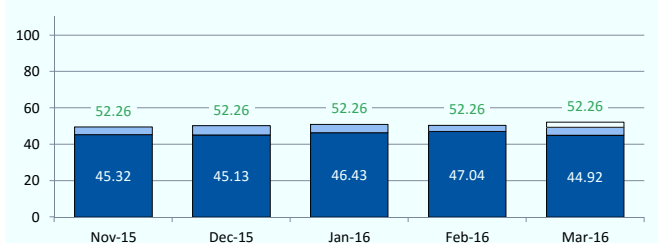
The charts below aim to show the actual FTE worked during the month compared to the budgeted FTE for Senior Social Workers and Occupational Therapists. They also show a breakdown of agency staff employed, vacancies and FTE lost to sickness, maternity and adoption leave.

**Senior Social Worker**



|                                 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|---------------------------------|--------|--------|--------|--------|--------|
| <b>FTE Lost to Sickness</b>     | 3.90   | 3.16   | 3.27   | 2.16   | 3.57   |
| <b>Maternity &amp; Adoption</b> | 4.41   | 4.41   | 4.41   | 4.41   | 3.59   |
| <b>Agency</b>                   | n/a    | n/a    | n/a    | n/a    | 17.10  |
| <b>Vacancy</b>                  | n/a    | n/a    | n/a    | n/a    | 1.98   |

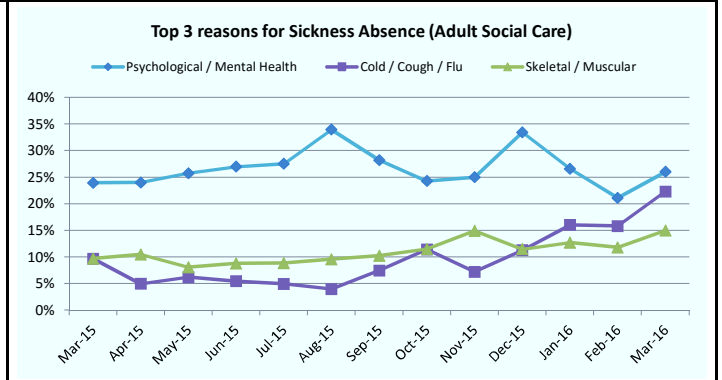
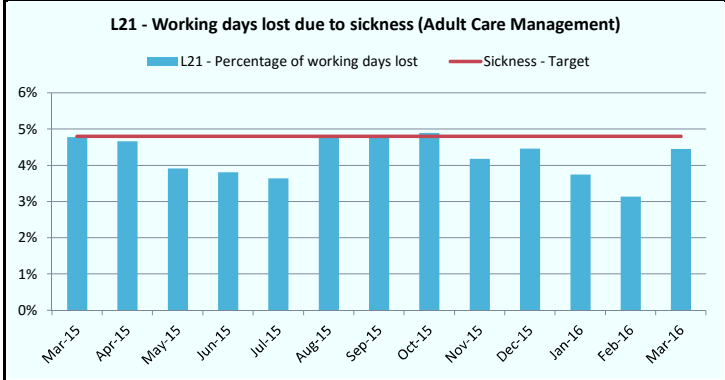
**Occupational Therapist**



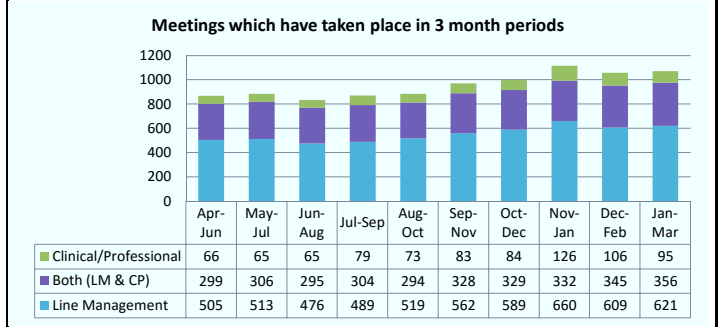
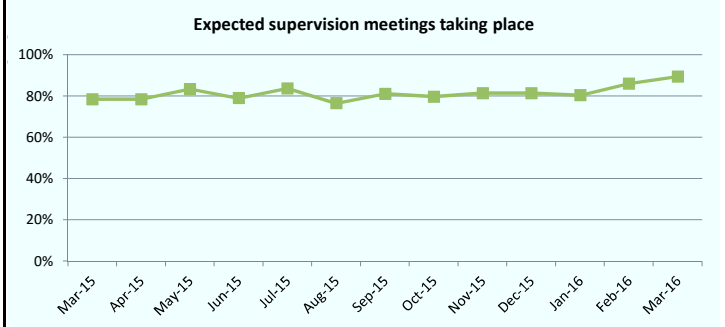
|                                 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|---------------------------------|--------|--------|--------|--------|--------|
| <b>FTE Lost to Sickness</b>     | 2.55   | 3.46   | 2.96   | 1.71   | 2.00   |
| <b>Maternity &amp; Adoption</b> | 1.61   | 1.61   | 1.61   | 1.61   | 2.42   |
| <b>Agency</b>                   | n/a    | n/a    | n/a    | n/a    | 2.81   |
| <b>Vacancy</b>                  | n/a    | n/a    | n/a    | n/a    | 2.92   |

# Agenda Item 10

## 5.1.2 Absence



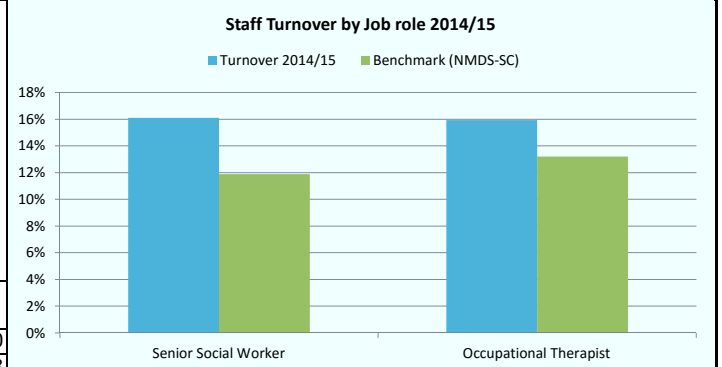
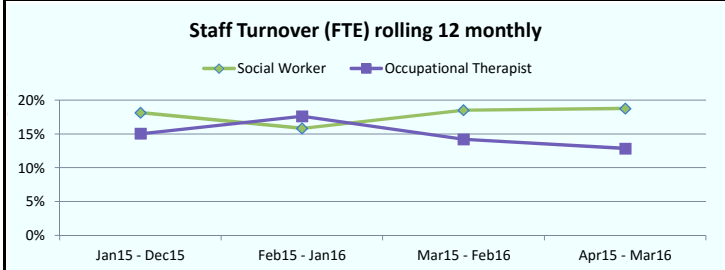
## 5.1.3 Appraisal and supervision



| Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|--------|--------|--------|--------|--------|--------|--------|--------|
| 76.5%  | 81.0%  | 79.7%  | 81.4%  | 81.4%  | 80.3%  | 85.9%  | 89.4%  |

**Appraisals - 181 staff have had an appraisal since 01/04/2015**  
**Staff - There were 480 staff during the January - March period**

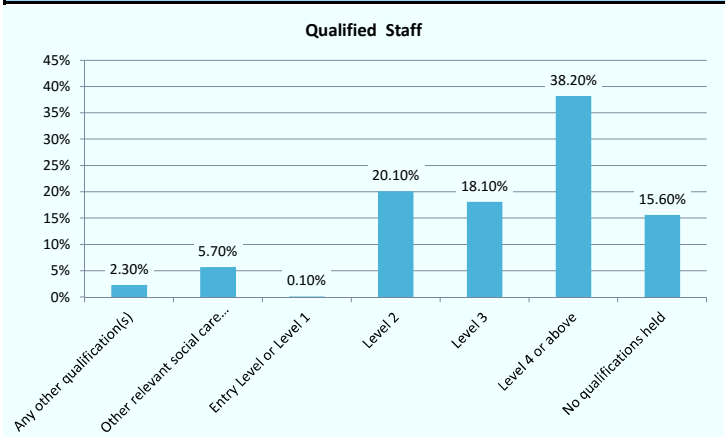
## 5.1.4 Recruitment and retention



| Leavers (Headcount)    | Jan15 - Dec15 | Feb15 - Jan16 | Mar15 - Feb16 | Apr15 - Mar16 |
|------------------------|---------------|---------------|---------------|---------------|
| Senior Social Worker   | 18            | 20            | 19            | 20            |
| Occupational Therapist | 9             | 11            | 9             | 8             |

Please note - Headcounts are calculated as an average of staff employed throughout the 12 month period. All data from Oracle HR database.

## 5.1.5 Qualified workforce



This data is extracted from the NMDS-SC system based on data submitted by DCC in October 2015.

Approximately 28% of employees are recorded as "Not Known" which are not included in the analysis. Work is underway to set up systems to collect this missing data. Once collected the NMDS-SC system will be updated.

All employees where a qualification is mandatory have qualifications recorded in the NMDS-SC

# Agenda Item 10

Vision Priority 6: To ensure that strategic planning and commissioning of adult social care services is integrated with the NHS and other partners

6.1.

Summary of Performance (Insight and Impact analysis) -

## **Devon Education and Learning**

### **Leadership Team - People**

#### **EAL Performance Report Quarter 4 - 2015/16**

#### **Update and discussion**

# 1 Overview

The Q4 report identifies the impact of Education and Learning services, provided and commissioned in against the 3 priority educational outcomes:

- Closing the gap in attainment between the most vulnerable learners and their peers
- Inclusion – Ensuring all learners have appropriate access to educational service and provision
- Quality – Ensuring that the quality of Devon’s educational provision is good or outstanding

### Attainment and Attainment Gaps:

There has been no further update to the main performance indicators reported in Quarter 3 (KS2, KS4). Devon’s 2014/15 attainment data has improved across the Key Stages. The gap across Key Stage 2 has significantly narrowed and Key Stage 4 is in line with national averages. Further information on attainment performance indicators can be found in the Appendix.

However, recently published statistical first release data indicates that the attainment levels for Devon’s Post 16, Children in Need and Children Looked After has improved. Post 16 attainment continues to improve, with initial data indicating Devon is slightly above national averages for those aged 19 achieving a Level 2 qualification. The FSM attainment gap has significantly reduced in this area. Devon’s Children in Need at KS2 has improved and is close to the national average whilst KS4 continues to be above national average. Looked After Children are also performing better with KS2 attainment higher than national averages and KS4 in line with national averages.

Attainment gaps for the most vulnerable learners in the education system remain a focus and challenge.

|         |                                  | Devon | Devon Trend | National | Regional (South West) | Stat Neighbours | Devon Gap |
|---------|----------------------------------|-------|-------------|----------|-----------------------|-----------------|-----------|
| KS2     | Level 4 Reading, Writing & Maths | 82.0  | ↑           | 80       | 80                    | 79.0            | ↓         |
|         | Level 4 Reading                  | 91.0  | ↔           | 89       | 90                    | 89.4            |           |
|         | Level 4 Writing                  | 89.0  | ↑           | 87       | 87                    | 87              |           |
|         | Level 4 Maths                    | 88.0  | ↑           | 87       | 87                    | 86              |           |
| KS4     | KS4 5+A*-C (inc. Eng & Maths)    | 58.1  | ↑           | 53.8     | 58                    | 57.5            | ↓         |
| Post 16 | Attainment of L2 by age 19       | 68.5  | ↑           | 67.9     | 67.5                  |                 | ↓         |

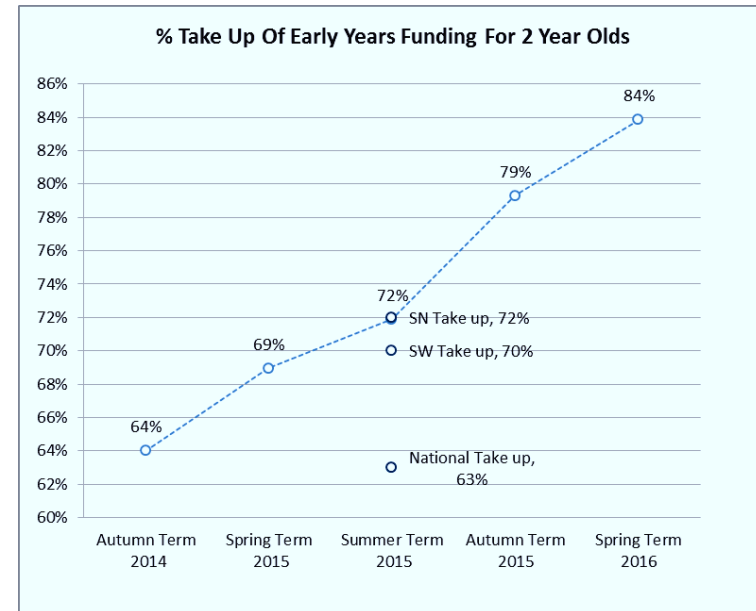
**Key:** ↑↓ Improving Performance ↑ Worsening Performance ↔ Maintaining Performance



## 2 Closing The Gap Early Years

### Take up of Early Years Funding for 2 year olds

There continues to be an improvement in take up of funding for two year olds, with this summer term's take up surpassing last term's high of 79%. Devon performs well against latest National averages and exceeds South West and Statistical Neighbour take up rates.

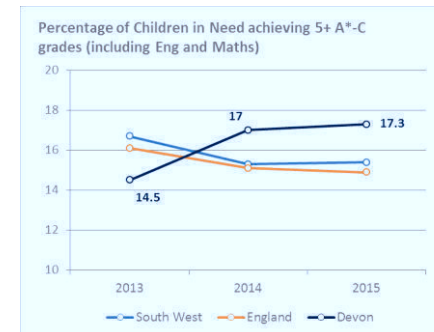
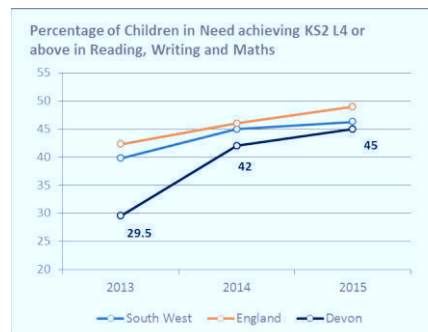


Data Source: DCC Early Years, April 2016

## 2 Closing The Gap Children in Need, Looked After Children

### Children In Need

Initial information from the DfE (Statistical First Release) indicates that attainment at KS2 has significantly improved in Devon over the last two years. However Devon continues to be slightly below the national average (45% in Devon compared to 49% nationally). Attainment at KS4 has improved slightly on last year (0.3%) and initial information indicates that Devon is above the national average (14.9%).



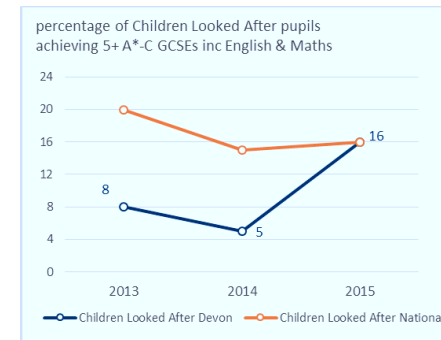
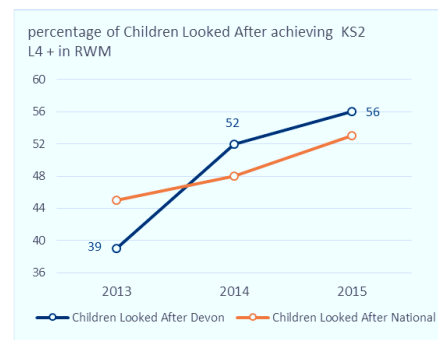
Data source: DfE SFR 41/2015 Analysis of Children in Need (outcomes tables)

### Looked After Children

Attainment at KS2 has improved significantly since 2013 and RAISE online statistics indicate that Devon is performing better than the national average (56% compared to 53% nationally).

Attainment at KS4 has also improved significantly for Looked After Children in 2015 and RAISE online statistics show that outcomes for this group of pupils are now exactly in line with national averages of 16%. This represents a 10% improvement from last year.

Further information can be found in the [Children in Care Annual Report 2015, Virtual School Devon](#) (located in the Education Outcomes tab).

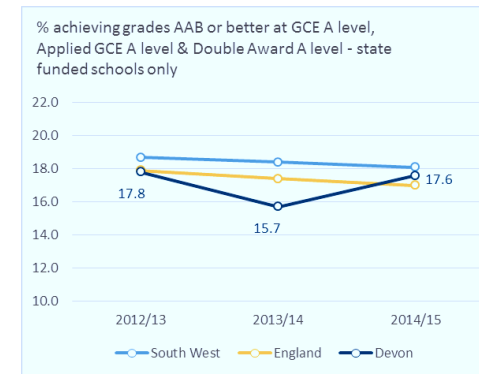


Data source: RAISE Online 2015 Validated Report, 26 March 2016, 2014 and 2013 Reports

## 2 Closing The Gap Post 16

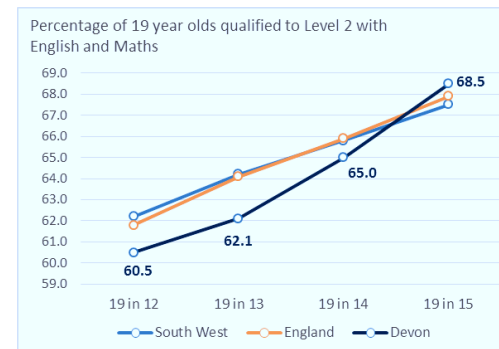
### Post 16 Pupils A Level Results

Initial information indicates that Devon's performance in state funded schools has risen sharply. In 2014/15, 17.6% of pupils achieved grades AAB or better at GCE A Level, Applied A Level and Double Award A Level, compared to 15.7% in 2013/14. Devon is performing better than the national rate for state funded schools (17.0%) but is slightly below the South West average (18.1%).



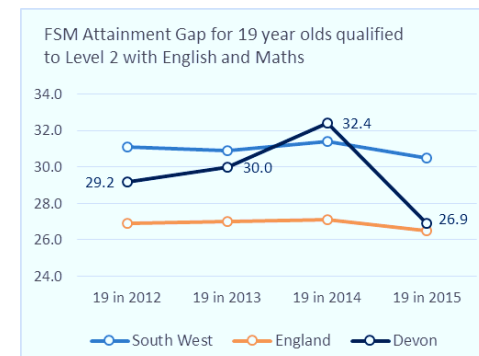
### Attainment of Level 2 qualifications by those aged 19

Initial information indicates a continuing upward trend in the percentage of 19 year olds qualified to Level 2 with English and Maths. Devon has significantly improved its performance in the last year, rising from 65% to 68.5% and is now slightly above the national average (67.9%).



### FSM Attainment Gap those aged 19 achieving Level 2 qualifications

Devon has significantly reduced the attainment gap for its Free School Meal pupils achieving a Level 2 with English and Maths by age 19 (32.4% for 19 year olds in 2014 compared to 26.9% in 2015). This reduction now brings Devon in line with the national average (26.5%) and is largely due to the improved performance of FSM pupils (44.2% of 19 year olds in 2015 achieved compared 35.6% in 2014).

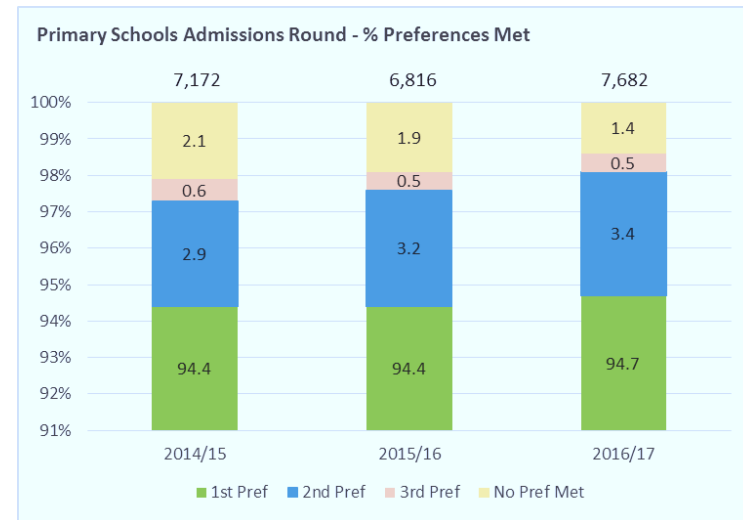


### 3 Inclusion Normal Admissions Round (2016/17)

#### Devon Primary Schools Admissions Round (2016/17)

Devon continues to perform well in the school admissions round. In primary schools 94.7% were offered a place at their first preferred school, whilst 98.6% were offered a place at one of their preferred options. This is an increase on last year where 94.4% were offered a place at their preferred choice and 98.1% were offered a place at one of their preferred options.

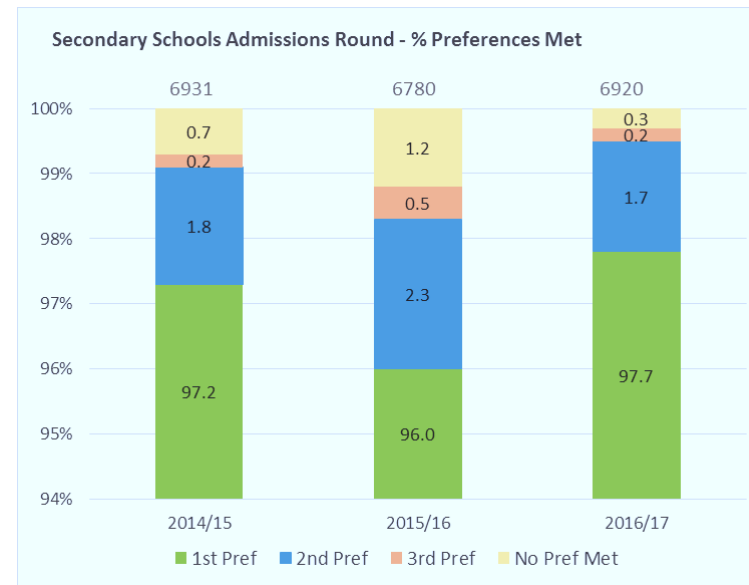
Devon's performance has historically been higher than the national picture. In 2015/16 94.4% were offered a place at their preferred primary school compared to 87.8% nationally (SFR 17/2015 Secondary and primary school applications and offers: March to April 2015). Last year Devon was the top performer in the South West for meeting primary school first preferences. (No comparison data is available for the 2016/17 round).



#### Devon Secondary Schools Admissions Round

Devon has improved its performance with secondary schools where 97.7% offered a place at their first preferred school compared to 96% in last year's admission round. 99.6% were offered a place at one of their preferred options compared to 98.8% in the previous year.

Devon's performance has historically been higher than the national picture. In 2015/16 96% were offered a place at their preferred secondary school compared to 95% nationally (SFR 17/2015 Secondary and primary school applications and offers: March to April 2015). Last year Devon was in the top five LAs in the South West for meeting secondary school first preferences ( no comparison data is available for the 2016/17 round).



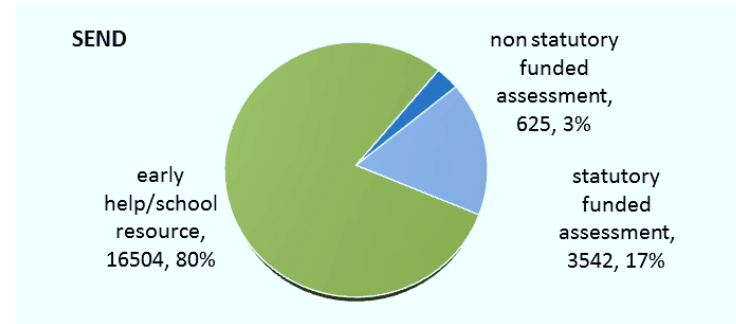
The Admissions team continue to support In-Year Admissions as presented in Quarter 3 report.

Data Source: 2016/17 Admissions Team, Devon County Council April 2016, 2014/15 & 2015/16 DfE SFR School Applications

### 3 Inclusion SEND

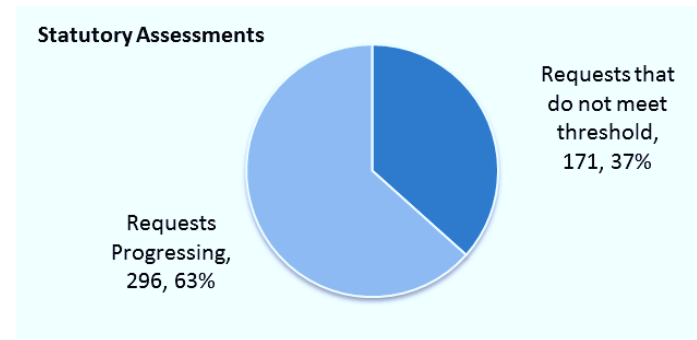
#### SEND Overview

As at 31st March 2016 there is 20,671 children and young people identified with SEN. There are 3,542 statutory statements and plans in the system. Mainstream schools are in receipt of additional resource and support for 625 pupils without requiring a statutory assessment process. The remaining are managed within early help/school resource.



