

**Social Care and Inclusion
Scrutiny and Performance Panel**

**Agenda Item
No. 9**

DATE: 3rd September 2009

**Social Care and Inclusion Performance Scorecard
2008-09 Outturn and Quarter 1 April-June 2009**

Ward(s) All

Portfolios: Cllr Barbara McCracken, Social Care, Health And Housing

Summary of report:

Health, Social Care and Inclusion Scrutiny and Performance Panel has received a quarterly balanced scorecard of representative performance indicators (PIs) since its July 27 2006 meeting. The scorecard aims to stimulate scrutiny of the improvement measures across the directorate.

Background papers:

- Social Care and Inclusion Scorecards for Jan to March (appendix one) and April to June 2009 (appendix two)

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 Council's overall Comprehensive Area Assessment (CAA) evaluation. 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. PIs that have a red traffic light designation will be subject to corrective measures and 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 SOCIAL CARE AND INCLUSION QUARTERLY PERFORMANCE 2008-2009

- 1.1 Panel has previously agreed to receive quarterly reports on a representative list of performance indicators across the Social Care and Inclusion Directorate. This scorecard aims to stimulate discussion and enable the Panel to scrutinise progress being made across the Directorate.
- 1.2 At the 28 August 2008 panel meeting it was agreed to scrutinise a specific selection of indicators. The "RAG" traffic light system is used to indicate the degree to which performance is on target:
- Green: an indicator is on course to achieve its target by year end;
 - Amber: an indicator may be off course but *current* actions will ensure a recovery by year end;
 - Red: an indicator is off course, current actions can not guarantee the target will be met by year end and a revised action plan is required.
- 1.3 At the 28 August 2008 panel meeting it was agreed that each indicator would be expressed both in terms of the *score* and the underlying "*real numbers*". For example: C72 "*Admissions to residential / nursing care per 10,000 population aged 65+*" is expressed both as a score 89.9 and the actual number of people admitted in the year 386 out of the actual number of over 65s in the population 43423. ($89.9 = 386/43423 \times 10000$). A jargon free explanation of the various PIs in this report can be made available upon request.
- 1.4 The Fourth quarter year end scorecard was deferred from the July Scrutiny panel. Therefore this report covers both the year end and the first quarter scores.
- 1.5 In addition the re-organisation of the Directorate saw the majority of Strategic Housing functions relocated to Regeneration Directorate. Consequently the 4th quarter outturn excludes all but the retained supporting people indicators that were formally in the Strategic housing section of the scorecard. The excluded indicators are listed as a footnoteⁱ.

2 COMMENTARY ON 2008-09 OUTTURN

- 2.1 The revised Jan to March 2008-09 scorecard (appendix 1) showed 10 green, and 6 red (including the number of complaints received in the period). The red indicators are commented upon below:
- 2.1.1 **C72 Admissions to residential / nursing care per 10,000 population aged 65+**
The C72 score for 2008-09 is 88.9 above the target of <85. This reflects 386 new admissions of over 65s into residential or nursing care in 2008-09, 17 Admissions above target. Despite missing the target performance is still in the highest performance band using the previous national bandings. A project group is reviewing admission practice, benchmarking and performance in 2009-10.
- 2.1.2 **NI 133 Timeliness Of Social Care Packages and D54 Equipment / Adaptations Delivered Within 7 Days** Both these indicators have suffered due to the fall in the recorded timeliness of equipment delivered to clients both with the 28 and 7 day

targets respectively. This reflects:

- better timeliness by occupational therapy exposing apparent backlogs the in equipment delivery by the Integrated Community Equipment Service (ICES);
- delayed notification to the ICES;
- incorrect application of the indicator definition by ICES; and
- general monitoring and recording matters.

A review was completed in May and a working group to drive up performance in 2009-10 is underway.

2.1.3 CC1 The Number of complaints received in the period (stages 1 and 2) The 121 complaints received in 2008-09 fell short of the target of 160. In the past services have sought to promote opportunities for clients and carers to make complaints. As information about how to complain is widely distributed it is believed that the effectiveness of learning from previous complaints, and consultation and engagement opportunities may explain this lower than anticipated figure.

2.1.4 CC2 The Number of complaints that were resolved in period within indicated timescale (stages 1 and 2) 120 complaints were *completed* in the year 2008/09. Of these, 89 (67.5%) were completed within the 20 working days timescale consequently narrowly missing the target of 70%.

2.1.5 HR2 Percentage of SSD directly employed posts vacant 21.3% or 212 posts out of 995 were vacant during 2008-9 therefore missing the target of 20% by 13 vacancies. This is partly explained by vacancy freezes in non essential areas linked to service redesign and responsible budget management.

