

27th September, 2016

**To the Chair and Members of the
CHILDREN AND YOUNG PEOPLE’S OVERVIEW AND SCRUTINY PANEL**

Performance Challenge of the Doncaster Children’s Services Trust

Relevant Cabinet Member(s)	Wards Affected	Key Decision
Councillor Nuala Fennelly Cabinet Member for Children, Young People and Schools	All	None

EXECUTIVE SUMMARY

1. This report provides a review and analysis of the performance challenge carried out by the Director of Learning and Opportunities of the Doncaster Children’s Services Trust (the ‘Trust’) in Quarter 1 of 2016/17 arising from the challenge meetings held between both parties.

EXEMPT INFORMATION

2. Not exempt.

RECOMMENDATIONS

3. The Panel is asked to:
 - i) Note and evaluate the headline performance information and the resultant analysis;
 - ii) Question the Director of Learning, Opportunities and Skills as to the challenge which he has made of this performance and the implications this has, or may have, for the children and young people of Doncaster;
 - iii) Use the information in this report, the evidence of the Director of learning, Opportunities and Skills and the response of the Chief Executive of the Trust to the questions posed by the Scrutiny panel in order to draw conclusions as to the potential impact arising from performance by the Trust in its improvement journey;
 - iv) Make requests for follow up evidence in order to provide further assurance.

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

4. The Overview and Scrutiny function has the potential to impact upon all of the Council’s key objectives by holding decision makers to account, reviewing performance and developing policy. This is achieved through making robust recommendations, monitoring performance of Council and external partners and reviewing issues outside the remit of the Council that have an impact on the residents of the borough.

BACKGROUND AND CURRENT POSITION

5. The current arrangements for holding the Trust to account are set out in the service delivery contract between the Council and the Trust, which states:-

... 'The Council's Director for Children's Services (DCS) will report to the Council's scrutiny committee four times per annum each contract year in respect of the Trust's performance of its obligations under this agreement (including the provision of services).... Where required by the DCS the Trust's Chief Executive (or his nominee) shall attend such scrutiny committee to respond to any requests for additional information made by the scrutiny committee in respect of the Trust's performance of its obligations under this agreement (including the provision of the services)'

6. The Trust is contracted to deliver services as specified within the contract with the Council. The current arrangements by which the Trust is held to account are extensive and far reaching and were described in some detail in the report to the panel of 11th July, 2016 and in essence take place through monthly, quarterly and annual reviews at operational, middle and senior management and at senior non – executive / senior political levels of both organisations.
7. Following the approval of the report to the scrutiny panel of 11th July, 2016 the current arrangements for the scrutiny panel's monitoring of the Trust have been sharpened and revised to avoid duplication with the monitoring arrangements which are already in place and referenced above.
8. At the July meeting, the panel agreed that a 'split screen' approach be adopted – by this arrangement there is a two phased approach. In the first phase, the Council is held to account for its monitoring of the Trust against the service delivery contract. Specifically, this means that the Council submits a report (this report) for the panel to review and question the DCS or his representatives. The second stage of this split screen is that the Trust responds to the Council's report and the specific performance issues which this has raised. (Item on your agenda)
9. The overall aim of this refined approach is that:-
- The panel will achieve a much more rounded, but focused perspective, of Trust performance;
 - The obligations within the contract will be properly discharged;
 - The scrutiny panel will be able to 'add value' to the accountability process which will no longer not duplicate, or overlap, with existing accountability arrangements;
 - The panel will more clearly be able to identify areas of good performance and underperformance, the reasons for any under performance and request 'exception' or 'deep dive' reports, so as to become better appraised of the performance issues facing the Trust and thereby make recommendations to drive forward improvement.

PERFORMANCE CHALLENGE OF THE DONCASTER CHILDREN'S SERVICES TRUST

10. At the quarterly and monthly challenge meetings the Council holds the Trust to account for its performance during the relevant period. The review of that

performance highlights areas of good performance, as well as those which represent areas of concern, or potential concern.

There are 18 performance indicators which form part of the contractual measures within the service delivery contract.

There are a further suite of 46 'volumetric' measures which are not identified contractual measures, or measures of performance and which do not form part of the contractual assessment of the Trust, but which nonetheless provide important context.

1.1. The table below summarises the number of contract measures on target, within tolerance and outside tolerance as at the end of Quarter 1 2016/17.

	Quarter 1 2016/17			
	Outside tolerance	Inside tolerance	On or better than target	No target specified
Social Care Pathway	3		4	
Children in Care	2	1	2	
Youth Offending Services		1	1	
Workforce (one additional measure yet to report due to unavailability of national data)	1	1		1

The basket of performance measures is jointly reviewed by the Council and the Trust as part of the annual contract review in order to ensure currency and relevance against important stages within the child's journey and where it is known that there are current pressures within that system.

PERFORMANCE HIGHLIGHTS

11. The format of presentation of performance information consists of a summary of the Council's headline assessment of Trust performance by exception and is shown below in paragraphs 11.1 and 11.2 with indicators selected by the Council where there are areas of good and improving performance and areas of concern and potential concern, respectively.

The format adopted is similar to that of the Council's corporate report to the Overview and Scrutiny Management Committee and is shown at appendix 1 and appendix 2.