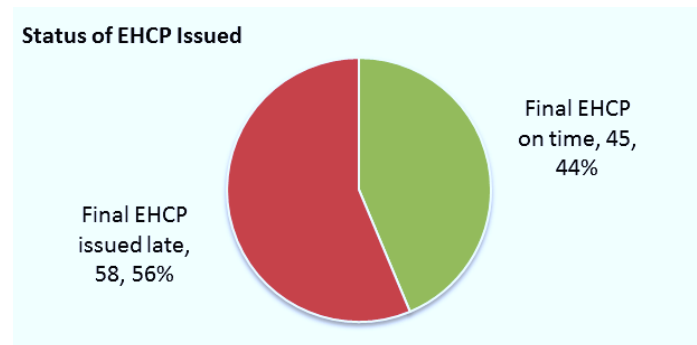
#### Request for Statutory Assessments

For the period 1st April 2015 to 31st March 2016 there have been 467 new requests for SEND assessment of which 296 have met statutory threshold and 171 do not meet the statutory threshold.



#### Statutory Assessments Processed On Time

From 1<sup>st</sup> April 2015, 45 (44%) EHCPs have been issued within the 20 week statutory timescales, compared to previous cumulative figures of 49%. The number of EHCPs issued late is 58 (56%).

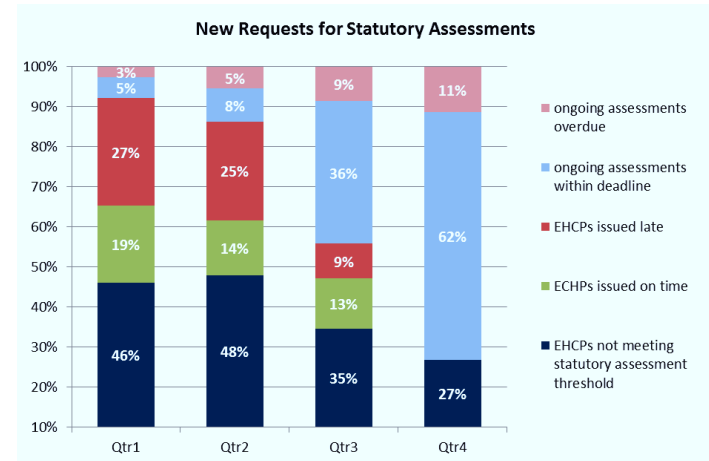


Data source: DCC 0-25 SEN Team, April 2016

### 3 Inclusion SEND

#### Statutory Assessments Processed – last 4 quarters

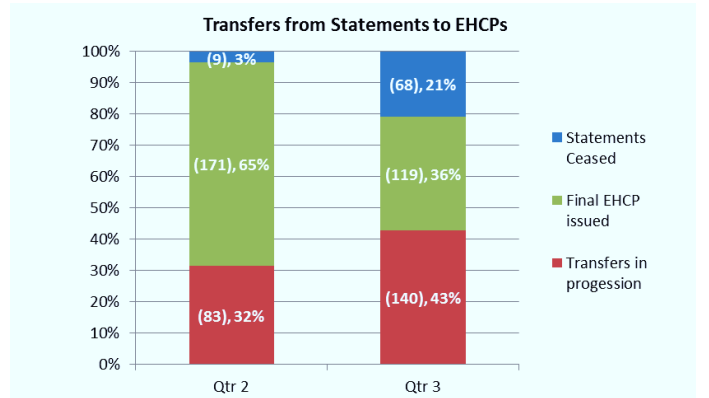
The number of completions and numbers of plans in progress vary widely across quarters according to the timing of the processing of each request. Quarter 4 currently does not have any EHCPs issued as the assessments are still ongoing, the majority of which are within the statutory deadline of up to 20 weeks (62% in quarter 4). These ongoing assessments would be finalised in the next quarter.



#### Year 5 and Year 11 Transfers

Year 5 transfers to EHCPs were processed in the second quarter and Year 11 transfers were processed in the third quarter.

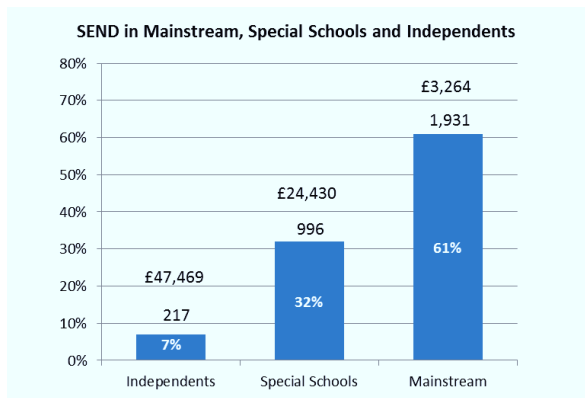
In the second quarter, 3% (9) of statements were ceased as it was agreed an EHCP was no longer required and 32% (83) are transfers in progression. 65% (171) were issued a final EHCP, one of which was issued within the statutory timescales.



In the third quarter, 21% (68) of statements were ceased and 43% (140) are transfers in progression. 36% (119) were issued a final EHCP, 61 of which were issued within the statutory timescales.

#### SEND in Mainstream, Special Schools and Independents

The majority of SEND children are supported in our mainstream schools (61%). Although there are children in specialist and independent placements they tend to be the most complex and therefore the most costly and are not made without due consideration and a robust assessment.



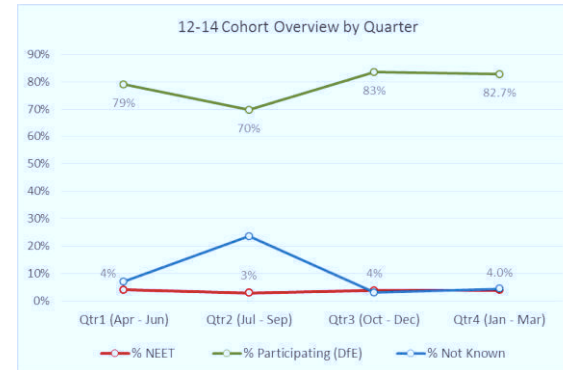
\* note FE data yet to be included

# 3 Inclusion Not in Employment, Education or Training

## Overview

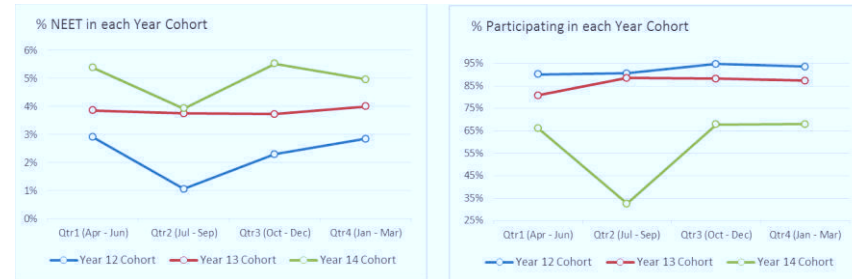
The level of NEET in Devon remains virtually unchanged in the latest quarter (4.0% at Mar 16 compared to 3.9% at Dec 15) and is favourable when compared to the national rate of 4.7% (16-18 year old NEET data by local authority, 2014 figures)).

The proportion of 16-18 year olds participating in a RPA compliant destination is relatively unchanged at approximately 83%.



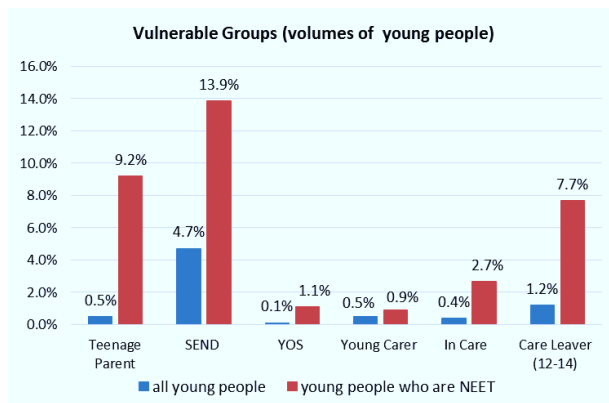
## NEET and Participation within Post 16 Year Groups

Young People are less likely to be NEET and more likely to be participating in Year 12 than in subsequent years. Beyond the age of 18 (usually reached in Year 13) young people are not legally obliged to be in education and training, and most young people will complete their post 16 course of study at the end of year 13.

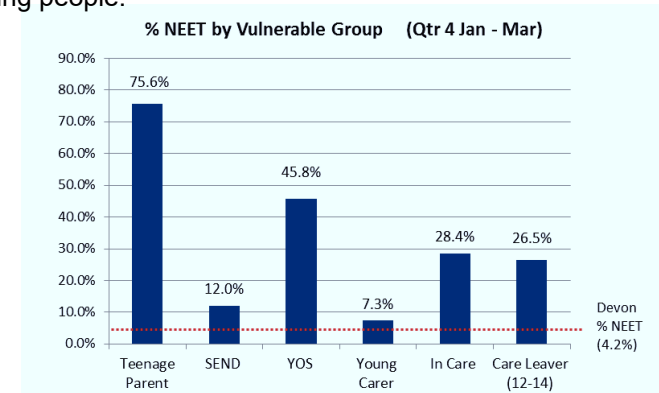


## Vulnerable Groups Volumes

Vulnerable groups are generally disproportionately represented within the NEET group. For example, 0.5% of all young people aged 16-18 in Devon are teenage parents. However, 9.2% of those NEET in Devon are teenage parents.



Young people within vulnerable groups are significantly more likely to be NEET (to varying degrees within each group). For example, 45.8% of young people known to Youth Offending Service are NEET compared to 4.2% NEET for all 16-18 young people.

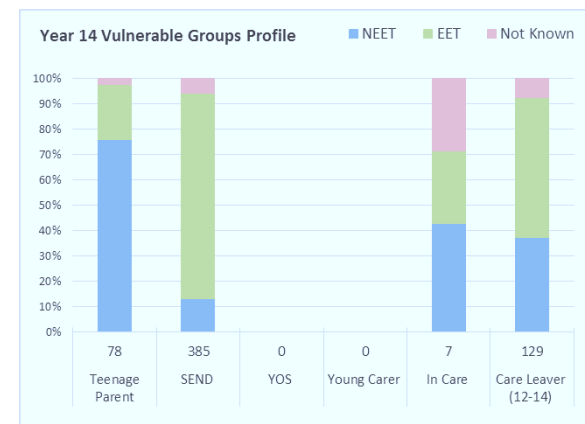
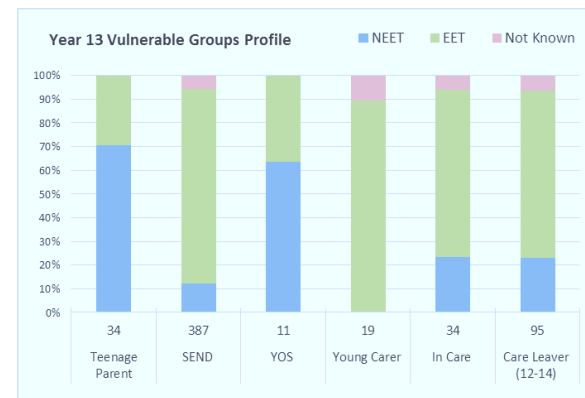
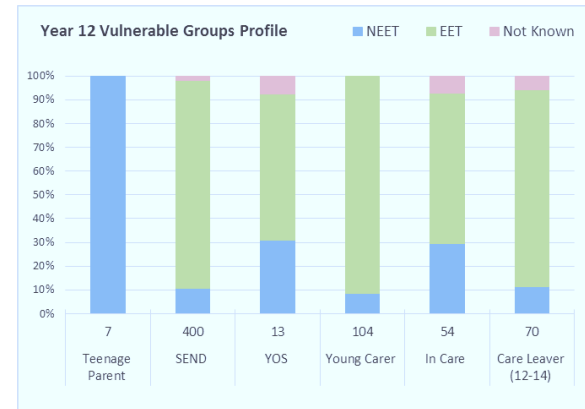


Data Source: Draft Data Dashboard Careers South West, CCIS Database April 2016

### 3 Inclusion Not in Employment, Education or Training

#### Vulnerable Groups Profile (snapshot as at March 2016)

- Teenage parents' participation improves as they get older, with participation rates of 29.4% in Year 13 and 21.8% in Year 14 (compared to 0% in Year 12).
- SEND participation is quite stable across the three year groups, with the percentage in Education, Employment or Training (EET) relatively constant (87.8% in Year 12, 82.2% in Year 13 and 80.8% in Year 14), indicating these young people are remaining in post 16 provision.
- Those working with the Youth Offending Service appear difficult to sustain in Education, Employment and Training as the percentage NEET increases with progression from Year 12 to Year 13. Young offenders is only a valid classification for those aged 17 or under.
- Young Carers cohort drops in Year 13 and disappears in Year 14 as they are no longer classified as young carers after they reach the age of 18.
- In Care cohort are relatively stable in Year 12 and Year 13 and the cohort size drops in Year 14 as many become a Care Leaver
- Its recognised that information for Children in Care would be known and therefore we are working to ensure there is information sharing between Social Services and Careers South West.
- Care Leavers also appear difficult to sustain with the percentage NEET increasing from 23.2% in Year 13 to 37.2% in Year 14. The percentage where their status is Not Known remains relatively stable (5.7% in Year12, 6.3% in Year 13 and 7.8% in Year 14).

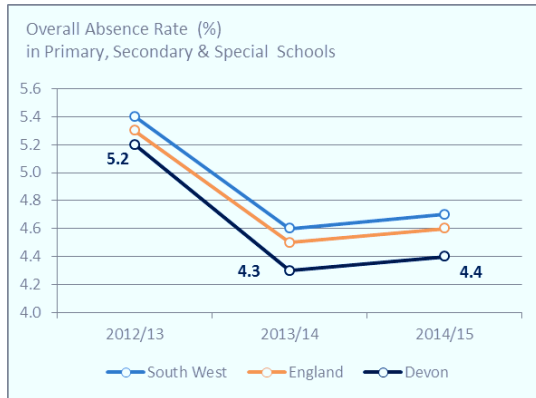




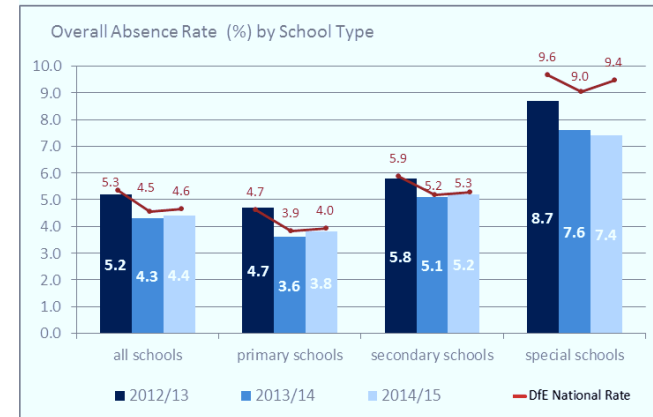
### 3 Inclusion Attendance

#### Overall Absence Rates

Devon has the lowest absence rate of all LAs in the South West. The overall attendance in primary, secondary and special schools is better than the national picture. Devon's absence rate of 4.4% for 2014/15 is lower than the national rate of 4.6% and the South West rate of 4.7%.

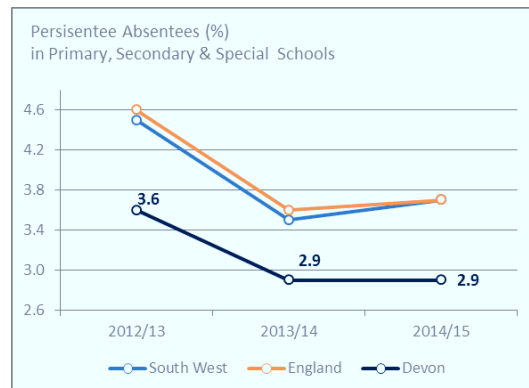


Attendance at Devon Special Schools is significantly better than nationally, with a 7.4% absence rate compared to 9.4% nationally. Devon primary and secondary schools have also consistently been performing better than the national picture.

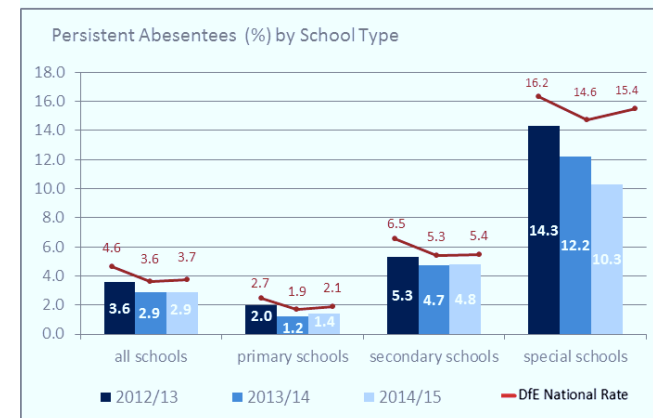


#### Persistent Absentees

Devon is in the best 10% of LAs in England for its low level of persistent absentees, with only 13 LAs having better rates and it has the lowest rate in the South West. Devon continues to perform well with only 2.9% of pupils missing 15 per cent or more school sessions, compared to 3.7% both nationally and in the South West.



Persistent Absentees across all school phases continues to be lower in Devon than nationally. Primary and secondary schools are relatively static whilst special schools have reduced from (10.3% in 2014/15 to 12.2% in 2013/14).



### 3 Inclusion Attendance

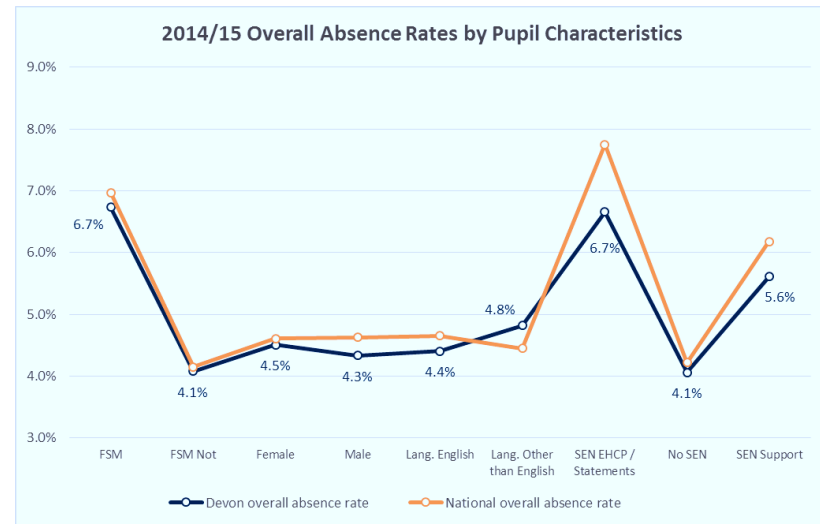
#### Overall Absences – Pupil Characteristics

Devon’s absence rates for pupils with different characteristics are either in line with or below national absence rates.

In Devon, the overall absence rate for pupils eligible for FSM was 6.7% compared to 7.0% nationally, whilst the absence rate for pupils not eligible for FSM was 4.1%, the same as the national rate.

Devon pupils with a SEN Statement or EHCP had an overall absence rate of 6.7%, lower than the national rate of 7.7%, whilst pupils with SEN Support had an absence rate of 5.6% compared to 6.2% nationally.

Males have a slightly lower absence rate than females in Devon (4.3% compared to 4.5%) whilst nationally both genders have the same absence rate (4.6%).



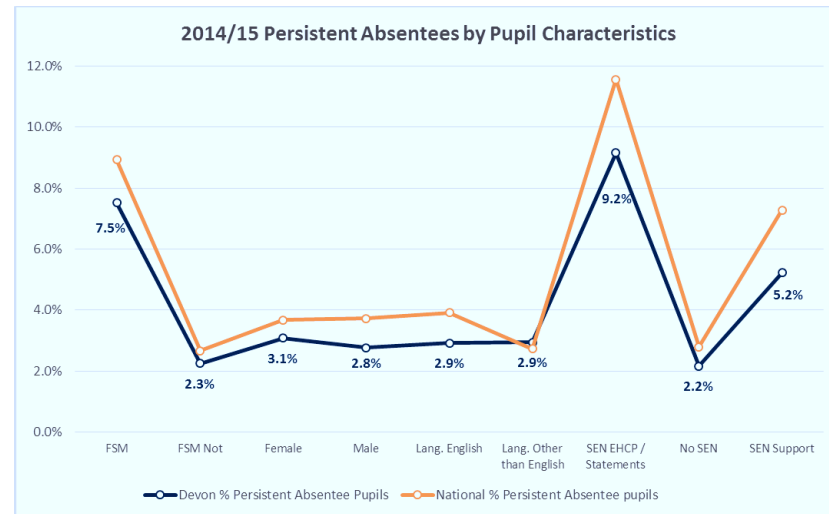
Data Source: DfE SFR10\_2016\_LA\_characteristics\_6terms - underlying data

#### Persistent Absentees – Pupil Characteristics

Devon’s persistent absentee rates are below the national rates, with SEN cohorts having the lowest rates compared to national figures. 9.2% of statement / EHCP pupils were persistently absent compared to 11.6% nationally.

7.5% of Devon FSM pupils were persistent absentees compared to 8.9% nationally, whilst 2.3% of non FSM pupils in Devon were persistent absentees compared to 2.7% nationally.

Male and female pupils in Devon have lower persistent absentee rates than the national picture, with males in Devon being significantly lower (2.8% in Devon compared to 3.7% nationally).

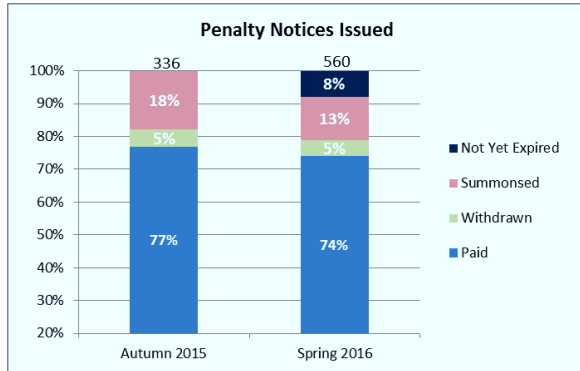


Data Source: DfE SFR10\_2016\_LA\_characteristics\_6terms - underlying data

# 3 Inclusion Attendance

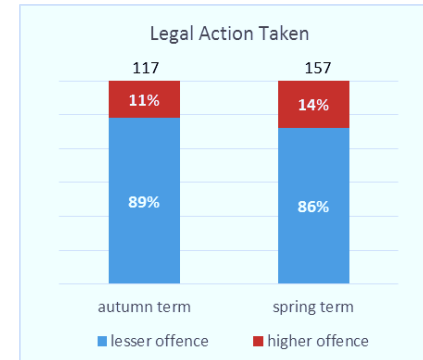
## Penalty Notices Issued

The Devon Education Welfare Service issued 560 penalty notices for the spring term, an increase of 61% compared to the same time last year (348 issued) and an increase of 67% compared to the autumn term (336 issued). (Note: A penalty notice is issued to a parent(s) if the pupil has at least ten, half-day unauthorised absences recorded within the previous six months).



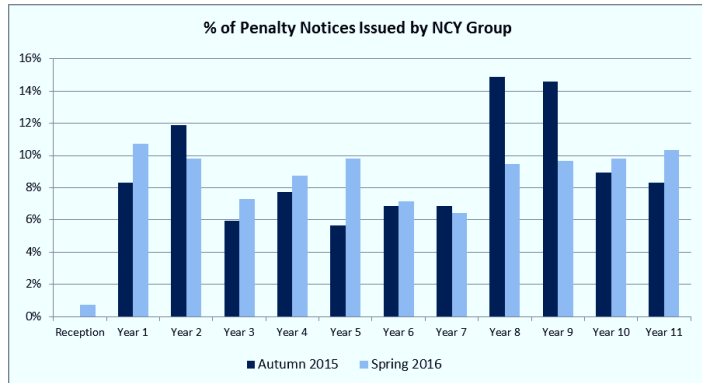
## Legal Action Taken

117 cases were signed off for prosecution in the spring term, slightly higher than the same time last year (110) but lower than this autumn (157). Of the 117 cases, 86% were for the lesser offence (where a parent fails to secure a child's regular attendance) and 14% were for the higher offence (where a parent knows that the child is failing to attend school regularly and fails to ensure the child does so).



