

16 July 2024

Quarter Four, 2023/24  
Performance Management Report



## Report of John Hewitt, Chief Executive

### Electoral division(s) affected:

Countywide.

### Purpose of the Report

- 1 To share information about our performance with members, senior managers, employees and the public.
- 2 The report tracks our progress towards achieving the strategic ambitions and objectives set out in our 2023-27 council plan. It contains the most recent performance data available on 31 March. Contextual information relates to activity and events taking place in the fourth quarter of the 2023/24 financial year (January to March). It provides insights into what is going well and the issues we are addressing.

### Executive Summary

- 3 We are a key player within the County Durham Together Partnership and are working with our partners to deliver the [County Durham Vision 2035](#). This vision sets out what we want the county to look like over the next decade and beyond. The overall vision is for:  
**a place where there are more and better jobs, people live long, and independent lives and our communities are well connected and supportive.**
- 4 Our [Council Plan](#) sets out how we will contribute to achieving this vision, while continuing to effectively deliver our day-to-day services.
- 5 We refresh our Council Plan every year. Council has now approved the plan for the forthcoming four years ([Council Plan 2024-28](#)). We will commence reporting performance against our ambitions, objectives and priorities for this plan from 1 April.
- 6 We continue to be a 'well-functioning council' in relation to performance. We operate to the characteristics set out in guidance from the Department for Levelling Up, Housing and Communities (DLUHC)<sup>1</sup>. And we are continuing to

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<sup>1</sup> [Best Value standards and intervention](#)

develop the following through our performance management processes and the wider Corporate Business Intelligence Review:

- (a) A council-wide approach to continuous improvement, with frequent monitoring, performance reporting and updating of the corporate and improvement plans;
  - (b) A Council Plan that is evidence based, current, realistic and enables the whole organisation's performance to be measured and held to account;
  - (c) Clear and effective mechanisms for scrutinising performance across all service areas. We regularly report our performance to the public to ensure citizens are aware of the quality of services being delivered.
- 7 The government has established an Office for Local Government (Oflog). Oflog aims to increase understanding about the performance of local authorities, warn when authorities are at risk of serious failure, and support local government to improve itself.
- 8 Oflog is bringing together existing data in an informative way through the [Local Authority Data Explorer](#). Their suite of metrics is being continually expanded and will eventually cover all local government responsibilities. The next tranche of data will be added later in the year. We will also add the new metrics to our performance framework and include in our reporting process.

## **Context**

- 9 We are a large organisation providing a broad range of services. Our operating environment can at times be challenging, influenced by various interconnected factors including inflationary and demand pressures, demographic shifts and the changing needs of our residents, economic uncertainties, and the ongoing impacts of global events.
- 10 From an adult social care perspective, Care Act assessment timeliness for adult social care clients is improving and remains an area of strong focus for us.

## **Recommendation**

- 11 Adults, Wellbeing and Health Overview and Scrutiny Committee is recommended to:
- (a) note the overall position and direction of travel in relation to quarter four performance (January to March), and the actions being taken to address areas of challenge.

## Background papers

- County Durham Vision (County Council, 23 October 2019)  
<https://democracy.durham.gov.uk/documents/s115064/Draft%20Durham%20Vision%20v10.0.pdf>

## Other useful documents

- Council Plan 2023 to 2027 (current plan)  
<https://www.durham.gov.uk/media/34954/Durham-County-Council-Plan-2023-2027/pdf/CouncilPlan2023-2027.pdf?m=638221688616370000>
- Quarter Two, 2023/24 Performance Management Report  
<https://democracy.durham.gov.uk/documents/s183015/Q2%202023-24%20Corporate%20Performance%20Report.pdf>
- Quarter One, 2023/24 Performance Management Report  
<https://democracy.durham.gov.uk/documents/s178933/Q1%202023-24%20Corporate%20Performance%20Report%20-%20Cabinet%2013.09.23.pdf>
- Quarter Four, 2022/23 Performance Management Report  
<https://democracy.durham.gov.uk/documents/s174900/Item%204%20Q4%202022-23%202%201.pdf>
- Quarter Three, 2022/23 Performance Management Report  
<https://democracy.durham.gov.uk/documents/s166398/Corporate%20Performance%20Report%20Q2%202022-23%20v2.1.pdf>

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## **Appendix 1: Implications**

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### **Legal Implications**

Not applicable.

### **Finance**

Latest performance information is being used to inform corporate, service and financial planning.

### **Consultation**

Not applicable.

### **Equality and Diversity / Public Sector Equality Duty**

Equality measures are monitored as part of the performance monitoring process.

### **Climate Change**

We have declared a climate change emergency and consider the implications of climate change in our reports and decision-making.

### **Human Rights**

Not applicable.

### **Crime and Disorder**

A number of performance indicators and key actions relating to crime and disorder are continually monitored in partnership with the Safe Durham Partnership and its sub-groups.

### **Staffing**

Performance against a number of relevant corporate health indicators has been included to monitor staffing issues.

### **Accommodation**

Not applicable.

### **Risk**

Reporting of significant risks and their interaction with performance is integrated into the quarterly performance management report.

### **Procurement**

Not applicable.



# Corporate Performance Report

## Quarter Four, 2023/24



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## Executive Summary

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- 1 This report shows how we are performing against the priorities set out in our Council Plan 2023-27.
- 2 We are reporting performance on an exception basis with key messages structured around the five thematic areas of, our economy, our environment, our people, our communities, and our council.
- 3 We are reporting the most recent performance available as at 31 March. Contextual information relates to activity and events taking place in the fourth quarter of the 2023/24 financial year (January to March).

### Our people

- 4 This priority aims to help our residents live long and independent lives and remain in good health for as long as possible. We will protect and improve health by tackling the leading causes of illness and early death, inequalities and the challenges around mental health. We will ensure a sustainable high-quality care market and invest in a multi-million pound programme to transform our leisure centre venues.

### Going Well

- 5 In Adult Social Care annual review performance is improving. Quarter four shows 69.5% of service users had received an assessment or review in the last 12 months, the highest recorded performance for more than two years, demonstrating the impact of the new review teams established in early 2023. Performance remains lower than three years ago; however, recent initiatives are closing the performance gap.
- 6 The home care market has remained stable over the last 15 months with approximately 3,300 people using home care at any given point during this period. Access to home care services is excellent as waiting times for home care packages have been eliminated. Currently, there is no waiting list for home care services, which has been the case for the vast majority of the last 12 months, but local capacity remains a priority and is well managed. High Care Quality Commission (CQC) ratings for community-based care demonstrate high quality services provided for residents across the county.
- 7 The percentage of individuals achieving their desired outcomes during the safeguarding process has also improved and is the highest for over two years. We are now in line with performance in the North East and working towards the England result.

### Issues we are addressing

- 8 The adult social care service continues to focus on improving the timeliness of Care Act assessment completions. A new set of indicators have been developed to measure the timeliness of all assessments undertaken across adult care, rather than just Care Act assessments. The service will closely manage the performance of the new indicators.
- 9 In adult social care, the number of people discharged from hospital into reablement and rehabilitation services is lower than we have historically achieved. A review of reablement services has been undertaken to understand changing demand to the service as well as staff turnover and service capacity. Outcomes for those who do

undertake reablement and rehabilitation services continue to be good and outperform targets.

- 10 Permanent admissions to residential and nursing care have been increasing over the last year, and we have exceeded our Better Care Fund (BCF) target for the full year. Whilst admissions are higher than during the pandemic, we continue to reduce admissions in line with the longer term trend identified in the years prior to the pandemic.
- 11 Smoking is the single largest cause of preventable deaths, and one of the largest causes of health inequalities in England. Despite reductions in prevalence, too many people smoke in County Durham both in the general population and through pregnancy to the time of delivery. Over the longer term, these trends contribute to smoking mortality rates being higher than the England average. The Joint Local Health and Wellbeing Strategy 2023-28 prioritises supporting 'making smoking history' and reduce smoking to less than 5% of the population by 2030. To achieve this ambition, the Tobacco Control Alliance has maintained its seven-point action plan which is monitored on a quarterly basis and refreshed annually.

## **Risk Management**

- 12 The government's statutory guidance for best value authorities sets out the characteristics of a well-functioning authority. This details the arrangements that councils should have in place for robust governance and scrutiny including how risk awareness and management should inform decision making. The latest [Strategic Risk Management Progress Report](#) provides an insight into the work carried out by the Corporate Risk Management Group between October and December 2023.



# Our People

## Priority Aims:

County Durham is a place where people will enjoy fulfilling, long and independent lives. We aim to,

- ensure children and young people will enjoy the best start in life, good health and emotional wellbeing
- ensure children and young people with special educational needs and disabilities will achieve the best possible outcomes
- ensure all children and young people will have a safe childhood
- promote positive behaviours
- better integrate health and social care services
- tackle the stigma and discrimination of poor mental health and build resilient communities
- people will be supported to live independently for as long as possible by delivering more home to meet the needs of older and disabled people
- support people whose circumstances make them vulnerable and protect adults with care and support needs from harm
- protect and improve the health of the local population, tackling leading causes of illness and death

## National, Regional and Local Picture

### Adult Social Care

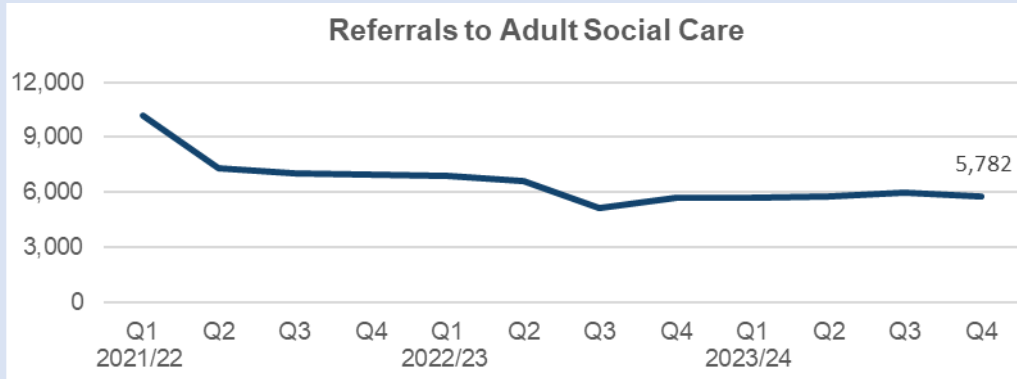
- 13 We have been selected as one of the first local authorities to be assessed under the new Care Quality Commission (CQC) led local authority assessment framework. As part of the assessment process, the Local Authority Information Return (LAIR) was submitted to the CQC in February 2024. The return makes available to the CQC key documents, information and data prior to the onsite visit. CQC Assessors attended for an onsite visit between 21-23 May 2024.
- 14 Following the onsite visit, the CQC will draft a report containing scores for each of the framework's quality statements, and an overall rating. As the CQC is undertaking an internal benchmarking exercise, to review and calibrate the scores and ratings for those local authorities assessed in the early round of the full formal assessments, it is likely that there will be a short delay before we receive the final report.
- 15 On 7 March 2024, the Department of Health and Social Care (DHSC) published the first data sourced from the new Client Level Dataset (CLD). Published as 'official statistics in development,' DHSC released the number of people receiving local authority commissioned long-term support at national, regional and local authority level as at the end of each month from April to December 2023.
- 16 The publication allowed us to compare some of the figures from our CLD submission with other local authorities for the first time. Over the nine month period published, Our rate per 100,000 population of long-term service users (1,638, December 2023) was slightly above the statistical nearest neighbours (1,597) and national result (1,433), but below the North East (1,830). Our result was also similar to the 2022/23 Short and Long Term Services (SALT) comparison (1,584), which the CLD is replacing.

- 17 This first look at CLD national data provided us with assurance that the way we are compiling the data return, and the level of long-term care we provide, is in line with other local authorities. It is expected that data releases sourced from the CLD will increase through 2024/25 as the DHSC completes its own assurance work on the submitted data. As part of the Market Sustainability and Improvement Fund, DHSC confirmed they have plans to publish average times between request and assessment and request and service, though no date for publication has yet been announced. All indicators will be included in this report when they are made available.
- 18 The government has announced that new funding, the Accelerating Reform Fund (ARF), will enable the expansion of community-based care models such as Shared Lives and online support services such as Mobilise. The funding is provided by the DHSC and allocated to local authorities within the same Integrated Care System (ICS) footprint. As hosts to North East Association of Directors of Adult Social Services (NE ADASS), who are overseeing the ARF projects, Durham is the lead authority for this grant for the North East and North Cumbria, which will receive a total of £2.23m for the two year programme.
- 19 The grant will be used to expand the Shared Lives scheme in the region, with a focus on autism and transitions. Shared Lives can be either short-term or long-term care, offering choice and autonomy to people with needs for care and support and enabling people to live in the community, as well as providing unpaid carers with more flexibility and breaks. Mobilise provide online support for unpaid carers, via information, advice, and peer networks. As a 24/7 service it can act as an alternative to, or complement, existing carer support services in the region. It will also have a key aim to identify 'hidden carers' who do not currently have access to support around their caring role. Any ARF grant monies not spent on the regional Shared Lives and Mobilise projects will be used to support smaller innovative projects at a local and sub-regional level.

