Appendix 1

At A Glance Half Yearly Summary Social Work Service

Generated on: 04 January 2023

Dumfries & Galloway
COUNCIL

Key:

COUNCIL PRIORITY

Council Commitment

Project Status	PI Status	Short Term Trends
Cancelled	Alert	Improved since last period
Overdue	Warning	No Change from last period
Check Progress	OK	Declined since last period
Not Started; In Progress	New	
Completed	Data Only	

PROVIDE THE BEST START IN LIFE FOR ALL OUR CHILDREN

Ensure early intervention, in particular to keep our region's most vulnerable children safe

Protect and safeguard children through fast effective information sharing and decision making through implementation of MASH (Multi-Agency Safeguarding Hub)

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Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
P2C1M5SW_PI01	% Child Protection Re-Registrations within 18 months	LGBF – Data in draft. Expected late March 2022									
P2C1M5SW_PI02	% Looked After Children with more than one placement within the last year	LGBF – Data in draft. Expected late March 2022									
P2C1M8SW_PI01	The weekly cost of a child in residential care	LGBF – Data in draft. Expected late March 2022									
P2C1M8SW_PI02	The weekly cost of a child looked after in a community setting	LGBF – Data in draft. Expected late March 2022									
P2C1M8SW_PI03	Balance of care for Looked After Children: % of children being looked after in the community	LGBF – Data in draft. Expected late March 2022									
P2C1M8SW_PI04	Percentage of children on the Child Protection Register for more than 36 weeks	Not measured for Half Years					Not measured for Half Years				
P2C1M8SW_PI05	Percentage of children on the CPR between 3 and 9 months	Not measured for Half Years					Not measured for Half Years				
P2C1M8SW_PI06	Percentage of Comprehensive assessments submitted to Scottish Children's Reporter Administration within 21 days	Not measured for Half Years					Not measured for Half Years				

Improve our identification and response to risk through continued implementation of evidence based approaches such as Neglect Took kit and Risk Assessment Framework

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Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
P2C1M9SW_PI01	Number of instances of the use of a National Risk Framework as a % of all cases of neglect identified	Not measured for Half Years					Not measured for Half Years				

Continue to offer advocacy services to ensure the voice of children and young people who are subject to child protection proceedings and LAC processes are heard

Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
P2C1M10SW_PI01	Number of interactions with 'Hear 4 U' Barnardo's Advocacy Service as a % of looked after children						100%	N/A	✅	▬	

Continue to deliver the PACE programme to ensure faster more effectively planning to secure long term futures for children and young people

Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
P2C1M12SW_PI01	% of children, looked after at home for more than 2 years, who have been subject to a peer review	Not measured for Half Years					Not measured for Half Years				

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Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
P2C1M12SW_PI02	% of children who have a recommendation for permanence within 26 weeks of accommodation	Not measured for Half Years					Not measured for Half Years				
P2C1M12SW_PI03	% of children who have had permanence away from home who are presented to the permanence panel within 12 weeks of recommendation	Not measured for Half Years					Not measured for Half Years				
P2C1M12SW_PI04	% of Agency Decision Maker (AMD) approved permanence orders lodged within 16 weeks of ADM sign off	Not measured for Half Years					Not measured for Half Years				
P2C1M12SW_PI05	Number and / or percentage of children and young people in a permanent placement within 12 months of the decision for permanence being made	Not measured for Half Years					Not measured for Half Years				

PROTECT OUR MOST VULNERABLE PEOPLE

Help our older or vulnerable people live healthy and independent lives

Accelerate the rollout of self-directed care for people who want more freedom to determine their own needs

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Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
P3C2M1SW_PI01	Self Directed Support (Direct Payments and Managed Personalised Budgets) spend on adults 18+ as a % of total social work spend on adults 18+					LGBF – Data in draft. Expected late March 2022					

People using social care services are safe from harm

Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
P3C2M2SW_PI01	Percentage of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life					LGBF – Data in draft. Expected late March 2022					
P3C2M2SW_PI02	Percentage of adults supported at home who agreed that they are supported to live as independently as possible					LGBF – Data in draft. Expected late March 2022					
P3C2M2SW_PI03	Percentage of adults supported at home who agree that they had a say in how their help, care or support was provided					LGBF – Data in draft. Expected late March 2022					