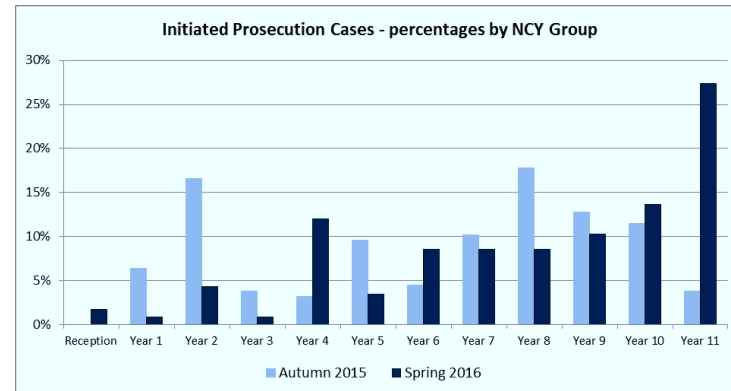
## Penalty Notices by NCY group

The percentage of penalty notices issued in the Spring Term to pupils in NCY groups 8 and 9 has dropped by approximately a third, whilst notices issued to NCY group 5 has risen.



## Legal Action Taken by NCY Group

The percentage of prosecutions against NCY group 11 has risen sharply in the Spring Term compared to prosecutions in the Autumn and accounts for nearly 27% of prosecutions in the Spring.



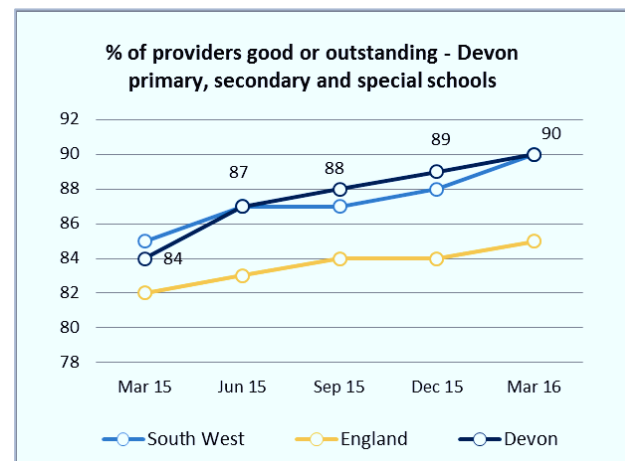
## 4 Quality Ofsted Outcomes

### Devon Primary, Secondary and Special Schools

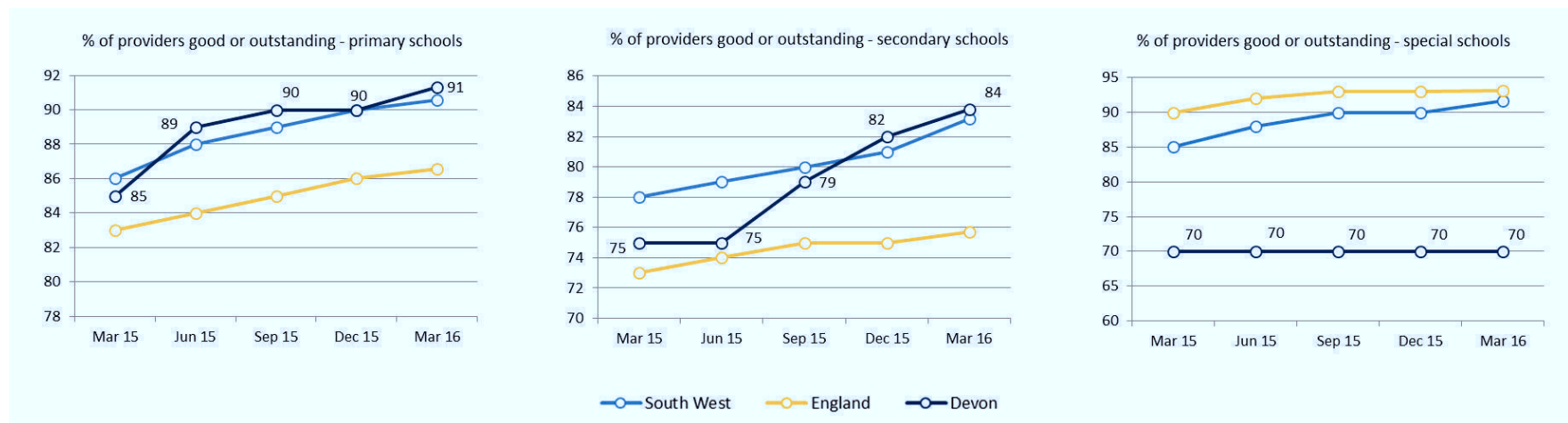
The overall percentage of Devon Primary, Secondary and Special Schools, judged by Ofsted as Good or Outstanding, has increased over the last five quarters. Devon has consistently been performing better than the national picture, with 90% of Devon schools currently good or outstanding compared to the national figure of 85% of schools.

*Data source: Monthly Management Information: Ofsted's school inspections outcomes, Management Information – Schools – 31 March 2016.*

Devon Secondary schools have in particular improved their performance with 84% of secondary schools now at good or outstanding, compared to 75% for the same period last year. There has been no change to Devon Maintained Special Schools, due to the low number of schools (10).



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Data Source: DfE Monthly Management Information: Ofsted School Inspection Outcomes

## 4 Quality Ofsted Outcomes

### Devon Other Special Schools

50% of Devon independent schools are judged to be good or outstanding (5 out of 10 schools) compared to 75.5% nationally. 67% of non maintained special schools are good or outstanding in Devon (2 out of 3 schools), compared to 83.3% nationally.

All three of the Post 16 Specialist Colleges inspected have been judged as good and Devon performance is higher than the national figure (83.6%). Two Post 16 Specialist Colleges have not yet been subjected to a full inspection and are therefore not included in these performance figures.

Definitions;

An independent school not maintained, approved under Education Act as suitable for admission of children with EHC Plans up to age 19.

Non Maintained Special School is approved by Secretary of State as non profit making basis and non maintained by LA.

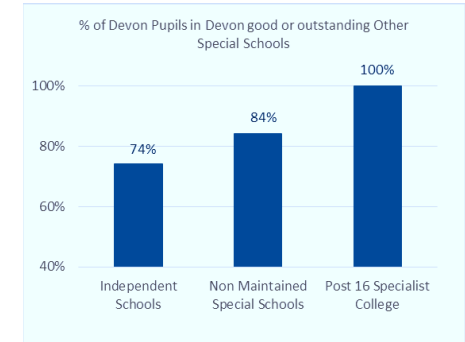
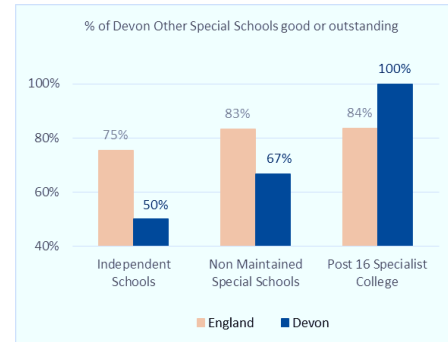
A specialist post 16 institution approved by Secretary of State to admit 16 to 25 year olds

### Devon Early Years Provision

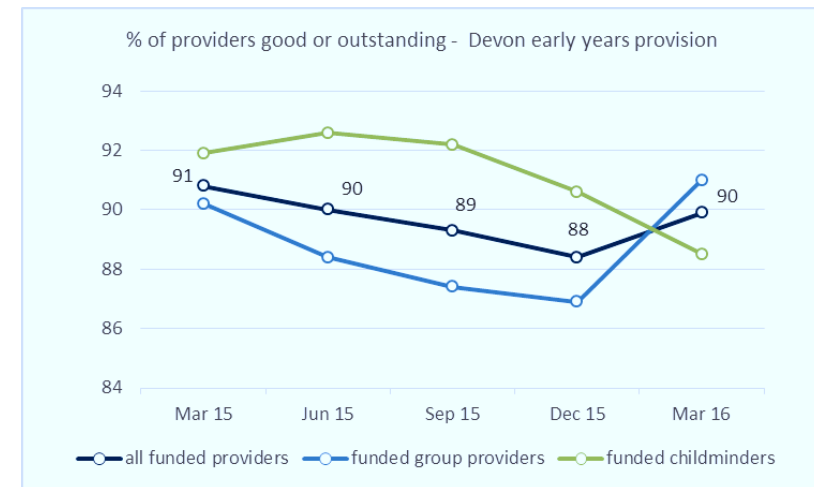
Local information indicates that the performance of all funded early years providers is improving (90% are judged as good or outstanding, compared to 88% in the last quarter).

Within early years provision, the performance of funded group providers (4 or more members of staff, usually run from non-domestic buildings) has improved (91% compared to 87% in the last quarter).

There is a downward trend in the percentage of funded childminders judged as good or outstanding (childminders usually work on their own or with an assistant in their own home and so look after fewer children). 88.5% have been judged as good or outstanding, compared to 91% in the previous quarter.



Data Source: Ofsted Published Reports, April 2016



Data Source: Early Years and Childcare Services, Devon County Council, April 2016

## 4 Quality Ofsted Outcomes

### Devon Pupils

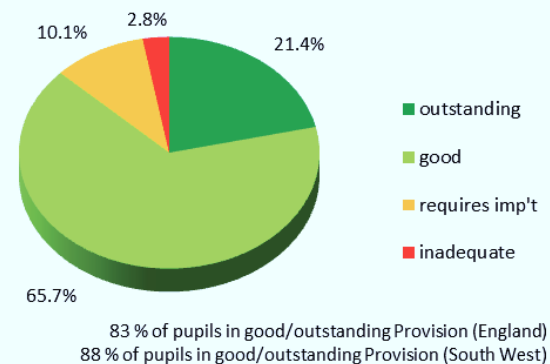
Local information<sup>1</sup> indicates that 87% (83,761) of Devon pupils in primary, secondary and special schools are attending schools that have been judged as Good or Outstanding. This is higher than the national figure of 83%<sup>2</sup> and is in line with regional figure of 88%<sup>2</sup>.

Ofsted's Management Information Report<sup>2</sup> (for the period to 31<sup>st</sup> March 2016) indicates that 90.5% of Devon pupils are attending schools that have been judged as Good or Outstanding. This is also better than national and regional figures (83% and 88%)<sup>2</sup>.

<sup>1</sup> based on Spring 2016 pupil cohort and Ofsted published school reports as at 30 Apr 2016.

<sup>2</sup> Ofsted's Management Information – Schools – 31 March 2016 report (uses Spring 2015 pupil cohort and covers inspections at 31 March 2016).

Devon Pupil Population

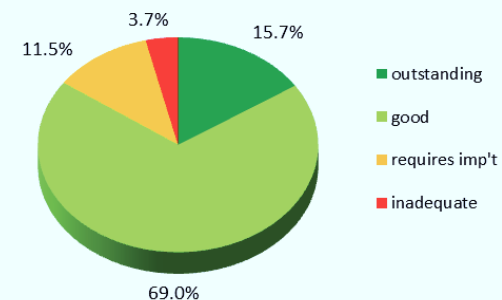


### Devon Disadvantaged Children

Nearly 85% (16,999) of disadvantaged children in Devon are attending Good or Outstanding schools. These are pupils who fall within the RAISE online disadvantaged groups of Free School Meal children, children currently in care and children adopted from care and the DfE's service children classification.

Data source: DfE Pupil Premium July 2015, Ofsted school reports to 30 Apr 2016

Disadvantaged Children

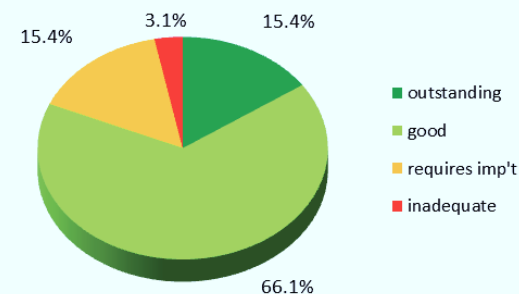


### Devon SEN Pupils

81.5% (2,382) of pupils with statements of special educational needs or education, health and care plans are attending Good or Outstanding Schools.

Data source: Spring Census 2016, Ofsted school reports as at 30 Apr 2016

Pupils with Statements or EHCPs



## Appendix: Overall Performance (National Quartiles)

### Appendix: Overall Performance (National Quartiles)

Figures in table show Devon (National, Regional)

LAIT as at 9/05/16

Purple indicates FSM, Yellow Children in Care and Taupe SEN with a Statement

|                                           | 1st Quartile      | 2nd Quartile         | 3rd Quartile       | 4th Quartile   | no ranking        |
|-------------------------------------------|-------------------|----------------------|--------------------|----------------|-------------------|
| Early years goals                         | 35.5 (34.3, 34.9) |                      |                    |                |                   |
| Early years gaps                          | 26.3 (32.1, 28.1) |                      |                    |                |                   |
| Foundation Stage GLD                      | 71.6 (66.3, 67.2) |                      |                    |                |                   |
| Foundation Stage GLD FSM                  |                   | 53.0 (51.0, 49.0)    |                    |                |                   |
| Phonics Year 1                            | 80.0 (77.0, 77.0) |                      |                    |                |                   |
| Phonics Year 1 FSM                        |                   | 67.0 (65.0, 62.0)    |                    |                |                   |
| Key Stage 1 Reading                       |                   | 92.0 (90.0, 91.0)    |                    |                |                   |
| Key Stage 1 Writing                       | 90.0 (88.0, 88.0) |                      |                    |                |                   |
| Key Stage 1 Maths                         |                   | 94.0 (93.0, 93.0)    |                    |                |                   |
| Key Stage 1 Speaking & Listening          |                   | 92.0 (90.0, 91.0)    |                    |                |                   |
| Key Stage 1 Science                       | 94.0 (91.0, 92.0) |                      |                    |                |                   |
| Key Stage 2 L4+ English                   |                   | 91.0 (89.0, 90.0)    |                    |                |                   |
| Key Stage 2 L4+ Reading                   |                   | 91.0 (89.0, 90.0)    |                    |                |                   |
| Key Stage 2 L4+ Writing                   |                   | 89.0 (87.0, 87.0)    |                    |                |                   |
| Key Stage 2 L4+ GPS                       |                   |                      | 80.0 (80.0, 80.0)  |                |                   |
| Key Stage 2 L4+ Maths                     |                   |                      | 88.0 (87.0, 87.0)  |                |                   |
| Key Stage 2 L4+ Science                   |                   | 91.0 (89.0, 90.0)    |                    |                |                   |
| Key Stage 2 L4+ RWM                       |                   | 82.0 (80.0, 80.0)    |                    |                |                   |
| Key Stage 2 L4+ RWM FSM                   |                   | 67.0 (66.0, 62.0)    |                    |                |                   |
| Key Stage 2 L4+ RWM CiC                   |                   |                      | 52(52,49)          |                |                   |
| Key Stage 2 L4+ RWM SEN with Statement    | 21 (16,17)        |                      |                    |                |                   |
| Key Stage 2 L5+ English                   | 47.0 (43.0, 44.0) |                      |                    |                |                   |
| Key Stage 2 L5+ Maths                     |                   | 44.0 (42.0, 41.0)    |                    |                |                   |
| Key Stage 2 Reading Exp Progress (2 Lvl)  |                   | 93.0 (91.0, 91.0)    |                    |                |                   |
| Key Stage 2 Writing Exp Progress (2 Lvl)  |                   | 96.0 (94.0, 94.0)    |                    |                |                   |
| Key Stage 2 Maths Exp Progress (2 Lvl)    |                   | 91.0 (90.0, 89.0)    |                    |                |                   |
| KS4 5+ A-C* (Eng, Mat)                    |                   | 58.1 (53.8, 58.0)    |                    |                |                   |
| KS4 5+ A-C* (Eng, Mat) FSM                |                   | 33.3 (33.3, 29.5)    |                    |                |                   |
| KS4 5+ A-C* (Eng, Mat) CiC                |                   |                      | 14.1(13.8,14.3)    |                |                   |
| KS4 5+ A-C* (Eng, Mat) SEN with Statement | 46.3 (34.7,36.1)  |                      |                    |                |                   |
| KS4 5+ A-G* (Eng, Mat)                    |                   | 92.6 (85.7, 92.3)    |                    |                |                   |
| Capped Point Scores                       |                   | 317.7 (306.5, 315.6) |                    |                |                   |
| EBACC                                     |                   |                      | 23.6 (22.90, 23.5) |                |                   |
| Expected Progress English                 |                   | 72.5 (71.1, 71.9)    |                    |                |                   |
| Expected Progress Maths                   |                   | 68.1 (66.9, 68.2)    |                    |                |                   |
| A Level 3+ A grades                       |                   | 9.4 (11.7, 10.0)     |                    |                |                   |
| % of students achieving AAB or better     |                   | 15.6 (19.2, 17.1)    |                    |                |                   |
| <b>2014 (latest data)</b>                 |                   |                      |                    |                |                   |
| Absence in primary schools                | 3.6 (3.9, 3.9)    |                      |                    |                |                   |
| Absence in secondary schools              |                   | 5.1 (5.2, 5.4)       |                    |                |                   |
| Permanent Exclusions                      |                   |                      | 0.08 (0.06, 0.07)  |                |                   |
| Fixed Term Exclusions                     |                   | 3.0 (3.5, 3.5)       |                    |                |                   |
| Permanent Exclusions Primary (Nos)        |                   |                      |                    |                | 0.02 (0.02, 0.02) |
| Fixed Term Exclusions Primary             |                   |                      |                    | 1.2 (1.0, 1.3) |                   |
| Permanent Exclusions Secondary            |                   | 0.15 (0.13, 0.12)    |                    |                |                   |
| Fixed Term Exclusions Secondary           |                   | 5.2 (6.6, 5.9)       |                    |                |                   |

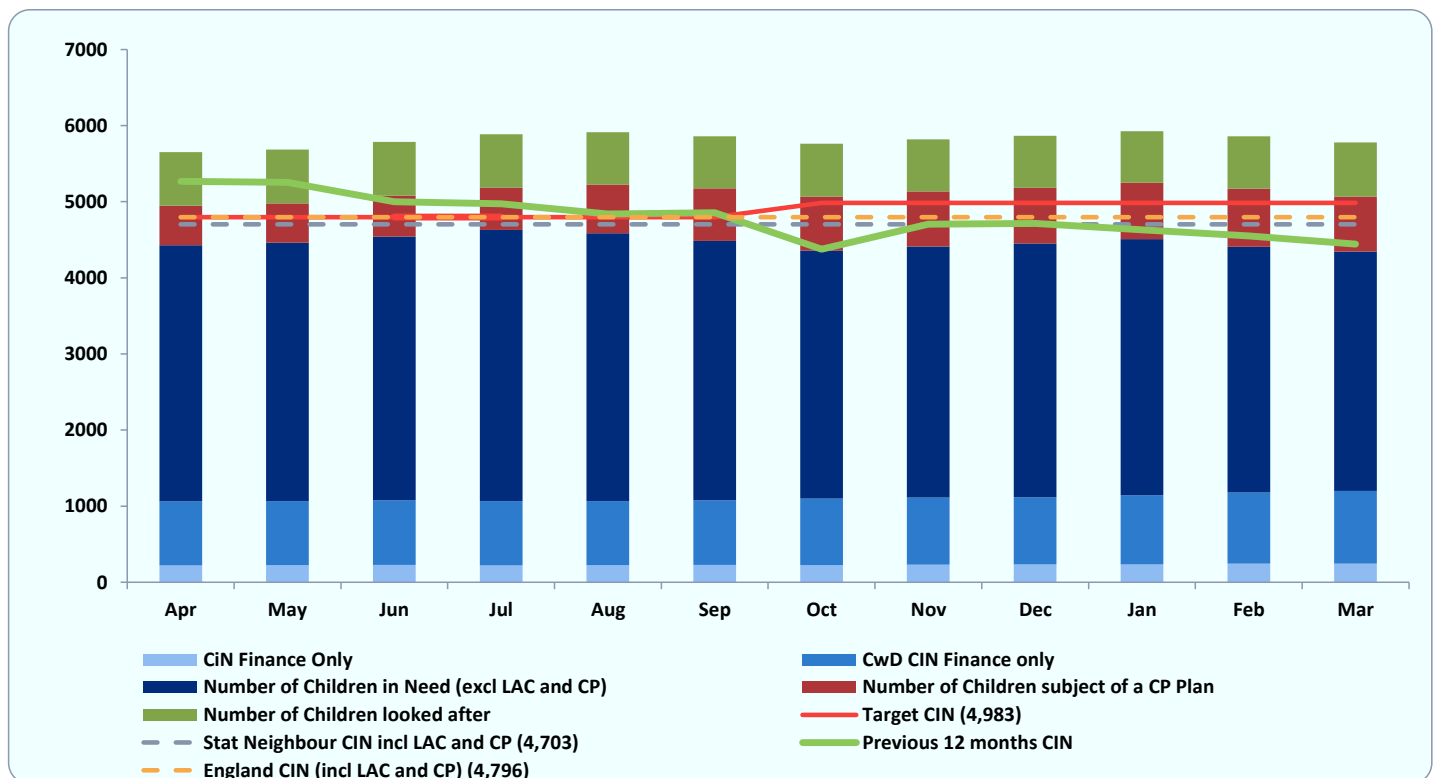
# Devon Children’s Social Work Quality Assurance Framework

## Report of: March 2016

### 1.0 Activity and Performance Information

| Children and Young People Population profile for Devon – 2014 Mid-Year Estimates |         |           |           |           |           | Source: Office of National Statistics |
|----------------------------------------------------------------------------------|---------|-----------|-----------|-----------|-----------|---------------------------------------|
| Population per age band                                                          |         |           |           |           |           |                                       |
|                                                                                  | 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 Percentage of Total Population                                     |         |           |           |           |           |                                       |
| England                                                                          | 1.2% ↓  | 5.1% ⇔    | 6.0% ↑    | 6.6% ↓    | 2.4% ⇔    | 10.4% ↓                               |
| Devon                                                                            | 0.9% ↓  | 4.1% ⇔    | 5.2% ↑    | 6.1% ↓    | 2.2% ↓    | 9.5% ↑                                |

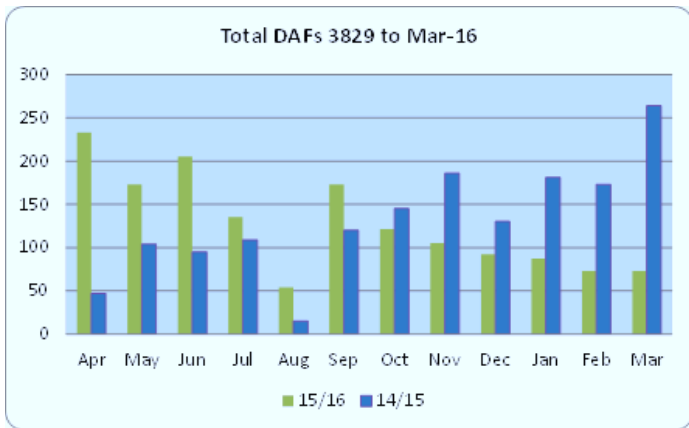
### 1) Children’s Social Work Total Caseload Profile



The Total CIN includes LAC 712, CP 724 and 1,201 Finance only (246 and 955 CwD Finance only) and shows Devon CIN as **5,779 in March** 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.



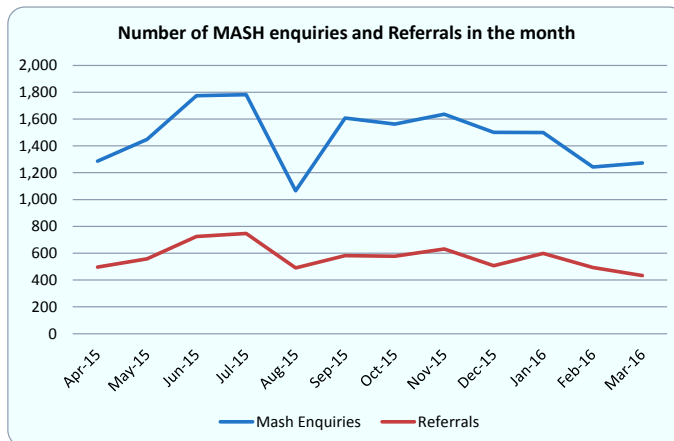
## 2) Number of DAF1s with start date



| No.DAFs | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Total |
|---------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-------|
| 15/16   | 233 | 173 | 205 | 135 | 54  | 173 | 121 | 105 | 92  | 87  | 73  | 73  | 1524  |
| 14/15   | 47  | 104 | 95  | 109 | 15  | 120 | 145 | 186 | 130 | 181 | 173 | 264 | 1569  |

The number of DAF's recorded in Holistix for 15/16 is 1,524 which is slightly less by 45 compared to 14/15 1,569  
The number of new ones each month is reducing. The amount of work referred to and held within CSC is increasing.