3 COMMENTARY ON THE APRIL-JUNE PROPOSED SCRUTINY SCORECARD

3.1 Members are presented with a new proposed scrutiny scorecard (see appendix two). It should be noted that:

- the Customer Care local indicators have been redesigned; and
- the PAF bands (? ? ? ?) are no longer maintained and updated by the Care Quality Commission (CQC) (formerly the Commission for Social Care Inspection - CSCI) and are therefore only approx comparisons.

Members may wish to review the indicators not included (below 4.2) and make additions or exclusion to the proposed score card.

3.2 The April-June 2009 scorecard shows 12 green, 2 amber, and 2 red. There are no additional “red” indicators not on the scrutiny score card.

3.2.1 D54 Equipment / adaptations delivered within 7 days As noted above a review was completed in May and a working group to drive up performance in 2009-10 is underway.

3.2.2 NI 130 Social care clients receiving Self Directed Support (direct payments and individual budgets) PAF51 18+ Currently a diagnostic examination of both the recording and the performance of this indicator is underway due to changes in the national definition (with the performance now measured as a percentage) and a currently unexplained fall in the actual number of people receiving self directed support since the previous outturn. It is anticipated that corrective action should

restore performance.

4 **SOCIAL CARE AND INCLUSION DIRECTORATE FULL SCORECARD LIST**

4.1 The indicators below are not included in the scrutiny Scorecard. As agreed at the 28th August 2008 Panel during the year if other indicators, not on the proposed scorecard become "red" they will be added to the scorecard and reported to members. In the case of Adult Social care they will only be added to the Score Card if they:

- Have gone red and have dropped a band;
- Or are have gone red and are band two or below.

This should help to distinguish good performance that narrowly misses its target from indicators that require genuine scrutiny.

4.2 **C73** Admissions to residential / nursing care per 10,000 population aged 18 – 64
D39 Statements of need (% of 18+ receiving a statement of their needs and how they will be met)
D40 Clients receiving a review 18+
E48 Ethnicity of older people receiving services following an assessment
CC2 % of complaint responses NOT requiring further attention following Quality Assurance by CCT
CC3 % requiring progression to independent investigation within the process
145 Adults with learning disabilities in settled accommodation
146 Adults with learning disabilities in employment
1OP001.0 Non-residential intermediate care to prevent hospital admission
1OP002.0 Intermediate care in a residential setting (rapid response) to prevent hospital admission
1OP003.0 Non-residential intermediate care to facilitate timely hospital discharge and / or effective rehabilitation
1OP121.0 Intermediate care in a residential setting (supported discharge) to facilitate timely hospital discharge and / or effective rehabilitation
2OP009.0 New service users 65+ provided / to be provided with one Telecare equipment in their own homes (or equivalent) Adult social care alone
2OP010.0 New service users 65+ provided / to be provided with one Telecare equipment in their own homes (or equivalent) Adult social care in partnership with other agency
2OP011.0 New service users 65+ provided / to be provided with one Telecare equipment in their own homes (or equivalent) Other agencies without adult social care input
B12 Unit costs of residential care for all client groups
B17 Weekly expenditure on home care costs for adults and older people
F3 Unit cost of direct payments
HR3 The percentage of social services working days/shifts lost to sickness absence during the financial year

APPENDIX ONE

SOCIAL CARE AND INCLUSION QUARTER 4 SCORECARD FOR 2008-09

Indicator No.	Indicator Description	2006/07 Outturn	2007/08 Outturn	Qtr 1	Qtr 2	Qtr 3	Current Qtr 4	Target 2008/09	Qtr 4 compared to		RAG
									2007/08 Outturn	Qtr 3	
Adult Social Care Services											
C72	Admissions to residential / nursing care per 10,000 population aged 65+ Top band ? ? ? ? ?	85	88	52 (G)	75.1 (G)	81.7 (G)	88.9 (R)	<85	↓	↓	R
			N: 379 D: 43090	N: 224 (56X4) D: 43090	N: 326 (163X2) D: 43423	N: 354.7 (266X1.3) D: 43423	N: 386 D: 43423	N: 369 D:43423			
		?? ? ? ?	?? ? ? ?	?? ? ? ?	?? ? ? ?	?? ? ? ?	?? ? ? ?	?? ? ? ?	?? ? ? ?		
D37	Availability of single rooms Top band ? ? ? ? ?	96.0%	94.6%	100% (G)	90.2% (A)	95% (A)	95.6% (G)	95%	↑	↑	G
			N: 123 D: 130		N:74 D: 82	N: 95 D:100	N:130 D:136				
		?? ? ? ?	?? ? ?	?? ? ? ?	?? ? ?	?? ? ? ?	?? ? ? ?	?? ? ? ?	?? ? ? ?		
D54	Equipment / adaptations delivered within 7 days Top band ? ? ? ? ?	85.0%	86.1%	89% (G)	92.4% (G)	94.1 (G)	70.2% (R)	90%			R
			N: 7195 D: 8353	N: 2171 D: 2437	N: 6272 D: 6788	N: 9990 D: 10618	Estimate				
		?? ? ? ?	?? ? ? ?	?? ? ? ?	?? ? ? ?	?? ? ? ?	?? ? ? ?	?? ?	?? ? ? ?		
E47	Ethnicity of older people receiving an assessment Top band ? ? ?	1.10	1.26	1.4 (G)	1.46 (G)	1.59 (G)	1.55 (G)	1<2	↔	↔	G
			N:0.058% D: 0.046%	N: 0.065% D: 0.046%	N: 0.067% D: 0.046%	N: 0.073% D: 0.046%	N: 0.071 D: 0.046				
		?? ?	?? ?	?? ?	?? ?	?? ?	?? ?	?? ?	?? ?		
130	Social care clients receiving Self Directed Support	N/A	N/A	108.4(G)	135.9 (G)	214 (G)	251.9 (G)	120	N/A		G