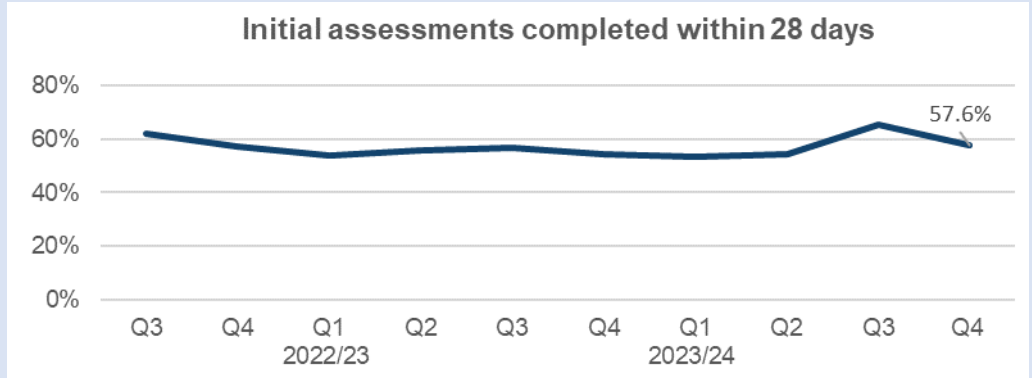
# Adult Social Care Dashboard – Referrals and Assessments

(discrete quarterly data)

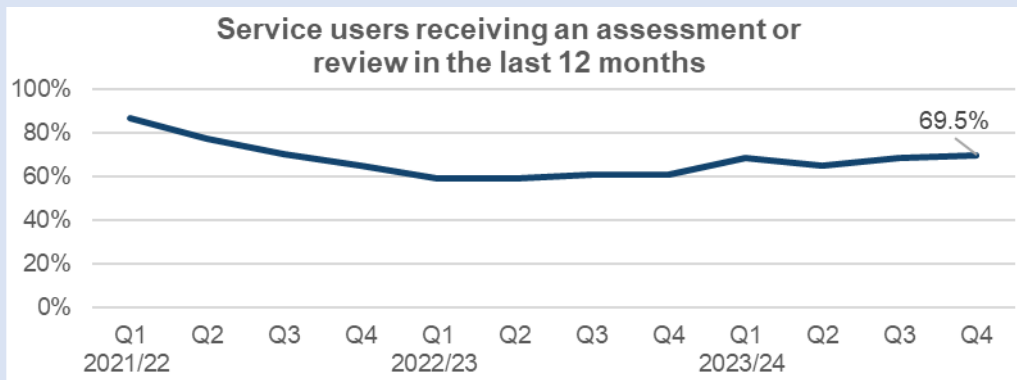
## Referrals



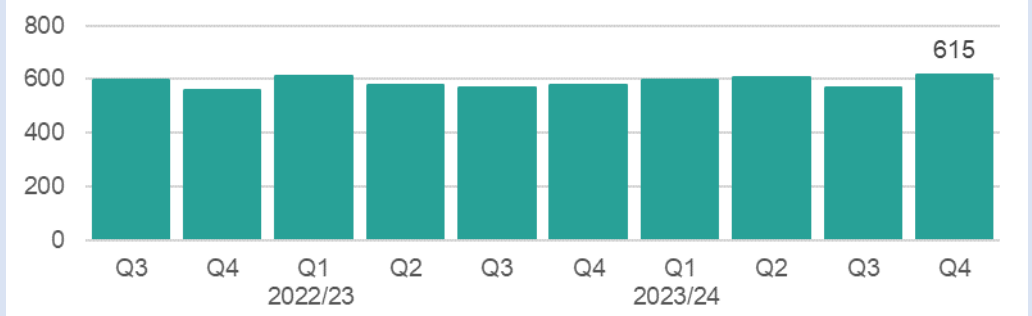
## Care Act assessments completed and timeliness



## Annual Reviews



## Care Act assessments completed each quarter



Benchmarking data for these indicators is not available as this is local data that is not reported nationally. The implementation of the national Client Level Data set has the potential for benchmarking to be produced by DHSC. If this happens, it will likely be in the next 12-18 months.

## **Referrals to Adult Social Care**

- 20 The number of referrals into adult social care have been stable for over a year. We received an average of 5,829 referrals per quarter through 2023/24.
- 21 We are examining internal and external contacts and referrals into Adult Social Care. We aim to understand the longer-term reduction in referrals over the last two to three years. This work will increase our understanding of the changing demand for adult social care.
- 22 As referral data are not published nationally, benchmarking for this indicator is unavailable. The new statutory Client Level Dataset (CLD) started recording referrals (known in CLD as requests) for services from April 2024. The implementation of the CLD has the potential for benchmarking to be produced by DHSC. If this happens, it will likely be in the next 12-18 months.

## **Care Act assessment timeliness**

- 23 Care Act assessments for adult social care are expected to be completed within 28 days from the date of first contact. The percentage of assessments completed within this timeframe stands at 57.6% in the latest quarter (January – March 2024). This is worse than the previous quarter (65.2% for October – December 2023), but better than the near two-year period prior (January 2022 – September 2023).
- 24 The service continues to focus on improving timeliness. An ongoing impact statement is reviewing potential options to support the prompt completion of these assessments. A waiting lists and backlogs task and finish group was established this quarter to consider ways to improve the timely completion of assessments.
- 25 The number of Care Act assessments completed each quarter continues to be stable. An average of 598 assessments were completed per quarter through 2023/24.
- 26 A new set of indicators has been developed to measure the timeliness of all assessments and reviews undertaken across Adult Care, rather than just Care Act assessments. The indicators now include additional short-term (hospital service assessment plans) and long-term (occupational therapy assessments, sight and hearing loss assessments and emergency duty plan assessments). The service area will closely manage performance for the new indicator set.
- 27 Currently, both the number of and timeliness of Care Act assessments are not reported nationally. Both may soon be available from the CLD, depending on national developments.

## **Annual Reviews of Service**

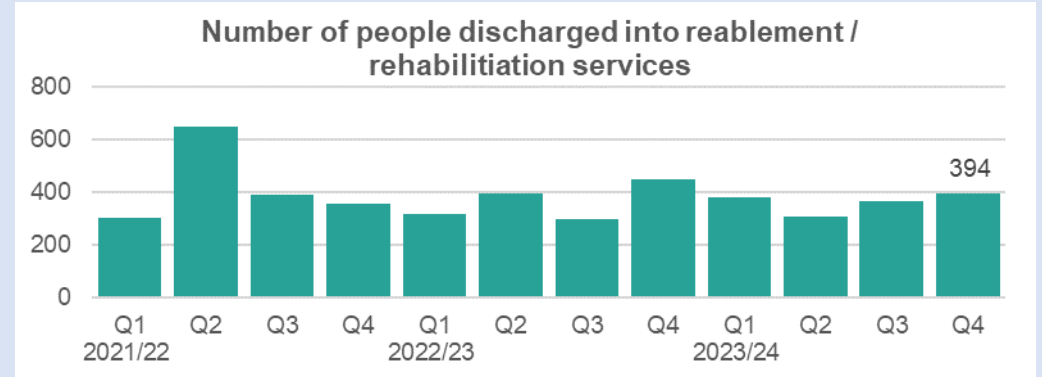
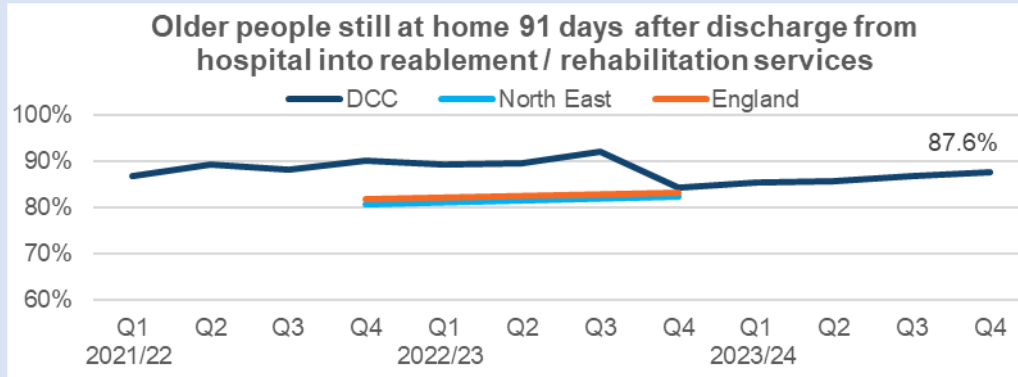
- 28 Service users are expected to have their care plan reviewed every 12 months to ensure that their care remains appropriate to their needs. The data for quarter four shows 69.5% of service users had received an assessment or review in the last 12 months. This is the highest recorded performance for more than two years, demonstrating the impact of the new review teams which were established early in 2023. Performance remains lower than three years ago; however, recent initiatives are closing the performance gap.
- 29 Operation of the new teams is overseen by the council. Performance is reported monthly to the council. An end of year report is to be provided to the council outlining progress made.

- 30 Nationally available data provided through the SALT return provides the position for reviews of long-term care packages, however, production of this data return is not in line with our locally reported measure. Benchmarking is, therefore, not available.

# Adult Social Care Dashboard – Reablement and rehabilitation services

(91 days cumulative / number of discharges discrete quarterly data)

## Discharges into reablement / rehabilitation services



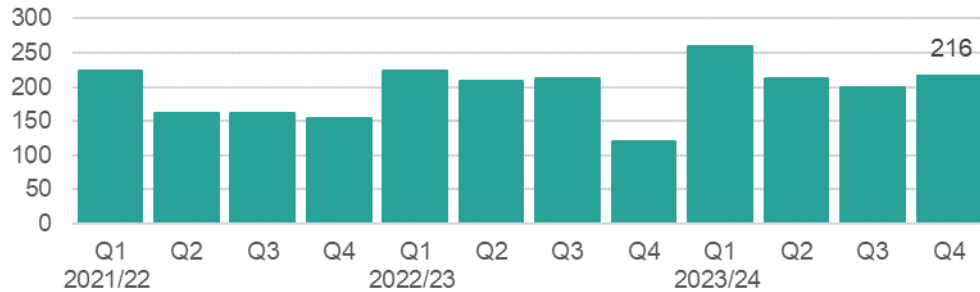
## **Discharge into Reablement and Rehabilitation Services**

- 31 The percentage of older people still at home 91 days after discharge from hospital into reablement / rehabilitation services (87.6%) is the highest since quarter three 2022/23 (91.9%). It is also close to the three-year average (87.9%). Latest performance is better than our Better Care Fund target of 84%, and the latest regional and national benchmarking.
- 32 The number of people discharged into reablement and rehabilitation services demonstrates little change over the last three years. When compared to older data, a reduction is clear. In the latest three-year period, an average of 383 people were discharged each quarter. This is much lower than the three-year period covering 2017/18 to 2019/20, when an average of 590 people were discharged into reablement and rehabilitation services each quarter.
- 33 A review of reablement services has been undertaken to understand changing demand to the service as well as staff turnover and capacity of the service. The final report has been considered by the council. Following this, work has been undertaken to identify zones to pilot a new way of reablement working, modelling has been done on a possible 'pay by episode' approach and Technology Enabled Care options identified for lifestyle monitoring during the reablement period.

