

**Health and Social Care  
Scrutiny and Performance Panel**

**Agenda  
Item No.**

**DATE: 30 NOVEMBER, 2006**

**6a**

**Social Care and Inclusion Performance Scorecard  
Second Quarter Outcomes July-September 2006-07**

**Ward(s)                      All**

**Portfolios:** Cllr Alan Paul, Social Care, Health And Housing

**Summary of report:**

At the July 27 2006 meeting of the Health, Social Care and Inclusion Scrutiny and Performance Panel, panel members agreed to receive quarterly information on a representative selection of performance indicators (PIs) in order to further scrutinise the robustness of the improvement measures across the directorate.

It was agreed to produce a balanced scorecard for an agreed set of indicators and any other exception indicator that was classified as “red” using the traffic lights system. This report covers the Social Care and Inclusion scorecard measures for the second quarter of 2006/7 i.e. July-Sept 2006-07.

**Background papers:**

“Towards a Scrutiny Performance Scorecard” Health, Social Care and Inclusion Scrutiny and Performance Panel presentation July 27 2006

**Reason for scrutiny:**

To enable scrutiny of key performance indicators in accordance with statutory guidance.

Scrutiny panels are responsible for holding cabinet to account for the delivery of the Council’s strategic goals and individual portfolio targets.

**Resource and legal considerations:**

Any resource implications arising from improving performance will be found from within approved budgets. There are no legal considerations arising from this report.

**Citizen impact:**

Improvement in the performance of agreed performance measures including PIs will impact on better outcomes for vulnerable adults, those with housing needs and other service users.

**Environmental impact:**

There is no specific environmental impact from this report.

**Performance management:**

The scrutiny and performance panel's scorecard contains PIs that inform the overall assessment of Adult Social Care and Strategic Housing Services. These performance measures contribute towards the CPA process. All risks identified in relationship to progressing performance are found in the relevant service plans and the directorate risk register and are subject to regular review and management. PIs that have a red traffic light designation will be subject to corrective measures action plans.

**Equality Implications:**


The performance targets include actions that ensure delivery of equitable services.

**Consultation:**

There are no specific consultation requirements relating to this report.

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## **1 SUMMARY**

1.1 On the July 27 you agreed to receive quarterly reports on a representative list of 12 PIs across the Social Care and Inclusion Directorate. These PIs are identified below.

### **1.2 ADULT SOCIAL CARE**

1. C 26 Admission to residential care under 65s
2. C 27 Residential admission over 65s
3. C 28 BV 53 Intensive home care
4. D 54 BV 56 % equipment 7 days
5. D 56 BV 196 Waiting times – care packages
6. E 47 Ethnicity – Assessments

### **1.3 STRATEGIC HOUSING**

7. KPI 2a Percentage of service users who have moved on in a planned way
8. LPI 4 Number of non-decent private sector homes occupied by vulnerable house holds made decent
9. BV 213 Number of cases where homelessness has been prevented
10. LPI 7 Average length of time for major adaptations from OT referrals work beginning (non waiting list)

### **1.4 CUSTOMER CARE**

11. No. complaints leading to a revision of policy or procedure
12. % of complaints resolved in indicated timescale

1.5 It was also agreed that any other headline indicator in the directorate that was identified as red should also be added to the list as long as it remained red. A request was made at your meeting on September 28 Panel for a jargon free explanation of the various PIs in the score card (**Appendix 1**).

## **2 SECOND QUARTER JULY-SEPT 2006.**

2.1 As reported to your panel on the September 28 the performance of the selected indicators during the first quarter of the reporting cycle April to June 2006 was 1 red, 2 amber, and 10 green PIs with an additional red indicator, “C32 (BV54) Older people helped to live at home per 1,000 population” being added as an exception report.

2.2 This report covers the second quarter of the reporting cycle July-Sept 2006. Of the 12 scorecard PIs 8 are green, one amber and 3 red. In addition there are 6 red PIs (4 Adults Social Care and 2 Strategic Housing) for exception reporting. The overall Scorecard outcomes are:

<b>2006 Social Care and Inclusion Scrutiny ScoreCard</b>		
	<b>Traffic Light Status</b>	
<b>Adult Social Care</b>	<b>April-June</b>	<b>July-Sept</b>
1. C26 Admission to residential care over 65s	<b>Green</b>	<b>Green</b>
2. C27 Residential admission under 65s	<b>Green</b>	<b>Amber</b>
3. C28 BV 53 Intensive home care	<b>Amber</b>	<b>Red</b>
4. D54 BV 56 % equipment 7 days	<b>Green</b>	<b>Green</b>
5. D 56 BV 196 Waiting times – care packages	<b>Green</b>	<b>Red</b>
6. E 47 Ethnicity – Assessments	<b>Green</b>	<b>Green</b>
<b>EXCEPTIONS</b>		
• C32 ( BV54) Older people helped to live at home per 1,000 population	<b>Red</b>	<b>Red</b>
• C51 Direct payments	<b>Green</b>	<b>Red</b>
• D40 Clients receiving a review	<b>Amber</b>	<b>Red</b>
• D55 Acceptable waiting times for assessments	<b>Amber</b>	<b>Red</b>
<b>STRATEGIC HOUSING</b>		
7. KPI 2a Percentage of service users who have moved on in a planned way	<b>Green</b>	<b>Green</b>
8. LPI 4 Number of non-decent private sector homes occupied by vulnerable house holds made decent	<b>Green</b>	<b>Green</b>
9. BV213 Number of cases where homelessness has been prevented	<b>Green</b>	<b>Green</b>
10.LPI 7 Average length of time for major adaptations from OT referrals work beginning (non waiting list)	<b>Green</b>	<b>Red</b>
<b>EXCEPTIONS</b>		
• BV 64 The number of empty properties returned to use or demolished as a result of LA action	<b>Amber</b>	<b>Red</b>
• BV 203 % change in families accommodated in temporary accommodation	<b>Amber</b>	<b>Red</b>
<b>CUSTOMER CARE</b>		
11.No. complaints leading to a revision of policy or procedure	<b>Green</b>	<b>Green</b>
12.% of complaints resolved in indicated timescale	<b>Amber</b>	<b>Green</b>

- 2.3 The full detailed scorecard is attached (**Appendix 2**) and will be presented to your meeting on November 30.

## APPENDIX ONE

INDICATOR	FULL DESCRIPTION	EXPLANATION	MEANING
<b>AN INTRODUCTION TO SOCIAL CARE INDICATORS REFERRED TO IN THIS REPORT</b>			
C26 : Admissions of supported residents aged 65 and over to residential/ nursing care	The number of older people, aged 65 & over, admitted on a permanent basis to supported residential and nursing care during the year - per 10,000 population aged 65 & over	A count of the number of service users, funded by the local authority, who go into long-stay residential or nursing care during the financial year, expressed as a proportion of the local population so it is comparable between authorities.	The current population of 65+ in the borough is 42,969 so 430 admissions in a full year would give an indicator figure of 100. Our target for 2006-7 is an indicator figure of 80, which represents 344 admissions
C27 : Admissions of supported residents aged 18-64 to residential/ nursing care	The number of adults, aged 18-64, admitted on a permanent basis to supported residential and nursing care during the year - per 10,000 population aged 18-64	As above but for the 18-64 age group	The current population of 18-64 in the borough is 149,868 so 75 admissions in a full year would give an indicator figure of 5. Our target for 2006-7 is an indicator figure of 3.2, which represents 48 admissions
C28 : Intensive home care	Number of households getting Intensive home care in a specific week - per 1,000 population aged 65 & over	Intensive home care is more than 10 hours & 6 or more visits in a week. This is measured on a sample week in September, designated by Dept. of Health	With a population of 42,969, an indicator figure of 15 would represent 645 households. Our target for 2006-7 is 16, which is 688 households whereas 600 households gives an indicator of 13.9
C32 : Older people helped to live at home	Older people, aged 65 & over, helped to live at home on a specific date - per 1,000 population aged 65 & over	We help people to remain in their own homes by providing services such as home care, day care, meals on wheels, direct payments, short-term breaks and professional support	With a population of 42,969 we need to help 4297 people to score 100. Our target of 80 represents 3438 people and an indicator of 65 represents 2793
C51 : Direct payments	Adults (aged 18-64) and older people (aged 65 & over) receiving direct payments, on a specific date, per 100,000	If a person is assessed as eligible for a social care service from us, they have the option of taking the service as a 'direct payment' i.e. a sum of	The calculation of the indicator is complicated because it depends on the numbers in different age groups. Our