Ensure our older or vulnerable people receive the care and support they need

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<table>
<tr><td colspan="10" style="background:#ccc">Efficiently deliver fully integrated health and social care services by collaborating with NHS Dumfries and Galloway and other partners.</td></tr>
</table>

Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
P3C3M2SW_PI02	Percentage of people 65+ with long-term needs receiving personal care at home										LGBF – Data in draft. Expected late March 2022
P3C3M2SW_PI01	Older Persons (Over 65) Home Care Costs per Hour										LGBF – Data in draft. Expected late March 2022
P3C3M2SW_PI03	Weekly Residential Care costs for older Adults										LGBF – Data in draft. Expected late March 2022

<table>
<tr><td style="background:#ccc">Keep our communities safe</td></tr>
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<table>
<tr><td style="background:#ccc">Stand up to domestic abuse and work with partners to ensure effective support is available to families and people across the region living with abuse and the effects of abuse.</td></tr>
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Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
P3C4M3SW_PI01	% of CJ SWS Reports Submitted within Timescale	100%	95%	✅	▬		100%	95%	✅	⬆	
P3C4M3SW_PI02	% of CJ CPO clients, where a CJ report was prepared, seen by a supervising officer within 1 week	86.5%	90%	✅	⬆		78%	90%	⚠	⬆	
P3C4M3SW_PI03	% of SW led MAPPA level 1 cases reviewed within required timescales	100%	90%	✅	⬆		100%	90%	✅	⬆	
P3C4M3SW_PI04	% of individuals subject to Throughcare Licence conditions seen within 24 working hours of release from custody	92%	100%	✅	⬇		100%	100%	✅	⬆	
P3C4M3SW_PI05	All appropriate protection concerns screened by dedicated SW staff within MASH (Adult and Child) within 24 hours	Not measured for Half Years					Not measured for Half Years				
P3C4M3SW_PI06	Formal follow up on protection conferences to ensure communication and engagement with service users	Not measured for Half Years					Not measured for Half Years				
P3C4M3SW_PI07	Number of referrals to specialist (Violence Against Women and Girls) VAWG support services	Not measured for Half Years					Not measured for Half Years				
P3C4M3SW_PI08	Number of referrals to specialist VAWG perpetrator interventions/services	Not measured for Half Years					Not measured for Half Years				
P3C4M3SW_PI09	% of referrals who successfully complete specialist perpetrator interventions	Not measured for Half Years					Not measured for Half Years				
P3C4M3SW_PI10	% of women and children affected by VAWG who report feeling safer	Not measured for Half Years					Not measured for Half Years				
P3C4M3SW_PI11	% women and children affected by VAWG who report having increased levels of wellbeing	Not measured for Half Years					Not measured for Half Years				

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Key Functions - Performance Scorecard

People / Learning and Growth Indicators

Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
DG03_SW	The average number of days lost per all other (non-teacher) local government employees through sickness absence	6.32 days	4.5 days	🛑	⬇️	9 days	5.4 days	4.5 days	🛑	⬆️	YES
DG04_SW	Percentage of days lost per employee through sickness absence as a percentage of total possible attendances	5.37%	4%	⚠️	⬇️	4%	4.75%	4%	✅	⬆️	
DG11_SW	Percentage of staff who have completed an annual performance development review	43%	95%	🛑	⬆️	95%	42%	95%	🛑	⬇️	YES
DG13_SW	Level of positive engagement recorded in employee survey	87%	80%	✅	➖	80%	87%	80%	✅	➖	
DG16_SW	Percentage of Council staff who know how their job contributes to Council Priorities	88.89%	80%	✅	➖	80%	88.89%	80%	✅	➖	

Process Indicators

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Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
DG20_SW	Percentage of Member enquiries dealt with through the Elected Members Enquiry Service within the agreed timescales	95.65%	85%	✅	⬆️	85%	100%	85%	✅	⬆️	
DG21_SW	Percentage of Stage 2 complaint responses issued within statutory timescales	33.33%	80%	🛑	⬆️	80%	28.57%	80%	🛑	⬇️	YES
DG29_SW	Percentage of Freedom of Information and Environmental Information (Scotland) Regulations requests received that have been responded to within 20 working days of receipt	94%	90%	✅	⬆️	90%	91%	90%	✅	⬇️	
DG30_SW	Percentage of requests for subject access requests completed within one month	97%	85%	✅	⬇️	85%	100%	85%	✅	➖	
DG31_SW	Percentage of Community Council enquiries dealt with through the Community Council Enquiry Service within the agreed timescale.	0	85%	✅	➖	85%	0	85%	✅	➖	
DG32_SW	Percentage of MP/MSP enquiries dealt with through the Enquiry Service within agreed timescale	100%	85%	✅	⬆️	85%	100%	85%	✅	⬆️	
DG33_SW	Percentage of Youth Councillor enquiries dealt with through the Enquiry Service within the agreed timescale	0	85%	✅	➖	85%	100%	85%	✅	➖	