Each appendix consists of two elements:-

- An Infographic overview which provides an immediately accessible illustration of the areas of performance which are good (illustrated in green) and those which are of concern or potential concern (illustrated in red) and which cross reference by the index number to those itemised in the paragraph 11. and 11.2 and the tables in Appendix 1 and 2 respectively.
- Tables which depict how the challenge takes place for each selected performance measure in a two stage process and provides the content of that challenge which is summarised for the assistance of panel members.

The first appendix depicts performance indicators where the Council has identified that the Trust is performing above target and / or where performance has improved and the Trust's response.

The second appendix illustrates where the Council has identified specific performance indicators which are below target / outside tolerance, or expectations and as such are of concern, or potential concern, because of the impact or potential impact of below - target performance and the explanation provided by the Trust.

11.1 Areas of Good and Improving Performance – Headline conclusions drawn by the Council:

- **A1: Re-referrals in the last 12 months** - a tiny increase mainly as the Trust advises due to increases across all Agencies. No issue of premature 'stepping down' the Council was advised. Performance remains good and is at the national average and has consistently been so, since Q1 2015/16 compared with historical performance. Needs monitoring though to check impact of high demand levels.
- **A4: Child protection visits in timescale** - an important barometer for safeguarding. Though Ofsted noted some delay in the timing of these visits
- **A09: Child Subject CP Plan (second subsequent time)** - This measure is easily skewed by small cohorts. Performance though is good.
- **A06: Child Subject CP Plan (2yrs or more)** - The Trust has provided welcome reassurance to the Council that it is carefully monitoring these cases.
- **B9: Long term stability of placements** - The improved performance since the 2015 outturn is above target for the first time. Performance in the preceding 3 quarters has been at the national average and is now above the national average (68%) which represents a very good recovery.
- **B13: Care leavers in suitable accommodation** - A continued and welcome improvement in performance which is now above the national average.
- **F03: Youth offending custody rates** - Early indications are positive but as the Trust has said it is too early to draw significant conclusions at this stage.

11.2 Areas of concern / potential concern – headline conclusions drawn by the Council:

- **A2: Timeliness of single assessments** - Assessment timeliness is indicative of demand pressures / caseloads. The Trust has to balance efficiency of its process with assurance as to safety and is mindful of this. The Council has received assurance that the Trust is addressing this issue but the Council is maintaining a monitoring brief and whilst performance still remains above national average, the Council will nonetheless continue to challenge this performance, should it fail to show sustained improvement.
- **A3: Case file audits** - Welcome improvement in cases now classified as 'good.' Inadequate cases have remained stubborn to shift. However, in July 2016 a welcome breakthrough occurred, 'Inadequate' cases reduced to 10% and there were increases in % of good and outstanding audits. The caution is that these are only one month's figures. The Council will continue to monitor.
- **A8: Children in need open & current plan** - The Council accepts that the Trust is trying to ensure the correct classification of files. This is a very important indicator and the Council will retain a 'monitoring brief' to be assured that quality of recording remains the issue and that no CIN are improperly omitted from plans

- **B13: Care leavers in EET** - This is an important indicator in meeting Ofsted improvement requirements and for the Council in its role as Corporate parent. Performance is being tracked by both the Trust and the Council to meet with improvement plan requirements. Nationally, care leavers struggle to achieve compared with the general cohort and therefore need greater support mechanisms into further education training and employment. This measure will continue to be monitored.
- **C14: Frontline FTE posts covered by agency staff** - Agency staff add to the cost base of the operation and may not be good for employment stability and continuity thereby introducing an element of risk. There will always be a need for a number of Agency staff but numbers need to be relatively low which they were until Q1 – acknowledging the impact of the competitive market, this is a measure which the Council is keeping under observation.
- **E1: Contacts in Social Care** - A high figure is not necessarily indicative of poor performance and if children need to be referred to social care then that is good performance. The problem here is that a significant number of the referrals are known to be inappropriate. However, a proportion of the increase over recent months is attributable to (commendably) more accurate recording. High demand pressures are unhealthy for the work of social work teams and in ‘clogging up’ the machinery. Contacts below threshold and those which could have gone to the early Help hub are deemed inappropriate. The LGA peer review highlighted this concern, but recognised that these are whole systems issues, not exclusively in the gift of the Trust, which means partners, have to be challenged to apply thresholds consistently. The Council has requested the report of the business analyst’s investigation.
- **E20-22: Up to date assessments** - The Trust response is valid but performance does need to improve. Trust to feedback on RDash action. Acknowledged problem with dental checks which is not unique to Doncaster but there needs to be earlier tracking. Management of PEPs is the responsibility of the Council’s Virtual head in which the social worker employed by the Trust plays a part. There is a disconnect between paper and electronic systems - an ICT solution has been identified. An ICT Portal which will address the systemic weakness is being created which will be trialled in December 2016 and implemented in January 2017 and which should address in large part the problem of return rates, timeliness and quality.

