**Performance Management Framework**

**Stoke-on-Trent One Psychology Service**

This Performance Management Framework should be read in conjunction with the Service Specification and Terms and Conditions issued by Stoke-on-Trent City Council

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**1. PRINCIPLES**

The overarching principle of performance management is the achievement of outcomes for children/young people and families and that these determine the performance of the services rather than information on processes and outputs.

The following principles underpin the process for performance management:

* All elements of the process are proportionate to the level of investment
* The process is undertaken in a transparent and accountable manner with clear timetables for reporting
* There will be clear process for identifying and rectifying poor or underperformance which Service Providers will be made aware of
* The expectations of the Commissioners in relation to performance will be set out clearly within the contractual arrangements and processes will be in place to verify the achievement of results
* Information and data should only be collected once, even if it is reported several times.
* The active involvement of children, young people and their families will be embedded in the monitoring of performance and service improvement

**2. METHODOLOGY**

The model below demonstrates a cyclical process for performance management. Each step is explained and details of both the Commissioner and Service Provider roles and responsibilities are explained in Schedule 3.

**Strategic aim**

**Measures & targets set**

**Developing monitoring processes**

**Monitoring & review**

**Performance Management Cycle**

**2b. Strategic Priorities**

The One Psychology Service works in multi-agency partnerships to provide support and interventions focused on reducing risk of placement breakdown for Looked after Children (LAC) by empowering the individuals working with LAC to support LAC to develop resilience and improve life outcomes. The strategic priorities are outlined in 1.2 of the service specification.

**2c. Measures and Targets**

The One Psychology Service has targets which the Commissioners can measure against on a quarterly basis. The targets are identified in measurable outcomes and clearly identified milestones that are **SMART.**

**2c.1. Outcomes**

The Outcomes for the One Psychology service are the changes, benefits or other effects that happen at the following levels:

* Service level
* Individual children and young people
* Carers

The required outcomes for the service are identified in section 3 below. These outcomes are SMART.

SMART outcomes are;

* **Specific** anddeal with discrete rather than broad dimensions
* **Measurable** whichenable managers to monitoring performance
* **Achievable** enabling us to build on success
* **Realistic** enabling us to work within our resources and skill levels
* **Time-limited** helping us to stay motivated and focused

The focus is on *impact* (outcome) rather than *effort* (inputs/outputs).

**Core service**

Specific targets will be agreed following a competitive tendering process.

**Pilot**

In the first year the Service Provider will be expected to report against the indicators as set out in 3a (pilot). Following the first year of delivery the data from the indicators will be used as the baseline of performance targets of which future performance will be measured, should the pilot be extended. Performance targets will be in place for the commencement of year two, prior to year two the performance targets will be negotiated with the Service Provider.

**2c.2. User satisfaction**

This includes the service user experience of the One Psychology Service, such as ease of access, location, staff, support, opening hours etc. The service is expected to gather service user’s voice to inform service delivery, user satisfaction is vital in service improvement. Service user feedback and the impact service delivery will also inform any roll out of the pilot aspects of the service. For the purpose of this service, the service user is the carer or carers of the LAC, although it is anticipated that as a matter of good practice, the children and young people for whom the referral is concerned will be engaged and supported to give their views and opinions on the service.

**2d. Developing monitoring processes**

The Service Provider will be required to collect and report data for the Commissioner. A comprehensive performance report will be sent to the Commissioners on a quarterly basis, format to be agreed with Commissioners.

To enable the Commissioners to monitor the level of activity in the provision of services, the Service Provider shall keep comprehensive administrative records in order to document all aspects of the operation, management and development. The Service Provider will be competent in analysing data, identifying trends and providing explanations to changes in trends. This information will support service development and ensure it has a proactive approach.

**2d.1. Service user/statistical data**

Service user information will include demographic data (age, gender, ethnicity, disability). A basic data set can be found in section 3b. Data from the basic data set will need to be accessed for audit purposes and potentially any inspection regime.

**2e. Clients waiting for the service to commence: Pilot**

The Service Provider will routinely monitor and report to the commissioners on a quarterly basis:

* Numbers on caseload
* Those assessed awaiting intervention
* Length of time between referral to delivery of support

Specific targets will be agreed following a competitive tendering process.

