

DATA LABEL: PUBLIC



## **SOCIAL POLICY - POLICY DEVELOPMENT AND SCRUTINY PANEL**

### **PERFORMANCE REPORT – ANNUAL INDICATORS**

#### **REPORT BY HEAD OF SOCIAL POLICY**

##### **A. PURPOSE OF REPORT**

To report the current level of performance for the annual indicators which supports the Corporate Plan and are the responsibility of Social Policy and reportable to the Policy Development and Scrutiny Panel.

##### **B. RECOMMENDATIONS**

It is recommended that the Panel note the performance information and determine if further action or enquiry is necessary for any of the performance indicators in the report.

##### **C. SUMMARY OF IMPLICATIONS**

<b>I Council Values</b>	<ul style="list-style-type: none"> <li>• Focusing on our customers' needs</li> <li>• Being honest, open and accountable</li> <li>• Providing equality of opportunity</li> <li>• Developing employees</li> <li>• Making best use of resources</li> <li>• Working in partnership</li> </ul>
<b>II Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment)</b>	In compliance with the Code of Corporate Governance
<b>III Implications for Scheme of Delegations to Officers</b>	No implications.
<b>IV Impact on performance and performance Indicators</b>	This report is an evaluation of current/historic performance
<b>V Relevance to Single Outcome Agreement</b>	The indicators support the outcomes in the Single Outcome Agreement
<b>VI Resources - (Financial, Staffing and Property)</b>	N/A
<b>VII Consideration at PDSP</b>	N/A
<b>VIII Other consultations</b>	N/A

## **D. TERMS OF REPORT**

### **D1 Background**

The Policy Development and Scrutiny Panel (PDSP) oversee and challenge council performance. They are a key element of the scrutiny of performance by elected members and form part of the council's wider scrutiny and public performance reporting arrangements. To support this, each PDSP is allocated areas of the Corporate Plan, strategic priorities and key council performance indicators, relevant to the focus areas of the Panel. They receive both quarterly and annual performance reports.

### **D2 Annual Performance Report**

The annual performance scorecard report for the Social Policy PDSP contains a range of relevant service performance information for scrutiny. A summary report of the 33 performance indicators in the Social Policy PDSP scorecard is contained in Appendix 1. The scorecard report contains the most up to date annual data.

The 33 performance indicators are categorised as follows:

Summary of Performance Indicator status (RAG)	
Status (against target)	Number of PIs
Green	23
Amber	3
Red	4
Unknown	3

The RAG status is against the performance target that has been set by the service in consultation with the relevant stakeholders.

Each indicator in Appendix 1 is accompanied by trend chart commentary, which provides an explanation of the current performance levels (against the target). This information also highlights any performance below target and outlines the measures that our services are taking to improve their performance.

### **D3 Amber and Red Performance Indicator**

**P:SPCC001\_6a.7 Percentage of respondents who rated the overall quality of Learning Disability (adults) service as good or excellent**

***Current performance – 90.33%***

***Target – 99%***

The target for 2019/2020 was reviewed and set at 99% to reflect the service commitment to maintaining excellent standards.

The target for 2020/2021 is lower than expected due to closures of units and changes in service delivery due to COVID 19 this has resulted in less surveys being returned. This target should be reached in 2021/2022 as services begin to become back on track.

**CP:SPCC014\_6b.5 Percentage of Occupational Therapy assessments allocated within 6 weeks of referral**

***Current performance – 36%***

***Target – 70%***

Performance from 1 April 2020 has been challenging for the service as a result of the pandemic. OT staff were redeployed to frontline services responsible for delivery of direct care and home visits were ceased as a result of Covid 19 guidelines.

In 20/21 there were 748 referrals which is a reduction on the previous year of 1376. 13% of cases were allocated within 7 days with 23% allocated within a 6 week period. 64% were out with the OT standard of allocation within 6 weeks.

Staff have now returned to their positions and any vacant posts have been successfully recruited. As a result the service has seen a significant increase in cases being allocated within timescales. Post Covid the service anticipates a significant improvement for the following year 2021/22 on these outcomes. As a result the target percentage of 70% set from the previous year will remain the same.

The target for this performance indicator is to achieve 90% by 22/23 and this was set in the development of the council's Corporate Plan. A target of 90% is consistent with Scottish Government access to treatment targets for health and social care and will be maintained for 2019/20

**P:SPCC025\_9a.1c Average annual cost per person receiving community based Learning Disability services. – *\*Note Current figures not available for 2020-21***

***Current Value £37,074.00***

***Target – £37,239.00***

This service area has been experiencing financial pressure for some years due to increased demand on the service. This reflects demographic changes and also changing public expectations. Although expenditure per person increased again in 2019/20, which is reflective of the longer-term trend of increasing cost, year-on-year, the service has seen some success in relation to the delivery of strategic plans that have introduced different models of care, in particular promoting tenancy-based support. This is in-line with the Health and Social Care objective to shift the balance of care towards community-based services.

Historically, the number of service users in this group has remained relatively static, however because there is a relatively low number of people covered by this indicator, small changes in the numbers of service users can result in fluctuations in the trend when cost is expressed as an average. It is likely that the average cost will increase as the service continues to work toward the Health and Social Care objectives relating to Shifting the Balance of Care in favour of community-based services.

The annual target for 2020/21 will be set to reflect the allocated budget and the known trend for the service having increasing spend in this area. This has been informed by a number of factors including; known service pressures, estimated demographic changes, inflationary increases and adjustments for any cost implications associated with revised models of care.

**P:SPCC041\_6b.4 Percentage of complaints received by the Community Care Service that were upheld or partially upheld against the total complaints closed in full.**

***Current performance – 72.2%***  
***Target – 40%***

There is a significant month on month variation in performance during the reporting period. However, there has been no change in, procedure or approach and it is concluded that this reflects simply the diversity of complaints received.

The number of formal Social Work complaints is relatively small (from 2 to 11 per month over the last year) so performance expressed as a percentage tends to appear as a very wide variation.

The target for quarter 4 will remain at 40% to demonstrate our commitment to improving customer care through the improvement actions in individual complaints

**P:SPCF008\_6a Percentage of children and young people who participate in Looked After (LAC) reviews.**

***Current performance – 35%***  
***Target – 50%***

This is an indicator as to the extent that children and young people aged 8 and above participate in Looked After Children (LAC) reviews. It is important that young people contribute to the planning for their care and the services who work with them encourage participation. The data is used to determine how effectively we are encouraging participation, what is good practice and where improvements can be made.

During 2020-21 performance in relation to this indicator has dipped, impacted significantly by the Covid-19 pandemic. By the end of quarter 4 performance had started to improve as staff and young people adapted to being able to use technology

**P:SPCF097\_9b.1a Number of Children supported in Residential Schools out with West Lothian.**

***Current performance – 19***  
***Target – 16***

This indicator provides valuable information regarding the total number of children placed in residential schools provided by the third or private sector and manage the most challenging behaviour in a dedicated combined educational and care setting. These usually accommodate and care for those children who have been unable to manage in resources within West Lothian. This does not include children with a disability. The indicator tells us how effective services are at enabling children to remain within west Lothian. There are occasions where children's needs are very complex and a specialised resource is deemed necessary through the assessment undertaken on the child. It is important that as far as possible, children are enabled to remain in West Lothian. Therefore, children's services should always be aiming to reduce the need for such provision, by constantly improving the availability and quality of internal resources.

Considerable work has taken place to manage numbers to target.

In quarter 4 of 2020-21 there were 19 young people in residential schools. This is in part caused by pressures resulting from COVID-19 but also because the ability to move children back from external resources has been hampered.

**P:SPCJ076\_9a Total Number of hours for Community Payback Orders with an Unpaid Work Condition**

***Current performance – 13,058 hrs***

***Target – 13,000 hrs***

This is an indicator of the demand placed on Criminal and Youth Justice Services in relation to the supervision of offender's subject to Unpaid Work.

The number of hours for a Community Payback Order is determined by the Courts, however for this service it is an indicator of demand and also a cost measure as the service will ultimately be paid in part by the amount of statutory business undertaken.

The figures for the period 2020-21 reduced as a direct impact of Covid-19. The UPW scheme was suspended in line with government and public health advice for the majority of this period, operating at a significantly reduced capacity when open. Whilst the UPW scheme restarted on Monday 26th April 2021, this continues to be at reduced capacity with social distancing and health and safety systems requiring to be in place. With regards to target setting, a figure of 20 thousand may be achievable for the current period, however this will also be depended on the Courts imposing Orders at the previous rates.

The number of hours recorded for 2019-20 increased slightly to 37.989. This has stabilised a reducing trend over recent years

Unpaid Work has been in existence since the 1980's and has had a strong impact in a positive way on communities. The rise in activity should impact on the level of section 27 grant in due course.

The target will increase to 20,000 in 2021-22 to reflect anticipated increases in the use of Unpaid work as the service moves into recovery. This may be ambitious due to the impact of COVID-19 as this service has been suspended for periods of time in line with temporary legislation. This will be reviewed as the year progresses.

**E. CONCLUSION**

The performance scorecard shows that the majority of indicators are achieving targeted levels of performance. Where performance is not at the expected level details are provided in section D.3 to advise the Panel of the improvement action taken by services to improve performance.

**F. BACKGROUND REFERENCES**

**None**

Appendices/Attachments

Appendix 1 – Social Policy PDSP Performance Scorecard Report

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Date: 4<sup>th</sup> June 2021

## \_09 PDSP - Social Policy PIs - Annual (Detail)

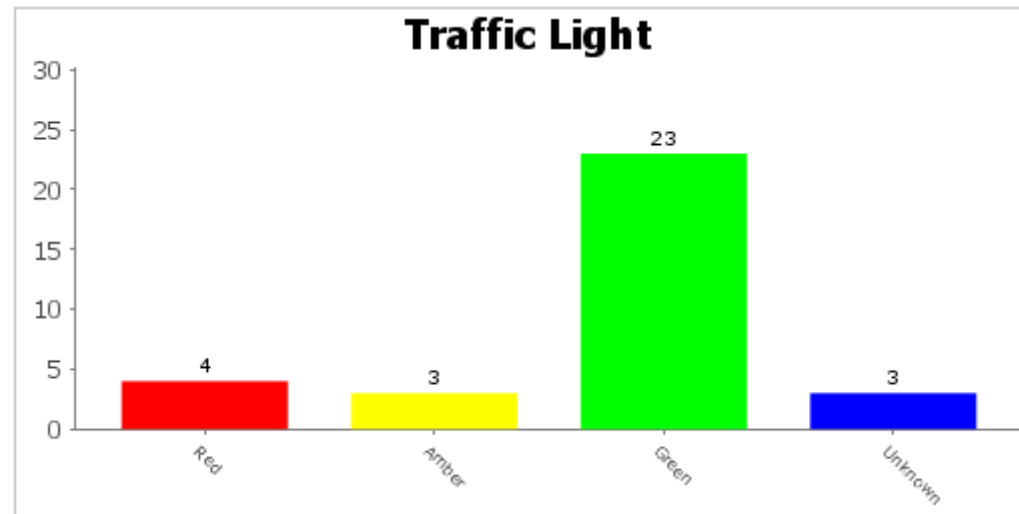
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(Data source=PDSP Social Policy scorecard only)

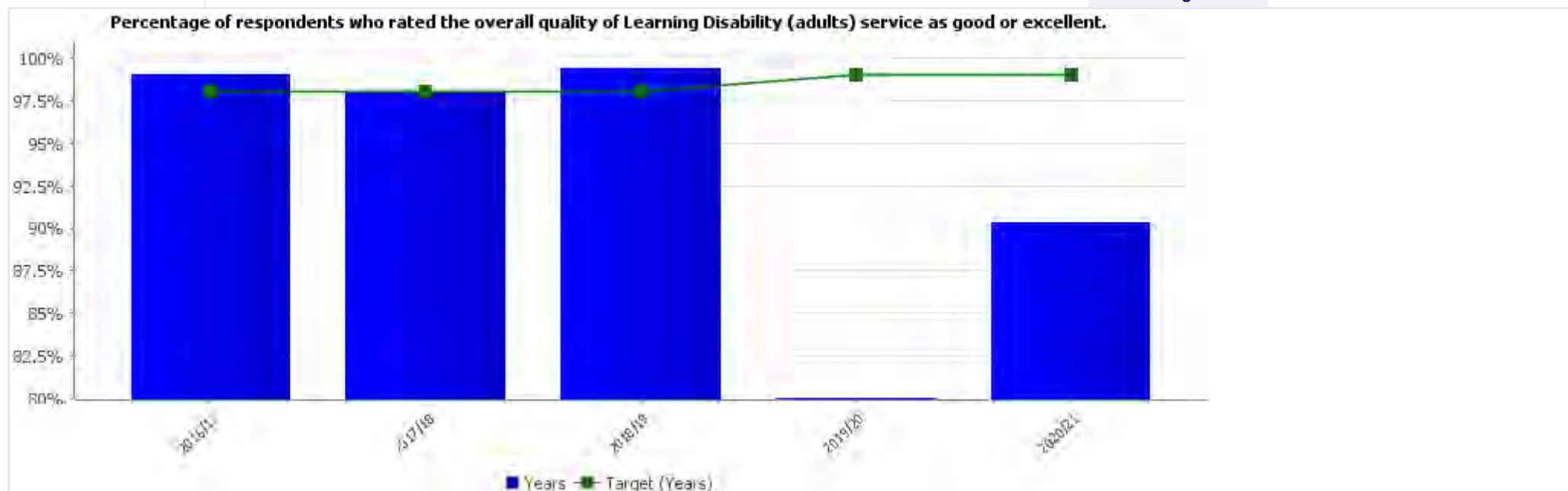
**Report Author:** Darren Burnside

**Generated on:** 27 May 2021 16:06

**Report Layout:** .PDSP\_PIs\_All\_For Committee\_Grid



<b>PI Code &amp; Short Name</b>	<b>P:SPCC001_6a.7 Percentage of respondents who rated the overall quality of Learning Disability (adults) service as good or excellent.</b>	<b>PI Owner</b>	zSPCC_PIAAdmin; Karen Love
<b>Description</b>	The Service conducts an annual customer survey. This performance indicator measures the overall quality as good or excellent using a survey designed for the particular needs of this group of service users. This indicator records the percentage of service users who consider the service provided as good or excellent. Customer insight into the overall quality of the service is a good measure of the effectiveness of the service.	<b>Traffic Light Icon</b>	
		<b>Current Value</b>	90.33%
		<b>Current Target</b>	99%



#### **Trend Chart Commentary:**

Customer satisfaction for 2018/2019 has improved on the previous year and has remained consistently high over many years.

Performance trends reflect the continued commitment of the teams to provide excellent customer care and personalised services for the needs of people with Learning Disabilities.

In 2018/2019 298 surveys were issued with 166 returned. The service will endeavor to improve the number of responses to this survey in 2019/2020 through changes to the survey activity from within the social work practice team; the slight dip in performance in 2017/18 is reflective of the impact that one or two survey respondents can have on the performance of this indicator due to the sample size.



The target for 2019/2020 has been reviewed and will be set at 99% to reflect the service commitment to maintaining excellent standards.

The target for 2020/2021 is lower than expected due to closures of units and changes in service delivery due to Covid 19 this has resulted in less surveys being returned. This target should be reached in 2021/2022 as services begin to become back on track.

<b>PI Code &amp; Short Name</b>	<b>P:SPCC002_6b.5 Percentage of Care Inspectorate Inspections undertaken within Registered Learning Disability Services graded good or above.</b>	<b>PI Owner</b>	zSPCC_PAdmin; Karen Love
<b>Description</b>	The Care Inspectorate, the external body responsible for auditing the quality of care services, inspects registered care services annually. Grades can vary from 1 - 6 (1 being unsatisfactory and 6 being excellent). This indicator reports the percentage of grades of 4 (good) and above. The Grades measure how well the Service is doing against National Care Standards.	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	100%
		<b>Current Target</b>	100%



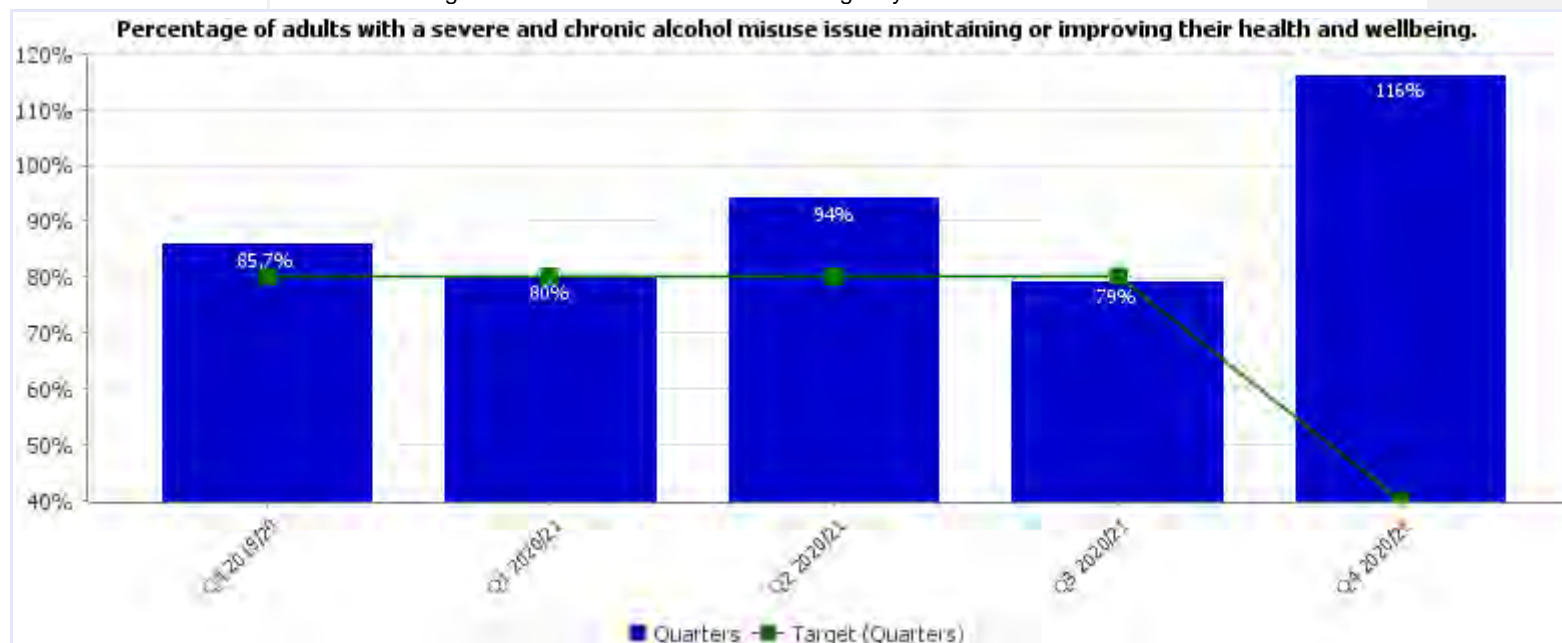
#### Trend Chart Commentary:

The long-term trend in this area is for continued and sustained high-levels of performance. The performance in 2019/20 is again, extremely positive. The percentage of inspections graded good, or above was 100%. This is reflective of the high standards of care, service delivery and commitment to excellence in these services.

The 2018/2019 performance continues to reflect high standards of care with all services scoring 'Good' or above in all assessed categories reflecting high standards of care and full compliance with action plans agreed with the care inspectorate. The result for this indicator has been 100% in every year since 2014/15; all Care Inspectorate Inspections carried out since 2014/15 within Registered Learning Disability Services have been graded Good, or above. The target for 2019/20 will remain 100% to reflect our ongoing commitment to high quality and caring services.

