### Adults, Wellbeing and Health Overview and Scrutiny Committee

1 October 2012



Quarter 1 2012/13 Performance Management Report

### Report of Corporate Management Team Lorraine O'Donnell, Assistant Chief Executive Councillor Simon Henig, Leader

## **Purpose of the Report**

1. To present progress against the council's corporate basket of performance indicators (PIs) and report other significant performance issues for the first quarter of 2012/13.

# Background

- 2. This is the first quarterly corporate performance report of 2012/13 for the council highlighting performance for the period April to June 2012. The report contains information on key performance indicators, risks and Council Plan progress.
- 3. The report sets out an overview of performance and progress by Altogether priority theme. Key performance indicator progress is reported against two indicator types which comprise of:
  - a. Key target indicators targets are set for indicators where improvements can be measured regularly and where improvement can be actively influenced by the council and its partners; and
  - b. Key tracker indicators performance will be tracked but no targets are set for indicators which are long-term and/or which the council and its partners only partially influence.
- 4. A summary of key performance indicators is provided at Appendix 3. More detailed performance information and Altogether theme analyses are available on request from <u>performance@durham.gov.uk</u>.

## **Developments since last quarter**

- 5. Extensive work has been undertaken by all services to develop a new 2012/13 corporate set of indicators as set out in Appendix 3. This set of indicators is based around our six 'Altogether' priority themes and will be used to measure the performance of both the council and the County Durham Partnership.
- 6. Changes have also been made to the way service plans are monitored. For 2012/13 all actions within each service plan will be monitored corporately instead of the set of key actions identified last year. Monitoring will be undertaken on an exception basis using the following system:
  - **Red** Not on track (i.e. the deadline has passed and the action has not been achieved or the deadline is in the future but it is known that it will not be achieved by that date)

- **Green** On target to be completed by the deadline
- White Completed by or prior to the deadline

## **Altogether Healthier: Overview**

Performance indicators								
	Red	Amber	Green	N/A				
Direction of travel	2	1	9	5				
Direction of traver	(23%)	(8%)	(69%)	5				
Performance against	2	1	13	2				
target	(13%)	(6%)	(81%)					

Actions									
	Red	Green	White	Deleted actions					
Performance	1	37	5	1					
against target	(2%)	(84%)	(12%)	(2%)					

#### **Council Performance**

- 7. Key achievements this quarter include:
  - a. In 2011/12 the Stop Smoking Service helped 5,523 people to stop smoking, which equates to 1,308 per 100,000 population. This has achieved the 2011/12 target of 1,242 per 100,000 and has also increased from 1,165 per 100,000 in 2010/11. The rate is better than regional and national four week smoking quitter rates and has been supported by increased commissioning of stop smoking service providers and more access points to stop smoking support. This includes groups, drop-ins and one to ones in places such as GP surgeries, community centres, pharmacies, children centres, hospitals and leisure centres. A dedicated stop smoking service within secondary care (hospitals) was developed in 2011.
  - b. The percentage of the total eligible population screened for bowel cancer has increased from 57.5% in the period October to December 2011 to 66.8% in the period January to March 2012. This has achieved the target of 60%. A recent national campaign around bowel cancer has been supported throughout County Durham. The initiative was aimed at raising awareness around the signs and symptoms of bowel cancer and encouraging individuals to visit their GP. Early evaluation has shown an increase in awareness, and presentation of symptoms. Work has also continued to promote bowel cancer screening through the community based cancer information service.
  - c. The number of permanent admissions of people aged 65 and over to residential and nursing care in the first quarter of 2012/13 has reduced by 38 to 162. This equates to a 12 month equivalent rate of 711.6 per 100,000. In the first quarter of 2011/12 the equivalent number was 200 (879 per 100,000). This is a significant performance improvement in this quarter. The impact of strategies to maintain people's independence can be evidenced through the average age at admission to residential care rising from 84.9 in 2007/8 to 86.4 in 2011/12. Additionally, the average length of stay for a permanent residential admission has reduced from 547 days in 2010/11 to 487 in 2011/12. The service is also looking at high performing authorities to examine admission practices and identify areas for improvement in County Durham. Across County Durham the rate ranges from 585.6 in the Dales Health Network to 835.6 in the Easington Health Network.
  - d. Feedback from service users and carers is an increasingly important aspect in understanding the quality of outcomes being delivered to service users in County Durham. Latest feedback from surveys highlights the following:
    - The overall satisfaction rating for services users with their adult social care assessments is 92%. This is achieving the annual target (92%);
    - 94% of service users reported that the help and support they receive has made their quality of life "much" or a "little" better. This has exceeded the target of 92%;
    - Overall Carer satisfaction with their care and support is 81%, achieving the target of 81%.