Finance / Asset Indicators

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Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
DG07_SW	Revenue Budget Outturn - Projected Outturn as a % of Budget	100%	100%	✅	⬆️	100%	101.67%	100%	✅	⬇️	

Code	Risk	Risk Factors	Mitigation / Contingency	Original Risk	Current Risk	Target Risk	Latest position
CYPLL 08	As a result of systemic failure - we fail to protect our most vulnerable citizens from the cradle to the grave.	1. Someone dies or suffers significant harm. 2. Sustained reputational damage. 3. Legal redress. 4. Impact on frontline staff.	**Mitigation** 1. Child and adult protection arrangements 2. including the Public Protection Committee 3. multi-agency policies and procedures.				SWS Strategic Leadership continue to deliver the management and mitigation arrangements across each service to minimise any potential service failure. Agreed triggers and warning escalations are in place for each risk and management arrangements are in line with the council's risk management framework.
CYPLL 09	Shortfall of skilled SWS staff to deliver statutory duties as a result of social, economic and demographic changes.	1. Inability to deliver statutory duties. 2. Increased risk to clients. 3. Increased risk to community. 4. Reputational damage. 5. Impact to remaining staff	**Mitigation** 1. Continuing to recruit posts and ensuring terms and conditions are competitive. 2. Grow Your Own Scheme. 3. Council commitment to Organisational Development Framework. 4. Unallocated Work Policy. 5. Work Load Management. 6. PDRs**.**				SWS continue to promote opportunities both internally and externally and are developing a workforce strategy incorporating initiatives such as 'Grown Your Own' in pursuit of a
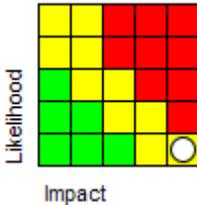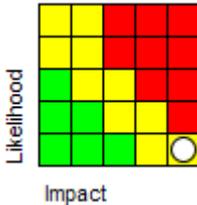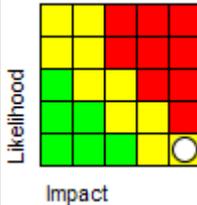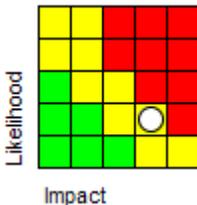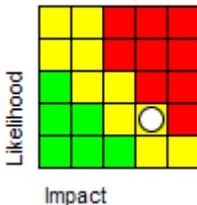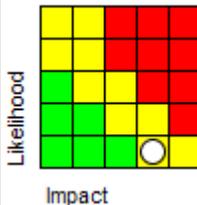
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Code	Risk	Risk Factors	Mitigation / Contingency	Original Risk	Current Risk	Target Risk	Latest position
							sustainable, skilled workforce
CYPLL 10	Failure to adapt practices in response to decreasing finances within the given timescale.	1. Existing work practices may become unsustainable. 2. Reduction in capacity to support people at risk of harm.	**Mitigation** Social Work Change Programme				SWS Strategic Leadership continue to deliver the management and mitigation arrangements across each service to minimise any potential service failure. Agreed triggers and warning escalations are in place for each risk and management arrangements are in line with the council's risk management framework.
CYPLL 11	Failure of electronic information system.	1. Inability to deliver front line services. 2. Reduction in capacity to support people at risk of harm. 3. Reduction in efficiency.	**Mitigation** 1. TS backup system. 2. SWS Business Systems Governance Group.				SWS Strategic Leadership continue to deliver the management and mitigation arrangements across each service to minimise any potential service failure. Agreed triggers and warning escalations are in place for each risk and management arrangements are in line with the council's risk management framework.

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Our Service will set out and demonstrate our commitment and arrangements for health and safety

Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
HSHSA1_SW	Head of Service H&S Management Arrangements are up-to-date, relevant and within programmed review.					Yes		Yes	[?]	[?]	

