

GROUP PERFORMANCE REPORT

Social Care

2nd November 2006



1. PERFORMANCE OVERVIEW

Two of our seven Performance Indicators are exceeding target. One will not be reported until Quarter 3 as it is based on an Annual Survey. Of the other Indicators, whilst we are falling slightly short of target, we are in Bands 4 (out of 5) in the PAF Bandings. Good progress is being made with all Planned Actions made this year, with some already being complete.

2. ACTIONS FROM LAST CLINIC

HC1

The baseline figure for the number of BME Direct Payment users at end of year 05/06 was 3, this has now risen to 11.

BV56 – Items of Equipment

Minor adaptations – work is continuing to improve this element of performance. There has been an improvement of 16% since the end of year 05/06 figures. The Department of Regeneration have included the minor adaptations element within their internal monitoring system, which will hopefully improve the minor adaptations performance.

BV196 – Acceptable Waiting Times for Care Packages

Further investigation is taking place to understand the detail within the IT system to ensure that what is recorded reflects the operational practice.

3. PROGRESS ON STRATEGIC PLAN, PLANNED ACTIONS (Appendix A)

All of our 23 Planned Actions are being actively progressed, a number of the Planned Actions are well advanced and 1 has already been achieved.

4. PERFORMANCE INDICATORS MEETING TARGET (Appendix B)

Two BVPIs have exceeded target.

BV 198 Number of problem drug misusers in treatment per 1,000 head of population aged 15 – 44.

BV 201 Adults and older people receiving direct payments at 31 March per 100,000 population aged 18 years or over.

5. PERFORMANCE INDICATORS NOT MEETING TARGET (Appendix C)

Four BVPIs are currently not meeting target.

BV 54 Number of older people (aged 65 or over) helped to live at home per 1,000 population aged 65 or over.

BV 56 Percentage of items of equipment delivered within 7 working days.

BV 195 Percentage of new older client assessments having acceptable waiting times.

BV196 Percentage of new older client, care package provisions having acceptable waiting times

Looking at these in turn:

BV 54 Even though it is slightly below target it is still within the Top Quartile and will achieve five blobs within the CSCI ratings.

BV 56 This Indicator has fallen below target in a number of areas. Action Plans are in place for closer monitoring of sensory alarms, and for improving the Minor Adaptations responses. This indicator will be monitored at the new Internal Performance Clinic

BV195 – The introduction of Electronic Single Assessment Process (E-SAP) has identified a problem with the recording of the start date of an assessment, which was isolated to the Health and Social Care Workers (HSCW) in the Access Team. The issue occurred due to the HSCW working from General Practitioner lists of 75yrs+. The process has been amended in line with standard recording of assessment start times and actions have been identified to amend the incorrect data entries. This will be reflected in the next quarter figures.

BV 196 - Waiting times for OT equipment classed as packages of care still contributing to reduction in figures. New staff in post to further address this issue.

6. PERFORMANCE INDICATORS NOT REPORTED THIS QUARTER (Appendix D)

BV53 Number of households receiving intensive home care per 1,000 population aged 65 and over

This is part of an Annual Survey, to be submitted to DoH in November 2006 and will, therefore, be reported later in the year.

7. HOUSING SAF

Social Care is responsible for two of these Indicators. Currently Quarter 1 figures indicate that the targets will be achieved for 06/07. Statistical information from providers at St Andrews University, which are used to calculate these PI's have not been received in time for Quarter 2 reporting. Monitoring is ongoing to ensure targets are met.