- 8. The key performance improvement issues for this theme are:
  - a. Prevalence of breastfeeding 6 8 weeks after birth has reduced and is significantly below the annual target. Between April and June 2012, 355 out of 1,360 babies that were due their 6-8 week check were recorded as totally or partially breastfed, which represents 26.1% against a target of 30.3%. This has decreased slightly from 27.6% in the same period in 2011/12. Performance is also significantly below the average national performance of 46.9%. Work is continuing with the main acute providers to increase and sustain rates through to six to eight weeks. Continued roll out of the National Childbirth Trust peer support service is taking place across County Durham and Darlington. This incorporates the Breastfeeding Baby Café and Baby Café local which has been set up in two locations, Seaham and Peterlee. The Baby Café will also be rolled out to a further three locations in East Durham. A similar model is to be implemented across the rest of County Durham. Other actions being taken to improve performance include the identification of breastfeeding leads in each of the three One Point Service Areas and the establishment of working groups in each area to focus on operational issues. Membership of the breastfeeding groups will include community midwives, hospital based midwifery, paediatrics, and health visitors and family workers from the One Point Service.
  - b. Delayed transfers of care per 100,000 have increased. In the 3 sample weeks between April and June there were 146 delays which equates to a rate of 12 delays per 100,000. This is an increase from 1.89 in the same period last year and from the final outturn for 2011/12 (4.9). This increase is primarily due to the inclusion of health delays in community hospital beds in the calculation. Significantly, only 3 of the 146 delays were attributable to Adult Social Care only.
  - c. There is one council plan action in this theme behind target. A review of the provision of in-house day services following the re-procurement of independent sector day services was due to take place by June 2013. This action has been delayed until September 2013 due to a delay with the re-procurement of independent sector day services. The action to implement this in County Durham which is included in the Adults, Wellbeing and Health (AWH) Service Plan has been delayed from June 2012 to September 2012 due to work being re-allocated to in house day care services review and re-design.
- 9. A council plan action proposed to be deleted is working with partners and clinical commissioning groups to review the joint commissioning strategy on long term conditions for County Durham, to ensure it is fit for purpose and designed to achieve strategic health and wellbeing outcomes for local people. This was due to be completed by March 2014 but the implementation of the strategy has been put on hold as no detailed action plan has been developed by NHS County Durham.
- 10. A key action in the Neighbourhood Services Service Plan is to review and refresh a Sport and Leisure Strategy by April 2012. The deadline has been delayed until January 2013 as the service is currently undertaking a process to integrate and refresh cultural, heritage and library strategies into the Sport and Leisure Strategy, as a result of the transfer of these services from the Adults, Wellbeing and Health service to Neighbourhood services.
- 11. Further performance issues relate to:
  - a. Results of the first Subjective Wellbeing Annual Population Survey were released in late July. The survey includes four measures collected by the following questions:
    - Overall, how satisfied are you with your life nowadays?
    - Overall, how happy did you feel yesterday?

- Overall, how anxious did you feel yesterday?
- Overall, to what extent do you feel the things you do in your life are worthwhile?

Initial analysis indicates that residents of County Durham have relatively low levels of subjective wellbeing compared to national averages. However, further work is required to better understand the survey methodology employed and to make more detailed comparisons.

- b. The Department of Health recently published their County Durham Health Profile 2012 which provides a health summary for County Durham. The range of results highlights a number of health indicators which potentially could inform the council's health outcomes within the Altogether Healthier council plan priorities. These include:
  - i. Smoking in pregnancy which measures the percentage of mothers smoking in pregnancy where status is known and refers to 2010/11 data. 22.9% (1,292) of mothers were recorded as smoking in pregnancy, which is worse than the England average of 13.7%.
  - ii. Adult obesity which measures the percentage of adults recorded as obese, modelled on an estimate using the Health Survey for England 2006-2008. 28.6% of adults were recorded as obese which is worse than the England average of 24.2%.
  - iii. Excess winter deaths which measures the ratio of excess winter deaths (observed winter deaths minus expected deaths based on non-winter deaths) for the 3 year period August 2007 to July 2010. The ratio of excess winter deaths was recorded as 19.8% (327) which is in line with the England average.

