

Discovery – Scrutiny Update

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Cabinet Member: David Huxtable

Division and Local Member: N/A

1. Summary

1.1. This report provides scrutiny with an update on the performance of the Discovery contract. It includes overall measures of the contract, and also provides wider information on the delivery of the contract. It includes specific updates on:

- Key Performance Indicators and general performance
- transformational activity, including day services, employment support and reviews of people supported
- financial update of the contract
- challenges to delivery and quality performance
- stakeholder update

2. Issues for consideration / Recommendations

2.1 Scrutiny is asked to note the current performance of the Discovery contract as set out in section 5.1

2.2 Scrutiny is asked to note the wider engagement with stakeholders, including parent carers and volunteers. This group has had a particular focus on contract performance and quality but also how learning and developments can be utilised across other learning disability services commissioned by SCC.

2.3 Scrutiny is asked to note the progress of the reviews of people supported by Discovery.

2.4 Scrutiny is asked to note the financial position of the contract and the community fund set up from the social value element of the enterprise

3. Key Performance Information

3.1 A summary of the Key Performance Indicators (KPI) associated with the delivery of the 'Discovery' contract is provided in Section 8 below. A narrative has been included to provide context for the data.

3.2 Somerset (SCC) commissioners remain satisfied that Discovery overall are delivering a safe service that is meeting the required standards set out in the contract and striving to deliver a quality service. However, commissioners have been made aware of staffing difficulties and its impact on quality in the period leading up to and following Discovery's restructure. From the detailed work between both commissioners and Discovery, it is expected (inline with the

experiences elsewhere) that this is a temporary issue.

3.3 SCC commissioners are currently discussing amending and strengthening the Performance Indicators and Target Service Levels for Contract Year three with Discovery. The intention at this time is to commence a move to outcome-based measures with more focus on individuals and personalisation, which will apply across the whole learning disability provision in Somerset not solely Discovery. This year SCC will also include a review of the Performance Management regime and reporting to ensure it is still fit for purpose for both organisations, whilst improving the oversight of the contract.

3.4 CQC inspections

CQC continue to carry out unannounced inspections of 'Discovery' locations in line with their planned inspection regime and in response to concerns raised directly to them from Stakeholders.

The last service to have its first CQC inspection was Amberleigh, which has received a "good" rating overall and noted some areas of good practice, particularly in people supported having good choice and control over their lives, staff who were caring and kind and the service had been making good links and relationships with families and carers. There were areas for improvement, namely keeping up to date on people's medication changes, which was particularly important where people come for periodic respite stays and how medication is stored and recorded.

Further inspection reports on the second round of inspections will be advised through later Scrutiny updates.

3.5 Crisis Support

As has been reported previously to the Scrutiny committee, the Crisis Support Service provided at Oak House had been identified as providing a poor level of service, prior to transfer to Discovery. SCC commissioners and Somerset Clinical Commissioning Group have been developing a new delivery model for the Crisis Support Service and to facilitate this the Service will be closed on March 16th 2019. SCC is supporting Discovery as it moves the last 2 customers who are currently within the Service. Both SCC and Discovery have believed since transfer that the move will deliver better outcomes for the individual concerned, including a very positive development of home ownership for one person.

As advised to scrutiny previously SCC agreed to the suspension of the KPI's linked to this element of the contract whilst the new Service delivery model is being developed and implemented.

3.6 Employment Services

The employment services' new staffing and management structure has now been in place since November 2018. This was the last step in resolving long standing Service issues that were impacting on the delivery of this component. This service is improving month on month despite the challenges and there are number of some excellent outcomes that have been achieved for people. Scrutiny is asked to review the examples of this can be found in Section 8 of

the report.

The number of referrals that Adult Social Care has made to the service over the last 12 months, due to social workers' knowledge of what is provided by the employment service and the wider challenge of raising the aspirations for people, has not been as high in year 2 as in year 1. Discovery have been successful in converting the people that have been referred, but the volume has been lower.

Adult Social Care has been working with Discovery during the period of January to March, to not only refer more people into the employment service, but also support the people who are seeking other options as an alternative from traditional day services, for example Six Acres and Fiveways.

4. Transformation and Reviews update

4.1 Alongside the staffing and management changes, Discovery have been progressively changing services, with the successful completion of three residential homes de-registering. These services are now providing supported accommodation; meaning that the people supported within have a legal right of tenancy; experience greater choice and control over how their support is delivered and are able to access a wider range of benefits and income. The people in these services are being regularly consulted with and early indication is that people are happier and getting better lives. The landlord, Golden Lane Housing is also supporting people to understand their new responsibility as tenants as well as providing the housing related support they will provide to people.

There is a plan in place to deregister three further services and tenancies to start 8th April 2019. The CQC de-registration process has already started. The project plan in place to identify key responsibilities and milestones. This is monitored and actioned weekly by SCC and Discovery. Reviews are being undertaken and in one locality are almost complete.

A learning event has been undertaken from the first phase of de-registrations and this learning has been incorporated in the next three homes to transfer to supported accommodation. The learning set identified that services and families needed a greater understanding of supported living services. To address this in phase 2 all services will have a baseline audit jointly undertaken by SCC commissioning, operations and Discovery locality managers using Reach and NDTI supported living standards and methodology. The first audit of Springview was carried out on 19/2/2019 and has identified further team learning which is being addressed by a Discovery coach. A further update will be provided to Scrutiny once these homes have transferred.

4.2 Day Time support update

The transformation of all the traditional, building based day services is underway within Discovery. SCC and Discovery share an aim of people being supported to have meaningful, progressive and community-based activities or learning. The first two services to go through this process are Six Acres in Taunton and Fiveways in Yeovil, with closure dates for these buildings of March 29th 2019 and August 30th 2019 respectively.

Discovery have identified a suitable community venue in Taunton, to support people from the surrounding area and give much better community presence, being based in a mixed-use space. This furthers the aim of people with a learning disability having true community inclusion and presence. For those accessing support within Yeovil they will continue to have the St. James provision available and Discovery are continuing to source, in partnership with family members and people supported at least one other community venue in Yeovil and the surrounding areas.

Of the 96 people supported at Six Acres, everyone has at least one other option made available to them and most have more. Already the positive outcomes of moving from a traditional model of day care are being evidenced, with 27 individuals (or 28%) people accessing universally available community provision (for example health and wellbeing activities), more people taking up routes into employment and those that do need higher levels of support, it being provided in a much more person-centred way. A good example of this is a gentleman that had been attending Six Acres for over 15 years, whilst provided by the LDPS, who was an elective mute. Discovery have been helping him to have a greater level of community presence and exploring alternative options. Since he has moved away from the large and bustling Six Acres site, he has started speaking for the first time in 12 years as well as learning a range of new independence skills, including cake baking.