Note that for services deemed to be low risk level (Grades 4 or more), the regular inspection frequency is now 1 in 36 months. There may still be unscheduled inspections of the service.

<b>PI Code &amp; Short Name</b>	<b>P:SPCC006_9b.1a Percentage of adults with a severe and chronic alcohol misuse issue maintaining or improving their health and wellbeing.</b>	<b>PI Owner</b>	zSPCC_PIAAdmin; Nick Clater
<b>Description</b>	West Lothian Alcohol and Drugs Partnership (ADP) commissions a range of services for adults with severe, long standing alcohol problems to support them to maintain or improve their quality of their physical and mental health. Many of the adults concerned are seriously affected physically and mentally by prolonged alcohol misuse; this measure is designed to capture the effectiveness of interventions. Improvement is measured using a standard assessment tool. The targets for recovery within treatment contracts are based on benchmarking data from the National Treatment Agency for Substance Misuse.	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	116%
		<b>Current Target</b>	40%



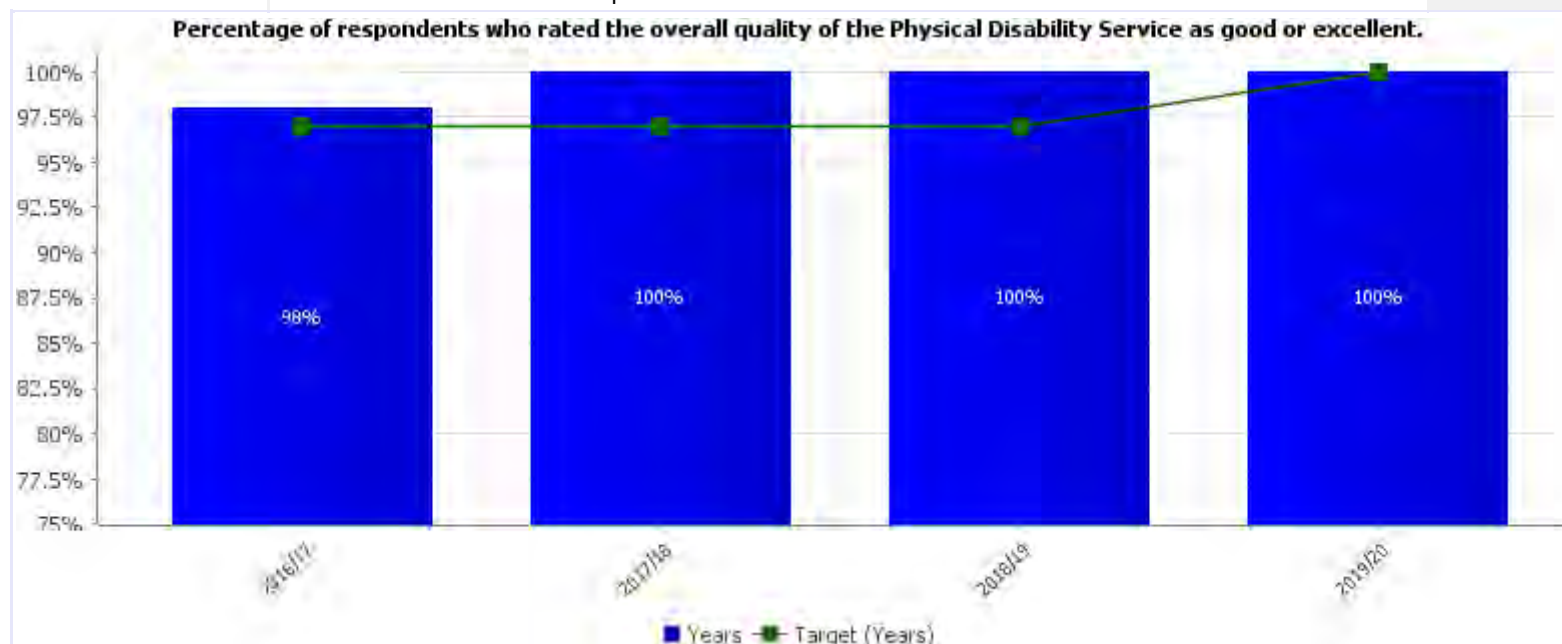
**Trend Chart Commentary:**

The result for Quarter 4 is 116%. The result for Quarter 3 was 79%. The Quarter 2 result for 2019/20 is 94%. The result for Quarter 1 was 80%. This shows above target performance of this service in protecting those whose health is at risk because of alcohol use. The performance of this indicator has been above the set target since 2017/18. This is a very challenging client group to work with as these adults are seriously affected physically and mentally by prolonged alcohol misuse and the rate of success in treatment and support has to be viewed in that context. It is to be expected that there will be fluctuation in performance from quarter to quarter and this can be seen in the performance; there is not a clear trend in one direction. The assessment tool measures physical and psychological health, personal safety, relationships, housing, work and financial and many of these factors can be determined out with the person and services control.

The target of 80% is based on benchmarking data from the National Treatment Agency for Substance Misuse.  
The Quarter 4 result is expected end of April 2021.



<b>PI Code &amp; Short Name</b>	<b>P:SPCC009_6a.7 Percentage of respondents who rated the overall quality of the Physical Disability Service as good or excellent.</b>	<b>PI Owner</b>	zSPCC_PAdmin; Karen Love
<b>Description</b>	This indicator measures the overall quality of physical disability services. The survey relates to the activity of the service team who carry out assessments and the team who provide day services. It measures the percentage of respondents who rated the overall quality of the service as good or excellent. The survey is issued annually to service users and the returns collated by a central team within Social Policy. The results are used to determine where improvements can be made to the service.	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	100%
		<b>Current Target</b>	100%

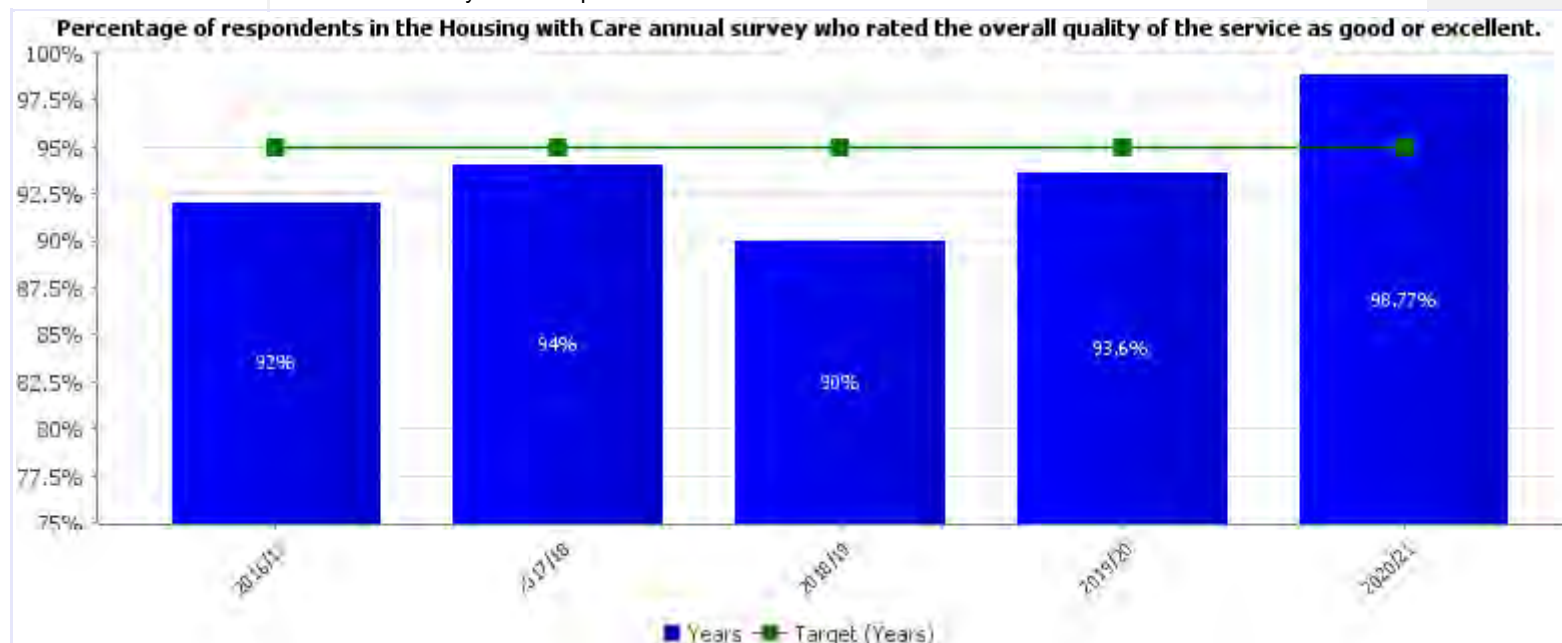


2019/20 and 2018/19 performance maintained the 100% rating of the previous year. As the sample sizes are relatively low in comparison to the number of service users, one or two survey returns can have a marked impact on the result. This can be seen in 2016/17 and 2014/15 where small numbers of survey returns have resulted in the slight reduction in the performance of this indicator.

The service is committed to sustaining very high standards of satisfaction and will support this by; reviewing customer comments and suggestions; collating improvement actions from complaints and regularly reviewing care plans in consultation with service users and their carers.

The target for 2020/21 will be set at 100% to reflect the ongoing service commitment to excellent standards in customer care.

<b>PI Code &amp; Short Name</b>	<b>P:SPCC011_6a.7 Percentage of respondents in the Housing with Care annual survey who rated the overall quality of the service as good or excellent.</b>	<b>PI Owner</b>	zSPCC_PIAAdmin; Ailsa Sutherland
<b>Description</b>	The Housing with Care service conducts an annual customer survey, which is issued to service users and returns collated by a central team within Social Policy. This performance indicator measures the levels of satisfaction using a survey designed for the particular needs of this group of service users. This indicator records the percentage of service users who consider the service provided as good or excellent. The results are used to identify where improvements can be made to the service.	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	98.77%
		<b>Current Target</b>	95%



**Trend Chart Commentary:**

The long term trend is for consistently high performance in this area.

In 2019/20 93.6% rated the service excellent or good, which is an improvement from the previous year. There was also an improvement in the response rate, which is indicative both of the high standards of service and engagement with service users.


There are 7 housing with care developments and all tenants are requested to contribute to the survey, total 177 tenancies. There was a response rate 55% (98 surveys returned) and the scoring was 58% excellent and 32% good. In 2017/18 there was a 2% increase to 94% on the previous 2016/17 satisfaction scores and in comparison to this in 2018/19 we have experienced a reduction of 4% in this area achieving 90%

It has been highlighted that over the years the tenants needs have increased with particular reference to dementia and this may explain a reduction in completed surveys.

There were only 4 comments provided and they were all related to information sharing with 2 reflecting the tenant's view that information regarding the service provision was limited.

There is an ongoing review of housing with care services related to the Transforming Your Council budget savings over the next few years. Consultations with tenants will be planned and at this time clear information and interaction from all tenants and their families will be essential. It is anticipated with this level of engagement will support the development of service delivery which will aim to improve on the response rate and the scoring.

Target performance for 2020/21 will remain at 95% which is considered realistic for a service of this nature.

<b>PI Code &amp; Short Name</b>	<b>CP:SPCC014_6b.5 Percentage of Occupational Therapy assessments allocated within 6 weeks of referral.</b>	<b>PI Owner</b>	zSPCC_PIAAdmin; Ailsa Sutherland
<b>Description</b>	Occupational Therapy service has a service standard which indicates that referrals requesting Occupational Therapy assessment will be allocated within 6 weeks of receipt of referral. This indicator measures the percentage of assessments allocated within this target schedule and the data allows the service to understand how efficiently the assessment process is working. This performance indicator is part of the performance scorecard for the council's Corporate Plan and will contribute to priority 6 which is delivering positive outcomes on health.	<b>Traffic Light Icon</b>	
		<b>Current Value</b>	36%
		<b>Current Target</b>	70%



**Trend Chart Commentary:**

Service performance for the year 2020/2021 in respect of overall allocated referrals totals 748 which is 628 less than the 2019/2020 year. Allocated cases within a 7 day period equates to 97 which is 12.97% of the overall number. Allocated cases over one week- and up to six weeks equates to 175 which is 23.40% of the overall number. Total allocations over the six week period equates to 476 cases which is 63.64% of the overall number.

performance from 1 April 2020 has been challenging for the service under the covid 19 pandemic. Staff were redeployed to more front line services and home visits were not able to be carried out under the covid 19 guidelines. More recently, the service is now fully staffed and we have already seen a significant increase in allocated cases as covid 19 guidelines change, allowing strategies to be put into place to progress with service delivery. It is acknowledged overall that percentage values are down from the previous year, but this is understandable due to the unforeseen changes based on the covid 19 pandemic. As a result the target percentage of 70% set from the previous year will remain the same.



Overall performance for the year 2019 / 2020 has dropped 27.64% from the previous year. The trend value for the year 2019/2020 is 58.36% from 803 allocated cases up to a 6 week wait period. The total allocated cases over the year equates to 1376 where 573 cases were allocated on a wait period over 6 weeks. The tentative outcome of these results are likely due to varying reasons.

. The new ASCET duty team were unfamiliar with the requirements in progressing occupational therapy referrals therefore the wait list numbers increased significantly as most were established as 'Critical or Substantial'.

. A new OT duty system was established as a mitigation strategy to the above point. However due to the success of this, numbers of contacts to the service have again increased with an average contact rate of around 450 per month. Under Covid 19 restrictions since March 2020 this has decreased to 175.

. The lengthy eligibility and contributions assessment process equally continues to have an impact on numbers seen in a month versus staff resource. Therefore, a new initiative has been proposed to the duty system in the coming year in an attempt to positively balance this out. To allow time for this new initiative to develop the target for the coming year will reduce to 70%.

Performance for 2018/2019 has dropped by 5% from the previous year. There is a trend value of 86% where there were 2034 cases allocated. The likely outcome of these results were due to the new eligibility process and managing this. This has had a significant impact on staff managing the through put and case load management. Presently we are trialling a new management structure and mitigation strategies to progress these contacts so that a wait time of 6 weeks can be met in the coming months. This is being managed by trialling an early intervention process and also looking into prioritising the structure of the assessment allocations.

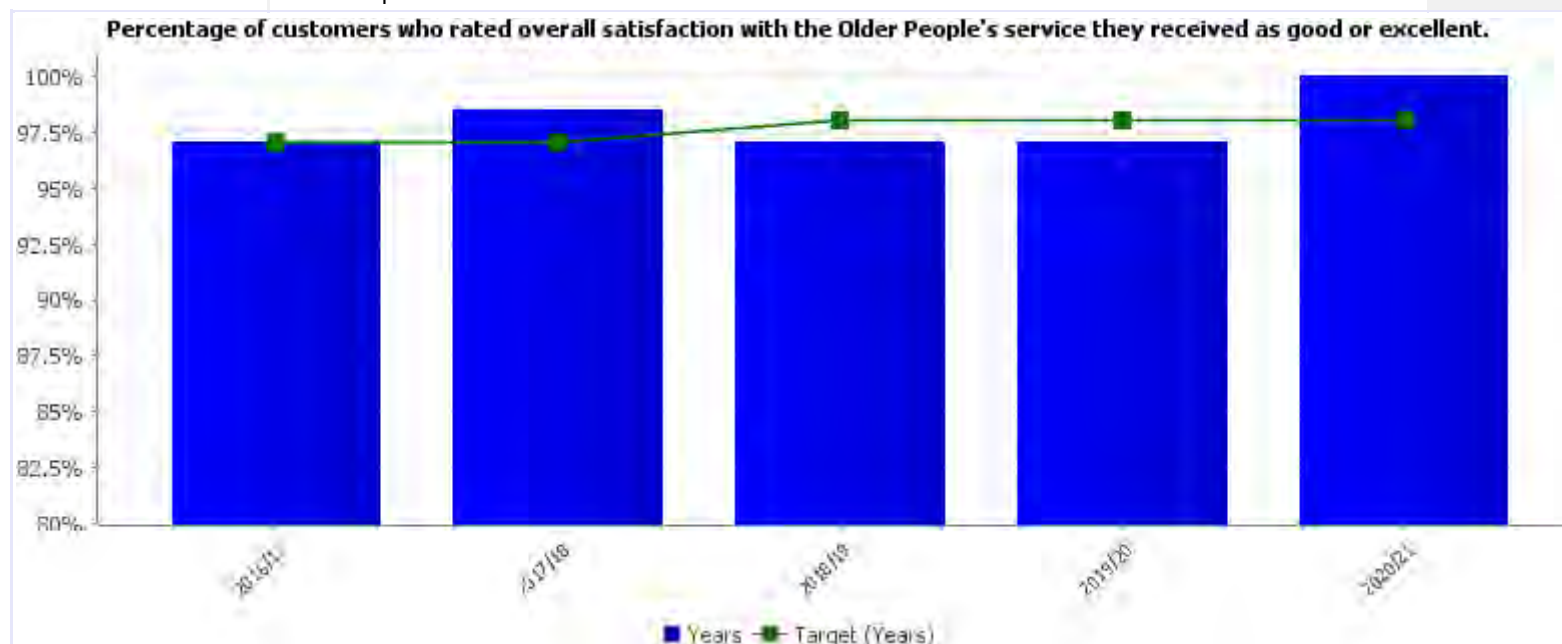
The OT service has benchmarked with other local authorities including Peebles and this has provided information on another strategy that we could implement in the future.

Performance in 2017/2018 has returned to just above target level having seen a drop in 2016/2017. A range of improvement actions were developed and implemented last year related to case management and supervision with the aim of restoring performance to the target level.

Performance dipped in 2016/2017 because of a reduction in capacity which required a review of systems and supervisory processes to be implemented.

The target for this performance indicator is to achieve 90% by 2022/23 and this was set in the development of the council's Corporate Plan. A target of 90% is consistent with Scottish Government access to treatment targets for health and social care and will be maintained for 2019/20.