**3 MEASURES**

There are two sets of measures the Service Provider will be expected to report on:

* Performance outcome data – the service performance will be measured on the outcome data (see 3.a).
* Intelligence data set – the service will collect this data for analytical purposes only, service performance will not be measured on this data set (see 3.b).

**3a Performance outcome data**

The following outcomes and outcome indicators will apply to the one Psychology Service

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | | **Core service** | **Pilot** |
| **Strategic priorities** | 1 | This service will support our children’s social care workforce to provide consistent and safe care for our children in care and children on the edge of care, along with their families and foster carers. | √ | √ |
| 2 | This service will create a way of working that informs understanding and managing young people’s behaviour and risk by placing them at the heart of the intervention with the aim of supporting the system around the child | √ | √ |
| 3 | This service will provide support, knowledge, upskilling and confidence to the children’s social care workforce (Small Group Home in-house residential care staff, in-house Foster Carers and Social Workers/ Team Managers/ SW Assistants) which will inform the most effective, safe and evidence-based care decision. | √ | √ |
| 4 | The approach delivered by this service will be psychologically informed and evidence-based aimed at managing young people’s behaviour and minimising risk, helping them to live in stable care placements locally, attend school regularly and retain positive peer friendship groups. |  |  |
| **High level outcomes** | 1 | Increased placement stability | √ | √ |
| 2 | Decrease in use of external foster agencies | √ | √ |
| 3 | Decrease in use of external residential children’s homes | √ | √ |
| 4 | All small group homes are Oftsed rated good or outstanding | √ |  |
| **Indicators/measures** | 1 | Foster carers have increased capability , skills and knowledge to support looked after children |  | √ |
| 2 | Staff have increased capability , skills and knowledge to support looked after children | √ |  |
| 3 | Children feel safe and secure with their carers | √ | √ |
| **Milestones**  To be included in final version | 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| **Targets**  To be included in final version |  |  |  |  |

It is anticipated these indicators/measures may flex and change over the life of the contract, in agreement with the Service Provider.

The Commissioner is prepared to consider the inclusion of any additional indicators suggested by the Service Provider relating to the delivery of this service that will add to the performance management approach of this contract.

**3b. Intelligence Data Set**

**Pilot**

These will be reviewed with the Service Provider as the service develops.

|  |
| --- |
| **Minimum data set to be submitted as an Excel Spreadsheet** |
| Total number of newly referred cases to the service this quarter |
| Total number that had a one off contact |
| Total number of re-referrals |
| Total number received regular intervention (i.e. at least two contacts in the quarter; these must be face to face or two-way telephone/email support). |
| Total caseload number |
| Total number ceased intervention and reasons |
| Demographic data set of the LAC for whom the referral was made this quarter, those received regular intervention and those on the waiting list. |
| Number of service users exiting the service this quarter and reasons/outcomes i.e.   * Disengaged * Moved away * Outcomes achieved * No longer LAC * Other |

Narrative report

A narrative report should be provided to Commissioners every quarter identifying at a minimum, what is working well, challenges and how they are being overcome.

**4. MONITORING AND REVIEW**

**4a. Performance Management and Monitoring of Services**

Performance management is overseen by the Senior Commissioning Officer and Strategic Manager for Looked after Children. Performance management will form an integral part of contract monitoring via Service Reviews and quarterly reporting.

On a quarterly basis the Service Provider will provide a written report setting out:

* An overview of performance across the service provision
* A review of performance of the core service, data and a narrative analysis and commentary
* A review of performance of the pilot, including data and a narrative analysis /commentary and findings

The Service Provider will be required to utilise an appropriate electronic information management system for the recording of data.

With agreement from the Service Provider and service users, good practice will be highlighted with local authority relevant partnership board and other media reporting systems.