The transformation of the day services has also provided an excellent opportunity for local business and organisations, who had not previously thought about being more inclusive, to do so and flourish and grow. Although there has been some negativity in the press, the reality is that there is a level of disruption and uncertainty for people which does cause distress, people do now have the opportunity for better lives and outcomes after this disruption.

There are still some transformation areas that have not been as successful, for example Seahorses in Minehead. The intention is to build this up to a community hub venue, with a great deal more community inreach and outreach for people. This has not worked well, as people are not yet getting the outcomes all would want. Part of this response is Discovery and commissioners will be looked to put additional help and resources into this service to effect the desired changes and we will look to work alongside the people supported and their families.

4.3 Reviews update

A focus has been given on achieving the aim of everyone within Discovery being reviewed by December 2018. Adult Social Care has completed the clear majority of the reviews, where these reviews have not been completed, this is due to wanting to make sure that the person supported, or their family are able to attend at a time convenient to them. A summary of the current position of reviews across all of the locality social work areas is provided below.

South Somerset has been a particularly area of difficulty, due to the large number of Discovery services located within this locality area, as well as working in partnership with the people and families at Fiveways to get the assessments agreed, meaning some have taken longer to complete than

expected.

Day Services	Mendip	Sedgemoor and West Somerset	South Somerset	Taunton
<p>Six Acres Fiveways Beckery Colliers Court</p> <p>Sea Horses Rollercoaster Laurels Huntspill</p>	<p>Mendip have completed reviews with individuals and families. On-going work to ensure outcomes are being achieved. Looking at support from Community Agents.</p>	<p>All day services completed apart from 1 who attends Huntspill project.</p>	<p>Fiveways all done and St James and The Beckery booked, The Laurels not yet booked</p>	<p>Six Acres completed</p>
<p>Residential to Supported Living</p>				
<p>Russet Eldermere Old Farm House Newholme Cherry Trees Spring View</p>	<p>Eldermere Competed Care orders completed and Finance and Benefits referrals.</p> <p>Cherry Trees - Met with individuals and families hours have been agreed with individuals and families.</p>	<p>None identified for SAWS</p>	<p>All will be allocated next week / 18th Feb.</p>	<p>Newholme - all completed, follow up review.</p>
<p>Supported Living</p>				
	<p>Jasmine - Reviews have been completed with individuals and family</p>	<p>SAWS all completed 1 in hospital 2 arranging with family.</p>	<p>47 in total, 33 completed and 14 outstanding</p>	<p>Taunton all completed apart from 2, booked in with JT</p>

	members. Care orders to be completed.			
Residential				
		SAWS all completed	12 in total, 7 completed, 5 outstanding	All allocated - 3 outstanding to complete
Dom Care				
	4 outstanding reviews - all have allocated workers.		All allocated	All completed.
Respite				
	Amberleigh - 6 outstanding reviews, all booked in for next week. Oak allocated worker - actively working with.	Amberleigh -1 allocated	Amberleigh Respite all allocated and in progress or completed	No respite provision

In total:

- Taunton have completed **167** assessments, with people having a care plan and Personal Budget produced after (PB)
- South Somerset have completed **147** assessments, with people having a care plan and a PB produced after
- SAWS have completed **150** assessments, with people having a care plan and PB produced after
- Mendip have completed **177** assessments, with people having a care plan and PB produced after

It is expected that following the completion of an Adult Social Care assessment of need, ASC staff should completed a care plan with agreed outcomes for or with the person, based on their assessment of need. Discovery are then responsible for co-producing a personal support plan, based on the information from the assessment and care plan. This should include the individual outcomes for people and the activities and support to do this. A detailed update on the number of provider support plans will be given in a future update to Scrutiny.

5.0 Financial update

- 5.1 The contract is performing as expected, within the financial modelling, with a relatively small underspend in year 1 that was returned to the County Council and a projection of being on budget in year 2. The underspend in year 1 was resultant of the local authority not purchasing at the level expected, for example within the Crisis service, short break service or where there were vacancies within services post transfer.
- 5.2 In line with the service specification commissioned by SCC built in to the Discovery cost model is the requirement to produce a surplus. At present this is 3.7% of the total contract cost, which is consistent with the expected surplus of any not for profit or charitable organisation. This surplus amount is split equally, with half being spent within Somerset on social value activities. This is also meeting a key requirement of achieving 'Social Enterprise' status. The remainder of the surplus is to be kept in reserve by Discovery.

The reserve amount is to be build up or used as required over the lifetime of the contract and will ensure that the company is financially robust and resilient and able to withstand any unforeseen change to market factors. The actual surplus generated in year one of the contract was £1.260m, meaning £630,000 will be invested into social value activities through a social value fund.

The social value fund is being administrated by Somerset Community Foundation on behalf of Discovery, with any individual or organisation able to meet the criteria able to submit bids that will directly positively impact on the lives of people with a learning disability. This fund will be a valuable tool for Somerset as a whole to improve the lives of people with a learning disability, allowing investment at grass roots level as well as the valuable infrastructure that might support growth.

The fund has been widely advertised creatively by Discovery throughout Somerset, including through social media and BBC Radio. It is hoped that this first round will have a good amount of applications, although there will be further rounds of bidding throughout the year.

Behind the fund sits a Strategic Partnership Board, that has representation from Discovery and Somerset County Council and forms part of the delivery of the contract. This board will be the final decision makers on the fund and agree the final disbursement of the social value fund, if the value of the bids exceeds the amount available.



5.3 A small amount of the social value fund has been ring-fenced for the “All Together Better” programme, which is a journey of understanding, information, rights and how to work well with health and social care. The course will bring people who need support, family, carers, voluntary and third sector organisations and practitioners to learn together and make key changes in their local area in order that people get a life rather simply a service.

The Benefits:

- *Create a local network actively working in co-production together to help effect positive change within their communities*
- *Give participants an understanding of history, images of what is possible and how change happens within a local and national context*
- *Engage people to have different conversations about what works*
- *Unite people to support, learn and share with each other and their groups*
- *Give real and grounded information, advice and support to people around the current health and social care agenda*
- *Give a good mix of inspiration and information around all the most relevant up to date models, theories and policies.*

5.4 Questions have been raised through council and cabinet regarding the use of “equalisation reserve” for Discovery and the funding that has been set against it as “savings” within the Medium-Term Financial Planning. This funding is not a cut or additional funding to Discovery, but a change in the way that the Council accounts for the cost of the Discovery contract over the 6-year term.