<b>PI Code &amp; Short Name</b>	<b>P:SPCC017_6a.7 Percentage of customers who rated overall satisfaction with the Older People's service they received as good or excellent.</b>	<b>PI Owner</b>	zSPCC_PIAAdmin; Gerard Cunniffe
<b>Description</b>	Older People's service conducts an annual survey of all its customers. This indicator measures the percentage of respondents who rated the overall quality as good or excellent. This survey relates to the activity of the service teams which carry out assessment for Older People's services. Satisfaction with the overall quality of the service is an important indicator of effectiveness and customer insight is used to inform service improvements.	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	100%
		<b>Current Target</b>	98%



#### **Trend Chart Commentary:**

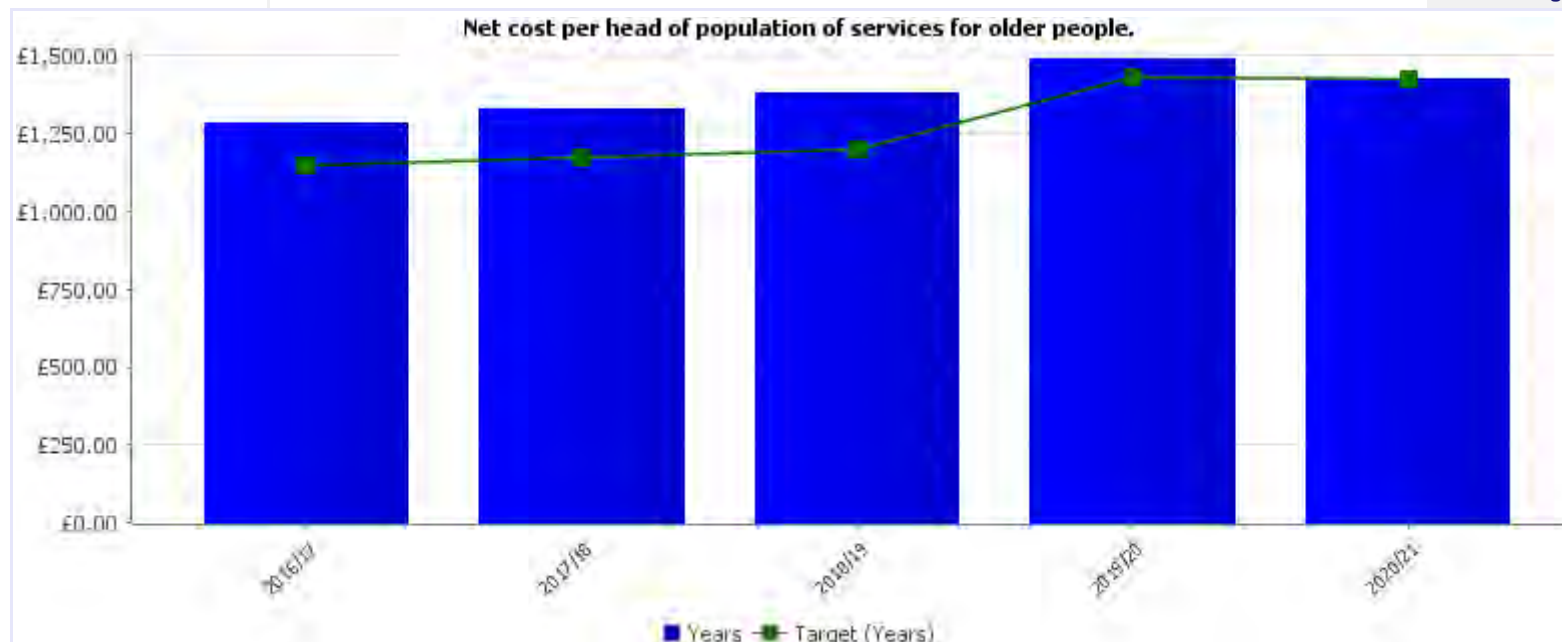
Levels of customer satisfaction are consistently high, exceeding 95% for each for the years from 2016/17 to 2020/21. Performance in 2020/2021 increased to 100%, an increase from 97% as recorded in 2019/20. This was against a target set at 98% for the year 2019/2020. The increase of 3% needs to be read in the context of the pandemic as a reduced number of customer surveys was sent out by the service teams that carry out assessment for Older People Services.

An action plan was deployed during 2019/2020 to inform staff within the service teams of a trend in reduction in responses and the importance of ensuring customers are given the opportunity to comment on the services. Part of this action plan included the introduction of a monitoring process in the recording system to allow managers to be able to provide data in relation to the numbers of surveys being distributed.

Performance in relation to overall customer satisfaction in Older Peoples Services compares well with that of the other Community Care Services. There are four services within the Community Care group, with performance ranging from 92% to 100% over the 5 year period 2016/17 to 2020/21.

The service is committed to sustaining very high standards of satisfaction and will support this by; responding to customer comments and suggestions; collating improvement actions from complaints and regularly reviewing care plans in consultation with service users and their carers.  
The target for 2021/22 will be set at 100% to reflect the service commitment to excellent standards of customer care.

<b>PI Code &amp; Short Name</b>	<b>P:SPCC024_9a.1a Net cost per head of population of services for older people.</b>	<b>PI Owner</b>	zSPCC_PIAAdmin; Rachel MacKay
<b>Description</b>	Average annual cost per person of services for people aged 65 and over. The scope of this indicator covers a range of services including Care at Home, Care Homes, Housing with Care, Occupational Therapy, and Assessment and Care Management. The cost per person is calculated by dividing the cost of the services in scope by the estimated 65+ population.	<b>Traffic Light Icon</b>	✓
		<b>Current Value</b>	£1,423.00
		<b>Current Target</b>	£1,423.00



#### **Trend Chart Commentary**


West Lothian has one of the lowest costs yet is consistently assessed as one of the highest quality for all social care categories. The cost per person is calculated by dividing the cost of the services in scope by the estimated 65+ population (using data from the National Registers of Scotland).

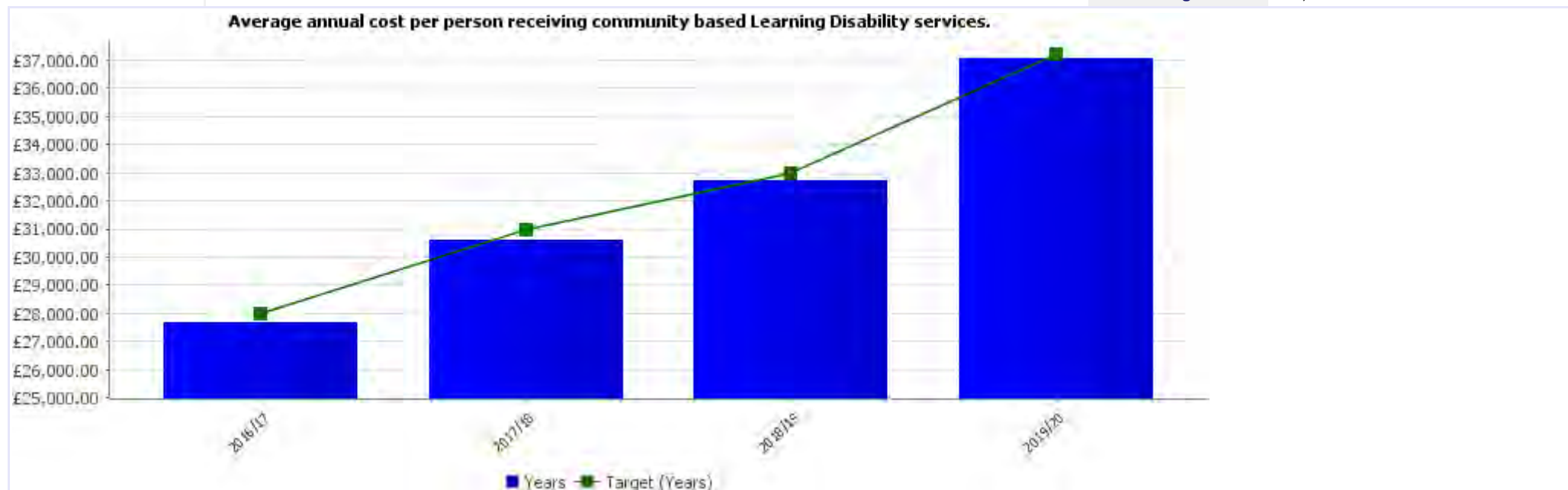
The longer term trend is for an increase in the cost of these services per head of population and in 2019/20, there was again an increase from the previous year. In 2019/20, the cost was £1493.14 per head of population, which is an increase from 2018/19, when the cost was £1378.

More people are living longer with multiple physical and mental health conditions and often complex care and support needs. Ensuring that people whose needs are increasingly complex can be supported safely at home requires enhanced care services, which can increase the average cost per person.

The 2020/21 activity budget, divided by the forecast population will allow us to set a target for 2020/21.

Benchmarking comparisons are subject to time delay in the publishing of data; the average expenditure on social care services to older people (65+) in Scotland in 2014/15 was £1,400 (source CIPFA)

<b>PI Code &amp; Short Name</b>	<b>P:SPCC025_9a.1c Average annual cost per person receiving community based Learning Disability services.</b>	<b>PI Owner</b>	zSPCC_PIAAdmin; Robin Allen
<b>Description</b>	This indicator measures the average annual cost of services to people with a Learning Disability by dividing the total cost of services to this user group by the number of people in receipt of a service. This information is used to monitor cost trends in the service to evaluate and inform service planning.	<b>Traffic Light Icon</b>	
		<b>Current Value</b>	£37,074.00
		<b>Current Target</b>	£37,239.00



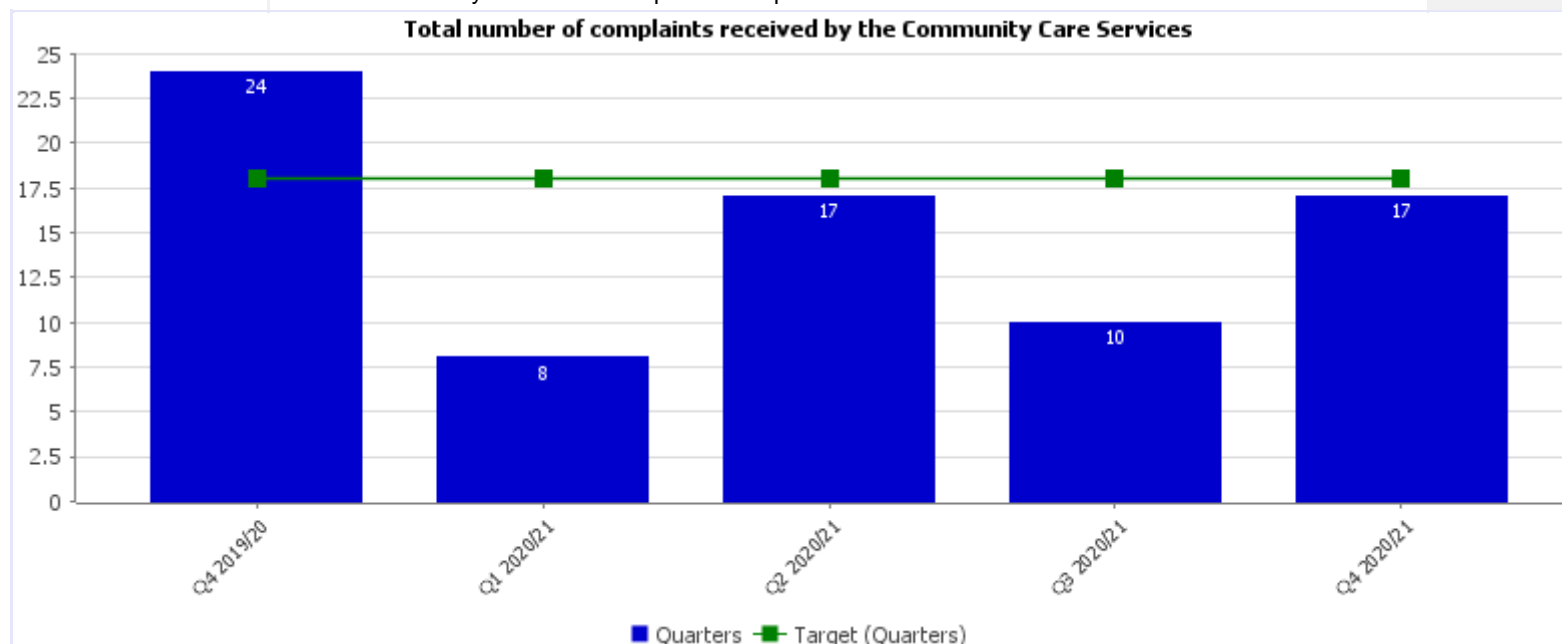
#### Trend Chart Commentary

This service area has been experiencing financial pressure for some years due to increased demand on the service. This reflects demographic changes and also changing public expectations. Although expenditure per person increased again in 2019/20, which is reflective of the longer term trend of increasing cost, year-on-year, the service have seen some success in relation to the delivery of strategic plans that have introduced different models of care, in particular promoting tenancy based support. This is in-line with the Health and Social Care objective to shift the balance of care towards community based services.

Historically, the number of service users in this group has remained relatively static, however because there is a relatively low number of people covered by this indicator, small changes in the numbers of service users can result in fluctuations in the trend when cost is expressed as an average. It is likely that the average cost will increase as the service continues to work toward the Health and Social Care objectives relating to Shifting the Balance of Care in favour of community based services.

The annual target for 2020/21 will be set to reflect the allocated budget and the known trend for the service having increasing spend in this area. This has been informed by a number of factors including; known service pressures, estimated demographic changes, inflationary increases and adjustments for any cost implications associated with revised models of care.

<b>PI Code &amp; Short Name</b>	<b>P:SPCC038_6b.3 Total number of complaints received by the Community Care Services</b>	<b>PI Owner</b>	zSPCC_PIAAdmin; Pamela Main
<b>Description</b>	This indicator measures the total number of complaints received by Community Care. It is the total number of complaints received by Community Care at stage one (complaints that the council aims to deal with within 5 working days) and those received directly at stage two (more complex complaints that the council aims to deal with within 20 working days). The information is recorded on the council's Complaints Records Management system which allows systematic performance reporting and analysis of trends. Complaint outcomes are analysed to inform improvement plans.	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	17
		<b>Current Target</b>	18




#### **Trend Chart Commentary:**

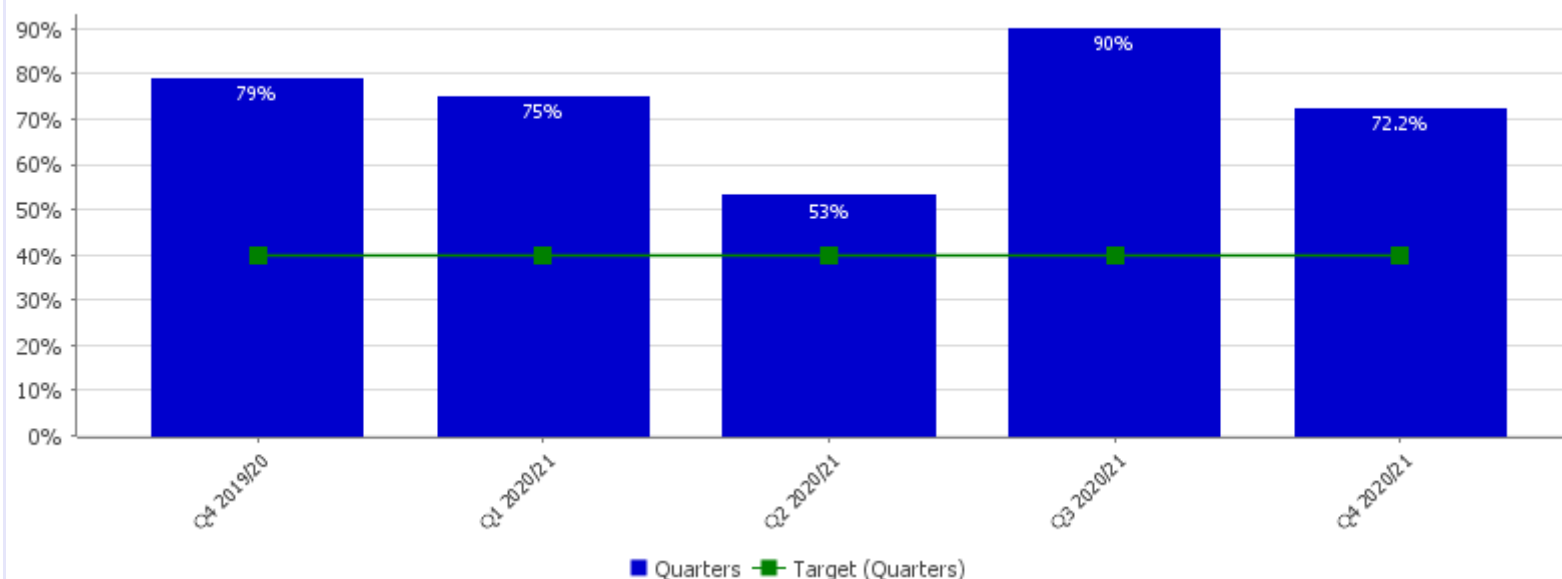
The number of complaints received by Community Care Services are few but highly variable within a small range. Complaints are systematically analysed both at an individual and aggregate level to inform trends and areas for improvement but it has not been possible to identify any consistent trend which would inform variations in performance. Where individual complaints are upheld or partially upheld, the service ensures that required improvements are identified and implemented.

In 2020/21, performance has been variable but better than the target of 18 per quarter; there were 8 complaints in Q1, 17 in Q2 and then a reduction to 10 in Q3 and 17 in Q4. The performance target will be set at 12 for the next quarter to reflect a variable but downward trend in the number of complaints overall.



<b>PI Code &amp; Short Name</b>	<b>P:SPCC041_6b.4 Percentage of complaints received by the Community Care Service that were upheld or partially upheld against the total complaints closed in full.</b>	<b>PI Owner</b>	zSPCC_PIAAdmin; Pamela Main
<b>Description</b>	This indicator measures the total number of council complaints received by Community Care which were upheld or partially upheld, as a percentage of all complaints received. Complaints are recorded on our Customer Relationship Management system, including the outcome. This system provides the service with reports detailing the amount of complaints that were upheld and partially upheld. This information can be used to understand the effectiveness and efficiency of our services, how our staff are performing, the relationship between the service and the client and also an opportunity to identify any areas where improvements could be made to the way the service is delivered to customers.	<b>Traffic Light Icon</b>	
		<b>Current Value</b>	72.2%
		<b>Current Target</b>	40%

**Percentage of complaints received by the Community Care Service that were upheld or partially upheld against the total complaints closed in full.**



**Trend Chart Commentary:**

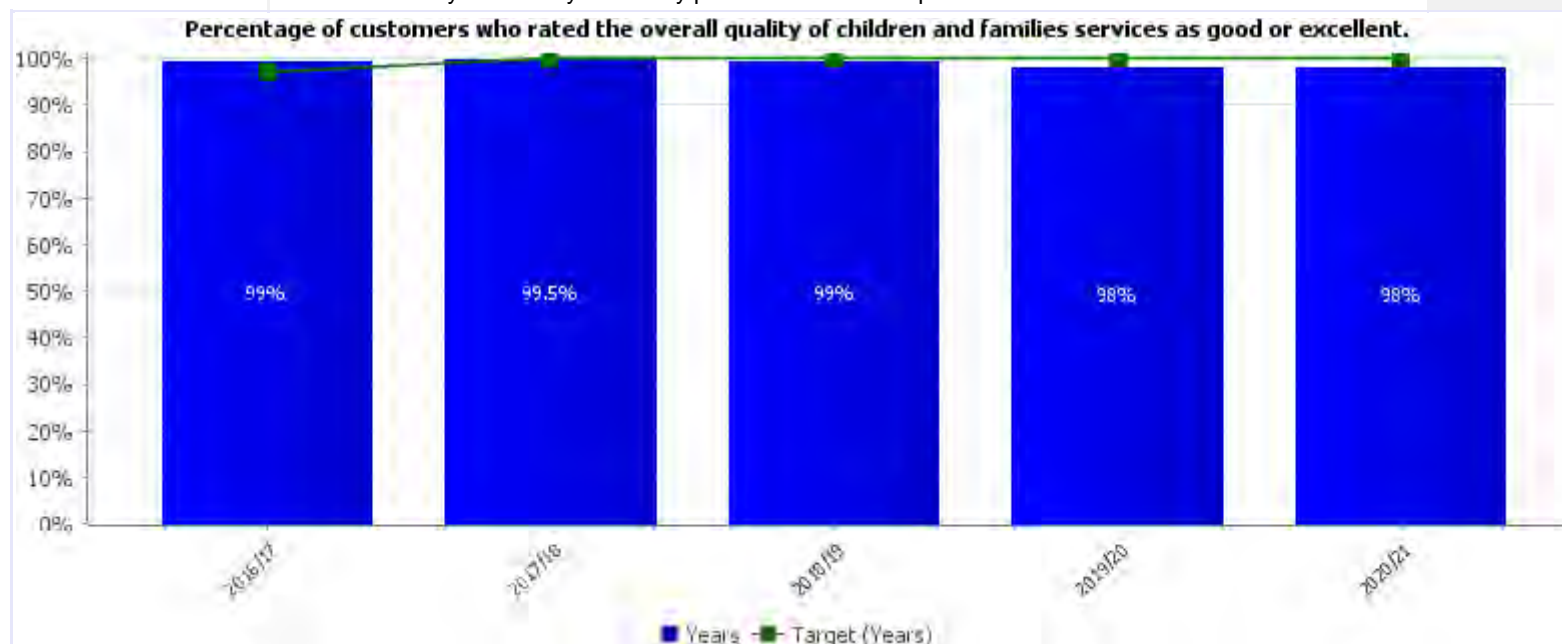
There is a significant month on month variation in performance during the reporting period. However, there has been no change in, procedure or approach and it is concluded that this reflects simply the diversity of complaints received.