INDICATOR	FULL DESCRIPTION	EXPLANATION	MEANING
	population aged 18 or over (age standardised)	money which they choose to spend on the provider and package of care they want instead of what we would provide	target of 104.5 represents approx. 200 people whereas 150 people gives an indicator of about 80.
D40 : Clients receiving a review	Adult and older clients receiving a review as a percentage of those getting a service in the period	The expectation is that everyone getting a service from us, whether community-based or residential, should have their needs reviewed at least once a year to see that the service continues to be appropriate	A 100% return is not appropriate in this case as those who only started the service near the end of the period will not yet need a review but the aim is something between 75 – 85 %
D54 : equipment and adaptations delivered within 7 working days	Percentage of items of equipment and adaptations delivered within 7 working days over the year	This covers all equipment and adaptations except those that require construction, structural work or more than just a simple fitting. The time measured is from the decision to supply to satisfactory installation.	Since the setting up of the Integrated Community Equipment Stores, all these deliveries are monitored through them. Our target is 87% delivered within 7 days
D55 : Acceptable waiting times for assessments	For new older (65 & over) clients, the average of (1) the percentage where the time from first contact to contact with the client is less than 2 days and (2) the percentage where the time from first contact to completion of assessment is less than 28 days.	A potential client might come to our notice in various ways: through their GP, from hospital, from a neighbour, from their own contact with us, etc. This (the referral) is the starting point and the aim is to firstly speak to them and secondly assess their needs as quickly as possible.	Although there are a number of legitimate reasons for a delay (e.g. difficulty getting hold of the client) the expectation is that we should meet the target times in over 90% of cases.
D56 : Acceptable waiting times for care packages	For new clients, aged 65 & over, the percentage for whom the waiting time from completion of assessment to receipt of all services is less than 28 days.	The time is measured from the end of the assessment process to the date that the last of the services we have agreed to provide is put in place.	An assessment will result in a care plan, identifying all the services we are to provide; these must all be put in place to complete the process. We aim to achieve this in 92% of cases.

INDICATOR	FULL DESCRIPTION	EXPLANATION	MEANING
E47 : Ethnicity of older people receiving assessment	The percentage of service users receiving an assessment that are from minority ethnic groups , divided by the percentage of older people in the local community that are from minority ethnic groups	Minority ethnic groups are all other than white and the count is of all those aged 65 & over receiving an assessment in the year	The proportion of ethnic minority groups in the borough population is 4.57 %. Our indicator score is bound to fluctuate a bit but we aim for something over 1.0 (which would represent 4.57% of those assessed coming from minority groups) but under 1.5 (which would represent 6.85% of those assessed)
<b>AN INTRODUCTION TO STRATEGIC HOUSING INDICATORS REFERRED TO IN THIS REPORT</b>			
KPI 2a Percentage of service users who have moved on in a planned way	This indicator measures the number of service users who have moved on in a planned way as a percentage of service users who have left the service. Planned moves include moving into supported housing, permanent accommodation or back to family. Unplanned moves include abandonment, eviction, custody and sleeping rough.	The objective of short term accommodation based services, direct access accommodation, outreach services to rough sleepers and outreach services to service users in unstable accommodation is to move service users on to a more independent outcome agreed as part of the support planning process.	Local target is 70% and measures the effectiveness of individual services against service provision as a whole.
LPI 4 Number of non-decent private sector homes occupied by vulnerable house holds made decent	The number of non-decent private sector homes occupied by vulnerable household made decent	The Government target is for all local authorities to ensure 70% of private accommodation occupied by vulnerable households meets the Decent Homes standard by 2010	Vulnerable households have been defined as those in receipt of at least one of the principal means tested or disability related benefits. The governments Decent Homes Target Implementation Plan sets out a trajectory for delivery that includes targets

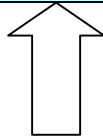
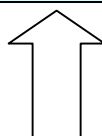
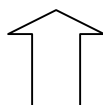
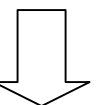
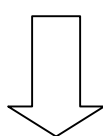

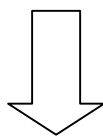
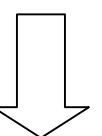
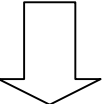
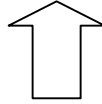
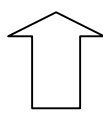