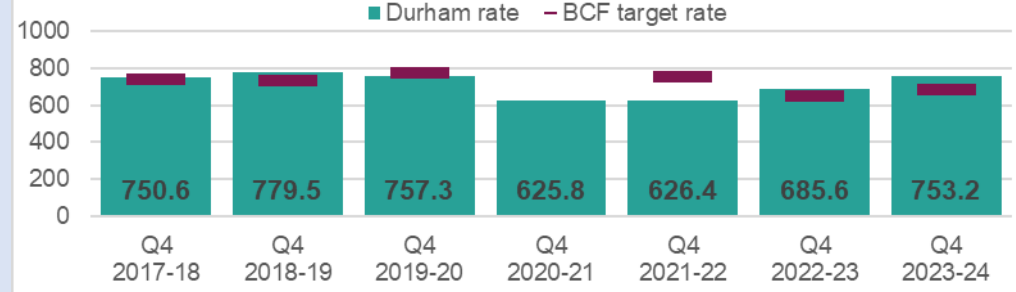
# Adult Social Care Dashboard – Admissions to permanent care

(quarterly / annual)

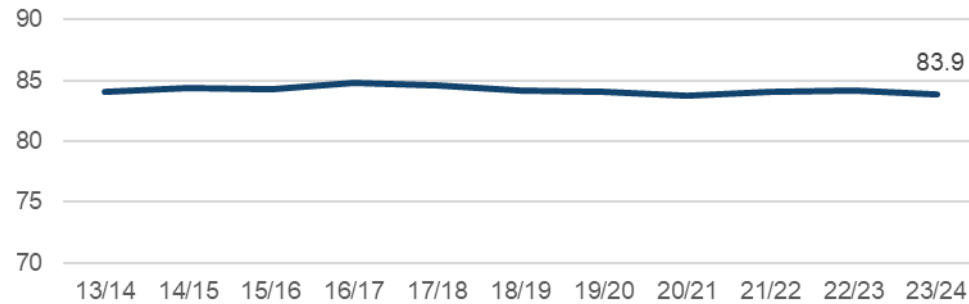
### Adults aged 65+ admitted permanently to residential or nursing care



### Rate of admission of adults aged 65+ to permanent residential or nursing care



### Average age of admission to permanent care



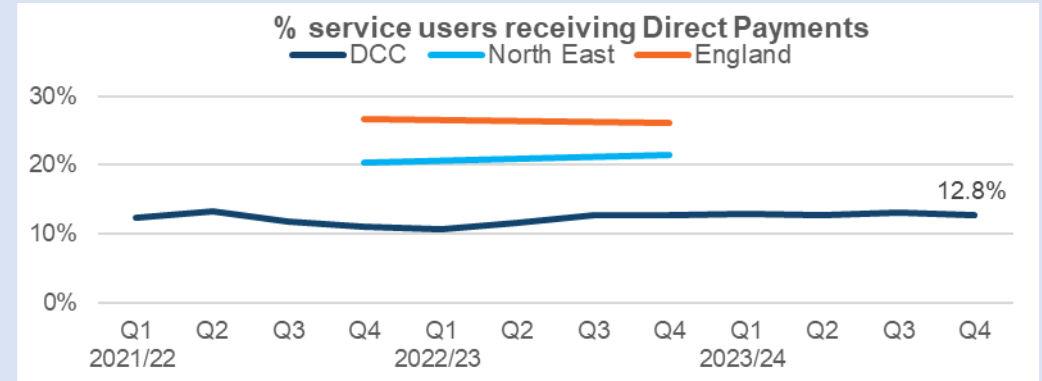
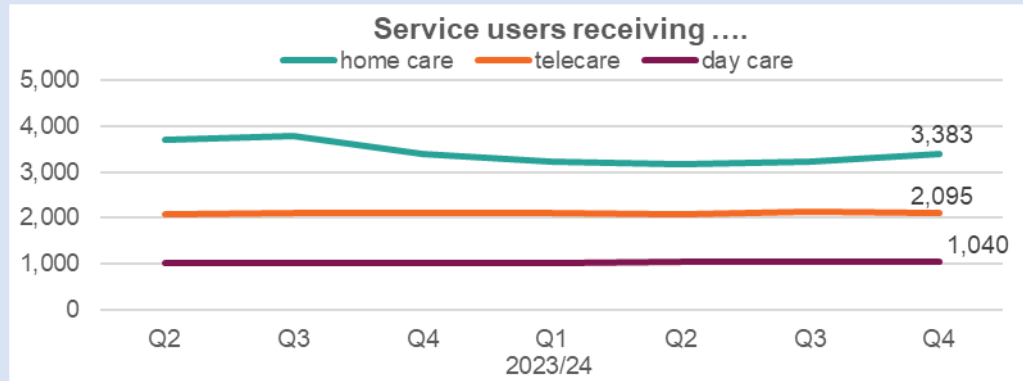


## Admissions to Care

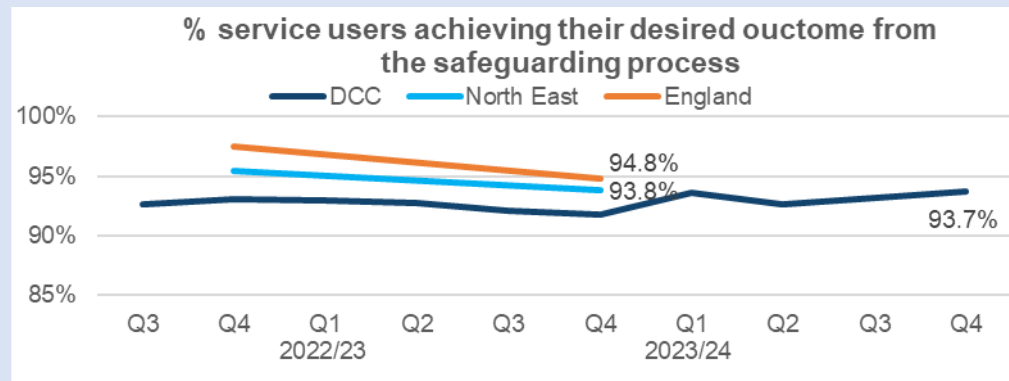
- 34 The number of people aged 65+ admitted to permanent residential or nursing care is closely monitored to understand changing demand. To allow comparisons with other geographies, performance is reported as a rate per 100,000 population.
- 35 The rate in County Durham has been returning to expected levels over the last four years. In our latest end of year outturn, admissions have increased slightly higher than the level expected. Our final rate of admissions of 753.2 is worse than the ambitious Better Care Fund (BCF) target of 677.6. Despite missing target, this is still better than the two years prior to the disruption caused to admissions by the pandemic.
- 36 In the five-year period leading up to the pandemic we had a declining trend in permanent admissions. Care homes were greatly affected by the pandemic, with many being closed to admissions for many months. This led to low numbers of admissions for 2020/21 and 2021/22. In 2022/23, the number of admissions had almost recovered to pre-pandemic levels.
- 37 The 2023/24 BCF target was set at an ambitious level. The decision was taken to make the BCF target number of admissions for 2023/24 a continuation of the declining trend seen before the pandemic. The three years affected by the pandemic (2020/21 to 2022/23) were set aside. A linear forecast was created based on the five years prior to the pandemic and projected forward to the end of 2023/24. This gave us a projected level of admissions which we may have seen in that year, had the previous declining trend continued unaffected by the pandemic years. This gave us a target of 798 admissions, which converted to the BCF target rate per 100,000 population of 677.6.
- 38 It is disappointing that we have not met our BCF target rate. However, it is positive that we are continuing to reduce admissions in line with the longer term-trend identified in the years prior to the pandemic, albeit at a slower rate than predicted. Capacity in care homes also continues to be well managed enabling admissions as required. High CQC ratings for care homes demonstrate quality of service provided across the market.
- 39 The average age of those entering permanent care (83.9 years) has remained static over the last ten years.

# Adult Social Care Dashboard – services received and outcomes (quarterly)

## Services received by service users



## Achieving desired outcomes from the safeguarding process



## **Services Received**

- 40 The home care market has remained stable over the last 15 months (January 2023-March 2024) with approximately 3,300 service users receiving home care at any given point during this period. Numbers waiting for home care packages are very low and are closely monitored on a weekly basis. High CQC ratings for community-based care locations demonstrate quality of service provided across the market (76.6% of community care providers in County Durham are rated good or outstanding compared with 59.1% nationally).
- 41 The number of service users receiving telecare continues to be stable with approximately 2,000 people using the service throughout the last two years. The council has developed a plan to increase the use of technology to support service users which could result in an increase in the number of people receiving telecare.
- 42 The number of people receiving day care service has remained static over the last 12 months (approximately 1,000 people at any point between April 2023 - March 2024).
- 43 Over the last 18 months (October 2022 - March 2024) the number of people using Direct Payments to pay for at least part of their care has remained stable. Latest data show 677 people used a Direct Payment in quarter four (January - March 2024). This is a slight reduction on the previous quarter (October - December 2023: 684 people). Whilst take-up remains lower than both regional and national averages, an impact statement found no difference between our direct payment policy and that of other councils. The council continues to explore opportunities to develop take-up in the county.

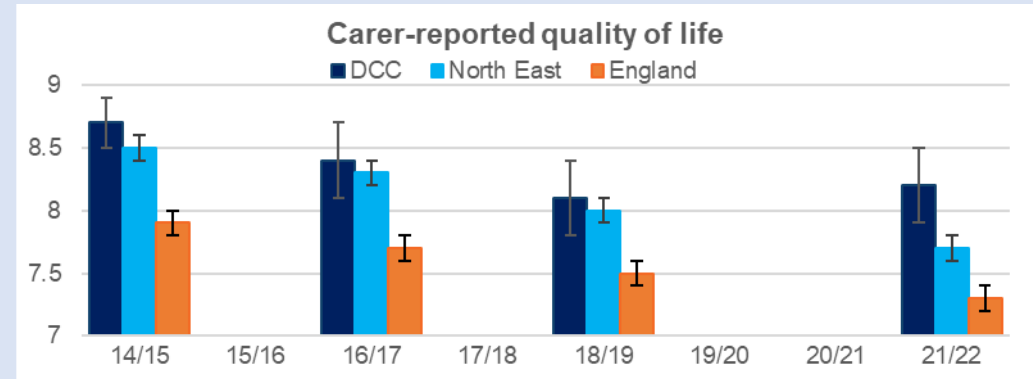
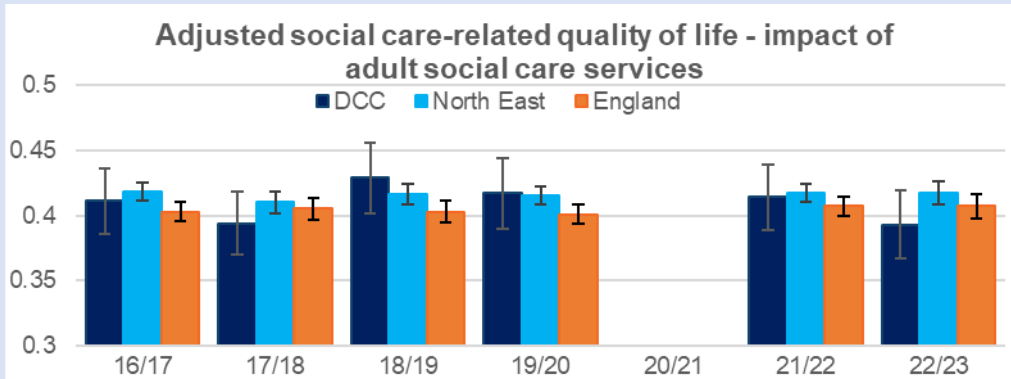
## **Safeguarding – desired outcomes**

- 44 The percentage of individuals achieving their desired outcomes during the safeguarding process has increased to 93.7% during quarter four (January - March 2024) and we are now comparable to performance in the North East (93.8%). We continue to close the gap on the England result (94.8%). There are circumstances where desired outcomes are unable to be met, therefore, it is unlikely that this indicator will ever achieve 100%.

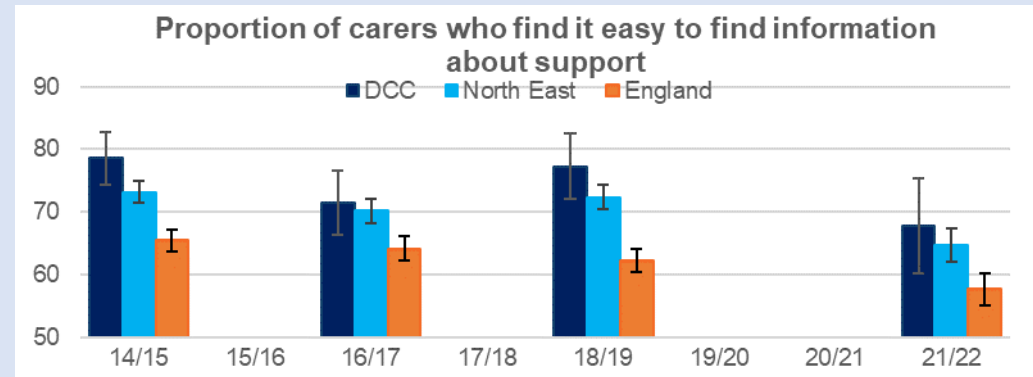
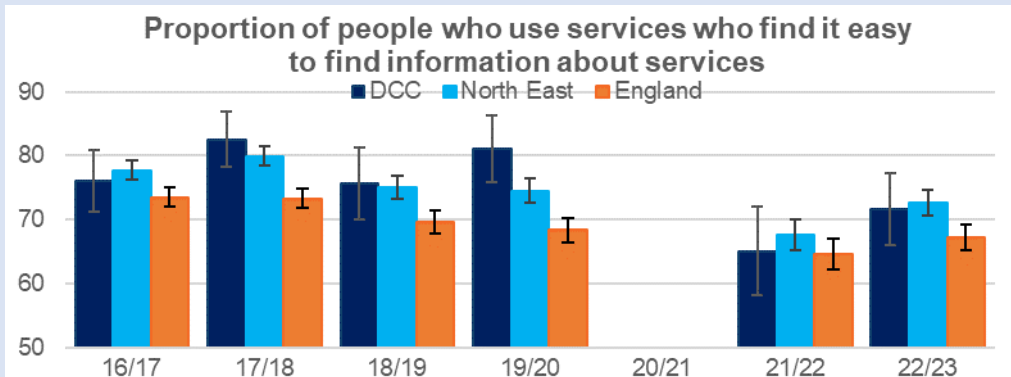
# Adult Social Care Dashboard – Oflog Measures

(annual)