Jan Douglas
Executive Director
23rd October 2006

SOCIAL CARE – PLANNED ACTIONS 2006/2007

APPENDIX A

| Ref | Planned Actions | On Target | Progress in 2006/2007 | Key Issues/Comments |
|---|--|-----------|--|--|
| Help to promote health, well-being, independence, inclusion and choice | | | | |
| HC 1 | Increase the number of BME residents who take up direct payments | Yes | Direct Payment leaflets have been translated into Urdu, Punjabi, and Chinese, these are to be distributed at the Mela and BME Learning Disability Forums. Direct Payment advertisements, depicting people from the BME communities. are to be shown on screens in GP surgeries. | March 06 = 2.29% of DP were for BME clients, Now 5.82% |
| HC 2 | Implement an electronic pilot of the single-assessment programme with relevant agencies by April 2006 | Complete | Electronic Single Assessment went live 27 th March 2006. In excess of 80 end-users using e-SAP from Access, Care Management, JCUH and Intermediate Care teams. | By not adopting a stand still attitude, development of the system and the teams working processes, enabled full utilisation and the potential of both, and improved effective information sharing. |
| HC 3 | Redefine the role of social workers to increase interaction with clients, introduce care co-ordination and provide a single point of contact by May 2006 | Yes | Work is progressing on defining the social work role. A Senior Manager has been given the task of leading on this. Care co-ordination/care management approaches operate in all adult services. There is a single point of contact for Social Care, through the Access Team. | No change as yet. |
| HC 4 | 100% of care packages reviewed by March 2007 | Yes | The Department Improvement Group are reviewing current processes to see what improvement can be made. Managers are now receiving regular performance information and they can identify gaps and issues, and address them. | Review process to be defined by November 2006. Phil Dyson leading on this, work in his area of responsibility. |
| HC 5 | Increased satisfaction with services experienced by BME members and their carers by March 2007 | Yes | Mental Health BME community engagement project started in June 06. Service Development Officer for learning disability initiated Diversity Training etc. | Progress continued in all areas ie Mental Health, Learning Disability, Older People and People with Physical Disability. |

SOCIAL CARE – PLANNED ACTIONS 2006/2007

APPENDIX A

| Ref | Planned Actions | On Target | Progress in 2006/2007 | Key Issues/Comments |
|------|---|-----------|---|---|
| HC 6 | Increase the accessibility of the mental health services to BME residents by March 2007 | Yes | <p>There are two projects underway in Middlesbrough with the focus on increasing services for people from BME community. One of the projects in being undertaken by the Sahara Group which is a voluntary organisation. This project focus is on the mental health needs of Asian women. There are four Asian women researches being supervised by the University of Lancashire and the National Institute for Mental Health for England (NIMHE) The research is for 6 months and focuses on what Asian women would want from mental health services.</p> <p>The other is a Focus Implementation Site (FIS) project. This project is underway and the focus is on improved mental health services for Asylum Seekers and Refugees. Two support workers commenced work with Dr. Helen Sykes at the Haven Practice.</p> | <p>This project will identify the needs of Asian Women, the results will be put to the NHS Trust and Dept of Social Care for future planning of mental health services.</p> <p>This is initially a 3 month pilot to establish any unmet needs of these people.</p> <p>Implementation of the FIS pilot Project includes work with Teesside University. Sahara project to improve needs assessment.</p> |
| HC 7 | 75 people in receipt of incapacity benefit gaining voluntary work by 2008 | Yes | LPSA Target agreed and Steering Group established. Project Manager and Data Analyst to be appointed to undertake inter-agency work to establish information sharing protocol. Social Inclusion Employment workstream Action Plan in place | 15 people as at 27/09/06 |
| HC 8 | 20 people in receipt of incapacity benefit gaining employment by 2008 | Yes | LPSA Target agreed and Steering Group established. Project Manager and Data Analyst to be appointed to undertake inter-agency work to establish information sharing protocol. Social Inclusion Employment workstream Action Plan in place | <p>Project to employ part time staff in Dept of Social Care is well advanced.</p> <p>6 people to be recruited immanently on the Destruction of Files Project</p> |