12. IMPACT ON COUNCIL’S KEY OBJECTIVES

Outcomes	Implications
<p>All people in Doncaster benefit from a thriving and resilient economy:</p> <ul style="list-style-type: none"> • Mayoral priority – creating jobs and Housing • Mayoral priority: Be a strong voice for our veterans • Mayoral priority: protecting Doncaster’s vital services 	<p>The Council and the Trust as major partners in the Children and Families Partnership Board share the Children’s plan outcome that all children should achieve their potential – in removing barriers and developing good quality service delivery children will be able to access the benefits of a thriving economy and will themselves be participants in creating and sustaining the strength of the economy.</p>
<p>People live safe, healthy, active and independent lives:</p> <ul style="list-style-type: none"> • Mayoral priority: Safeguarding our communities • Mayoral priority: Bringing down the cost of living 	<p>Ensuring children and young people are free and feel from harm are key ambitions of both the Council and the Trust.</p>

<p>People in Doncaster benefit from a high quality built and natural environment:</p> <ul style="list-style-type: none"> • Mayoral priority: creating jobs and Housing • Mayoral priority: Safeguarding our communities • Mayoral priority: bringing down the cost of living 	<p>Delivering against the service delivery contract between the Council and the Trust has clear implications for safeguarding communities, in reducing risk and exposure of risk to children; improved early help and thus better outcomes for families.</p>
<p>Working with our partners we will provide strong leadership and governance</p>	<p>Ofsted, in its inspection report commented favourably on the relationship and governance arrangements between the Council and the Trust, recognising that formal arrangements for monitoring and challenge exceed the requirements set out in the contract between the two organisations.</p>

RISKS AND ASSUMPTIONS

13. Adoption of the split screen approach should further reduce the risk of underperformance leading to a material detriment for children young people and families in the Borough.

LEGAL IMPLICATIONS

14. Adoption of the split screen approach enables the Council and the Trust to discharge their respective obligations under the terms of the service delivery contract between the two parties.

Adoption of the split screen enables the scrutiny panel to more effectively meet its remit to consider matters in the public interest.

FINANCIAL IMPLICATIONS

15. There are no financial implications directly arising from this report.

EQUALITY IMPLICATIONS

16. There are no equality implications directly arising from this report.

CONSULTATION

17. The Chief Executive of the Trust has been consulted on the content of this report.

ATTACHMENTS

18. 'Infographic' depiction and summary record of performance challenge of highlighted performance indicators – Appendices 1 and 2
Doncaster Children's Services Trust – Quarter 1 report – Appendix 3

BACKGROUND PAPERS

Service delivery contract between Doncaster Council and Doncaster Children's Services Trust

Report to the Director of Learning, Opportunities and Skills to the Children and Young People's Scrutiny Panel – 11th July, 2016

CONTACT OFFICER AND REPORT AUTHOR

Paul Thorpe
Head of Performance Improvement
Commissioning and Opportunities
Telephone: 01302 862116
Email: paul.thorpe@doncaster.gov.uk

Damian Allen
Director, Learning Opportunities and Skills (DCS)

Areas of Good and Improving Performance

AREAS PERFORMING WELL

A1 Repeat Referrals into Social Care within 12 months



A4 Child Protection Visits within Timescale



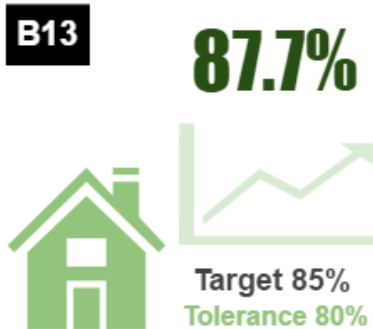
A06 Children on a Child Protection Plan 2 Years or More



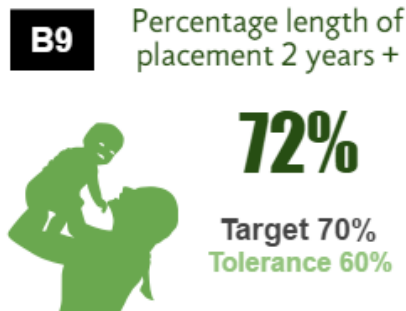
A09 Children Become Subject of Child Protection Plan For the Second or Subsequent Time



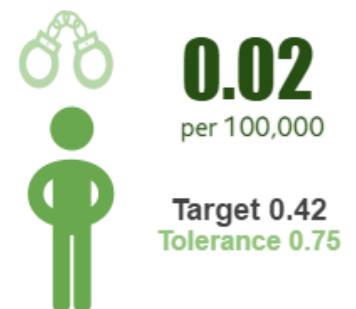
B13 Care Leavers (19–21 yrs) in Suitable Accommodation