The number of formal Social Work complaints is relatively small (from 2 to 11 per month over the last year) so performance expressed as a percentage tends to appear as a very wide variation.

The target for quarter 4 will remain at 40% to demonstrate our commitment to improving customer care through the improvement actions in individual complaints/



<b>PI Code &amp; Short Name</b>	<b>P:SPCF001_6a.7 Percentage of customers who rated the overall quality of children and families services as good or excellent.</b>	<b>PI Owner</b>	zSPCF_PIAAdmin; Tim Ward
<b>Description</b>	Percentage of customers who responded to the children and families annual survey who rated the overall quality of the service as good or excellent. Key customer groups asked to participate in the survey are children and families with additional needs, Looked After Children and children and families with disabilities. The survey is carried out using a number of methods including paper, electronic and telephone surveys. Results are analysed closely to identify potential areas for improvement.	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	98%
		<b>Current Target</b>	100%



#### **Trend Chart Commentary:**


There is a consistent overall positive trend in the percentage of customers who responded to annual surveys who expressed that they felt the overall quality of service was good or excellent and this has remained at 95% or higher since 2014-15. This is attributable to an increased focus on listening to customer feedback and adopting a more customer focused approach to service delivery.

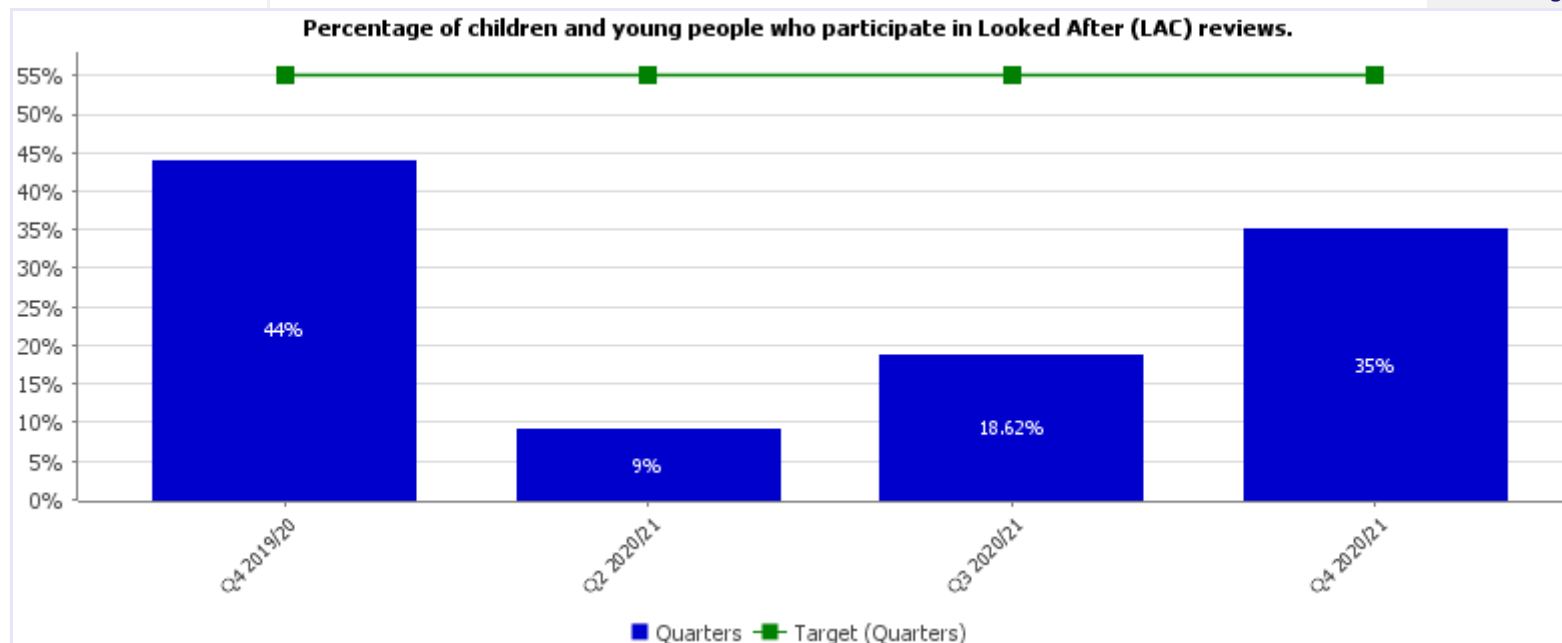
The most recent result in 2020-21 was 98% with 113 from 115 providing a response. 2019-20 was 98%, which continues the strong performance from 2018-19, when the result was 99%.

The trend since 2016-17 has been positive. This is in the context of services being delivered more remotely due to the global pandemic

The service intends to embed customer surveys and engagement more in light of implementing the findings of the national child care review, 'the Promise'.

The target for 2020-21 will remain at 100% to ensure that the service remains focused on providing the highest quality service.

<b>PI Code &amp; Short Name</b>	<b>P:SPCF008_6a Percentage of children and young people who participate in Looked After (LAC) reviews.</b>	<b>PI Owner</b>	zSPCF_PIAAdmin; Susan Mitchell; Tim Ward
<b>Description</b>	This is an indicator as to the extent that children and young people aged 8 and above participate in Looked After Children (LAC) reviews. It is important that young people contribute to the planning for their care and the services who work with them encourage participation. The data is used to determine how effectively we are encouraging participation, what is good practice and where improvements can be made.	<b>Traffic Light Icon</b>	
		<b>Current Value</b>	35%
		<b>Current Target</b>	55%



#### Trend Chart Commentary:

During 2020-21 performance in relation to this indicator has dipped, impacted significantly by the Covid-19 pandemic. By the end of quarter 4 performance had started to improve as staff and young people adapted to being able to use technology.

In quarter 4 48 from 136 reviews attended a review.

The result for quarter 1 of 2020-21 has been recorded as "N/A"; due to the measures put in place because of Covid 19 and new ways of working, no children and young people are attending LAC reviews just now, hence the "N/A" entry for the PI.

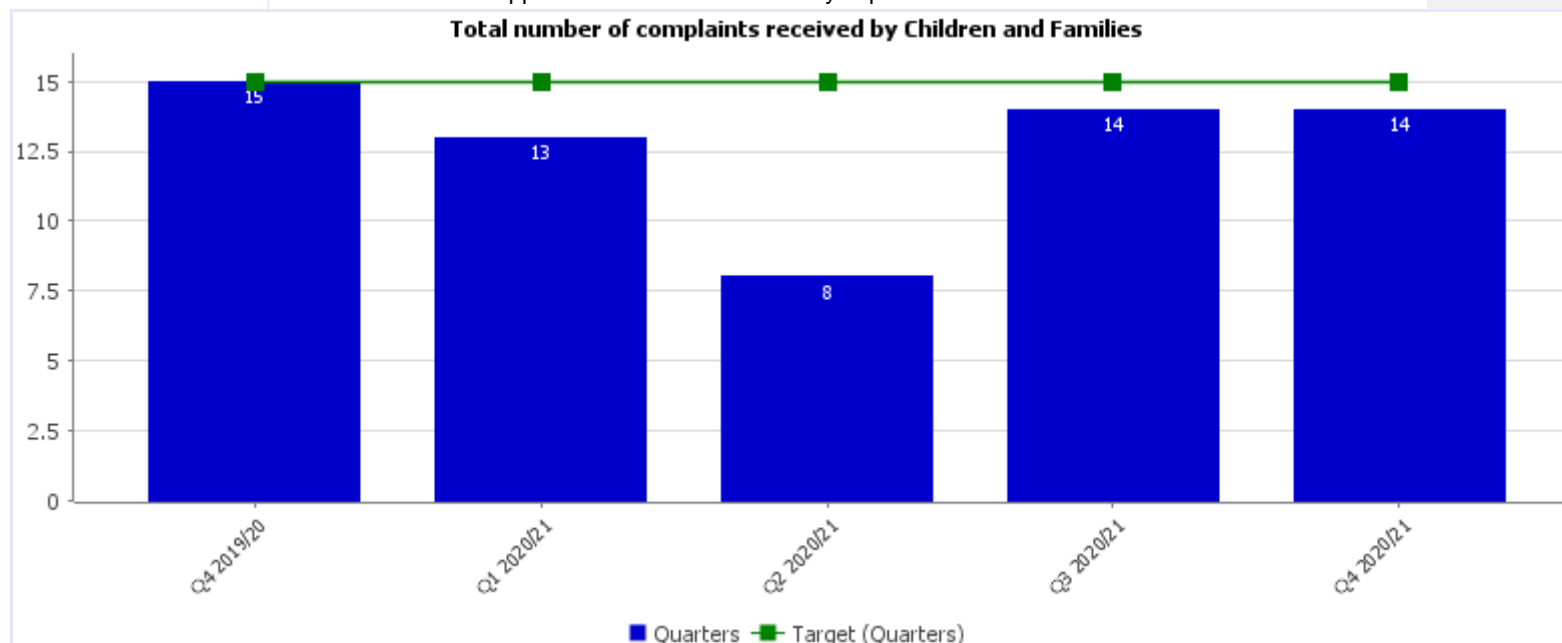
It should be noted that in Q3 of 2020/21, the data supplied for this indicator changed and now includes all reviews for Positive Progress, not only 6 Month and CDS Reviews. This change started in Q3 and may have some impact on the reported figures.

It is important for the service to encourage greater levels of participation from looked after children. Focussed work over the course of the summer of 2021 will seek to explore how social workers and other staff can encourage and support young people to attend more consistently or ensure their views are presented in a different way. This will be an ongoing area of work for the reviewing officers team who will push for stronger attendance and record more fully reasons for non attendance. Close consultation will also take place with the Childrens rights service and Champions Board (consultative group for children).

The service is exploring benchmarking opportunities through WhoCares? Scotland.

The target will remain at 55% for 2021-22 to test whether improvements can be found. The aim is to increase the target gradually over the next two years, however the impact of COVID may require that targets change in coming years.

<b>PI Code &amp; Short Name</b>	<b>P:SPCF040_6b.3 Total number of complaints received by Children and Families</b>	<b>PI Owner</b>	zSPCF_PAdmin; Susan McKenzie; Susan Mitchell; Tim Ward
<b>Description</b>	This indicator measures the total number of complaints received by Children and Families. This data is recorded on the Council's Customer Relationship Management system. It is the total number of complaints received by Children and Families at stage one (complaints that the council aims to deal with within 5 working days) and those received directly at stage two (more complex complaints that the council aims to deal with within 20 working days). This data is used to understand how well we are delivering our services and where there are opportunities for us to make any improvements.	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	14
		<b>Current Target</b>	15



**Trend Chart Commentary:**

The vast majority of complaints relate to child care and protection and are related to dissatisfaction with decision making and attitude of staff. This is frequently because staff have to deal with challenging behaviour and passing on difficult messages. More recently some issues have arisen relating to accuracy of information which has now been addressed.

In 2020/21 there were 13 in Q1, in Q2 there were 8 and 14 in Q3, with 14 again in Q4 which is still within the current target of 15.

The number of complaints fluctuates but in quarter 4 of 2018-19 there were 7 complaints overall, the same as quarter 3. In quarter 1 of 2019-20 this increased to 11. This is still some way short of the notional target set.

There were 45 complaints overall in 2018-19.

In quarter 1 of 2017-18 there were 14 complaints received. In quarter two this reduced to 10 and increased slightly to 11 in quarter 3. In quarter 4 there was a significant jump to 23; there was no significant event, or trend that appeared to have influenced this rise in the number of complaints for that quarter. By quarter 1 of 2018-19 complaints had reduced to 13. By quarter 3 of 2018-19 the number of complaints had reduced to 7. Explanations are being sought as to why the numbers have reduced. The numbers were also down in other areas the service benchmarks against.

Work will be undertaken to better understand these variations through benchmarking with Community Care and Criminal and Youth Justice.

Volume in these areas is as follows for quarter 1 of 2019-20

**Children and families - 11**

**Community Care - 15**

**Criminal and Youth Justice - 1**

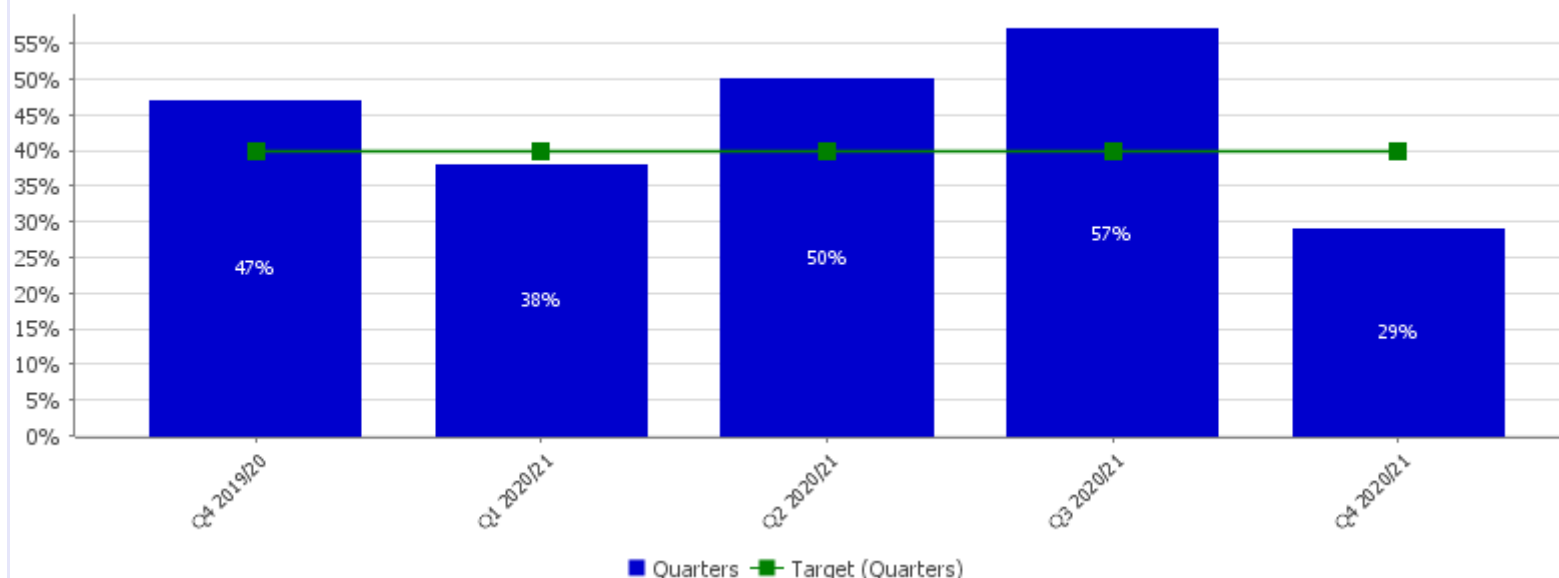
**Social Policy - 27**

The target for 2019/20 is 15 per quarter, although this is hard to gauge due to the nature of service delivered.



<b>PI Code &amp; Short Name</b>	<b>P:SPCF045_6b.4 Percentage of complaints received by the Children and Families Service that were upheld or partially upheld against the total complaints closed in full.</b>	<b>PI Owner</b>	zSPCF_PAdmin; Susan McKenzie; Susan Mitchell; Tim Ward
<b>Description</b>	This indicator measures the total number of complaints received by Children and Families which were upheld or partially upheld, as a percentage of all complaints received. This data is collected in our Customer Relationship Management system and is analysed to determine how effectively we are delivering our service and also to identify improvements to the way the service is delivered to customers.	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	29%
		<b>Current Target</b>	40%

**Percentage of complaints received by the Children and Families Service that were upheld or partially upheld against the total complaints closed in full.**



**Trend Chart Commentary:**

In 2020/21, performance has been variable, with 38% in Q1, 50% in Q2, 57% in Q3 and then 29% in Q4 which is now within the current target of 40%.

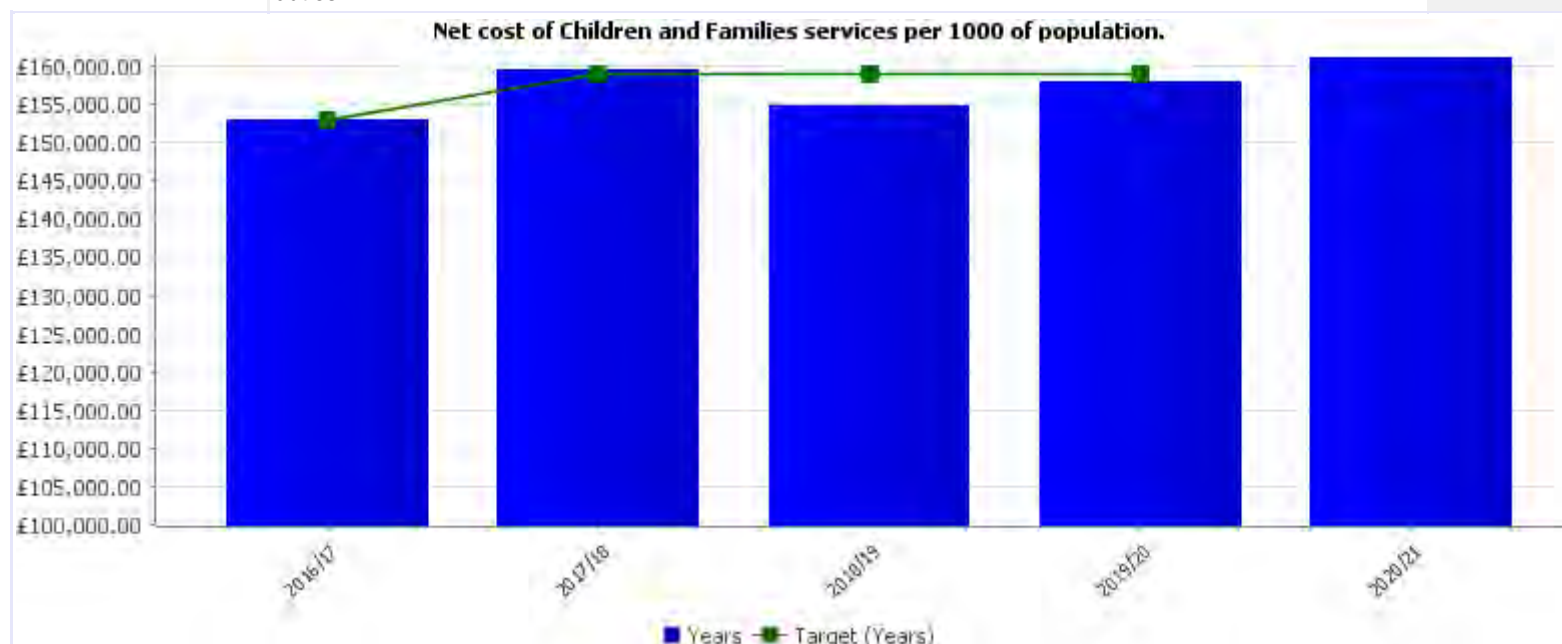
Most complaints tend to be partially rather than fully upheld.