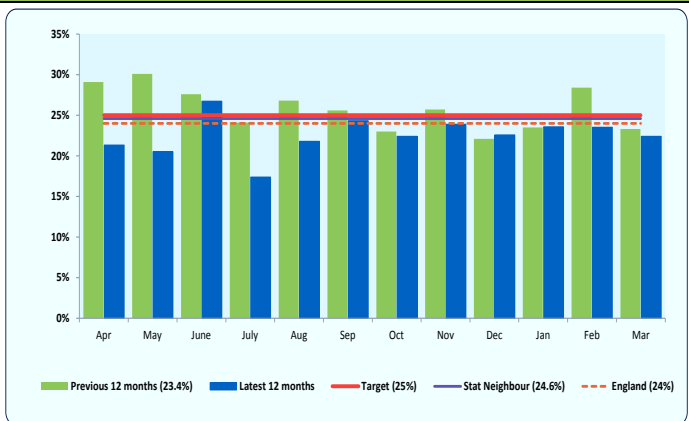
## 3) Number of MASH Enquiries and Referrals in the month



|                | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|----------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Mash Enquiries | 1,286  | 1,448  | 1,774  | 1,781  | 1,065  | 1,608  | 1,563  | 1,636  | 1,501  | 1,500  | 1,243  | 1,272  |
| Referrals      | 496    | 558    | 725    | 747    | 491    | 582    | 578    | 631    | 507    | 598    | 494    | 433    |

MASH enquiries increased slightly by 29 in Mar-16 to 1,272 from Feb-16 1,243.  
Referrals decreased by 61 to 433 from 494 in Feb-16.  
However data after referral indicates that thresholds are not being applied.

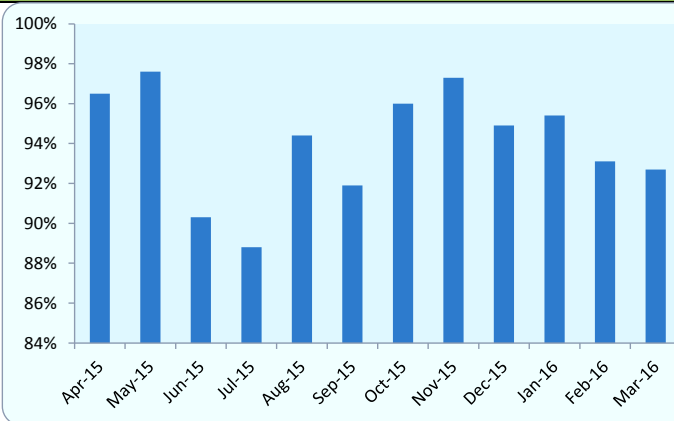
## 4) Percentage of social care referrals that are re-referrals within 12



| Target | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 25.1%  | 21.3%  | 20.5%  | 26.7%  | 17.4%  | 21.8%  | 24.3%  | 22.4%  | 23.9%  | 22.6%  | 23.6%  | 23.5%  | 22.4%  |

Repeat referrals reduced in Mar-16 to 22.4% from 23.5% in Feb-16  
Re-referrals remain below benchmarking. This is positive.

## 5) % of Referrals with a Single Assessment



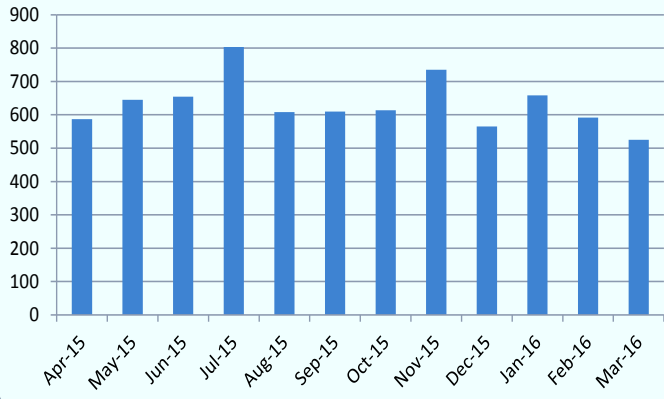
| Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 96.5%  | 97.6%  | 90.3%  | 88.8%  | 94.4%  | 91.9%  | 96.0%  | 97.3%  | 94.9%  | 95.4%  | 93.1%  | 92.7%  |

Referrals resulting in an outcome of SA, continued to decrease in Mar-16 to 92.7% from 93.1% in Feb-16. We need to understand this more fully – are thresholds being better understood or is too much being allowed into the system? This data can only be understood when considered with (6) (7) and (8).

# Agenda Item 10

## 6) Number of Single Assessments Starting

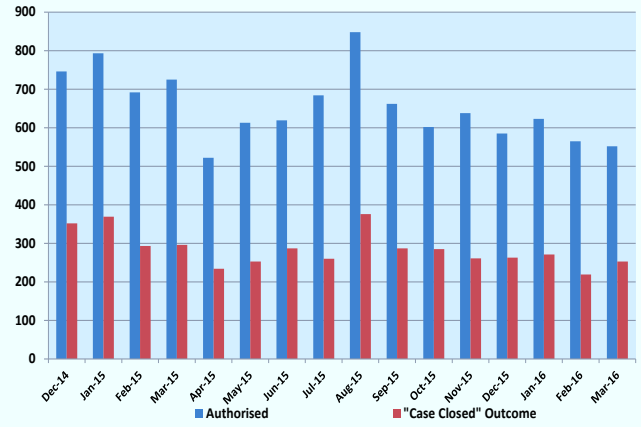
No. of Single Assessments Starting Apr-15 to Mar-16



| Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD 15/16 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-----------|
| 588    | 645    | 654    | 803    | 608    | 610    | 617    | 735    | 566    | 668    | 599    | 428    | 7,521     |

## 7) Cases closed at end of Single Assessment

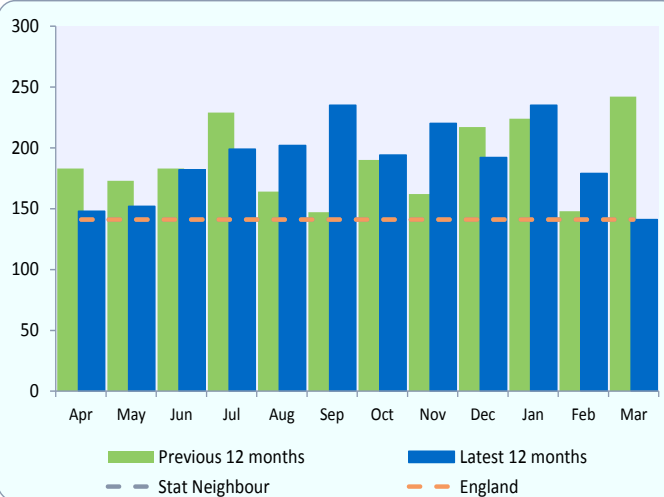
Single Assessments Authorised with "Case Closed" Outcome



| Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 44.8%  | 41.3%  | 46.4%  | 38.0%  | 44.3%  | 43.4%  | 47.3%  | 40.9%  | 45.0%  | 43.5%  | 38.8%  | 45.8%  |

High proportions 40% + are closed following assessment. This indicates that thresholds are not being applied –families are not receiving EH services.

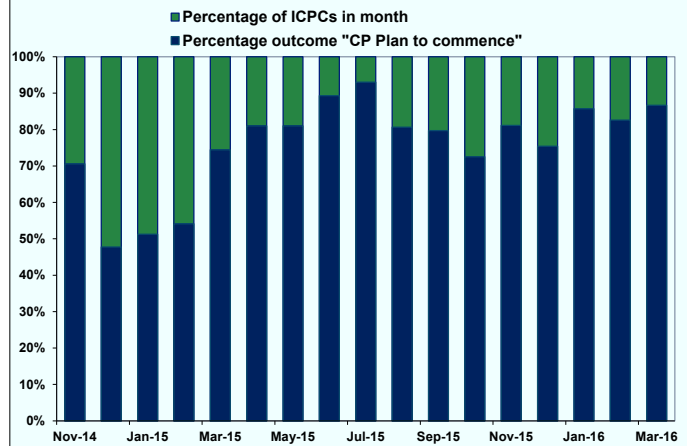
## 8) Number of Section 47 Enquiries



| Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 148    | 152    | 182    | 199    | 202    | 235    | 194    | 220    | 192    | 235    | 179    | 141    |

The number of S47's continued to decrease by 38 in Mar-16 in line with benchmarking.

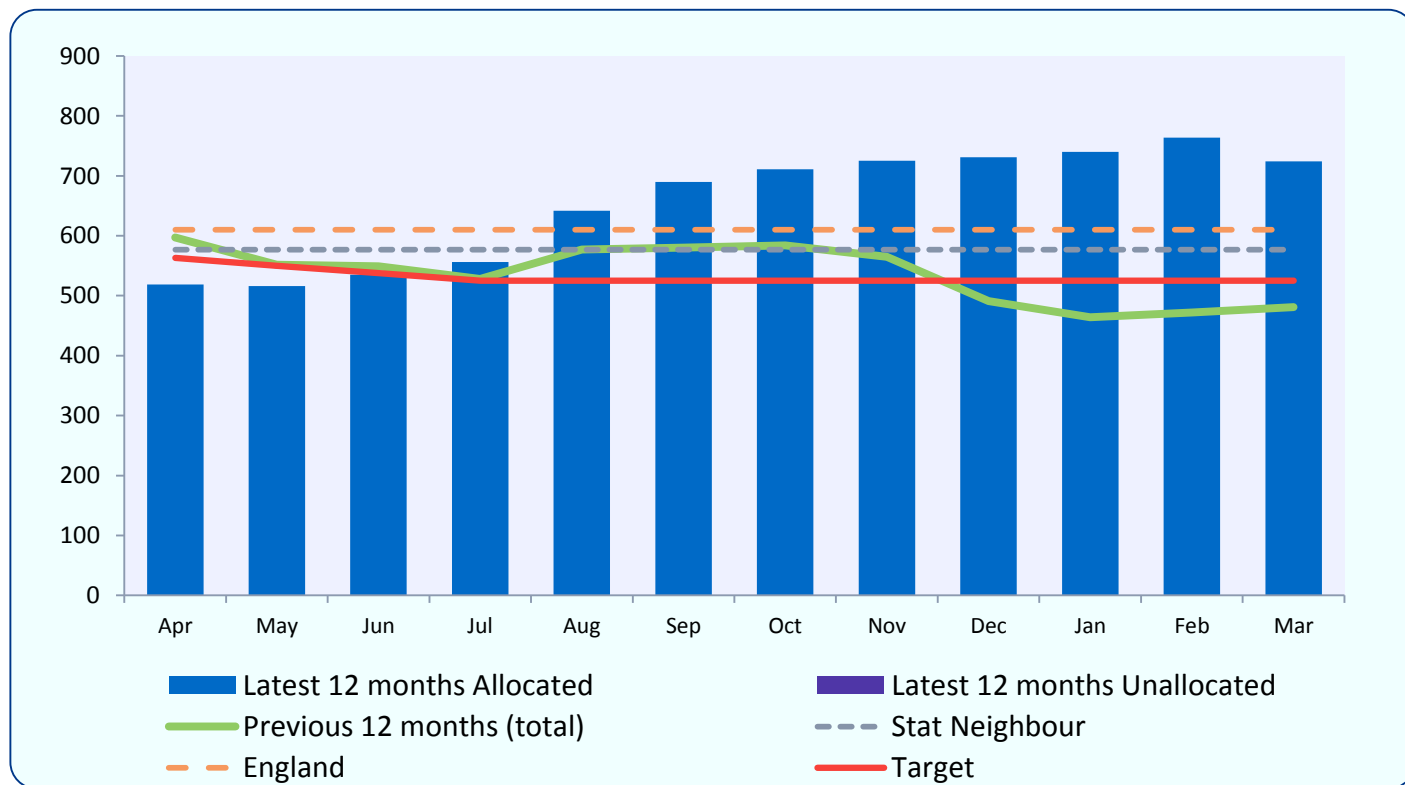
## 9) Number of ICPC resulting in Child Protection Plans to commence



|                                  | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|----------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| No. ICPC held in month           | 100    | 58     | 75     | 86     | 119    | 143    | 102    | 122    | 110    | 112    | 92     | 75     |
| No. ICPC outcome CPP to commence | 81     | 47     | 67     | 80     | 96     | 114    | 74     | 99     | 83     | 96     | 76     | 65     |
| Percentage "CP Plan to commence" | 81.0%  | 81.0%  | 89.3%  | 93.0%  | 80.7%  | 79.7%  | 72.5%  | 81.1%  | 75.5%  | 85.7%  | 82.6%  | 86.7%  |

The number of ICPC's for children (including siblings) continued to decrease by 17 in Mar (75) from Feb (92) and the rate of outcomes CPP to commence increased by 4% (Mar 86.4% from Feb 82.6%) Requires further exploration in MASH, perhaps too many referrals are being treated as safeguarding as opposed to CIN. The rate of CP Plans jumped from March 15 and continued at high level throughout the year. If this is read alongside chart 10 there is evidence that 30% of plans ended this year were in place for 3 months or less. This could mean the plan was inappropriate.

## 10) Number of Children Subject to a Child Protection Plan



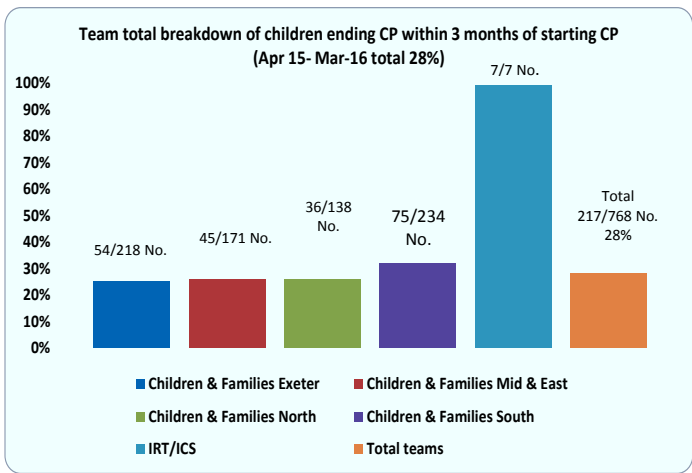
| Target | Jan-15 | Feb-15 | Mar-15 | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 525    | 491    | 472    | 481    | 519    | 516    | 535    | 556    | 642    | 690    | 711    | 725    | 731    | 740    | 764    | 724    |

The number of CP plans decreased by 40 children in Mar-16 (724) compared to Feb-16 (764). This is at a high level. Work is underway to understand better. Risk maybe being identified or maybe being exaggerated, (risk averse practice). If this was reduced by 25% our figures would be in line statistical neighbours.

**11. Team breakdown of children ending CP within 3 months of starting CP (April 2015 to March 2016 total 28%).**

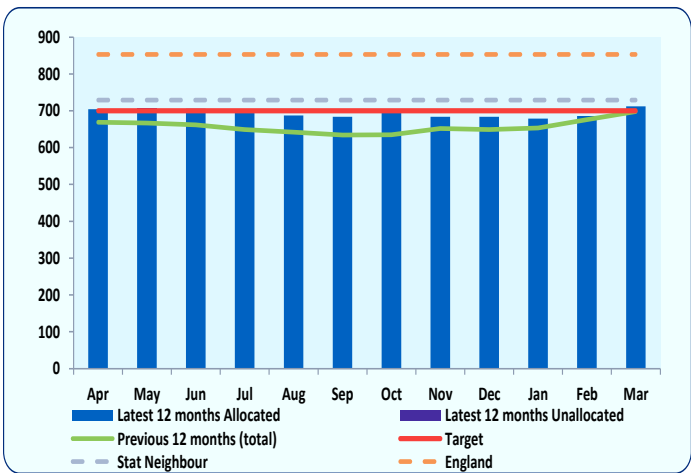
| Team                                                | Dec 2015         |                 |            |              | Jan 2016         |                 |            |              | Feb 2016         |                 |            |              | Mar 2016         |                 |            |              | Grand Total full year 15/16 |                 |            |              |
|-----------------------------------------------------|------------------|-----------------|------------|--------------|------------------|-----------------|------------|--------------|------------------|-----------------|------------|--------------|------------------|-----------------|------------|--------------|-----------------------------|-----------------|------------|--------------|
|                                                     | Ended 0-3 months | Ended 4+ months | Total Ends | % 0-3 months | Ended 0-3 months | Ended 4+ months | Total Ends | % 0-3 months | Ended 0-3 months | Ended 4+ months | Total Ends | % 0-3 months | Ended 0-3 months | Ended 4+ months | Total Ends | % 0-3 months | Ended 0-3 months            | Ended 4+ months | Total Ends | % 0-3 months |
| CHILDREN & FAMILIES EXETER 1                        |                  | 6               | 6          | 0%           |                  | 4               | 4          | 0%           | 2                | 7               | 9          | 22%          | 5                | 6               | 11         | 45%          | 18                          | 48              | 66         | 27%          |
| CHILDREN & FAMILIES EXETER 2                        | 2                | 4               | 6          | 33%          | 1                | 5               | 6          | 17%          | 1                | 1               | 2          | 50%          | 2                | 4               | 6          | 33%          | 12                          | 28              | 40         | 30%          |
| CHILDREN & FAMILIES EXETER 3                        | 1                | 3               | 4          | 25%          |                  | 3               | 3          | 0%           |                  | 4               | 4          | 0%           | 4                | 3               | 7          | 57%          | 9                           | 33              | 42         | 21%          |
| CHILDREN & FAMILIES EXETER 4                        |                  | 8               | 8          | 0%           | 3                | 2               | 5          | 60%          |                  | 1               | 1          | 0%           | 1                | 15              | 16         | 6%           | 10                          | 39              | 49         | 20%          |
| CHILDREN & FAMILIES EXETER 5                        |                  |                 |            |              |                  |                 |            |              |                  |                 |            |              |                  |                 |            |              | 5                           | 16              | 21         | 24%          |
| <b>TOTAL CHILDREN &amp; FAMILIES EXETER</b>         | <b>3</b>         | <b>21</b>       | <b>24</b>  | <b>13%</b>   | <b>4</b>         | <b>14</b>       | <b>18</b>  | <b>22%</b>   | <b>3</b>         | <b>13</b>       | <b>16</b>  | <b>19%</b>   | <b>12</b>        | <b>28</b>       | <b>40</b>  | <b>30%</b>   | <b>54</b>                   | <b>164</b>      | <b>218</b> | <b>25%</b>   |
| CHILDREN & FAMILIES MID & EAST 1                    | 4                | 5               | 9          | 44%          | 1                | 2               | 3          | 33%          |                  | 3               | 3          | 0%           |                  | 6               | 6          | 0%           | 11                          | 41              | 52         | 21%          |
| CHILDREN & FAMILIES MID & EAST 2                    |                  |                 |            |              |                  |                 |            |              |                  |                 |            |              | 2                | 4               | 6          | 33%          | 6                           | 13              | 19         | 32%          |
| CHILDREN & FAMILIES MID & EAST 3                    |                  | 5               | 5          | 0%           | 1                | 3               | 4          | 25%          |                  | 2               | 2          | 0%           |                  |                 |            |              | 2                           | 24              | 26         | 8%           |
| CHILDREN & FAMILIES MID & EAST 4                    |                  | 1               | 1          | 0%           |                  | 1               | 1          | 0%           |                  |                 |            |              | 1                | 6               | 7          | 14%          | 10                          | 15              | 25         | 40%          |
| CHILDREN & FAMILIES MID & EAST 5                    |                  | 1               | 1          | 0%           | 3                | 6               | 9          | 33%          | 2                | 6               | 8          | 25%          |                  |                 |            |              | 16                          | 33              | 49         | 33%          |
| <b>TOTAL CHILDREN &amp; FAMILIES MID &amp; EAST</b> | <b>4</b>         | <b>12</b>       | <b>16</b>  | <b>25%</b>   | <b>5</b>         | <b>12</b>       | <b>17</b>  | <b>29%</b>   | <b>2</b>         | <b>11</b>       | <b>13</b>  | <b>15%</b>   | <b>3</b>         | <b>16</b>       | <b>19</b>  | <b>16%</b>   | <b>45</b>                   | <b>126</b>      | <b>171</b> | <b>26%</b>   |
| CHILDREN & FAMILIES NORTH 1                         |                  | 3               | 3          | 0%           |                  | 2               | 2          | 0%           | 1                |                 | 1          | 100%         |                  |                 |            |              | 4                           | 14              | 18         | 22%          |
| CHILDREN & FAMILIES NORTH 2                         |                  |                 |            |              |                  | 3               | 3          | 0%           | 3                | 3               | 6          | 50%          |                  | 8               | 8          | 0%           | 12                          | 24              | 36         | 33%          |
| CHILDREN & FAMILIES NORTH 3                         |                  | 9               | 9          | 0%           |                  | 5               | 5          | 0%           | 4                | 5               | 9          | 44%          | 2                | 8               | 10         | 20%          | 12                          | 37              | 49         | 24%          |
| CHILDREN & FAMILIES NORTH 4                         |                  | 3               | 3          | 0%           |                  |                 |            |              | 3                |                 | 3          | 100%         |                  | 2               | 2          | 0%           | 8                           | 27              | 35         | 23%          |
| <b>TOTAL CHILDREN &amp; FAMILIES NORTH</b>          |                  | <b>15</b>       | <b>15</b>  | <b>0%</b>    |                  | <b>10</b>       | <b>10</b>  | <b>0%</b>    | <b>11</b>        | <b>8</b>        | <b>19</b>  | <b>58%</b>   | <b>2</b>         | <b>18</b>       | <b>20</b>  | <b>10%</b>   | <b>36</b>                   | <b>102</b>      | <b>138</b> | <b>26%</b>   |
| CHILDREN & FAMILIES SOUTH 1                         |                  |                 |            |              | 1                | 7               | 8          | 13%          |                  |                 |            |              |                  | 6               | 6          | 0%           | 7                           | 25              | 32         | 22%          |
| CHILDREN & FAMILIES SOUTH 2                         | 1                |                 | 1          | 100%         | 9                | 6               | 15         | 60%          | 2                | 5               | 7          | 29%          |                  | 2               | 2          | 0%           | 15                          | 41              | 56         | 27%          |
| CHILDREN & FAMILIES SOUTH 3                         | 3                | 4               | 7          | 43%          | 3                |                 | 3          | 100%         |                  |                 |            |              |                  |                 |            |              | 12                          | 29              | 41         | 29%          |
| CHILDREN & FAMILIES SOUTH 4                         |                  | 5               | 5          | 0%           | 6                | 2               | 8          | 75%          | 2                |                 | 2          | 100%         | 1                | 3               | 4          | 25%          | 14                          | 29              | 43         | 33%          |
| CHILDREN & FAMILIES SOUTH 5                         | 4                | 4               | 8          | 50%          | 2                | 3               | 5          | 40%          |                  | 4               | 4          | 0%           | 1                | 12              | 13         | 8%           | 27                          | 35              | 62         | 44%          |
| <b>TOTAL CHILDREN &amp; FAMILIES SOUTH</b>          | <b>8</b>         | <b>13</b>       | <b>21</b>  | <b>38%</b>   | <b>21</b>        | <b>18</b>       | <b>39</b>  | <b>54%</b>   | <b>4</b>         | <b>9</b>        | <b>13</b>  | <b>31%</b>   | <b>2</b>         | <b>23</b>       | <b>25</b>  | <b>8%</b>    | <b>75</b>                   | <b>159</b>      | <b>234</b> | <b>32%</b>   |
| ICS EXETER                                          | 1                |                 | 1          | 100%         |                  |                 |            |              |                  |                 |            |              |                  |                 |            |              | 1                           |                 | 1          | 100%         |
| ICS NORTH DEVON 2                                   |                  |                 |            |              |                  |                 |            |              |                  |                 |            |              |                  |                 |            |              | 1                           |                 | 1          | 100%         |
| ICS SOUTH AND WEST DEVON 2                          |                  |                 |            |              |                  |                 |            |              |                  |                 |            |              |                  |                 |            |              | 1                           |                 | 1          | 100%         |
| INITIAL RESPONSE MID & EAST                         |                  |                 |            |              |                  |                 |            |              |                  |                 |            |              |                  |                 |            |              | 2                           |                 | 2          | 100%         |
| INITIAL RESPONSE SOUTH                              |                  |                 |            |              |                  |                 |            |              |                  |                 |            |              |                  |                 |            |              | 2                           |                 | 2          | 100%         |
| <b>TOTAL AD-HOC TEAMS</b>                           | <b>1</b>         |                 | <b>1</b>   | <b>100%</b>  |                  |                 |            |              |                  |                 |            |              |                  |                 |            |              | <b>7</b>                    |                 | <b>7</b>   | <b>100%</b>  |
| <b>GRAND TOTALS</b>                                 | <b>16</b>        | <b>61</b>       | <b>77</b>  | <b>21%</b>   | <b>30</b>        | <b>54</b>       | <b>84</b>  | <b>36%</b>   | <b>20</b>        | <b>41</b>       | <b>61</b>  | <b>33%</b>   | <b>19</b>        | <b>85</b>       | <b>104</b> | <b>18%</b>   | <b>217</b>                  | <b>551</b>      | <b>768</b> | <b>28%</b>   |

## 12) Children Ending CP within 3 months of starting CP



This chart relates to table 11 – IRT / CwD have very low numbers (7) – all of which lasted 3 months. 28% of CPP’s ended within 3 months during 15/16.