B9 Long Term Stability: Children in Care



F03 Youth Offending: Custody Rates



Measure	DMBC Comment	Trust Response
<p>A1 Re-referrals in the last 12 months</p> <p>Q1 = 24% July 2016 24%</p> <p>Target: 24% Tolerance: 28%</p>	<p>An important PI to demonstrate robustness of process. There can be genuine requirements for a re-referral and the Trust stated that it was analysing this information, but we need to be assured as to impact of demand pressures and that there has been no premature 'stepping down'.</p> <p><i>How is increased demand impacting on this PI?</i></p> <p><i>Any issues with premature de-planning?</i></p>	<p>Re-referrals have been better than target for the last five quarters, showing sustained performance in this area. There has been a slight increase in the re-referral rate in May and June, however, this remains within target range. The increased referral rate coincides with an increase in overall referrals to the Trust with 490 recorded in June compared to 350 in March. Additional management of the Front Door has been put in place to manage demand and work with partners to reduce referrals for social care. The reorganisation of MASH so that it processes all referrals will also mean a multi-agency approach to triage which should impact on overall referral rate.</p> <p><i>Need to improve the interface between social care and the de-escalation to Early Help. At least 50% referrals go to NFA, need to look further into this. Need to manage our partners better with regards to referrals to social care – so they can triage themselves.</i></p>
<p>A4 Child Protection Visits in Timescale, Child seen by Social Worker</p> <p>Q1 = 87% July = 87% Target: 80% Tolerance: 75%</p>	<p>New measure – developed from Ofsted inspection performance within range but needs careful monitoring. Important measure for signs of safety and continuity of care. Need to link with CIN and CiC visits for rounded view.</p>	<p>Remains above target due to daily monitoring and a focused effort by team managers to keep on top of key casework timescales. The most recent month's data has shown an improving picture. Visits for CIC and CIN are also monitored in a similar way.</p>
<p>A09 Children Subject CP Plan Second or Subsequent Time within a 2 year period</p> <p>Q1 = 8% July = 0% Target: 16% Tolerance: 20%</p>	<p>This measure has been redefined within the contract from the national PI (second or subsequent time ever) to a local measure which is more sensitive and more reflective of its fundamental objective. Performance at Q4 and Q1 is better than target. Sibling groups can inflate this figure. Analysis needs to be satisfied that children are not being 'de-planned' prematurely. There may otherwise be valid reasons for becoming subject to a CPP but less so within a short period.</p>	<p>Performance remains above target. The number of children subject to a CPP shows some variability month by month but overall in this quarter is within target. Of the 8 counted in June, 6 of them were from a 2 sibling groups of 3 children.</p>
<p>A06 Children on CP Plan for 2 Years or More</p> <p>Q1 = 2.1% July = 2.1% Target: 3% Tolerance: 5%</p>	<p>An important measure of sterility (drift and delay) in the system where children may not be receiving proper oversight. However, there can be valid reason why a child remains on a plan</p>	<p>Remains below target with a stable trend. The re-assessment of all cases open for greater than 6 months is providing some immediate scrutiny and management oversight to current casework and addressing any previous issues of drift and delay</p>



<p>B9 Long Term Stability of CiC: Placements 2 Years or More</p> <p>Q1 = 72% July = 74% Target: 70% Tolerance: 60%</p>	<p>Another important indicator of stability, which is essential for this vulnerable cohort. The trust is closely monitoring. Placement policy is an important feature of stability need to review across the range for best results in care and financial terms. Placement and Sufficiency strategy is awaited and is an important strategic document for this measure and other CiC measures. 2015 annual outturn performance (56%) was bottom quartile nationally and bottom in regional rankings.</p>	<p>Continues to take an upward trajectory and has now been above target level for three months in a row. The Trust's longer term ambition to rely less upon out of Borough placements will bring some long term placements to a close, providing it is in the child's best interests. To assist this teams are reviewing placements on a case by case basis.</p>
<p>B13 Care Leavers in Suitable Accommodation (aged 19 – 21)</p> <p>Q1 = 87.7% July = 85% Target: 85% Tolerance: 80%</p>	<p>Pleasing quarterly reported figure. Best practice suggests that custody and 'sofa surfing' should be excluded from this figure. At last annual outturn (2015) Doncaster performance (83%) was middle ranking nationally, but relatively low in the region, but noting lack of a commonly agreed definition.</p>	<p>Performance has gradually improved over a number of months to reach above target in this quarter. Improvements in practice and recording have contributed to the positive trajectory. The term "suitable" relies on local interpretation (for example some LA's will determine Custody as suitable whilst we do not), making comparison challenging. At the end of Quarter 1, 4 young people were recorded as being in custody which will have contributed to this figure</p>
<p>F03 Youth Offending Service Custody Rates</p> <p>Q1 = 0.02 per 100,00 July = 0.07 per 100,000</p> <p>Target: 0.42 Tolerance: 0.75</p>	<p>This is a new measure established in Q4 which is susceptible to small cohorts from what is a large national cohort.</p>	<p>Data now available from the YJMIS system, which is the national youth justice database. We will need several months of data to moderate this measure. Monthly data shows the measure is above target. There is a lag in data for quarterly performance</p>