## Reported quality of life



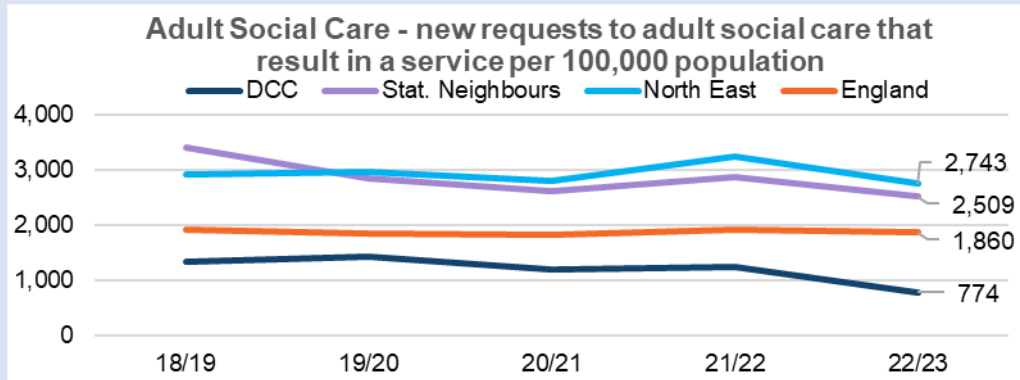
## Ease of finding information about services



# Adult Social Care Dashboard – Oflog Measures

(annual data covering 2022/23)

## New requests to adult social care that result in a service



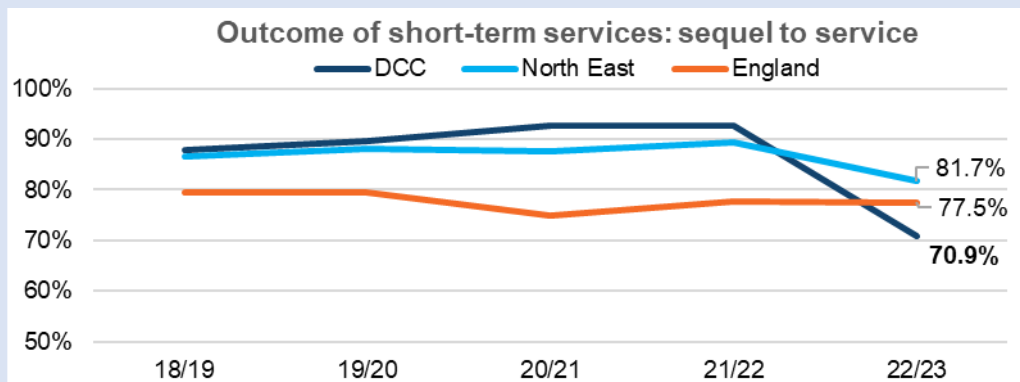
The Oflog measures for adult social care were previously reported in the quarter two Corporate Performance Report, with further benchmarking data added in quarter three. No new data has been provided in this report.

Following the publication of the Survey of Adult Carers in England (SACE) in June 2024, the next quarterly report will include an update on:

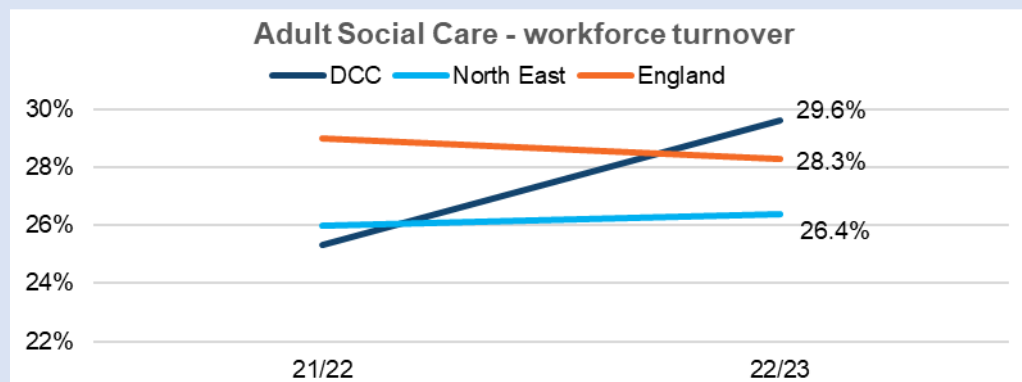
- Carer-reported quality of life
- Proportion of carers who find it easy to find information about support

Further data will be available in October 2024 with the release of the Adult Social Care Survey (ASCS), the Short and Long Term Support (SALT) return and the Adult Social Care Workforce Data Set. Indicators will be updated in the quarter three report.

## Outcome of short-term services



## Workforce turnover



# Public Health Focus – Smoking Dashboard

- Smoking is the single largest cause of preventable deaths and one of the largest causes of health inequalities in England.
- There are approximately 7.3 million adult smokers and more than 200 people a day die from smoking-related illness.
- The Joint Local Health and Wellbeing Strategy 2023-28 prioritises supporting ‘making smoking history’.

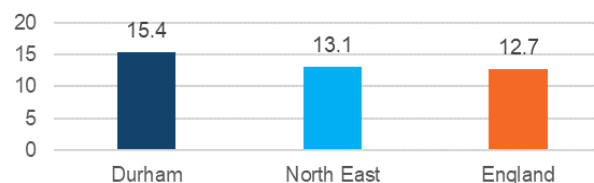
## The Joint Local Health and Wellbeing Strategy focuses on reducing:

- the number of people smoking to 5% by 2030
- the proportion of mothers smoking at time of delivery
- the number of hospital admission episodes related to smoking
- smoking related deaths

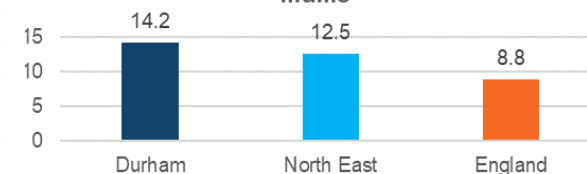
It also aims to move towards fairer access to stop smoking services to help those who need it, a better understanding of youth vaping trends and a smoke-free society.

## Prevalence in Durham

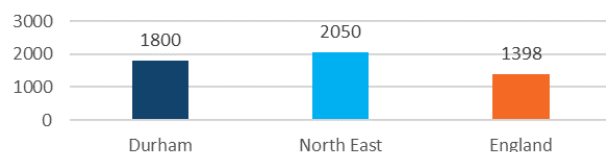
Approximately 15.4% of adults smoke in Durham (2022) - 65,000 people



14.2% of mothers smoke at time of delivering their baby - that's around 617 mums



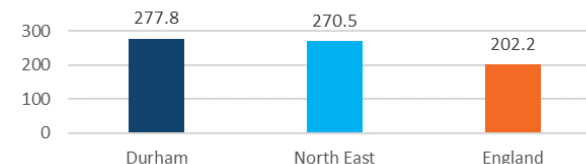
Smoking related hospital admission rates are significantly higher than England but lower than the north east



## Smoking related hospital admissions and deaths in Durham

- Approximately 6,000 hospital admissions were attributed to smoking in 2019/20
- Almost 900 people die each year from illnesses linked to smoking (2017-19)

Smoking related mortality rates are significantly higher than England but similar to the north east



## New Dashboard

A new [smoking dashboard](#) has been developed on Durham Insight. This provides a range of other indicators that enable greater insight into smoking in Durham. This includes gender analysis, wider benchmarking and factors affecting smoking in an individual.

## Public Health – Smoking

- 45 Smoking is the single largest cause of preventable deaths and one of the largest causes of health inequalities in England. Despite reductions in prevalence, there are still approximately 7.3 million adult smokers and more than 200 people a day die from smoking-related illness, which could have been prevented.
- 46 As well as dying prematurely, smokers also suffer from poor quality of life. Many of the conditions caused by smoking are chronic illnesses such as heart disease, stroke, lung cancer and respiratory disease. Smokers proportionately are less likely to be in work. Breathing in second-hand smoke also has detrimental impacts on babies, children, and other family members.
- 47 Information from the Action for Smoking and Health (ASH) Ready Reckoner suggests that costs associated with smoking in County Durham equate to £188.9 million annually:
- £150.4 million are associated with lack of productivity from people unable to work due to ill health whether this is temporarily sickness, unemployment or early death;
  - £22.2 million on healthcare costs associated with smoking. This includes costs for those accessing support in primary care or within hospitals;
  - £14.0 million on social care, which includes costs of both residential and domiciliary care;
  - £2.2 million on smoking related fire call outs.
- 48 The County Durham [Joint Local Health and Wellbeing Strategy 2023-28](#) prioritises supporting ‘making smoking history’. It outlines:
- nationally, approximately 64,000 people die from smoking each year;
  - in County Durham, around 900 people die every year from smoking related illnesses.
- 49 The latest data from the 2022 Local Tobacco Control Profiles outlines that smoking prevalence in County Durham is estimated to be 15.4% in 2022. This means that around 1 in 6 people in County Durham are current smokers. This is now comparable with the North East and England averages.
- 50 Partners engaged in the County Durham Tobacco Control Alliance have an ambition to reduce smoking prevalence in the county to 5% or less by 2030, whilst maintaining a focus on key priority groups including pregnant smokers, routine and manual workers and people with serious mental health conditions. This ambition is driven by a vision to achieve a tobacco-free generation.
- 51 To achieve this ambition, the Tobacco Control Alliance has maintained its seven-point action plan which is monitored on a quarterly basis and refreshed annually:
- use of an integrated evidence-based strategic approach to reducing smoking prevalence in County Durham;
  - reducing exposure to second-hand smoke;
  - motivating and supporting smokers to stop and stay stopped;
  - media, communications and engagement;

- reducing the demand and supply of illegal tobacco products, increasing price and addressing the supply of tobacco to children;
- tobacco regulation and reducing tobacco promotion;
- research monitoring and evaluation.

52 A recent [report to the Health and Wellbeing Board](#) (March 2024) provided an update on progress against the Tobacco Control Alliance action plan. This included:

- The development of a [smoking dashboard](#) for County Durham and ongoing use to data to provide an evidence-based approach to tackling smoking
- Our Stop Smoking Service (SSS) working closely with the Housing Poverty Forum and the Housing Solutions service to promote the offer of the SSS and to increase the number of people trained in Making Every Contact Count (MECC). This aims to support a reduction in exposure to second-hand smoke in households.
- Our SSS has operated face-to-face for the first full year since the pandemic. A restructure of the service has also been undertaken and aims to increase quit rates in Durham. The new structure will also ensure more links to new and emerging areas of work such as people with severe mental health and social housing.
- A Swap to Stop pilot commenced that provided vapes to people wishing to make a quit attempt. This work, funded by the Department for Health and Social Care, is targeted at specific groups where prevalence is higher: those in a routine and manual occupation, people living in the most disadvantaged areas in County Durham and those living in social housing.
- The SSS has worked in partnership with Business Durham to provide support sessions to businesses employing routine and manual workers.
- A new specialist Midwifery Matron for Health Inequalities has been appointed by County Durham and Darlington NHS Foundation Trust (CDDFT). This newly created post will join the County Durham Tobacco Dependency in Pregnancy and the Postnatal Period (TDIPP) steering group alongside Public Health to provide clinical midwifery experience and to strengthen the strategic leadership of the group.
- The North East and Cumbria Integrated Care System have introduced a financial incentive scheme to support pregnant mothers to stop smoking. This involves the provision of shopping vouchers to encourage ongoing engagement with quit support programmes throughout their pregnancy and beyond.

## Supporting Government Policy Development

53 In October 2023, the government published '[Stopping the start: our new plan to create a smokefree generation](#)', which outlined proposals for a smokefree generation, tackling youth vaping and how these would be enforced. A national consultation followed, with the council submitting a response in favour of the proposals.

54 The [outcome of the consultation](#) was published in February 2024 and outlined plans to implement the recommendations of the consultation. It has been confirmed that to create the first smokefree generation, the government will legislate to:

- make it an offence for anyone born on or after 1 January 2009 to be sold tobacco products;



- prohibit proxy sales in line with the change in age of sale legislation;
- include all tobacco products, herbal smoking products and cigarette papers, in scope;
- require warning notices in retail premises to read “it is illegal to sell tobacco products to anyone born on or after 1 January 2009” when the smokefree legislation comes into effect.

