Performance for the People Portfolio at the Mid-Year Point

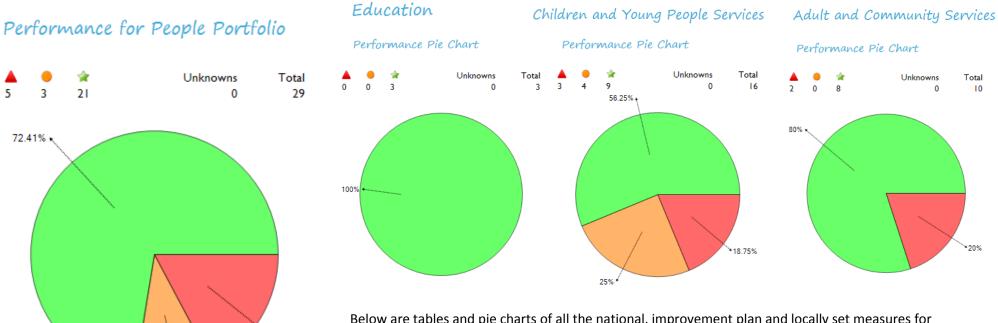
17.24%

*10.34%

This report includes September data for all performance measures in the people portfolio that are reported monthly, quarterly and half yearly. There is also a set of annual measures which will be reported at the end of the year. The exception to this is the measures reported by education which although reported once a year, the data becomes available at different points in the year, the data is reported as it becomes available.

Each service area has a set of measures made up of national, improvement plan and locally set measures. The national measures are set by the Welsh Government and used to benchmark performance against other authorities.

The pie charts below show the overall performance for the People Portfolio as well as the performance for each service area within the portfolio. Green means that measures are at or exceeding target, amber means they are within 15% of the target and red means that they are more than 15% away from target.



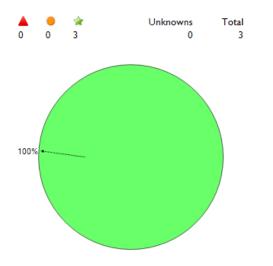
Below are tables and pie charts of all the national, improvement plan and locally set measures for the People Portfolio for September 2017.

The data is split by service area.

Education – Performance at Mid- Year Point

Education

Performance Pie Chart



General Comments from Head of Service

The targets for Quarter 2 show excellent outcomes for Foundation Phase and Key Stage 2. This is evident in national ranking (where both demonstrate an 8th national position- 8 places above Newport's deprivation ranking). The Key Stage 3 outcome was above target but remains below the all Wales average and ranked as 19th in Wales. The LA has maintained a clear focus on this area and specific work around 'Seamless Learning Pathways', improved quality assurance processes in KS3, Teacher moderation and pupil level tracking has supported a good level of pace in the Key Stage Level 5 outcome. Newport's progress over the past 4 years is approximately 2% faster than the all Wales rate of progress. If this level of pace continues, Newport should improve its overall ranking position.

Further plans to improve this area include the introduction of a specific Key Stage 3 Leadership Review which will begin in Newport schools shortly.



Direction of Travel - DoT

- Green tick performance has improved
- Red cross performance has declined
- performance remains the same

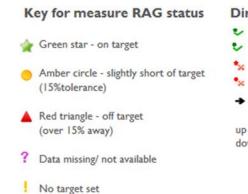
Education – Performance at Mid- Year Point

