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Date: 4 December 2013

Dear Member

SOCIAL CARE AND PUBLIC HEALTH CABINET COMMITTEE - THURSDAY, 5 DECEMBER 2013

I am now able to enclose, for consideration at tomorrow's meeting of the Social Care and Public Health Cabinet Committee, the following appendices to item E3, which were omitted from the pack as an oversight at the time of publication.

Agenda No	Item
E3	<u>Families and Social Care Performance and Mid-Year Business Plan Monitoring : Appendices A and B (Pages 3 - 30)</u>

Yours sincerely

A handwritten signature in black ink, appearing to read 'Peter Sass', is written over a light blue horizontal line.

Peter Sass
Head of Democratic Services

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Adult Social Care Dashboard

September 2013

Key to RAG (Red/Amber/Green) ratings applied to KPIs

GREEN	Target has been achieved or exceeded
AMBER	Performance is behind target but within acceptable limits
RED	Performance is significantly behind target and is below an acceptable pre-defined minimum *
↑	Performance has improved relative to targets set
↓	Performance has worsened relative to targets set

* In future, when annual business plan targets are set, we will also publish the minimum acceptable level of performance for each indicator which will cause the KPI to be assessed as Red when performance falls below this threshold.

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Adult Social Care Indicators

The key Adult Social Care indicators are listed in summary form below, with more detail in the following pages. A subset of these indicators feed into the Quarterly Monitoring Report, for Cabinet, and a subset of these indicators feed into the Bold Steps Monitoring. This is clearly labelled on the summary and in the detail.

Some indicators are monthly indicators, some are annual, and this is clearly stated.

All information is as at September 2013 where possible, with a few indicators still requiring some update, with new targets and indicators being chosen.

Following months will provide all information.

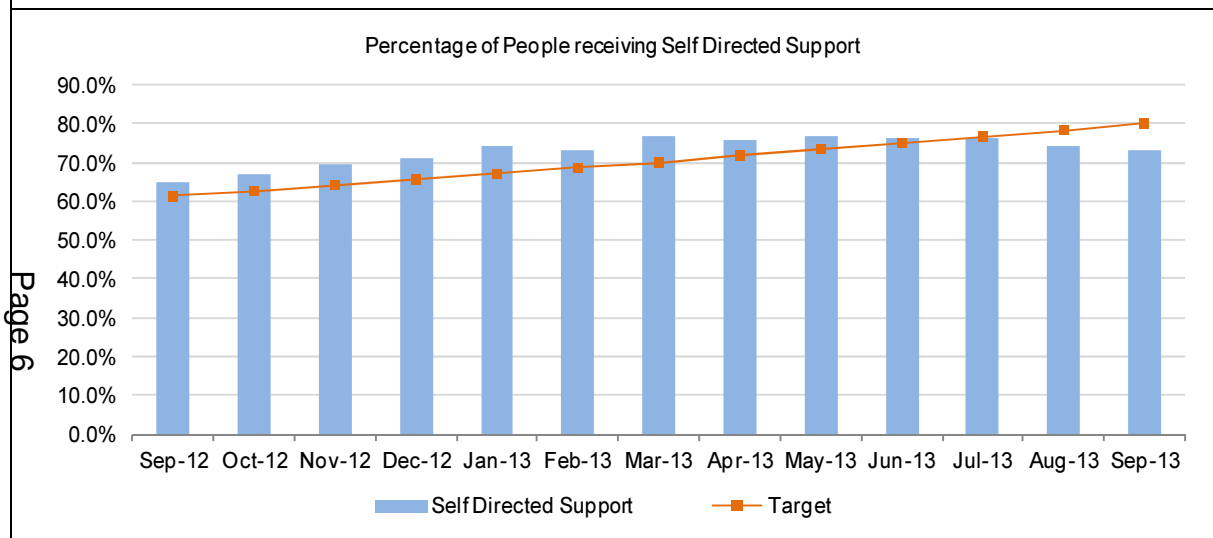
APPENDIX A

Summary of Performance for our KPIs

Indicator Description	Bold Steps	QPR	2012-13 Outturn	Current 2013-14 Target	Current Position	Data Period	RAG	Direction of Travel
1. Percentage of adult social care clients with community based services who receive a personal budget and/or a direct payment	Y	Y	76%	80%	73%	12M	AMBER	↓
2. Proportion of personal budgets given as a direct payment	Y		21.7%	30%	24.9%	12M	See Page 5	↑
3. Number of adult social care clients receiving a telecare service	Y	Y	1596	1750	2276	Cumulative	GREEN	↑
4. Percentage of people with short term intervention that had no further service	Y	Y	45.5%	46%	47.6%	12M	GREEN	↑
5 Percentage of clients satisfied that desired outcomes have been achieved at their first review		Y	74%	75%	73%	Month	AMBER	↑
6. Proportion of older people who were still at home 91 days after discharge from hospital into reablement/rehabilitation services			84%	85%	86%	Month	GREEN	↑
7. Delayed transfers of care	Y		5.68	5.40	5.84	12M	AMBER	↑
8. Admissions to permanent residential care for older people			149	130	120	12M	GREEN	↑
9. People with learning disabilities in residential care	Y		1265	1260	1249	Month	GREEN	↑
10. Proportion of adults in contact with secondary mental health in settled accommodation	Y		86%	75%	85%	Quarterly	GREEN	↑
11. Percentage of contacts resolved at source		Y	26.3%	28%	28.1%	Month	GREEN	↓

1. Percentage of adult social care clients with community based services who receive a personal budget and/or a direct payment	AMBER ↓
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Bold Steps Priority/Core Service Area	Empower social service users through increased use of personal budgets	Bold Steps Ambition	Put the Citizen in Control
Cabinet Member	Graham Gibbens	Director	Anne Tidmarsh/ Penny Southern
Portfolio	Adult Social Care and Public Health	Division	Older People and Physical Disability /Learning Disability and Mental Health



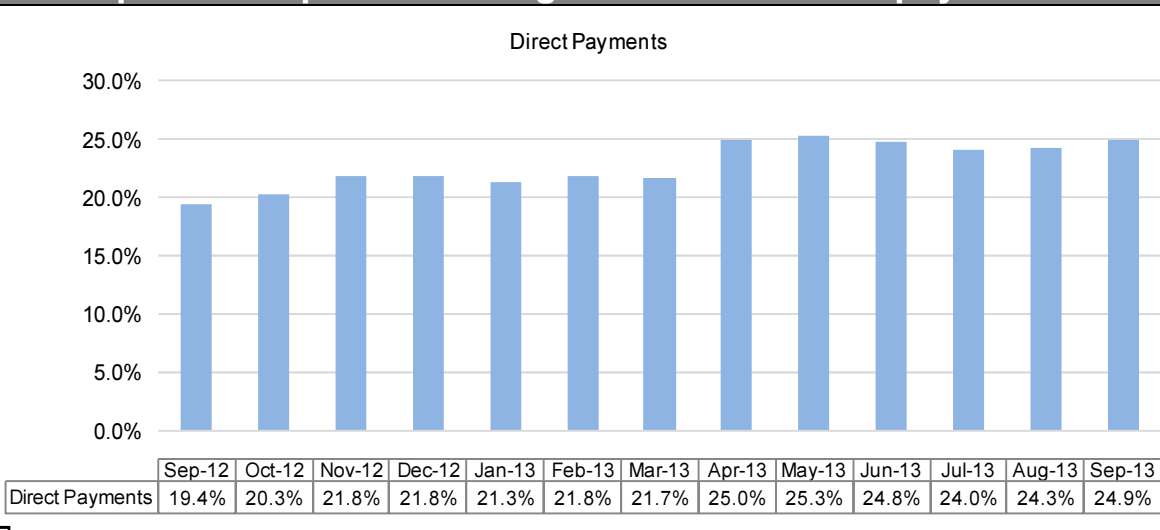
Data Notes.
 Units of Measure: Percentage of people with an open service who have a Personal Budget or Direct Payment
 Data Source: Adult Social Care Swift client System – Personal Budgets Report

Data is reported as the snapshot position of current clients at the quarter end.

Quarterly Performance Report Indicator
Bold Step Indicator

Trend Data	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13
Percentage	65%	67%	70%	71%	74%	73%	76%	76%	77%	76%	76%	74%	73%
Target	61%	63%	64%	66%	67%	69%	70%	72%	73%	75%	76%	78%	80%
Client Numbers	10612	11541	11595	11732	12192	12099	12225	12090	12239	12623	12614	12557	12402
RAG Rating	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	AMBER	AMBER

2. Proportion of personal budgets taken as direct payments



Data Notes.
 Units of Measure: Percentage of Personal Budgets taken as a Direct Payment
 Data Source: Adult Social Care Swift client System – Personal Budgets & Direct Payments Reports

Bold Steps indicator

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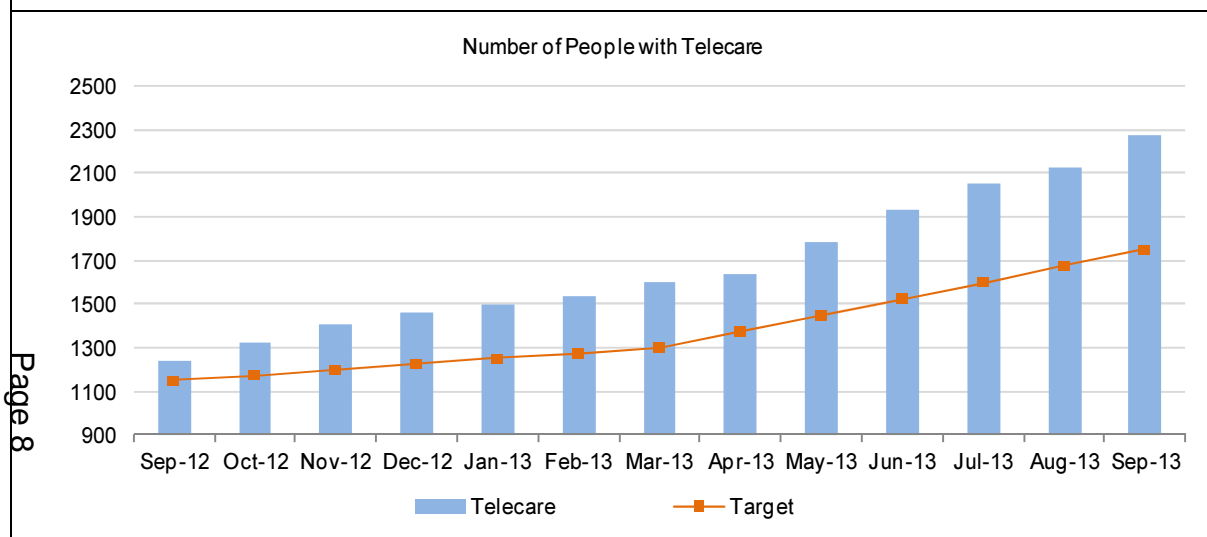
Commentary

Despite the number of people with a personal budget remaining higher than the end of the March 2013 position, the numbers are lower in September than June.

