



People in Dorset are INDEPENDENT





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Outcomes Focused Monitoring Report - October 2017



PAGE 1

The following pages have been provided to summarise the current position against each outcome indicator and performance measure. This will help the council to identify and focus upon potential areas for further scrutiny. All risks are drawn from the <u>Corporate Risk Register</u> and mapped against specific population indicators where relevant. Any further corporate risks that relate to the 'Independent' outcome are also included to provide a full overview. Please note that information relating to outcomes and shared accountability can be found on the <u>Dorset Outcomes Tracker</u>.

Contents				
Population Indicator	Page No			
Corporate Risks that feature within Independent but are not assigned to a specific Population Indicator	2			
Legend and Accountability for Outcomes	2			
01: The percentage of children 'ready to start school' by being at the expected level at Early Years	3			
02: The percentage of children with good attendance at school	4			
03: % achieving expected standard at KS2 in reading, writing and maths	5			
04: Percentage of 16-18 year olds not in education, employment or training (NEET)	6			
05: The rate of delayed transfers from hospital care (all causes)	7			
06: Proportion of clients given self -directed support	8			
07: Proportion of clients given direct payments	9			

Corporate Risks that feature within INDEPENDENT but are not assigned to a specific POPULATION INDICATOR (All risks are drawn from the Corporate Risk Register)				
01c Failure to ensure that learning disability services are sustainable and cost-effective	HIGH	UNCHANGED		
02e Failure to meet statutory and performance outcomes for young people in transition	HIGH	UNCHANGED		
01k Negative financial impact as we reshape our services to ensure they are care act compliant	MEDIUM	UNCHANGED		
07c Failure of the Early Help partnership	MEDIUM	UNCHANGED		
07h Lack of momentum in agreeing the joint funding protocol with the CCG	MEDIUM	NEW		
CS07 Increase in adverse judgements in relation to SEN decisions	LOW	UNCHANGED		
CS08 Increase in adverse judgements re provision for children out of schools	LOW	UNCHANGED		

Legend				
	HIGH	High level risk in the Corporate Risk Register and outside of the Council's Risk Appetite		
Corporate Risks	MEDIUM	Medium level risk in the Corporate Risk Register		
	LOW	Low level risk in the Corporate Risk Register		
	IMPROVING	Performance trend line has improved since previous data submission		
Trend	UNCHANGED	Performance trendline remains unchanged since previous data submission		
	WORSENING	Performance trendline is worse than the previous data submission		

Accountability for Indicators and Measures						
Population Indicator – relates to ALL people in a given population Performance Measure – relates to people in receipt of a service or intervention						
Accountability - Partners and stakeholders working together	Accountability - Service providers (and commissioners)					
Determining the ENDS	Delivering the MEANS					
(Or where we want to be)	(Or how we get there)					

INDEPENDENT: 01 % of children 'ready to start school' by being at the expected level at Early Years (Outcome Lead Officer Sally Longman; Population Indicator Lead Officer Claire Shiels)

DORSET	DORSET	COMPARATOR	02: Percentage of children achieving expected level at Early Years Foundation Stage			
Latest (2016)	Trend IMPROVING	Benchmark (South West)	60			
70.1%		BETTER 69.5% (Average)	40-			
			20 ■ Benchmark (if available) □ Dorset 2013 2014 2015 2016			
			2013 2014 2015 2016			

Partners with a significant role to play: Parents/Carers; early years providers, children's centres, schools, health visitors, Job Centre Plus/Department for Work and Pensions, adult training providers, libraries, leisure providers (including parks and play areas), planning departments and housing developers. There is strong evidence that investment in the early years, including targeted parenting programmes, has a significant return on investment.

Dorset County Council Performance Measures

	r old children b	enefitir	g from	30 Inequality gap EYFS	
50 ———					2023
					10 —
0 —	15	16	17	18	0 —————————————————————————————————————

Corporate Risk	Score	Trend
No associated current corporate risk(s)		

Story behind the baseline

This indicator helps us to understand school readiness and is made up of the building blocks for child development. School readiness starts at birth with the support of parents and carers, when young children acquire the social and emotional skills, knowledge and attitudes necessary for success in school and life.