| | | | Perfor | | Target | Comments from Head of Service |
|--|--------|--------|---------|------|---------------------------|---|
| | Actual | Target | mance | | full year | |
| Measure | YTD | YTD | to date | DoT | (17/18) | |
| PAM/004 (EDU/003) | 90.10% | 89.00% | * | *x - | 89.00% | The target set for the percentage of KS2 |
| % pupils achieving the expected outcome at the end of | | | - | | | pupils reaching the expected outcome |
| KS2 (PAM) (A) | | | | | | was ambitious. A large part of the |
| | | | | | | remaining cohort represented pupils |
| | | | | | | who had language acquisition issues or |
| | | | | | | had Additional Learning Needs. Despite |
| | | | | | | this, Newport schools collectively made |
| | | | | | | more progress than planned. This is |
| | | | | | | frequently linked to bespoke support for |
| | | | | | | pupils, catch –up programmes and good |
| | | | | | | quality teaching and learning. The |
| | | | | | | aforementioned outcome resulted in |
| | | | | | | Newport being ranked 8th in Wales for |
| | | | | | | this indicator. |
| PAM/005 (EDU/004) | 84.90% | 84.40% | | • | 84.40% | The target set for the percentage of KS3 |
| % pupils achieving the expected CSI outcome at the end | | | * | • | | pupils reaching the expected outcome |
| of KS3 (PAM, IP6) (A) | | | | | | was ambitious. This was set in order to |
| | | | | | | maintain the pace of progress beyond |
| | | | | | | the Wales average rate of progress. A LA |
| | | | | | | focus on improving the quality of pupil |
| | | | | | | level tracking systems and quality |
| | | | | | | assurance systems has resulted in a |
| | | | | | | higher than expected outcome. |
| | | | | | | However this indicator still needs to |
| | | | | | Key for m | improve and is below the average easure RAG status Direction of Travel - DoT percentage of young people who |
| | | | | | A C | achieve the KS3 expected outcome performance has impro |
| | | | | | Green star | - on target the new or performance has impro |
| | | | | | Amber cire (15%tolera) | cle - slightly short of target Red cross - performance has declin unce) |
| | | | | | | performance remains the same |
| | | | | | | le - off target |
| | | | | | (over 15% | away) up arrows indicate that high values are down arrows indicate low values are b |
| | | | | | ? Data missi | ng/ not available |
| | | | | | | |

No target set

Education – Performance at Mid- Year Point

| Measure | Actual YTD | Target YTD | Perfor mance to date | DoT | Target full year (17/18) | Comments from Head of Service |
|--|---------------|---------------|----------------------------|-----|--------------------------------|---|
| PAM/003 (EDU/L/058) % pupils achieving the expected outcome at the end of the Foundation Phase (A) | 89.20% | 88.40% | * | • | 88.40% | The target set for the percentage of Foundation Phase pupils reaching the expected outcome was ambitious. A large part of the remaining cohort represented pupils who had language acquisition issues or had Additional Learning Needs. Despite this, Newport schools collectively made more progress than planned. This is frequently linked to bespoke support for pupils, catch –up programmes and good quality teaching and learning. The aforementioned outcome resulted in Newport being ranked 8th in Wales for this indicator. |

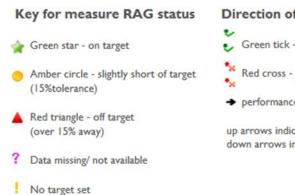


Direction of Travel - DoT

- Green tick performance has improved
- Red cross performance has declined
- ➔ performance remains the same

Education Annual measures – Collected on an annual basis - data will be available March 2017/18.

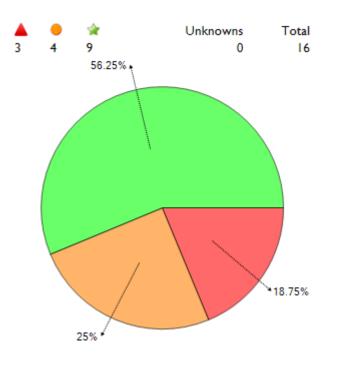
| Measure | |
|-----------------------|--|
| EDU/006 ii) | Pupils KS3 Teacher Assessment in Welsh % (A) |
| EDU/L/064 | % of pupils achieving KS4 level 2 (A) |
| EDU/L/065 | Inc in the no of schools being accredited at Healthy Schools Level 4 and 5 (A) |
| EDU/L/066 | Inc in no of schools who have gained the National Quality Award in Healthy Schools (A) |
| PAM/006 (EDU/017) | Pupils achieving level 2 threshold inc English & Maths % (PAM, IP6) (A) |
| PAM/007 (EDU/016a) | Attendance Primary Year-end % (PAM, IP6) (A) |
| PAM/008 (EDU/016b) | Attendance Secondary Year-end % (PAM, IP6) (A) |
| EDU/010b) (N) | Total no of days lost to secondary fixed term exclusions (IP6) (A) |
| EDU/L/061 | Percentage of FSM pupils achieving Level 2 Inclusive (A) (IP6) |
| EDU/L/062 | Pupils achieving Level 2 Maths (A) (IP6) |
| EDU/L/063 | Pupils achieving Level 2 English (A) (IP6) |
| EDU/L/067 (RIH/L/048) |) % young people recorded as unknown following compulsory education (A) (IP5) |
| NEET\09 | % 16 - 18 yr olds not in education, employ or training (IP5) (A) |
| NEET\11 | % Young people NEET 13 (IP5) (A) |
| PAM/009 % Young pec | ople NEET Year 11 (PAM, IP5) (A) |