The reporting periods align to the financial quarters;

|  |  |
| --- | --- |
| Reporting periods / activity | **Date report due** |
| July – Sept 2018 | 13th October 2018 |
| October-December 2018 | 11th Jan 2019 |
| Jan- March 2019 | 12th April 2019 |
| April-June 2019 | 12th July 2019 |
| July – Sept 2019 | 11th October 2019 |
| October-December 2019 | 10th Jan 2020 |
| Jan- March 2020 | 10th April 2020 |
| April-June 2020 | 10th July 2020 |
| July – Sept 2020 | 9th October 2020 |
| October-December 2020 | 8th Jan 2021 |
| Jan- March 2021 | 9th April 2021 |
| April-June 2021 | 30th June 2021 |
| Contract meetings | Quarterly |
| Quality standards reporting | Report back in contract meetings |
| Performance review meetings | Monthly in the first year |
| Annual Contract Review | July |

**4. b Performance Reviews**

Performance Reviews will take place as part of contract monitoring with the Service Provider and the Commissioners in order to discuss and review service performance. In the first year, Performance Reviews will initially be held monthly, moving to three monthly in future years, providing performance is satisfactory. This may differ between the core service and pilot. In addition, the Service Provider and the Commissioners may call for a performance review to be convened - with reasonable notice - in the event that an issue of sufficient importance and urgency has arisen that waiting until next scheduled service review is inappropriate. These are separate to service development days which will focus on the operational elements and delivery of the core service and development of the pilot and are in addition to contact days and training sessions.

The Performance Review will consider:

1. Progress towards full core service delivery, including the achievement of outcomes.
2. Progress towards service delivery of the pilot, including the achievement of outcomes.
3. Service Provider performance data for the preceding monthly/quarterly period
4. Results of any Service Provider data reviews carried out in the immediately preceding quarterly period
5. Results of Service User satisfaction surveys, service evaluation studies and Service User feedback recently gathered
6. Complaints received in the immediately preceding monthly/quarterly period

(vi) Any other relevant issues

At any time throughout the contract period Stoke-on-Trent City Council may decide to conduct a root and branch quality assessment of the service. This may include onsite visits to conduct discussions with staff, service users, LAC, their families and any other relevant stakeholders that come into contact with the service

The Commissioners will require access at any time to a selection of anonymised case files of the service users accessing the service in order to validate that outcomes are being met and quality maintained

In addition to quarterly performance reporting, there will be an annual review which will cover:

* Health and safety
* Policies including whistleblowing
* Quality
* User involvement
* Case file audits

This will involve both self-assessment by the Service Provider and direct evaluation by the Commissioners. At this review evidence to support the quarterly monitoring reports will be viewed by the Commissioners.

**4c. Monitoring Defaults**

Failure to comply with monitoring and performance requirements and late submission of performance reports may be seen as a breach of contract and subsequent action may be taken in accordance with Schedule 2 and the default provisions in the legal agreement.

**4d. Variations in Targets**

The Service Provider will inform the Commissioners at the earliest possible opportunity in the event of:

* Anticipated or actual shortfalls in target /outcomes/activities;
* Demand exceeding capacity;
* Reasons for the above.

**4e. Under-performance, rapid course correction**

If the service is found to be under-performing (Schedule 2) an action plan will be agreed and monitored with the commissioner. The process flowchart for this can be found in Schedule 3.

**5. GOVERNANCE AND ACCOUNTABILITY**

**5a Quality**

Underpinning effective service delivery is “quality.” The Service Provider will be expected to demonstrate that the service is of good quality and provide value for money.

**5b. Quality Standards**

It is expected that the Service Provider utilises a recognised quality standard. Where this is not possible (because a standard does not exist or is not nationally recognised) the Service Provider will be expected to demonstrate how they ensure quality using an identified “in-house” system. Third Sector Service Providers are encouraged to use PQASSO (Practical Quality Assurance System for Small Organisations). Third Sector organisations that are members of an umbrella organisation may also use that organisation’s in-house model.

At a minimum, a quality assurance standard should include:

* governance,
* risk management
* financial management,
* resource management,
* equality and diversity,
* staffing and supervision,
* DBS updates and safeguarding (including, Section 11 Safeguarding Children Audit),
* health and safety,
* Data protection.

**5c Involvement of stakeholders**

It is essential that staff, service users and other stakeholders are involved in performance and quality reviews and the Service Provider will be expected to demonstrate how they do this.