The above data from the County Durham Health Profile has been considered and reflected in development of the Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy.

12. The key risk to successfully delivering the objectives of this theme is A deterioration in public *health services resulting from the transfer of public health responsibilities to the Local Authority and the impact of future funding proposals.* The impact of this risk has been reassessed and is now considered to be critical, because it has emerged that future funding proposals may result in a significant budget reduction. A transition programme is in place to manage the risks surrounding these changes.

### Recommendation

13. That the Adults, Wellbeing and Health Overview and Scrutiny Committee receive the report and consider any performance issues arising there from.

#### **Appendix 1: Implications**

#### Finance

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

#### Staffing

Performance against a number of relevant corporate health PIs has been included to monitor staffing levels and absence rates.

#### Risk

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

#### **Equality and Diversity**

Corporate health PIs and key actions relating to equality and diversity issues are monitored as part of the performance monitoring process.

#### Accommodation

Not applicable

#### **Crime and Disorder**

A number of PIs and key actions relating to crime and disorder are continually monitored in partnership with Durham Constabulary.

#### **Human Rights**

Not applicable

#### Consultation

Not applicable

#### Procurement

Not applicable

#### Disability

Corporate health PIs and key actions relating to accessibility issues and employees with a disability are monitored as part of the performance monitoring process.

#### **Legal Implications**

Not applicable

## Appendix 2: Key to symbols used within the report

Where icons appear in this report, they have been applied to the most recently available information.

Direction of travel		Performance against target				
Latest reported data has improved from comparable period	GREEN	Performance better than target				
Latest reported data remains the same as comparable period	AMBER	Getting there - performance approaching target (within 2%)				
Latest reported data has deteriorated from comparable period	RED	Performance >2% behind target				

#### Actions

WHITE	Complete. (Action achieved by deadline/achieved ahead of deadline)
GREEN	Action on track to be achieved by the deadline
RED	Action not achieved by the deadline/unlikely to be achieved by the deadline
Benchmarking	
GREEN	Performance better than other authorities based on latest benchmarking information available
AMBER	Performance in line with other authorities based on latest benchmarking information available
RED	Performance worse than other authorities based on latest benchmarking information available

### Appendix 3: Summary of Key Performance Indicators Table 1: Key Target Indicators

Ref	Description	Latest data	Period covered	Period target	Current performance to target	Data 12 months earlier	Performance compared to 12 months earlier	National figure	*North East figure **Nearest statistical neighbour figure	Period covered
Altog	gether Healthier									
26	Four week smoking quitters per 100,000 population (former NI	1,308	2011/12	1,242	GREEN	1,165	GREEN	911	1225*	2010/11
	123)	.,	2011/12	.,		1,100		GREEN	GREEN	2010/11
27	Number of eligible people who have received an NHS health check	20,939	2011/12	24,400	RED	35,598	RED			
28	Prevalence of breastfeeding 6-8 weeks after birth	26.1%	Apr - Jun 2012	30.3%	RED	27.6%	RED	46.9% RED	30.1%* RED	Q4 11/12
29	Number of adult community health checks/health appraisals completed	1159	Apr - Jun 2012	625	GREEN	New indicator	N/A			
30	Number of people in treatment with the Community Alcohol Service (CAS) as a percentage of the estimated drinking population <b>Also in Altogether Safer</b>	9.3%	2011/12	Not set for 2011/12	N/A	New indicator	N/A			
	% of all exits from alcohol							58%		
31	treatment that are planned discharges Also in Altogether Safer	64%	2011/12	65%	AMBER	52%	GREEN	GREEN		2011/12
32	% of service users reporting that the help and support they receive has made their life "much" or "a	94.0%	2011/12	90%	GREEN	90.6%	GREEN			
	little" better.									
33	Overall satisfaction rating of	92.0%	2011/12	90%	GREEN	92.6%	AMBER	90%	91%**	2010/11
	social care users	02.070	_02	0070		02.070		GREEN	GREEN	_0.0,11