Areas of concern / potential Concern

AREAS FOR IMPROVEMENT

A2 Timeliness Single Assessments


Increased Case loads

88%

Target 92%
Tolerance 90%

A3 Case File Audits - Requires Improvement or Better




82%

Target 95%
Tolerance 90%

21% Inadequate 17% Good
62% Improvement 0% Outstanding

A8 Children in Need with Open and Current Plan



87%

Target 95%
Tolerance 90%

B13 Care Leavers in Employment, Education & Training

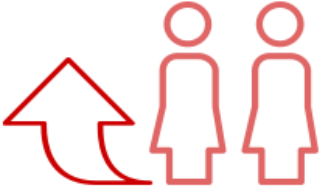


39.3%

Target 45%
Tolerance 40%

Ofsted Improvement Plan Action

C14 Agency Staff: FTE Posts



15%

Target 8%
Tolerance 12%

E1 Contacts into Social Care

Demand Pressures



1843

546 at Transfer

E20-22 Children in Care: With Up-to-date Assessments



Health Assessments

Dental Checks



Personal Education Plans

Measure & performance	DMBC Comment	DCST Response
<p>A2 Timeliness of Single Assessments</p> <p>Q 1 = 88% July = 88%</p> <p>Target: 92% Tolerance:90%</p>	<p>Performance has shown a slight downward trend, below tolerance for the Q4 and Q1. There continues to be a number of assessments open and overdue the 45 days threshold.</p> <p>The 2015 Doncaster annual outturn was good - 91.7% (upper quartile). National average = 81.5%.</p> <p>Noted that the no of contacts proceeding to referrals is increasing in absolute and proportionate (conversion) terms which is good news.</p> <p><i>What measures are being put in place to reduce variability?</i></p> <p><i>Is this reflective of workload pressures on teams given high demands?</i></p> <p><i>Increase in Children in Need?</i></p> <p><i>Where is the decision made to proceed to NFA?</i></p>	<p>This measure has been out of tolerance for the last two quarters. This is due in part to an additional expectation that all cases open greater than 6 months are reassessed using a single assessment form, thus increasing demand and workload. Most recent data shows an improving picture with an end of June figure of 91%. An additional 5% are within 50 days. This figure is well above the national average. The increase in overall referrals will also be impacting on completion rates.</p> <p><i>Timeliness reports are shared between teams on a weekly basis and target work is happening to improve performance.</i></p> <p><i>Daily challenge meetings take place.</i></p> <p><i>ACPC, geographical hotspots eg South. Looking to move resources to try to meet need. Systematically need to improve the process to make it quicker. Temporary caseworkers have been brought-in on an interim basis to manage caseloads.</i></p> <p><i>Have moved from Red to Amber. Performance remains above national average.</i></p> <p><i>Workers are using full 45 days to complete so focus is with reducing time taken to declare cases 'no further action' to free up capacity to address more complex cases. Ambitious targets set at the annual review. Caseloads have increased – currently looking at those going to No Further Action. Looking at moving resources to meet.. .Issue of threshold application is being challenged. And addressing 'no further action'</i></p> <p><i>Currently undertaking a deep dive, how we process assessments are we missing opportunities to step down. There is work to be done to bring caseloads down through better management of those that are ready to close.</i></p> <p><i>Doncaster is a high referral locality and has been risk adverse. Have better intelligence and performance</i></p>

		<p><i>management in place so able to challenge better. 97% of referrals led to assessment. Daily threshold challenge meeting to review decisions made and test whether should have been passed to field or dealt with at front door. Have 24hrs to respond to a referral, if suggested NFA looking at how many were within 10 days etc, intelligence not available yet to see if made a difference.</i></p>
<p>A3 Case File Audits rated as Requires Improvement or better</p> <p>Q1 = 82% July = 90%</p> <p>Target: 95% Tolerance:90%</p>	<p>The Trust has set a commendably high threshold which the LGA review recognised and which is reflected to some extent in the performance. What was also recognised is that there is a need to address quality of files, but improving recording remains the issue. The sample size is small which means some variability can be expected.</p> <p><i>Is this about quality of practice, but about case-recording?</i></p> <p><i>What do we know about these 'inadequate' cases?</i></p>	<p>Performance remains volatile for this measure, due to the relatively low casefile sample (50 cases). Whilst recent months have shown an improvement in the percentage graded good. Performance was 87% for the final month of the quarter. Analysis of "inadequate" casefiles is now showing that compliance is improving, so the Trust can now move to addressing issues of quality.</p> <p><i>Headline figures show improvement. There has been a shift in those graded inadequate to Requires Improvement and an increase in Good and Outstanding.</i></p> <p><i>Nature of inadequate used to be about compliance, now analysing, so rather than failing due to timeliness it is about the quality of the case recording and practice improvement.</i></p>
<p>A8 Children in Need with Open & Current Plan</p> <p>Q1 & July 2016 = 87%</p> <p>Target: 95% Tolerance:90%</p>	<p>This is a new measure established after concerns identified in the Ofsted inspection - there is an overall expectation that all CIN should have a plan. Performance needs to improve. The Trust is suggesting that this is a recording and categorisation issue with cleansing of files and that performance will improve when cases have been properly classified - a number are draft plans which are not counted until the Trust is satisfied that these can be counted as proper plans, there are also a number which have not been closed correctly.</p> <p><i>How is work progressing to close plans properly and finalise draft plans?</i></p> <p><i>Is performance reflective of increased numbers of CIN?</i></p>	<p>This is a new measure, and the target is set as a new expectation to staff. Caseworkers have been tasked with reassessing all cases open for 6 months or longer, which will in turn trigger revisions or new plans. A number of cases will have an open draft plan that will not be counted until it is made final, including these drafts the figure is 91%. A dip sample audit of open cases has shown that there are a number of open referrals that are ready for closure but the final steps have not been taken, so the case remains open. Further work, as part of a detailed analysis of caseloads, is planned for Quarter 2 which should address this issue.</p> <p><i>Reassessing a lot of cases, therefore large number currently in draft with the expectation that this will need to be rewritten. Cases closed with NFA will be the focus to be finalised.</i></p> <p><i>99% of those without a plan are for appropriate reasons. HOS writes a</i></p>