Direction of Travel - DoT

- Green tick performance has improved
- Red cross performance has declined
- ➔ performance remains the same

Performance Pie Chart



General Comments from Head of Service

Overall performance in Children's Services as highlighted by the measures is mixed. This performance is against a background of a significant and worrying rise in the number of children becoming looked after and a corresponding rise in the number of children subject to care proceedings. Newport has been an outrider in Wales (and indeed the UK) in sustaining stable numbers of looked after children. However, since June 2017 there has been an unexplained rise. The number of children currently subject to Interim Care Orders has doubled in the past five months. This is a pattern across Wales and CAFCASS is reporting increases in almost all Local Authority areas. Work has been undertaken to analyse the rise but there is no discernible patterns or cluster of factors. The rise is the subject of concern in Wales and England and has resulted in a National Inquiry to understand the change. For performance this impact of this rise is clear in terms of the capacity of staff to be able to carry out work which is not directly related to court work.

| Measure | Actual YTD | Target YTD | Perfor mance to date | DoT | Target full year (17/18) | Head of Service Comment |
|---|---------------|---------------|-------------------------------|-----|--------------------------------|---|
| YJ/L/19 % Young people statutory orders who re-offend within 12 months (Q) (IP8) | 52.90% | 30.00% | | V | 30.00% | The direction of travel is green. This year has seen a number of young people with offences arising from police operations. This group of young people are especially vulnerable because of the nature of their offending. There is work taking place across agencies and across the City to ameliorate reoffending. There are particular issues with looked after children and again there is specific work in place to address these issues to attempt to improve performance. |
| CYP/34b Care leavers who are in education, training or employment at 24 months (SSPM) (M) | 38.10% | 45.00% | | v | 45.00% | This is a new measure since the introduction of the SSWA. Setting the target has therefore been without previous benchmarking. It is also a small group of young people so one or two young people can have significant influence on the performance. The service is looking more widely at provision for care leavers especially older care leavers. The use of the recently received consequential grant funding has made it possible to employ additional staff who will impact on this area of need. |
| YJ/L/13 Number of first time entrants into youth justice system (M) (IP8) | 46 | 39 | | × | 79 | This is a measure over which the service itself has no control. The wider services of the Council including Preventions do impact on this measure but many of |

Key for measure RAG status

- 👍 Green star on target
- Amber circle slightly short of target (15%tolerance)
- A Red triangle off target (over 15% away)
- ? Data missing/ not available
- No target set

- Direction of Travel DoT
- Green tick - performance has improved
- Red cross performance has declined
- •30
- ➔ performance remains the same

Children and Young People Service – Performance at Mid- Year Point

| | | | | | | the young people are completely unknown to early intervention services. This is a measure of the performance of a broad range of agencies and interventions and isolating any one factor as contributory to any movement is extremely rare. |
|---|--------|--------|---|----|--------|--|
| CYP/26 % of looked after children returned home from care (SSPM) (M) | 11.70% | 13.00% | • | * | 13.00% | Again this was a new measure so benchmarking when setting the target is challenging. While the measure is amber the direction of travel is red. Children's Services has experienced an increase in the number of children becoming looked after. Many of the newly looked after children are coming into care from situations of chronic and enduring neglect where there have already been repeated interventions to improve conditions. This is a change in the previous pattern and will impact on the return rate home. However, the long term care of these children is paramount and they need to remain in care. |
| CYP/30 % of children seen by a dentist within 3 months of becoming looked after (SSPM) (M) | 36.00% | 40.00% | • | ** | 40.00% | There are continued issues in securing this information accurately. However, they are being addressed. |
| CYP/33 PAM/029 % of looked after children who have had 3 or more placements (M) (SSPM, PAM, SP) | 9.40% | 9.00% | • | * | 9.00% | The measure is amber however it is extremely close to target. This is a measure which has been challenging over many years and the improvement over that time is pleasing. |
| YJ/L/18 % Young People Out of Court Disposals Re-offend within 12 months (Q) (IP8) | 20% | 30% | * | * | 30% | |
| CYP/24 PAM/028 % of assessments completed | 91.70% | 90.00% | * | ₹⁄ | 90.00% | |

No target set

Direction of Travel - DoT

- Green tick performance has improved
- Red cross performance has declined
- performance remains the same