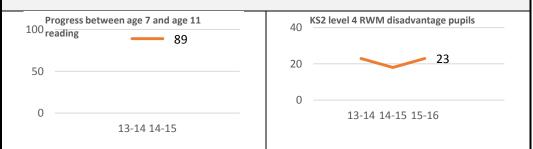
Children who don't achieve a good level of development at age five can struggle with social skills, reading, maths and physical skills. Although performance overall is good and improving, children from the poorest households do less well at this stage, as do children with special educational needs. Girls tend to better than boys and Gypsy/Roma/Traveller families do less well than white British children. Those that don't reach a good level of development are already behind their peers so start school life with more ground to catch up and inequalities can continue throughout school life. School readiness at age five has a strong impact on future educational attainment and life chances. Good quality universal health care and childcare for pre-school children promotes school readiness. Parents and carers can provide a range of experiences and positive reinforcement through good communication, story-telling, and opportunities for play.

The proportion of 2 year olds benefiting from funded early education is in the highest quartile nationally and access to high quality early years education is important in closing the inequality gap.

DORSET	DORSET	COMPARATOR		Corporate Risk	Score	Trend
Latest (2015-16)	Trend	Benchmark	UNDER DEVELOPMENT	No associated current corporate risk(s)		
				Story behind the baseling	ie	
ducation p	roviders, volu	ntary and commur	ools, school governors, parents/carers, alternative ity sector, youth providers, early year's settings, th offending service.	Good school attendance is important to ensure that children life. Children who miss school often fall behind and the school attendance and achieving good results at GCSE. Considered to preparing for adulthood and employment opport. Total absence from school in Dorset (across all schools) is and regionally.	re is a strong link blood attendance at unities later in life.	oetween goo school is als
	Dor	set County Counc	il Performance Measures			
2 Total S	EN absence		5.5 Total secondary absence 5.4	Much of the work children miss when they are off schoo pupils at a considerable disadvantage for the remainder of are missing from school are more vulnerable to exploitative reasons for non-attendance, those that truant are of particular have become disillusioned by school and by the time they becomes more difficult for parents and schools to improve	their school career. on. Although there ular concern. These have reached the	Children wh are numerou children ma
Takala d	TO FOLLOW		13-14 14-15 15-16	Patterns of attendance are usually established earlier in the worst attendance tend to be from families that do not v		
4.2 Total pri	13-14 14-15	15-16	Looked after children overall absence 5 4 0 13-14 14-15 15-16	often missed school themselves. If poor school attendance is more likely to have a lasting impact. Children with low attendance in the early years (prior to likely to be from the poorest backgrounds.		

INDEPENDENT: 03 % achieving expected standard at KS2 in reading, writing and maths (Outcome Lead Officer Sally Longman; Population Indicator Lead Officer Claire Shiels)

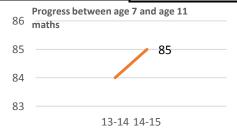
DORSET	DORSET	COMPARATOR	100	03 % achieving expected standard at KS2 in	Corporate Risk	Score	Trend
Latest	Trend	Benchmark		reading, writing and maths			
(2017)	IMPROVING	(Statistical Neighbour)	80				
57%		iveighbour)	60		No associated current corporate risk(s)		
		BETTER		57%	,		
		58.7%	40				
		(Average)	20				
			0				
				2013 2014 2015 2016 2017			
Partners wi	th a significan	t role to play: So	hools,	school governors, parents/carers, voluntary	Story behind the baseline		
ind commi	unity sector, e	arly year's settin	ngs, chi	ildren's centres, health visitors and school			
iurses.							
					Standardised Assessments are undertaken in Year 6 or Key Stage 2.	For the firs	st time in 201
	Dors	set County Cour	ncil Per	rformance Measures	they were used to test the understanding of understanding	of the nat	ional primar

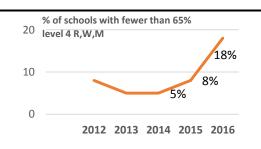


curriculum. Achievement at Key Stage 2 influences pupil's attainment at GCSE as well as a range of other outcomes.