The actual percentage performance has decreased because the indicator looks at the proportion of all clients that have a personal budget. The total numbers of people on caseloads have increased in the last few months, and personal budget allocation has not increased at the same rate. In addition, there are more people who receive short term interventions or short term care, in line with the Directorate’s objectives and these people would not receive a personal budget.

NB: As discussed previously at Cabinet Committee, the direct payment indicator is not RAG rated because direct payments are a choice that service users take.

3. Number of adult social care clients receiving a telecare service			GREEN ↑
Bold Steps Priority/Core Service Area	Empower social service users through increased use of personal budgets	Bold Steps Ambition	Put the Citizen in Control
Cabinet Member	Graham Gibbens	Director	Anne Tidmarsh/ Penny Southern
Portfolio	Adult Social Care and Public Health	Division	Older People and Physical Disability/ Learning Disability and Mental Health



Data Notes.
 Units of Measure: Snapshot of people with Telecare as at the end of each month
 Data Source: Adult Social Care Swift client System

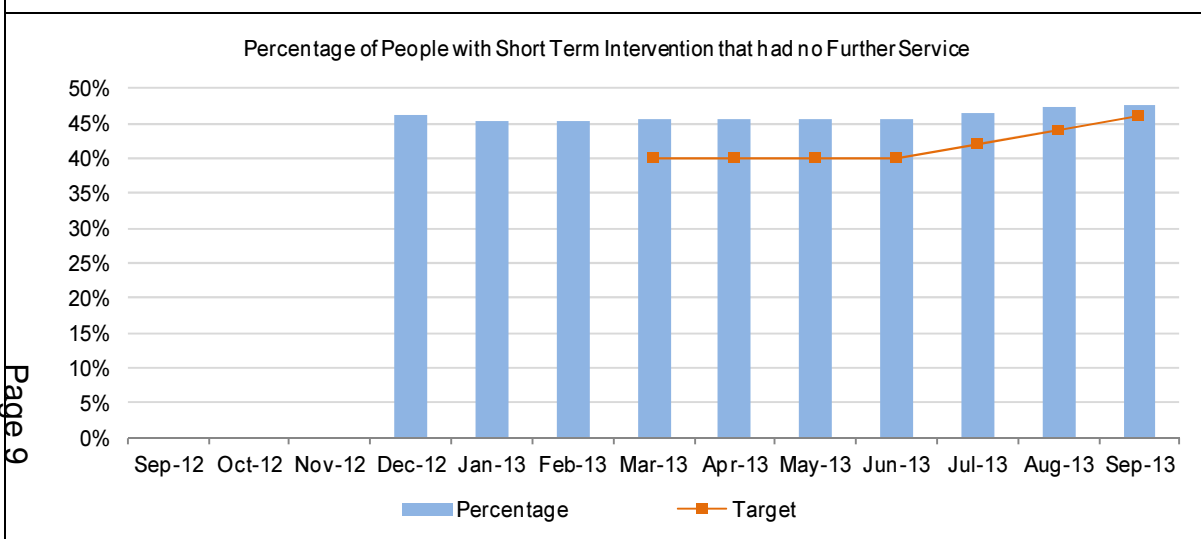
Quarterly Performance Report Indicator
Bold Step Indicator

Trend Data	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13
Telecare	1240	1321	1407	1460	1497	1534	1596	1638	1784	1937	2051	2130	2276
Target	1150	1175	1200	1225	1250	1275	1300	1375	1450	1525	1600	1675	1750
RAG Rating	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN

Commentary

Telecare is now a mainstream service, after being managed centrally. The teams are now more experienced in considering telecare at every opportunity when assessing and reviewing clients as a means for maintaining independence. In addition, there is improved communication between the hospitals, the teams and the equipment store so data input is timelier. Targets have been set for all teams during the year, which are monitored on a monthly basis. There will be a further indicator in future reports which look at the types of equipment being provided.

4. Percentage of people with short term intervention that had no further service			GREEN ↑
Bold Steps Priority/Core Service Area	Empower social service users through increased use of personal budgets	Bold Steps Ambition	Put the Citizen in Control
Cabinet Member	Graham Gibbens	Director	Anne Tidmarsh
Portfolio	Adult Social Care and Public Health	Division	Older People and Physical Disability



Data Notes.
 Units of Measure: Number of people who had a ST Intervention that had no further Service
 Data Source: SALT report

Quarterly Performance Report indicator
Bold Steps Indicator

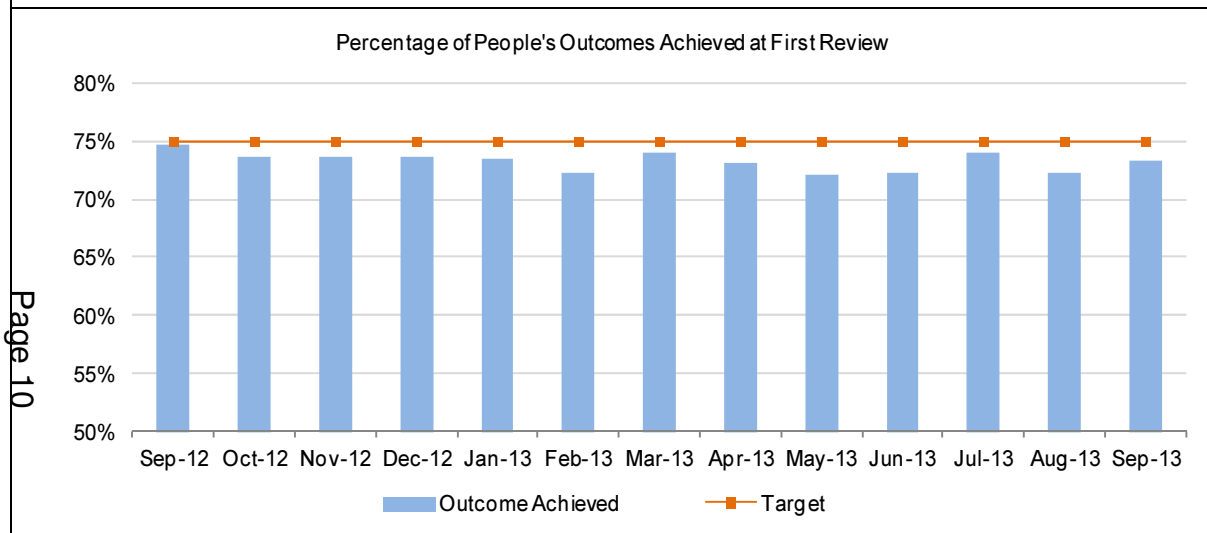
Trend Data	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13
Percentage				46.2%	45.2%	45.2%	45.5%	45.6%	45.6%	45.6%	46.5%	47.4%	47.6%
Target							40%	40%	40%	40%	42%	44%	46%
RAG Rating							GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN

Commentary

This is a new indicator, based on the new national data collection. It supports one of the key objectives of Adult Social care and aims to measure the effectiveness of short term intervention, looking at the percentage of people who are successfully enabled to stay at home with no further support from Social Care. This will include the provision of services such as enablement, intermediate care and equipment. The target associated with this indicator is incremental over the year with an end year target of 60%.

5. Percentage of social care clients who are satisfied that desired outcomes have been achieved at their first review **AMBER** ↑

Bold Steps Priority/Core Service Area	Empower social service users through increased use of personal budgets	Bold Steps Ambition	Put the Citizen in Control
Cabinet Member	Graham Gibbens	Director	Anne Tidmarsh/ Penny Southern
Portfolio	Adult Social Care and Public Health	Division	Older People and Physical Disability /Learning Disability and Mental Health



Data Notes.
 Tolerance: Higher values are better
 Unit of measure: Percentage
 Data Source: Adult Social Care Swift client system

Data is reported as percentage for each quarter.
 No comparative data is currently available for this indicator.