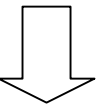
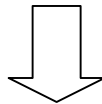
INDICATOR	FULL DESCRIPTION	EXPLANATION	MEANING
			for specific years up to 2020 expressed as the proportion of vulnerable households in the private sector living in Decent Homes. The relevant target percentages are 65% by 2006, 70% by 2010, and 75% by 2020. There is also a target that this proportion will increase year on year.
BV213 Number of cases where homelessness has been prevented	Number of households who considered themselves as homeless, who approached the local housing authority's housing advice service(s), and for whom housing advice casework intervention resolved their situation.	The purpose of this indicator is to measure the effectiveness of housing advice in preventing homelessness or threat of homelessness. The provision of comprehensive advice will play an important part in delivering the housing authority's strategy for preventing homelessness in their district.	The aim of this indicator is to prevent the household presenting as homeless and homeless papers being taken. Also avoids the use of temporary accommodation. The indicator is calculated by recording the number of cases assisted through successful casework intervention and dividing this figure by the number of households in the local authority area to produce a figure per thousand households.
LPI 7 Average length of time for major adaptations from OT referrals work beginning (Non waiting list)	Average length of time waiting for major adaptations from assessment to work beginning on site	A major adaptation is defined as all work costing £500 or more. This indicator measures the time in week from the point that a disabled customer is referred to housing improvement to building work starting on site.	This indicator looks at all cases and measures the average number of weeks from referral to work starting.

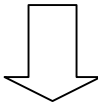
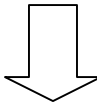
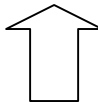
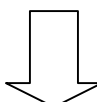

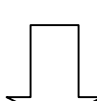
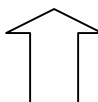
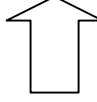
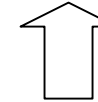
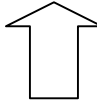
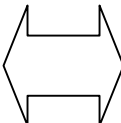
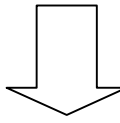
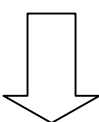
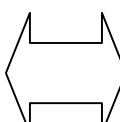


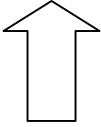
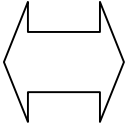
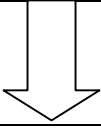
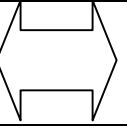
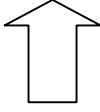
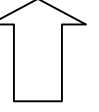
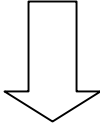
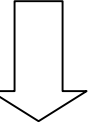
INDICATOR	FULL DESCRIPTION	EXPLANATION	MEANING
BV 64 The number of empty properties returned to use or demolished as a result of LA action.	The number of private sector vacant dwellings that are returned into occupation or demolished during the financial year as a direct result of action by the local authority.	An empty property is a property that has been vacant for 6 months or more. This definition allows enough time for market forces to return an empty property in to use without intervention from an external agency. This indicator is used to encourage the occupation or demolition of empty homes.	The indicator has been set to gauge the number of private sector homes brought back in to use or demolished as a direct result of action by the LA and to enable benchmarking of an authority's performance relative to other authorities with similar housing market conditions.
BV 203 % change in families accommodated in temporary accommodation	The percentage change in the average number of families placed in temporary accommodation.	To measure the authorities' success in achieving a better balance between housing availability and demand for housing.	The authority has to use emergency accommodation when there is no other accommodation available to them. The government's aim is to reduce the number of families in temporary accommodation by 50% by 2010.
AN INTRODUCTION TO CUSTOMER CARE INDICATORS REFERRED TO IN THIS REPORT			
No. complaints leading to a revision of policy or procedure	The number of times that complaints about Social Services functions, which have raised issues which tell the authority something we were not previously aware of, then lead to a change of policy or procedures.	Most complaints are resolved by providing the complainant with an explanation, and or an apology where mistakes have been made. In either event a small number may require a review of service delivery, and/or a reassertion or revision of a policy or procedure.	We receive compliments as well as complaints, and many complaints are unfounded. Any patterns or trends within complaints may expose a need for a change of policy or procedure.
% of complaints resolved in indicated timescale	The percentage of complaints that have been resolved-provided with a response that satisfies the complainant -within the indicated timescale.	There is a legal requirement that councils provide a specific Social Care complaints and representations procedure. Complainants have a <i>legal entitlement to progress</i> through	Complaints that are not dealt with promptly are more likely to be carried on to the next stage. The target within the borough is that 75% are resolved within

INDICATOR	FULL DESCRIPTION	EXPLANATION	MEANING
		a three stage escalating system culminating in a referral to the Local Government Ombudsman if unsatisfied at any of the stages.	the timescales; this is a better indicator of quality than a target of reducing the number of complaints.

