**Young People’s Supported Accommodation Service Quarterly Monitoring Report**

**Author name & job role:**

**Organisation:**

**Date Report Completed:**

**Service Package:**

**Locality:**

**Quarter No. & months covered:**

**Please provide a brief overview of the current issues impacting on service delivery:**

*Please provide the following information from the start of the contract and the quarter covered specifically by this report:*

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| ***Referrals***  *For all young people supported by this contract please provide a breakdown of the following:*   * *Number of declined referrals with reasons (location, exploitation, H&S, risk to self or others)* * *Number of withdrawn referrals with reasons* |
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| ***Voids***  *For each void room, please provide a breakdown of the following:*   * *number of days void and reasons (e.g. maintenance issues/ safeguarding)* |
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| ***Move on Information***  *Please provide:*   * *a breakdown of move-on destinations for individual young people* * *the type of resettlement support provided* * *number of planned move-ons where young people achieved independence* * *number of unplanned moves to include a breakdown of formal evictions and abandonment* |
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| ***KPIs***  *Please outline the assessment and evaluation tools used to measure progress against outcomes for individual Young People in placement:*   * + - *To feel safe and protected from harm*     - *To be supported to live healthier lives*     - *To be equipped with the skills necessary to live independently.*     - *To be supported to build appropriate and positive relationships and links to their local communities and family members (where it is safe)*   Please also provide information on the types of intervention used by staff: |
| |  |  | | --- | --- | | **KPI Target 100% of Young People are Supported to:** | **Score this period** | | 1. **Settle into new accommodation** | % | | 1. **Develop general household skills** | % | | 1. **Access education, work placements, employment and social activities** | % | | 1. **Budget and manage their finances** | % | | 1. **Maintain personal health** | % | | 1. **Prepare for independent accommodation** | % | | 1. **Manage individual personal and emotional matters** | % | |
| ***Out of Hours***   * *Please provide details of what out of hours support is provided.* * *Please outline how exploitation risks are monitored and minimised.* * *Please provide information about urgent cover needs for this service and how future risks have been mitigated.* |
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| ***Financial Issues***   * *Please provide assurance that your financial forecast is on track. (Y/N)* * *Please confirm all payments from OCC are up to date* * *Please provide details of rent arrears for each room and steps taken to address this* * *Please advise of any other financial issues affecting service delivery* |
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| ***Accommodation*** |
| * *Please provide details of any maintenance work completed/scheduled* * *Please confirm all YP have suitable accommodation that meets all requirements for occupation outlined in the contract specification.* * *Please share any current health and safety concerns* |
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| ***Partnership Working***   * *Please can you describe steps you have taken with other professionals to improve the effectiveness of the service or improve outcomes for the service users.* |
| * *Please provide an overview of your working relationship with the housing provider. Have there been any issues?* |

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| ***Service Development and Added Value***   * *Please describe any additional activity that you are providing that is adding value to this contract.* * *Please outline any organisational development which may positively or negatively affect Young People in placement or service delivery under the contract.* |
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| ***Feedback and Learning***   * *Please provide examples of how you have consulted with the young people and other stakeholders and how feedback they provided resulted in changes/ improvements to service delivery.* * *Please provide some key learning gained from the delivery of this service.* |
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| ***Quality Assurance***  *Please provide details of*   * *any internal quality monitoring undertaken* * *updates from the Council’s Quality Monitoring Review* |
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| ***Compliments and Complaints***  *Please provide the following:*   * *The number and type of complaints received, and any action taken to resolve these complaints.* * *The number of compliments received, and actions taken as a result.* * *Confirmation that all YP understand how to raise concerns to OCC and the service provider*   *Please ensure that the Council is informed of serious complaints received by the Service Provider within 1 working day.* |
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| ***Accidents and Incidents***   * *Please summarise all reportable incidents and the actions taken to resolve the situation and prevent future recurrence.*   *Please ensure that the Council is informed of any accidents and incidents received by the Service Provider within 1 working day*. |
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| ***Safeguarding***  *Please provide the number and type of safeguarding alerts and investigations which have occurred and the action in response.*  *Please ensure that the Council is informed of all safeguarding received by the Service Provider within 1 working day.* |
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| ***Staffing***  *Please provide an overview of the following:*   * *Number of WTE posts at each level / grade* * *Number of WTE staff vacancies* * *Agency usage* * *Information regarding any significant staff sickness issues which has impacted on service delivery* * *Information on the reasons for any resignation or other termination of employment* * *Training and development* |
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| ***Business Continuity*** |
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| ***Case Study***  *Please provide a short case study example that outlines the journey of a person who has benefitted from this service.*  *Include some background information, the support received from internal and external services, challenges and successes and the outcomes identified/ achieved as a result.* |
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