APPENDIX ONE SOCIAL CARE AND INCLUSION QUARTER 4 SCORECARD FOR 2008-09											
Indicator No.	Indicator Description	2006/07 Outturn	2007/08 Outturn	Qtr 1	Qtr 2	Qtr 3	Current Qtr 4	Target 2008/09	Qtr 4 compared to		RAG
									2007/08 Outturn	Qtr 3	
	(individual budgets/direct payments)			213 clients	271 clients	424 clients	489 clients	235 Clients			
132	Timeliness of social care assessment. PAFD55 (18+ new clients)	N/A	N/A	86.3%(A)	82.1% (R)	87.5% (R)	91.2% (G)	90.1%	N/A		G
				N: 648 D: 751	N: 1399 D: 1705	N: 2330 D: 2664	N: 3334 D: 3656				
133	Timeliness of social care package PAFD56 (65+ new clients)	N/A	N/A	91.2% (G)	84.9% (R)	88.3% (R)	88% (R)	90.1%	N/A		R
				N: 352 D: 386	N: 715 D: 842	N: 1214 D: 1375	N: 1737 D: 1977				
135 LAA	Carers receiving needs assessment or review and a specific carer's service, or advice and information	N/A	N/A	28.2% (G)	30.1% (G)	34.9% (G)	37.2% (G)	21%	N/A		G
				N: 2152 D: 7635	N: 2348 D: 7635	N: 2666 D: 7635	N: 3088 D: 8303	N: 1604 D: 7635			
136 LAA	People supported to live independently through social services	N/A	N/A	2679 (G)	2810 (G)	2860 (G)	2538 (R)	2200	N/A		G
Social Care Customer Care Local PI's											
CC1	The No. of complaints received in the period (stages 1 and 2)	197	173	30 (A)	24 (A)	42 (A)	25 (R) (OT:121)	160-200	↓	↓	R
CC2	% of complaints that were resolved in period within indicated timescale (stages 1 and 2)	62%	69%	69% (G)	58% (A)	72% (G)	71% (R) (OT: 67%)	70%	↓	↓	R
				N: 20 D: 29	N: 15 D: 26	N: 26 D: 36	N: 20 D: 28				

APPENDIX ONE SOCIAL CARE AND INCLUSION QUARTER 4 SCORECARD FOR 2008-09											
Indicator No.	Indicator Description	2006/07 Outturn	2007/08 Outturn	Qtr 1	Qtr 2	Qtr 3	Current Qtr 4	Target 2008/09	Qtr 4 compared to		RAG
									2007/08 Outturn	Qtr 3	
CC4	At least 7% of complaints lead to changes in services for service users	5%	10%	10% (3)	15% (4)	17% (6)	25% (5)(G) OT:15%	7%	↑	↑	G
Social Care Human Resources Local PI's											
HR1	Recruitment & retention indicator (staff turnover): Percentage of SSD directly employed staff that left during the year	8.5%	8.3%	32.62% (R)	2.98% (G)	3.08% (G)	4.42%(G)	8.00%	↑	↓	G
					N: 30 D: 1007	N: 31 D: 1008	N: 44 D: 995				
HR2	Recruitment & retention indicator (staff vacancies): Percentage of SSD directly employed posts vacant	12.3%	24.1%	*18.97% (G)	19.07% (G)	20.63% (A)	21.31%	20.00%	↑	↓	R
					N: 192 D: 1007	N: 208 D: 1008	N: 212 D: 995				
Supporting People Pis											
141 LAA	Number of vulnerable people achieving independent living	NA	83.90%	71.20% (A)	84.72 (G)	To follow in Qtr 4	84.81	76%	↑	↑	G
142 LAA	Percentage of service users who have been supported to maintain independent living	NA	98.89%	99.07% (G)	98.78% (G)	To follow in Qtr 4	98.36%	98%	↓	↓	G