It was recognised by the LD Programme Board before the inception of the contract that costs, particularly in the early years would exceed the previous LDPS budget availability and that staying in house or externalising would both bring additional financial pressures in years to come. Whilst either option would bring financial pressure to the authority, the Board felt that the creation of the

SEV would give greater flexibility and freedom to modernise, bringing greater value for money in the longer term and most importantly, providing an improved level of service to people supported.

Given the financial pressures on the authority at the time, the Board agreed to the creation of an Equalisation reserve to smooth the projected additional early year costs over the lifetime of the contract. It was recognised however that further transformation would be required throughout the contract in order to bring spend down further, thereby making the contract affordable over its lifetime. This Equalisation reserve is a mechanism that the local authority uses to spend more in the early years of the contract and pay off in later years, when the contract value reduces.

At the end of year 1 of the contract, the amount transferred to the equalisation reserve was £4.910m. The original plan was for this to be added to during year 2 and for efficiencies to be achieved over the contract year 3 onwards, so that the equalisation reserve was returned to zero by the end of year 6. However, due to greater efficiencies achieved by Discovery in year 1 & 2 and across Adult Social Care as a whole, has meant that it is now intended for the £4.910m to be repaid at the end of 2018/19 and for the contract to be fully funded within the budget available going forward. This demonstrates that the creation of the SEV was not only better to improve people's lives, but also more cost effective than retaining it within the local authority, which only had a projection of annual increases.

6.0 Challenges to delivery and quality performance

6.1 As described in section 3.0, Discovery have had a whole service management restructure that concluded in November 2018. Leading up to this and during this restructure, Discovery have experienced a much higher than normal level of staff leaving or retiring, which has caused impacts on performance in some areas of the service.

6.2 Where these challenges in staffing are occurring, for example where a manager or assistant manager has left, there has been a resultant effect of direct care staff deciding that they also wish to leave. For clarity, Discovery have not made any direct contact care staff redundant, but some staff have decided to leave. This is very common in the care sector, where direct care staff that have formed a close working relationship to a manager choose to follow or are encouraged to leave and work for the manager in another setting. For example, 19 staff have left Discovery to work at just three organisations that have recruited managers that either left Discovery or have been made redundant.

This loss of staff has meant that the performance within particular services has dropped, where bank staff or agency staff have been used. This impact has not been universal, but has been experienced in some residential care, supported accommodation and day services.

Adult Social Care has been fully aware of this developing situation and as with any other provider in the social care market, is taking both inspection action and supportive action to ensure that Discovery remedy any drops in performance or quality of their delivery. Where increased safeguarding activity or self-reporting of problems is occurring, ASC social workers, social work staff and quality monitoring officers are implementing improvement plans.

6.3 The CQC and the local authority has also had notification from a set of family members about concerns in the performance and most importantly, the safety of the people supported. In one instance, the local authority has supported Discovery to ensure safe staffing levels in a service where it felt it was needed. This service has stabilised, and the staffing levels or safety of residents is no longer of concern.

Discovery currently has three separate improvement plans in place and is fully complying with the actions contained within. ASC staff in both safeguarding and quality monitoring have noted that Discovery staff and managers have been open and transparent with any investigation or information gathering and implement fully any recommendations. Somerset CC had already recognised some of the concerns raised in the family's letter and had been working with Discovery to address them.

As a result of the concerns, CQC have met with family members as well as inspecting some sites and Discovery are awaiting the result of this. No immediate action has been requested of Discovery by CQC, indicating there were no concerns at a regulatory level. Managers of the Safeguarding team will also be meeting with the families to hear in person and ASC will provide further reporting by exception to Scrutiny on any further concerns raised.

Where individual safeguarding concerns are raised, these are being dealt with as per our statutory duty and responsibility, as with any other provider. The level of individual safeguarding does not represent a deviation from any other provider of the size of Discovery or supporting this number of people.

The Safeguarding team manager for Somerset County Council has meet with all of the Discovery team managers and senior staff because of the letter from family members and felt that the level of understanding and compliance to safeguarding practice of Discovery staff was good. She has no concerns organisationally about Discovery.

Somerset County Council is proud of the fact that Somerset's providers have bucked the national trend and have an overall 92.9% good or outstanding rating with CQC, of which Discovery have helped play a part with many good rated services across their registered bases.

7.0 Stakeholder feedback – this section has been supplied by the stakeholder group

7.1 The Stakeholder Engagement Group has had regular, constructive, meetings with senior Commissioners and Discovery Executives. These meetings are scheduled to continue throughout the coming year.

The Group has agreed the following initiatives.

7.2 Post Social Worker Review/Initial Needs Assessment (INA) Questionnaire.

Stakeholders are aware of anecdotal evidence that some customers and carers have felt their review/INA has not been conducted as thoroughly as they would like. This questionnaire has been designed to capture factual evidence on the

views of customers and carers following their Social Worker Review or INA. It seeks to ascertain the level of satisfaction of customers and their families on completion of the process and will provide a useful benchmark against which to judge the effectiveness of the review/INA process. It will be introduced for all LD Social Worker Reviews and or INAs from April 2019. Completion of the questionnaire is completely optional; however, customers and carers are encouraged to make use of this opportunity to record their experiences so that the Review process can be refined and improved in future.

7.3 Quality Checking.

Independent Quality Checking of services is an essential component of Performance Monitoring. Commissioners have agreed to set up a Quality Checking Group which will carry out visits to a range of provider (not just Discovery) venues to make an assessment of the quality of service delivery from a user perspective. The Quality Checking team will include, but not be limited to, customers (experts by experience) and carers. Their findings will be made public. The Quality Checking visits are planned to commence in April 2019. However, within Discovery they have already designed and led a quality checking initiative which has been visiting their own services, sharing the learning and experience with SCC to help develop wider checking across Somerset. These quality checkers have presented to the Learning Disability partnership board and Discovery contract meeting and update on their work.