Quarterly Performance Report Indicator

Trend Data	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13
Achieved	75%	74%	74%	74%	73%	72%	74%	73%	72%	72%	74%	72%	73%
Target	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%
RAG Rating	GREEN	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER

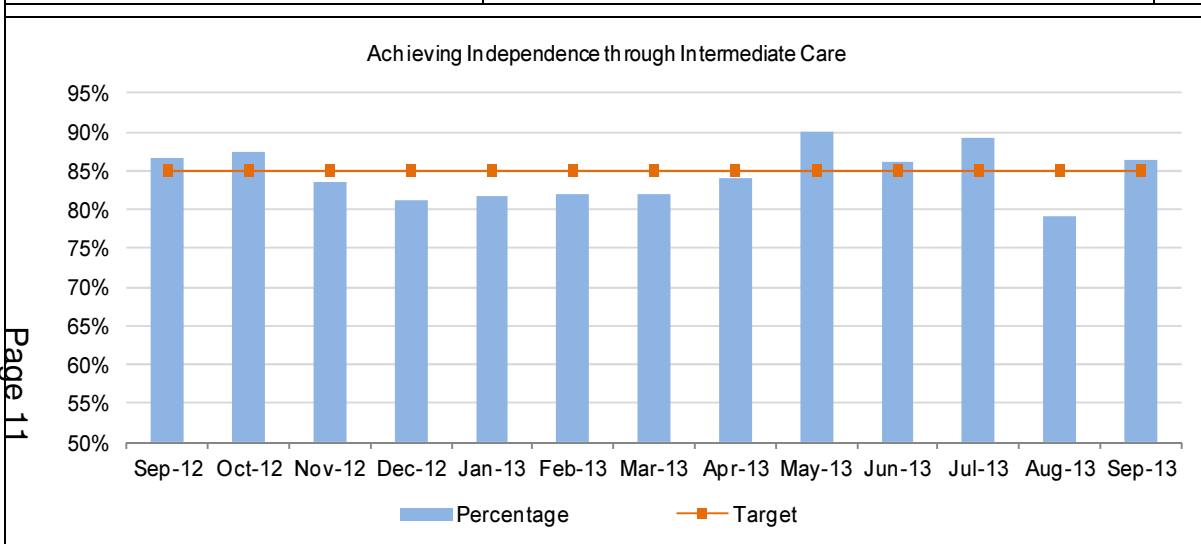
Commentary

People’s needs and outcomes are identified at assessment and then updated at review, in terms of achievement and satisfaction. Workshops have started to provide additional training and guidance in respect of identifying outcomes.

6. Proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services **GREEN** ↑

Bold Steps Priority/Core Service Area	Support the transformation of health and social care in Kent	Bold Steps Ambition	Put the Citizen in Control
Cabinet Member	Graham Gibbens	Director	Anne Tidmarsh
Portfolio	Adult Social Care and Public Health	Division	Older People and Physical Disability

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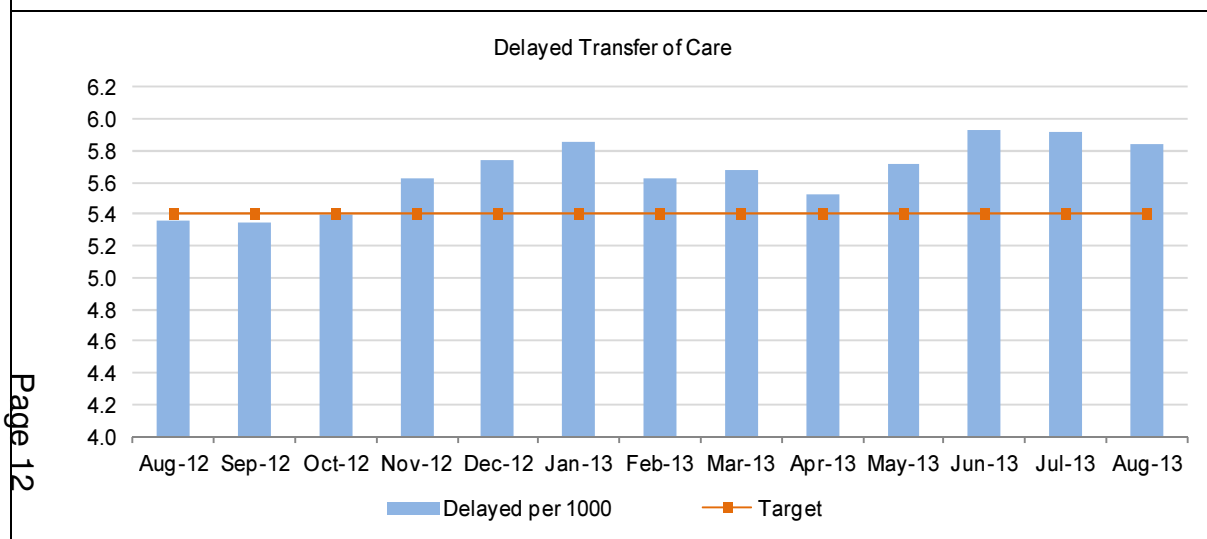


Data Notes.
 Units of Measure: Percentage of older people achieving Independence and back home after receiving Intermediate Care following discharge from hospital
 Data Source: Manual Data Collection

Trend Data	May-11	Aug-11	Nov-11	Feb-12	May-12	Aug-12	Nov-12	Mar-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13
Percentage	87%	87%	84%	81%	82%	82%	82%	84%	90%	86%	89%	79%	86%
Target	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%
RAG Rating	GREEN	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	GREEN	GREEN	GREEN	AMBER	GREEN

Commentary
 This indicator identifies where patients are **three months** after receiving intermediate care and relies on health and social care data being compared. There are about 400 referrals a month which are supported from hospital and into intermediate care.
 This position continues to be monitored, particularly in light of the increasing pressures being experienced from the hospitals, including ward closures and where there are some waiting lists for intermediate care, which can put pressure on the teams to make residential and nursing placements.

7. Delayed transfers of care			AMBER ↑
Bold Steps Priority/Core Service Area	Support the transformation of health and social care in Kent	Bold Steps Ambition	Put the Citizen in Control
Cabinet Member	Graham Gibbens	Director	Anne Tidmarsh
Portfolio	Adult Social Care and Public Health	Division	Older People and Physical Disability



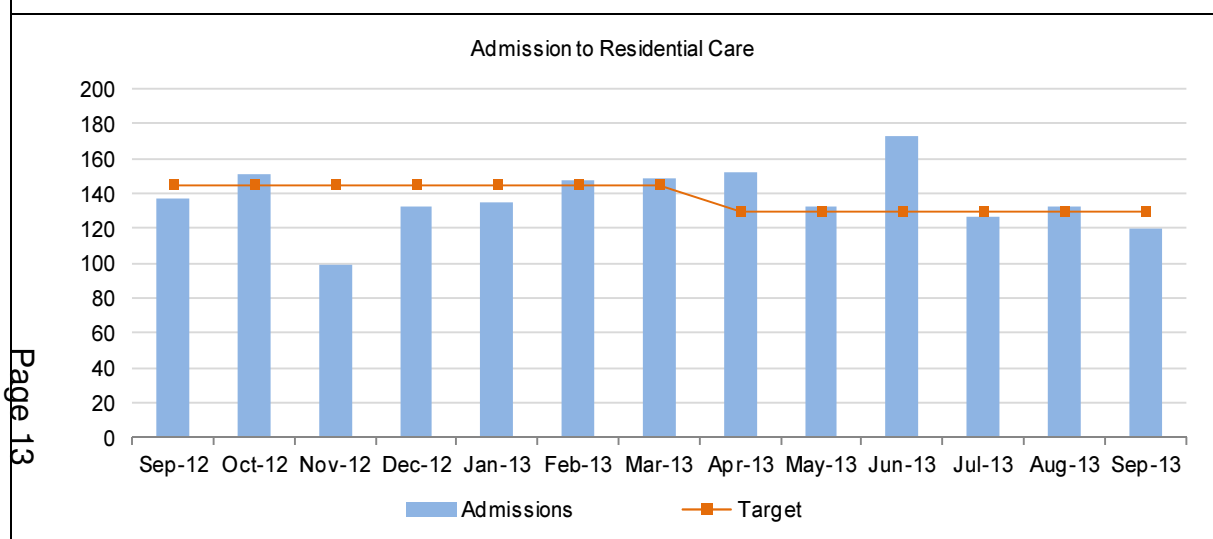
Data Notes.
This indicator is displayed as the number of delays per month as a rate per 100,000 population.

Bold Step Indicator

Trend Data	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13
People	5.36	5.35	5.40	5.62	5.74	5.86	5.63	5.68	5.53	5.71	5.93	5.92	5.84
Target	5.40	5.40	5.4	5.4	5.4	5.4	5.4	5.4	5.4	5.4	5.4	5.4	5.4
RAG Rating	GREEN	GREEN	GREEN	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER

Commentary
Delay transfers can be affected by many factors, mainly client choice and health based reasons. Whilst there are ongoing pressures to find social care placements, these have been eased with support such as intermediate care, and step down beds. Information relating to delayed transfers of care is collected from health on a monthly basis, and reasons for delays are routinely examined. Currently about 25% delays are attributable to Adult Social Care. The top three reasons for delays includes: Waiting NHS non-acute care, patient choice and then Social care assessment.

8. Admissions to permanent residential care for older people			GREEN ↑
Bold Steps Priority/Core Service Area	Support the transformation of health and social care in Kent	Bold Steps Ambition	Put the Citizen in Control
Cabinet Member	Graham Gibbens	Director	Anne Tidmarsh
Portfolio	Adult Social Care and Public Health	Division	Older People & Physical Disability

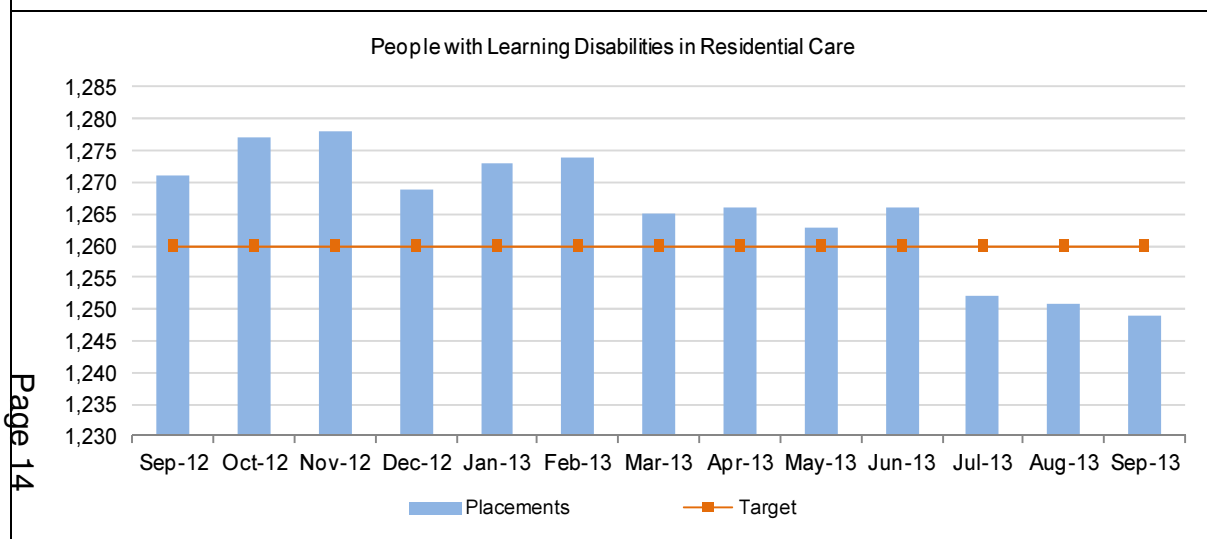


Data Notes.
 Units of Measure: Older People placed into Permanent Residential Care per month.
 Data Source: Adult Social Care Swift client System – Residential Monitoring Report