Disadvantaged pupils are less likely to achieve well at KS2.







INDEPENDENT: 04 Percentage of 16-18 year olds not in education, employment or training (NEET) (Outcome Lead Officer Sally Longman; Population Indicator Lead Officer Claire Shiels)

DORSET	DORSET	COMPARATOR	
Latest (2016)	Trend	Benchmark	04: Percentage of 16 - 17 year olds NEET
(2010)	IMPROVING	Benchmark (South West)	4.0%
2.6%		BETTER	2.6%
		2.9% (Average)	0.0% — Jan-Mar 2016 — Jan-Mar 2017
			Dorset — England
			Ü

Partners with a significant role to play: Young people, parents, schools, FE Colleges and educational institutions, VCS sector, Family Partnership Zones, LEP and ESB, Economic Development roles in District Councils, Ansbury Guidance (Provider of Information, Advice and Guidance to Vulnerable young people).

	Dorset County Council Performance Measures							
100	% of offers of education or training made to 16/17 year olds	5 —% of 16/17 year olds in jobs without training						
95		2.70%						
90	2012 2013 2014 2015 2016	0						
0.5	0.4%	20 % Care Leavers that are NEET 14.5%						
0	% of 16/17 year olds NEET re-engaged in EET	0 —						
Ü	2014 2015 2016 2017 2018 2019	2016 2016 2017 2018 2019						

Corporate Risk	Score	Trend
CS04 Performance targets for young people in jobs without training are not in line with national average	MEDIUM	UNCHANGED

Story behind the baseline

The number and proportion of (academic age) 16 and 17 year olds who are NEET continues to remain below the England average. It is also slightly lower than the previous year.

When you look further you see that there has been a small increase in the 17 year old NEETs. High concentrations of NEET young people remain in Purbeck, Christchurch and Chesil areas of Dorset.

The number of young people who are NEET and seeking work is lower than England (Dorset 1.6%; England 1.9%).

The proportion of young people who are NEET and not available to the labour market due to illness, pregnancy or parenthood is low and reflects the national proportions.

INDEPENDENT: 05 Delayed transfers from hospital care (number of bed days) (Outcome Lead Officer Sally Longman; Population Indicator Lead Officer Harry Capron) **DORSET** DORSET COMPARATOR Latest Trend No comparator 05: Delayed transfers from hospital care, jointly attributable (number of bed days) (Q1 2017information **IMPROVING** 18) currently available, as 3000 2370 indicator definition 2000 Q1 (Total bed changed in April 2370 days 1000 2017 delayed) Adult Social 2017- 2018-2015- 2016-Care & 17 18 16 19 jointly Dorset attributable = 2370 (Q1),Compared

Partners with a significant role to play: Adult Social Care, Acute and Community Hospitals, Reablement Service, residential and domiciliary care providers, GP surgeries, Clinical Commissioning Group, Early Help services.

to Q1 2016-

17 = 3232

Corporate Risk	Score	Trend
01b Poor performance of the Better Care Fund	HIGH	UNCHANGED

Story behind the baseline

Throughout 2016-17 significant progress has been made in reducing the number of bed days lost. We received a letter of congratulation from Jeremy Hunt in June as we were the council with the best improvement in the number of patients experiencing Delayed Transfers of Care (DToC) across the whole of England for quarter 4 compared to last year. Moving from 8413 to 6019. He commented that this was a remarkable achievement. Also that we were a real example to others, demonstrating how to improve performance in a short space of time and ensure that patients get the care that they deserve. However, we need to ensure further reductions are achieved and the impact of Better Care Fund (BCF) schemes will support this as seen in Q1 results. It should also be noted that the way we monitor DToC has changed since April 2017 hence the change in the Population Indicator to move away from the historical ASCOF measure focused on the rate per population, to reflect the new emphasis on the number of bed days delayed. This is a key indicator as significant future funding for the Directorate via the Better Care Fund rests on how well we perform against this in the near future. The work of the High Impact Change Action plan is central to this.