7.4 Customer Mapping.

An exercise is underway to digitally map the geographical location of all LD customers across the County. The purpose is to identify potential groups of customers and make them aware of each other's proximity, so that customers who are trying to achieve similar outcomes can learn together and share their support. Being aware of other LD customers in the vicinity will also open up the possibility of sharing support from volunteers, families and friends in the local community. This exercise is due to be completed by mid-March 2019

7.5 Outcome Based Performance Assessment.

Currently the performance of Discovery is measured largely in inputs. Inputs only measure volumes of activity, in most cases hours of support or numbers of referrals. They give no indication of the effect the activity is having on customers who receive the activity. It is perfectly possible for a provider to deliver 100% of the contracted hours of support, without having any positive effect on the customer. The effect on the customer should be progress towards achieving the outcomes in their Care and Support Plan, for example living a more independent life, or progress towards achieving generic outcomes applicable to all customers, such as having equal opportunity to be part of their community. Only by measuring progress towards the achievement of individual and generic outcomes can the effectiveness and therefore the value for money of a provider's performance be meaningfully assessed. Commissioners have agreed with the Stakeholder Group that Outcome Based Performance measurement of all providers, including Discovery, should become an essential element of performance assessment.

The stakeholder group have asked that a range of further Information be presented to Scrutiny, giving a wider breadth of information than the KPI and

PI information, it is supplied as an appendix and will be provided at each scrutiny update

8.0 Feedback and further information:

8.1 Although Somerset County Council and Discovery recognise that there is still some way to go to ensure that every single person supported by Discovery gets a consistent, excellent service, there are some examples that Discovery and commissioners would like to share with Scrutiny Committee to recognise not only the changes happening, but also the day to day, positive examples of excellent support that is going on in Discovery.

8.2

Hinkley Point Traineeship



- 6 Interns
- Travel Training (Somerset Passenger Solutions)
- On-Boarding
- CITB – Operatives Test
- Job Matching
- InWork Support

Meet Finn...

Finn is 20 years old and been a diagnosis of Sotos-Like Syndrome and experiences associated difficulties e.g.; poor concentration, word finding problems, problems with short term memory, behavioural difficulties including ritualistic behaviours, social difficulties.

Finn had undertaken lots of volunteering role before being referred to the traineeship, but non of these had led to paid employment and both Finn and his family were becoming very frustrated with the lack of outcomes despite his hard work ethic.

Finn worked really well in his role as Storesman. Picking orders, loading orders along with completing relevant paperwork. He has been working on deliveries and using the internal computer system to process the paperwork to completion.

Finn had to be on site ready for work at 7:00 which means he has to leave home 2 hours due to the travel to site.

Due to all his hard-work he was successful at interview and gained a 40 hour- Full time position with Bylor earning £10.27ph.

Finn's Quote – I really enjoyed the programme and I love my job, we go for breakfast every morning

Steve's Quote (Bylor Manager) – Finn is a hard worker and has really changed and improved our teams dynamics

Miranda's Quote (Mum) - It is great to see a happy and independent Finn, this has made a huge difference to our family life.



discovery
Get more from life

8.3 Hi Z

I would like to commend the staff at Selwyn for the good work they are carrying out with MS.

I have seen him today and he looks like a new man he is relaxed, looks ten years younger, he is clean he has shaved, skin is now clear, he is losing weight. His family, myself and Dr G cannot believe the difference and this is down to the staff at Selwyn.

*Many thanks
Social Worker*

8.4 Also included is a narrative from a member of staff in Discovery that wished to have their story told to the Scrutiny committee

My name is Adam Walker I worked for Somerset County Council for about 8 years before moving across to Discovery with the rest of my colleagues in April 2017. Shortly after this I decided to apply for a job with the Quality and Compliance team, seeing it as a great opportunity for me to learn and improve my skills and hopefully have a positive impact on the wider organisation.

My role involves me visiting different homes around Somerset and reviewing their paperwork, speaking to staff and relatives about how they feel the service is doing, and speaking with people supported to ensure their voices are heard.

I put all of my findings into a report for the locality manager and advise them on key areas of compliance that they need to focus on, for example their risk management process or their fire safety systems.

Under Somerset County Council this job simply didn't exist, so essentially a lot of homes had no one really checking the quality of the service provided.

Needless to say the job can be difficult at times, when we find something that isn't as it should be and then we have to work hard to find solutions. However, this extra focus on safety, quality and accountability within Discovery has undoubtedly led to some massive improvements for the people we support.

A good example of this is at a service I visited recently. I first visited this service in 2017 and had a lot of concerns about the quality and safety of the service provided and had to escalate these concerns to senior management. When I visited recently, I was so pleased to see that the behaviour support team had been in and supported the team, the health and safety team had been in and reviewed the service and the recommendations raised in my report had been actioned. This had resulted in a sharp drop in the frequency and severity of incidents at this home and big improvements in the safety for staff and people supported.

Also I must mention Quality Checkers, these are people who we provide support to, who are employed by Discovery to support me with feedback about the services, it is such a lovely experience to have people supported involved in the organisation, having a say in how things are done, being part of the team, breaking down those barriers between people supported and staff.

Adam Walker

Quality & Compliance Reviewer - Discovery

9.0 Background papers

9.1 Scrutiny report – May 2018 and October 2018

<http://democracy.somerset.gov.uk/documents/s6699/LD%20TaskFinish.pdf>
<http://democracy.somerset.gov.uk/ieListDocuments.aspx?CId=186&MIId=564&Ver=4>

9.2 Balance scorecard for the period of October 2018 to January 2019 & Key Performance Indicator information

These are supplied under Appendix A – E

Note For sight of individual background papers please contact the report author

Appendix A – Scrutiny Key Performance Information

Key Performance Indicator Summary table

KPI/ Month		Range	April	May	June	July	August	September	October	November	December	January
Residential Short Breaks Service												
% of stays cancelled by the Supplier in the period		Target Service Level - 0 - 2%	0%	0%	0%	0.6%	0.0%	0.0%	0.0%	1.1%	0.0%	0.0%
Supported Living												
Utilisation of core (shared) element of service		Target Service Level - 95 - 100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
% of individual hours delivered		Target Service Level - 90 - 100%	98.0%	100.2%	97.6%	97.5%	97.2%	95.0%	100.8%	99.2%	99.1%	95.6%
Employment Services												
% of new referrals accepted for:	Employment Support	Target Service Level - 95 - 100%	100%	100%	88%*	100%	100%	100%	100%	100%	100%	100%
	Employment Crisis Support		100%	100%	No Crisis Referrals				100%	No Crisis Referrals		100%
Number of customers achieving maintained employment and/or self-employment (Annual Measure)		Target Service Level - 85 - 100%	44/80 55.00%	45/80 56.00%	47/80 59.00%	47/80 59.00%	48/80 60.00%	50/80 62.50%	50/80 62.50%	54/80 67.50%	55/80 68.75%	59/80 74.75%
Day Services												
% of day time support delivered		Target Service Level - 90 - 100%	99.4%	103.6%	104.2%	100.8%	101.0%	100.0%	100.0%	98.0%	99.0%	95.0%

*Two referrals were not accepted – one referrals was from an individual who did not have a Learning Disability and was therefore not eligible the other had serious health and other issues that needed to be addressed before any employment support.