SOCIAL CARE – PLANNED ACTIONS 2006/2007

APPENDIX A

| Ref | Planned Actions | On Target | Progress in 2006/2007 | Key Issues/Comments |
|--|--|-----------|---|---|
| HC 9 | Deliver a carers training programme by March 2007 | Yes | Carer training project to be developed. Expert Carer Project due to start September. | Expert Carers – 16+ carers will start course on 25 th October. Other training needs to be discussed after Engagement Event on 1 st November. Expert Carer Project launched October 06 & fully subscribed |
| HC 10 | Review the social inclusion strategy to improve respite by March 2007 | Yes | Steering group in place within workstreams focused on employment and social isolation. Multi agency action plan in place. | |
| HC 11 | Fully implement the carers' improvement plan by March 2007 | Yes | Cares Services Improvement plan renewed and updated following Scrutiny Board Report. Previous actions 100% complete | |
| HC 12 | 18% of carers receiving community-based services by the end of the LPSA2 period | Yes | Staff asked to ensure that carer needs, where identified, are addressed by the appropriate support package. | On Target |
| HC 13 | 28% of assessments/reviews undertaken to be carers assessments/reviews | Yes | Established baseline from User Survey completed in May | |
| Ensure that,, when people fall ill, they get good-quality care and made better faster | | | | |
| HC 14 | Improve user/carer feedback in relation to the quality of services/carers access and receive by September 2006 | Yes | Actions taking place are <ul style="list-style-type: none"> • Carers Assessments • Forum network • Complaints • Carers/Users sitting on Scrutiny • Users on Interview Panels | Issues will be form part of the discussion at the Engagement Event on 1 st November and actions set as a result. Senior Manager Development Day dedicated to user/carer involvement. User, Carer advocate in contract monitoring process. |
| HC 15 | Engage carers in the planning and monitoring of the service by March 2007 | Yes | Establishing Quality Development Group with Inclusion, this includes clients and Carers | As above |

SOCIAL CARE – PLANNED ACTIONS 2006/2007

APPENDIX A

| Ref | Planned Actions | On Target | Progress in 2006/2007 | Key Issues/Comments |
|---|---|-----------|---|--|
| HC 16 | The number of drug users in treatment to increase from 1,340 to 1,380 | Yes | The current figure is 1173 (Est) , which is up on the same period last year. The current figure available April – August 2006 indicates that 1235 people have been in treatment year to date. | |
| HC 17 | The number of drug users retained in treatment to increase from 63% to 81% | Yes | The percentage retained in treatment is currently 78% on April – Aug figures. | It should be noted that the 'National Drugs Evidence Centre (the compiler for this data) has changed the methodology for capturing this figure. |
| Ensure that we close the gap between the levels of health of Middlesbrough residents and the national average as well as the gap between priority neighbourhoods and the Middlesbrough average | | | | |
| HC 19 | Ensure engagement with independent, voluntary and community sectors is robust by establishing a Strategic Commissions Group and Year 1 work programme by March 2007 | Yes | Initial business meetings undertaken | Review of engagement activity has been undertaken with the independent sector. Arrangements have been revised for this year. Work to be progressed in regard to voluntary & community sector. |
| HC 20 | A joint Health Strategy agreed by May 2006 | Yes | The Joint Health Strategy has been accepted by the Council Executive and the PCT, defining Public Health needs over the next three years. The PCT is to publicly launch the document on the 1 st September | Public Health Group in place with identified 'Champion' for each service area. |
| Jointly commission health and social care services with voluntary-and independent-sector providers | | | | |
| HC 31 | Strategic Independent Groups established by April 2006 | Yes | Initial business meetings undertaken | Review of engagement activity has been undertaken with the independent sector. Arrangements have been revised for this year. Work to be progressed in regard to voluntary & community sector. |
| HC 32 | Commissioning strategies in place for all client groups by March 2007 | Yes | Interim Commissioning Strategy has been developed as agreed | Long term commissioning strategy in progress. |