Trend Data	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13
Admissions	137	151	99	132	135	147	149	152	133	173	127	133	120
Target	145	145	145	145	145	145	145	130	130	130	130	130	130
RAG Rating	GREEN	AMBER	GREEN	GREEN	GREEN	AMBER	AMBER	RED	AMBER	RED	GREEN	AMBER	GREEN

Commentary
 Reducing admissions to permanent residential or nursing care is a clear objective for the Directorate. Many admissions are linked to hospital discharges, or specific circumstances or health conditions such as breakdown in carer support, falls, incontinence and dementia. As part of the monthly budget and activity monitoring process, admissions are examined, to understand exactly why they have happened. The objectives of the transformation programme will be to ensure that the right services are in place to ensure that people can self manage with these conditions, and ensure that a falls prevention strategy and support is in place to reduce the need for admission. In the meantime, there are clear targets set for the teams which are monitored on a monthly basis, and an expectation that permanent admissions are not made without all other alternatives being exhausted.

9. People with learning disabilities in residential care			GREEN ↑
Bold Steps Priority/Core Service Area	Improve services for the most vulnerable people in Kent	Bold Steps Ambition	To tackle disadvantage
Cabinet Member	Graham Gibbens	Director	Penny Southern
Portfolio	Adult Social Care and Public Health	Division	Learning disability



Data Notes.
 Units of Measure: Number of people with a learning disability in permanent residential care as at month end.
 Data Source: Monthly activity and budget monitoring.

Bold Steps Indicator

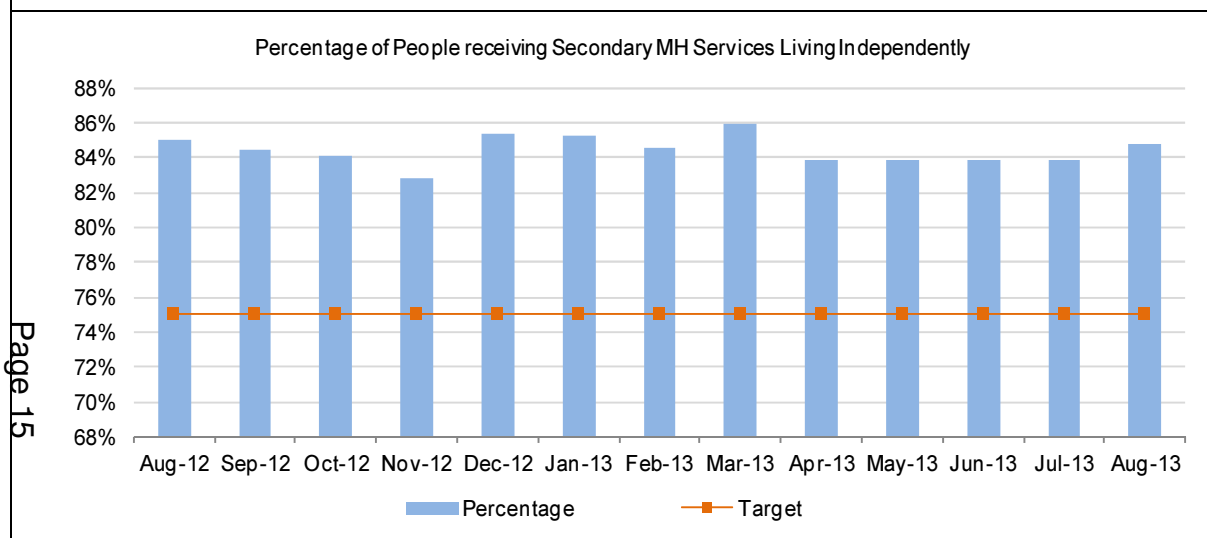
Trend Data	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13
Placements	1271	1277	1278	1269	1273	1274	1265	1266	1263	1266	1252	1251	1249
Target	1260	1260	1260	1260	1260	1260	1260	1260	1260	1260	1260	1260	1260
RAG Rating	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	GREEN	GREEN	GREEN

Commentary

It is a clear objective of the Directorate to ensure that as many people with a learning disability live as independently as possible. All residential placements have now been examined to ensure that where possible, there will be a choice available for people to be supported through supported accommodation, adult placements and other innovative support packages which enable people to maintain their independence. In addition, the teams continue to work closely with the Children’s team as young people coming into Adult Social Care through transition from the majority of the new residential placements.

10. Proportion of adults in contact with secondary mental health services living independently, with or without support **GREEN** ↑

Bold Steps Priority/Core Service Area	Improve services for the most vulnerable people in Kent	Bold Steps Ambition	To tackle disadvantage
Cabinet Member	Graham Gibbens	Director	Penny Southern
Portfolio	Adult Social Care and Public Health	Division	People with Mental Health needs



Data Notes.
 Units of Measure: Proportion of all people who are in settled accommodation
 Data Source: KPMT – quarterly

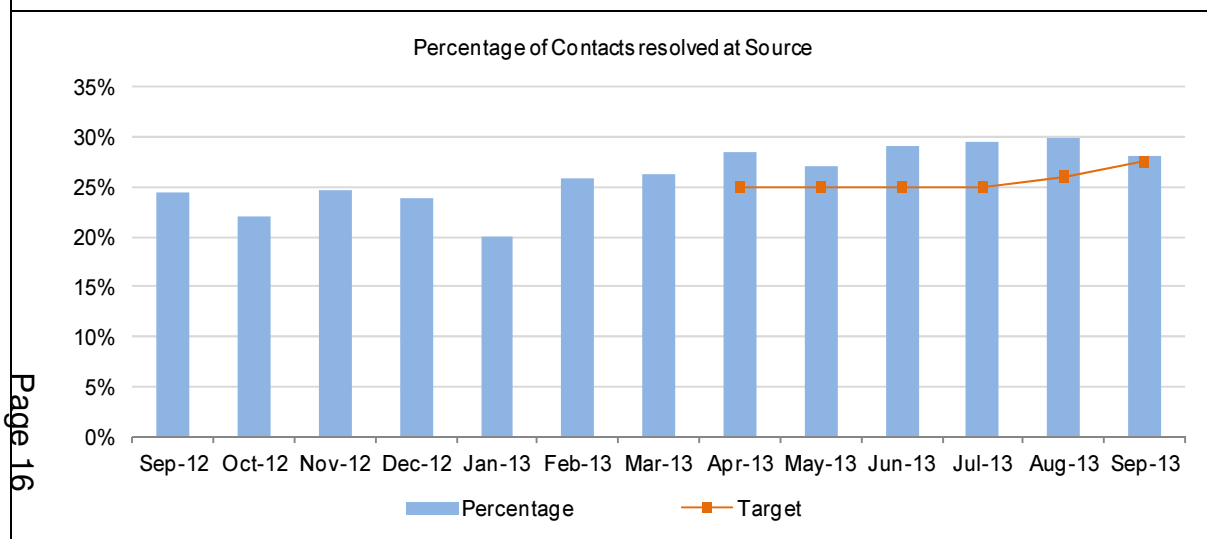
Bold Step Indicator

Trend Data	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13
Percentage	85%	84%	84%	83%	85%	85%	85%	86%	84%	84%	84%	84%	85%
Target	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%
RAG Rating	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN

Commentary

This has been included for the first time, including data from KPMT and will be updated on a quarterly basis. Settled accommodation “Refers to accommodation arrangements where the occupier has security of tenure or appropriate stability of residence in their *usual* accommodation in the medium- to long-term, or is part of a household whose head holds such security of tenure/residence.” It provides an indication of the proportion of people with mental health needs who are in a stable environment, on a permanent basis.

11. Percentage of contacts resolved at source			GREEN ↓
Bold Steps Priority/Core Service Area	Improve services for the most vulnerable people in Kent	Bold Steps Ambition	To tackle disadvantage
Cabinet Member	Graham Gibbens	Director	Penny Southern
Portfolio	Adult Social Care and Public Health	Division	People with Mental Health needs



Data Notes.
 Data Source: SWIFT report but this will be monitored using the Locality Referral Management Service information.

Trend Data	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13
Percentage	24.5%	22.0%	24.6%	23.8%	20.1%	25.8%	26.3%	28.4%	27.0%	29.1%	29.5%	29.9%	28.1%
Target								25%	25%	25%	25%	26%	28%
RAG Rating								GREEN	GREEN	GREEN	GREEN	GREEN	GREEN

Commentary
 The provision to Information, advice and guidance is a critical element of prevention for the Directorate. The recent set up of the Locality Referral Management System teams will assist with this. The target associated with this is incremental over the year, with an end of year target of 35%.

Specialist Children's Services

Bold Steps Priority/Core Service Area	Ensure we provide the most robust and effective public protection arrangements
Cabinet Member	Jenny Whittle
Portfolio	Specialist Children's Service (SCS)
Director	Mairead MacNeil
Division	Specialist Children's Service (SCS)

Performance Indicator Summary

	Previous RAG	Current RAG	Direction of Travel
Initial assessments completed within 10 days	AMBER	AMBER	↓
Case holding posts filled by permanent qualified social workers	RED	RED	↓
Children subject to a child protection plan for the second or subsequent time	AMBER	GREEN	↑
Children subject to a child protection plan for two or more years at the point of de-registration	GREEN	GREEN	↓
Percentage of children leaving care who are adopted	GREEN	GREEN	↓
Children in Care with 3 or more placements in the last 12 months	AMBER	AMBER	↓

The performance measure for **initial assessments completed within timescales** is reported as within 10 days which is in line with national reporting. Although performance for Initial Assessments completed from April-September 2013 (85.2%) is below the internal target of 90% this still compares favourably to national and statistical neighbour averages.