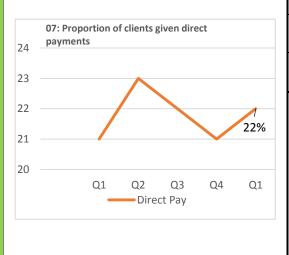
Dorset County Council Performance Measures



DORSET	DORSET	COMPARATOR			Corporate Risk	Score	Trend
Latest (Q1 2017- 18)	Trend IMPROVING	Benchmark (England)		Proportion of clients given self-directed opport	03c Failure to meet primary statutory and legal care		IMPROVING
97%		BETTER 86.9%	95 —	9	duties -Mental Capacity Act/Deprivation of Liberty Safeguards		
		(Average)	90 —		O3d Breach of the Deprivation of Liberty Safeguards (Community DOLs)	MEDIUM	UNCHANGED
			85 —	Q1 Q2 Q3 Q4 Q1	07g Failure to develop Sustainability and Transformation Plans to achieve place based commissioning as part of the integration with health	MEDIUM	IMPROVING
				11e Market failure (supply chain) with negative effect on service delivery within Adult and Community	LOW	UNCHANGED	
					Services		
	•	• •	•	lp Services, Residential and Domici	iary Story behind the baseline		
Care Provi	ders, Clinical	• •	Group,	Primary & Secondary Health Serv	ces, All cases are being looked at with a view to how they		
Care Provi	ders, Clinical and Commun	Commissioning (ity Sector, Teleca	Group, are prov	Primary & Secondary Health Serv	Ces, Promotional work has been undertaken to keep the stro All cases are being looked at with a view to how they future.	are to be m	nanaged in the
Care Provi	ders, Clinical and Commun	Commissioning (ity Sector, Telecaset County County Proportion of people	Group, are prov	Primary & Secondary Health Serv iders.	ces, All cases are being looked at with a view to how they	are to be m	nanaged in the r organisations
Care Provi	ders, Clinical and Commun	Commissioning (ity Sector, Telecaset County County Proportion of people	Group, are prov	Primary & Secondary Health Serv iders. prmance Measures services, and carers,	Ces, Promotional work has been undertaken to keep the stro All cases are being looked at with a view to how they future. New care pathways/interventions continue to be design	ed by partne ndicator are	nanaged in the r organisations to be assessed. ntegrated case
Care Provi	ders, Clinical and Commun <u>Dors</u> 76	Commissioning (ity Sector, Telecaset County County Proportion of people	Group, are prov	Primary & Secondary Health Serv iders. prmance Measures services, and carers,	Promotional work has been undertaken to keep the stroe All cases are being looked at with a view to how they future. New care pathways/interventions continue to be design and once established the impact of the changes on this in Whilst practice remains the same, the implementation	ed by partne ndicator are	nanaged in the r organisations to be assessed. ntegrated case

INDEPENDENT: 07 Proportion of clients given direct payments (Outcome Lead Officer Sally Longman; Population Indicator Lead Officer Harry Capron)

DORSET	DORSET	COMPARATOR
Latest (Q1 2017-	Trend	Benchmark
18)	IMPROVING	(England)
22%)		BETTER
,		28.1%
		(Average)



Partners with a significant role to play: Early Help Services, Residential and Domiciliary Care Providers, Clinical Commissioning Group, Primary & Secondary Health Services, Voluntary and Community Sector, Telecare providers.

Dorset County Council Performance Measures								
30	30 ——Proportion of clients in receipt of direct payments							
20						22%		
10								
0		Q1	Q2	Q3	Q4	Q1		

Corporate Risk	Score	Trend
No associated current corporate risk(s)		

Story behind the baseline

Promotional work has been undertaken to keep the strong focus on personalisation. All cases are being looked at with a view to how they are to be managed in the future.

New care pathways/interventions continue to be designed by partner organisations and once established the impact of the changes on this indicator are to be assessed. We are not expecting a significant increase in take up as the emphasis has shifted on personal budgets.

A number of people do not want direct payments as the mechanism for delivering personalisation. Instead Individual Service Funds (ISF's) are being developed as a way of promoting this.