# Adults, Wellbeing and Health Overview and Scrutiny Committee

19 January 2016

Quarter 2 2015/16
Performance Management Report



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

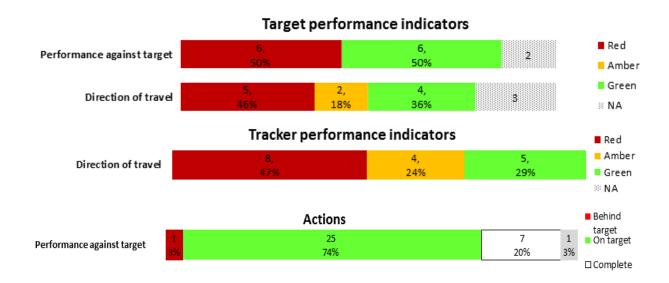
# **Purpose of the Report**

1. To present progress against the council's corporate basket of performance indicators (PIs), Council Plan and service plan actions and report other performance issues for the Altogether Healthier theme for the second quarter of the 2015/16 financial year, covering the period July to September 2015.

# **Background**

- 2. 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 (see Appendix 3, table 1); 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 (see Appendix 3, table 2).
- 3. The report continues to incorporate a stronger focus on volume measures in our performance framework. This allows us to better quantify productivity and to monitor the effects of reductions in resources and changes in volume of activity. Charts detailing some of the key volume measures which form part of the council's corporate set of performance indicators are presented in Appendix 4.
- 4. The corporate performance indicator guide provides full details of indicator definitions and data sources for the 2015/16 corporate indicator set. This is available to view either internally from the intranet (at Councillors useful links) or can be requested from the Corporate Planning and Performance Team at <a href="mailto:performance@durham.gov.uk">performance@durham.gov.uk</a>.

## Altogether Healthier: Overview



#### **Council Performance**

- 5. Key achievements this quarter include:
  - a. At 30 September 2015, 91% of adult social care users were in receipt of self-directed support (including direct payments and personal budgets). The England average for 2014/15 was 83.7%.
  - b. Between April and August 2015, 91.9% of service users reported that the help and support they receive has made their quality of life better. This exceeds the target of 90% but has reduced from 93% in the same period last year.
  - c. Between January and June 2015, 1,123 older people received a reablement service following their discharge from hospital. Of these, 988 (88%) remained living independently in their own home 91 days after their discharge. This has exceeded the target of 85.7% but is slightly worse than 89.8% for the same period last year. Performance exceeds the 2014/15 national (82.1%), regional (86.4%) and statistical neighbour (85.2%) averages.
  - d. Tracker indicators show:
    - i. In the five snapshot days between April and August 2015, 103 people were reported as being delayed during their discharge from hospital, resulting in a rate of 4.9 per 100,000 population. This is significantly better than the rate of 8.3 per 100,000 over the same period in 2014/15. Performance is also better than the 2014/15 England (11.1), regional (7.4) and statistical neighbour (8.6) averages.
    - ii. Of the 103 people delayed, adult social care was reported as being responsible for the delay (either partially or entirely) of 32 people (31%). This equates to a rate of 1.5 per 100,000 population. This is better than 2014/15 England (3.7), regional (1.6) and statistical neighbour (2.5) averages.