The percentage of **caseholding social worker posts held by qualified social workers** fell in the quarter to September 2013 to 75.8%. The majority of vacancies for social workers are currently being filled by agency staff. Achieving the target of 90% continues to be challenging.

The performance measure for the percentage of children **becoming subject to a child protection plan for the second time** has been updated in line with national changes and now only includes new plans that are within 24 months of a previous plan. Performance for the quarter to September 2013 at 9.7% was slightly above target.

The percentage of **children subject to a child protection plan lasting two or more years at the point of de-registration** has reduced from 8.0% in the year to March 2013 to 5.3% in the year to date (April-September 2013).

The percentage of **looked after children who are adopted** for the first six months of reporting year (April-September 2013) was 17.0%. This is a significant improvement in

performance although it should be noted that this level will not be sustainable in the long term.

The percentage of **children in care with 3 or more placements** within twelve months has increased slightly in the quarter to September 2013, but remains only slightly above of the latest published rate for England (11.0%).

Improvement Programme Update

The Improvement Programme began in February 2011 and was set up to respond to the failings identified during the 2010 Ofsted inspection, which placed the Council under an Improvement Notice. The Improvement Programme is now in Phase Four and this puts a substantially new focus on the Programme.

Phases One to Three successfully took the service through the immediate crisis intervention and remedial work needed to put in place the essential building blocks for sustained longer term improvement.

Progress against the Improvement Programme is overseen by the Improvement Board which meets now on a bi-monthly basis. The Board is chaired by an independent consultant and is attended by the Department for Education and senior managers from Health, the Police and KCC. The Board chair reports formally to the relevant Minister about progress in the service.

There have been a number of re-inspections by Ofsted since 2010 and these have identified that improvements have been made. The last Safeguarding Inspection by Ofsted was published in January 2013 and identified substantial improvements since 2010 and rated the service as adequate overall. Those improvements were subsequently identified in a further Ofsted inspection into our adoption services which was published July 2013.

An inspection into our services for children in care and care leavers took place in July 2013 and the report was published in August 2013. The report found improvement has been made and the service is now rated as adequate with capacity to improve as good. There were three recommendations for immediate improvement, which were to improve the quality of supervision and management oversight in casework, improve the quality of assessments and care planning so that interventions are focused and to ensure that the voice of the child contributes effectively to care planning and service delivery.

Additional recommendations were made for action within 3 months and 6 months:

Within 3 months:

- Improve looked after children's participation and ownership of PEPs and Pathway Plans
- Increase looked after children's participation in strategic planning by making sure all young people all young people know and understand the Pledge and contribute to the Children in Care Council, Kentcarestown website and other opportunities for participation.
- Ensure that all children and young people up to the age of 18 can access the Community Child and Adolescent Mental Health Service (CAMHS) in a timely way.

- Review the 16+ service to ensure that caseloads are manageable, to enable social workers to carry out effective practice with young people and care leavers.
- Risk assess all bed and breakfast accommodation to ensure that children and young people are not exposed to unsafe situations.
- Improve the timeliness of care proceedings.
- Ensure that there are sufficient placements available to enable children to be matched to carers that best meet their identified needs and support placement stability.

Within 6 months

- Ensure there is sufficient and suitable accommodation available for care leavers.
- Review the arrangements for the independent reviewing services to ensure that the case loads of the independent reviewing officers (IROs) are manageable.

A comprehensive action plan has been produced which sets out what is being done to address each of these issues.

The focus for Phase Four of the Improvement Programme is now increasingly about improving the levels of consistency, quality and effectiveness of social work provision across the county. Measures continue to be employed to improve the quality of practice, including via the County Audit Programme. The service will be delivering the next phase of the Practice Development Programme throughout the autumn and into early 2014. Timeliness of assessments continues to be maintained and Social Worker caseload levels remain low.

Given the improvements identified by Ofsted, the service will now discuss with the DfE, the Chair of the Improvement Board and the Safeguarding Children's Board (through its chair) the future of the Improvement Notice and the point at which the DfE could consider lifting it.

Views and feedback of looked after children

The council has a number of ways of collecting feedback from young people in the care of the council. This information is used to improve the services we provide.

Feedback is collected both formally and informally. Formal mechanisms include surveys run by the Independent Review Officer service and also the Virtual School (e-PEP Survey). More informal feedback mechanisms include the opportunity to provide feedback at activity days and through Kent's Children in Care Council, as well as discussions with their social worker.

Work is underway to develop new and better ways of gathering feedback from children in care to ensure the information collected provides maximum value in helping to drive improvements in the services provided. The new information will be provided in future reports.

Independent Review Officer (IRO) survey

This survey has now been in place for two years. Last year 102 children and young people provided feedback through the IRO survey. As well as collecting useful information to understand how best to communicate with young people to ensure full engagement with the review process, the survey collects some important satisfaction measures. 90% of young people responding to the survey said they felt they were listened to at the review meeting with 88% agreeing with what was said at the review meeting. The previous year, a slightly different question was used and at that time 88% respondents said they felt the review took account of their wishes and feelings.

The Children's Care Monitor 2013

The Children's Care Monitor is a new national survey run by OFSTED. This survey will provide useful benchmarking for the quality of service. The survey was run during June and July 2013 and results will be available later in the year.

E-PEP Survey

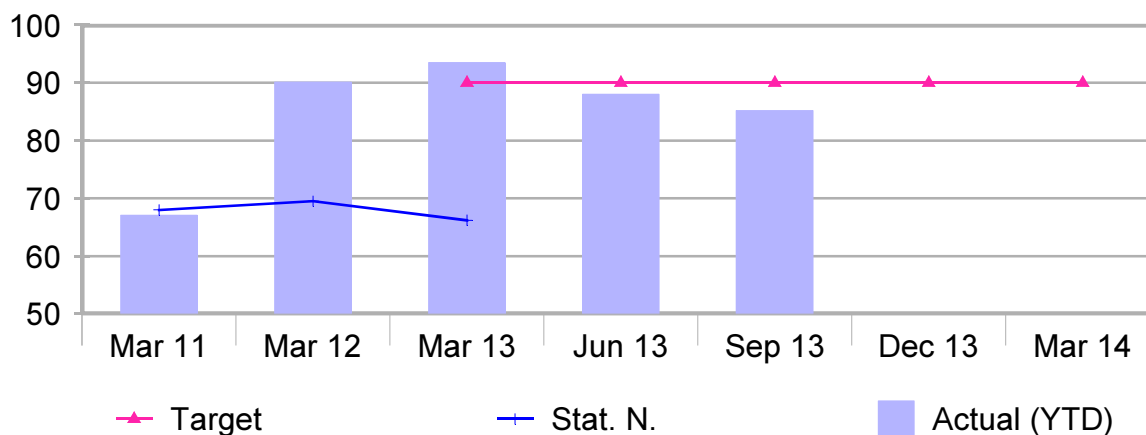
The E-PEP survey is a new survey put in place in September 2012 and collects feedback in relation to education. For the first six months of the survey, most respondents felt they are treated the same as other children (64%) and expected to achieve the same as everyone else (69%). This shows that about 1 in 3 children felt they were treated differently, although the fuller analysis shows this is something that happens sometimes rather than always. The majority of respondents (91%) felt that there was a teacher or member of staff they found it easy to talk to if they had problems. Improvements are now being made to the E-PEP survey questions to make it more useful for the future.

Activity Days

Informal feedback from children in care through activity days in the last year revealed that although children found the experience of entering care to be frightening, they frequently felt settled and safe in a short space of time and had a positive view of their experience in care. However, they identified the need for better communication with them about what was happening.

Percentage of initial assessments completed within 10 days

AMBER



Trend Data – year to date	Previous Years			Current Year			
	Mar 11	Mar 12	Mar 13	Jun 13	Sep 13	Dec 13	Mar 14
Actual	67.1%	90.1%	93.5%	88.0%	85.2%		
Target			90%	90%	90%	90%	90%
RAG Rating			Green	Amber	Amber		
Stat. N.	68%	69.5%	66.2%				

Commentary

This is a national performance measure. Although Kent's performance has decreased over the first two quarters for 2013/14 performance is still above the England rate (75.5%), and that of Statistical Neighbours (66.2%). Kent was ranked 13 out of 152 Local Authorities in the latest published statistics.

In terms of numbers during the six months from April-September 2013 5567 out of a total of 6531 Initial Assessments were completed within 10 days. Performance against this measure is monitored at team level continuously to ensure timely decision making.

Data Notes

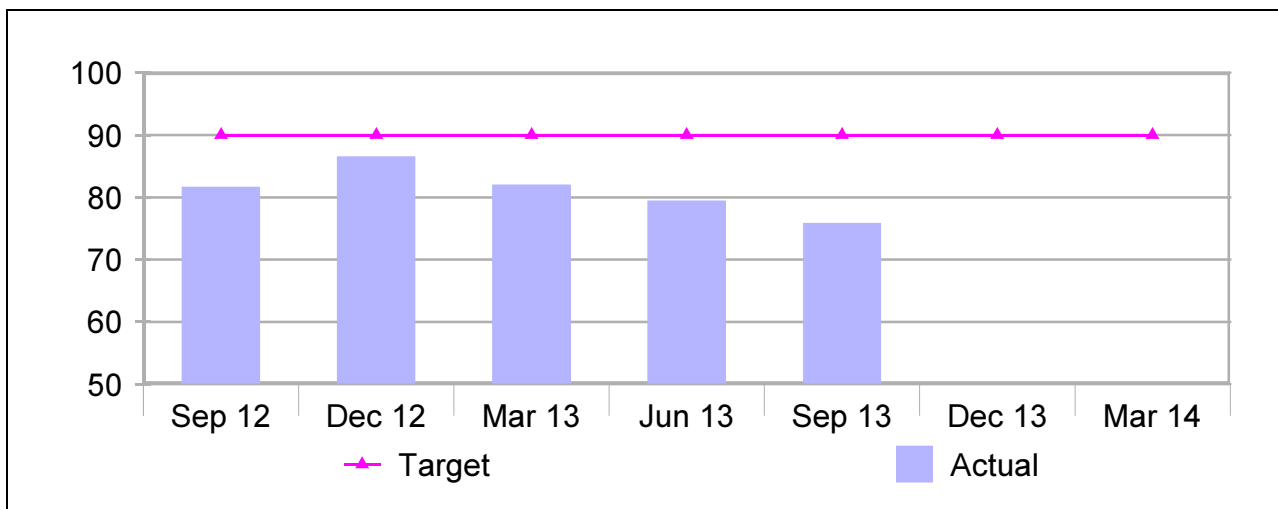
Tolerance: Higher values are better.