Ref	Description	Latest data	Period covered	Period target	Current performance to target	Data 12 months earlier	Performance compared to 12 months earlier	National figure	*North East figure **Nearest statistical neighbour figure	Period covered
34	Adults in contact with secondary mental health services in paid employment (former NI 150)	10.7%	Jul 11 - Jun 12	9.0%	GREEN	9.5%	GREEN	9.0% GREEN		2010/11
35	Overall satisfaction rate of carers	81.0%	Oct 11 - Apr 12	81.0%	GREEN	New indicator	N/A	83% <b>RED</b>		2009/10
36	Adults aged 18-64 per 100,000 population admitted on a permanent basis in the year to residential or nursing care	7.5	Apr - Jun 12 (projected to year end)	10	GREEN	10.3	GREEN			
37	Adults aged 65+ per 100,000 population admitted on a permanent basis in the year to residential or nursing care	711.6	Apr - Jun 12 (projected to year end)	879	GREEN	879	GREEN			
38	% of service users that have had care needs reviewed	95.3%	Jul 2011 - Jun 2012	92%	GREEN	91.1%	GREEN			
	Social care service users offered self-directed support (direct	50.00/	Jul 11 -	50.00/				30.1%		0040444
39	payments and individual budgets) (former NI 130)	52.6%	Jun 12	50.0%	GREEN	45.1%	GREEN	GREEN		2010/11
	% of older people who were still at home 91 days after discharge		Jan - Mar					83.1%	80%**	
40	from hospital into reablement / rehabilitation services (former NI 125)	88.1%	2012	85%	GREEN	89.6%	RED	GREEN	GREEN	2010/11
41	Overall satisfaction rating for intermediate care services	95.0%	2011/12	95%	GREEN	Definition changed	N/A			
42	% of people completing reablement who had achieved their goals (regional indicator)	76.4%	2011/12	70%	GREEN	61%	GREEN			

Ref	Description	Latest data	Period covered	Period target	Current performance to target	Data 12 months earlier	Performance compared to 12 months earlier	National figure	*North East figure **Nearest statistical neighbour figure	Period covered
43	Successful completions as a percentage of total number in drug treatment Also in Altogether Safer	11.0%	2011/12	Not set for 2011/12	N/A	New indicator	N/A	15%	13-20%*	2011/12

# Table 2: Key Tracker Indicators

Ref	Description	Latest data	Period covered	Previous period data	Performance compared to previous period	Data 12 months earlier	Performance compared to 12 months earlier	National figure	*North East figure **Nearest statistical neighbour figure	Period covered
Altog	ether Healthier									
	Standardised under 75 mortality rate for all							64.67	70.95*	
140	circulatory diseases per 100,000 population (Former NI 121)	71.6	2010	76	GREEN	76	GREEN	RED	AMBER	2010
	Standardised under 75							108.05	123.04* GREEN	
141	mortality rate for all cancers per 100,000 population (Former NI 122)	115.62	2010	123.6	GREEN	123.6	GREEN	RED		2010
142	% of the total eligible population screened for bowel cancer	66.8%	Jan - Mar 2012	57.5%	GREEN	58.6%	GREEN			
	% of the total eligible		Jan - Mar					78.60%	79.5%*	
143	population screened for cervical cancer	81.1%	2012	81%	GREEN	80.7%	GREEN	GREEN	GREEN	2010/11
144	Male life expectancy at birth	77	2008-10	76.9	GREEN	76.9	GREEN	78.58	77.2*	2008 10
144	(years)	11	2008-10	70.9	GREEN	76.9	GREEN	RED	AMBER	2008-10
145	Female life expectancy at	81	2008-10	80.7	GREEN	80.7	GREEN	82.57	81.2*	2008-10
145	birth (years)	01	2000-10	00.7	GREEN	00.7	GREEN	RED	AMBER	2000-10
	Alcohol related hospital	0.400	0040444				RED	1895	2597**	004044
146	admissions per 100,000 population	2486	2010/11	2286	RED	2286		RED	GREEN	2010/11
147	% respondents who feel that	67.4%	2009	69.2%	RED	69.2%	BED	75.8%	70.4%*	2008
147	their health in general is good	07.4%	2009	09.2%	RED	09.2%	RED	RED	RED	2008

Ref	Description	Latest data	Period covered	Previous period data	Performance compared to previous period	Data 12 months earlier	Performance compared to 12 months earlier	National figure	*North East figure **Nearest statistical neighbour figure	Period covered
	% of the adult population participating in at least 30 minutes sport and active		April 2010					22.30%	21.5%*	
148	recreation of at least moderate intensity on at least 3 days a week (Active People Survey) (former NI 8)	23.6%	- April 2012	23.3%	RED	23.3%	RED	GREEN	GREEN	2011
149	Delayed transfers of care from hospital and those which are attributable to adult social care (former NI 131)	12	Apr - Jun 2012	<u>4.9 [1]</u>	RED	1.89	RED	10.11		2011/12

[1] Figure refreshed