The main issues where complaints were upheld included;  
attitude of staff  
accuracy of information provided  
speed of communication

Complaints have been continually reviewed and resolutions included staff training, reminders about relevant processes and individual sessions with staff to highlight where improvement in practice was required.

The target will remain at 40% for 2020/21 as the service felt that upholding more complaints was reflective of a service that aims to improve from feedback.

<b>PI Code &amp; Short Name</b>	<b>P:SPCF060_9a.1c Net cost of Children and Families services per 1000 of population.</b>	<b>PI Owner</b>	zSPCF_PAdmin; Susan McKenzie; Susan Mitchell; Tim Ward
<b>Description</b>	<p>This indicator demonstrates the net cost of children and families services per 1000 of population. The indicator is updated each October when the most recent population estimate for the year in question is published.</p> <p>Children and Family teams within Social Policy provide a wide range of services. These are composed of core social work services as well as initiative funded projects and specialist teams all working together to achieve improved outcomes for children and their families from pre-birth to 26 years in line with statutory duties.</p>	<b>Traffic Light Icon</b>	?
		<b>Current Value</b>	£161,000.00
		<b>Current Target</b>	



**Trend Chart Commentary:**

The figure for 2019-20 is £157,992, a slight increase of around 2% on the previous year which is accounted for by statutory pay increases and inflationary increases.

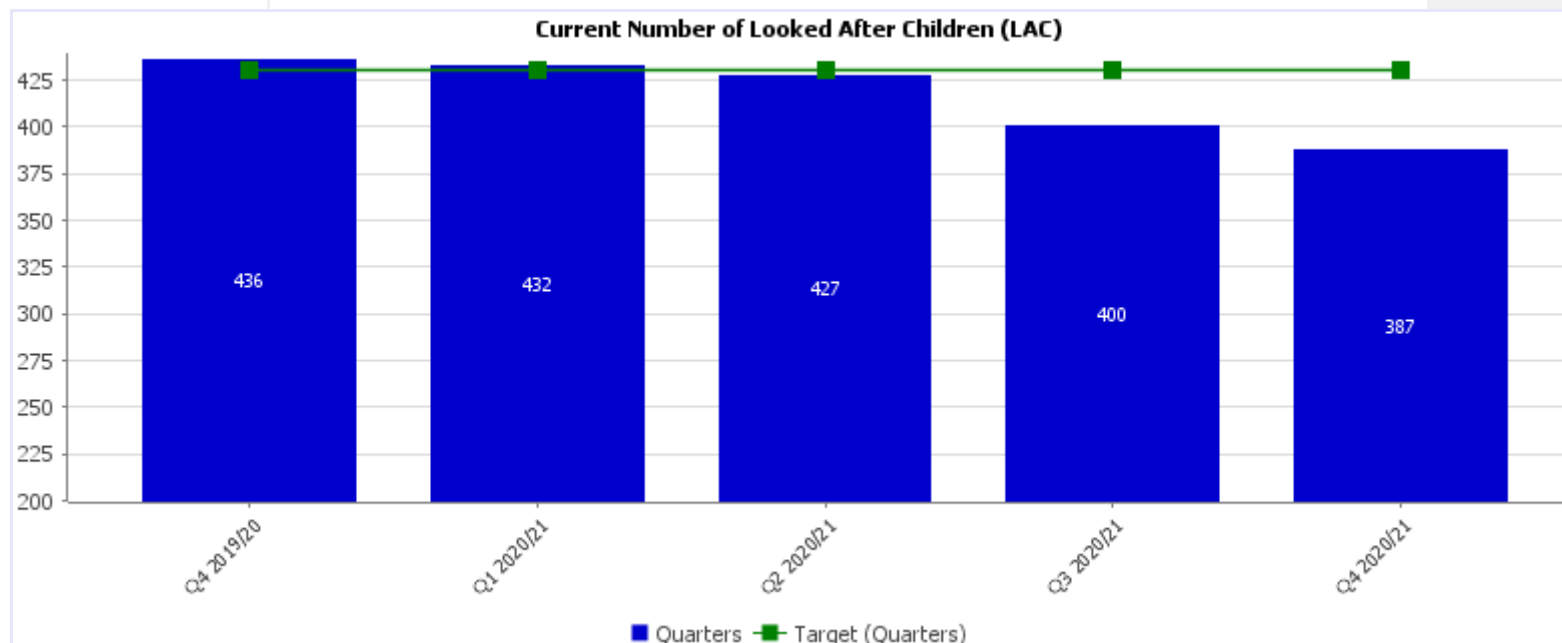
The figure for 2018-19 was £154,713.91. This was an improvement on 2017-18 and reflects performance better than the target of £159,000. The improvement is thought to be due to a reduction in some staggings costs and a better than anticipated spend against both external care provision and costs associated with fostering and kinship care.

The figure for 2017-18 is £159,440. This was up from the 2016-17 figure of £152,967. This is due in part to additions to the budget for growth in population and an increase in demand for kinship care, foster care and demographic increases alongside inflationary increases applied by independent providers.

It is intended that benchmarking data will be included in future years. Since 2014-15 there has been a gradual increase in the amount of money spent by Children and Families Services per 1000 of the West Lothian population. The increase in recent years has been attributable to additional spending on specialist residential, secure and foster care placements due to increased numbers in placement and the cost of placements.

The target for 2019-20 has been reduced to £154,000 to allow the service to test whether the recent decrease in costs can be sustained and improved upon. In the longer term it is hoped the target will be reduced year on year.

<b>PI Code &amp; Short Name</b>	<b>P:SPCF090_9b.1b Current Number of Looked After Children (LAC)</b>	<b>PI Owner</b>	zSPCF_PAdmin; Susan McKenzie; Susan Mitchell; Tim Ward
<b>Description</b>	This is a quarterly snapshot of the current and total number of Looked After Children in West Lothian. This included children who are Looked After at home and away from home by the Local Authority under the provisions of the Children (Scotland) Act 1995. This information is collected as part of our everyday work and recorded on our Social Policy case management system. This indicator is meaningful as the results give an indication of the effectiveness of our work and can be analysed to identify improvements to the way the service is delivered to customers.	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	387
		<b>Current Target</b>	430



**Trend Chart Commentary:**


This is a needs led and fluctuating service controlled to a certain extent by measures imposed by the Childrens Hearing System. Targets are based on Annual Children Looked After Statistics (CLAS Returns).

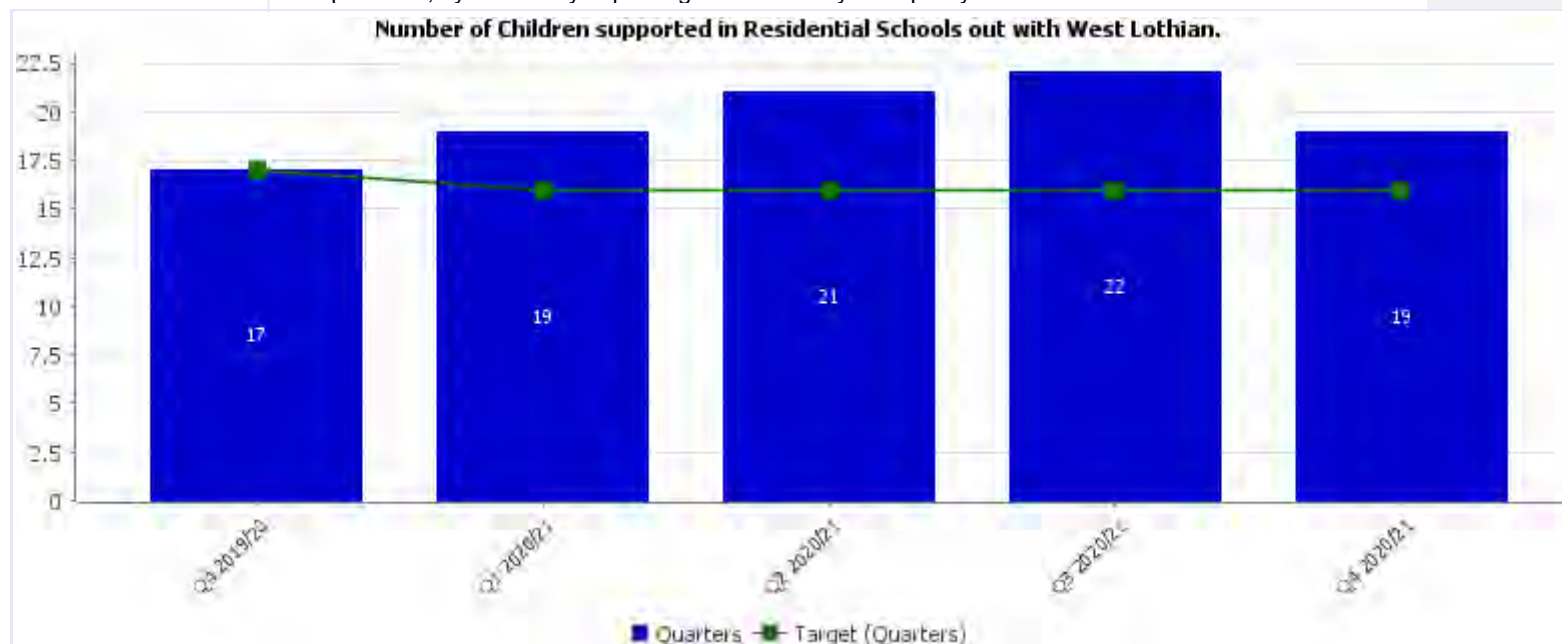
At the end of quarter 2 of 2020-21 there were 427 Looked after children. By the end of quarter 3 there were 400 and quarter 4 there were 387. This constitutes a significant drop and work is underway to better understand the causes of this.

In 2019, West Lothian had 1.1% of the 0-17 population that were looked after. remaining the same as 2018.

There is now national benchmarking data which shows the number of looked after children per 1000 of the child population aged 0-17. The service intends to develop this as a benchmarking indicator as we can measure West Lothian services against Scotland as a whole and also against other local authorities. (SPCF090)  
This figure can be very variable and unpredictable due to decisions being made by the Childrens Panel.

The 2020-21 target is set at 430 to reflect the trend over the last 12 months.

<b>PI Code &amp; Short Name</b>	<b>P:SPCF097_9b.1a Number of Children supported in Residential Schools out with West Lothian.</b>	<b>PI Owner</b>	zSPCF_PAdmin; Susan McKenzie; Susan Mitchell; Tim Ward
<b>Description</b>	This indicator provides valuable information regarding the total number of children placed in residential schools provided by the third or private sector and manage the most challenging behaviour in a dedicated combined educational and care setting. These usually accommodate and care for those children who have been unable to manage in resources within West Lothian. This does not include children with a disability. The indicator tells us how effective services are at enabling children to remain within west Lothian. There are occasions where children's needs are very complex and a specialised resource is deemed necessary through the assessment undertaken on the child. It is important that as far as possible, children are enabled to remain in West Lothian. Therefore, children's services should always be aiming to reduce the need for such provision, by constantly improving the availability and quality of internal resources.	<b>Traffic Light Icon</b>	
		<b>Current Value</b>	19
		<b>Current Target</b>	16



#### Trend Chart Commentary

Considerable work has taken place to manage numbers to target.

In quarter 4 of 2020-21 there were 19 young people in residential schools. This is in part caused by pressures resulting from COVID-19 but also because the ability to move children back from external resources has been hampered.

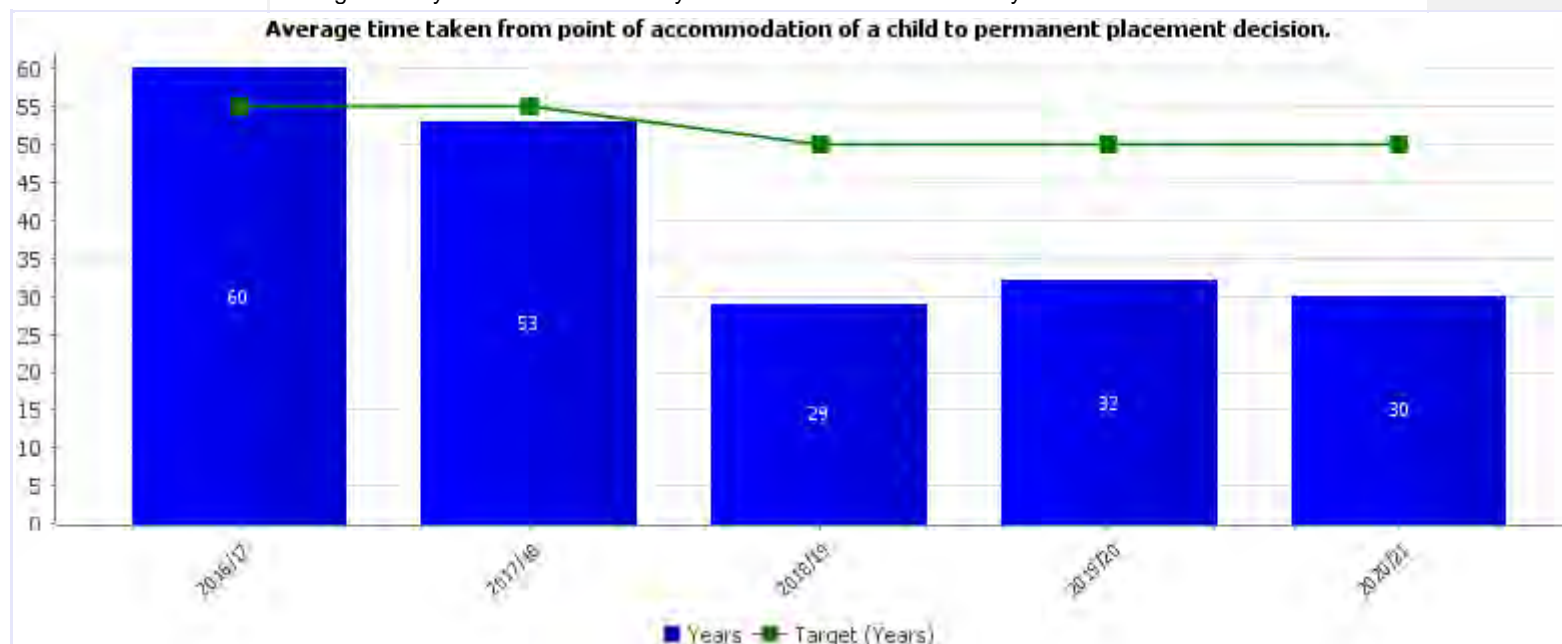
At the end of quarter 4 of 2019-20, 17 young people were in external residential schools. It is anticipated that there will be a small number of summer leavers that will bring the number down by the end of quarter 1 of 2020-21.

Social Policy are currently undertaking a review of children's services in order to provide alternatives within our own internal resources which will aim to help avoid young people being placed in residential schools as far as risks to those children allow.

The target will remain at 16 to reflect service expectations around reducing use of external provision.



<b>PI Code &amp; Short Name</b>	<b>P:SPCF112_9b Average time taken from point of accommodation of a child to permanent placement decision.</b>	<b>PI Owner</b>	zSPCF_PIAAdmin; Susan McKenzie; Susan Mitchell; Tim Ward
<b>Description</b>	The length of time taken for children to have decisions made about their permanent placement is an important indicator of the effectiveness of planning by social workers. It is the average length of time taken for a child who becomes looked after until a decision is made on their individual permanence route, securing their ongoing care in a safe and nurturing environment. This data is collected on our Social Policy case management system and can be analysed to determine how efficiently the service is delivered.	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	30
		<b>Current Target</b>	50



**Trend Chart Commentary:**


This is an important indicator as to the service's ability to ensure permanence arrangements for children are progressed in as timely and efficient a manner as possible. It shows the average number of weeks taken to achieve permanency for a child.

In 2019/20, the performance slightly decreased from the previous year, with the average time increasing by 3 weeks to 32 weeks for a permanent placement decision. However the figure of 32 weeks was still significantly better than the target of 50 weeks and represents some progress toward the stretch target indicated for 2020/21 of 25 weeks.

Performance in 2018/19 showed a significant improvement to an average of 29 weeks, just over 7 months, an improvement from 55 weeks the previous year. The service has improvement in care planning as one of its priorities for the Corporate Parenting Plan and is involved in a project with the Centre of Excellence for Looked After Children in Scotland (CELCIS) called PACE that is looking at a number of areas for improvement.

It is positive to note that since 2015/16, the average time taken to achieve a permanent placement has improved annually and has now exceeding the current target of 50 weeks. This is due to significant effort that has taken place to improve the efficiency of placement and associated approval processes.

For 2019-20 the target will be increased to 30 weeks initially to test if the improvement can be maintained with the aim to stretch the target to 25 weeks in 2020-21.

<b>PI Code &amp; Short Name</b>	<b>P:SPCF130_6b.5 Percentage of Children and Families Care Inspectorate Inspections graded good, very good or excellent.</b>	<b>PI Owner</b>	zSPCF_PIAAdmin; Susan McKenzie; Susan Mitchell; Tim Ward
<b>Description</b>	<p>This Performance Indicator measures the percentage of grades received within the Care Inspectorate's annual inspections of Children and Families services. Grades range from 1-6, where 1 is poor and 6 is excellent.</p> <p>Services delivered by Children and Families are required to register with the Care Inspectorate Inspections and are subject to annual inspection.</p> <p>The Care Inspectorate regulate, inspect and support improvement of care, social work and child protection services for the benefit of the people who use them. The services are inspected on the following areas:</p> <ul style="list-style-type: none"> <li>• - Quality of Care and Support</li> <li>• - Quality of Environment</li> <li>• - Quality of Staffing</li> <li>• - Quality of Management and Leadership</li> </ul> <p>The aim of the Care Inspectorate is to ensure that vulnerable people are safe, the quality of services improves, and people know the standards they have a right to expect. Full inspection reports can be viewed online at <a href="http://www.careinspectorate.com">www.careinspectorate.com</a>.</p>	<b>Traffic Light Icon</b>	
		<b>Current Value</b>	0%
		<b>Current Target</b>	
<b>Percentage of Children and Families Care Inspectorate Inspections graded good, very good or excellent.</b>			

**Trend Chart Commentary:**

The target for 2019-20 remained at 100%, however the performance in 2019/20 was 50%.  
Seven establishments were inspected during the course of 2019-20.