Results are reported as year to date.

Data Source: ICS.

Percentage of case holding posts filled by permanent qualified social workers

RED
↓



Trend Data – quarter end	Previous Year			Current Year			
	Sep 12	Dec 12	Mar 13	Jun 13	Sep 13	Dec 13	Mar 14
Actual	81.6%	86.5%	82.0%	79.4%	75.8%		
Target	90%	90%	90%	90%	90%	90%	90%
RAG Rating	Amber	Amber	Amber	Red	Red		
Agency	12.9%	13.9%	15.0%	17.2%	19.7%		

Commentary

Please note change in RAG Levels – see data notes below.

The proportion of vacant posts has increased due to the expansion of some of the area teams which has increased the number of posts to be filled. The vacancy rate will be reduced by the recruitment of 47 newly qualified social workers who will be starting from September 2013 onwards.

Continuing efforts to attract staff include a refreshed branding and recruitment campaign, access to additional incentives for accommodation and a focus on the professional development and practice improvement that social workers value. It is recognised that specific districts have greater difficulty in attracting staff for reasons connected to location, cost of housing and travel time/costs. Additional market premium payments have been introduced for Team Managers. In addition recruitment of social workers from overseas is actively being pursued.

Data Notes

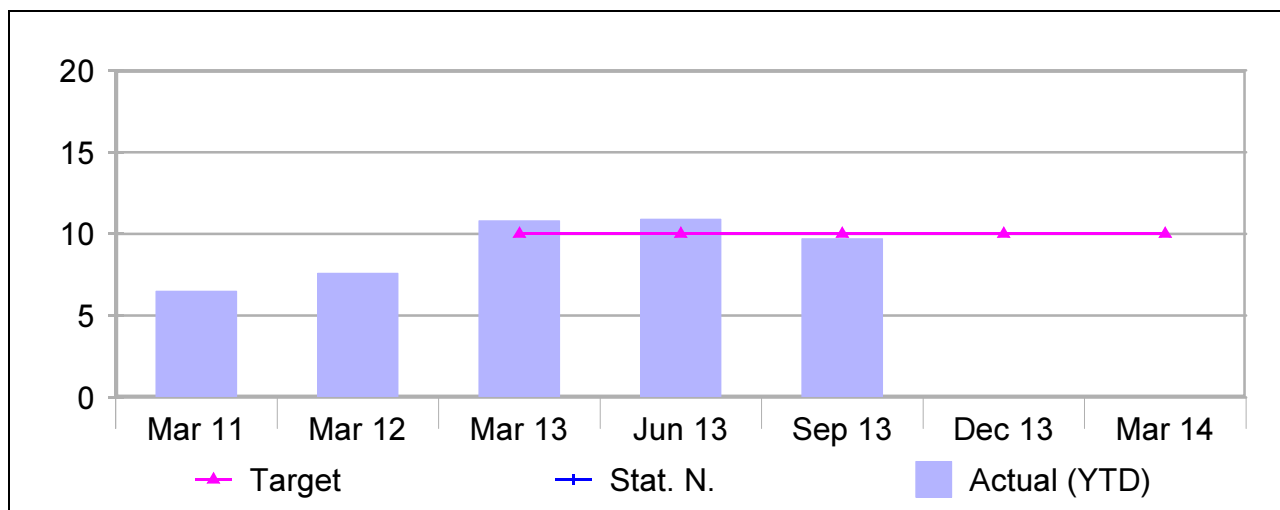
Change to the RAG rating: For 2013/14 the Amber RAG rating has been removed, a Green Rating will only be achieved once the 90% target is achieved or exceeded.

Tolerance: Higher values are better. Data is reported as the position at quarter end. Posts held by agency staff are not included in figures for headline indicator.

Data Source: SCS Weekly Performance Report.

Percentage of children becoming subject to a child protection plan for the second or subsequent time

GREEN
↑



Trend Data – year to date	Previous Years			Current Year			
	Mar 11	Mar 12	Mar 13	Jun 13	Sep 13	Dec 13	Mar 14
Actual	6.5%	7.6%	10.8%	10.9%	9.7%		
Target			10%	10%	10%	10%	10%
RAG Rating			Amber	Amber	Green		
Stat. N.							

Commentary

Please note change of definition – see data notes below.

Performance for the six months to September 2013 is now below the target set for 2013/14. During this period 817 children became subject to a Child Protection Plan and 79 had been subject to a previous plan within 24 months.

Cases where children become subject to a Child Protection Plan for a second or subsequent time are reviewed carefully by District Management Teams and the Safeguarding Unit.

The definition for this performance measure has changed nationally for 2013/14 and national comparative data is not yet available. All performance figures provided above for previous years are reflective of the change in definition but DfE publications of performance up to March 2013 are against the previous definition.

Data Notes

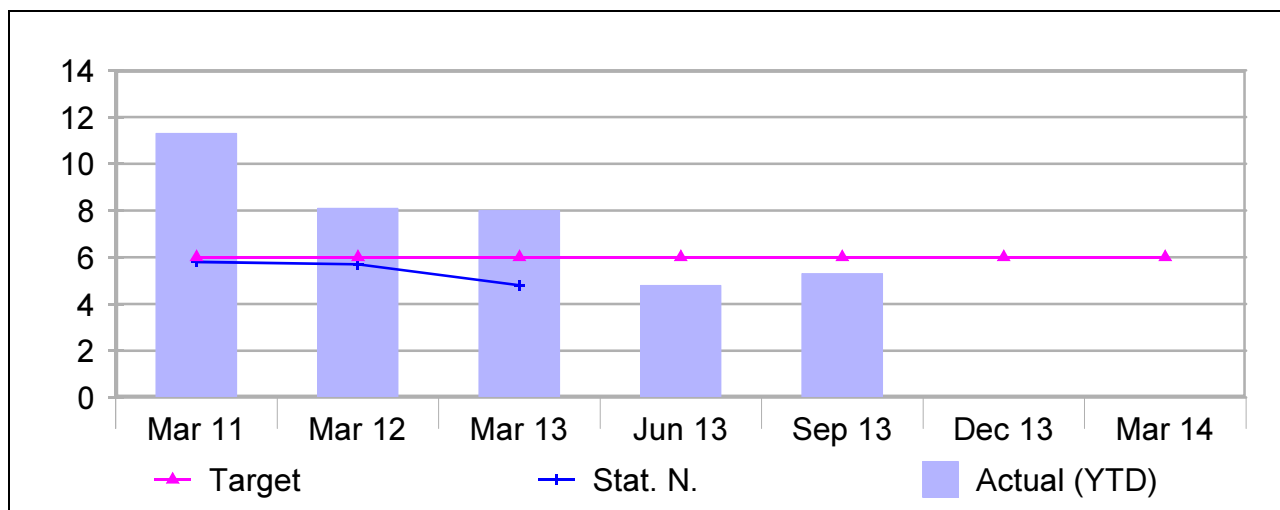
Change in definition: For 2013/14 this indicator now only measures children being subject to a second plan within 24 months of a previous plan.

Tolerance: As close to target as possible. Should not be too low or too high.

Data Source: ICS

Percentage of children subject to a child protection plan for two or more years at the point of de-registration

GREEN
↓



Trend Data – year to date	Previous Years			Current Year			
	Mar 11	Mar 12	Mar 13	Jun 13	Sep 13	Dec 13	Mar 14
Actual	11.3%	8.1%	8.0%	4.8%	5.3%		
Target	6%	6%	6%	6%	6%	6%	6%
RAG Rating	Red	Red	Amber	Green	Green		
Stat. N.	5.8%	5.7%	4.8%				

Commentary

Performance against this measure in the first six months of 2013/14 has exceeded the target set and shows a significant improvement on previous results. There were 28 children in the quarter whose Plans came to an end and which had been in place for 24 months or more.

This improvement has been achieved by a focus on improvements in chairing and decision-making at Child Protection conferences, on more focussed child protection plans and interventions and more consistent use of step-down to children in need and step-up to children in care, alongside regular and consistent management attention.

There has also been a focus on attention for children whose Plans reach the 18 months point with clear planning put in place at this point. There were 64 Plans at the end of September 2013 which had been in place for 18 months or more, compared to 236 in March 2011.