		<p><i>monthly SEF and dip samples those without and reasons why – the vast majority are due to step changes.</i></p> <p><i>Important to review in order to reflect true picture – procedural issue.</i></p>
<p>B13 Care Leavers in Employment, Education and Training (age 19-21)</p> <p>Q1 = 39.3% July 2016 = 35%</p> <p>Target: 45% Tolerance:40%</p>	<p>This indicator is acknowledged to be a challenging one which is reflected in performance figures across the region. To be compliant 'Meaningful contact' must be maintained which can be a challenge. A recognised need to progress employment opportunities and qualifications locally and Ofsted improvement action is to strengthen pathways for vulnerable children. However, annual outturn performance (2015) was 42% which was in the lowest national and regional quartiles</p> <p><i>How are initiatives progressing?</i></p>	<p>Performance is moving in an improved trajectory as recording of practice has become embedded in teams. Further work to align data with CCIS teams will further improve the recording across disparate systems</p> <p><i>Working with Head of Service to set short-term strategies to address and uplift performance. One programme 'is Keys to my future' to support the transition from being in care to adult entry into employment – designed to bridge the gap. Setting up pathways to and a SLA to support care leavers. A subsequent report will set out the plan of action.</i></p>
<p>C14 FTE posts covered by Agency Staff</p> <p>Q1 = 15% July = 15%</p> <p>Target: 8% Tolerance: 12%</p>	<p>Performance has deteriorated and this has been raised with the Trust. Pressures from competing providers in a competitive market are driving this trend as well as rising levels of demand. Turnover and sickness levels however, remain good.</p> <p><i>Noted that this is a highly competitive local market – what other recruitment initiatives are being trialled to mitigate the increased reliance on Agency Staff?</i></p>	<p>A number of interviews have taken place and conversions from agency staff to appoint permanent Social Workers that will improve performance in this area. Over the last quarter agency staff has reduced by 9 FTE despite there being a need to meet increased demand and the need for agency staff to pick this up. We are recruiting some additional temp resource to meet current increased demand.</p> <p><i>Analysis undertaken comparing against other LA's. Looking at funding pay deals for conversion of agency to permanent status. Recognise could target better e.g. LA's that are paying below Doncaster. Creating a Recruitment Strategy comparing the difference between level of responsibility and grade. Need to celebrate and promote the benefits of working in Doncaster.</i></p>
<p>E1 Number of contacts into social care (volumetric measure)</p> <p>Q1 average =1843 July = 1665</p>	<p>Contacts have recently stabilised albeit at a high level (almost 3x national average) Reasons are well rehearsed. Over 40% are understood to be requests for Information Advice & Guidance; Inappropriate referrals which should have gone to early help now total around 1%</p> <p><i>What is the latest position to address 'risk adverse' contacts – where Agencies refer to social care inappropriately?</i></p>	<p><i>Challenge is Police protocol – any domestic call-out incidence where there is a child involved will result in</i></p>

	<p><i>What is the Analyst doing?</i></p> <p><i>In terms of QPM strongly recommend this evidence of analysis is shared. Assurance, how demand is managed, evidence on MASH arrangements, the pathway and processes, system of demand management, report to answer the questions and evidence and provide assurance.</i></p>	<p><i>a referral to social care and the Trust are duty bound to respond to the referral. New front door arrangements are in place.</i></p> <p><i>The Trust has engaged a Business analyst who is looking undertaking analysis of pathways and procedures, working closely with Head of service for the social care front door - routes in, phone calls, how to organise triage. An Action Plan will be developed as a result.</i></p>
<p>E20-22</p> <p>(Volumetric measures)</p> <p>Children in Care with up to date:</p> <p>health assessment Q1 =85%</p> <p>dental checks Q1 =74%</p> <p>Up to date Personal Education Plans Q1 =65%</p>	<p>Performance remains challenging</p> <p><i>Figures remain challenging and disappointing. What progress is being made to improve these figures and processes?</i></p> <p><i>Dental checks – there is an acknowledged problem with older children registering with dentists;</i></p> <p><i>PEPs Most recent figures – August 2016 show return to established performance (82%) this measure is affected by seasonal factors and practitioners diverted to meet priority tasks prior to the monitoring visit. 2015 average was 90%.</i></p>	<p><i>Heath assessments:- Challenge has been the ability to access timely paediatric support to refer quickly. Children placed Out of area a challenge as have less influence and control. GPs not sufficiently qualified to undertake assessments to alleviate the pressure. There is need to tighten the referral process, refer to RDASH, challenge to ensure completed quickly.</i></p> <p><i>Dental Check: be forward thinking about registering children with a dentist to ensure no delays</i></p> <p><i>PEP: is on liquid logic and needs to be completed by social worker there is a recognised problem with completion by three parties – social worker; teacher and virtual head which can introduce delay and affect quality need to find solution where virtual head can drive forward .compilation of inputs from there sources:-</i></p>

QUARTERLY PERFORMANCE REPORT – Quarter 1 2016/17

Reporting Period 1st April – 30th June 2016

1. PURPOSE OF THE REPORT

1.2. To provide an overview of Doncaster Children's Services Trust's performance and financial position for Quarter 1, 2016/17

2. SUMMARY POSITION

2.1. The contract indicator set was revised during the fourth quarter of 2015/16, as agreed through the first annual contract review.

2.2. The table below summarises the number of contract measures on target, within tolerance and outside tolerance as at the end of Quarter 1 2016/17.

Quarter 1 2016/17				
	Outside tolerance	Inside tolerance	On or better than target	No target specified
Social Care Pathway	3		4	
Children in Care	2	1	2	
Youth Offending Services		1	1	
Workforce	1	1		1
Finance	1			2

2.3. This is the second quarterly report containing the revised indicator set, and therefore allows for 6 monthly trend analysis for the majority of the performance indicator set. At the end of the quarter 5 operational, 1 workforce and 1 finance measure lay outside contract tolerance. However, it should be noted that of these 5 operational measures, one was in tolerance for the final month of the quarter and a further 2 are showing an improving trend towards the target level. These are discussed in more detail within the report.

2.4. There are currently two "hard to shift" measures – those which have been outside tolerance for 2 or more consecutive quarters. They are:

Monthly case file audits rated as "requires improvement or better."

