



ADULT SERVICES AND HEALTH COMMISSION 11 DECEMBER 2006

Report of the Director of Corporate and Adult Social Services

Performance Monitoring Second Quarter 2006-07

RECOMMENDATION

1. To consider and comment on the performance indicators within the remit of this Commission for quarter two.

SUPPORTING INFORMATION

- 2.1 This report details the performance during the second quarter of indicators that fall within the remit of this Commission. It follows a similar format to the last monitoring report and provides information in key threshold indicators, corporate priorities and other indicators that are being monitored quarterly.
- 2.2 Four of the adult indicators have Key Thresholds for 2006-07 which can limit the judgments of council performance if they are not met. Of these, three are on or above the end of year forecast target during the second quarter and one is within the 5%. The commentary on each indicator given below is taken from the Performance Eye.

AO/C51 (BV201) - Number of adults/older people receiving Direct Payments per 100,000 population

Q2 Commentary

Direct Payments to service users continues to perform well this year and we forecast that we will exceed our year end target of 130. We are significantly out performing the comparator family average. We have begun to monitor the spread of direct payments across a range of service user groups with aim of ensuring an appropriate distribution for the year end.

AO/D54 (BV56) % of equipment items/adaptations delivered within 7 working days

Q2 Commentary

Percentage of items delivered within 7 working days continues to perform well with our current forecast of 92% exceeding our target of 90% and is on course for very good top band performance.

AO/D55 (BV195) % of new older clients whose assessments are carried out in the required timescale

This indicator measures the percentage of new older clients (people aged 65 years and over) the average of:

- i) the percentage where the time from first contact at the beginning of assessment is less than or equal to 48 hours (2 calendar days)
- ii) the percentage where the time from first contact to completion of assessment is less than or equal to four weeks (28 calendar days)

This indicator shows the number of clients whose assessments have been carried out within national targets. The indicator is showing amber in the performance eye and its performance in quarter two at 74.8% is lower than quarter one of 75% when it was showing red. This is because the Adult Social Services Team is confident of achieving the target by the year end as the commentary below indicates.

Q2 Commentary

As part of the action plan from last quarter some process issues have been highlighted and we have begun to address these by monitoring both elements of this indicator; assessments (i) started within 48 hours and (ii) completed within 4 weeks. Both parts of the indicator have improved with the D55i improving by 4.2% and D55 ii by 1.2%, the overall rise being 2.7%. We predict this will continue in the last two quarters of 06-07 and forecast a figure of 84.5%. More detailed information is provided in Appendix 3.

AO/D56 (BV196) % of new older clients whose care packages are delivered in the required timescale

Q2 Commentary

For waiting time for care packages, we continue to exceed our quarterly and year end targets. Performance has been above the target since May 06. We are forecasting continued good performance on completion of assessments in less than four weeks. If the current performance is maintained we should improve on our 05-06 result and achieve very good top band.

- 2.3 There are four corporate priority indicators of which three are within or above year end target and one is off target. Commentary below is provided on the red indicator.

HCOP1.1 Emergency bed days for people aged 75 or more

This indicator monitors the number of emergency unscheduled acute hospital bed days (defined in the Department of Health guidance for Local Delivery Plan 2005-2008) occupied by persons aged 75 or more in NHS hospitals in the Derby City Council Area.

Q2 Commentary

This is an LPSA2 indicator with a target of a 7.5% reduction in hospital bed-days from the 04/05 outturn of 67,039 to a final target of 62,011 by March 31st 2008. An increasing demographic of vulnerable older people and the variety in the nature of conditions that contribute to bed days is the additional problem we have to tackle within the achievement of the target.

The data on bed days for people 75 and over is extracted from generic data for all bed days which have some data quality issues. Quarterly data is only available 8 weeks after the end of each quarter (because it's uploaded to the Dept of Health and then downloaded to a local data warehouse before it can be used). The data available for quarterly monitoring is an estimate.

This is a key performance issue for both health and social care partners which will be very challenging to achieve. A number of prevention initiatives will impact in the longer term (prevention services in development, GP attention to diversion options, a team of people dedicated to preventing older people falling and preventing admission when they do, is now in place, and the development of intermediate and respite care as part of the Supported Accommodation Strategy) but we are also pursuing other potential activities to impact on the target in the shorter term.

- 2.4 Of the remaining indicators, one is off target, one is within the 5% forecast and the rest are at or above target. The commentary on the red and the amber indicators is given below.

A0/C73 - Admissions on a permanent basis aged 18-64 to residential and nursing care

Q2 Commentary

The steady rate of 2 permanent admissions per month this year was bucked in July and September with 7 admissions each. A detailed breakdown to team level shows 9 admissions in Mental Health 3 of which were drug and substance misuse counted for the first time. Of the 8 in Learning Disability admissions, 4 were transitions from children's services on age 18 and one was a change of longstanding residence. These pressures within mental

health and learning disabilities mean that the final figure for admissions may be above 35 at year end but would still be acceptable band 3. Following data checks the exclusion of some placements reduced the total admissions and our mid year position improved to 1.3 from 1.5. With further data checks, scrutiny and close monitoring of process our aim is to be within the 1.9 to 2.5 range and less than 34 admissions for the year to give us good band 4 status.

HCOP 2.4 Halt the rise in adult obesity by reducing the number of adults with a BMI of greater than 30

Q2 Commentary

Health Promoting schools are addressing healthy eating and physical activity. There is also a LPSA2 target to increase activity levels in children as a key strategy to reduce obesity levels

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Background papers:	None
List of appendices:	Appendix 1 - Implications Appendix 2 - Quarter 2 performance monitoring Appendix 3 – PAF D55

IMPLICATIONS

Financial

1. None arising from this report.

Legal

2. None arising from this report.

Personnel

3. None arising from this report.

Equalities impact

4. Effective scrutiny is to the benefit of all Derby people.

Corporate Priorities

5. This report links with Council's priority for 2006-09 to
 - ◆ build healthy and independent communities, by:
 - improving the health of our communities
 - improving the standard of social care for vulnerable adults and older people
 - delivering joined up services for children and young people that meet the needs of the local community
 - ◆ encourage lifelong learning and achievement as a catalyst for economic growth, by:
 - raising skill levels to improve the chances of securing employment.