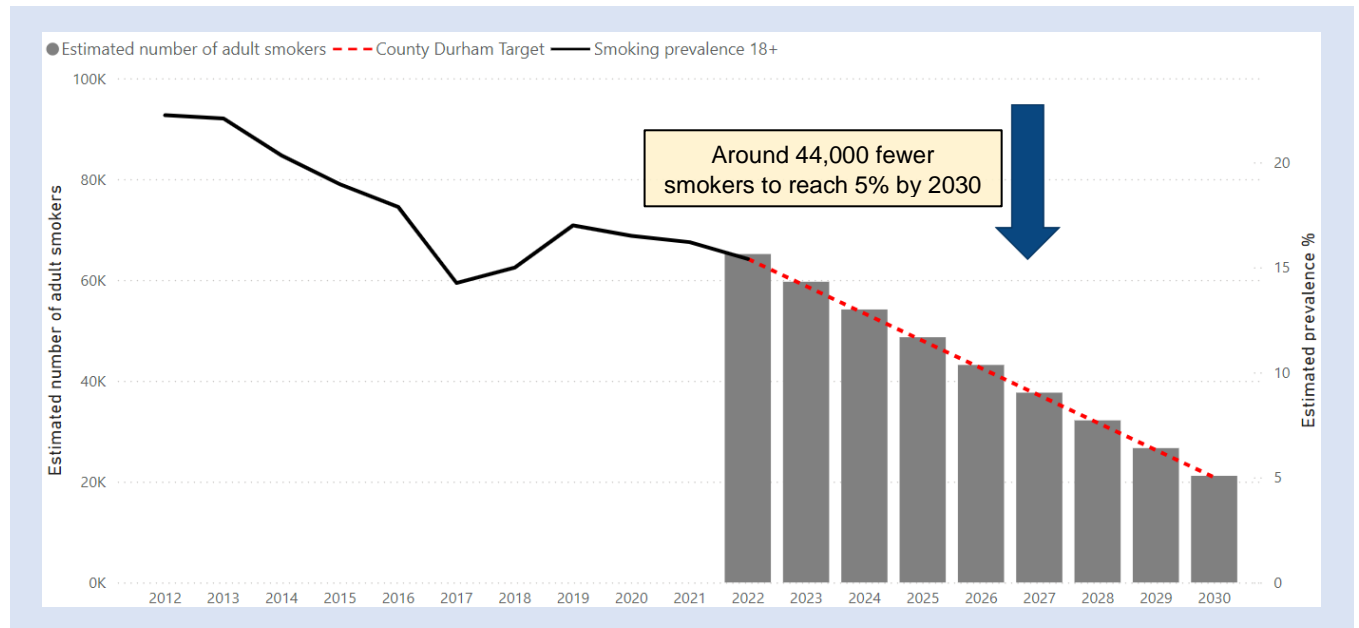
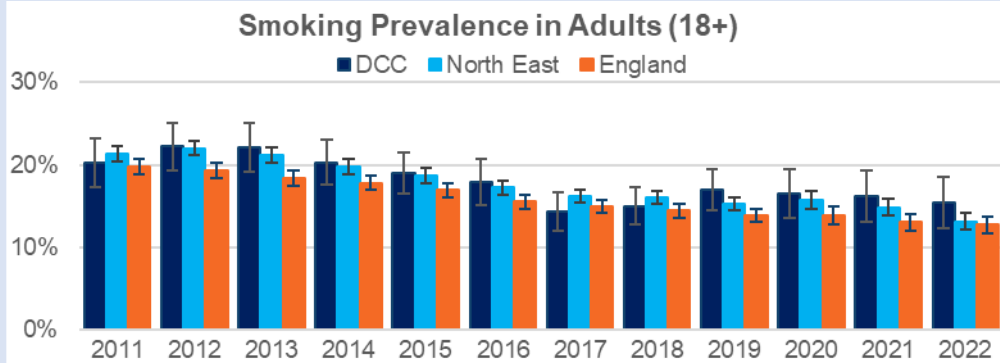
55 To tackle the rise in youth vaping, the government will take powers to make regulations to:

- restrict vape flavours;
- restrict how vapes are displayed in stores;
- restrict packaging and product presentation for vapes;
- apply the above restrictions to non-nicotine vapes and other consumer nicotine products such as nicotine pouches.

56 These measures will be taken forward in secondary legislation which will be subject to further consultation.

# Public Health Focus – Smoking Prevalence in Adults (18+)

(annual data as at December 2023)

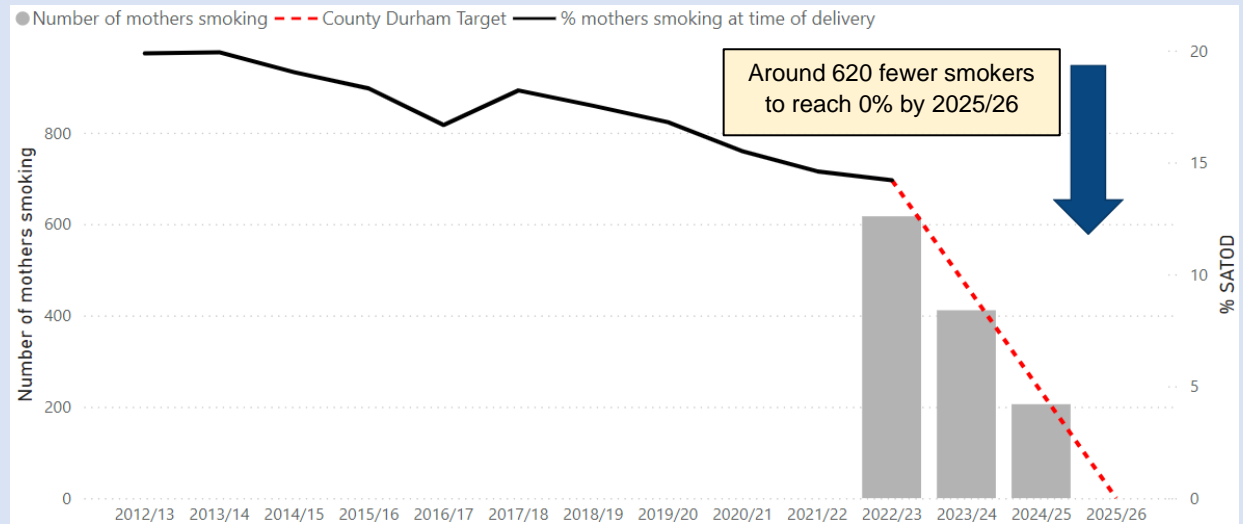
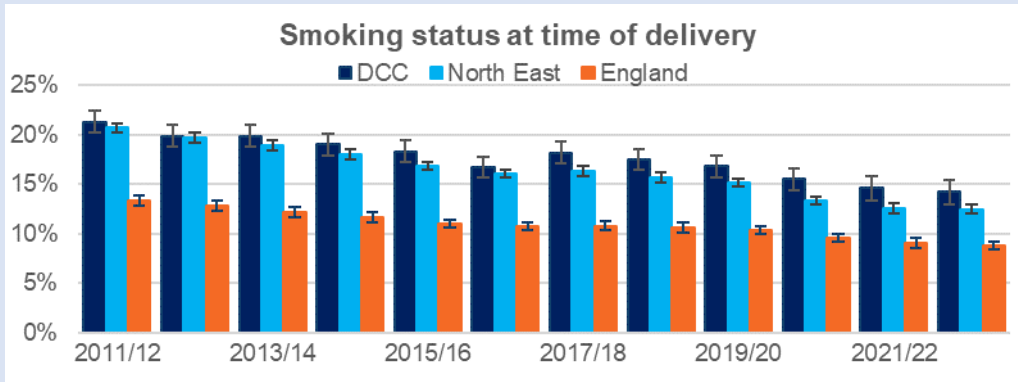


## **Public Health – Smoking prevalence in adults (18+)**

- 57 Data from the 2022 Local Tobacco Control Profile demonstrates that smoking prevalence in County Durham is estimated to stand at 15.4%. This highlights a reducing trend in prevalence when compared to 2020 (16.2%). We are also comparable with regional and national smoking rates.
- 58 The latest prevalence data for 2022 suggests that there are approximately 65,100 people in County Durham who continue to smoke. The County Durham Tobacco Control Alliance has an ambition to reduce smoking prevalence in the county to 5% or less by 2030. To reach this target, analysis of the data indicates that a further 44,000 people are required to stop smoking by 2030.
- 59 Projections based on performance to date suggest that we are unlikely to achieve the target of 5% by 2030.

# Public Health Focus – Smoking at Time of Delivery

(annual data as at 31 March 2023)



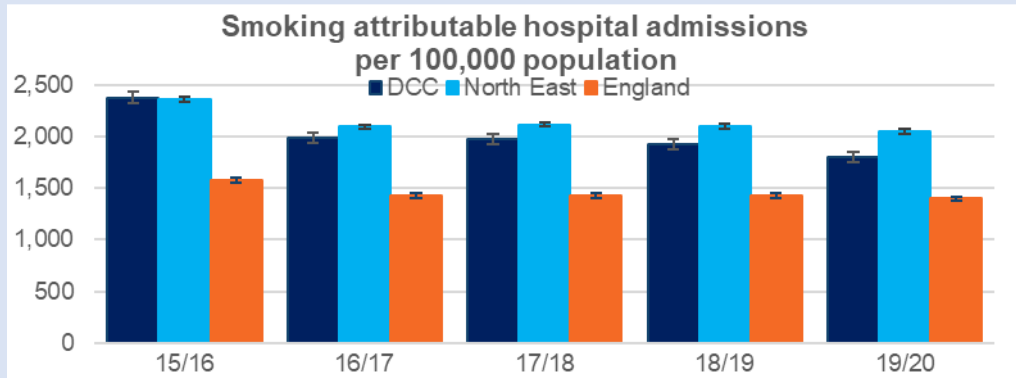
## **Public Health – Smoking at time of delivery**

- 60 Smoking during pregnancy can be harmful for the baby, potentially leading to reduced blood supply to the developing baby and poor growth. It is the major risk factor associated with miscarriage, still birth, premature birth and neonatal mortality.
- 61 Stopping smoking reduces the risk of complications in pregnancy and birth, leading to a healthier pregnancy and birth. It will also reduce the associated risks.
- 62 Over the last five years the proportion of mothers smoking at time of delivery has decreased in County Durham. In 2022/23, 14.2% of all mothers were smoking at the time of delivery. This is statistically significantly worse than both regional (12.5%) and national (8.8%) averages.
- 63 Over the last five years the absolute gap between Durham and England has decreased and stands at 5.4% in 2022/23.
- 64 County Durham has an ambition to reduce the percentage of mothers smoking at time of delivery to 0% by 2025/26. Approximately 620 mothers need to stop smoking (previously 710). This equates to a 4.7 percentage point drop per year for three years (approximately 206 fewer mothers smoking each year). Projections suggest that we are unlikely to meet this target.

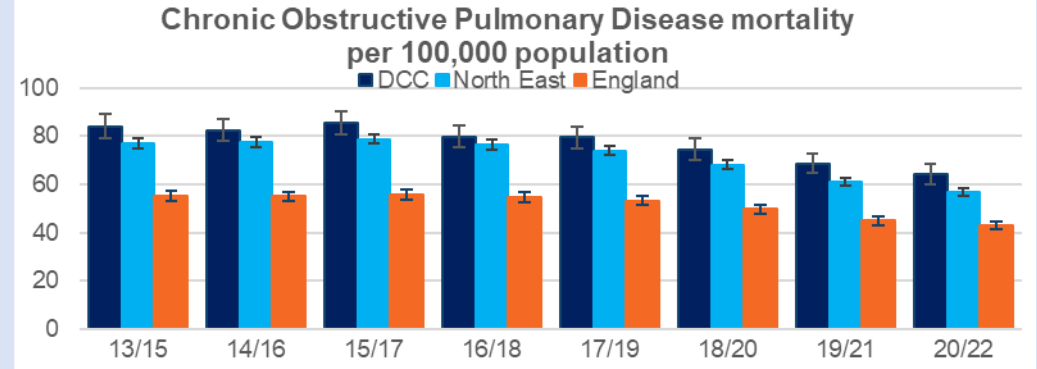
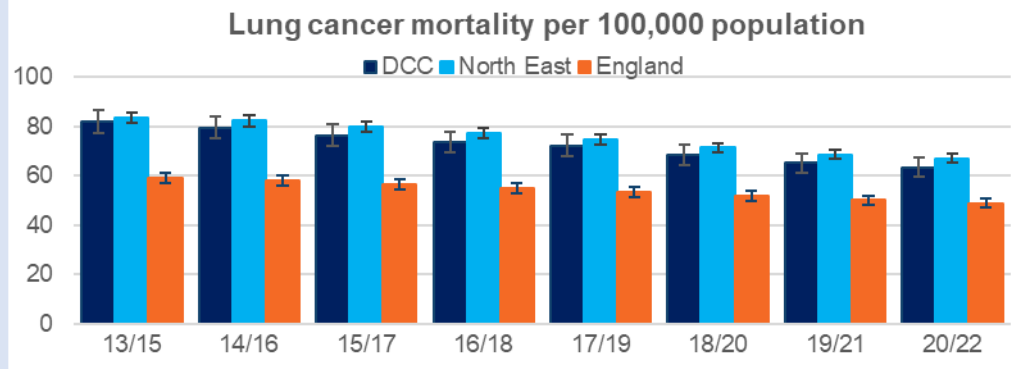
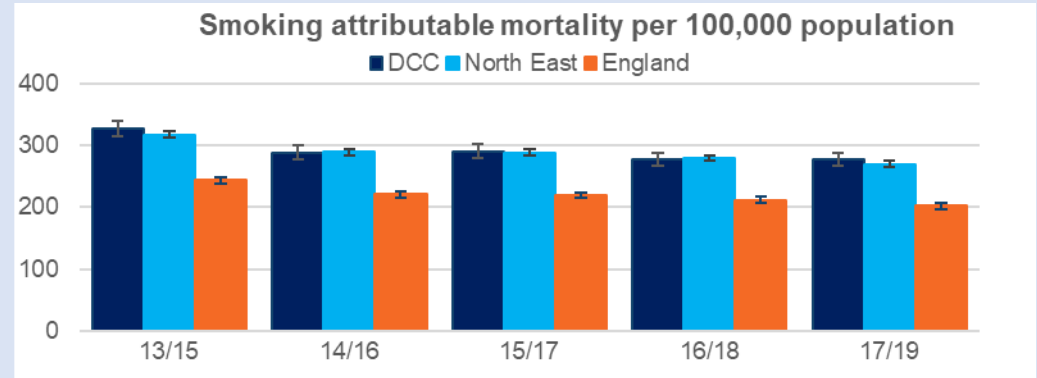
# Public Health Focus – Smoking related illness and mortality