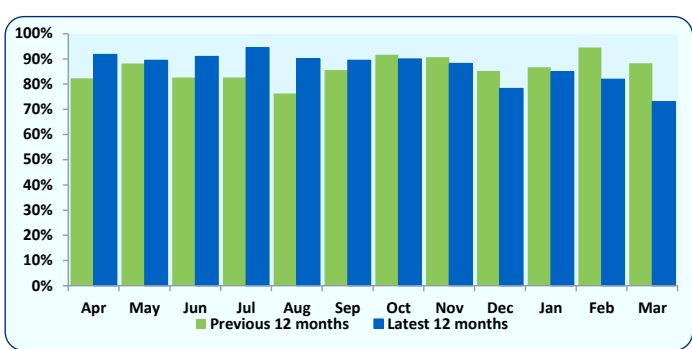
## 13) Number of Children in Care



| Target | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 700    | 704    | 707    | 706    | 702    | 687    | 684    | 694    | 684    | 684    | 679    | 686    | 712    |

CiC has increased slightly by 26 in Mar-16 to 712 from 686 in Feb-16.

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



| Target | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 100%   | 91.8%  | 89.5%  | 91.0%  | 94.5%  | 90.1%  | 89.5%  | 90.0%  | 88.2%  | 78.3%  | 84.9%  | 82.0%  | 73.0%  |

A decrease of 9% in visits Mar-16 (73%) from Feb-16 (82%) but 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

|                    | 3+ Placements |            |              |
|--------------------|---------------|------------|--------------|
|                    | Num           | Denom      | Outturn      |
| Exeter             | 23            | 173        | 13.3%        |
| North Devon        | 15            | 147        | 10.2%        |
| South & West Devon | 35            | 225        | 15.6%        |
| East & Mid Devon   | 21            | 154        | 13.6%        |
| Other              | 3             | 11         | 27.3%        |
| <b>Total</b>       | <b>97</b>     | <b>710</b> | <b>13.7%</b> |

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

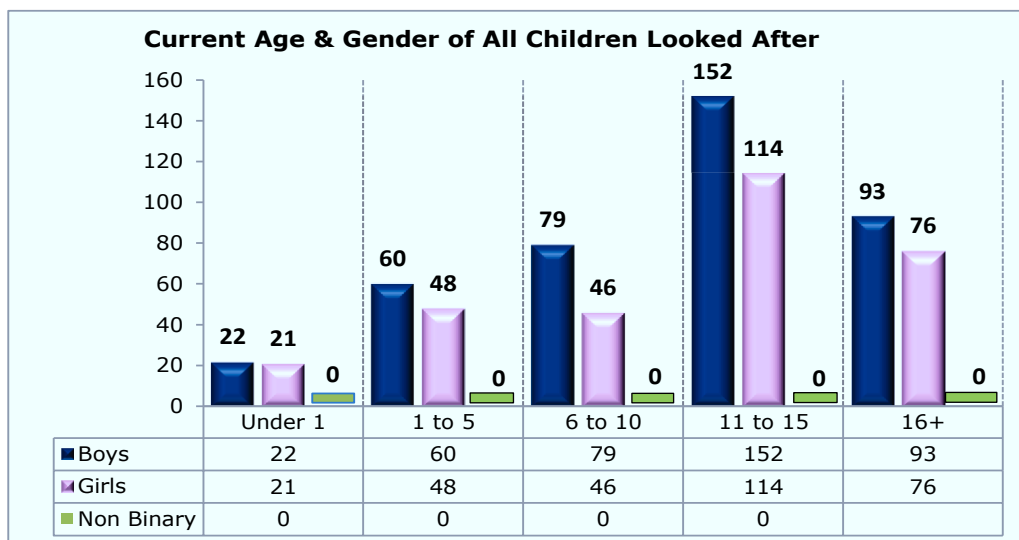
% of Children with 3+ Placements in financial year to date

| 2014/15 | 2015/16 |
|---------|---------|
| 15.0%   | 13.7%   |

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

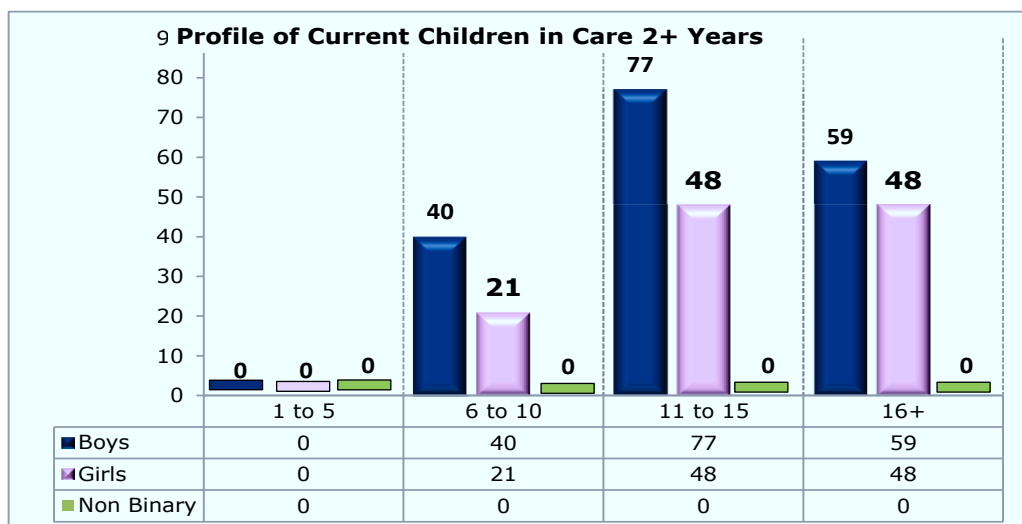
17)

The Average Age of a Child in Care is : Boys 11.2 Years, Girls 11.3 Years



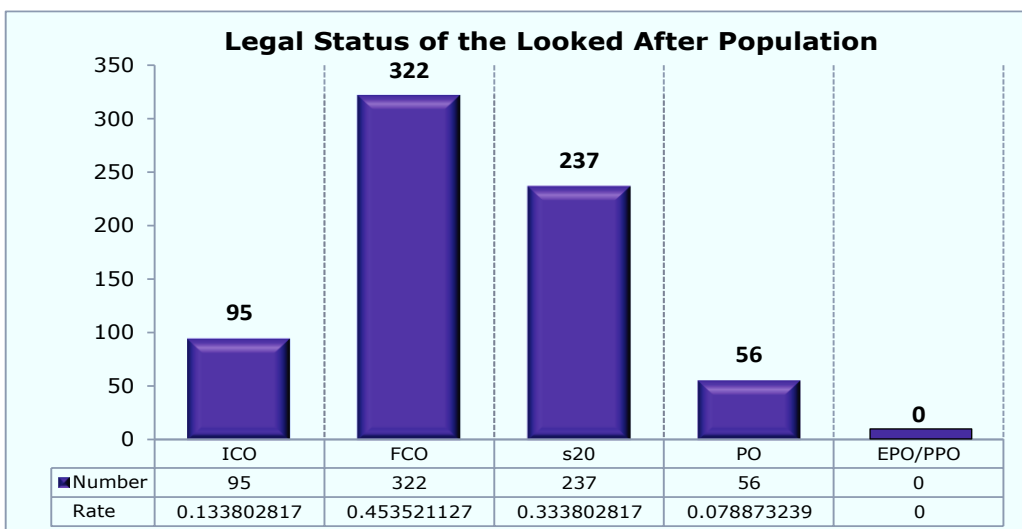
18)

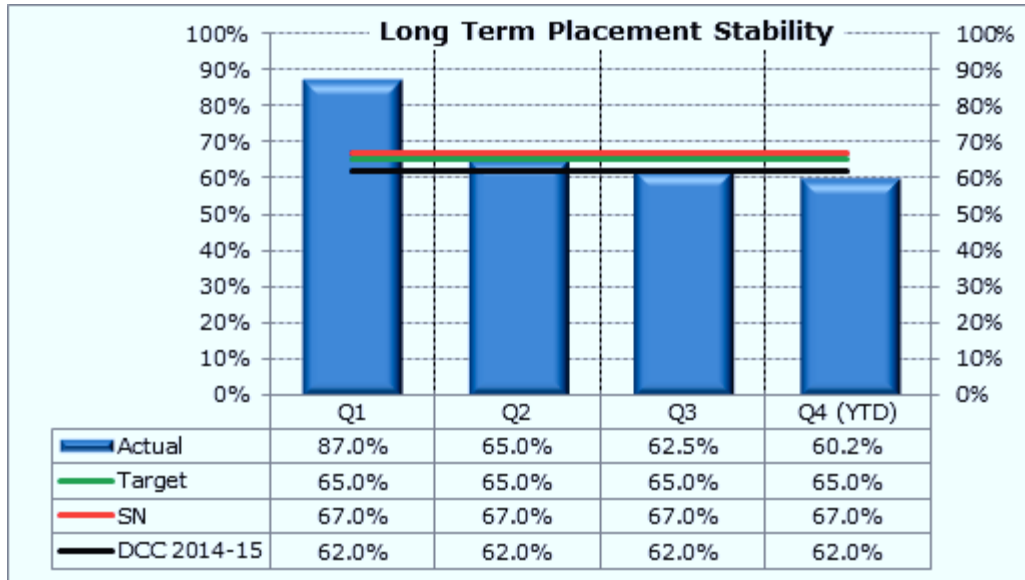
The Longest Current Period of Care of Any Child is : 15.9 Years



19)

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



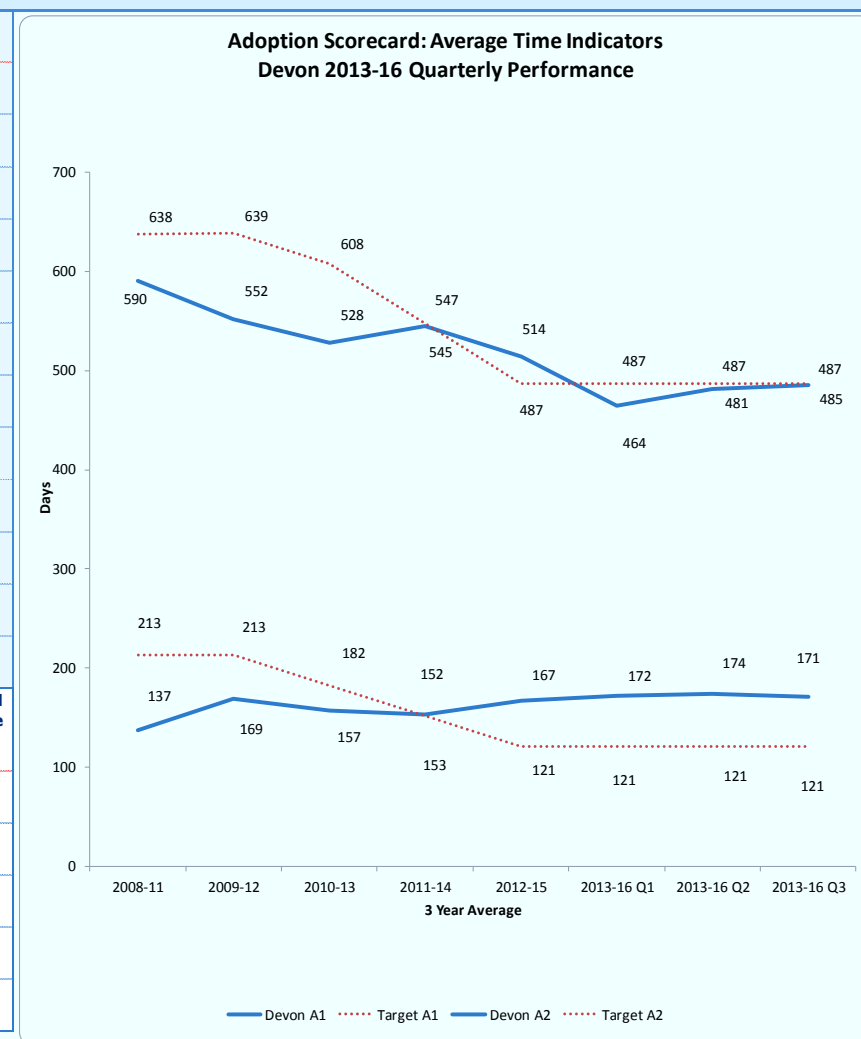


21). Adoption Scorecard

DEVON COUNTY COUNCIL  
ADOPTION SCORECARD  
PERFORMANCE ON A PAGE (2013-16 to Quarter 3 ) December 2015

Page 108

| Devon County's Adoption Population                                                                                                                                    | 2015-16                      | Percentage                  |                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|----------------------------------|
| <b>Number of Children adopted</b>                                                                                                                                     | <b>28</b>                    | 100%                        |                                  |
| Aged 5 and Over                                                                                                                                                       | 6                            | 21.4%                       |                                  |
| Aged Under 5                                                                                                                                                          | 22                           | 78.6%                       |                                  |
| No. of sibling groups                                                                                                                                                 | -                            | -                           |                                  |
| No. of children in sibling groups                                                                                                                                     | -                            | -                           |                                  |
| Number of children with a decision to be placed for Adoption                                                                                                          | 58                           | -                           |                                  |
| Number of children with a placement order                                                                                                                             | 40                           | 69.0%                       |                                  |
| Number of children placed together in sibling group                                                                                                                   | -                            |                             |                                  |
| Number of children matched to adopter                                                                                                                                 | 32                           | 80.0%                       |                                  |
| Number of children matched & placed with adopter                                                                                                                      | 8                            | 20.0%                       |                                  |
| Number of children whose decision to be placed for adoption has been rescinded                                                                                        | 13                           |                             |                                  |
| <b>Number of children ending care due to Special Guardianship order</b>                                                                                               | <b>44</b>                    | -                           |                                  |
| <b>Children Looked After and Adoption Performance measures</b>                                                                                                        | <b>DEVON (2013-16 to Q3)</b> | <b>SN average (2012-15)</b> | <b>England average (2012-15)</b> |
| Adoption scorecard A1: time between child entering care and placement for adoption                                                                                    | <b>485 days</b>              | 517 days                    | 593 days                         |
| Adoption scorecard A2: time between receiving court authority to place a child and deciding on a match                                                                | <b>171 days</b>              | 152 days                    | 223 days                         |
| Adoption scorecard A3: children waiting less than 16 months between entering care and placement for adoption (NB: measure reduced from 18 months previously reported) | <b>66%</b>                   | n/a                         | 47%                              |
| Adoption 1: Percentage of looked after children who ceased to be looked after who were adopted                                                                        | <b>12%</b>                   | 16%                         | 14%                              |
| Adoption 2: Percentage of looked after children who ceased to be looked after because of special guardianship order                                                   | <b>11%</b>                   | 10%                         | 10%                              |



\*Data source: ALB Adoption Survey, CareFirst and Adoption Database



## Children's Social Care Workforce Profile

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

| Service Area                                  |                           | Team Name     | Practice Manager            | Current FTEs - Caseload Adjustment* | Total Open Cases | Of Which, Allocated to Named Worker | % Allocated to Named Worker | Ave. No. of Cases per Current FTE Total |
|-----------------------------------------------|---------------------------|---------------|-----------------------------|-------------------------------------|------------------|-------------------------------------|-----------------------------|-----------------------------------------|
| Initial Response                              | Exeter                    | IRCX1         | Juanita Scallan             | 5.3                                 | 135              | 135                                 | 100.0%                      | 25.5                                    |
|                                               | Mid & East                | IRCM1         | Kevin Kenna                 | 8.8                                 | 179              | 179                                 | 100.0%                      | 20.3                                    |
|                                               | North                     | IRCN1         | Geoff Haworth               | 6.9                                 | 250              | 242                                 | 96.8%                       | 36.3                                    |
|                                               | South                     | IRCS1         | Jean Beynon                 | 6.4                                 | 241              | 240                                 | 99.6%                       | 37.7                                    |
| <b>Initial Response Total</b>                 |                           |               |                             | <b>27.4</b>                         | <b>805</b>       | <b>796</b>                          | <b>98.9%</b>                | <b>29.4</b>                             |
| Children & Families                           | Exeter                    | CFCX1         | Anastasia Wyman (Temporary) | 6.6                                 | 178              | 177                                 | 99.4%                       | 27.0                                    |
|                                               |                           | CFCX2         | Phil Stagg                  | 5.8                                 | 159              | 159                                 | 100.0%                      | 27.4                                    |
|                                               |                           | CFCX3         | Aiden Mitchelmore           | 5.8                                 | 158              | 158                                 | 100.0%                      | 27.2                                    |
|                                               |                           | CFCX4         | Helen Neighbour             | 7.2                                 | 155              | 155                                 | 100.0%                      | 21.5                                    |
| <b>Children and Families - Exeter Total</b>   |                           |               |                             | <b>25.4</b>                         | <b>650</b>       | <b>649</b>                          | <b>99.8%</b>                | <b>25.6</b>                             |
| Children & Families                           | Mid & East                | CFCM1         | Richard Ashdown             | 6.2                                 | 156              | 152                                 | 97.4%                       | 25.2                                    |
|                                               |                           | CFCM2         | Helen Patten                | 6.8                                 | 151              | 151                                 | 100.0%                      | 22.2                                    |
|                                               |                           | CFCM3         | Emily Hextall               | 4.2                                 | 111              | 111                                 | 100.0%                      | 26.4                                    |
|                                               |                           | CFCM4         | Corrina Bryant              | 5.6                                 | 139              | 139                                 | 100.0%                      | 24.8                                    |
| <b>Children and Families - Mid/East Total</b> |                           |               |                             | <b>22.8</b>                         | <b>557</b>       | <b>553</b>                          | <b>99.3%</b>                | <b>24.4</b>                             |
| Children & Families                           | North                     | CFCN1         | Roger Walter                | 3.7                                 | 62               | 62                                  | 100.0%                      | 16.7                                    |
|                                               |                           | CFCN2         | Paul Sains                  | 4.6                                 | 138              | 138                                 | 100.0%                      | 30.0                                    |
|                                               |                           | CFCN3         | Fran Hughes                 | 5.6                                 | 117              | 117                                 | 100.0%                      | 20.9                                    |
|                                               |                           | CFCN4         | Heather Cooper              | 4.6                                 | 130              | 130                                 | 100.0%                      | 28.3                                    |
| <b>Children and Families - North Total</b>    |                           |               |                             | <b>18.5</b>                         | <b>447</b>       | <b>447</b>                          | <b>100.0%</b>               | <b>24.1</b>                             |
| Children & Families                           | South                     | CFCS1         | Lisa Jackson                | 6.9                                 | 167              | 167                                 | 100.0%                      | 24.3                                    |
|                                               |                           | CFCS2         | Karen Thompson              | 8.0                                 | 153              | 153                                 | 100.0%                      | 19.1                                    |
|                                               |                           | CFCS4         | Jacqueline Fox              | 8.5                                 | 189              | 189                                 | 100.0%                      | 22.2                                    |
|                                               |                           | CFCS5         | Jane Anstis                 | 6.4                                 | 204              | 203                                 | 99.5%                       | 31.9                                    |
| <b>Children and Families - South Total</b>    |                           |               |                             | <b>29.8</b>                         | <b>713</b>       | <b>712</b>                          | <b>99.9%</b>                | <b>23.9</b>                             |
| Permanency & Transition                       | Exeter                    | PTCX1         | Juliet Jones                | 12.4                                | 271              | 271                                 | 100.0%                      | 21.9                                    |
|                                               | Mid & East                | PTCM1         | Naomi Pollard               | 10.0                                | 142              | 141                                 | 99.3%                       | 14.2                                    |
|                                               | North                     | PTCN1         | Giles Bashford              | 8.6                                 | 181              | 177                                 | 97.8%                       | 21.0                                    |
|                                               | South                     | PTCS1         | Nikki Evans                 | 9.1                                 | 226              | 226                                 | 100.0%                      | 24.7                                    |
| <b>Permanency and Transition Total</b>        |                           |               |                             | <b>40.2</b>                         | <b>820</b>       | <b>815</b>                          | <b>99.4%</b>                | <b>20.4</b>                             |
| Private Fostering                             | PFC1                      | Elaine Newton | 3.7                         | 45                                  | 45               | 100.0%                              | 12.2                        |                                         |
| <b>Total (Excluding FOC Cases)</b>            |                           |               |                             | <b>167.7</b>                        | <b>4037</b>      | <b>4017</b>                         | <b>99.5%</b>                | <b>24.1</b>                             |
| Finance Only Cases                            | FOC01                     |               |                             | 246                                 |                  |                                     |                             |                                         |
| ICS Finance Only Cases                        | ICSFREME, ICSFRN & ICSFRS |               |                             | 955                                 |                  |                                     |                             |                                         |
| <b>Total (Including FOC Cases)</b>            |                           |               |                             |                                     | <b>5238</b>      |                                     |                             |                                         |

\* 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.

\*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

**The figure 5,238 excludes ICS/CwD CIN**

The average caseload is at 24.1

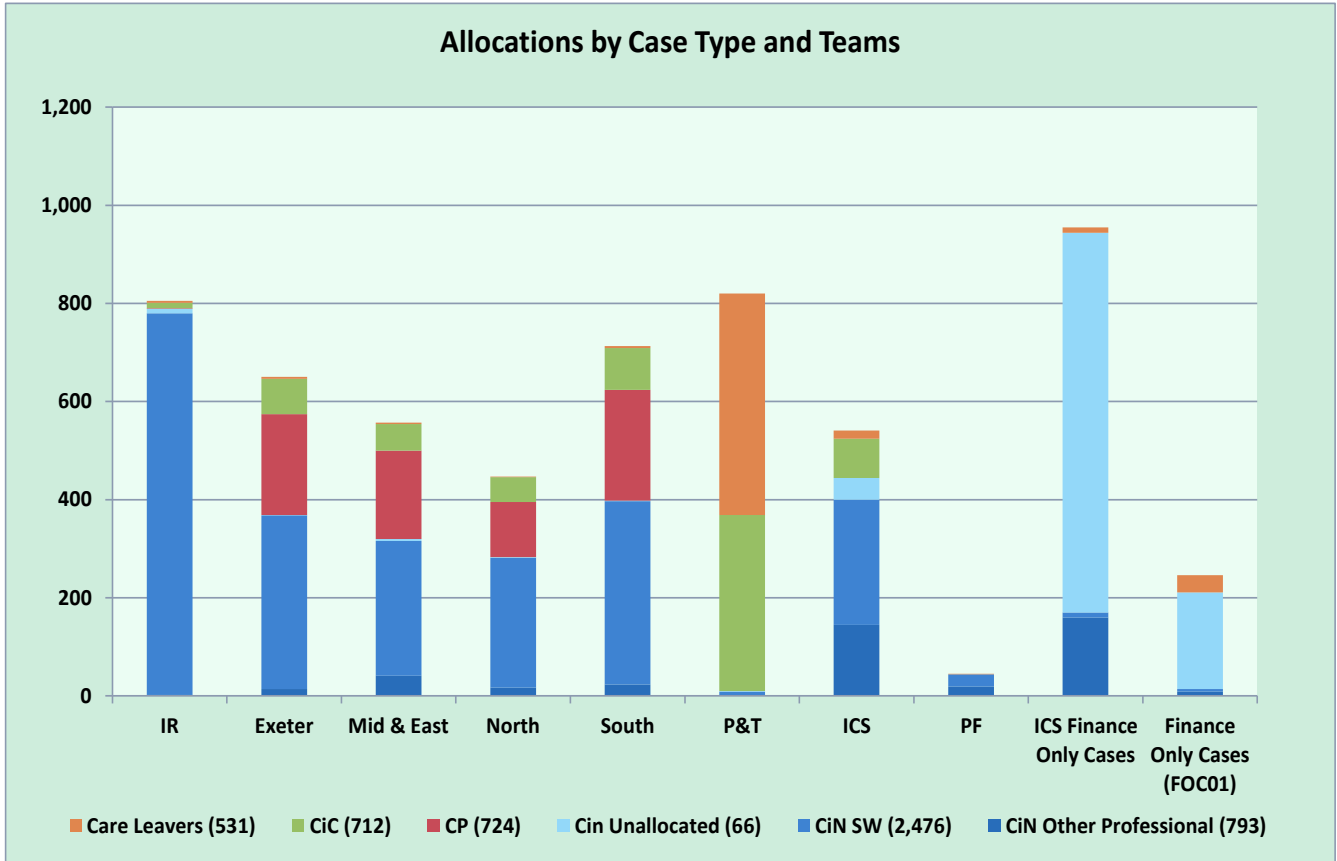
There is wide variation e.g. (14.2 compared with 24.7 in P&T), (16.7 compared with 31.9 in Children & Families due to the teams being in the process of reallocating cases) and (20.3 compared with 37.7 in IR).