SOCIAL CARE – PLANNED ACTIONS 2006/2007

APPENDIX A

| Ref | Planned Actions | On Target | Progress in 2006/2007 | Key Issues/Comments |
|--|--|-----------|---|---|
| HC 33 | A review to identify the future direction of in-house services completed by June 2006 | Yes | A review of Older Peoples Residential Care was completed and approved by executive on 20 June 2006. Reviews of the Carelink and Homecare services has commenced and will be complete by December 06 | Residential Care complete Home Care complete by Dec 06 Care link complete by Dec06 Day Services commenced Oct 06 |
| Reduce crime, including domestic burglary, vehicle crime, robbery , assault, domestic violence and hate crime | | | | |
| SC 6 | Increase the visibility of street wardens by all wards being patrolled for a minimum of 330 days per annum | Yes | On-going. Target is for a full year. Pro-rata for 2006/2007 it is 243 | Aligned to new working arrangements introduced in July 2006 |

SOCIAL CARE – PERFORMANCE INDICATORS 2006/2007 Quarter 2

APPENDIX B – MEETING TARGET

| Indicator | Performance Indicator | All England quartiles | 2004/2005 Result | 2005/2006 Result | 2006/2007 Target | 2006/2007 Performance to Date | 2006/2007 Projection (Year End Estimate) | Key Issues/Comments | |
|-----------------------|--|-------------------------|----------------------|----------------------|----------------------|-------------------------------|--|------------------------|---|
| Adult Services | | | | | | | | | |
| BV 198 | Number of problem drug misusers in treatment per 1,000 head of population aged 15 – 44. | Top Median Bottom | 57.3 30.1 15.4 | 119 (Top) | 25 (lower median) | 25.5 | 21.6 | 25.5 (Lower median) | Figures are from April to August, estimated to end of September. This a cumulative figure over 12 months, but comparing with last years figures, it is on target. |
| BV 201 | Adults and older people receiving direct payments at 31 March per 100,000 population aged 18 years or over . | Top Median Bottom | 73 53 39 | 43 (Lower Median) | 121 (Top) | 200 | 181 | 200+ (Top) | Represents an excellent upturn in 05/06 performance. Figures are up 50% from 05/06. Reflects maintained concentrated efforts in this important area. |

SOCIAL CARE – PERFORMANCE INDICATORS 2006/2007 Quarter 2

APPENDIX C – NOT MEETING TARGET

| Indicator | Performance Indicator | All England quartiles | 2004/2005 Result | 2005/2006 Result | 2006/2007 Target | 2006/2007 Performance to Date | 2006/2007 Projection (Year End Estimate) | Key Issues/Comments | |
|--|---|-------------------------|-------------------------|-------------------|-------------------------|-------------------------------|--|-------------------------|---|
| Adult Services | | | | | | | | | |
| BV 54 | Number of older people (aged 65 or over) helped to live at home per 1,000 population aged 65 or over. | Top Median Bottom | 98.54 84.13 68.08 | 150 (Top) | 148 (Top) | 154 | 147 | 152 (Top) | Slightly below target, but expect to attain/get close to target figure by year end. This is also a PAF Indicator and, according to the DoH Bandings, we are placed in the top performing Band – which is any figure of 100 or over. The fact that we are not quite on target should be seen in that context. |
| Action Plan | | | | | | | | | |
| No specific Action Plan is required for this indicator, as mentioned in the comment this indicator, it is above the CSCI threshold for five blobs (max) and is within the top quartile. | | | | | | | | | |
| BV 56 | Percentage of items of equipment delivered within 7 working days. | Top Median Bottom | 89 82 76 | 71.3% (Bottom) | 76.4% (Lower Median) | 85% | 78.8% | 83.1% (Upper median) | Below target but steady improvement. We have moved to Band 4 out of 5 in the PAF Bandings This is a Key Threshold Indicator and is monitored at the internal Performance Clinic. The Head of Service has a BV56 Group, specifically concentrating on this Indicator |
| Action Plan | | | | | | | | | |
| This Indicator will be monitored at the new Internal Performance Clinic. The Sensory Support Equipment is to be monitored via TCES. Handy Person to be recruited to improve Minor Adaptations. | | | | | | | | | |