(annual data)

## Smoking attributable hospital



## Smoking attributable



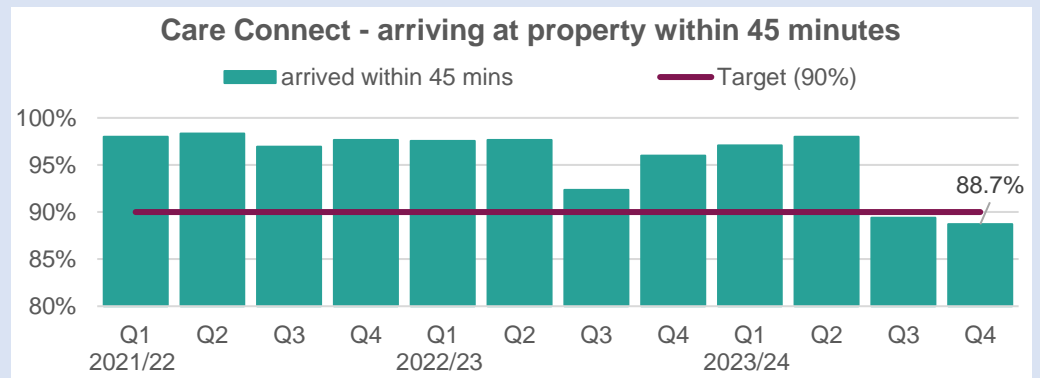
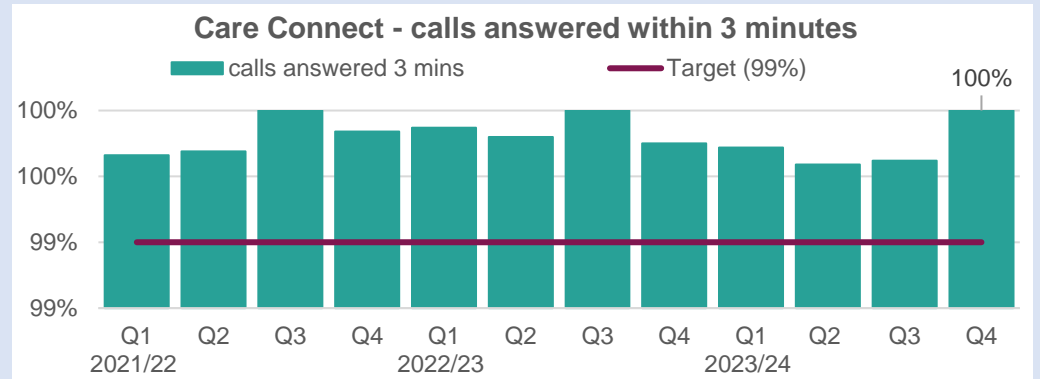
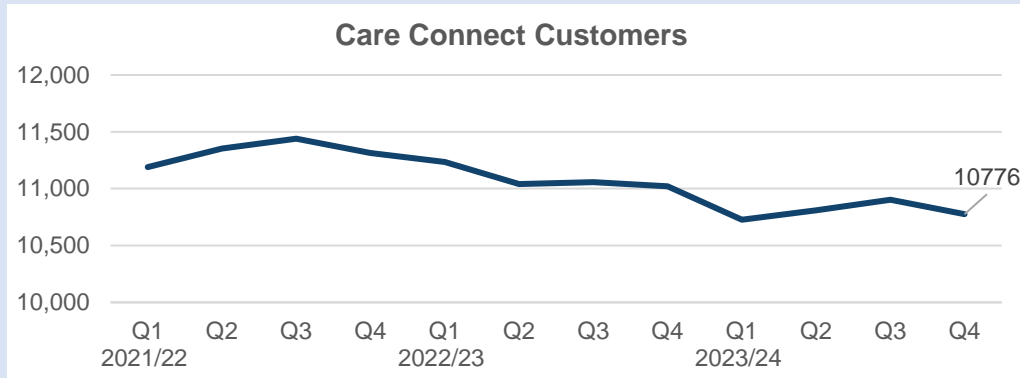
## Smoking related illness and mortality

- 65 Smoking is the biggest single cause of preventable death and ill-health within England. The indicator, smoking attributable hospital admissions, aims to highlight the size of preventable smoking-related conditions on inpatient hospital services as well as inequalities between local authorities in England.
- 66 Smoking also accounts for approximately 5.5% of the NHS budget. Admissions to hospital due to smoking related conditions not only represent a large demand on NHS resources but can also be used as a proxy for variations in smoking related ill-health in the general population across England.
- 67 Hospital admissions due to smoking have been falling in County Durham since 2015/16. In the most recent data, 2019/20, approximately 6,000 admissions were related to smoking in Durham. Latest data shows admission rates are significantly below the North East average. They are, however, significantly below the national data.
- 68 Data for smoking attributable mortality was last updated for the three year period 2017-19. A reduction in deaths related to smoking is observed from 2013-15 to 2017-19 with latest data suggesting approximately 900 deaths per year in County Durham are smoking related. Rates for smoking attributable mortality in the county are similar to the North East, however, they are significantly higher than the national average.
- 69 Data for overall smoking attributable mortality was last updated in 2017-19. There are, however, recently updated proxy measures providing a clear link to mortality caused by smoking; lung cancer and Chronic Obstructive Pulmonary Disease (COPD) mortality.
- 70 Research suggests that smoking causes around 70% of all lung cancers. Lung cancer mortality rates have been reducing in County Durham and latest data, 2020-22 suggests rates are similar to the North East average whilst significantly higher than the national rate.
- 71 COPD is a leading cause of death in England and accounts for 5% of all deaths each year. A high proportion of these deaths are caused by smoking, and hence are preventable. Given the high proportion of these deaths that are due to smoking, a reduction in the prevalence of smoking would reduce the incidence of COPD and extend the life of those with this illness.
- 72 Rates of COPD mortality in County Durham have also been reducing over time, however, the latest data, 2020-22 shows that rates in the county are significantly higher (worse) than regional and national rates.

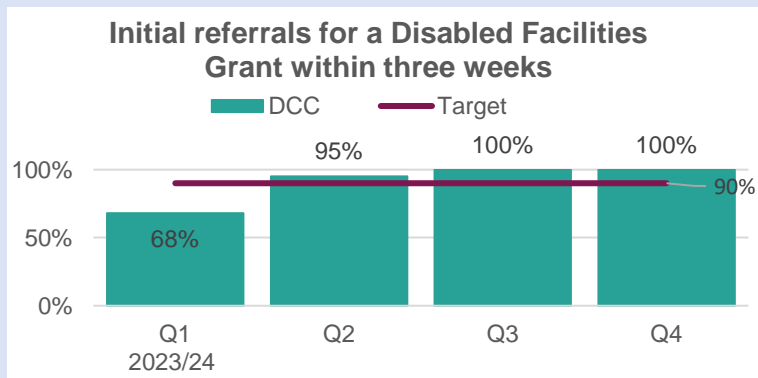
# Housing Vulnerable People Dashboard – Care Connect, Disabled Facilities Grants and Local Lettings Agency Accommodation

(discrete quarterly data / as at 31 March 2024 / year to date ending 31 March 2024)

## Care Connect



## Disabled Facilities Grants (DFG)





## Care Connect

- 73 In quarter four (January to March 2024), 10,776 customers were utilising the Care Connect service. Worse than the last quarter 10,903 and the same period last year 11,021. This was mainly due to a decline in the numbers of an ageing cohort as customers pass away or move into residential care alongside the removal of subsidised services.
- 74 Based on current figures by year end 2027/28 it is forecast that the subsidised customer group will cease to exist. The number of full paying customers on the service continues to increase, albeit at a slower rate.
- 75 Of the 7,380 emergency calls staff responded to in quarter four (January to March 2024), 88.7% (6,948) were responded to within 45 minutes. Worse than the last quarter (89.4%) and the same period last year (96%). This was mainly due to lower staffing levels and multiple fleet issues. 26 were responded to after 60 minutes due to location of properties.
- 76 Full results of the Care Connect Annual Customer Satisfaction Survey 2023 indicate:
- 97% of respondents agree that the services they received so far left them either 'very satisfied' or 'satisfied'.
  - 100% would recommend Care Connect to family or friends if they needed it.
  - 100% agreed that the service helps to provide reassurance to their family or carers.
  - 98% agreed that the service helps them to remain independent at home.
  - 97% said that the overall impression of the services Care Connect provided were 'very good' or 'good'.
  - 93% said that Care Connect presents 'excellent value' and 'good value' for money.
  - 100% agreed that during installation they were treated with dignity and respect by staff.

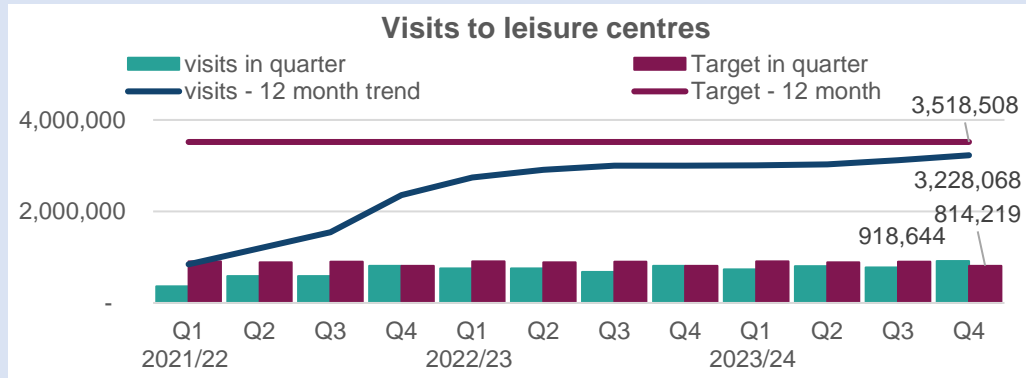
## Disabled Facilities Grants

- 77 During quarter four, 100% of clients were contacted within three weeks of receiving a referral for a Disabled Facilities Grant. Ten percentage points above target, and on par with quarter three (100%, October to December 2023).
- 78 Performance has improved from the 68% at quarter one (April to June 2023) due to dedicated officers being allocated responsibility to deal with first contact.

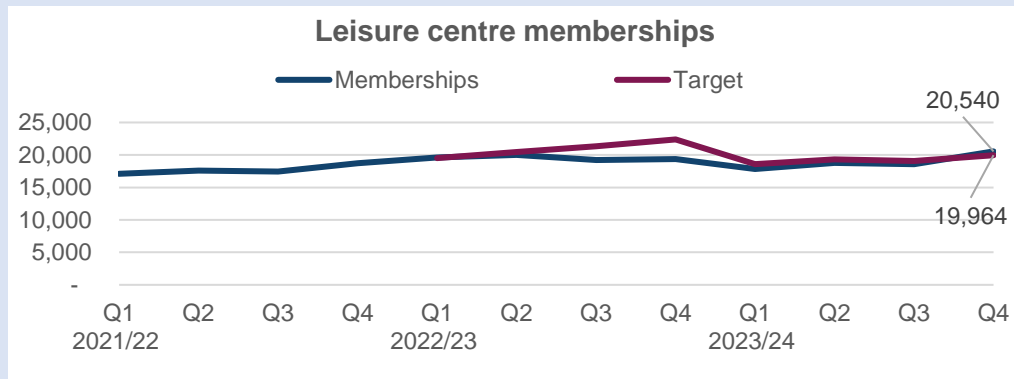
# Physical Activity Dashboard

(discrete quarterly / as at 31 March 2024 / year to date ending 31 March 2024)

## Leisure centre visits



## Leisure memberships



## Leisure Centre Visits

- 79 Our substantial leisure transformation programme continues to deliver upgraded and new facilities. Abbey leisure centre, the first site to undergo transformation works, fully opened to the public in July 2023. Since reopening there have been nearly 94,000 visits (August 2023 to March 2024) a 192% increase on the same period pre-transformation (32,035, August 2021 to March 2022).
- 80 Visits across all leisure centres this year (3,228,068, April 2023 and March 2024) have improved on last year (April 2022 and March 2023) by 7.6% (+228,547).
- 81 However, site closures, disruption to services and our ongoing recovery following the pandemic have resulted in this being 14.8% (-518,985) worse than target (3,518,508). Targets were based on a fully operational service. This will be reviewed for 2024/25 (April 2024 to March 2025) to reflect ongoing disruption at some sites and positive impacts following our improvement works.
- 82 Visits were also affected by the ongoing cost-of-living crisis that has been a real challenge for our communities.
- 83 Moving forward, our transformation programme is expected to have a positive impact across our leisure centres. It is anticipated that the upward trend seen at quarter four (January to March 2024) and at Abbey leisure centre will continue for other transformed sites.