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

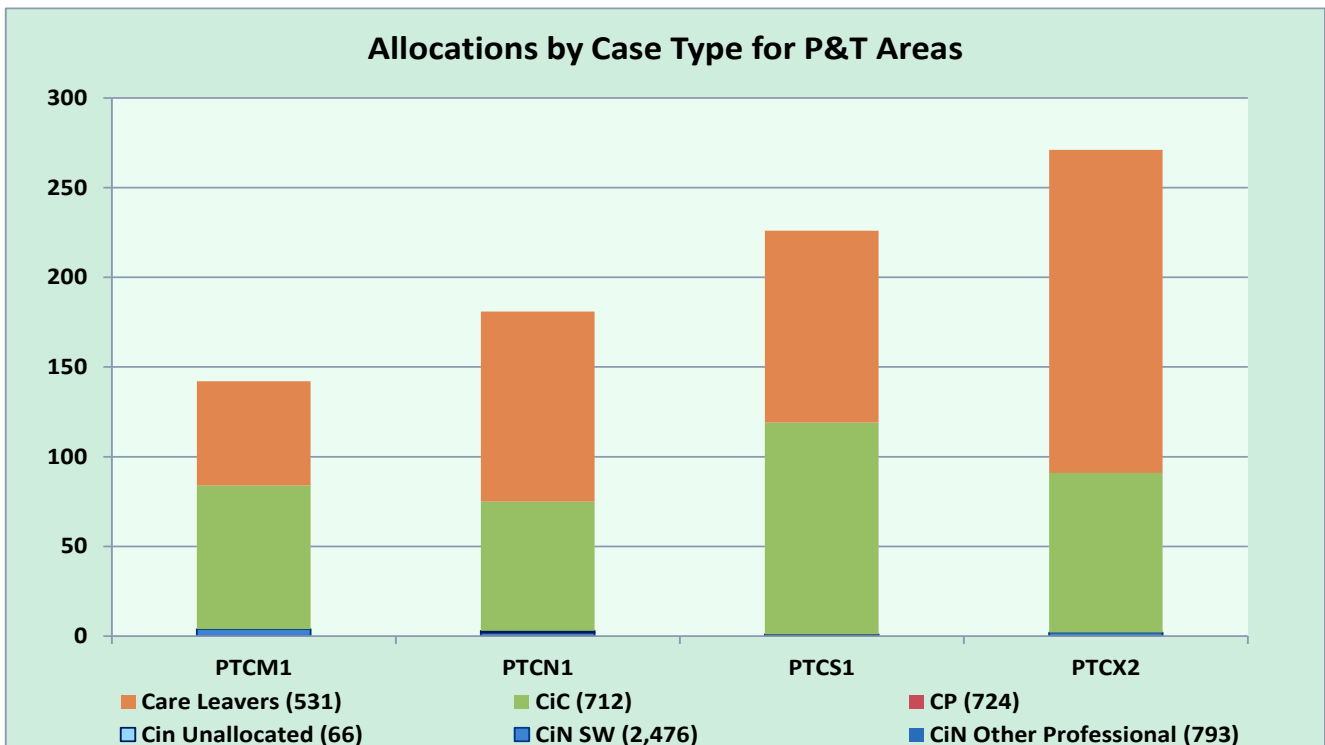
Allocation generally remains at a very high level. The proportion of permanent staff continues to increase.

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23.



24.



# Agenda Item 10

## 3. Internal Case Audits

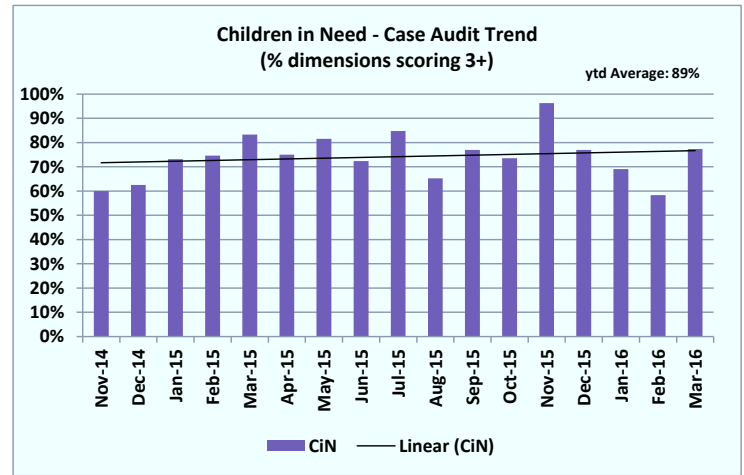
- The overarching aim of the audits is to improve the quality of practice and outcomes for children and young people. The audit considers the quality of the information and recording on the young person's file, the arrangements for the audit include discussion with the Social Worker, the quality of the 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 **36** internal audits completed during March 2016, **8** relate to Children in Need.

| % judged as 'some', 'many' or 'all standards met in full or exceeded' |           |      |
|-----------------------------------------------------------------------|-----------|------|
| Audit Dimension                                                       | Mar. 2016 |      |
|                                                                       | No's      | %    |
| 1a: Management scrutiny/oversight                                     | 5         | 63%  |
| 2: Experience of child/young person                                   | 7         | 88%  |
| 3: Practitioner contact                                               | 6         | 75%  |
| 4: Assessment & needs analysis                                        | 6         | 75%  |
| 5: Planning for children                                              | 6         | 75%  |
| 6: Recording and report writing                                       | 8         | 100% |
| Number of audit dimensions scored <b>53</b>                           |           |      |
| Number of audits for CiN cases <b>8</b>                               |           |      |
| Overall % judged 'Acceptable' or better <b>77%</b>                    |           |      |

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



3+ scores up for all standards compared to February 16.  
Overall % 3+ scores up **19%** compared to February 16.

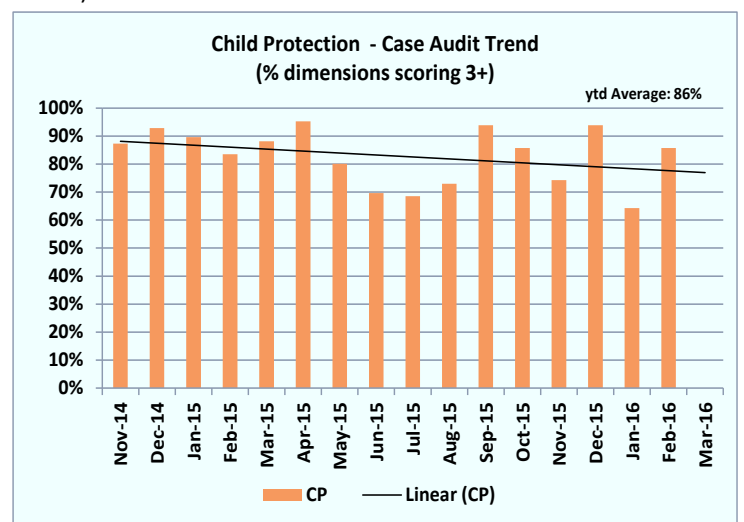
Year to date % of 3+ scores is **89%**.  
March is **12%** below the overall year to date for 3+ scores.

### CASE AUDITS: CHILD PROTECTION

Of the **36** internal case audits completed during March 2016, **0** relate to Child Protection cases.

| % judged as 'some', 'many' or 'all standards met in full or exceeded' |           |      |
|-----------------------------------------------------------------------|-----------|------|
| Audit Dimension                                                       | Feb. 2016 |      |
|                                                                       | No's      | %    |
| 1a: Management scrutiny/oversight                                     | 3         | 75%  |
| 1b: Independent Scrutiny                                              | 4         | 100% |
| 2: Experience of child/young person                                   | 4         | 100% |
| 3: Practitioner contact                                               | 3         | 75%  |
| 4: Assessment & needs analysis                                        | 3         | 75%  |
| 5: Planning for children                                              | 3         | 75%  |
| 6: Recording and report writing                                       | 4         | 100% |
| Number of audit dimensions scored <b>28</b>                           |           |      |
| Number of audits for CP cases <b>4</b>                                |           |      |
| Overall % judged 'Acceptable' or better <b>85.7%</b>                  |           |      |

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



3+ scores down for 1a, 3, 4 and 5 compared to January 16.

Year to date % of 3+ scores is **86%**.  
February is comparable with the overall year to date for 3+ scores.

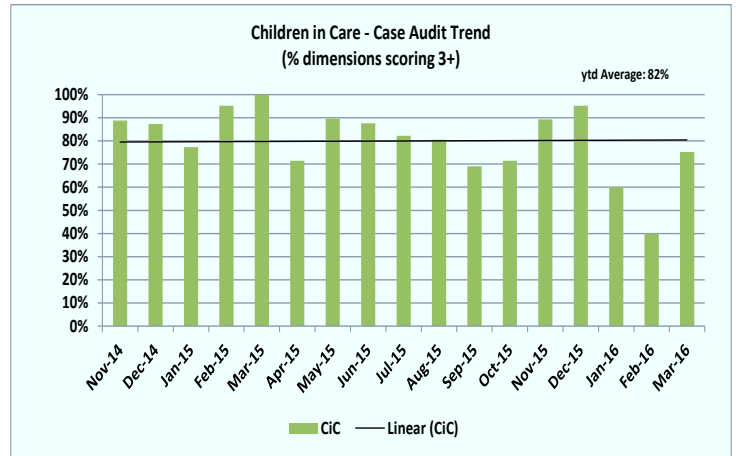
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## CASE AUDITS: CHILDREN IN CARE

Of the **36** internal case audits completed during March 2016, **18** relates to a Child in Care.

| % judged as 'some', 'many' or 'all standards met in full or exceeded' |            |     |
|-----------------------------------------------------------------------|------------|-----|
| Audit Dimension                                                       | Mar. 2016  |     |
|                                                                       | No's       | %   |
| 1a: Management scrutiny/oversight                                     | 12         | 67% |
| 1b: Independent Scrutiny                                              | 10         | 56% |
| 2: Experience of child/young person                                   | 15         | 83% |
| 3: Practitioner contact                                               | 14         | 78% |
| 4: Assessment & needs analysis                                        | 13         | 72% |
| 5: Planning for children                                              | 12         | 67% |
| 6: Recording and report writing                                       | 15         | 83% |
| Number of audit dimensions scored                                     | <b>121</b> |     |
| Number of audits for CiC cases                                        | <b>18</b>  |     |
| <b>Overall % judged 'Acceptable' or better</b>                        | <b>75%</b> |     |

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



Standards 1b, 2, 3, 4, and 6, 3+ scores are above February 16.

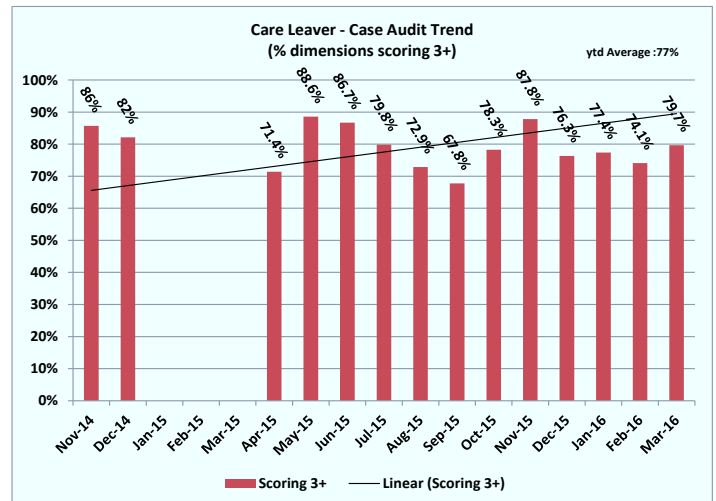
Year to date % of 3+ scores is **82%**.

March is **7% below** the overall year to date for 3+ scores.

## Care Leavers

Of the **36** internal case audits completed during March 2016, **9** have a status of Leaving Care.

| % judged as 'some', 'many' or 'all standards met in full or exceeded' |            |     |
|-----------------------------------------------------------------------|------------|-----|
| Audit Dimension                                                       | Mar. 2016  |     |
|                                                                       | No's       | %   |
| 1a: Management scrutiny/oversight                                     | 6          | 67% |
| 1b: Independent Scrutiny                                              | 2          | 22% |
| 2: Experience of child/young person                                   | 7          | 78% |
| 3: Practitioner contact                                               | 8          | 89% |
| 4: Assessment & needs analysis                                        | 8          | 89% |
| 5: Planning for children                                              | 8          | 89% |
| 6: Recording and report writing                                       | 8          | 89% |
| Number of audit dimensions scored                                     | <b>59</b>  |     |
| Number of audits for Care Leavers                                     | <b>47</b>  |     |
| <b>Overall % judged 'Acceptable' or better</b>                        | <b>79%</b> |     |



Standards 1b 3+ scores below February 16.

March is **2% above** the % of 3+ scores for the year (**77%**).

## 4.0 Qualitative Feedback – The Independent Reviewing Unit and the Involvement Team

### \*\* INDEPENDENT REVIEW UNIT \*\* CHILD PROTECTION MEETING ATTENDANCE

There were **32 Initial Child Protection Conferences** including siblings, **50 Core Group meetings** and **181 Child Protection Reviews** in March.

| Overall attendance rates by meeting type (attendees as % of invites) | Mar-16 | Feb-16 | Jan-16 | Dec-15 | Nov-15 | Oct-15 | Sep-15 | Aug-15 | Jul-15 | Jun-15 | May-15 | Apr-15 |
|----------------------------------------------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| <b>Initial Child Protection Conferences</b>                          | 47%    | 53%    | 51%    | 49%    | 47%    | 49%    | 42%    | 43%    | 53%    | 67%    | 64%    | 69%    |
| <b>Health Professionals</b>                                          | 30%    | 29%    | 34%    | 30%    | 22%    | 25%    | 16%    |        |        |        |        |        |
| <b>Core Groups</b>                                                   | 78%    | 81%    | 72%    | 74%    | 84%    | 73%    | 69%    | 75%    | 70%    | 83%    | 78%    | 72%    |
| <b>Health Professionals</b>                                          | 42%    | 54%    | 54%    | 49%    | 57%    | 54%    | 41%    |        |        |        |        |        |
| <b>Child Protection Reviews</b>                                      | 62%    | 71%    | 74%    | 67%    | 75%    | 74%    | 68%    | 68%    | 70%    | 61%    | 61%    | 62%    |
| <b>Health Professionals</b>                                          | 63%    | 74%    | 69%    | 71%    | 79%    | 59%    | 69%    |        |        |        |        |        |

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

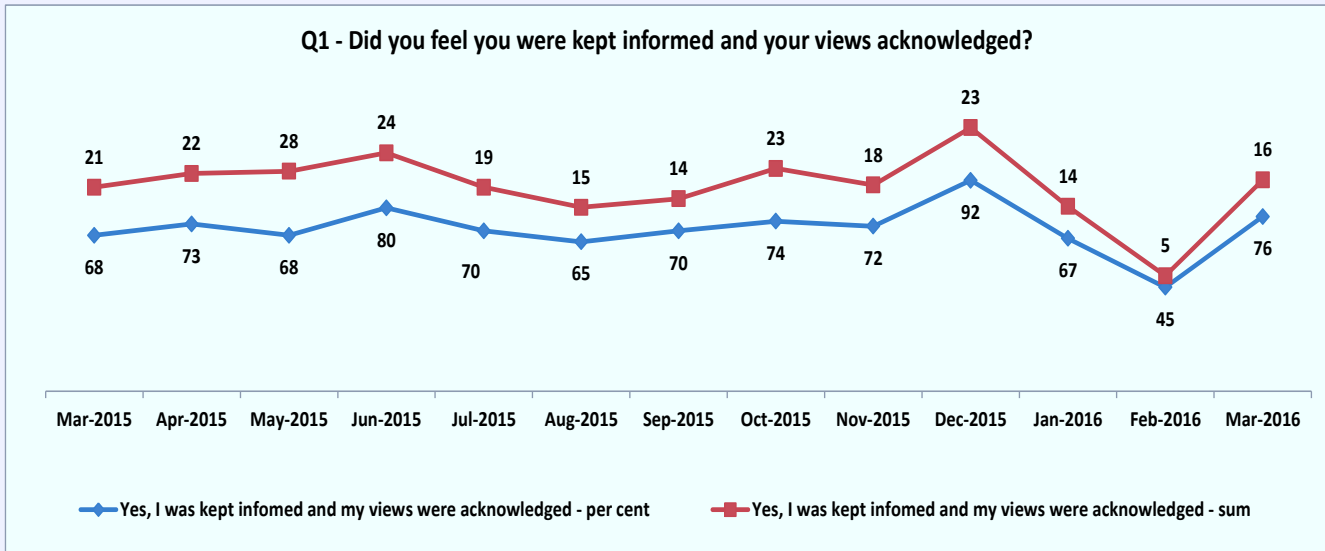
- 21 feedback forms for 33 individual children and young people were received in March 2016 which is 10 forms more than February.
- The feedback covers 17 individual Social Workers.

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

- 82% of respondents in March, report positive feedback against all four involvement indicators compared to 64% for February.
- 8 respondents reported positive feedback with parents/carers reporting they were very appreciative of the support they received.

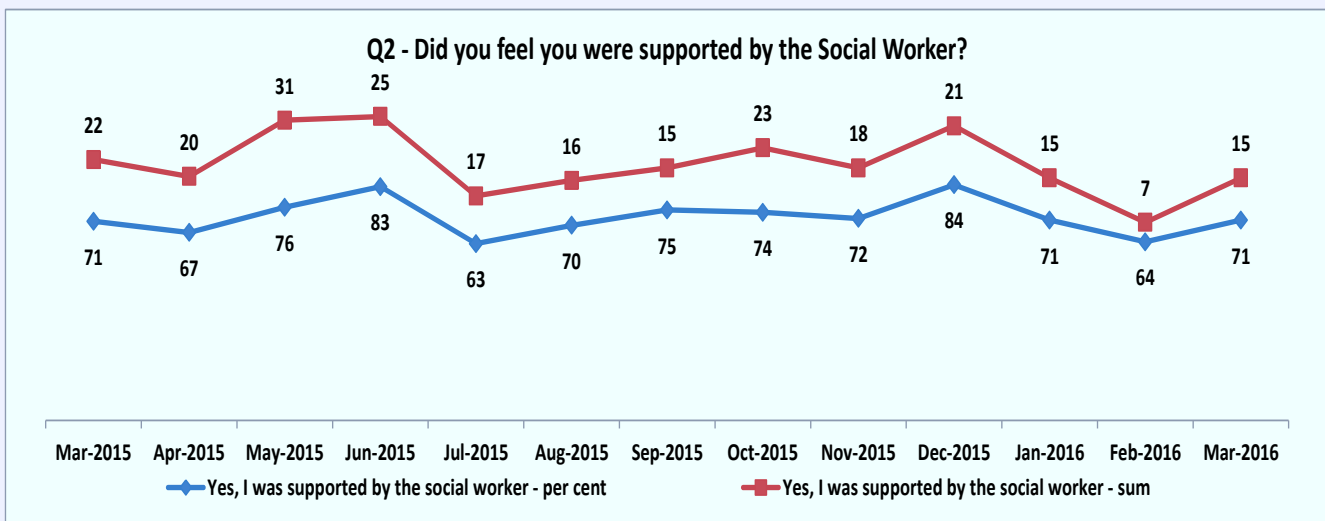
**Q1 - Did you feel you were kept informed and your views acknowledged?**

- 16 (76%) of respondents reported they were kept informed and their views acknowledged, an upturn of 31% compared to February (46%).
- 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, an upturn of 7% compared to February (64%).
- All respondents completed this indicator.



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

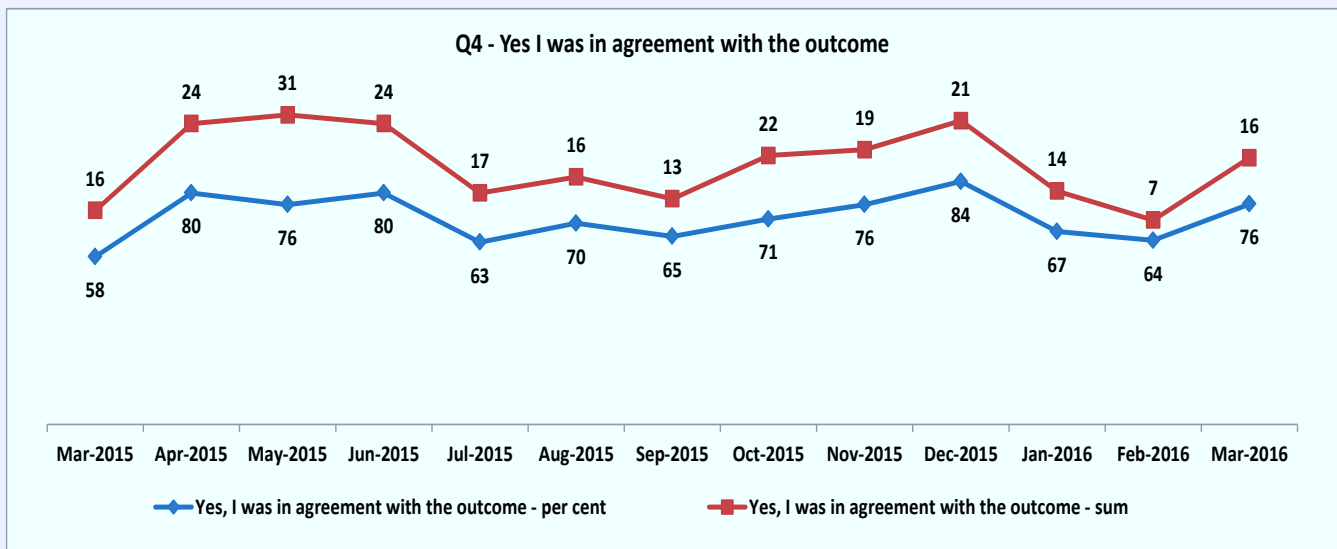
- 19 (90%) of respondents reported they felt their social worker treated them with respect and courtesy, an upturn of 17% compared to February (73%).
- All respondents completed this indicator.

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## Q4. Were you in agreement with the outcome?

- 16 (76%) of respondents reported they agreed with the outcome. An upturn of 12% compared to February (64%).
- 3 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

“SW was brilliant explaining what was going to happen going forwards. I thought the SW had a wealth of knowledge, understanding and tact”.

“SW is very helpful and cared a lot about the outcome. A credit to the service”

“We feel we have received help and are very happy with the end result”.

“SW wasn’t able to see us at the time of the issues”  
 “Took a long time to be contacted”  
 “Promises did not happen and unaware of the Outcome”.

18 of 21 respondents provided comment.