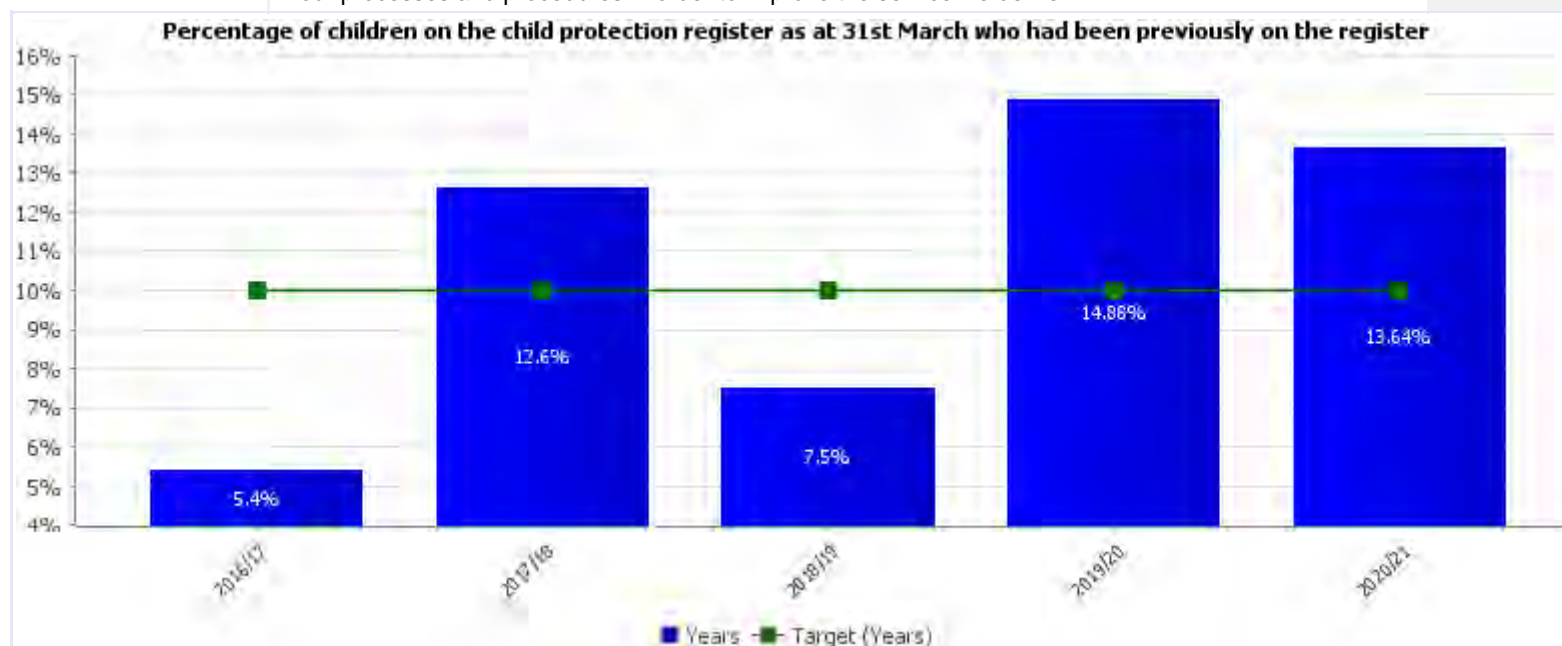
The Fostering Service , Adoption Service , Whitrigg House , Letham Young Persons Unit , and Throughcare and Aftercare Services are due to be inspected during 2020-21.

There are fewer services to inspect with Whitdale Family Centre now closed and Letham House temporarily closed. Livingston Family Centre is due to close during 2020-21.

Torcroft was inspected during a period of change and also with a new set of standards which meant a dip in scoring with none of the areas inspected scoring good or above. Livingston Family Centre scored strongly but with previous standards.

The target for 2019-20 will remain at 100% as the service wishes to drive improvement.

<b>PI Code &amp; Short Name</b>	<b>P:SPCF134_9b1b Percentage of children on the child protection register as at 31st March who had been previously on the register</b>	<b>PI Owner</b>	zSPCF_PAdmin; Susan McKenzie; Susan Mitchell; Tim Ward
<b>Description</b>	<p>The indicator measures the number of children in the year who were previously on the child protection register and removed from it but have since been re-registered.</p> <p>This data is collected on our Social Policy case management system. The results of this indicator are analysed as effective intervention for children at risk of abuse and neglect should result in fewer numbers of re-registrations to the child protection register. This allows us to identify where improvements can be made in our processes and procedures in order to improve the service we deliver.</p>	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	13.64%
		<b>Current Target</b>	10%



**Trend Chart Commentary:**

The range of services working with children at risk aim to have a positive impact on the numbers of children on the child protection register. Effective intervention will lead to fewer children who are re-registered after being removed from the register.

2020-21 saw a slight decrease to 13.64% with 15 from 110 children previously registered. positive performance with a lower number on the register

2019-20 saw an increase to 14.88% (25 from 168 children registered)

2018-19 had seen an improvement to 7.5% with 13 out of 173 who had been entered on the register having been on it previously within the last two years.

Figures as at 31st March 2018 stood at 12.6%. There has been a reduction in the numbers on the Child Protection register over the course of 2017-18 and 8 from 48 had previously been on the register. Close attention is paid to numbers on the register by the Public Protection Committee and work is undertaken to review cases subject to registration.

Performance in 2016-17 had improved to 5.4%, an improvement from 8% in 2015-16. There were 72 children on the register as at 31st March 2017, four of whom had been on the register previously. The children were from two families. The number of children on the register constitutes a drop from previous years and work is being undertaken to develop a better understanding of why this is the case.

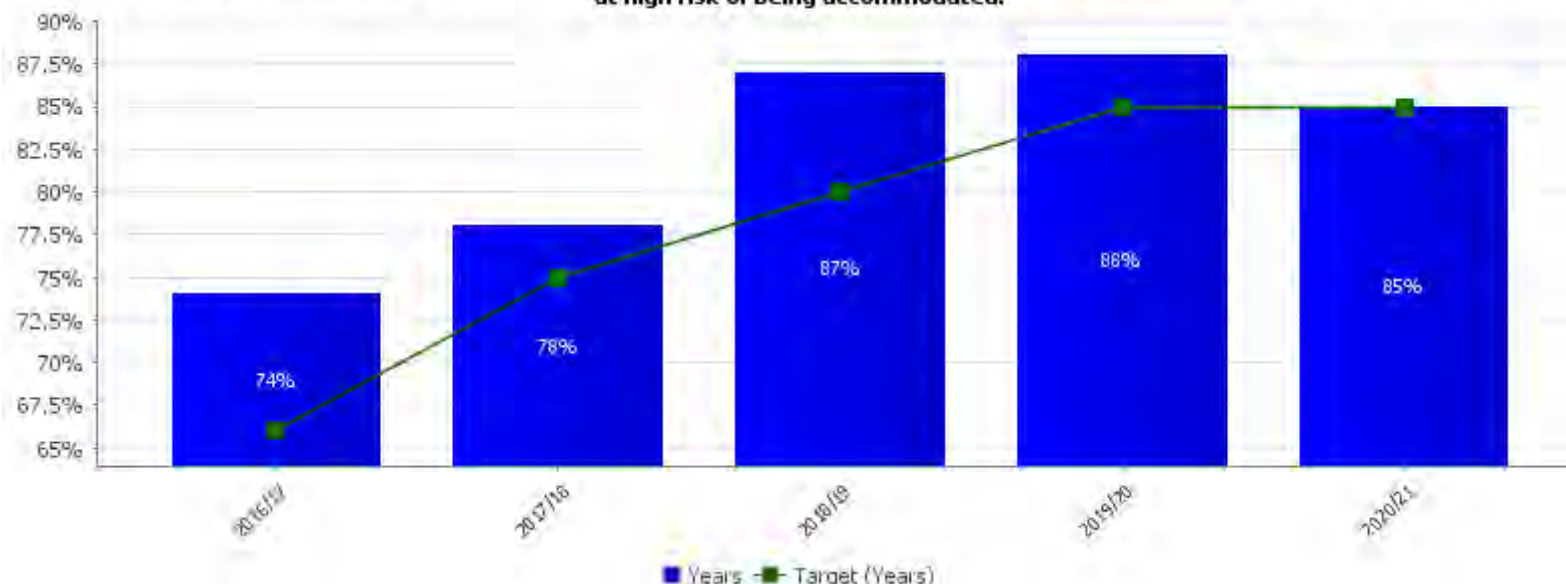
Crisis intervention can lead to fluctuations in figures and small numbers of children can lead to seemingly significant percentage variations. In 2014-15 performance dipped to 14 per cent. This involved 23 children out of a total of 169 on the register at that time.

The Child Protection Committee will continue to monitor outcomes for children through the work of its Quality Assurance and Self Evaluation Subcommittee.

The target of 10% will remain for 2020-21 to monitor whether performance is maintained.

<b>PI Code &amp; Short Name</b>	<b>P:SPCF138_9b.1c Percentage of children involved with the Families Together service who have avoided becoming accommodated who were assessed as being at high risk of being accommodated.</b>	<b>PI Owner</b>	zSPCF_PIAAdmin; Susan Mitchell; Tim Ward
<b>Description</b>	This performance indicator is a measure of how effective Whole Family Support is in addressing chronic issues faced by children and their families. The Whole Family Support Service works with the most complex families where the children are at high risk of becoming accommodated. The aim of Whole Family Support is to keep children within their own families and communities safely and with support.	<b>Traffic Light Icon</b>	✓
		<b>Current Value</b>	85%
		<b>Current Target</b>	85%

**Percentage of children involved with the Families Together service who have avoided becoming accommodated who were assessed as being at high risk of being accommodated.**



**Trend Chart Commentary:**

During 2020-21 the service continued to perform strongly and piloted intensive support with more challenging young people and families. Despite this performance remained constant which is encouraging. During 2021-22 the service will become more established and also utilise community resources that can provide further resilience to avoid accommodating children.


The most recent data shows a slight dip to 85% with 42 from 49 children remaining at home.

In 2019-20, performance improved further to 88% from 87% in 2018-19. 36 from 41 cases were supported to stay at home. This is a further improvement from already positive performance over recent years. In 2017-18 performance was 78%.

Performance in 2016-17 saw a dip on 2015-16 from 84% to 74%. The service worked with a number of large families where children required to be accommodated and this impacted on performance. Performance in 2015-16 saw an improvement on 2014-15 from 66% to 84%. The intensive and whole family approach to addressing complex issues has shown to enable children and young people remain within their own families and communities and avoid escalation into more costly resources.

The target for 2021-22 will increase to 90% to test whether this performance rate can be improved in a climate where the service is changing to take on more challenging families.



<b>PI Code &amp; Short Name</b>	<b>P:SPCF201_9a Percentage of first review child protection case conferences held within 3 months of the initial child protection case conference.</b>	<b>PI Owner</b>	zSPCF_PIAAdmin; Susan McKenzie; Susan Mitchell; Tim Ward
<b>Description</b>	<p>This indicator is the percentage of first review child protection case conferences held within 3 months of the initial child protection case conference.</p> <p>It was introduced following the introduction of revised national child protection guidance in 2013. The indicator is important to ensure services adhere to national guidance which requires the service to arrange review child protection case conferences within the 3 months time frame. This is an indicator of how efficient the service is at ensuring Review Child Protection Case Conferences (RCPCC's) take place within three months of the original case conference. It is an indicator of the focus the service has on ensuring reviews happen efficiently and within timescales stipulated in national guidance.</p> <p>It is part of the Minimum Dataset for Child Protection Committees. The minimum dataset indicators have been developed and agreed following extensive consultation with Child Protection Committees and national partners that include the Scottish Government, Care Inspectorate, Scottish Children's Reporter Administration (SCRA), Police Scotland and NHS/ISD Scotland.</p> <p>The indicator provides intelligence about the vulnerable children and young people. It supports improvement activities, highlights local issues / priorities for local attention and action and allows for those to be monitored. The indicator increases the opportunities to benchmark and learn from other Child Protection Committees.</p> <p>Readers should note that this indicator is presented in Academic quarters (i.e. February-April; May-July; August-October; November-January), which are used to align with the national Child Protection statistical return to Scottish Government.</p>	<b>Traffic Light Icon</b>	
		<b>Current Value</b>	96%
		<b>Current Target</b>	90%
<b>Percentage of first review child protection case conferences held within 3 months of the initial child protection case conference.</b>			

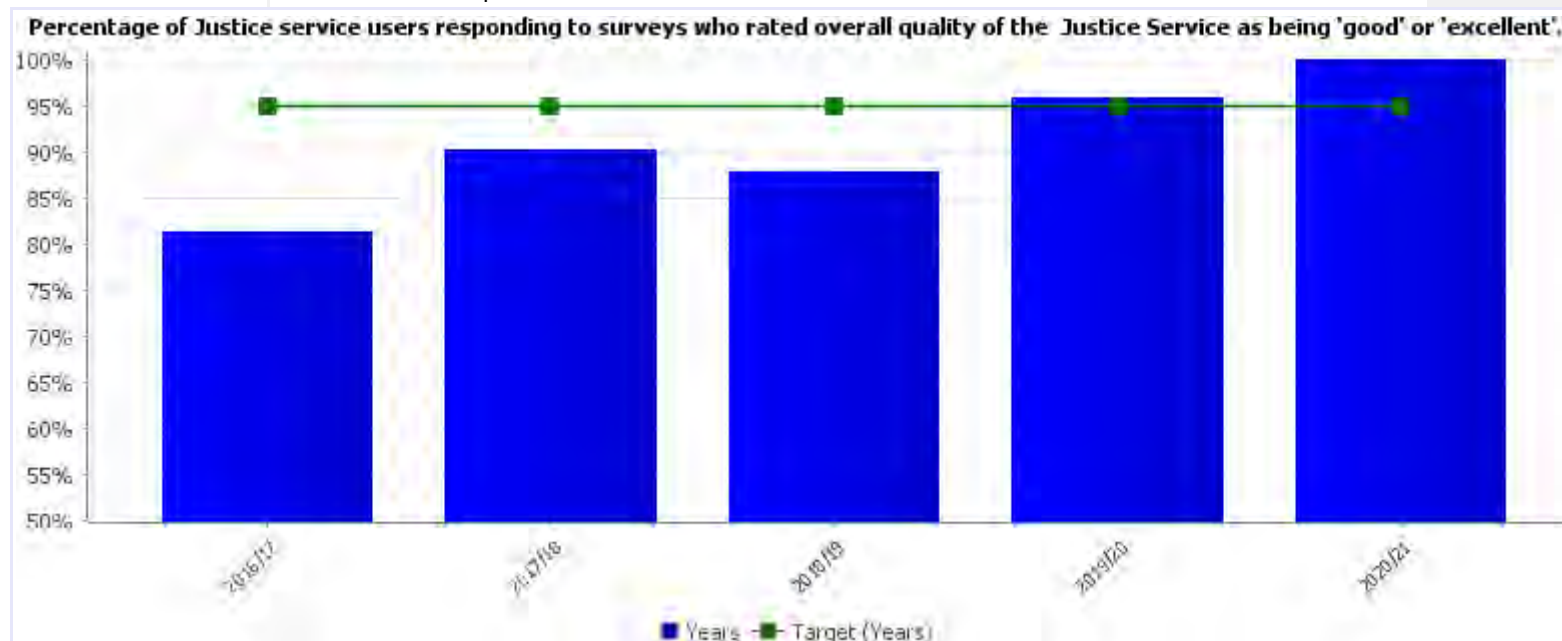
**Trend Chart Commentary:**

This indicator replaces the previous public indicator SPCF071 as a new "Minimum Dataset for Child Protection" has been agreed and this indicator will now be measured in Academic quarters (e.g. August - October) to align with complementary Education indicators.

The performance has been variable, however generally good for this indicator. In quarter 1 and 2 of 2020/21, 100% all RCPCC were within the 21 days, with Q3 at 96%. which is still above the 90% target whereas in previous quarters performance had dipped slightly. In Q1 2019/20 performance had dipped to 73%, however this had increased to 86% in Q4 of 2019/20.

The target will remain at 90% for 2020/21 as the service is keen to push for high levels of performance whilst accepting that some RCPCC's will take place outwith the timescale for appropriate reasons.

<b>PI Code &amp; Short Name</b>	<b>P:SPCJ001_6a.7 Percentage of Justice service users responding to surveys who rated overall quality of the Justice Service as being 'good' or 'excellent'.</b>	<b>PI Owner</b>	zSPCJ_PAdmin; Tim Ward
<b>Description</b>	<p>Percentage of respondents in the Justice Service annual survey of service users who rated overall quality of the service provided as being good or excellent. The survey involves a cross-section of offenders from across the service area completing a standardised questionnaire.</p> <p>The survey is used to help ensure service user feedback and to improve the service. It will also be used to obtain feedback on priorities.</p>	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	100%
		<b>Current Target</b>	95%



#### **Trend Chart Commentary:**

The 2020-21 results were based on surveys returned and completed as part of the end of order evaluation. Covid-19 badly affected returns due to the reduced levels of face to face contact. There were 17 recipients who answered this question, all of which (100%) stated the overall quality was good or excellent. Work will be carried out to ensure participation is increased going forward.

The 2019-20 results were based on end of order surveys carried out by workers in the service over the course of the year. This new approach meant that a total of 75 individuals participated. This is well down on the usual numbers of 200 that did a targetted annual survey. This will improve over the coming years as the process becomes more embedded.

The 2019-20 survey indicated that performance had improved substantially although with a smaller number of participants. 96% constituted an improvement from 88% in 2018-19 which is

encouraging. 68 from 71 who answered the question gave a positive response. It is the highest level of performance since the indicator was introduced.

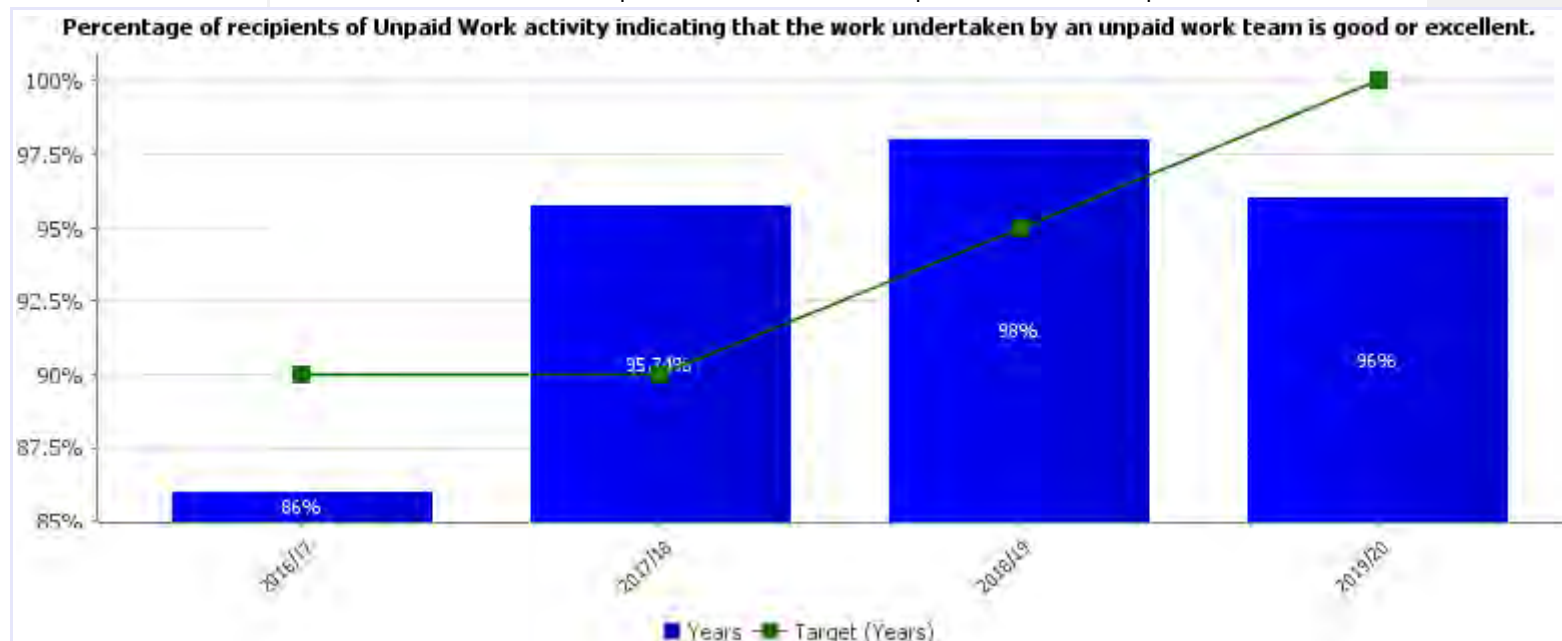
The 2018-19 survey saw performance of 88% with 190 from 216 respondents expressing that the service was good or excellent. This is a small dip from 2017-18 that had a rate of 90.2% from a sample of 201.