## Leisure Centre Memberships

- 84 Our leisure membership sales continue to increase, despite disruption to services and transformation programme site closures. The highest growth period was January 2024. At the end of March 2024, we had 20,540 members. 756 better than target (19,964), and 1,989 better than quarter three (18,551, December 2023).
- 85 In September 2023 we launched a digital enquiry system for all leisure centres. This has received over 11,000 enquiries since it launched and the impact of this has been reflected in quarter four sales.
- 86 We also launched a brand-new website for thrive and improved our digital advertising with the support of our digital marketing partner. They have provided us with dedicated capacity to market our products, and most importantly industry expertise. Following their advice, we have changed our discount / promotion led approach and implemented a 'campaign' led approach. This has reduced our advertising spend per membership to 72p, the lowest rate that TA6 has produced with any leisure operator.
- 87 To continue improving, keep our members longer and reduce cancellation:
- We will also build on our new 'onboarding' retention system that launched in September 2024.
  - We are developing a new customer app that will provide customers with a one stop shop for Thrive. Customers will be able to book activities, purchase memberships or invite a friend to join Thrive.

# Data Tables

D	T	C	G	Performance Indicator	Period	Performance	Target	12 months earlier	Benchmark period	DCC	National average	NE average	updated	Oflog
				Household waste re-used, recycled or composted	Oct 22 – Sep 23	36.5%	Tracker	37.7%	April 21 – March 22	38.1%	42.5%	33.5%	Yes	Yes

D = Direction of Travel	T = compared to target	C = compared to England average	G = Gap between our performance and England average
meeting or exceeding the previous year	Meeting or better than target	meeting or better than the England average	The gap is improving
worse than the previous year but is within 2%	worse than but within 2% of target	worse than the England average but within 2%	The gap remains the same
more than 2% worse than the previous year	more than 2% behind target	worse than the England average	The gap is deteriorating

This is the overall performance assessment. Its calculation is dependent upon whether the indicator has an agreed target.

Key Target Indicator	Key Tracker Indicator
targets are set as improvements, can be measured regularly and can be actively influenced by the council and its partners. When setting a target, the D, C and G have already been taken into account.	no targets are set as they are long-term and / or can only be partially influenced by the council and its partners. Therefore, D, T, C and G are used to assess overall performance
better than target	Direction of Travel (D) is meeting or exceeding the previous year <b>AND</b> the gap with England (G) is improving
worse than but within 2% of target	Direction of Travel (D) is worse than the previous year <b>OR</b> the gap with England (G) is deteriorating
more than 2% behind target	Direction of Travel (D) is worse than the previous year <b>AND</b> the gap with England (G) is deteriorating

More detail is available from the Strategy Team at [performance@durham.gov.uk](mailto:performance@durham.gov.uk)

## Our Economy: summary data tables

### Business Support KPIs

	D	T	C	G	Performance Indicator	Period	Performance	Target	12 months earlier	Benchmark period	DCC	National average	NE average	updated	Oflog
					Organisations involved in the Better Health at Work Award	Mar 2024	121	Tracker	75					Yes	No

## Our Environment: summary data tables

### Sustainable Transport and Active Travel KPIs

	D	T	C	G	Performance Indicator	Period	Performance	Target	12 months earlier	Benchmark period	DCC	National average	NE average	updated	Oflog
					Cycling and walking levels	2022	65.6%	Tracker	67.7%	2022	65.6%	70.6%	67.5%	No	No
					Satisfaction with cycle routes & facilities ( <i>confidence intervals +/-4pp</i> )	2023	50%	Tracker	52%	2023	50%	50%		No	No

## Our People: summary data tables

### Adult Social Care KPIs

	D	T	C	G	Performance Indicator	Period	Performance	Target	12 months earlier	Benchmark period	DCC	National average	NE average	updated	Oflog
					Referrals into adult social care	Jan-Mar 2024	5,782	Tracker	5,725					Yes	No
					Initial assessments for Adult Social Care completed within 28 days	Jan-Mar 2024	57.6%	Tracker	54.3%					Yes	No
					Care Act assessments completed	Jan-Mar 2024	615	Tracker	577					Yes	No

	D	T	C	G	Performance Indicator	Period	Performance	Target	12 months earlier	Benchmark period	DCC	National average	NE average	updated	Oflog
					Service users receiving an assessment or review within the last 12 months	Jan-Mar 2024	69.5%	Tracker	60.4%					Yes	No
					Individuals who achieved their desired outcomes from adult safeguarding	Jan-Mar 2024	93.7%	Tracker	91.8%	Jan-Mar 23	91.8%	94.8%	93.8%	Yes	No
					Satisfaction of people who use services with their care and support <i>Confidence intervals +/-4.3pp</i>	2022/23	66.8%	Tracker	64.5%	2022/23	66.8%	64.4%	66.4%	No	No
					Satisfaction of carers with the support and services they receive <i>Confidence intervals +/-5.1pp</i>	2021/22	40.8%	Tracker	51.2%	2021/22	40.8%	36.6%	42%	No	No
					Hospital discharges receiving reablement	Jan-Mar 2024	394	Tracker	446					Yes	No
					Older people still at home 91 days after discharge from hospital into reablement / rehabilitation services	2023/24	87.6%	84.0%	84.1%	Apr 22-Mar 23	84.1%	82.3%	83.1%	Yes	No
					Average age people can remain living independently in their own home	2023/24	83.9 years	Tracker	84.6 years					No	No
					Adults aged 65+ per 100,000 population admitted on a permanent basis to residential or nursing care	Jan-Mar 2024	753.2	677.6	685.6	Apr 22-Mar 23	685.6	560.8	762.8	Yes	No
					Service users receiving Direct Payments	Jan-Mar 2024	12.8%	Tracker	12.7%	Apr 22-Mar 23	12.7%	26.2%	21.4%	Yes	No
					Service users receiving Direct Payments	Jan-Mar 2024	677	Tracker	671					Yes	No
					Service users receiving home care	Jan-Mar 2024	3,383	Tracker	3,383					Yes	No
					Service users receiving Telecare care	Jan-Mar 2024	2,095	Tracker	2,121					Yes	No
					Service users receiving day care	Jan-Mar 2024	1,040	Tracker	1,025					Yes	No
					Requests resulting in a service – adult social care	2022/23	774	Tracker	1,229	2022/23	774	1,860	2,743	No	Yes

	D	T	C	G	Performance Indicator	Period	Performance	Target	12 months earlier	Benchmark period	DCC	National average	NE average	updated	Oflog
					Workforce turnover rate – adult social care	2022/23	29.6%	Tracker	25.3%	2022/23	29.6%	28.3%	26.4%	No	Yes
					People in adult social care – quality of life	2022/23	0.393	Tracker	0.414	2022/23	0.393	0.411	0.415	No	Yes
					Carer quality of life – adult social care	2021/22	8.2	Tracker	8.1	2021/22	8.2	7.3	7.7	No	Yes
					Short term service provision – adult social care	2022/23	70.9%	Tracker	92.7%	2022/23	70.9%	77.5%	81.7%	No	Yes
					People using services who found it easy to find information – adult social care	2022/23	71.6%	Tracker	65.1%	2022/23	71.6%	67.2%	62.7%	No	Yes
					Carers who found it easy to find information about services	2021/22	67.8%	Tracker	77.3%	2021/22	67.8%	57.7%	64.7%	No	Yes

### Housing Vulnerable People KPIs

	D	T	C	G	Performance Indicator	Period	Performance	Target	12 months earlier	Benchmark period	DCC	National average	NE average	updated	Oflog
					Care Connect customers	Jan-Mar 2024	10,776	Tracker	11,021					Yes	No
					Care Connect calls answered within 3 minutes	Jan-Mar 2024	100%	99%	99.75%					Yes	No
					Care Connect calls arriving at the property within 45 minutes	Jan-Mar 2024	88.74%	90%	96%					Yes	No
					Potential clients contacted within 3 weeks of initial referral for a Disabled Facilities Grant (DFG)	Jan-Mar 2024	100%	90%	new					Yes	No
					Approvals on new housing sites of 10 units or more, a minimum of 66% of the total number of dwellings meet accessible and adaptable standards (building Regulations requirements M4(2)).	2022/23	71%	66%	50%					No	No
					Approvals on new housing sites of 10 units or more, a minimum of 10% of the total number of dwellings meet a design and type for older persons	2022/23	16%	10%	27%					No	No

## Public Health KPIs

	D	T	C	G	Performance Indicator	Period	Performance	Target	12 months earlier	Benchmark period	DCC	National average	NE average	updated	Oflog
					Children aged 4-5 who are a healthy weight <i>Confidence intervals +/-1.2pp</i>	2022/23	73.2%	100%	75.5%	2022/23	73.2%	77.5%	74%	No	No
					Children aged 10-11 who are a healthy weight <i>Confidence intervals +/-1.2pp</i>	2022/23	59.1%	100%	59.2%	2022/23	59.1%	61.9%	58.9%	No	No
					Gap in breastfeeding at 6-8 weeks between County Durham and national average	2022/23	19.0pp	Tracker	18.7pp					No	No
					Mothers smoking at time of delivery	Oct-Dec 2023	12.2%	0%	12.7%	Oct-Dec 23	12.2%	7.3%	9.2%	Yes	No
					Smoking prevalence in adults (aged 18+)	2022	15.4%	5.0%	16.2%	2022	15.4%	12.7%	13.1%	No	No
					People reporting a low happiness score <i>Confidence intervals +/-2.4pp</i>	2022/23	9.9%	Tracker	11.0%	2022/23	9.9%	8.9%	9.4%	Yes	No
					Suicide rate per 100,000 population	2020-22	16.8	Tracker	15.8	2020-22	16.8	10.3	13.5	No	No
					Admissions under the Mental Health Act	Jan-Mar 2024	221	Tracker	196					Yes	No
					Healthy life expectancy at birth: female	2018-20	59.9 years	Tracker	58.3 years	2018-20	59.9 years	63.9	59.7	No	No
					Healthy life expectancy at 65: female	2018-20	10.2 years	Tracker	9.0 years	2018-20	10.2 years	11.3	9.8	No	No
					Gap in female healthy life expectancy at birth: County Durham and England	2018-20	4.0 years	Tracker	5.6 years					No	No
					Gap in female life expectancy at 65: County Durham and England	2018-20	1.1 years	Tracker	2.3 years					No	No
					Healthy life expectancy at birth: male	2018-20	58.8 years	Tracker	59.6 years	2018-20	58.8 years	63.1	59.1	No	No
					Healthy life expectancy at 65: male	2018-20	7.7 years	Tracker	8.3 years	2018-20	7.7 years	10.5	9.2	No	No
					Gap in male healthy life expectancy at birth: County Durham and England	2018-20	4.3 years	Tracker	3.6 years					No	No



	D	T	C	G	Performance Indicator	Period	Performance	Target	12 months earlier	Benchmark period	DCC	National average	NE average	updated	Oflog
					Gap in male healthy life expectancy at 65: County Durham and England	2018-20	2.8 years	Tracker	2.3 years					No	No
					Successful completions of those in alcohol treatment	Sep 2022-Aug 2023	35.3%	Tracker	29.5%	Sep 22-Aug 23	35.3%	34.1%		Yes	No
					Successful completions of those in drug treatment: opiates	Sep 2022-Aug 2023	5.7%	Tracker	5.4%	Sep 22-Aug 23	5.7%	5.1%		Yes	No
					Successful completions of those in drug treatment: non-opiates	Sep 2022-Aug 2023	36.3%	Tracker	32.4%	Sep 22-Aug 23	36.3%	30.0%		Yes	No

### Physical Activity KPIs

	D	T	C	G	Performance Indicator	Period	Performance	Target	12 months earlier	Benchmark period	DCC	National average	NE average	updated	Oflog
					Visits to Leisure Centres	Jan-Mar 2024	819,644	814,219	812,455					Yes	No
					Leisure memberships	Jan-Mar 2024	20,540	19,964	19,377					Yes	No