Children and Young People Service – Performance at Mid- Year Point

| for children within statutory timescales (SSPM, PAM) (M) | | | | | |
|---|--------|--------|---|----------|--------|
| CYP/25 % of children supported to remain living within their family (SSPM) (M) | 66.60% | 65.00% | * | * | 65.00% |
| CYP/27 % of re-registrations of children on local authority Child Protection Registers (SSPM) (M) | 10.10% | 12.00% | * | ~ | 12.00% |
| CYP/28 The average length of time for all children who were on the CPR during the year (SSPM) (M) | 254.5 | 300 | * | ~ | 300 |
| CYP/31 % of children looked after who were registered with a GP within 10 working days (SSPM) (M) | 90.20% | 90.00% | * | v | 90.00% |
| CYP/32 SCC/002 % of looked after children who have had 1 or more changes of school (M) (SSPM, SP) | 12.00% | 12.00% | * | * | 12.00% |
| CYP/34a Care leavers who are in education, training or employment at 12 months (SSPM) (M) | 48.10% | 45.00% | * | * | 45.00% |
| CYP/35 % of care leavers who have experienced homelessness during the year (SSPM) (M) | 8.3 | 10 | * | ** | 10 |
| YJ/L/14 Number of young people sentenced to custody (M) (IP8) | 5 | 12 | * | → | 25 |

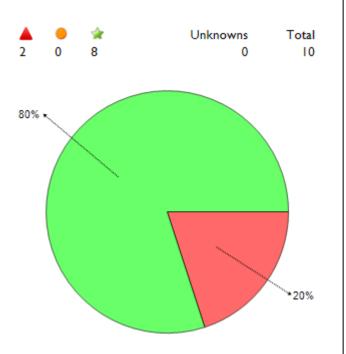


Children and Young People Service – Performance at Mid- Year Point

Children and Young People Services Annual measures – Collected on an annual basis - data will be available March 2017/18

| Measure |
|--|
| CYP/29a % of children achieving the core subject indicator at key stage 2 (SSPM) (A) |
| CYP/29b % of children achieving the core subject indicator at key stage 4 (SSPM) (A) |
| CYP/13 PAM/027 % of children satisfied with their care & support (SSPM, PAM) (A) |





Performance Pie Chart

General Comments from Head of Service

At the mid-year point performance is generally good for quarterly P.I's

Safeguarding continues to deliver strong performance. The target remained the same as last year (90%) as the development of the safeguarding hub could have affected performance in the short term. However, the actual figure is 8.2% above the required level and slightly higher than the 16/17 end of year figure. This indicates that systems and processes around safeguarding continue to operate efficiently despite continually high rates of referral.

The number of carers assessments stand at 94 against the mid year target of 45. This reflects the success of NCC's carers engagement strategy with the recent launch of the carers network that has attracted new community interest. The carers assessment is now embedded in the new Act compliant workflow processes and our ability to record numbers accurately has improved

It is interesting to note the numbers of proportionate assessments (1,039) against the number of integrated assessments. Both are green and indicate that the First Contact Team and the Community Connector service are managing demand by offering information, advice and assistance where appropriate and moving people through to an integrated assessment where eligible needs are identified. As such, we would expect the number of proportionate assessments to be the higher figure.

The number of recorded integrated assessments is higher than expected at the mid year point for those receiving a new service as the target was set at 50 per month. This will need to be monitored through the next 2 quarters, the target was estimated as this is the first year we have been required to record in this way. We may need to amend the target at year end when we are able to determine if the higher numbers are a true reflection of increasing demand.

The numbers of OT assessments and reviews is 6.1% above target and demonstrates consistently strong performance. The 16/17 annual target was exceeded and consequently was increased from 80 to 90 for 2017/18.

The two measures relating to the length of time adults remain in care homes and the average age of people entering care homes are both green but these measures have been determined as having little value. This has been discussed within the Regional Performance Group and with Welsh Government and is likely to be removed during 2018/19.

| Measure | Actual YTD | Target YTD | Perfor mance to date | DoT | Target full year (17/18) | Head of Service C | omment | |
|--|---------------|---------------|-------------------------------|-----|--------------------------------|--|--|-------------|
| ACS/19 PAM/025 Delayed Transfers of Care (SSPM, PAM, IP2, SP) # (M) | 2.8 | 1.75 | | * | 3.5 | This annual target was reduced 3.5) as a result of strong perform continuous improvement is likel This is a complex area of work a continuous management oversig interface between health and so length of stay in hospital is redu the turnover of patients and the discharges. Additionally, the ho is streamlining the discharge pro combined effect is creating addi ability of NCC to broker package community and find providers w the demand. The way in which DToC for social includes those citizens who may housing solutions. This is not a s recorded as such in that the dela Local Authority and therefore w overall performance figures. We monitor performance, activity a | nance last year but ly to be challenging. nd receives ght to monitor the ocial care. Overall, the cing and this increases e number of hospital spital in reach project ocess and the itional pressure on the es of care in the with capacity to meet al care is measured or require different social care issue but is ay is attributed to the ill impact on the e will continue to | |
| | | | | | | Key for measure RAG status | Direction of Travel - D Green tick - performance | |
| | | | | | | Amber circle - slightly short of target (15%tolerance) | Red cross - performance h | |
| | | | | | | Red triangle - off target (over 15% away) ? Data missing/ not available | performance remains the s up arrows indicate that high va down arrows indicate low value | alues are b |