Data Notes

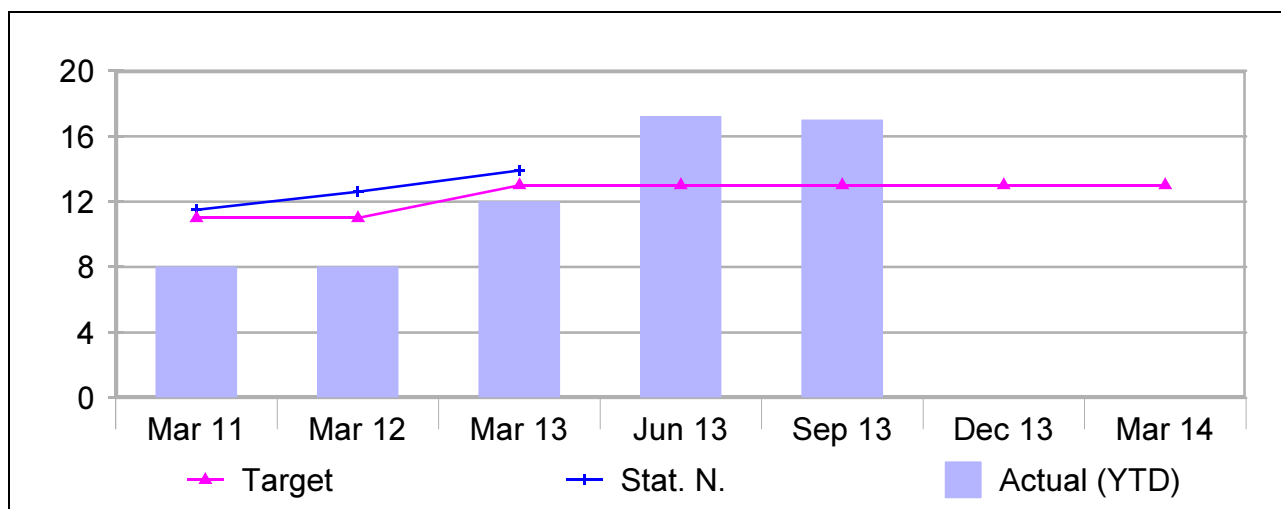
Tolerance: Lower values are better.

Calculated as the percentage of children ceasing to be subject to a child protection plan, who had been subject to that plan for two or more years.

Data Source: ICS

Percentage of children leaving care who are adopted

GREEN



Trend Data – year to date	Previous Years			Current Year			
	Mar 11	Mar 12	Mar 13	Jun 13	Sep 13	Dec 13	Mar 14
Actual	8.0%	8.0%	12.0%	17.2%	17.0%		
Target	11%	11%	13%	13%	13%	13%	13%
RAG Rating	Red	Red	Amber	Green	Green		
Stat. N.	11.5%	12.6%	13.9%				

Commentary

Significant progress has been made with regard to Adoptions and this is reflected in the results for the six months to September 2013. There were 79 adoptions between April and September 2013 which compares favourably with 42 for the same period last year.

The improvements in the number of adoptions have been achieved by more focused work with prospective adopters, close working with the judiciary to reduce delays, robust case work management focused on reducing planning drift, and timely decision making in relation to planning for permanence.

It is unlikely that current performance levels will be sustainable into future quarters but on average over the year the Target level should be achieved.

Data Notes

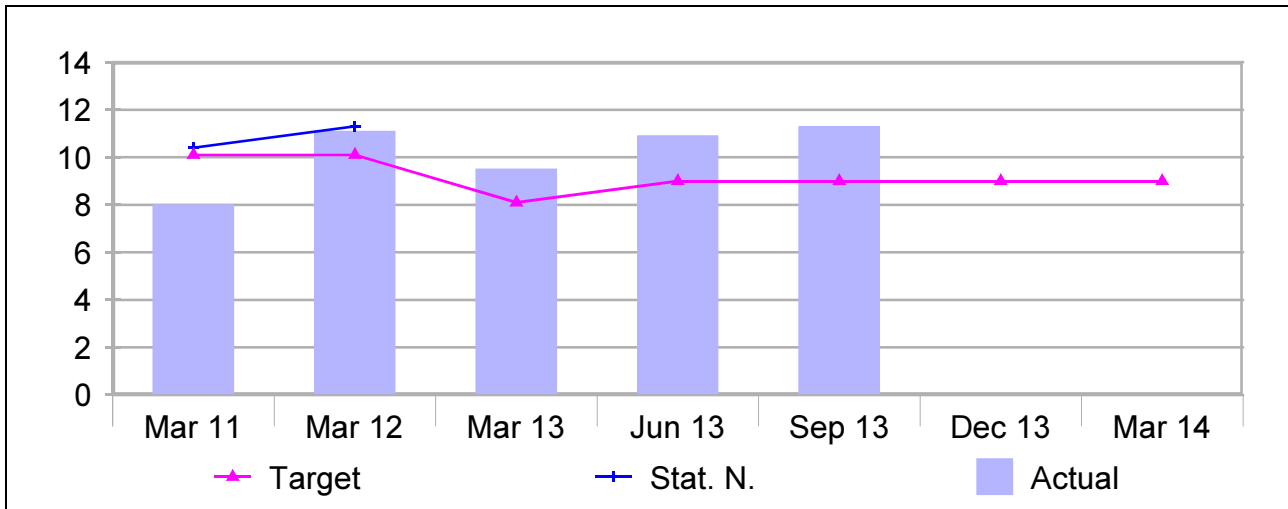
Tolerance: Higher values are better.

Data is reported as financial year to date.

Data Source: ICS

Children in Care with 3 or more placements in the last 12 months

AMBER



Trend Data – quarter end	Previous Years			Current Year			
	Mar 11	Mar 12	Mar 13	Jun 13	Sep 13	Dec 13	Mar 14
Actual	8.0%	11.1%	9.5%	10.9%	11.3%		
Target	10.1%	10.1%	8.1%	9%	9%	9%	9%
RAG Rating	Green	Amber	Amber	Amber	Amber		
Stat. N.	10.4%	11.3%					

Commentary

As at September 2013, 207 children had had three or more placement moves in the previous 12 months. Of these, the Catch22 Service (responsible for children over the age of 16) had the highest number which related to 63 young people. There were also 28 Unaccompanied Asylum Seeking Children for whom the first placement will count as one move.

From April 2011 episodes where children in care go missing have been included within the published figures for placement stability. This information is included at the end of the reporting year but due to issues with the current IT system cannot be included in the year to date performance figures. The figures for June and September 2013 therefore relate to changes in actual placements, and do not include breaks in placements when a child in care goes missing for 24 hours or more.

Data Notes

Tolerance: Lower values are better.

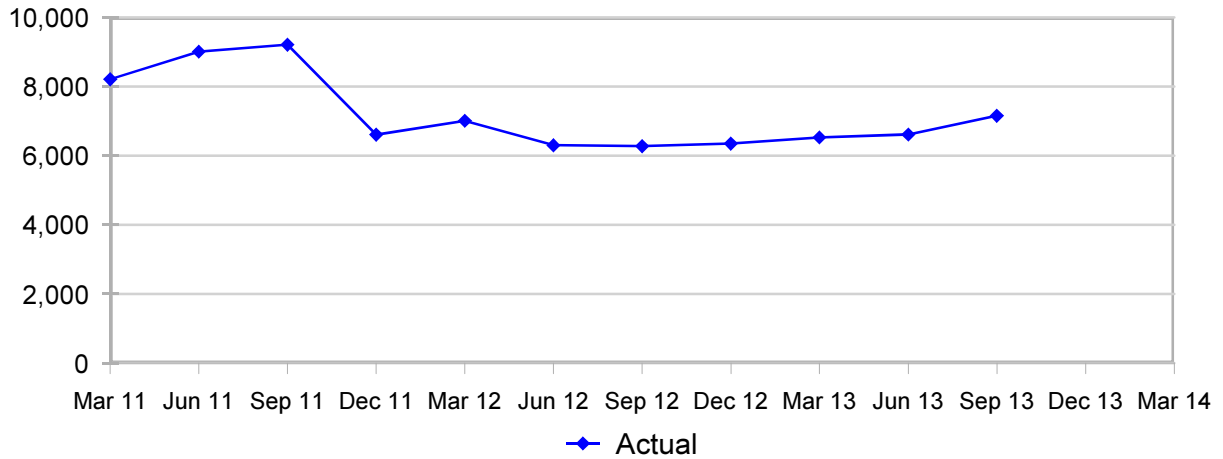
Data is reported as a snapshot at each quarter end.

Data Source: ICS

Specialist Children's Services - Lead indicators

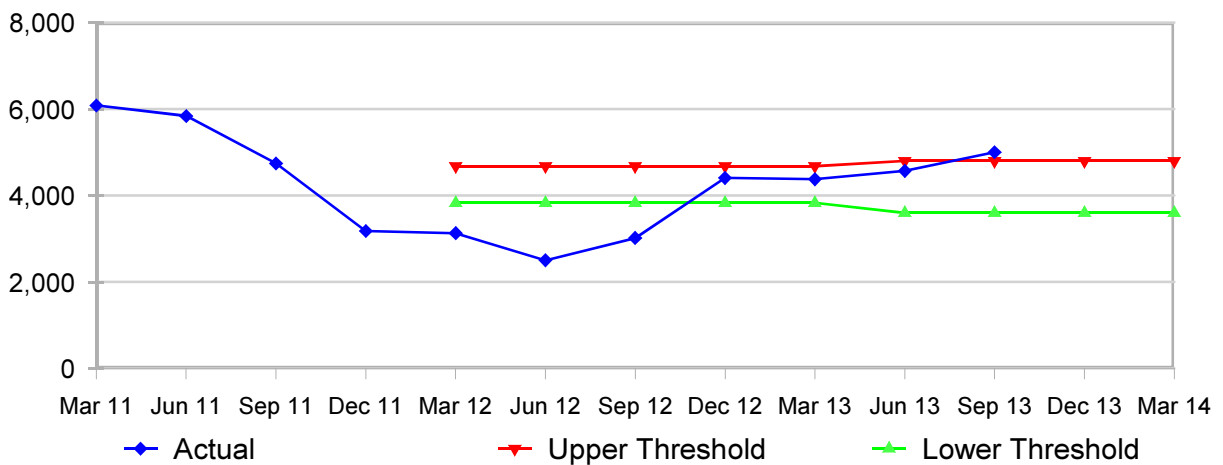
The **number of contacts** to the service has been remarkably stable over the 18 months.