Appendix B – January Scorecard

Discovery LD Contract Balanced Scorecard January 2019																																										
<p>Supplier Contact: Luke Joy-Smith Donna Smith</p>		<p>Contract Value: £205,911,399</p>		<p>Contract Expiration: March 2023 Length of contract: 6 years</p>		<p>SCC Contract Owner: Dale Newland</p>																																				
				<p>SCC Contract Commissioner: Steve Vevers CCG Lead Commissioner: Eelke Zoetbergen</p>		<p>Contract Reference: DN90274</p>																																				
<p>Areas of concern</p> <p>Recruitment remains a key priority within Discovery and current recruitment and retention initiatives are under review and we expect to be frequently reviewed in what is clearly a candidate-led environment. In the meantime, Discovery continues to attract a large number of applications every month and are seeing a notable reduction in leavers, now that the re-organisation work has concluded. Associated to this, experienced resources from the Dimensions group have increased supporting local delivery.</p>						<p>Areas of success</p> <p>The window for 'All Together Better' has now closed and approximately 30 applicants have been invited to join the course, starting in March. The attendees are an equal mix of people with a learning disability, families/friends and professionals (commissioners, support workers, managers).</p> <p>The Discovery Community Fund remains open until 22nd February, at the time of writing, 18 different applicants have started the application process, with approximately 12 submitting an application. The fund has been promoted on BBC Radio Somerset.</p>																																				
Finance & Risk				Performance & Outcomes																																						
Measure	Period	Risk	Previous RAG	Current RAG	DOT	Measure																																				
Contract Risk & Issues Profile (Top 3 risks/issues for delivery of the contract)	January	As with last month, the key risk remain on Quality and People matters			1. Training compliance continues to rise among competing operational challenges.	Number of CQC inspection and outcomes and mitigation	Both Amberleigh and Newholme were inspected by CQC in January. This is the first time these locations have been inspected under Discovery. At the time of writing this report, we have not received the draft inspection for Newholme. For Amberleigh, the draft report has been received and shows that a thorough inspection has been carried out by an experienced CQC inspector. The report also picks up on the scrutiny Discovery has been under since the contract transfer and therefore is a more detailed report than may be usually expected. In its draft format the report rates the location as requiring improvements in the safe domain, but rates all other domains as 'Good' and the location as overall 'Good'.																																			
Contract Charge vs Contract Actual Spend	January	<p>Contract Charge v Contract Spend Jan 2019</p>				Reporting by Exception: Progress against Transformation milestones and/or key dates for any projects/plans/deliverables	<p>January</p> <p style="text-align: center; font-size: 2em; color: green;">G</p> <p>Revised Change Control document to be created to reflect transformation plans</p>																																			
Service Delivery Volumes - 3 Months Data excluding Nights and Residential Short Breaks	January					Discovery Audit outcomes by 5 key areas. (Greenway Cottages, Selwyn, Fosse Park)	<table border="1"> <thead> <tr> <th>Services Audited=4</th> <th>Safe</th> <th>Effective</th> <th>Caring</th> <th>Responsive</th> <th>Well Led</th> <th>Average Compliance</th> </tr> </thead> <tbody> <tr> <td>Exceeding Expectations</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td></td> </tr> <tr> <td>Meeting Expectations</td> <td>0</td> <td>1</td> <td>1</td> <td>1</td> <td>0</td> <td>73%</td> </tr> <tr> <td>Partially Meeting Expectations</td> <td>1</td> <td>3</td> <td>3</td> <td>2</td> <td>4</td> <td></td> </tr> <tr> <td>Not Meeting Expectations</td> <td>3</td> <td>0</td> <td>0</td> <td>1</td> <td>0</td> <td></td> </tr> </tbody> </table>	Services Audited=4	Safe	Effective	Caring	Responsive	Well Led	Average Compliance	Exceeding Expectations	0	0	0	0	0		Meeting Expectations	0	1	1	1	0	73%	Partially Meeting Expectations	1	3	3	2	4		Not Meeting Expectations	3	0	0	1	0	
Services Audited=4	Safe	Effective	Caring	Responsive	Well Led	Average Compliance																																				
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True Up Activity - service charges and sleep ins/sleep in top-up	N/A					Discovery remains on track with all overall contractual obligations																																				
Overall Revenue	January	<p>Contract Revenue Jan 2019</p>				Performance against the suppliers litigation to pay its Sub-contractors within 30 days of an undisputed invoice	<p>January</p> <p>Fulfilled</p>																																			
	January					Reporting of sustainability and energy efficiency indicators	Discovery is committed to ensuring all systems and processes consider the sustainability and energy efficiencies within their decision making.																																			
	January					Social Value Outcomes	The Strategic Partnership Board is established with SCC presence. The first round of applications is to be reviewed mid March. 'All Together Better' funded by SPB to commence																																			
	January					Summary of Employment Support quarterly report highlighting areas of concern	There were no areas of concern in the quarter. However, there have been some great successes in employment, especially at Hinkley Point C.																																			
	January					Number of CQC inspection and outcomes and mitigation	Discovery and SCC Commissioners have agreed the CQC's approach of inspecting all of Discovery's Services in the first Quarter of 2019 severely disadvantaged Discovery's ability to meet the expected service level and as such the Authority has agreed to suspend any Service penalties due against the CQC																																			