**\*\* INDEPENDENT REVIEW UNIT \*\***

**Timeliness of Social Worker Reports for CiC Reviews**

**108** IRU monitoring reports for Children in Care received for March.

**Changes of Social Worker since last CiC Review**

Of the 108 monitoring forms returned in March, 93 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 30 children in March (Feb 25, Jan 32, Dec, 37 in Nov, 32 in Oct & Sept),

of these 30 children with a change of SW, 25 had 1 change and 5 had 2 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:-

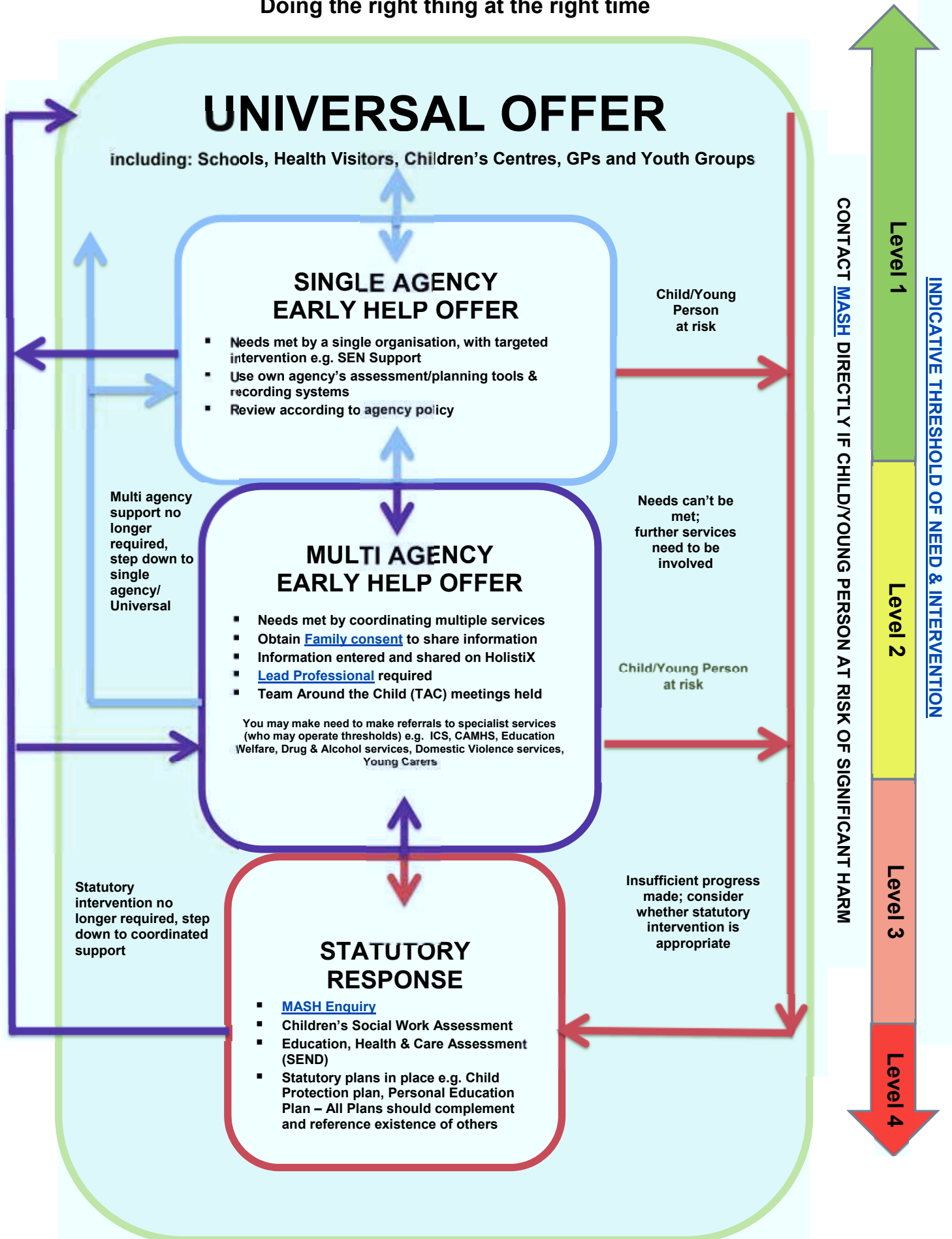
|                                                                                                                 | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|-----------------------------------------------------------------------------------------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| % of QA forms completed in the month that indicate 1 or more changes in Social Worker since the last CiC review | 19.9%  | 20.7%  | 18.3%  | 12.6%  | 22.2%  | 21.5%  | 24.4%  | 23.4%  | 18.6%  | 32.3%  | 21.4%  | 32.3%  |

# Agenda Item 10

## The Child and Young Person's Journey

Doing the right thing at the right time

PROPORTIONAL AND GRADUATED RESPONSE:  
IDENTIFY, ASSESS, PLAN, DO, REVIEW







| <b>DEVON SAFEGUARDING CHILDREN BOARD</b>                                                                                                                                                                                                                                                                                                                         |                            |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| <b>Report to Executive Meeting</b>                                                                                                                                                                                                                                                                                                                               |                            |
| <b>Section 1 - General</b>                                                                                                                                                                                                                                                                                                                                       |                            |
| <b>Date of Executive Meeting</b>                                                                                                                                                                                                                                                                                                                                 | 15 <sup>th</sup> June 2016 |
| <b>Title of Report/Agenda Item</b>                                                                                                                                                                                                                                                                                                                               | Early Help in Devon        |
| <b>Author/Presenter</b>                                                                                                                                                                                                                                                                                                                                          | Jo Olsson                  |
| <b>Section 2 – Report Detail</b>                                                                                                                                                                                                                                                                                                                                 |                            |
| <b>Report is for:</b>                                                                                                                                                                                                                                                                                                                                            |                            |
| <input type="checkbox"/> Decision by DSCB <input type="checkbox"/> Endorsement by DSCB <input checked="" type="checkbox"/> Discussion <input type="checkbox"/> Information                                                                                                                                                                                       |                            |
| <b>Is this confidential?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><br>(if no, the papers could be distributed to non-members of Devon Safeguarding Children Board and published on the Devon Safeguarding Children Board website)                                                                                              |                            |
| <b>Are there any communication and/or media implications?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><br><b>If yes, please state below:</b>                                                                                                                                                                                      |                            |
| <b>Should the report be disseminated further?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br><br><b>If yes, please select options:</b><br><br>through the DSCB website <input checked="" type="checkbox"/><br>through the DSCB e-briefing <input checked="" type="checkbox"/><br>other - please state below <input type="checkbox"/> |                            |
| <b>Summary of Report:</b>                                                                                                                                                                                                                                                                                                                                        |                            |
| <b>Section 3 – Improving the lives of children, young people and their families</b>                                                                                                                                                                                                                                                                              |                            |
| <b>Briefly describe the differences this report will make to children and young peoples' lives.</b><br>The report will contribute to ensuring children receive a timely and proportionate response to their needs.<br>The report will contribute to ensuring that only children who may require a statutory                                                      |                            |

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service are brought into Children's Social Care, thereby avoiding the damage that is caused to children and families by inappropriate statutory intervention.

<http://gu.com/p/4tct8/sbl>

Report Template (font Arial and size 11)

## Report Name

*Please note that one of your recommendations should reflect the positive difference that this report will make for children, young people and their families.*

|   | <b>Recommendations</b><br>(add detailed actions to the template below) | <b>Action Owner</b> | <b>Deadline</b> | <b>Review Date</b> |
|---|------------------------------------------------------------------------|---------------------|-----------------|--------------------|
| 1 |                                                                        |                     |                 |                    |
| 2 |                                                                        |                     |                 |                    |
| 3 |                                                                        |                     |                 |                    |

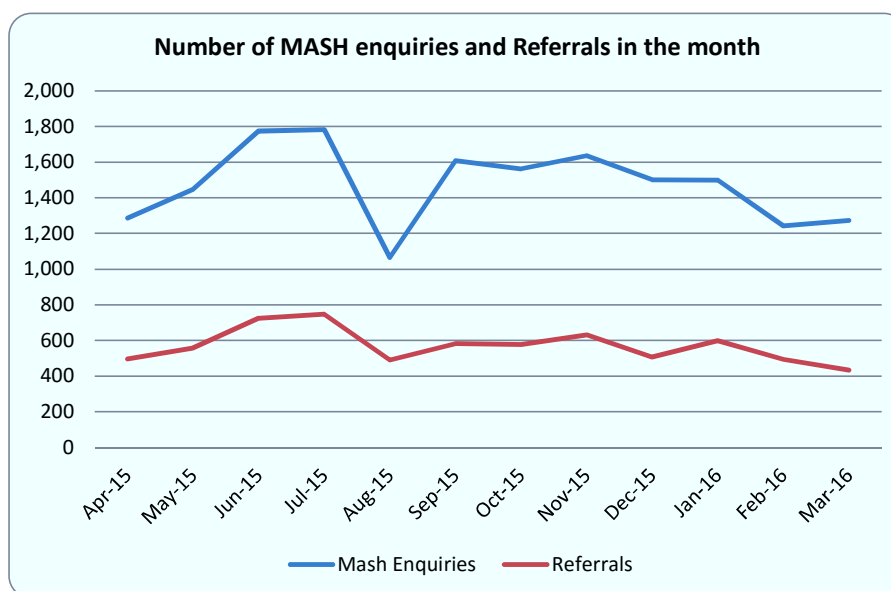
### 1. Early Help in Devon

#### 1.1 What does the data tell us?

The 15/16 data held by the Council has just been finalised. The MASH data shows a reasonably well matched pattern of MASH enquiries and accepted referrals, (see fig 1). However the conversion rate from enquiry to referral is extremely low. In August 15, it was at its highest at 46% and at its lowest in December 15 and March 16 at 34%.



## Number of MASH Enquiries and Referrals in the month



|                       | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|-----------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| <b>Mash Enquiries</b> | 1,286  | 1,448  | 1,774  | 1,781  | 1,065  | 1,608  | 1,563  | 1,636  | 1,501  | 1,500  | 1,243  | 1,272  |
| <b>Referrals</b>      | 496    | 558    | 725    | 747    | 491    | 582    | 578    | 631    | 507    | 598    | 494    | 433    |

What this means is that between 54% and 66% of enquiries involve a significant amount of administrative and professional activity but threshold for social care intervention is not reached. This conversion rate would be more likely in a single point of contact service. We should be aiming for a conversion rate in the region of 80%, which would capture higher need Early Help cases and cases requiring statutory intervention.

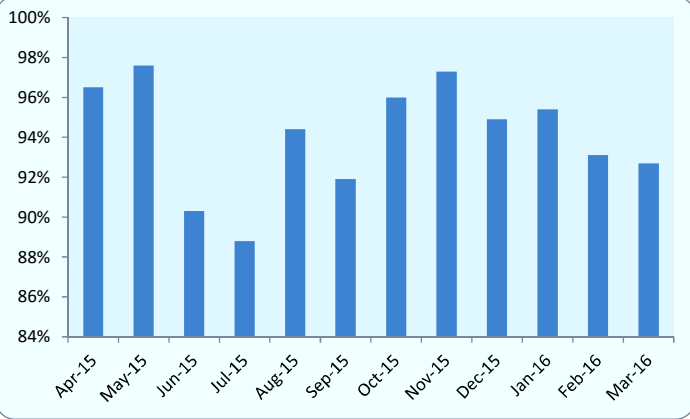
On average, more than 90% of referrals lead to an assessment by social care. This conversion rate should be high as enquiries shouldn't be accepted as referrals unless they are likely to require statutory intervention. However, following assessment, 40% of cases are closed (see fig 2). What this means is that we are assessing about 20% (circa 150/200 per month) more families than we should be. Again, we should be aiming for a conversion rate from assessment to social care intervention in the region of 80%. For some families, the assessment in itself will generate the required change, which means social care intervention will no longer be required but for many it will be a case of, 'wrong service, wrong time' and this is harmful for families.

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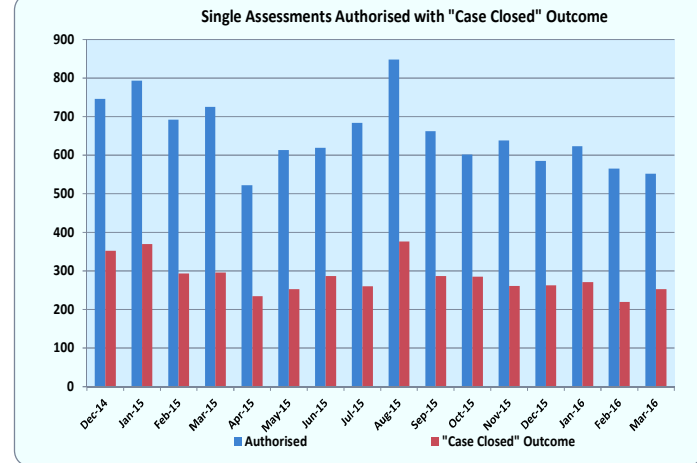
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## % of Referrals with a Single Assessment



| Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 96.5%  | 97.6%  | 90.3%  | 88.8%  | 94.4%  | 91.9%  | 96.0%  | 97.3%  | 94.9%  | 95.4%  | 93.1%  | 92.7%  |

## Cases closed at end of Single Assessment



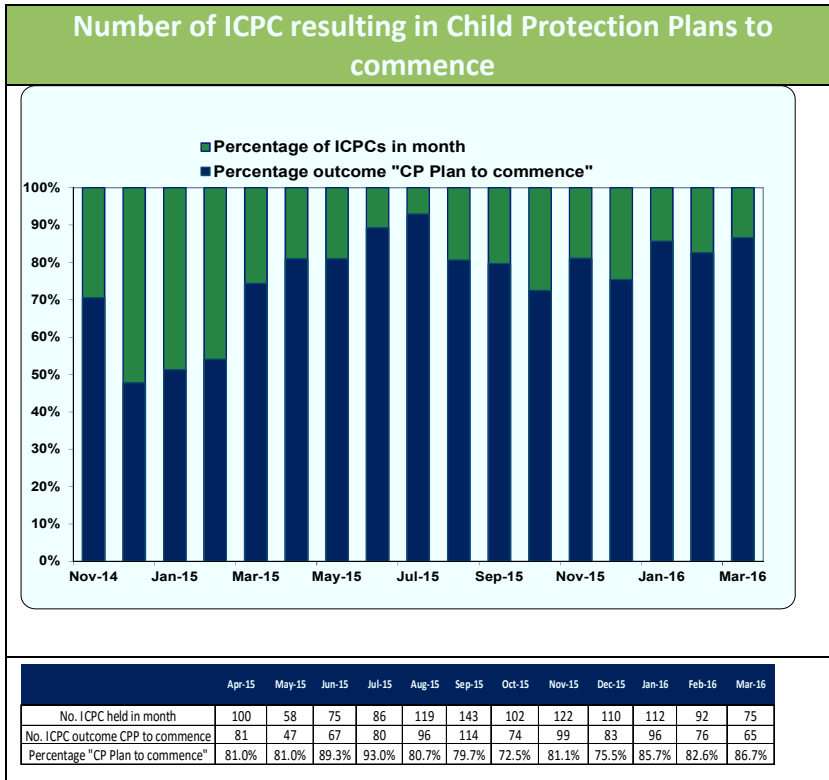
| Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 44.8%  | 41.3%  | 46.4%  | 38.0%  | 44.3%  | 43.4%  | 47.3%  | 40.9%  | 45.0%  | 43.5%  | 38.8%  | 45.8%  |

The rate of Initial Child Protection Conferences increased significantly in March 2015 and continued at a high level throughout the year, above our statistical neighbours and national level.

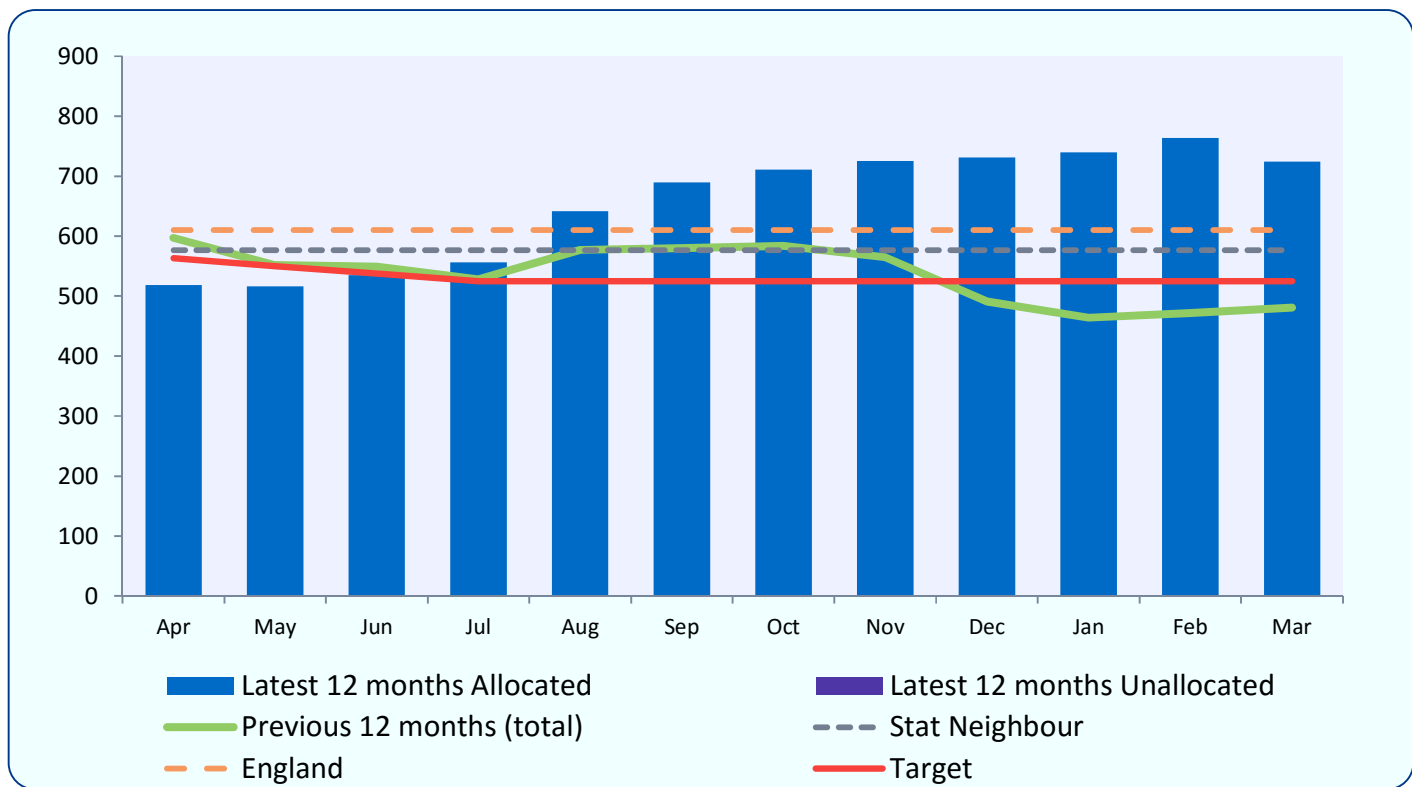
However 30% of plans that were made in 15/16 were ended within three months (see fig 3). While some of these will be plans for children who have moved into Devon on a plan and at our transfer-in conference we decide to de-plan, others will have been inappropriately made subject of a plan by our initial child protection conference.



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## Number of Children Subject to a Child Protection Plan



| 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 | Feb-16 | Mar-16 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 525    | 491    | 472    | 481    | 519    | 516    | 535    | 556    | 642    | 690    | 711    | 725    | 731    | 740    | 764    | 724    |

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Taken together the data paints a very compelling picture of a whole system that is inappropriately escalating children into statutory services and then escalating them within social care.

## 1.2 What else do we know?

We know that the DAF is not an enabler of early help for children and families. We are developing Early Help tools for assessment, planning and intervention. These are designed to support appropriate risk management by Early Help practitioners rather than to act as referral forms or to create a hoop to jump through before accessing a social care service.

For a period, colleagues were encouraged to 'MASH-it'; this was a response to being judged inadequate with concerns raised about Early Help. This may have been a reasonable position at the time; it is not so, now.

Early Help is often mistakenly understood to be about Early Help Services and while there are a suite of services designed to meet higher level Early Help need, Early Help is better understood as a system.

The Early Help system is made up of services users, community resources, universal service providers and targeted services, working together to enable families to manage their own dilemmas and solve their own problems, making whatever changes are necessary to secure the well-being of their children enabling appropriate risk management in the community and a proportionate response to risk and need

The Alliance executive has endorsed, The Child and Young Person's Journey, attached here as an appendix (appendix 1). It appears that there is substantial single agency Early Help and evidence of over-involvement by statutory services, but the middle part of the journey, the multi-agency early help offer, involving lead professionals coordinating team around the child or family, is grossly under-developed. There are of course areas of good practice and some excellent examples of outstanding practice, but these are the exception

Unnecessary statutory intervention is not neutral and neither is erring on the side of caution if it means families are drawn into a system that they do not need to be in.

<http://gu.com/p/4tct8/sbl>

Caseloads in Children's Social Care are too high to provide a consistently 'good' service. At the time of writing they are at about 25. I am attaching for information the weekly caseload monitoring report requested by the Lead Member, Councillor James McInnes (appendix 2). Our ambition is to bring caseloads below 20 by September 2016, below 18 by March 17 and in line with 'good' Local Authorities by September 2017. It is relatively straightforward to make the first decrease, and this can be done on a single agency basis.

To ensure, on a sustained basis, that statutory social work is reserved for those families who need this level of intervention, in the context of an embedded high level interventionist culture, is a much more complex proposition and requires whole system transformational change.



## **2. The role of the Alliance and the DSCB**

- 2.1 The Alliance owns the responsibility for the transformational change proposed above. Work on this is already underway but is at a very early stage. The Alliance is responsible for ensuring that the conditions to achieve 'good' safeguarding services in the statutory service and in early help are either in place or in development and that the impact of these conditions is translating into a consistent standard of good practice across the whole system for children.

The DSCB takes a lead on ensuring that the journey of the child is effective and appropriate to the levels of risk they face. This means assuring ourselves that the right child is in the right part of the system at the right time receiving the right service. At times this will require a confidence that those most at risk are quickly passed to that part of the system best designed to meet their needs. In many more instances, it means an assurance that children and their families are able to be supported with the least statutory intervention.

The report highlights one of the core responsibilities of the DSCB which is about setting the culture of and approach to levels of risk management in the area. Risk aversion is as concerning as risk taking and the Board is charged with overseeing how the approach to risk is carried out in the County. It is common for areas deemed inadequate to adopt a very risk adverse approach but as Devon moves forward it is going to require something more nuanced and sophisticated if its services are to both manage demand and to respond effectively to the most vulnerable.

## **3 Conclusion and Recommendations**

- 3.1 This initial report identifying for the Executive the shared challenge we face is purposefully high level. The Executive may want to see a more detailed analysis of patterns of enquiries, conversion rates and so on, including the prevalence of multi-agency early help offers, lead professional role and team around the child activity. On current data, Devon looks like an outlier in terms of its rapid escalation into statutory service and low engagement with responding to the needs of often complex and challenging families with a sophisticated and well embedded early Help offer.
- 3.2 Children's Services, with the support of the DSCB, is already taking steps to strengthen practice to prevent inappropriate escalation of cases from MASH to initial Child Protection Conference and to tighten the decision to make children subject of a plan. We are reviewing with a view to changing the internal processes in MASH to build a stronger culture of shared conversations on risk.

It is clear from my conversations with partners that there is a shared commitment to 'right service, right time' and some partners are taking active steps to test the thresholds of their decision making on MASH enquiries.

I recommend that each partner reports back to the Executive on the take up of the multi-agency early help offer by their agency and the target they have set for 16/17 to increase take up in their agency. The DSCB can monitor impact by further data reports at the end of the second and third quarters.