Quarterly number of contacts received



The introduction of the Central Duty Team in 2011 contributed to a decrease in the **number of recorded referrals**, from above the expected range in 2010 to below the expected range by December 2011. An exercise was then completed to compare Kent's practice with that of high performing authorities and this found that for a number of contacts received in Kent, a high level of work was being conducted without the contact being recorded as a referral, contrary to policies in other councils. Action was taken to address the practice differences found, and a revised process was introduced in August 2012. Following the introduction of the new arrangements, the recorded referral rate has been within the expected range for the last two quarters. The conversion rate of contacts to referrals in September 2013 was 69.1%.

Quarterly number of referrals



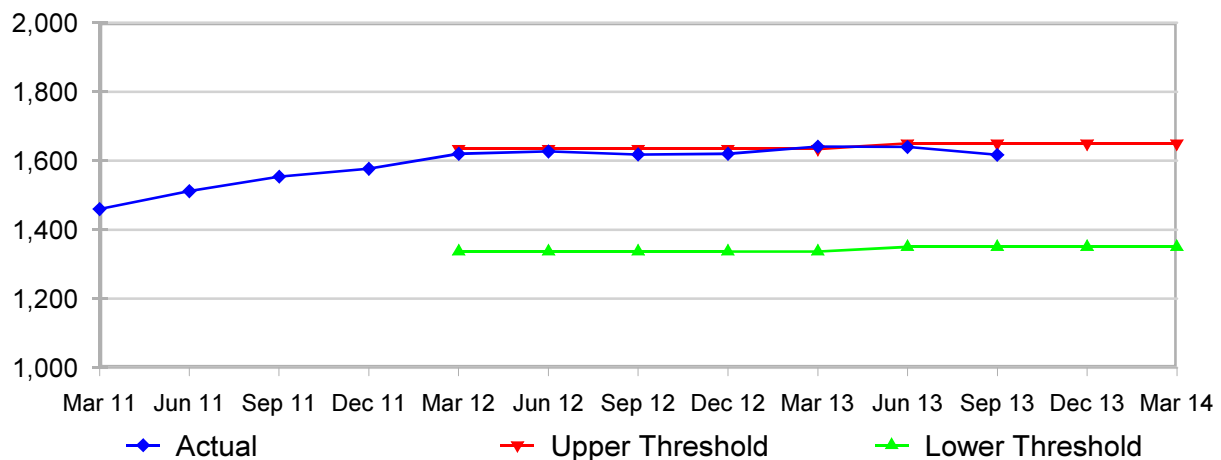
Specialist Children's Services - Lead indicators

The **number of indigenous Children in Care** has remained fairly static over the last year. The rate per 10,000 children aged 0-17 years at the end of September 2013 was 50.1, slightly above the target rate of 48.5.

Actions being taken which will impact on the number of Children in Care include:

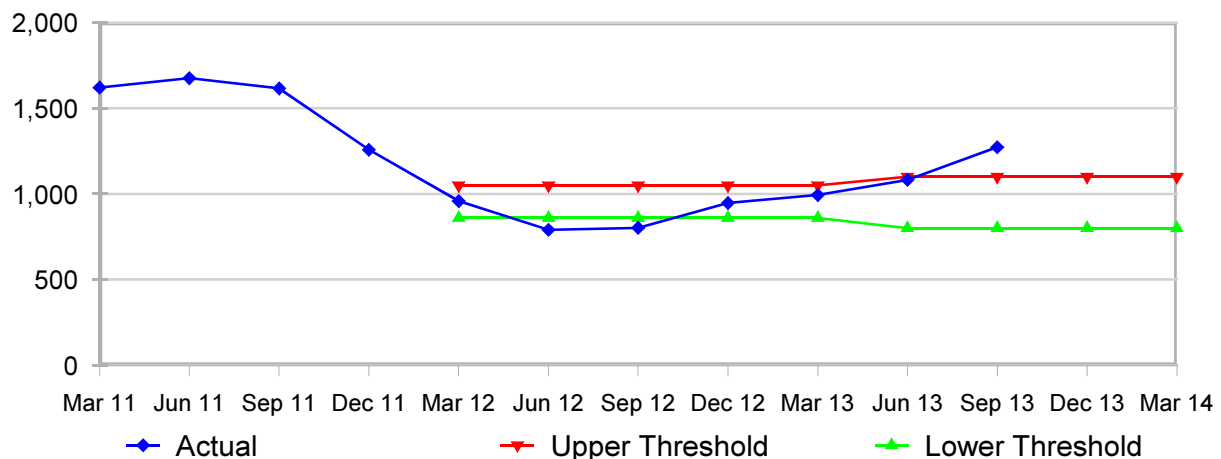
- Improving the percentage of children who are adopted.
- Robust gate-keeping of decisions to take Children in Care.
- Robust tracking of permanency planning including tackling drift and delay.
- Increased investment in prevention and early intervention services.
- Developing speedier and integrated responses to vulnerable adolescents.

Number of indigenous Children in Care (quarter-end count)



The number of **children with Child Protection Plans** at the end of September 2013 was 1,273. The indicative target, based on a comparable level with statistical neighbours, is a rate of 34.9 per 10,000 children aged 0-17 years. Kent's rate at the end of September 2013 was 39.4.

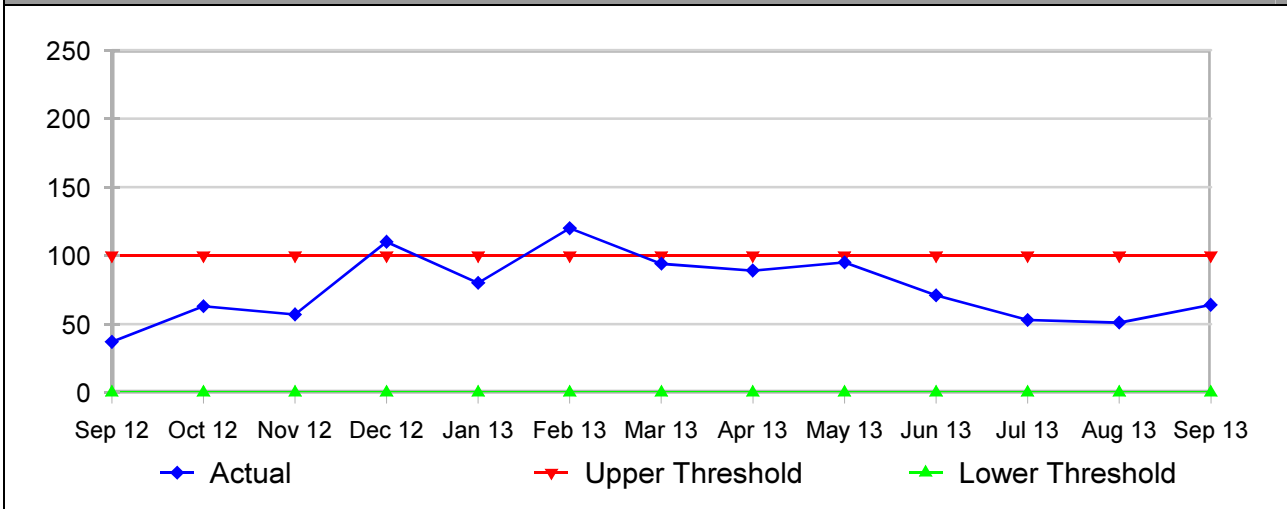
Number of children with child protection plans (quarter-end count)



Specialist Children's Services - Lead indicators

The number of Initial assessment in progress and out of timescale was within the expected range at the end of September 2013.

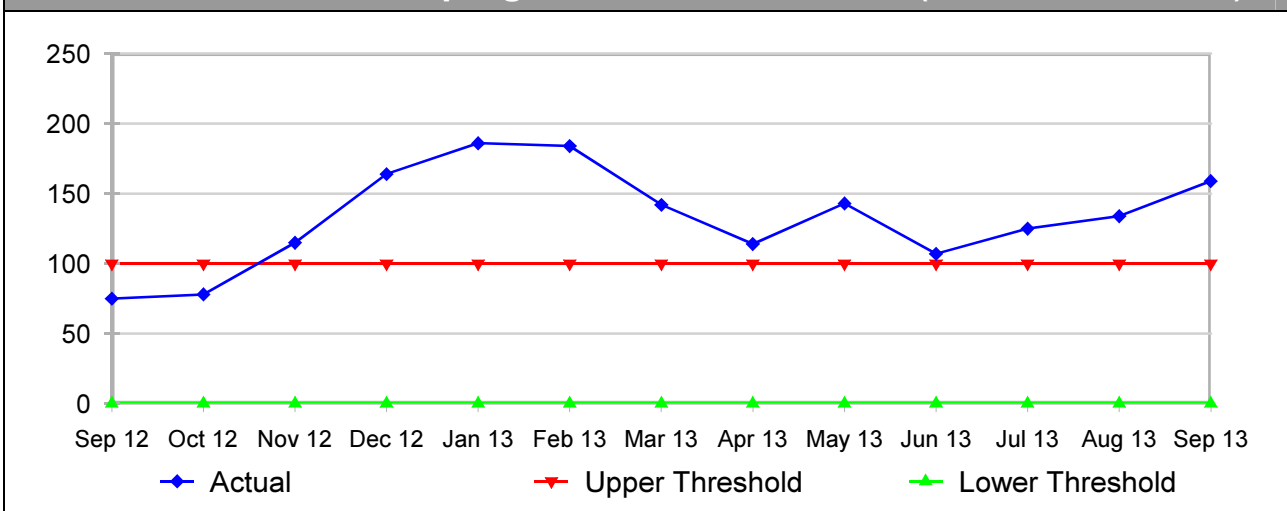
Initial assessments in progress, out of timescale (month-end count)



The number of **core assessments in progress and out of timescale** was slightly above the Upper Threshold level of 100 at the end of September 2013 with many of these cases being in East Kent. Swale in particular is experiencing issues in meeting this timeliness measure due to staffing pressures combined with high volumes of work as a result of an increased rate of referrals. Ensuring that the quality of assessments is maintained has also resulted in some delays which have impacted on the timeliness of core assessments.

Recruitment to East Kent remains challenging and as an interim measure staff are being moved within the district, and from Canterbury to provide additional support to the Assessment and Intervention Team.

Core assessments in progress, out of timescale (month-end count)



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