APPENDIX TWO SOCIAL CARE AND INCLUSION QUARTER 1 SCORECARD FOR 2009-10											
Indicator No.	Indicator Description	2007/08 Outturn	2008/09 Outturn	Current Qtr 1	Qtr 2	Qtr 3	Qtr 4	Target 2009/10	Qtr 1 compared to		RAG
									2008/09 Outturn	Previous Quarter	
C72	Admissions to residential / nursing care per 10,000 population aged 65+	88	88.89	64.48				<85	↑		G
		N: 379 D: 43090	N: 386 D: 43423	N: 280 D: 43423							
		? ? ? ? ?	? ? ? ? ?	? ? ? ? ?							
D37	Availability of single rooms	94.6%	95.6%	96.8%				>95	↑		G
		N: 123 D: 130	N:130 D:136	N: 30 D: 31							
		? ? ? ?	? ? ? ? ?	? ? ? ? ?							
D54	Equipment / adaptations delivered within 7 days	86.1%	70.2%	65.9%				>85	↓		R
		N: 7195 D: 8353	N:2398 D:3414	N: 411 D: 623							
		? ? ? ? ?	? ? ?	? ? ?							
E47	Ethnicity of older people receiving an assessment	1.26	1.55	1.51				1<2	↔		G
		N:0.058% D: 0.046%	N: 0.071 D: 0.046	N: 0.07 D: 0.046							
		? ? ?	? ? ?	? ? ?							
130	Social care clients receiving Self Directed Support (direct payments and individual budgets) PAFC51 18+	N/A	251.9	6.19%				20%	↓		R
			489 clients	N: 378 D: 6105							
132	Timeliness of social care assessment. PAFD55 (18+ new clients)	N/A	91.2%	97.1%				90.1%	↑		G
			N: 3334 D: 3656	N: 949 D: 977							
133	Timeliness of social care package PAFD56 (65+ new clients)	N/A	88%	94.5%				90.1%	↑		G
			N: 1737 D: 1977	N: 483 D: 511							

APPENDIX TWO SOCIAL CARE AND INCLUSION QUARTER 1 SCORECARD FOR 2009-10											
Indicator No.	Indicator Description	2007/08 Outturn	2008/09 Outturn	Current Qtr 1	Qtr 2	Qtr 3	Qtr 4	Target 2009/10	Qtr 1 compared to		RAG
									2008/09 Outturn	Previous Quarter	
135 LAA	Carers receiving needs assessment or review and a specific carer's service, or advice and information PAFC62	N/A	37.20%	14.6%				24.5%			G
			N: 3088 D: 8303	N: 848 D: 5772					↑		
136 LAA	People supported to live independently through social services PAFC29, C30, C31 & C32	N/A	2538	2572				2600	↑		G
CC1	% of complaints resolved within the timescale indicated on the complaint plan			75%				70%	N/A		G
CC4	% investigated by the LGO following local authority investigation			0				<5%	N/A		G
CC5	At least 7% of complaints lead to changes in service delivery to service users			55%				>7%	N/A		G
HR1	Staff turnover: Percentage of SSD directly employed staff that left during the year	8.3%	4.42%	5.79%				8			G
			N: 44 D: 995	N: 56 D: 966					↑		
HR2	Staff vacancies: Percentage of SSD directly employed posts vacant	24.1%	21.31%	21.53%				20			A
			N: 212 D: 995	N: 208 D: 966					↓		
141 LAA	Number of vulnerable people achieving independent living	83.90%	84.81%	78.63%				78%	↑		G
142 LAA	Percentage of service users who have been supported to maintain independent living	98.89%	98.36%	96.11%				98%	↓		A

ⁱ Indicators excluded from the 4th quarter report are:

- LPI 3 Number of private sector homes occupied by vulnerable households made decent
- LPI 6 Average length of time from grant approval to completion of work (DFG)
- LPI 12 RSL Void turnaround time
- LPI 13 Homeless households in Temporary Accommodation who accepted an offer of accommodation
- LPI 14 Homeless at home households who accepted an offer of accommodation
- **LPI 17** Average length of stay in B&B for families
- **LPI 18** Levels of repeat homelessness
- LPI 23 Number of cases where homelessness has been prevented and
- 156 NI Number of households living in temporary accommodation
- **187 LAA** Tackling fuel poverty - people receiving income based benefits living in homes with a low energy efficiency rating