Our Service shall incorporate health and safety considerations when planning activities and before carrying out tasks

Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
HSHSB1_SW	Health & Safety priorities from Head of Service (risk based) have been provided to H&S.	Not measured for Half Years				Yes	Not measured for Half Years				
HSHSB2_SW	Head of Service has trained Health & Safety Duty Holders appointed and recorded in register					Yes	Yes	Yes	✅	⬆️	
HSHSB3_SW	Planned occupational health needs verified and submitted to OD&HR.	Not measured for Half Years				Yes	Not measured for Half Years				
HSHSB4_SW	H&S risks and resource considered within business cases/Project Briefs					Yes					

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<div style="background-color:#fcfcd0">Our Service shall ensure people have the competency to enable them to fulfil their H&S responsibilities</div>

Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
HSHSC1_SW	Competence requirements for Service Manager posts reviewed in terms of managing their service safely	Not measured for Half Years				Yes	Not measured for Half Years				
HSHSC2_SW	Service Health & Safety training requirements reviewed, prioritised and submitted to Lifelong Learning Centre	Not measured for Half Years					Not measured for Half Years				

<div style="background-color:#fcfcd0">Our Service shall consult, engage and communicate effectively on H&S arrangements</div>

Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
HSHSD1_SW	Consultation arrangements for H&S Implemented					Yes	Yes	Yes	✅	➖	
HSHSD2_SW	Communication arrangements for H&S Implemented					24					
HSHSD2a_SW	Number of Service wide Management meetings where H&S is discussed		5			10		5			
HSHSD2b_SW	Number of H&S Briefing Notes provided to managers		5			10		5			

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Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
HSHSD2c_SW	Number of H&S Newsletters issued to staff					4					

Our Service shall work safely and be positive and pro-active in our approach

Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
HSHSE1_SW	Implementation of service H&S risk priorities					90%					
HSHSE2_SW	Action plans produced within 6 weeks following health and safety management audits					Yes					
HSHSE3_SW	Percentage of Corporate Health & Safety Audit Service action plans completed or on target as planned and agreed					90%					

Our Service shall monitor that we are managing H&S effectively

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Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
HSHSF1_SW	H&S Support offered and performance reviewed with Service Management					Yes					
HSHSF2_SW	Percentage of Service Health & Safety Plan actions completed or on target and verified by the Head of Service					90%					
HSHSF3_SW	Number of planning/review meetings held between Head of Service and H&S Partner					2					
HSHSF4_SW	Number of performance reports incorporating delivery of Service Health & Safety Action Plan submitted to Service Committee					2					
HSHSF5_SW	Carry out statistical analysis of work-related incidents and ill health and take appropriate actions	Not measured for Half Years				Yes	Not measured for Half Years				
HSHSRID4_SW	Percentage of RIDDOR investigations completed within 3 weeks		N/A					N/A			
HSHSRID5_SW	Percentage of RIDDOR incidents reported to HSE within legal timescales		N/A					N/A			

Our Service shall audit and review our H&S arrangements to encourage continuous improvement

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Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
HSHSG1_SW	Percentage of planned Service Health & Safety audits carried out					90%					

Incident Information

Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
HSHSINC1A_SW	Number of Service-wide employee accidents		N/A				16	N/A	📈	⬇️	
HSHSINC1B_SW	Number of Service-wide violent incidents (all)		N/A				7	N/A	📈	⬆️	
HSHSINC1C_SW	Number of Service-wide employee near miss incidents		N/A				1	N/A	📈	⬆️	
HSHSRID1_SW	Total number of Service-wide employee RIDDOR reportable incidents		N/A				2	N/A	📈	⬆️	
HSHSRID1A_SW	Service-wide RIDDOR employee reportable incidents over 7 days		N/A				1	N/A	📈	⬆️	
HSHSRID1B_SW	Service-wide RIDDOR employee serious injuries		N/A				1	N/A	📈	⬇️	
HSHSRID1C_SW	Number of Service-wide RIDDOR employee specified diseases		N/A				0	N/A	📈	➖	
HSHSRID2_SW	Number of Service-wide RIDDOR dangerous occurrences.		N/A				0	N/A	📈	⬇️	

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Code	Key Performance Indicators	H1 2022/23				Annual Target 2022/23	H1 2021/22				Exception Report
		Value	Target	Status	Long Trend		Value	Target	Status	Long Trend	
HSHSRID3_SW	No. 3rd party RIDDOR incidents		N/A				0	N/A	📈	⬆	