

<b>HEALTH &amp; ADULT SOCIAL CARE SCRUTINY PANEL</b>	<b>Agenda Item No. 5</b>
<b>TUESDAY 17 FEBRUARY 2009</b>	<b>Public Report</b>

## **Report of the Director of Adult Social Services and Performance**

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### **PERFORMANCE REPORT – QUARTER 3 2008/09 ADULT SOCIAL CARE**

#### **1. PURPOSE**

1.1 This report recommends that the Scrutiny Panel:

- Reviews and notes the Quarter 2 position on adult social care targets (appendix 1).
- Reviews areas of identified risk and considers proposed remedial actions.

#### **2. LINKS TO CORPORATE PLAN, SUSTAINABLE COMMUNITY STRATEGY AND LOCAL AREA AGREEMENT**

- 2.1 Supporting vulnerable people is an important part of the Sustainable Community Strategy and a key priority for the Local Area Agreement.
- 2.2 Key performance targets from the new National Indicator set have been identified as priorities within the Corporate Plan and Local Area Agreement.

#### **3. BACKGROUND**

3.1 Previously, the performance of adult social care functions has been measured via the national Performance Assessment Framework (PAF) indicators, and these have been reported quarterly to Health and Adult Social Care Scrutiny Panel. From 1 April 2008, the National Indicator set has been introduced with 12 social care specific indicators. A number of these indicators have not yet been finalised nationally and others will run from the final quarter of the year. This report covers a balance of measures taken from the new framework, where available, and from the previous PAF framework, where the measures remain relevant.

#### **4. KEY ISSUES**

##### **4.1 Comprehensive Area Assessment National Indicators and key local performance targets**

- 4.1.1 The indicator set previously reported has now been replaced with a new set of national indicators (NI). This new set of indicators measures some new areas of performance and replaces other indicators, often including additional criteria to the indicator it replaces. There are also some old indicators that measure useful performance which are not included in the new indicator set and, because of this, we plan to continue reporting these indicators as local targets even though there is no statutory obligation to do so.
- 4.1.2 In the past we have monitored the indicators against band ranges. However, for the new national indicators there are no such benchmark measures available as yet and so when setting targets we have had to do this without knowing what good performance is expected to look like (where baseline data has been available we have used this).
- 4.1.3 Of the indicators updated in Quarter 2, the following indicators are flagged as high risk:

Indicator	Q2/Q3 Performance	Target	Comments and actions being taken
NI 131 Average numbers of delayed transfers from acute or mental health hospital beds per week.	8.91 (Q3)		<ul style="list-style-type: none"> <li>▪ The previous PAF indicator around delayed transfers of care counted only delays from acute hospital beds. The target was set based on this number. Weekly reports from the Mental Health Trust have revealed a small number of patients whose discharge has been delayed from acute mental health beds. Actions have now been taken to reduce this number.</li> <li>▪ A weekly status report is being submitted on progress for the 3 remaining patients affected.</li> <li>▪ Suitable housing for MH users seems the blocker. Mental Health accommodation and housing group has been set up to look at the needs and develop a suitable pathway</li> </ul>
NI132 Timelines of social care assessment	68(Q3)	85%	<ul style="list-style-type: none"> <li>▪ Q1 performance on this indicator was 73.2%.</li> <li>▪ This indicator is closely monitored and performance in July is up to 74.3%.</li> <li>▪ A comprehensive action plan to address the performance issues is in place.</li> <li>▪ Where breaches are identified, these are communicated back to the relevant teams so that dates can be checked and modified if incorrect.</li> <li>▪ The Director of Adult Social Services &amp; Performance and the Managing Director of Peterborough Community Services will report on the latest analysis of this on-going performance verbally at the Scrutiny Panel meeting.</li> </ul>

4.1.4 Quarter 2 indicators can be seen at appendix 1. Updates are included for Quarter 3 where the data was available at the time of dispatch of this report. This is to address members' previous concerns regarding the time lags in reporting.

**5. EXPECTED OUTCOMES**

5.1 The Scrutiny Panel is asked to note and discuss the content of the report.

**6. NEXT STEPS**

6.1 Performance reports are submitted to the Scrutiny Panel on a quarterly basis.

**7. BACKGROUND DOCUMENTS**

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

None.

**8. APPENDICES**

Appendix 1 – Quarter 2 performance indicator outturns (including Quarter 3 data where available).

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