In 2016-17 there was a dip in performance to 81.41% (92 from 113 returns). There was a small number of service users who scored adequate but gave no reason for doing so. The 2015-16 survey, completed in November 2015 achieved a performance of 89% from a significantly increased sample of 203 individuals reflecting the whole service area.

In future years the service will be achieving a greater level of return by combining the customer survey with end of order questionnaires. The service also plans to supplement surveys with focus groups for service users which will enrich the feedback received.

The target for 2021-22 will increase to 100% to reflect current performance levels .

<b>PI Code &amp; Short Name</b>	<b>P:SPCJ011_6a Percentage of recipients of Unpaid Work activity indicating that the work undertaken by an unpaid work team is good or excellent.</b>	<b>PI Owner</b>	zSPCJ_PAdmin; Tim Ward
<b>Description</b>	This performance indicator measures the percentage of recipients of unpaid work that rate the quality of the work as good or excellent. Unpaid work is undertaken by people convicted of offences and made subject to a Community Payback Order (CPO) with a condition of unpaid work. The work is completed under the supervision of the Justice Service Unpaid Work Order Supervisors.  The data comes from feedback questionnaires issued to recipients at the end of a piece of work.	<b>Traffic Light Icon</b>	?
		<b>Current Value</b>	N/A
		<b>Current Target</b>	



**Trend Chart Commentary:**

This is a new indicator collected from 2016-17. The first year of collection indicated that 86% (12 from 14) of recipients viewed the work undertaken as good or excellent.

In 2019-20 there were 50 surveys returned, 48 of which said the service was good or excellent. Two reported the service as satisfactory.

The increase in performance from 2017-18 onwards can mostly be attributed to the significantly larger sample sizes and how this affects the performance calculation. In 2017-18, there was a significant increase in feedback received rising to 47. Of these 45 said the overall service was good or excellent indicating a performance of 95.74%.

In 2018-19 performance improved to 98%. From 48 returns, 47 rated the service as good or excellent. The remaining 1 return rated the service as satisfactory.

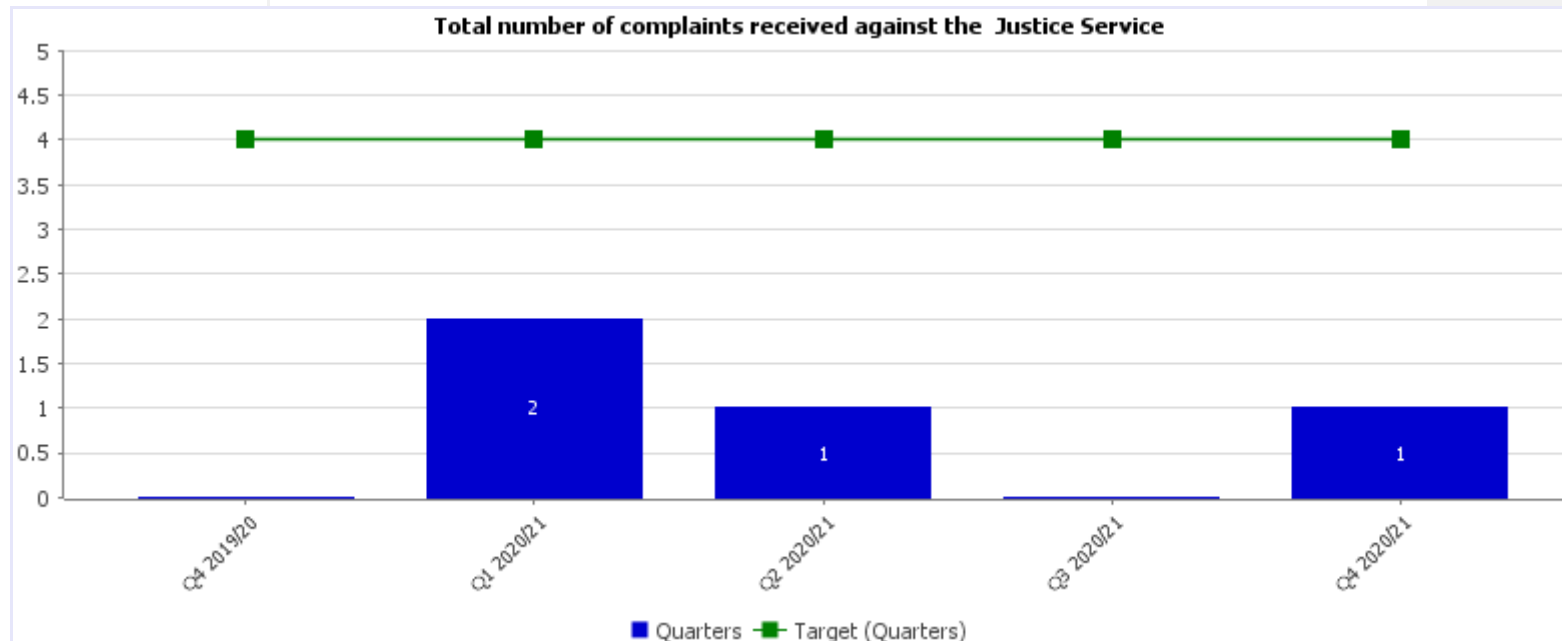
Considerable work is being undertaken to modernise unpaid work and ensure work benefits communities and reflects priorities in the Corporate Plan. Current priorities include, for example;

- Recycling (bikes and furniture)
- Environmental impact (community clear ups, joint work with NETS and Land Services)
- Anti Social Behaviour (clearing graffiti and removing material that could be thrown)
- activities to support anti poverty (assisting food banks, donated furniture)

Work completed included furniture removal, landscaping, redecorating, day trips for people with learning difficulties, bike recycling and ground works. Two people rated the service as satisfactory.

The target will remain at 100% for 2020-21 to reflect strong performance to date.

<b>PI Code &amp; Short Name</b>	<b>P:SPCJ040_6b.3 Total number of complaints received against the Justice Service</b>	<b>PI Owner</b>	zSPCJ_PAdmin; Tim Ward
<b>Description</b>	This performance indicator measures the total number of complaints received annually about the Justice service delivery. The data for this indicator is extracted from the Lagan Customer Relationship Management System.  Data is used to help the service improve its understanding of the customer experience.	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	1
		<b>Current Target</b>	4



In Q3 of 2020/21, the service did not receive any complaints, however in Q1 there were two and Q2 there was one complaint. In the last two quarters of 2019/20, the service did not receive any complaints.


The pattern of complaints is largely unpredictable and usually focussed on a perception that the service has treated an individual harshly or unfairly because of the strong requirement to apply sanctions if required. There are also complaints from registered sex offenders who tend to perceive injustice differently.

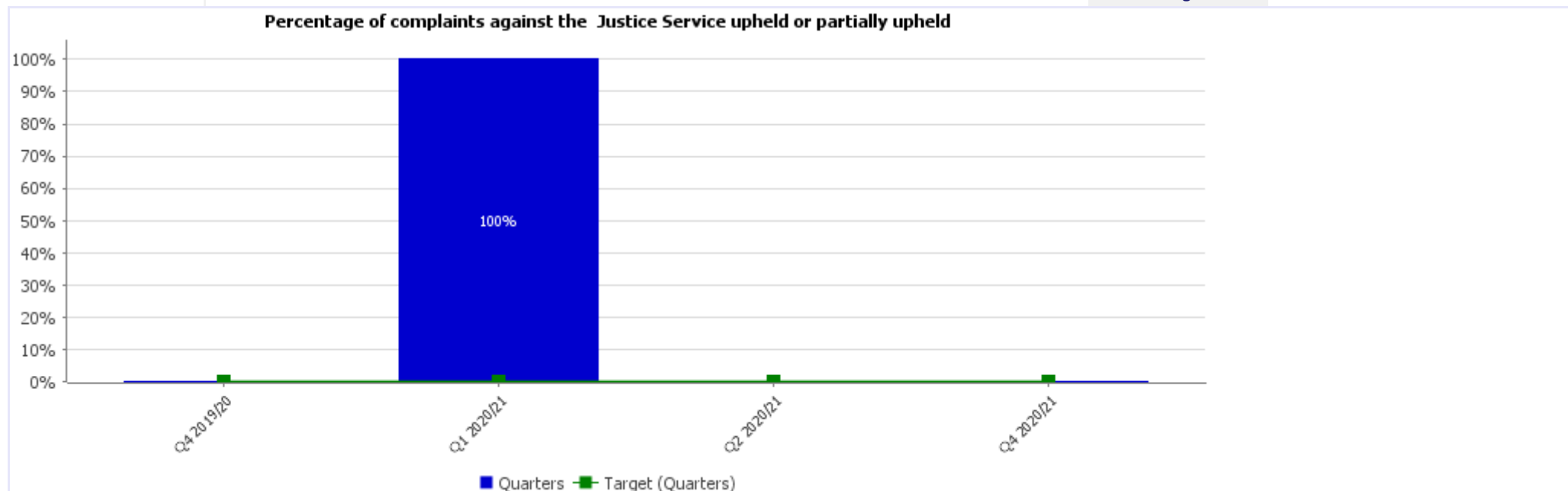
Offenders are managed strongly in the community and are required to comply with strict supervision so offenders occasionally complain about statutory decisions which are usually explained clearly.

The complaints received have concerned staff being challenged regarding risk assessment or professional role. Criminal and Youth Justice receive relatively few complaints when compared with other areas of Social Policy

The target will remain at 4 for 2020/21, although this is largely notional and difficult to influence.



<b>PI Code &amp; Short Name</b>	<b>P:SPCJ043_6b.4 Percentage of complaints against the Justice Service upheld or partially upheld</b>	<b>PI Owner</b>	zSPCJ_PIAAdmin; Tim Ward
<b>Description</b>	This performance indicator measures the percentage of statutory social work complaints received half yearly about the Justice service that were upheld or partially upheld. The data for this indicator is extracted from the Lagan Customer Relationship Management System. The data is used to identify any opportunities for improvement that can be made in the service.	<b>Traffic Light Icon</b>	
		<b>Current Value</b>	0%
		<b>Current Target</b>	0%



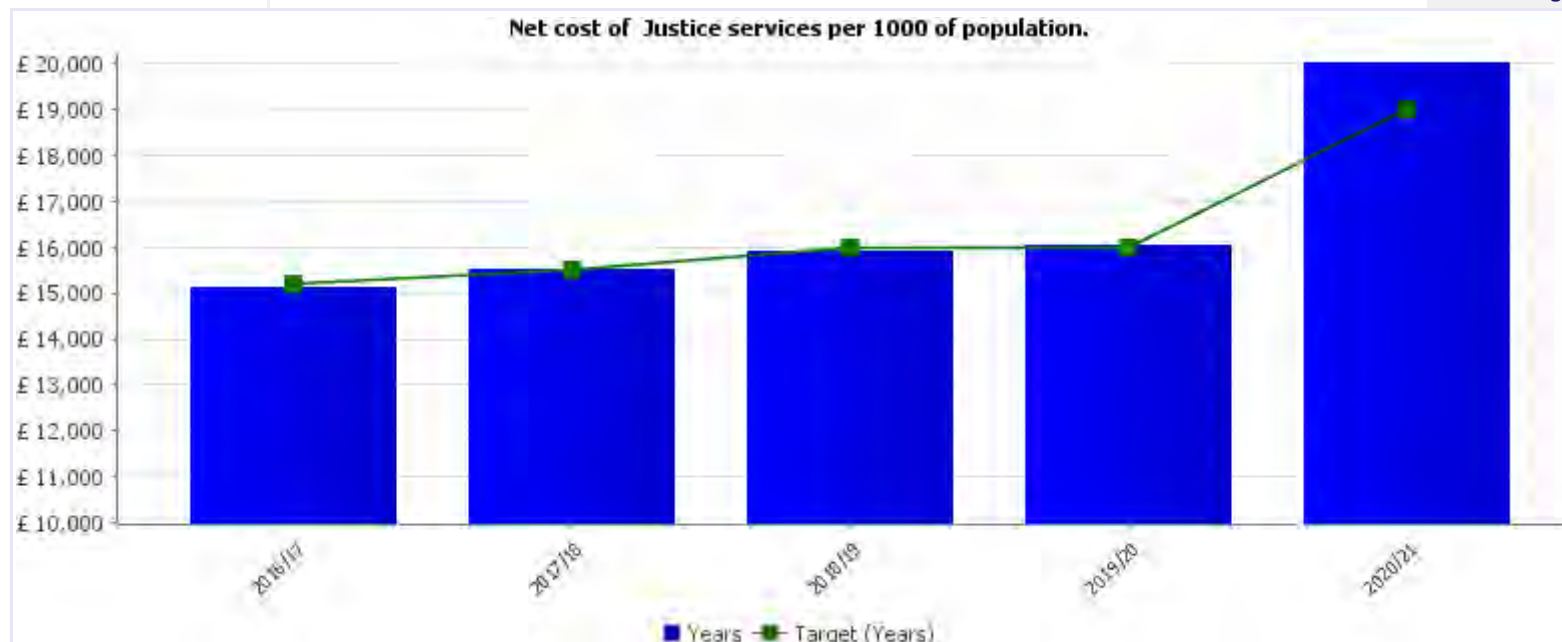
In 2020/21, the performance has been variable; in Q1 100% of complaints were upheld, or upheld in part. In Q2, no complaints (0%) were upheld and in Q3, no complaints were made with Q4 1 complaint with 0% upheld or partially upheld.

The nature of complaints to the Criminal & Youth Justice are often complex and sensitive, however the service receives very few complaints and the results for this indicator can be highly variable. Following analysis of the small numbers of complaints, we have not found any particular trend, or theme that has influenced these results, other than that when we convert the small number of complaints to a percentage count, we see more extreme variation in the result.

Please note that on quarters where there have been no complaints received, there will be no value added, therefore this will show as a blank or missing quarter on the chart.

Small complaint numbers make target setting difficult but the target will remain at 0% for 2020/21.

<b>PI Code &amp; Short Name</b>	<b>P:SPCJ060_9a.1d Net cost of Justice services per 1000 of population.</b>	<b>PI Owner</b>	zSPCJ_PAdmin; Tim Ward
<b>Description</b>	This indicator gives information as to the cost of delivery of Criminal Justice Social Work Services in West Lothian, based on total annual budget and that year's population for West Lothian. This data is updated each October when the population estimate becomes available.	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	£ 19,982
		<b>Current Target</b>	£ 19,000



#### **Trend Chart Commentary:**

The net cost of Criminal Justice services has fluctuated to a degree over recent years.

In the two years prior to 2016-17, costs were relatively static, however in 2016-17 there was significant rise to £15,104. Costs continued to increase to a lesser degree in 2017-18 and 2018-19 when it rose to £15,889. In 2019-20 it rose again to £16,011.


There has been significant increases in the section 27 grant in recent years and whilst this means the cost per head of population has risen, it is indicative of an increase in the investment possible in Justice Social Work Services. In 2020-21 there will be significant one off resources to help recovery from the pandemic.

This increase in cost is due to year-on-year increases in the Section 27 ring-fenced grant received by the council from Scottish Government and is a consequence of the review of their allocation formula, which has been changed to reflect the social costs of crime. This has benefitted West Lothian by making more money available to deal with the social costs of crime.

Criminal Justice activity is entirely funded through the ring-fenced grant and should be seen as a positive indication on the ability of the service to manage its statutory duties.

The overall picture is a positive one with the grant allocation for West Lothian increasing year on year for the past 5 years reflecting the level of court business undertaken by the Criminal and Youth Justice Service.

The target for 2021-22 will increase to £20,000 to reflect the section 27 grant that funds criminal justice social work and the anticipation that the grant will remain largely similar for the current year.

<b>PI Code &amp; Short Name</b>	<b>P:SPCJ076_9a Total Number of hours for Community Payback Orders with an Unpaid Work Condition</b>	<b>PI Owner</b>	zSPCJ_PIAAdmin; Tim Ward
<b>Description</b>	<p>The number of Unpaid Work cases supervised in the community is an indicator of demand on the Criminal and Youth justice Service and also affects the grant it receives. The higher the number of cases the higher the grant over time.</p> <p>Data is collected from the annual aggregate return submitted to the Scottish Government.</p>	<b>Traffic Light Icon</b>	
		<b>Current Value</b>	13,058
		<b>Current Target</b>	13,000



This is an indicator of the demand placed on Criminal and Youth Justice Services in relation to the supervision of offenders subject to Unpaid Work.

The number of hours for a Community Payback Order is determined by the Courts, however for this service it is an indicator of demand and also a cost measure as the service will ultimately be paid in part by the amount of statutory business undertaken.

The figures for the period 2020-21 reduced as a direct impact of Covid-19. The UPW scheme was suspended in line with government and public health advice for the majority of this period, operating at a significantly reduced capacity when open. Whilst the UPW scheme restarted on Monday 26th April 2021, this continues to be at reduced capacity with social distancing and health and safety systems requiring to be in place. With regards to target setting, a figure of 20 thousand may be achievable for the current period, however this will also be depended on the Courts imposing Orders at the previous rates.

The number of hours recorded for 2019-20 increased slightly to 37,989. This has stabilised a reducing trend over recent years

Data for 2018-19 indicated that 36,536 hours were ordered by the court across 282 orders with unpaid work conditions.