**5d. Finance**

A statement of actual expenditure for each quarter and projected expenditure for the following quarter should be provided with the performance monitoring information by the deadlines given in the monitoring and review section above. An exception report should be provided if there is a variation of more than 15% on predicted expenditure in any quarter. This should cover:

* reasons for variance
* corrective measures taken
* re-profiled annual budget

**6. MOBILISATION**

Tenderers are expected to submit their own mobilisation plan within their tender application which will be incorporated below.

|  |  |  |  |
| --- | --- | --- | --- |
| **Milestone/Activities** | **Timeframe** | **Core service (√)** | **Pilot (√)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Schedule 1**

**Performance management cycle roles and responsibilities**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Documentation** | **Commissioner role** | **Service Provider role** | **Review frequency** |
| **Strategic Priorities** | Detailed in the service specification | To clarify with the Service Provider the  strategic aim of the service in relation to what is being commissioned and align with CYPP and national/ local targets | To deliver the strategic aim of the service and contribute to identified local/ national targets and priorities | Annually |
| **Agreeing annual measures and targets** | Detailed in the service specification | To set the measures and targets with the  Service Provider outcomes/ outputs/  milestones | To deliver against the targets set | Annually |
| **Developing the monitoring process** | Data bases/ spreadsheets.  templates | To support and advise the Service Provider on setting up systems | To design data bases/ spreadsheets and other relevant data collection methods | Annually |
| **Record information** | Data bases/ spreadsheets.  templates | To support the Service Provider and quality check the information being recorded (Audit) | To collect information and input onto databases/ spreadsheets and other relevant monitoring systems | Daily/weekly |
| **Monitoring & evaluation** | Monitoring templates | Provide relevant monitoring templates for reporting and check returns against predicted results. Take action if under performance | Extract the information, complete the monitoring templates and return to the commissioner. Reflect on activity & achievements and share good practice | Quarterly |
| **Review & revision** | Service review | -In-depth service performance review  -Take action if there is cause for concern  - Re design or re commission service  - Share good practice & learning | Provide evidence of outcomes/ outputs for review  Work with commissioners regarding redesign, where appropriate | Monthly/quarterly/bi annually as agreed |

**Schedule 2**

Performance Rating System

This should be read in conjunction with the underperformance flowchart Schedule 3 to appreciate the process of withholding payments.

**A service will be graded RED and therefore 5% of the annual payment will be withheld when………**

* Achievement is less than 80% of outcomes being achieved in the reporting period. Consideration should be given to cumulative achievement.
* 50% milestones/activities not achieved -agreed changes to service delivery not implemented in the reporting period
* Monitoring and evaluation is not taking place within specified timeframe
* There are complaints regarding service provision
* Service users not being actively involved and are passive users of the service
* Over or under spend of budget
* Improvements have not been made following an agreed action plan

**A service will be graded AMBER and will be considered to be under performing when……….**

* Achievement is between 80-90% outcomes and milestones being achieved
* 80% milestones/activities have been achieved
* agreed plans for changes to service delivery are in place
* monitoring and evaluation for the quarter is taking place
* service users are sometimes actively involved
* Expenditure is according to contract
* Good practice is identified, shared and implemented internally

**A service will be rated** **GREEN** **when ………**

* outcomes and milestones are being fully achieved (from predicted annual returns)
* milestones/activities have been achieved and new ones set (from predicted annual returns)
* agreed changes to service delivery are made to ensure continued excellence
* Additional regular internal monitoring and evaluation takes place
* service users are always actively involved at every stage of service planning, design and delivery
* The service demonstrates that learning and knowledge has been applied to improve the service
* Good practice is identified shared internally and externally

**Schedule 3**

**Under – performance/default (U/P)**

U/P identified at:

* Monthly meeting
* Quarterly monitoring
* annual contract, quality review

- Other

Develop an action plan identifying:

* areas of U/P
* actions to be taken
* timeframe
* accountability and responsibility

Action plan completed

No further action.

Progress report to commissioners.

Action plan not adhered to within set timeframe. Performance not improved

Further meeting with commissioner FINAL re-negotiated action plan. Exception Report to Assistant Director Children’s Social Care or equivalent.

Instigate penalty clauses/. Decommission service

No improvement

Improvement

Review Meeting arranged