Workforce & Partnerships			Customers & Communication						
Measure	Period	Result	Measure	Period	Comments/Statement				
Staff Absence (Average days lost to team staff sickness)			Reporting of Supplier Satisfaction Results or any proposed Satisfaction Surveys to be launched for any of the services delivered under the contract. (including complaints)		All 4 surveys closed and shared on the website and with all stakeholders. Action plans have been developed on 'you said, we did' framework and are being well managed by Discovery.				
Starters & Leavers Analysis			Compliance with Contract Governance	January	Current contractual compliance is on track although meeting schedules have been changed in agreement between SCC and Discovery.				
Workforce Totals - Excluding Relief			Statement of relationship with the suppliers key stakeholders	January	People we support seem positive from front-line delivery to senior management and largely demonstrated in recent surveys and feedback from Quality Consultants/Checkers. Colleagues - some transferred colleagues remain concerned by transformation activity but more colleagues are focussed on looking forward. Locality Managers very much focussed on the future. Families/Advocates - concerns remain around transformation activity, especially Day Services and turnover of colleagues. SCC - Partnership between Discovery and SCC is positive to ensure the contract is a success.				
Staff Retention - newstarters who have left during their training/induction period									
Agency Staff Analysis in Hrs	January		Safeguarding/Never Events - number of incidents and mitigation	January	<table border="1"> <tr> <td></td> <td>9</td> <td>9</td> <td></td> </tr> </table>		9	9	
	9	9							
Business Continuity and/or Disaster Recovery Plans are in place and have been provided to SCC	January	In place			No Never Events held in January				

Discovery LD Contract Balanced Scorecard December 2018

Supplier Contact Luke Joy-Smith Donna Smith	Contract Value: £205,911,399	Contract Expiration: March 2023 Length of contract: 6 years	SCC Contract Owner: Dale Newland	SCC Contract Commissioner: Steve Veveers CCG Lead Commissioner: Eelke Zoestbergen	Contract Reference: DN90274
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Areas of concern

Discovery continues to address the long standing quality issues (in addition to the recruitment challenges). At the time of writing 25 Discovery locations have now received a second internal quality review and the scores show consistent increase in compliance (bar 2 locations). In some locations these have been significant increases. However, the scores remain consistently lower than across the rest of the Dimensions Group. It is likely this would have been different were it not for the required colleague transformation work (i.e. restructure), however, it also underlines the depth and breadth of quality issues which transferred and have previously been reported on. Discovery are confident that with the restructure now in place it provides the required strong and reliable platform to build good quality support upon.



Areas of success

The Strategic Partnership Board (SPB) have now launched its first round of applications to the new 'Discovery Community Fund' (i.e. the social value return). The first round will fund appropriate applications from a pot of around £200k. In addition to the already commissioned 'All Together Better' course, 'All Together Better', is a nationally recognised course designed by In-Control, has now been launched in Somerset. Arrangements have been made to promote it in Wiltshire in Somerset. They will be presenting at the Somerset Safeguarding Adults Board's summer conference. They have also written directly to Avon and Somerset Constabulary to provide some free training on Hate Crime, based on positive training courses they have facilitated nationally. In addition to last month's introduction to Amanda Watson, Discovery's Associate Family Consultant. Positive conversations have taken place with a second consultant, who Discovery hope to announce in January.

Finance & Risk	Performance & Outcomes
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Measure	Period	Risk	Previous RAG	Current RAG	DOT	1. Training compliance continues to rise among competing operational challenges.	Measure	No CQC inspections held in December																																			
Contract Risk & Issues Profile (Top 3 risks/issues for delivery of the contract)	December	As with last month, the key risk remain on Quality and People matters					Number of COC inspection and outcomes and mitigation																																				
Contract Charge vs Contract Actual Spend	December						Reporting by Exception: Progress against Transformation milestones and/or key dates for any projects/plans/deliverables	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> <tr> <td></td> <td></td> <td style="text-align: center; background-color: #92d050;">G</td> <td style="text-align: center;">➔</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Revised Change Control document to be created to reflect transformation plans</td> </tr> </table>													G	➔						Revised Change Control document to be created to reflect transformation plans															
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Service Delivery Volumes - 3 Months Data excluding Nights and Residential Short Breaks	December						Discovery Audit outcomes by 5 key areas. (Greenway Cottages, Selwyn, Fosse Park)	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Services Audited-3</th> <th>Safe</th> <th>Effective</th> <th>Caring</th> <th>Responsive</th> <th>Well Led</th> <th>Average Compliance</th> </tr> </thead> <tbody> <tr> <td>Exceeding Expectations</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td></td> </tr> <tr> <td>Meeting Expectations</td> <td>0</td> <td>1</td> <td>1</td> <td>1</td> <td>1</td> <td></td> </tr> <tr> <td>Partially Meeting Expectations</td> <td>1</td> <td>1</td> <td>1</td> <td>2</td> <td>2</td> <td></td> </tr> <tr> <td>Not Meeting Expectations</td> <td>2</td> <td>1</td> <td>1</td> <td>0</td> <td>1</td> <td style="text-align: right;">77%</td> </tr> </tbody> </table>	Services Audited-3	Safe	Effective	Caring	Responsive	Well Led	Average Compliance	Exceeding Expectations	0	0	0	0	0		Meeting Expectations	0	1	1	1	1		Partially Meeting Expectations	1	1	1	2	2		Not Meeting Expectations	2	1	1	0	1	77%
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Workforce & Partnerships			Customers & Communication																																										
Measure	Period	Result	Measure	Period	Comments/Statement																																								
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Starters & Leavers Analysis		<p>Starters vs Leavers</p> <table border="1"> <thead> <tr> <th>Month</th> <th>Starters</th> <th>Leavers</th> </tr> </thead> <tbody> <tr><td>Jan-18</td><td>383</td><td>463</td></tr> <tr><td>Feb-18</td><td>253</td><td>46</td></tr> <tr><td>Mar-18</td><td>38</td><td>53.3</td></tr> <tr><td>Apr-18</td><td>402</td><td>40</td></tr> <tr><td>May-18</td><td>68.5</td><td>86.5</td></tr> <tr><td>Jun-18</td><td>42.5</td><td>10.5</td></tr> <tr><td>Jul-18</td><td>26.5</td><td>16.5</td></tr> <tr><td>Aug-18</td><td>12.5</td><td>89</td></tr> <tr><td>Sep-18</td><td>39</td><td>133.5</td></tr> <tr><td>Oct-18</td><td>902</td><td>183</td></tr> <tr><td>Nov-18</td><td>1012</td><td>181</td></tr> <tr><td>Dec-18</td><td>677</td><td>106.5</td></tr> </tbody> </table>	Month	Starters	Leavers	Jan-18	383	463	Feb-18	253	46	Mar-18	38	53.3	Apr-18	402	40	May-18	68.5	86.5	Jun-18	42.5	10.5	Jul-18	26.5	16.5	Aug-18	12.5	89	Sep-18	39	133.5	Oct-18	902	183	Nov-18	1012	181	Dec-18	677	106.5	Compliance with Contract Governance	December	Current contractual compliance is on track although meeting schedules have been changed in agreement between SCC and Discovery.	
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Workforce Totals - Excluding Relief		<p>Target Hours vs Actual Hours against Overall Target</p>	Statement of relationship with the suppliers key stakeholders	December	Customers - Customer relationship seems positive from front-line delivery to senior management and largely demonstrated in recent surveys. Colleagues - some transferred colleagues remain concerned by transformation activity but more colleagues are focussed on looking forward. Families/Advocates - concerns remain around transformation activity, especially Day Services. SCC - Relationship stays positive between Discovery and SCC.																																								
Staff Retention - newstarters who have left during their training/induction period		<p>Starters vs Leavers within Induction period</p>																																											
Agency Staff Analysis in Hrs	December	<p>Agency Staff Analysis in Hrs</p>	Safeguarding/Never Events - number of incidents and mitigation	December	g	No Never Events held in December																																							
Business Continuity and/or Disaster Recovery Plans are in place and have been provided to SCC	December	In place																																											