## APPENDIX TWO

No.	Description	2005/06 Outturn	Target 2006/07	2006/07 Quarter 1	2006/07 Quarter 2	Future Targets	Outturn Performance compared to		RAG	COLOUR
							Year End	Quarter 1		
ADULTS SOCIAL CARE PERFORMANCE ACTIVITY										
Local Target (C26 LAA)	Admissions of supported residents aged 65 and over to residential/ nursing care per 10,000 population	109.5 ? ? ? ?	110 ? ? ? ?	98	41.4 (x2 = 82.8 = ? ? ? ? ?)	07-08 99			G	GREEN
Local Target (C27 LAA)	Admissions of supported residents aged 18-64 to residential/ nursing care per 10,000 population	4.4 ? ? ?	3.2	0.8	1.80 (x2 = 3.60 = ? ? ? ? ?)				A	AMBER
C28 BV53	I  Intensive home care	15.1 ? ? ? ?	16 ? ? ? ? ?	13.7 ? ? ? ?	13.9 ? ? ? ?	07-08 17 08-09 18			R	RED
C32	Older people helped to live at home per 1,000 population	68.5 ? ?	80 ? ? ?	63.6 ? ?	62.25 ?	07-08 85 08-09 90			R	RED
D40	Clients receiving a review	50.7% ? ?	75% ? ? ?	10.33% ? ?	24.72% (x 2 = 49.4%) ? ?	07-08 80% 08-09 85%			R	RED
D54 BV56	Percentage of items of equipment and adaptations delivered within 7 working days	78.1 % ? ? ? ?	87% ? ? ? ? ?	82.10 % ? ? ? ?	83.2% ? ? ? ?	07-08 95% 08-09 95%			G	GREEN
D55 BV195	Acceptable waiting times for assessments	86.1% ? ? ? ? ?	90% ? ? ? ? ?	85.50% ? ? ? ? ?	74.36% ? ? ?	07-08 90% 08-09 90%			R	RED

No.	Description	2005/06 Outturn	Target 2006/07	2006/07 Quarter 1	2006/07 Quarter 2	Future Targets	Outturn Performance compared to		RAG	COLOUR
							Year End	Quarter 1		
<b>D56 BV196</b>	Acceptable waiting times for care packages	87.0% ? ? ? ?	92% ? ? ? ? ?	91.30% ? ? ? ? ?	83.4% ? ? ? ?	07-08 95% 08-09 95%			<b>R</b>	<b>RED</b>
<b>C51 BV201</b>	Direct payments	82 ? ? ?	104.5 ? ? ? ?	97 ? ? ? ?	83 ? ? ?	07-08 138.5 08-09 165.5			<b>R</b>	<b>RED</b>
<b>E47 LAA</b>	Ethnicity of older people receiving assessment	0.82 ? ?	1.08 ? ? ?	1.3 ? ? ?	1.37 ? ? ?	07-08 1.08 08-09 1.08			<b>G</b>	<b>GREEN</b>
<b>CUSTOMER CARE PERFORMANCE ACTIVITY</b>										
<b>Local</b>	% of complaints received that were resolved in indicated timescale (Stage 1 and 2) – aggregated	40%	75%	49%	66%	80%			<b>G</b>	<b>GREEN</b>
<b>Local</b>	Number of times complaint recommendations lead to a revision of policy or procedure	4	1	0	3	6			<b>G</b>	<b>GREEN</b>
<b>HOUSING PERFORMANCE ACTIVITY</b>										
<b>KPI 2a</b>	Percentage of service users who have moved on in a planned way	71.57%	70.00%	78.45%	77.30%	70.86%			<b>G</b>	<b>GREEN</b>
<b>BV 64</b>	The number of empty properties returned to use or demolished as a result of LA action.	77	125	13	17	150			<b>R</b>	<b>RED</b>

No.	Description	2005/06 Outturn	Target 2006/07	2006/07 Quarter 1	2006/07 Quarter 2	Future Targets	Outturn Performance compared to		RAG	COLOUR
							Year End	Quarter 1		
<b>LPI 4</b>	Number of non decent private sector homes occupied by vulnerable households made decent	170	158	77	88	154			<b>G</b>	<b>GREEN</b>
<b>BV 203</b>	%change in families accommodated in temporary accommodation	1.86%	-0.25%	36%	36%	-0.25%			<b>R</b>	<b>RED</b>
<b>BV 213</b>	Number of cases where homelessness has been prevented	119 cases	150 cases	37 cases	72 (109 cumulative total)	150 cases			<b>G</b>	<b>GREEN</b>
<b>LPI 7</b>	Average length of time for major adaptations from OT referral to work beginning (non waiting list)	42.10 weeks	40	37.11	41.35	35 weeks			<b>R</b>	<b>RED</b>