Forecast Operational Expenditure.

2.5. Measures at or better than Target as at end of Quarter 1 2016/17

A1 – percentage of re-referrals in last 12 months

New - Percentage of child protection visits in timescale where child was seen by their social worker

A5 - Percentage of children becoming the subject of Child Protection Plan for a second or subsequent time.

New – Percentage of children in child protection plan for 2 years or more

B8 – Long term placement stability of looked after children

New – Care leavers aged 19-21 in suitable accommodation

NEW – Youth Offending Services – Custody Rate

2.6. **Measures within Contract Tolerance as at end of Quarter 1 2016/17**

B10 – Stability of Placement of Looked After Children – percentage of children with 3 or more moves in 12 months

NEW – Youth Offending Services - Cohort in EET

NEW – Frontline staff receiving supervisions in timescale

2.7. **Measures outside Contract Tolerance as at end of Quarter 1 2016/17**

A2 – timeliness of single assessment

A3 - Monthly case file audits rated as “requires improvement” or better.

New – Percentage of children in need with an open and current plan

B8 – Average length of care proceedings

New – Percentage of Care Leavers (aged 19-21) in Employment, Education or Training

C14 - Percentage of frontline FTE posts covered by Agency Staff

D17c – Forecast Operational Expenditure

2.8. **Measures with no target currently set**

New – Youth Offending Services – reoffending rate after 12 months

New – Staff turnover

2.9. Further detail on each measure, along with trends and narrative can be found in appendix A

3. **OPERATIONAL MEASURES AND CONTEXT**

3.1. In addition to the contract performance measures, 37 operational volumetric measures are also provided. These are supplied within appendix A. A summary of the key themes emerging from this dataset is listed below

- **Contacts:** continue to rise with nearly 2000 contacts recorded on LiquidLogic in June 2016, which will not include contacts direct to the Early Help Hub. Two thirds of contacts lead to no further action with advice or information given, but still need to be recorded, with a decision against them. This is an obvious distraction from the core work that is being channelled through this route.
- **Referral** rates: Approximately a quarter of contacts lead to referrals, which have seen a 52% rise in the last quarter. Ninety five percent of referrals lead to

an assessment of the child, of which 30-50% lead to no further action. This is leading to increased demand on front line social workers to complete assessments. Additional management resource has been directed to the Front Door to introduce a greater challenge with partners on application of thresholds as well as increase management grip of Front Door arrangements. Activity is being monitored on a weekly basis, to identify short and mid-term impact of changes at the Front Door.

- **Early Help:** On average there are 300 – 400 early help contacts received per month. Fewer cases are being stepped down from the Response and referral team, which indicates that pathways for Early Help and Social Care support are beginning to clear. Approximately 50% of enquiries lead to either a new Early Help Assessment or an update to an existing TAC. One quarter lead to no further action, and one fifth leads to a single agency response. This suggests further work is required around thresholds with referring agencies.
- **Children in Need:** currently stands at 2790, including children on a child protection plan and children in care, this is an increase of 13% since the last quarter. This has an obvious impact on total caseloads and demands on Team Managers to supervise and authorise casework.
- The number of children on a **child protection plan** has increased in the quarter by 9% (38 more children), following a decreasing trend. Largest increases have been seen in Central and South locality areas,
- The number of **children in care** has remained fairly static around the 495-505 mark.
- **Caseloads** for staff have increased as a result of the increase in referrals. Additional temporary resource has been secured within the ACPS teams to manage caseloads, and locality teams have been tasked with looking a redistribution of cases between teams. A dip-sample of work held by staff with the highest caseloads has demonstrated that there are a number of cases that are ready to be closed or stepped down but are being held up. Further directed work will be undertaken to attempt to progress cases stuck at this point and therefore to reflect true caseload.

4. KEY EXCEPTIONS AND IMPROVEMENTS

- 4.1. Ten operational measures currently remain within tolerance or are performing at or above target level, and seven were outside tolerance in quarter one. However, two of the outlying measures were newly installed within the previous quarter and are subject to a “settling in” period whilst new recording and reporting mechanisms were implemented. Outlying measures are detailed below:

A3 - Monthly case file audits rated as “requires improvement” or better.

New – Percentage of children in need with an open and current plan

B8 – Average length of care proceedings

New – Percentage of Care Leavers (aged 19-21) in Employment, Education or Training

C14 - Percentage of frontline FTE posts covered by Agency Staff

D17c – Forecast Operational Expenditure

4.2. **Timeliness of Single Assessments.** Although the short term trend is improving, the proportion of assessments completed in the 45 day timescale is currently outside tolerance by two percentage points. Performance for June 2016 was 91% putting the Trust within contract range. Current performance would still place the Trust above national (82%) and regional (81%) performance. Weekly tracking and performance management of assessments is beginning to show a positive impact, although the increase in referral rate is impacting on overall caseloads and therefore timeliness. Analysis of recent assessment data, supported by the recent LGA review, has indicated that the Trust needs to do further work to ensure a higher proportion of assessments are completed and signed off early within the 45 day window, to provide additional “space” for more complex referrals. Visits associated with assessments need to be more clearly reported. Although the current performance framework covers both of these areas for improvement, the performance team will develop the reporting suite to enable locality teams to track single assessments on a weekly basis.

Of those overdue assessments, more than three quarters (76%) were completed within 51 days rather than the 45 day deadline.