## Glossary

Term	Definition
<b>ACD</b>	<p><b>Automatic Call Distribution</b></p> <p>Telephone calls are received either through our Automatic Call Distribution system, which routes calls to groups of agents based on a first-in-first-answered criteria, or directly to a telephone extension (non-ACD). Only calls received via our ACD system are included in our telephone statistics.</p>
<b>AQMA</b>	<p><b>Air Quality Management Area</b></p> <p>A geographical area where air pollution levels are, or are likely to, exceed national air quality objectives at relevant locations (where the public may be exposed to harmful air pollution over a period of time e.g., residential homes, schools etc.).</p>
<b>ASB</b>	Anti-social behaviour
<b>ASCOF</b>	<p><b>Adult Social Care Outcomes Framework</b></p> <p>measures how well care and support services achieve the outcomes that matter most to people (<a href="#">link</a>)</p>
<b>BATH</b>	<p><b>Bishop Auckland Town Hall</b></p> <p>A multi-purpose cultural venue situated in Bishop Auckland market place. It offers regular art exhibitions, live music, cinema screenings and theatre performances, as well as a library service.</p>
<b>BCF</b>	<p><b>Better Care Fund</b></p> <p>A national programme that supports local systems to successfully deliver the integration of health and social care.</p>
<b>B2B</b>	<p><b>Business to Business</b></p> <p>B2B refers to selling products and services directly between two businesses as opposed to between businesses and customers.</p>
<b>CAP</b>	<p><b>Customer Access Point</b></p> <p>A location where residents can get face-to-face help and information about council services. There are eight CAPs across County Durham.</p>
<b>CAT</b>	<p><b>Community Action Team</b></p> <p>A project team which includes members of our community protection service, planning, neighbourhood wardens and housing teams, who work alongside police and community support officers and fire and rescue teams and residents to tackle housing and environmental issues in a specific area by identifying local priorities and making best use of resources.</p>
<b>CDP</b>	<p><b>County Durham Plan</b></p> <p>Sets out the council's vision for housing, jobs and the environment until 2035, as well as the transport, schools and healthcare to support it (<a href="#">link</a>)</p>
<b>CED</b>	<b>Community Economic Development</b>

Term	Definition
<b>CERP</b>	<p><b>Climate Emergency Response Plan</b></p> <p>A community-wide call to action to help align all sectors on the actions required to further reduce greenhouse gas emissions and improve our resilience to the impacts of climate change.</p>
<b>Changing Places toilet</b>	<p>Toilets meet the needs of people with profound and multiple learning disabilities, as well as people with other physical disabilities such as spinal injuries, muscular dystrophy and multiple sclerosis. These toilets provide the right equipment including a height adjustable adult-sized changing table, a tracking hoist system, adequate space for a disabled person and carer, a peninsular WC with room either side and a safe and clean environment including tear off paper to cover the bench, a large waste bin and a non-slip floor.</p>
<b>CLD</b>	<p><b>Client Level Dataset</b></p> <p>A national mandatory person-level data collection (to be introduced) that will replace the existing annual <a href="#">Short and Long Term (SALT) Support</a> data collected by councils. CLD will be added to the <a href="#">single data list</a> and will become mandatory for all local authorities.</p>
<b>CNIS</b>	<p><b>Child Not In School</b></p>
<b>CPN</b>	<p><b>Community Protection Notice</b></p> <p>Can be issued to anyone over the age of 16 to deal with a wide range of ongoing anti-social behaviour issues or nuisances which have a detrimental effect on the local community. There are three stages: the first stage is a written warning (CPW), the second a notice (CPN) the third is an FPN or further prosecution for failure to comply with the previous stages</p>
<b>CRM</b>	<p><b>Customer Relationship Management system</b></p>
<b>CS&amp;T</b>	<p><b>Culture, Sport and Tourism</b></p>
<b>CTR</b>	<p><b>Council Tax Reduction</b></p> <p>Reduces council tax bills for those on low incomes</p>
<b>DCC</b>	<p><b>Durham County Council</b></p>
<b>DEFRA</b>	<p><b>Department for the Environment, Food and Rural Affairs</b></p> <p>A ministerial department, supported by <a href="#">34 agencies and public bodies</a> responsible for improving and protecting the environment. It aims to grow a green economy and sustain thriving rural communities. It also supports our world-leading food, farming and fishing industries (<a href="#">link</a>)</p>
<b>DHP</b>	<p><b>Discretionary Housing Payments</b></p> <p>Short term payments which can be made to tenants in receipt of the housing benefit element of Universal Credit, to help sort out housing and money problems in the longer term.</p>
<b>DHSC</b>	<p><b>Department of Health and Social Care</b></p> <p>The DHSC supports the government in leading the nation's health and care system.</p>

<b>Term</b>	<b>Definition</b>
<b>DLE</b>	<b>Daily Living Expenses</b> Available for those whose circumstances have changed unexpectedly. Payments can be made for up to seven days to help with food, travel and some clothing (restrictions apply).
<b>DoLS</b>	<b>Deprivation of Liberty Safeguards</b> A set of checks that are part of the Mental Capacity Act 2005, which applies in England and Wales. The DoLS procedure protects a person receiving care whose liberty has been limited by checking that this is appropriate and is in their best interests.
<b>EAP</b>	<b>Employee Assistance Programme</b> A confidential employee benefit designed to help staff deal with personal and professional problems that could be affecting their home or work life, health, and general wellbeing.
<b>EET</b>	<b>Employment, Education or Training</b> Most often used in relation to young people aged 16 to 24, it measures the number employed, in education or in training.
<b>EHCP</b>	<b>Education, Health Care Plan</b> A legal document which describes a child or young person's (aged up to 25) special educational needs, the support they need, and the outcomes they would like to achieve.
<b>ERDF</b>	<b>European Regional Development Fund</b> Funding that helps to create economic development and growth; it gives support to businesses, encourages new ideas and supports regeneration. Although the United Kingdom has now left the European Union, under the terms of the Withdrawal Agreement, EU programmes will continue to operate in the UK until their closure in 2023-24.
<b>EHE</b>	<b>Elective Home Education</b> A term used to describe a choice by parents to provide education for their children at home or in some other way they desire, instead of sending them to school full-time.
<b>ETA</b>	<b>Extension of Time Agreement</b> An agreement between the council and the customer submitting a planning application to extend the usual deadline beyond 13 weeks due to the complex nature of the application.
<b>FPN</b>	<b>Fixed Penalty Notice</b> Is a conditional offer to an alleged offender for them to have the matter dealt with in a set way without resorting to going to court.
<b>FTE</b>	<b>Full Time Equivalent</b> Total number of full-time employees working across the organisation. It is a way of adding up the hours of full-time, part-time and various other types of employees and converting into measurable 'full-time' units.
<b>GVA</b>	<b>Gross Value Added</b> <i>The measure of the value of goods and services produced in an area, industry or sector of an economy.</i>

Term	Definition
<b>HSF</b>	<b>Household Support Fund</b> Payments support low income households struggling with energy and food costs, or who need essential household items.
<b>ICO</b>	<b>Information Commissioner's Office</b> The UK's independent body's role is to uphold information rights in the public interest ( <a href="#">link</a> )
<b>IES</b>	<b>Inclusive Economic Strategy</b> Sets a clear, long-term vision for the area's economy up to 2035, with an overarching aim to create more and better jobs in an inclusive, green economy ( <a href="#">link</a> )
<b>JLHWS</b>	<b>Joint Local Health and Wellbeing Strategy</b> The Strategy (2023-28) supports the vision that County Durham is a healthy place where people live well for longer ( <a href="#">link</a> )
<b>KS2</b>	<b>Key Stage 2</b> The national curriculum is organised into blocks of years called 'key stages.' At the end of each key stage, the teacher will formally assess each child's performance. KS2 refers to children in year 3, 4, 5 and 6 when pupils are aged between 7 and 11.
<b>KS3</b>	<b>Key Stage 3</b> The national curriculum is organised into blocks of years called 'key stages.' At the end of each key stage, the teacher will formally assess each child's performance. KS3 refers to children in year 7, 8 and 9 when pupils are aged between 11 and 14.
<b>LGA</b>	<b>Local Government Association</b> The national membership body for councils which works on behalf of its member councils to support, promote and improve local government ( <a href="#">link</a> ).
<b>LINKCD</b>	A programme that brings together a number of delivery partners to support people with multiple barriers to address these underlying issues and to move them closer to or into the labour market or re-engage with education or training.
<b>LNRS</b>	<b>Local Nature Recovery Strategies</b> Propose how and where to recover nature and improve the wider environment across England.
<b>MMB</b>	<b>Managing Money Better</b> A service offered by the council which involves visiting residents' homes to carry out a free home energy assessment. In addition to providing advice on energy bills, the service can provide financial advice through referrals to <a href="#">benefits advice or help with a benefits appeal</a> and other services for advice on benefit entitlements.
<b>MTFP</b>	<b>Medium Term Financial Plan</b> A document that sets out the council's financial strategy over a four year period
<b>MW</b>	<b>MegaWatt</b> is one million watts of electricity

Term	Definition
<b>NESWA</b>	<p><b>North East Social Work Alliance</b></p> <p>A social work teaching partnership made up of 12 North East councils and six Higher Education Institutes. The Alliance is one of several teaching partnerships across the country which were created to improve the quality of practice, learning and continuous professional development amongst trainee and practicing social workers.</p>
<b>NQSW</b>	<p><b>Newly Qualified Social Workers</b></p> <p>a social worker who is registered with Social Work England and is in their first year of post qualifying practice.</p>
<b>NVQ</b>	<p><b>National Vocational Qualification</b></p> <p>The NVQ is a work-based qualification that recognises the skills and knowledge a person needs to do a job.</p>
<b>Oflog</b>	<p><b>Office For Local Government</b></p> <p>The vision for Oflog is for it to provide authoritative and accessible data and analysis about the performance of local government and support its improvement. Oflog is part of the <a href="#">Department for Levelling Up, Housing and Communities</a> .</p>
<b>PDR</b>	<p><b>Performance and Development Review</b></p> <p>Is an annual process which provides all staff with the valuable opportunity to reflect on their performance, potential and development needs.</p>
<b>PRS</b>	<p><b>Private Rented Sector</b></p> <p>This classification of housing relates to property owned by a landlord and leased to a tenant. The landlord could be an individual, a property company or an institutional investor. The tenants would either deal directly with an individual landlord, or alternatively with a management company or estate agency caring for the property on behalf of the landlord.</p>
<b>PSPO</b>	<p><b>Public Space Protection Order</b></p> <p>Are intended to deal with a nuisance or problem in a particular area that is detrimental to the local community.</p>
<b>QoL</b>	<p><b>Quality of Life</b></p>
<b>RIDDOR</b>	<p><b>Reporting of Injuries, Diseases and Dangerous Occurrences Regulations</b></p> <p>A RIDDOR report is required for work-related accidents which result in a reportable injury. The definition of a reportable injury can be found <a href="#">here</a></p>
<b>RQF</b>	<p><b>Regulated Qualifications Framework</b></p> <p>The RQF helps people understand all the qualifications regulated by the government and how they relate to each other. It covers general and vocational in England, and vocational in Northern Ireland. <a href="#">Link</a></p>
<b>SALT</b>	<p><b>Short and Long Term</b></p> <p>Relates to the annual <a href="#">Short and Long Term (SALT) Support</a> data collected by councils. It is to be replaced by a national mandatory person-level data collection (Client Level Data).</p>

Term	Definition
<b>SEN</b>	<p><b>Special Educational Needs</b></p> <p>The term is used to describe learning difficulties or disabilities that make it harder for children to learn than most children of the same age. Children with SEN are likely to need extra or different help from that given to other children their age.</p>
<b>SEND</b>	<p><b>Special Educational Needs and Disabilities</b></p> <p>SEND can affect a child or young person's ability to learn and can affect their;</p> <ul style="list-style-type: none"> <li>▪ behaviour or ability to socialise (e.g., they struggle to make friends)</li> <li>▪ reading and writing (e.g., because they have dyslexia),</li> <li>▪ ability to understand things,</li> <li>▪ concentration levels (e.g., because they have attention deficit hyperactivity disorder)</li> <li>▪ physical ability</li> </ul>
<b>SG</b>	<p><b>Settlement Grants</b></p> <p>Help people stay in their home or move back into housing after living in supported or unsettled accommodation (such as leaving care or being homeless). They provide help towards furniture, white goods, flooring, curtains, bedding, kitchen equipment, removal costs etc.</p>
<b>SME</b>	<p><b>Small to Medium Sized Enterprise</b></p> <p>A company with no more than 500 employees.</p>
<b>Statistical nearest neighbours</b>	<p>A group of councils that are similar across a wide range of socio-economic.</p> <p>Durham County Council uses the CIPFA nearest neighbours model which compares us to Northumberland, North Tyneside, Barnsley, Rotherham, Wakefield, Doncaster, Redcar and Cleveland, Wigan, St Helens, Cornwall, Sefton, Sunderland, Wirral, Plymouth and Calderdale</p>
<b>UASC</b>	<p><b>Unaccompanied Asylum Seeking Children</b></p> <p>Children and young people who are seeking asylum in the UK but who have been separated from their parents or carers. While their claim is processed, they are cared for by a council.</p>
<b>UKSPF</b>	<p><b>UK Shared Prosperity Fund</b></p> <p>Part of the government's Levelling Up agenda that provides funding for local investment to March 2025. All areas of the UK receive an allocation from the Fund to enable local decision making and better target the priorities of places within the UK that will lead to tangible improvements to the places where people work and live.</p>
<b>WEEE</b>	<p><b>Waste Electrical and Electronic Equipment</b></p> <p>Any electrical or electronic waste, whether whole or broken, that is destined for disposal. The definition includes household appliances such as washing machines and cookers, IT and telecommunications equipment, electrical and electronic tools, toys and leisure equipment and certain medical devices.</p>
<b>Yield</b>	<p>Proportion of potential income achieved</p>