[www.devonsafeguardingchildren.org](http://www.devonsafeguardingchildren.org)

**“REPORT NAME” RECOMMENDATION ACTION PLAN**

| Rec No. | Implementation Actions | Time scales to complete | Person Responsible | Outcome when recommendation completed | Review progress action (date) |
|---------|------------------------|-------------------------|--------------------|---------------------------------------|-------------------------------|
| 1       |                        |                         |                    |                                       |                               |
| 2       |                        |                         |                    |                                       |                               |
| 3       |                        |                         |                    |                                       |                               |

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## Average Cases per FTE by Team

|                                               |                           |                  |                                     |                  | 27/05/2016                              | 20/05/2016                              | 13/05/2016                              | 06/05/2016                              |                       |
|-----------------------------------------------|---------------------------|------------------|-------------------------------------|------------------|-----------------------------------------|-----------------------------------------|-----------------------------------------|-----------------------------------------|-----------------------|
| Service Area                                  | Team Name                 | Practice Manager | Current FTEs - Caseload Adjustment* | Total Open Cases | Ave. No. of Cases per Current FTE Total | Ave. No. of Cases per Current FTE Total | Ave. No. of Cases per Current FTE Total | Ave. No. of Cases per Current FTE Total |                       |
| Initial Response                              | Exeter                    | IRCX1            | Juanita Scallan                     | 5.7              | 135                                     | 23.7                                    | 23.4                                    | 25.2                                    | 25.5                  |
|                                               | Mid & East                | IRCM1            | Kevin Kenna                         | 8.8              | 195                                     | 22.2                                    | 22.2                                    | 22.2                                    | 20.3                  |
|                                               | North                     | IRCN1            | Roger Walter                        | 6.9              | 180                                     | 26.2                                    | 25.1                                    | 25.1                                    | 36.3                  |
|                                               | South                     | IRCS1            | Jean Beynon                         | 7.4              | 273                                     | 36.9                                    | 38.6                                    | 44.7                                    | 37.7                  |
| <b>Initial Response Total</b>                 |                           |                  |                                     | <b>28.8</b>      | <b>783</b>                              | <b>27.2</b>                             | <b>27.4</b>                             | <b>28.8</b>                             | <b>29.4</b>           |
| Children & Families                           | Exeter                    | CFCX1            | Anastasia Wyman (Temporary)         | 6.0              | 168                                     | 28.0                                    | 26.8                                    | 23.8                                    | 27.0                  |
|                                               |                           | CFCX2            | Phil Stagg                          | 6.2              | 157                                     | 25.3                                    | 25.2                                    | 29.1                                    | 27.4                  |
|                                               |                           | CFCX3            | Aiden Mitchelmore                   | 5.8              | 150                                     | 25.9                                    | 25.9                                    | 27.4                                    | 27.2                  |
|                                               |                           | CFCX4            | Helen Neighbour                     | 7.2              | 145                                     | 20.1                                    | 20.1                                    | 20.1                                    | 21.5                  |
| <b>Children and Families - Exeter Total</b>   |                           |                  |                                     | <b>25.2</b>      | <b>620</b>                              | <b>24.6</b>                             | <b>24.3</b>                             | <b>24.8</b>                             | <b>25.6</b>           |
| Children & Families                           | Mid & East                | CFCM1            | Richard Ashdown                     | 6.2              | 137                                     | 22.1                                    | 23.9                                    | 24.4                                    | 25.2                  |
|                                               |                           | CFCM2            | Helen Patten                        | 5.8              | 144                                     | 24.8                                    | 25.5                                    | 20.7                                    | 22.2                  |
|                                               |                           | CFCM3            | Emily Hextall                       | 5.6              | 115                                     | 20.5                                    | 21.3                                    | 27.9                                    | 26.4                  |
|                                               |                           | CFCM4            | Corrina Bryant                      | 5.6              | 132                                     | 23.6                                    | 23.8                                    | 25.4                                    | 24.8                  |
| <b>Children and Families - Mid/East Total</b> |                           |                  |                                     | <b>23.2</b>      | <b>528</b>                              | <b>22.8</b>                             | <b>23.6</b>                             | <b>24.2</b>                             | <b>24.4</b>           |
| Children & Families                           | North                     | CFCN2            | Paul Sains                          | 5.8              | 170                                     | 29.3                                    | 28.3                                    | 24.4                                    | 24.1                  |
|                                               |                           | CFCN3            | Fran Hughes                         | 5.5              | 146                                     | 26.5                                    | 24.8                                    |                                         |                       |
|                                               |                           | CFCN4            | Heather Cooper                      | 6.6              | 127                                     | 19.2                                    | 20.3                                    |                                         |                       |
| <b>Children and Families - North Total</b>    |                           |                  |                                     | <b>17.9</b>      | <b>443</b>                              | <b>24.7</b>                             | <b>24.3</b>                             | <b>24.4</b>                             | <b>24.1</b>           |
| Children & Families                           | South                     | CFCS1            | Lisa Jackson                        | 5.9              | 165                                     | 28.0                                    | 25.7                                    | 23.5                                    | 23.9                  |
|                                               |                           | CFCS2            | Herdaypal Johal                     | 7.0              | 170                                     | 24.3                                    |                                         |                                         |                       |
|                                               |                           | CFCS3            | Jane Anstis                         | 7.5              | 196                                     | 26.1                                    |                                         |                                         |                       |
|                                               |                           | CFCS4            | Jacqueline Fox                      | 6.4              | 172                                     | 26.9                                    |                                         |                                         |                       |
| <b>Children and Families - South Total</b>    |                           |                  |                                     | <b>26.8</b>      | <b>703</b>                              | <b>26.2</b>                             | <b>25.7</b>                             | <b>23.5</b>                             | <b>23.9</b>           |
| Permanency & Transition                       | Exeter                    | PTCX1            | Juliet Jones                        | 12.4             | 256                                     | 20.6                                    | 20.8                                    | 11.8                                    | 21.9                  |
|                                               | Mid & East                | PTCM1            | Naomi Pollard                       | 9.6              | 162                                     | 16.8                                    | 16.6                                    | 19.9                                    | 14.2                  |
|                                               | North                     | PTCN1            | Giles Bashford                      | 9.6              | 184                                     | 19.2                                    | 19.2                                    | 20.5                                    | 21.0                  |
|                                               | South                     | PTCS1            | Karen Thompson                      | 10.1             | 220                                     | 21.8                                    | 21.8                                    | 32.1                                    | 24.7                  |
| <b>Permanency and Transition Total</b>        |                           |                  |                                     | <b>41.7</b>      | <b>822</b>                              | <b>19.7</b>                             | <b>19.7</b>                             | <b>20.3</b>                             | <b>20.4</b>           |
| Integrated Children's Services                | ICS East Mid              | ICCEMID          | Brian Copp                          | 3.3              | 109                                     | 33.1                                    | 33.1                                    | 25.4                                    | No Data for this item |
|                                               | ICS Exeter                | ICCEXETR         | Martin Quaintance                   | 7.4              | 133                                     | 18.0                                    | 18.1                                    | 18.1                                    |                       |
|                                               | ICS Exeter 2              | ICCIAEME         | Martin Quaintance / Brian Copp      | 1.0              | 3                                       | 3.0                                     | 3.0                                     | 3.0                                     |                       |
|                                               | ICS North 1               | ICCNORTH         | Marianne Jackson                    | 1.6              | 60                                      | 37.5                                    | 40.6                                    | 40.6                                    |                       |
|                                               | ICS North 2               | ICCNRTH2         | -                                   | 4.6              | 43                                      | 9.3                                     | 10.0                                    | 10.0                                    |                       |
|                                               | ICS South 1               | ICCSWEST         | Derek Godden                        | 2.8              | 72                                      | 25.7                                    | 25.7                                    | 18.9                                    |                       |
|                                               | ICS South 2               | ICCSWST2         | Kathy Kirkman                       | 5.6              | 96                                      | 17.1                                    | 17.3                                    | 16.2                                    |                       |
| <b>Integrated Children's Services Total</b>   |                           |                  |                                     | <b>26.3</b>      | <b>516</b>                              | <b>19.6</b>                             | <b>20.0</b>                             | <b>18.3</b>                             |                       |
| Private Fostering                             | PFC1                      | Elaine Newton    | 3.7                                 | 36               | 9.8                                     | 11.4                                    | 11.4                                    | 12.2                                    |                       |
| <b>Total (Excluding FOC Cases)</b>            |                           |                  |                                     | <b>193.6</b>     | <b>3935</b>                             | <b>20.3</b>                             | <b>20.3</b>                             | <b>20.2</b>                             | <b>24.1</b>           |
| Finance Only Cases (FOC)                      | FOC01                     |                  |                                     |                  | 245                                     |                                         |                                         |                                         |                       |
| ICS Finance Only Cases                        | ICSFREME, ICSFRN & ICSFRS |                  |                                     |                  | 968                                     |                                         |                                         |                                         |                       |
| <b>Total (Including FOC Cases)</b>            |                           |                  |                                     |                  | <b>5148</b>                             |                                         |                                         |                                         |                       |

Staff names in red text denotes 'Agency Staff'

Minus staff shown as on long term sick leave or maternity

In 'Current FTEs - 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

\* FTE Caseload Adjustment = Family Practitioners only counted in P&T teams, ASYE's throughout adjusted to be 0.6 of their FTE for caseload purposes.

All Team Managers and Assistant Team Managers are excluded from caseload calculations i.e. they are not caseholding.

In the team Private Fostering the Team Manager is included and is said to be caseholding.

# Agenda Item 10

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

### APPENDIX D

#### 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:                                                                                                                                                                                                                                                                                                                        |
|----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>TG11: Market capacity adult social care</b>     | Without mitigating action there is risk that: <i>the supply of personal care of the right quality is currently stretched in some parts of Devon increasing the risk that we cannot maintain all people who require it safely in their own homes, achieve safe discharge from hospital and with potential to increase admissions to residential and nursing care. Additionally the CCG's planned closure of community hospitals presents a further market capacity risk with regard to intermediate care.</i> | <b>Risk Owner:</b><br>Tim Golby                                                                                                                                                                                                                                                                                                                                            |
| <b>Inherent Risk:</b> 30                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>Accountable Officer:</b><br>Jennie Stephens                                                                                                                                                                                                                                                                                                                             |
| <b>Current Risk:</b> 24                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                            |
| <b>Mitigating controls (including RAG rating):</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>Direction of Travel:</b>                                                                                                                                                                                                                                                                                                                                                |
| Green                                              | a) Reprourement of personal care via new framework: contracts awarded in March, transition to new arrangements in June.                                                                                                                                                                                                                                                                                                                                                                                      | ↑                                                                                                                                                                                                                                                                                                                                                                          |
| Amber                                              | b) Refresh of Adult Social Care Market Position Statement                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ↔                                                                                                                                                                                                                                                                                                                                                                          |
| Green                                              | c) Provider Engagement Network                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ↔                                                                                                                                                                                                                                                                                                                                                                          |
| Amber                                              | d) Performance monitoring of call off against the framework agreement                                                                                                                                                                                                                                                                                                                                                                                                                                        | ↔                                                                                                                                                                                                                                                                                                                                                                          |
| Amber                                              | e) Work with providers to address capacity shortfall                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ↔                                                                                                                                                                                                                                                                                                                                                                          |
| Amber                                              | f) Investigations of new solutions/new way of working                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ↔                                                                                                                                                                                                                                                                                                                                                                          |
| Green                                              | g) Weekly SITREPS and escalation                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ↔                                                                                                                                                                                                                                                                                                                                                                          |
| Amber                                              | h) Provider of last resort option                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ↔                                                                                                                                                                                                                                                                                                                                                                          |
|                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>Additional comments (if appropriate):</b><br>Bids for Framework Contracts currently being evaluated. On-going work with providers to secure immediate supply with regular monitoring of position. Above inflationary award issued for current year. Launching a promotional campaign with providers to encourage workforce recruitment and retention across the sector. |

| Risk Code and Status:                              | Scope of Risk:                                                                                                                                                                                                                                                                                                                                                                                                    | Current position/actions taken/accountable officer:                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>TG15: Reduction in funding affects service</b>  | Without mitigating actions there is risk that: <i>potential loss of funding affecting DCC service delivery in the event of changes made in the Comprehensive Spending Review and subsequent Local Government Settlement given inflationary pressures in market and demographic growth. Also, potential judicial risk, e.g. current Supreme court case on separating costs of nursing care from costs of care.</i> | <b>Risk Owner:</b><br>Tim Golby                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>Inherent Risk:</b> 30                           |                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>Accountable Officer:</b><br>Jennie Stephens                                                                                                                                                                                                                                                                                                                                                                                                               |
| <b>Current Risk:</b> 30                            |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>Mitigating controls (including RAG rating):</b> |                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>Direction of Travel:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Green                                              | a) Options on 2% precept                                                                                                                                                                                                                                                                                                                                                                                          | ↔                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Amber                                              | b) Increase in BCF funding                                                                                                                                                                                                                                                                                                                                                                                        | ↔                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>Additional comments (if appropriate):</b><br>The current risk remains assessed at 30 (VERY HIGH) as a result of the on-going financial pressures being experienced by NEW CCG. Announcement of Success Regime and national focus on Devon is still being worked through and remains a very high risk to the Local Authority. Funding pressures being experienced across other areas of People's services, including Children's Social Care and Education. |

# Agenda Item 10

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

### APPENDIX D

#### 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:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                           |
|---------------------------------------------|------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|
| TG23: Workforce                             |                                                                              | Without mitigating actions there is risk that: <i>lack of Organisational Development Plan for the Authority, which should include succession planning for Leaders and Managers could lead to future skills shortages across key areas of the business, for example, Social Workers, Head teachers, Teachers and Health Workers. This needs to include contracted services for care where significant workforce recruitment and retention issues exist. Failure to address may result in market failure and statutory non-compliance with Care Act duties.</i> | Risk Owner:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Tim Golby/Keri Storey/Sue Clarke/Jo Olsen |
| Inherent Risk:                              | 30                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Accountable Officer:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Jennie Stephens                           |
| Current Risk:                               | 30                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           |
| Mitigating controls (including RAG rating): |                                                                              | Direction of Travel:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Additional comments (if appropriate):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                           |
| Green                                       | a) Test of Assurance                                                         | ↔                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Key shortages in important and risky workforce areas, including children's and adult social workers, commissioning skills and workforce supply issues with key providers of care. Risk broadened to include contracted services for care where significant workforce recruitment and retention issues exist (educational psychologists within Education). Proactive engagement with NHS providers and the independent sector to address workforce issues, including promoting care campaign. Failure to address may result in market failure and statutory non-compliance with Care Act duties. |                                           |
| Green                                       | b) Succession Planning and Grading Review (Adult SW)                         | ↔                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           |
| Amber                                       | c) Workforce Development, including potential impact of devolution ask       | ↔                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           |
| Green                                       | d) Social Work Bursaries                                                     | ↔                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           |
| Amber                                       | e) Promoting care campaign launched with NHS provider and independent sector | ↑                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           |
| Amber                                       | f) Provider Engagement Network conversations and workshops                   | ↑                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           |
| Amber                                       | g) Multi-agency workforce discussions with NHS providers.                    | ↑                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           |
| Amber                                       | h) HR data and dashboards under development (not sufficiently robust)        | ↔                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           |
| Amber                                       | i) Workforce Development Board (Health and Care)                             | ↔                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           |

| Risk Code and Status:                       |                                                         | Scope of Risk:                                                                                                                                                                                 | Current position/actions taken/accountable officer: |                                           |
|---------------------------------------------|---------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|-------------------------------------------|
| TG29: Budget Management                     |                                                         | Without mitigating actions there is risk that a <i>broader corporate overview of timing, impact or scope of service or policy changes gives rise to review or reconsideration of proposals</i> | Risk Owner:                                         | Tim Golby/Keri Storey/Sue Clarke/Jo Olsen |
| Inherent Risk:                              | 25                                                      |                                                                                                                                                                                                | Accountable Officer:                                | Jennie Stephens                           |
| Current Risk:                               | 20                                                      |                                                                                                                                                                                                |                                                     |                                           |
| Mitigating controls (including RAG rating): |                                                         | Direction of Travel:                                                                                                                                                                           | Additional comments (if appropriate):               |                                           |
| Amber                                       | a) Thoroughness of consultation of proposals            | ↔                                                                                                                                                                                              |                                                     |                                           |
| Amber                                       | b) Thorough risk assessment of plans and policy changes | ↔                                                                                                                                                                                              |                                                     |                                           |

# Agenda Item 10

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

### APPENDIX D

#### 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: |                                                                                                                                                                                                                                                                                                                                                   |
|----------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>KS19: Continuing Health Care</b>                | Without mitigating actions there is risk that: <i>significant delays in assessments and determinations of CHC eligibility leading to operational inefficiencies, possible clinical risk if people with primary care needs are not being appropriately case managed by NHS professionals; and financial risk to the Council as well as impact on individuals and families</i> | <b>Risk Owner:</b><br>Keri Storey                   |                                                                                                                                                                                                                                                                                                                                                   |
| <b>Inherent Risk:</b> 30                           |                                                                                                                                                                                                                                                                                                                                                                              | <b>Accountable Officer:</b><br>Jennie Stephens      |                                                                                                                                                                                                                                                                                                                                                   |
| <b>Current Risk:</b> 20                            |                                                                                                                                                                                                                                                                                                                                                                              |                                                     |                                                                                                                                                                                                                                                                                                                                                   |
| <b>Mitigating controls (including RAG rating):</b> | <b>Direction of Travel:</b>                                                                                                                                                                                                                                                                                                                                                  | <b>Additional comments (if appropriate):</b>        |                                                                                                                                                                                                                                                                                                                                                   |
| Amber                                              | a) Issues escalated to NEW Devon CCG and some actions agreed which may mitigate                                                                                                                                                                                                                                                                                              | ↑                                                   | This is a key area of work for the NEW Devon Success Regime. Adult social care exploring opportunities to be part of this work including discussions about new models of care for discharge which focus on supporting people back home, and consideration of joint commissioning arrangements to enable co-ordinated discussions with care market |
| Amber                                              | b) Formal disputes being raised and Disputes Protocol redrafted but not yet signed off                                                                                                                                                                                                                                                                                       | ↔                                                   |                                                                                                                                                                                                                                                                                                                                                   |
| Amber                                              | c) Additional training needs for leadership team and managers being identified and planned for 2016                                                                                                                                                                                                                                                                          | ↔                                                   |                                                                                                                                                                                                                                                                                                                                                   |
| Amber                                              | d) Agreement reached to move the NHS Learning Disabilities nurses back to NHS management to simplified the accountabilities for case management and assessment                                                                                                                                                                                                               | ↑                                                   |                                                                                                                                                                                                                                                                                                                                                   |

| Risk Code and Status:                              | Scope of Risk:                                                                                                                                                                                    | Agreed                                         |                                                                                                                                                                                                                                                               |
|----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>JO13: Care Leavers in Education, Employment</b> | Without mitigating actions there is risk that: <i>failure to join up approach across People leads to continuing high numbers of Care Leavers not in education, employment and training (NEET)</i> | <b>Risk Owner:</b><br>Jo Olsen                 |                                                                                                                                                                                                                                                               |
| <b>Inherent Risk:</b> 30                           |                                                                                                                                                                                                   | <b>Accountable Officer:</b><br>Jennie Stephens |                                                                                                                                                                                                                                                               |
| <b>Current Risk:</b> 25                            |                                                                                                                                                                                                   |                                                |                                                                                                                                                                                                                                                               |
| <b>Mitigating controls (including RAG rating):</b> | <b>Direction of Travel:</b>                                                                                                                                                                       | <b>Additional comments (if appropriate):</b>   |                                                                                                                                                                                                                                                               |
| Amber                                              | a) To ensure regular reporting and sharing of data on Care Leavers with appropriate partners                                                                                                      | ↔                                              | Management Information now becoming available and shows variable performance which is being addressed. Improved ICT reporting needed for accuracy around Care Leavers lists. Virtual School extended to Care Leavers. Care Leaver apprentices within Council. |
| Amber                                              | b) To ensure the offer from Careers SW is sufficiently bespoke to the needs of this group of young people                                                                                         | ↔                                              |                                                                                                                                                                                                                                                               |
| Amber                                              | c) To develop the use of the POPP to support Care Leavers                                                                                                                                         | ↔                                              |                                                                                                                                                                                                                                                               |
| Amber                                              | d) To work with the the business to develop the apprentice and internship provision                                                                                                               | ↔                                              |                                                                                                                                                                                                                                                               |

| Risk Code and Status:                              | Scope of Risk:                                                                                                                                         | Current position/actions taken/accountable officer: |                                                                                                                                        |
|----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| <b>JO15: Attainment of Looked After Children</b>   | Without mitigating actions there is risk that: <i>Lack of stability of care or school placements has a significant impact on educational outcomes.</i> | <b>Risk Owner:</b><br>Jo Olsen                      |                                                                                                                                        |
| <b>Inherent Risk:</b> 30                           |                                                                                                                                                        | <b>Accountable Officer:</b><br>Jennie Stephens      |                                                                                                                                        |
| <b>Current Risk:</b> 20                            |                                                                                                                                                        |                                                     |                                                                                                                                        |
| <b>Mitigating controls (including RAG rating):</b> | <b>Direction of Travel:</b>                                                                                                                            | <b>Additional comments (if appropriate):</b>        |                                                                                                                                        |
| Amber                                              | a) Join up activity across Heads of Services and Babcock LDP                                                                                           | ↔                                                   | High levels of activity which is reflected in much improved exam results. Greater focus by Virtual School and partners showing impact. |
| Amber                                              | b) Re-focus of Babcock LDP                                                                                                                             | ↑                                                   |                                                                                                                                        |
| Amber                                              | c) Data analysis                                                                                                                                       | ↑                                                   |                                                                                                                                        |
| Amber                                              | d) Virtual School                                                                                                                                      | ↑                                                   |                                                                                                                                        |
| Amber                                              | e) Personal Education Plan (PEP) impact                                                                                                                | ↑                                                   |                                                                                                                                        |
| Amber                                              | f) Stability of education and care placements                                                                                                          | ↔                                                   |                                                                                                                                        |
| Amber                                              | g) Effectiveness of Inclusion work and challenge to schools                                                                                            | ↔                                                   |                                                                                                                                        |
| Amber                                              | h) Forward Planning                                                                                                                                    | ↔                                                   |                                                                                                                                        |

# Agenda Item 10

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

### APPENDIX D

#### 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: |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| <b>JO23: Children's Services Budget Pressures and Allocation</b>                                                                                                                                   | Without mitigating actions there is risk that: <i>the impact across People's services of budget pressures and allocation issues within children's services. Significant overspends are currently being forecast within Education transport and a range of social care budgets could threaten overall financial stability and impact on core service delivery.</i> | <b>Risk Owner:</b><br>Jo Olsen/Sue Clarke           |
| <b>Inherent Risk:</b> 30                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                   | <b>Accountable Officer:</b><br>Jennie Stephens      |
| <b>Current Risk:</b> 30                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                   |                                                     |
| <b>Mitigating controls (including RAG rating):</b>                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                   | <b>Direction of Travel:</b>                         |
| Amber                                                                                                                                                                                              | a) Regular financial performance reporting to CLT                                                                                                                                                                                                                                                                                                                 | ↔                                                   |
| Amber                                                                                                                                                                                              | b) Weekly children's social care management meetings focussing on budget pressures                                                                                                                                                                                                                                                                                | ↔                                                   |
| Amber                                                                                                                                                                                              | c) Focus for LTP discussions                                                                                                                                                                                                                                                                                                                                      | ↔                                                   |
| Amber                                                                                                                                                                                              | d) Scrutiny reporting                                                                                                                                                                                                                                                                                                                                             | ↔                                                   |
| Amber                                                                                                                                                                                              | e) Task Group led by Leader of the Council                                                                                                                                                                                                                                                                                                                        | ↑                                                   |
| <b>Additional comments (if appropriate):</b>                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                   |                                                     |
| Significant overspends are currently being forecast within Education transport and a range of children's social care budgets, which threaten the overall financial stability of People's Services. |                                                                                                                                                                                                                                                                                                                                                                   |                                                     |

| Risk Code and Status:                                                                                                                                                                              | Scope of Risk:                                                                                                                                                                                                                                                                                                                                                                                                            | Current position/actions taken/accountable officer: |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| <b>SC1: School Transport</b>                                                                                                                                                                       | Without mitigating actions there is risk that: <i>Rising overspend on home to school transport is having a deleterious effect on Education and Learning's core budgets and initiatives that are currently absorbing the substantial overspend. Action to address overspend has had limited short term impact against rising costs due to increased expectations and the complexity of individual transport requested.</i> | <b>Risk Owner:</b><br>Sue Clarke                    |
| <b>Inherent Risk:</b> 30                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>Accountable Officer:</b><br>Jennie Stephens      |
| <b>Current Risk:</b> 30                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                     |
| <b>Mitigating controls (including RAG rating):</b>                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>Direction of Travel:</b>                         |
| Amber                                                                                                                                                                                              | a) Management actions within Transport Coordination Service (TCS) involving route analysis and efficiency savings. Transfer of management of Education Transport Team to TCS.                                                                                                                                                                                                                                             | ↔                                                   |
| Amber                                                                                                                                                                                              | b) TCS monitoring and regular review across all areas of spend                                                                                                                                                                                                                                                                                                                                                            | ↔                                                   |
| Amber                                                                                                                                                                                              | c) Policy regularly reviewed and adjusted to reduce areas of discretionary spend                                                                                                                                                                                                                                                                                                                                          | ↔                                                   |
| Amber                                                                                                                                                                                              | d) Actions identified through corporate transport project board                                                                                                                                                                                                                                                                                                                                                           | ↔                                                   |
| <b>Additional comments (if appropriate):</b>                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                     |
| 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 overspend. |                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                     |

| Risk Code and Status:                                                     | Scope of Risk:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Current position/actions taken/accountable officer: |
|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| <b>SC16: National Funding Formula and Implications of the White Paper</b> | Without mitigating actions there is risk <i>Impact of consultation proposals to remove funding allocation for school improvement from September 2017. Potential time lag between changes in Local Authority roles and responsibilities and reduction in Education Support Grant. Corporate budget implications and potential impact on School Improvement support to maintained schools. The White Paper sets out the Governments intentions for universal academisation by 2022. Financial resources will be removed earlier than responsibilities bringing risks for maintained schools requiring support and removing DCC capacity. Significant costs to DCC to facilitate each academy conversio.</i> | <b>Risk Owner:</b><br>Sue Clarke                    |
| <b>Inherent Risk:</b> 25                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>Accountable Officer:</b><br>Jennie Stephens      |
| <b>Current Risk:</b> 25                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                     |
| <b>Mitigating controls (including RAG rating):</b>                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>Direction of Travel:</b>                         |
| Green                                                                     | a) Awareness raised at CLT level                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ↔                                                   |
| Green                                                                     | b) Full Council debate on White Paper                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ↔                                                   |
| Amber                                                                     | c) Financial and Service Plans will be prepared once more details are available                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ↔                                                   |
| <b>Additional comments (if appropriate):</b>                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                     |