Appendix D – November Scorecard

Discovery LD Contract Balanced Scorecard November 2018

Supplier Contact:
Luke Joy-Smith
Donna Smith

Contract Value:
£205,911,399

Contract Expiration: March 2023
Length of contract: 6 years

SCC Contract Owner:
Dale Newland

SCC Contract Commissioner:
Steve Yeevers
CCG Lead Commissioner:
Eelke Zoestbergen

Contract Reference:
DN90274

Areas of concern

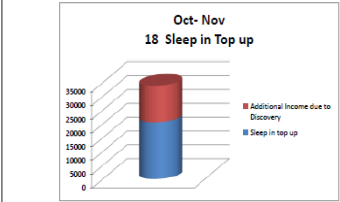
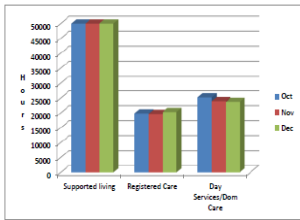
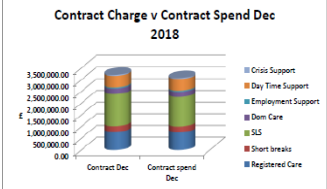
Discovery continues to address the long standing quality issues (in addition to the recruitment challenges). At the time of writing 25 Discovery locations have now received a second internal quality review and the scores show consistent increase in compliance (bar 2 locations). In some locations these have been significant increases. However, the scores remain consistently lower than across the rest of the Dimensions Group. It is likely this would have been different were it not for the required colleague transformation work (i.e. restructure), however, it also underlines the depth and breadth of quality issues which transferred and have previously been reported on. Discovery are confident that with the restructure now in place it provides the required strong and reliable platform to build good quality support upon.



Areas of success

The Strategic Partnership Board (SPB) have now launched its first round of applications to the new 'Discovery Community Fund' (i.e. the social value return). The first round will fund appropriate applications from a pot of around £200k. In addition to the already commissioned 'All Together Better' course, 'All Together Better', is a nationally recognised course designed by In-Control, has now been launched in Somerset. Arrangements have been made to promote it throughout Somerset. They will be presenting at the Somerset Safeguarding Adults Board's summer conference. They have also written directly to Avon and Somerset Constabulary to provide some free training on Hate Crime, based on positive training courses they have facilitated nationally. In addition to last month's introduction to Amanda Watson, Discovery's Associate Family Consultant. Positive conversations have taken place with a second consultant, who Discovery hope to announce in January.

Finance & Risk					Performance & Outcomes									
Measure	Period	Risk	Previous RAG	Current RAG	DOT	1. Training compliance continues to rise among competing operational challenges.	Measure	No CQC inspections held in December						
Contract Risk & Issues Profile (Top 3 risks/issues for delivery of the contract)	December						Number of CQC inspection and outcomes and mitigation							
Contract Charge vs Contract Actual Spend	December					As with last month, the key risk remain on Quality and People matters	Reporting by Exception: Progress against Transformation milestones and/or key dates for any projects/plans/deliverables							Revised Change Control document to be created to reflect transformation plans
Service Delivery Volumes - 3 Months Data excluding Nights and Residential Short Breaks	December						Discovery Audit outcomes by 5 key areas (Greenway Cottages, Selwyn, Fosse Park)							
True Up Activity - service charges and sleep ins/sleep in top-up	Oct and Nov													
Overall Revenue	December						Performance against the suppliers obligation to pay its Sub-contractors within 30 days of an undisputed invoice							
							Reporting of sustainability and energy efficiency indicators	December	Discovery is committed to ensuring all systems and processes consider the sustainability and energy efficiencies within their decision making.					
							Social Value Outcomes	December	The Strategic Partnership Board is established with SCC presence. The first round of applications is likely to take place before the end of December 2018 and Partners for					
							Summary of Employment Support quarterly report highlighting areas of concern	December	There were no areas of concern in the quarter. However, there have been some great successes in employment opportunities at Hinkley Point C.					
							Number of CQC inspection and outcomes and mitigation	December	Discovery and SCC Commissioners have agreed the CQC's approach of inspecting all of Discovery's Services in the first Quarter of 2018 severely disadvantaged Discovery's ability to meet the expected service level and as such the Authority has agreed to suspend any Service operations in respect this					



Services Audited=3	Safe	Effective	Caring	Responsive	Well Led	Average Compliance
Exceeding Expectations	0	0	0	0	0	
Meeting Expectations	0	1	1	1	0	
Partially Meeting Expectations	1	1	1	2	2	
Not Meeting Expectations	2	1	1	0	1	77%

Workforce & Partnerships			Customers & Communication		
Measure	Period	Result	Measure	Period	Comments/Statement
Staff Absence (Average days lost to team staff sickness)			Reporting of Supplier Satisfaction Results or any proposed Satisfaction Surveys to be launched for any of the services delivered under the contract. (including complaints)		All 4 surveys closed and shared on the website and with all stakeholders. Action plans have been developed on 'you said, we did' framework and are being well managed by Discovery.
Starters & Leavers Analysis			Compliance with Contract Governance	December	Current contractual compliance is on track although meeting schedules have been changed in agreement between SCC and Discovery.
Workforce Totals - Evolving Relief			Statement of relationship with the suppliers key stakeholders	December	Customers - Customer relationship seems positive from front-line delivery to senior management and largely demonstrated in recent surveys. Colleagues - some transferred colleagues remain concerned by transformation activity but more colleagues are focussed on looking forward. Families/Advocates - concerns remain around transformation activity, especially Day Services. SCC - Relationship stays positive between Discovery and SCC.
Staff Retention - newstarters who have left during their training/induction period					
Agency Staff Analysis in Hrs	December		Safeguarding/Never Events - number of incidents and mitigation	December	No Never Events held in December
Business Continuity and/or Disaster Recovery Plans are in place and have been provided to SCC	December	In place			