No target set

| | | | | | methods. |
|--|----|----|--|-----|---|
| ACS/L/26 Number of people receiving a service from the Rehabilitation Officer (Visual Impairment) (M | 31 | 75 | | 150 | The annual target for this service was estimated at the beginning of the year as a new way of working with this client group was introduced. It is a local target and was included to ensure we were able to monitor the effectiveness of the new service model. A full time specialist employee (ROVI) based in the First Contact team has established efficient working practices and has achieved a situation where, for the first time, Newport has no waiting list. The complaints previously received from people with visual impairment in Newport have been addressed and despite much concern about the new service model no further complaints have been received. In addition to the changes in the way the service is offered, the availability of information and advice from the specialist worker is managing demand and this means that people are directed to services that are able to meet their needs satisfactorily in a different way, thereby, freeing up the time of the ROVI to address those who require more specialist support. This target refers only to those people receiving a direct service from the ROVI and does not capture the numbers receiving specialist information and advice. Therefore, this data does not accurately |

Key for measure RAG status

Amber circle - slightly short of target

👍 Green star - on target

(15%tolerance)

No target set

 Red triangle - off target (over 15% away)

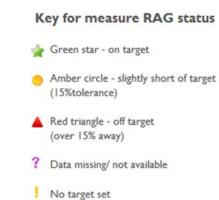
? Data missing/ not available

Direction of Travel - DoT

2

- Green tick performance has improved
 - Red cross performance has declined
 - + performance remains the same

| | | | | | | reflect the success of the service and the target needs to be amended to reflect a realistic annual caseload figure. The annual target for 2017/18 will be amended from 150 to 60. |
|--|--------|--------|---|---|--------|---|
| ACS/L/24 Number of assessments of | | | | | | |
| need for support for carers (IP2) (Q) | 94 | 45 | * | • | 90 | |
| ACS/18 The percentage of adult | | | | | | |
| protection enquiries completed within 7 | | | | | | |
| days (SSPM, IP2) (M) | 99.10% | 90.00% | * | • | 90.00% | |
| ACS/21 Length of time (days) adults are in care homes (SSPM) (M) | 835 | 1100 | * | * | 1100 | This measure has been determined as having little value in terms of demonstrating performance. This has been raised by all Local Authorities within the Regional Performance Group and with Welsh Government and is likely to be removed during 2018/19. |
| ACS/22 Average age of adults entering residential care homes (SSPM) (M) | 80.7 | 75 | * | • | 75 | |
| ACS/L/25 Number of people per month who have received a proportionate assessment (M) | 1039 | 99 | * | v | 200 | |
| ACS/L/28 % citizens who, after the Welsh Active Offer, choose to have a service delivered in Welsh | 0 | 0 | * | > | 0 | |
| CCAS/L/026 OT Assessments & Reviews % (IP1) (M) | 91.10% | 85.00% | * | • | 85.00% | |
| CCAS/L/027 Number of integrated | 603 | 300 | * | • | 600 | |



Direction of Travel - DoT

- Green tick performance has improved
- Red cross performance has declined
- ➔ performance remains the same

| assessments completed per month (IP2) | | | |
|---------------------------------------|--|--|--|
| (M) | | | |

Measure

ACS/20a reablement reduced package of care and support (A) (SSPM, IP1)

ACS/20b reablement no package of care and support (A) (SSPM, IP1)

ACS/23a Adults who have received advice and assistance no repeat contact (SSPM) (A)

ACS/23b Adults who have received advice and assistance no repeat contact (aged over 75) (SSPM, IP1)

ACS/13 PAM/024 % of adults satisfied with their care & support (SSPM, PAM) (A)

ACS/15 PAM/026 % of carers that feel supported (PAM) (A)

Adult and Community Services Annual measures – Collected on an annual basis - data will be available March 2017/18