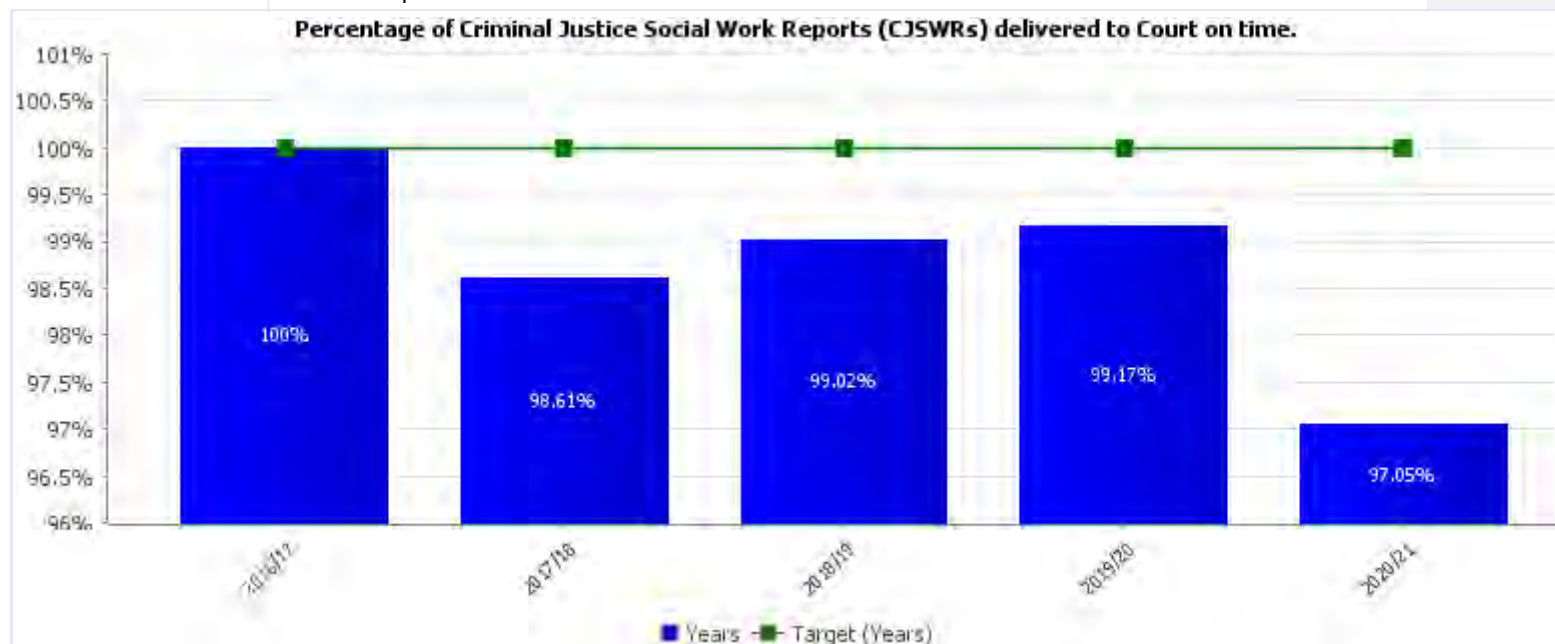
In 2017-18 numbers of orders experienced a drop from the previous year and as a result, so did the total number of hours to 39,717.

In 2015-16 the number of hours dropped slightly to 42,477 (355 orders). There would appear to be a slight levelling off of unprecedented increases the previous year.

Unpaid Work has been in existence since the 1980's and has had a strong impact in a positive way on communities. The rise in activity should impact on the level of section 27 grant in due course.

The target will increase to 20,000 in 2021-22 to reflect anticipated increases in the use of Unpaid work as the service moves into recovery. This may be ambitious due to the impact of COVID-19 as this service has been suspended for periods of time in line with temporary legislation. This will be reviewed as the year progresses.

<b>PI Code &amp; Short Name</b>	<b>P:SPCJ082_6b.5 Percentage of Criminal Justice Social Work Reports (CJSWRs) delivered to Court on time.</b>	<b>PI Owner</b>	zSPCJ_PAdmin; Tim Ward
<b>Description</b>	<p>This is an indicator of how efficient the service is at delivering Reports to Court within a nationally agreed timescale.</p> <p>Courts require reports at least 24 hours before a court appearance. The local arrangement is 48 hours which is more of a challenge for staff. Data is taken from SWIFT reports.</p> <p>The data is a good indicator of how efficiently this area of the service is performing and the effectiveness of the planning that is in place to deliver this function of the service. The data is used to identify and areas for continual improvement.</p>	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	97.05%
		<b>Current Target</b>	100%



#### **Trend Chart Commentary**

Performance in relation to this indicator is reflective of the well established systems in place to deliver the service, which has resulted in a close working relationship with the Scottish Courts and Tribunals service. In recent years the volume of Criminal Justice Social Work report requests has increased.

In 2020-21 692 from 713 reports were submitted on time, 97.05%. There were fewer reports as a result of Covid-19 related reduction in court business

In 2019-20, 959 from 967 reports were submitted on time (99.17%)

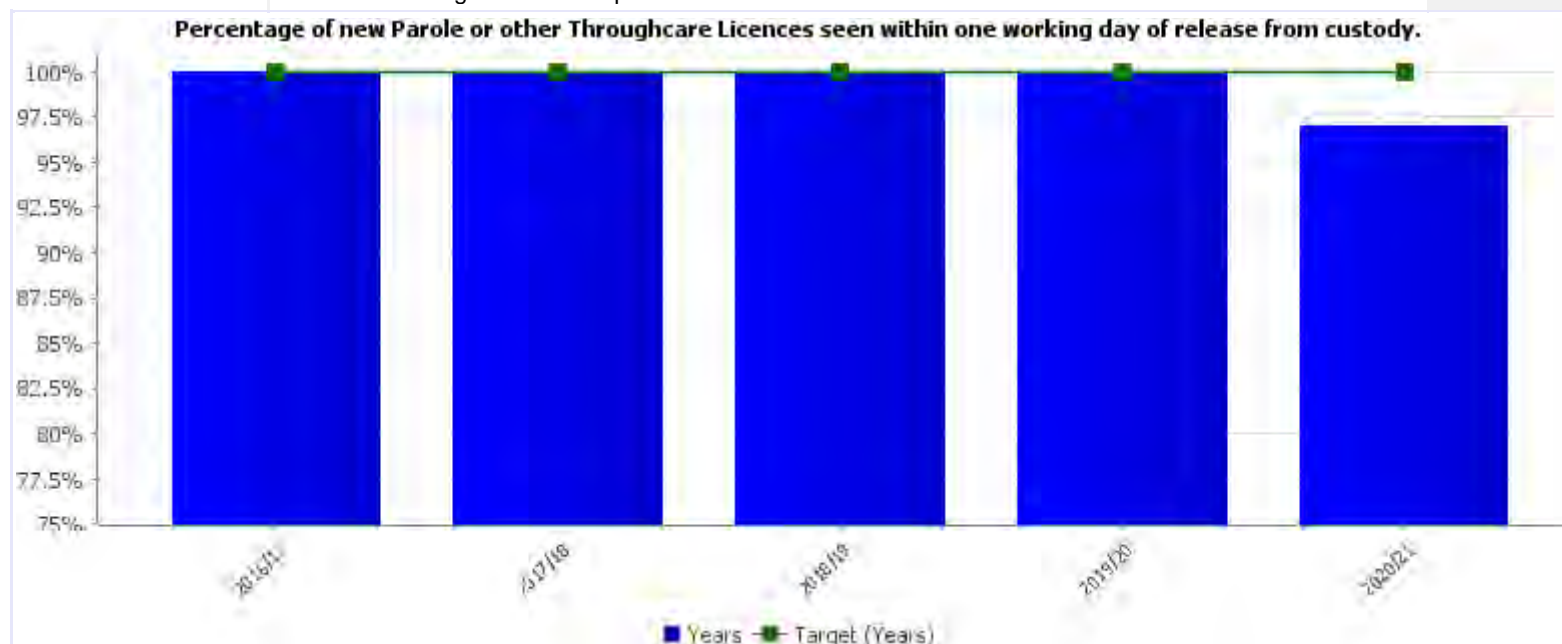
In 2018-19, 1015 from 1025 reports submitted were on time (99.02%). In 2017-18 there were 1417 such requests. It is therefore positive that performance has remained high.

In 2016-17 100% of all reports were submitted in time. Given the volume of reports submitted, the scores of 98.79% and 97.80% in 2014-15 and 2015-16, respectively are also reflective of high levels of performance.

The national standard is for reports to be submitted within 24 hours of a court appearance, however the local standard and our agreement with West Lothian courts is that we submit our reports sooner; 48 hours in advance of a court appearance, which makes the consistent high performance noteworthy.

The target will remain at 100% for 2020-21 to reflect ongoing positive performance.

<b>PI Code &amp; Short Name</b>	<b>P:SPCJ083_6b.5 Percentage of new Parole or other Throughcare Licences seen within one working day of release from custody.</b>	<b>PI Owner</b>	zSPCJ_PAdmin; Tim Ward
<b>Description</b>	This is a key indicator of the Criminal & Youth Justice Service's ability to act swiftly in protecting the public. Those released on statutory supervision licences (legal requirements for offenders to be monitored closely) should be seen on the day of release, and performance in relation to this indicator is expected to be high. This indicator is seen as important because it highlights the speed at which higher risk long term prisoners are seen following release from prison.	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	97%
		<b>Current Target</b>	100%



**Trend Chart Commentary:**

The most recent data for 2020-21 showed that 34 from 35 licences were seen within 1 day (97%). One Supervised release order was released by the court following imposition of a backdated sentence and was seen within 3 working days.

Data for 2019-20 showed again that all prisoners released on a supervision licence were seen within a day of release (excluding transfers). This constituted 27 such licences.

The figures from 2014-15 onwards also achieved 100%. All parole releases were seen on the day of release

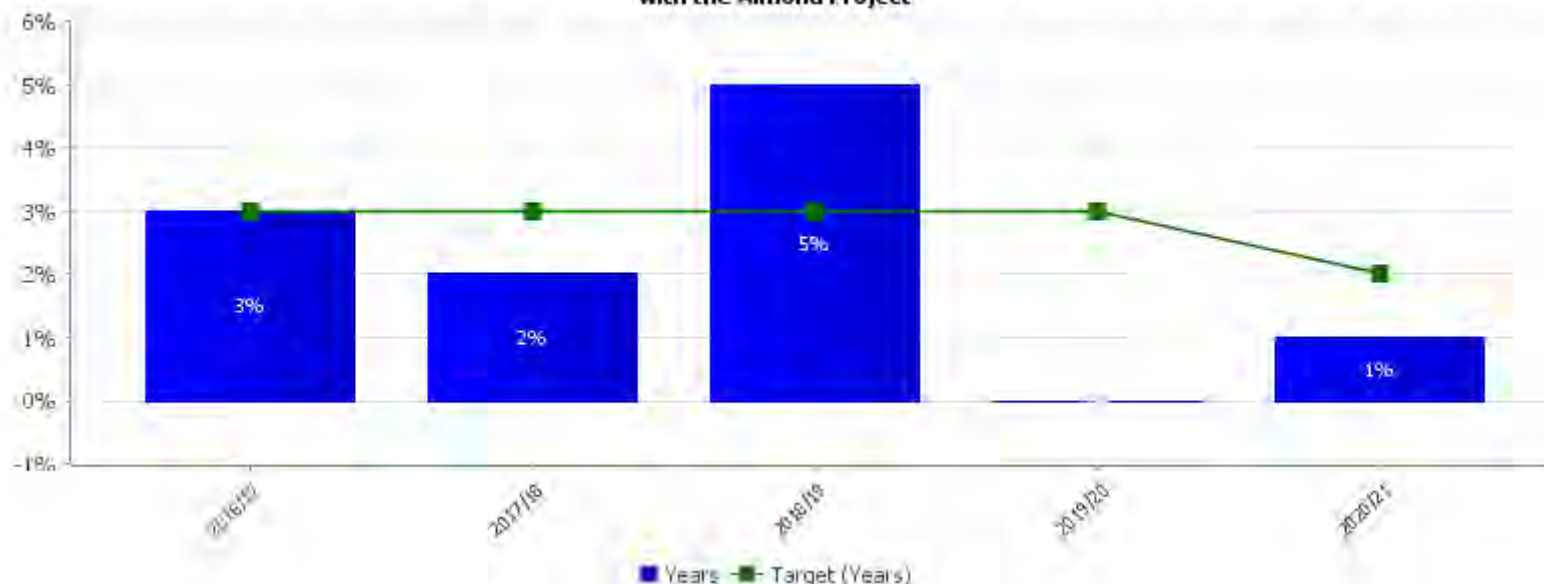
The service's success is due to a strong focus on the importance of efficient engagement with those on licence and close liaison with the Scottish Prison Service (SPS) over release arrangements. There is strong partnership working with HMP Addiewell which also assists efficient working.



The target for 2020-21 remains at 100% to ensure that the service maintains high levels of performance in this area.

<b>PI Code &amp; Short Name</b>	<b>CP:SPCJ127_9b Percentage of women who are charged with further offences during intervention or re-referred within six months following their engagement with the Almond Project</b>	<b>PI Owner</b>	zSPCJ_PIAAdmin; Tim Ward
<b>Description</b>	This indicator monitors the rate of reoffending which is the core aim of the Almond project and so the impact on offending rates by women is an important indicator. This performance indicator is part of the performance scorecard for the council's Corporate Plan and will contribute to priority 7 which is reducing crime and improving community safety.	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	1%
		<b>Current Target</b>	2%

**Percentage of women who are charged with further offences during intervention or re-referred within six months following their engagement with the Almond Project**



#### Trend Chart Commentary

Tracking and reducing reoffending is a key focus for all justice services. Women in particular should be targetted in order to ensure they are kept out of the system as much as possible. Women who offend are a priority group for the Community Justice Strategic Plan 2019-24.

In 2020-21 1 from 134 women committed a further offence, so 1%.

In 2019-20 no woman engaged with the project reoffended, there were 110 women engaged. This is strong evidence that the service is working positively

In 2018-19 performance stood at 5% with 7 from 130 women offending. The figure was affected by an anomalie in Quarter 1 when 6 from 40 women reoffended, only a further 1 did for the

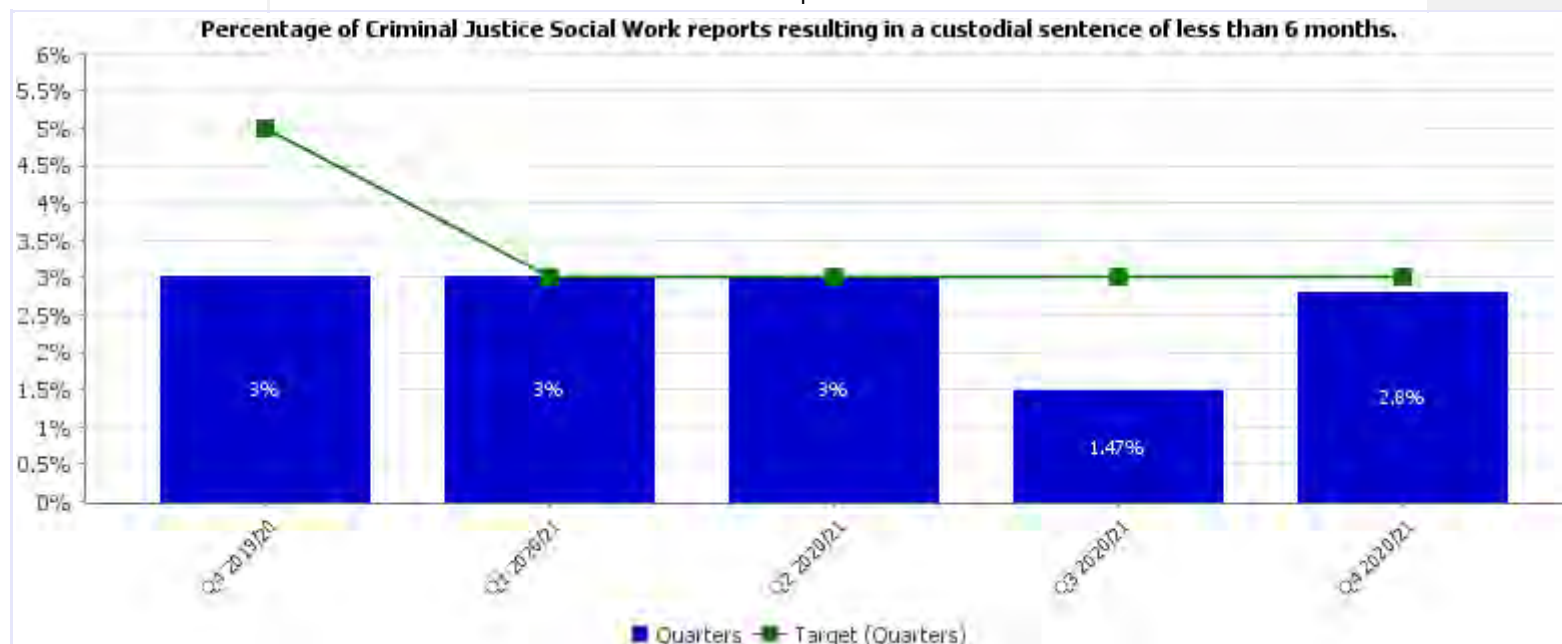
remainder of the year. In that quarter there were a small number who had offences that were of low risk and did not result in further criminal proceedings. This represents a positive continuing trend after 4 from 128 (3%) of women reoffended in 2016-1 and 4 from 154 (2%) in 2017-18.

These encouraging trends continue to demonstrate how effective the Almond Project is in reducing the reoffending rates for women. The service should be reviewed given the good performance to see what can be learned and implemented in other areas. Positively a number of successes have been women who historically have been hard to engage and breached community orders.

There are two full time Key Workers in the Project and this is likely to have a positive impact on waiting lists and further improve the effectiveness of the intervention. The service will be reviewed during 2019-20 to see if there is more than can be done to bring more women into the service and out of the adult justice system. Services are also keen to explore what partners can bring to support women who have become involved in the adult justice system.

The target for this performance indicator is to achieve 2% by 2022/23 and this was set in the development of the council's Corporate Plan. The target for 2021-22 will remain at 2% to reflect the council target.

<b>PI Code &amp; Short Name</b>	<b>P:SPCJ148_9b.1a Percentage of Criminal Justice Social Work reports resulting in a custodial sentence of less than 6 months.</b>	<b>PI Owner</b>	zSPCJ_PAdmin; Tim Ward
<b>Description</b>	The service aims to maximise the use of effective community-based disposals (court decisions) without unnecessary use of short custodial sentences. The Criminal Justice and Licensing (Scotland) Act 2010 (Section 17) includes a specific presumption against use of such sentences. This measure is the percentage of court disposals (decisions) arising from cases where a Criminal Justice Social Work Report was submitted to court where the outcome was a prison sentence of 6 months or less.	<b>Traffic Light Icon</b>	🟢
		<b>Current Value</b>	2.8%
		<b>Current Target</b>	3%



#### Trend Chart Commentary

The general trend in this indicator is for good performance with little more than 2% variation across the reported period.

In quarter 2 of 2020-21, 6 from 202 reports submitted received a sentence of 6 months or less (3%). There is an increased number of reports from quarter 1 but still not quite reaching normal levels. The good performance continued into quarter 3 of 2020-21, when 1.48% (3 of 203) of reports resulted in a custodial sentence of less than 6 months.

In quarter 1 of 2020/21, the numbers of reports submitted was significantly lower than the normal volumes experienced due to the COVID 19 pandemic affecting the business of the courts; only 65 reports were submitted and 2 of those received a sentence of 6 months or less.

The COVID 19 pandemic has greatly affected the business of the courts and has seen new ways of working with significant changes in the volume and nature of the cases dealt with. This will

undoubtedly impact on the performance of this indicator, however it is yet to be determined what, if any the long-term impacts will be on the Criminal and Youth Justice service.

Quarter 4 of 2019-20 saw the lowest number of custodial sentences at 3% over the course of the trend chart. 8 from 265 reports received a sentence of 6 months or less. The numbers are relatively low and increases are minimal; any increase is generally due to serious offences having been being committed.

Overall, the number of short-term custodial sentences remains low and there remains a high use of Community Payback Orders, which explains the low use of custody following the submission of a Criminal Justice Social Work report.

The target for 2020-21 will reduce to 3% to reflect overall trend over the last two years. This will however be reviewed at the end of the year and consideration given to lowering the target further. Consideration will also be given to making the indicator annual to better reflect the overall trend and remove the variations in numbers that can occur with quarterly data.

The Scottish Government has announced a presumption against 12 months sentences in the future and this may influence a change in this indicator.