Appendix E – October Scorecard

Discovery LD Contract Balanced Scorecard October 2018																																									
Supplier Contact Luke Joy-Smith Donna Smith		Contract Value £205,911,399		Contract Expiration: March 2023 Length of contract: 6 years		SCC Contract Owner: Dale Newland																																			
SCC Contract Commissioner: Steve Vevers CCG Lead Commissioner: Eelke Zoestbergen			Contract Reference: DN90274																																						
Areas of concern As previously reported and detailed within the NDTI report commissioned by Discovery. Historical culture issues remains a key priority within the overarching transformation requirements within the contract.				Areas of success The launch of the new management structure on 1 st November has provided a focus on the future and moving forward. This concludes a significant period of colleague uncertainty albeit necessary change. The recently formed Strategic Partnership Board (SPB) still expect that the first round of awards will be made before the end of December 2018. The SPB have supported the application to fund In-Control's 'Partners in Policymaking' which provides the opportunity to benefit many stakeholders within Somerset, with the view to promote and commence this opportunity in early 2019. Communications about the changes at Six Acres have been cascaded to all stakeholders, with a positive meeting with circa 45 families held on 14 th November, answering a number of concerns.																																					
Finance & Risk				Performance & Outcomes																																					
Measure	Period	Risk	Previous RAG	Current RAG	DOT	1. Training compliance continues to rise among competing operational challenges.																																			
Contract Risk & Issues Profile (Top 3 risks/issues for delivery of the contract)	October	No further changes to the risk register as reported last month.																																							
Contract Charge vs Contract Actual Spend	October				Reporting by Exception: Progress against Transformation milestones and/or key dates for any projects/plans/deliverables																																				
Service Delivery Volumes - 3 Months Data excluding Nights and Residential Short Breaks	October				Discovery Audit outcomes by 5 key areas. <table border="1"> <thead> <tr> <th>Services Audited=1</th> <th>Safe</th> <th>Effective</th> <th>Caring</th> <th>Responsive</th> <th>Well Led</th> <th>Average Compliance Score</th> </tr> </thead> <tbody> <tr> <td>Exceeding Expectations</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td></td> </tr> <tr> <td>Meeting Expectations</td> <td>0</td> <td>1</td> <td>1</td> <td>1</td> <td>1</td> <td></td> </tr> <tr> <td>Partly Meeting Expectations</td> <td>1</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td></td> </tr> <tr> <td>Not meeting Expectations</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>1</td> <td>68%</td> </tr> </tbody> </table>		Services Audited=1	Safe	Effective	Caring	Responsive	Well Led	Average Compliance Score	Exceeding Expectations	0	0	0	0	0		Meeting Expectations	0	1	1	1	1		Partly Meeting Expectations	1	0	0	0	0		Not meeting Expectations	0	0	0	0	1	68%
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Workforce & Partnerships			Customers & Communication																																									
Measure	Period	Result	Measure	Period	Comments/Statement																																							
Staff Absence (Average days lost to team staff sickness)		<p>Average Days Lost to Team Sickness</p> <table border="1"> <thead> <tr> <th>Month</th> <th>Average Number of days sick per Colleague</th> <th>National Avg (Days)</th> </tr> </thead> <tbody> <tr><td>Nov-17</td><td>8.5</td><td>10.00</td></tr> <tr><td>Dec-17</td><td>9.5</td><td>10.00</td></tr> <tr><td>Jan-18</td><td>9.5</td><td>10.00</td></tr> <tr><td>Feb-18</td><td>11.0</td><td>10.00</td></tr> <tr><td>Mar-18</td><td>11.5</td><td>10.00</td></tr> <tr><td>Apr-18</td><td>12.0</td><td>10.00</td></tr> <tr><td>May-18</td><td>12.5</td><td>10.00</td></tr> <tr><td>Jun-18</td><td>12.5</td><td>10.00</td></tr> <tr><td>Jul-18</td><td>13.0</td><td>10.00</td></tr> <tr><td>Aug-18</td><td>13.0</td><td>10.00</td></tr> <tr><td>Sep-18</td><td>13.0</td><td>10.00</td></tr> <tr><td>Oct-18</td><td>13.0</td><td>10.00</td></tr> </tbody> </table>	Month	Average Number of days sick per Colleague	National Avg (Days)	Nov-17	8.5	10.00	Dec-17	9.5	10.00	Jan-18	9.5	10.00	Feb-18	11.0	10.00	Mar-18	11.5	10.00	Apr-18	12.0	10.00	May-18	12.5	10.00	Jun-18	12.5	10.00	Jul-18	13.0	10.00	Aug-18	13.0	10.00	Sep-18	13.0	10.00	Oct-18	13.0	10.00	Reporting of Supplier Satisfaction Results or any proposed Satisfaction Surveys to be launched for any of the services delivered under the contract. (including complaints)		All 4 surveys closed and shared on the website and with all stakeholders. Action plans have been developed on you said, we did framework and are being well managed by Discovery.
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Workforce Totals - Excluding Relief		<p>Target Hours vs Actual Hours against Overall Target</p>	Statement of relationship with the suppliers key stakeholders	October	Customers - Customer relationship seems positive from front-line delivery to senior management and largely demonstrated in recent surveys. Colleagues - some transferred colleagues remain concerned by transformation activity but more colleagues are focussed on looking forward. Families/Advocates - concerns remain around transformation activity, especially Day Services. SCC - Relationship stays positive between Discovery and SCC.																																							
Staff Retention - newstarters who have left during their training/induction period		<p>Starters vs Leavers within Induction period</p>																																										
Agency Staff Analysis in Hrs	October	<p>Agency Staff Analysis in Hrs</p>	Safeguarding/Never Events - number of incidents and mitigation	October	<table border="1"> <tr> <td></td> <td>g</td> <td>g</td> </tr> </table> <p>One Never Event panels held in October. Rating remains green as this new process introduced by Discovery captures valuable learning to improve the support for people with learning disabilities both within and beyond Discovery.</p>		g	g																																				
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Business Continuity and/or Disaster Recovery Plans are in place and have been provided to SCC	October	In place																																										