SOCIAL CARE – PERFORMANCE INDICATORS 2006/2007 Quarter 2

APPENDIX C – NOT MEETING TARGET

| Indicator | Performance Indicator | All England quartiles | | 2004/2005 Result | 2005/2006 Result | 2006/2007 Target | 2006/2007 Performance to Date | 2006/2007 Projection (Year End Estimate) | Key Issues/Comments |
|--|--|-------------------------|----------------------|-------------------|-----------------------|------------------|-------------------------------|--|--|
| BV 195 | Percentage of new older client assessments having acceptable waiting times. | Top Median Bottom | 77.2 71.0 63.6 | 53.2% (Bottom) | 78.4% (Top) | 82% | 77.6% | 80% (Top) | This is a Key Threshold Indicator that will be monitored in the new Internal Performance Clinics – Improvement due to addressing current known issues with recording and back loading. |
| Action Plan | | | | | | | | | |
| This Indicator will be monitored at the new Internal performance Clinic This is an area that is being addressed by the Departmental Improvement Group, looking at work processes within the Department. | | | | | | | | | |
| BV 196 | Percentage of new older client, care package provisions having acceptable waiting times. | Top Median Bottom | 89.9 84.7 77.2 | 76% (Bottom) | 80% (Lower Median) | 88% | 80.5% | 80.5% (Lower median) | This is a Key Threshold Indicator that will be monitored in the new Internal Performance Clinics. Delays in provisions of equipment impact upon Care Package waiting times. |
| Action Plan | | | | | | | | | |
| This Indicator will be monitored at the new Internal performance Clinic This is an area that is being addressed by the Departmental Improvement Group, looking at work processes within the Department. | | | | | | | | | |

SOCIAL CARE – PERFORMANCE INDICATORS 2006/2007 Quarter 2

APPENDIX D – NOT REPORTED THIS QUARTER

| Indicator | Performance Indicator | All England quartiles | 2004/2005 Result | 2005/2006 Result | 2006/2007 Target | 2006/2007 Performance to Date | 2006/2007 Projection (Year End Estimate) | Key Issues/Comments | |
|-----------------------|--|-------------------------|------------------------|---------------------------|------------------|-------------------------------|--|---------------------|---|
| Adult Services | | | | | | | | | |
| BV 53 | Number of households receiving intensive home care per 1,000 population, aged 65 or over | Top Median Bottom | 15.51 12.20 9.06 | 13.0 (Upper Median) | 17.6 (Top) | 21 | 15.4 est | - | No figures available. This is an annual return, reported in November. A dummy run was completed in September to identify any potential issues. We are confident of maintaining top band for this Indicator. The actual will be reported in quarter 3. The drop from 2005/06 is as a result of an intensive in Direct Payments for intensive home care packages, which are discounted from this calculation. |

Housing SAF

Regeneration is responsible for seven of the nine the indicators within the Housing SAF for 2006 and nine of the 11 indicators proposed for 2007. Social Care are responsible for two indicators proposed for in 2007.

| HOUSING SAF 2007 | | | | | | | | | |
|------------------|---|-----------------|-----------------|----------------|-------------------------|--|--------------------------------------|--|---|
| Ref | Description | Lower Threshold | Upper Threshold | Rule-based PI? | 2005 – 2006 Performance | | 2006 – 2007 Year Performance to date | | Comments |
| SP KPI 1 | Service users who are supported to establish and maintain independent living. | | | No | 98% | | 98% | | Not possible to ascertain Q2 information as statistics are taken from provider returns which are due 27.10.06 |
| SP KPI 2 | Service users who have moved on in a planned way from temporary living arrangements | | | No | 90% | | 85% | | Not possible to ascertain Q2 information as statistics are taken from provider returns which are due 27.10.06 Figure is lower due to lack of available accommodation for move on |