4.3. **Percentage of monthly case file audits rated as ‘requires improvement’ or better.** The proportion of cases that are judged to be “requiring improvement to be good” or better remains below the contract target figure at 82% for the quarter, compared to a target figure of 90%. However, performance improved during the quarter, and was at 87% in June 2016. In addition, the proportion of cases rated “good” has increased from 7% in quarter 4 2015/16 to 18% in the latest quarter.

The recent LGA peer review of services delivered by the Trust, included an external audit of 21 cases which confirmed that our grading thresholds were proportionate and in a small number of cases also demonstrated that grades are uplifted once remedial actions identified during audit are completed. Further case sampling was undertaken by Ofsted during their monitoring visit in August, and provided further assurance of threshold application, improving quality, and no children identified as being left at risk of significant harm.

Both LGA and Ofsted’s conclusion from their audit activity was that the challenge for the Trust now is to ensure the consistency of case file quality.

Findings from audit are now reported monthly through the revised QA framework, including outcomes from additional thematic audits. Procedures for completion and sign off of actions identified through audit have been strengthened, and this is demonstrated to uplift case file quality. Audit findings are demonstrating that quality is improving, with a focus now moving from compliance to overall quality of impact and child’s lived experience. Voice of the child is more apparent and clear to see. The opinion is that cases graded as “requiring improvement to be

good” are now moving from “just over the grading boundary” to “secure” or even “just below good.” As the audit tool and process is refined, consideration will be given to how we grade cases beyond the 4-category Ofsted level, to give a more granular view.

For the last two months, the audit process has started to identify cases that meet the criteria for “outstanding”, and in August no cases were identified as “inadequate.” This continues the improving trend of case file quality.

4.4. The Proportion of Children in Need with an open and current Plan: A caseworkers have been tasked with reassessing all cases open for 6 months or longer, this should lead to revisions or new plans, escalation and de-escalation (step down). 87% of cases open for 6 months or longer had an identified updated plan on LiquidLogic during the quarter. Including plans in draft form the percentage increases to 91%. In writing this report, an audit of 20 open cases with no plan in June was undertaken, with the following themes

- When reviewed, case had been closed or are at closure stage.
- Some related to plans for children transferring out of the Borough
- Some had a draft in place
- Some related to children with pre-birth plans
- Some were still in assessment
- Recording issues had been resolved with others

This demonstrates that, where plans do not exist, there is a reason. Similar dip-samples have been completed by Heads of Service when writing their monthly self evaluation forms with the same findings. A task to expedite closures is underway.

4.5. Average length of care proceedings rose from 28 weeks in the last quarter of 2015/16 to 33 weeks in the first quarter of 2016/17. This is against a long term trend of reducing length. However, it must be noted that the latest quarter’s performance is based on 13 cases in total, and therefore one protracted proceeding is able to skew performance outside tolerance.

4.6. 19-21 year old Care Leavers in Education, Employment and Training (EET). Work has been done by the 18 Plus and Performance Services to better track case work relating to care leavers, in particular recording of contact. This has improved the “In Touch” measure and therefore the EET and Suitable Accommodation performance figure. Performance for the EET measure was 1 percentage point outside tolerance in June 2016, and showing an improving trend.

In recognition of the EET performance of care leavers in Doncaster the HOS of Targeted Youth Support is implementing a new improvement framework to address engagement in EET for this most dis-advantaged group.

On 25.07.16 The HOS will chair a Care Leavers ETE improvement forum which will be attended by the Team Manager of 18 Plus, The Advanced Practitioner of 18 Plus, the Education Coordinator at YOS and three IAG workers currently

deployed within Targeted Youth Support services. The focus of the forum will be to create a new short, medium and long term strategy for addressing the historically low EET rate amongst care leavers in Doncaster.

The Short term strategy will be focussed on a targeted group of the 30 care leavers who have either been NEET longest, or who have the greatest levels of unmet need in this area. IDP's for each of these young people will be comprehensively reviewed and intervention targeted at securing suitable provision. The medium term strategy will be focused on increasing opportunities across Doncaster, securing pathways to apprenticeships for care leavers and increasing the offer available to care leavers.

The long term strategy will incorporate and develop both of the above, but will also have a focus on preventing attrition rates from provision once secured. This has historically been a significant issue for Doncaster's care leaving population. In addition the 18 Plus team will create a number of social enterprise companies, owned and operated by care leavers in Doncaster.

It is expected that the strategy will have a significant impact on the NEET rate for care leavers a 10% increase in young people in suitable ETE is expected by the end of the financial year. Such an increase will place Doncaster EET performance in line with national averages.

- 4.7. Percentage of **frontline staff posts covered by agency staff** has shown an increase in the quarter. This is due, in part, to meet the increased casework through increased referrals, and are over and above the establishment figure for the Trust

5. CONCLUSIONS

- 5.1. This report reflects performance against the revised contract indicator set for the second quarter since annual contract review. Although some of the initial challenges in recording and reporting have been resolved to ensure stability of measurement, further work needs to be done to improve recording of casework to ensure indicators are as accurate as possible.
- 5.2. The majority of measures are within tolerance or at/above target. Short and mid-term strategies are in place to improve the EET status of our care leaver cohorts.
- 5.3. There is an early and emerging trend of improving case file quality. Although it is early information, this may be an indication of the impact of post Ofsted activity, including the Practice Improvement Programme. Anecdotal evidence from locality operational teams supports this hypothesis, as they are reporting an improving picture in casework post inspection.

Report prepared by James Thomas, DCST