- iii. As reported in the Altogether Better for Children and Young People theme, data for April to June 2015 show that 384 of 1,259 mothers were breastfeeding at six to eight weeks from birth. This equates to 30.5%, which is an increase from last year's equivalent period (28.9%) and is better than the Durham, Darlington and Tees Area Team average of 28.4%. However, performance is worse than the England average of 45.2%.
- 6. Underlying health issues continue to be a challenge in terms of differences in life expectancy and prevalence of a range of health conditions from the national picture. We monitor a number of health indicators across our corporate indicator set and updated annual data will be reported in subsequent quarters. The key performance improvement issues for this theme from data released this quarter are:
  - a. Between April and June 2015, 1.9% of eligible people in County Durham received an NHS health check. This is slightly below the period target of 2% but is an improvement compared to 1.5% in the same period in 2014/15. Performance is similar to national (2.2%) and regional (1.9%) performance. All General Practices (GPs) signing up to the new Check4Life NHS Health Check Contract will be encouraged and incentivised to prioritise identification and invitation for patients who have a high risk of developing cardiovascular disease (CVD). GPs will receive £35 for an NHS Health Check on a patient identified as being at high risk of CVD and £25 if the CVD risk is lower.
  - b. Provisional data show there were 376 older people admitted to permanent care between April and September 2015, which equates to a rate of 361 per 100,000 population aged 65 and over. This has not achieved the target of 337.8 but is lower than the rate of 396.7 per 100,000 reported in the same period last year. While demand for permanent admission to residential care for older people has increased due to increasing demographic pressure, the number of residential/nursing beds purchased between July and September 2015 has decreased by 2.7% (6,501 fewer bed days) compared to the same period in the previous year. Robust panels continue to operate to ensure that only those in most need and who can no longer be cared for within their own home are admitted to permanent care.
  - c. Lifeline was appointed to provide the drug and alcohol treatment service across County Durham from 1st April 2015. The new service model is aimed at providing consistent, high quality, recovery focused interventions, irrespective of age or substance used. However, there is a lag on the provision of data by Public Health England, which means that the data included in this report relates to the former drug and alcohol treatment provider. The number of people in drug treatment for opiate use between January and December 2014 was 1,448; of whom 99 successfully completed, i.e. they did not re-present between January and June 2015. This equates to a 6.8% successful completion rate, which is below the target of 8.4% and national performance of 7.4% but is the same rate as 12 months earlier (6.8%). The first official Lifeline data on drug treatment will be available in early 2016.

- d. The number of people in drug treatment for non-opiate use between January and December 2014 was 672, of whom 268 successfully completed, i.e. they did not re-present between January and June 2015. This equates to a 39.9% successful completion rate, which is below the target of 40.8% but better than 37.7% reported at the same period last year. It is also slightly better than national performance of 39.2%.
- e. The number of people in alcohol treatment between July 2014 and June 2015 was 1,117, of whom 363 successfully completed. This equates to a 32.5% successful completion rate, below the target of 37.6%. Performance is worse than the same period in 2013/14 (36.5%) and latest national performance for 2014/15 (39.1%). Data for nine months of this indicator to 31 March 2015 relates to the former treatment provider. The final three months (April to June 2015) relates to the Lifeline Service.
- f. There is one Council Plan action which has not achieved target in this theme which is to implement an integrated transitions team due September 2015. This Care Act project milestone has been revised by the Social Care Reform Board. The target date for the new Integrated Transitions Team to go live is April 2016.
- g. An action has been deleted which was to review the assessment process to take into account additional demand from self-funders. The Government has announced their decision to postpone phase two reforms of the Care Act until 2020, which this action was part of.
- 7. There are no key risks which require any mitigating action in delivering the objectives of this theme.

#### **Recommendation and Reasons**

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

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# **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 issues.

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

**Equality and Diversity / Public Sector Equality Duty -** Corporate health PIs 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 Issues -** 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.

#### **Performance Indicators:**

#### **Direction of travel**

## Performance against target

Latest reported data have improved from comparable period

GREEN

Performance better than target

Latest reported data remain in line with comparable period

AMBER

Getting there - performance approaching target (within 2%)

Latest reported data have deteriorated from comparable period



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	PI 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
Alto	gether Healt	hier									
23	CASAH2	Percentage of eligible people who receive an NHS health check	1.9	Apr - Jun 2015	2.0	RED	1.5	GREEN	2.2 RED	1.9*  AMBER	Apr - Jun 2015
24	CASAH3	Percentage of people eligible for bowel cancer screening who were screened adequately within a specified period	Definition under develop ment	NA	NA	NA	NA	NA			
25	CASAH10	Percentage of women eligible for breast screening who were	77.9	2014	70.0	GREEN	78.6	AMBER	75.9	77.1*	2014
	G/ 1G/ 11 1 1 G	screened adequately within a specified period	77.10	70.0 ONLEN			GREEN	GREEN	2011		
		Percentage of women eligible for cervical							74.2	76.1*	
26	CASAH4	screening who were screened adequately within a specified period	78.0	2014	80.0	RED	77.7	GREEN	GREEN	GREEN	2014
27	CASAS23	Percentage of successful completions of those in alcohol treatment	32.5	Jul 2014 - Jun 2015	37.6	RED	36.5	RED	39.1 <b>RED</b>		Jul 2014 - Jun 2015
28	CASAS7	Percentage of successful completions of those in drug treatment - opiates	68   F	2014 (Represent	8.4	RED	6.8	AMBER	7.4		2014 (Re- present
			6AS7   completions of those in   6.8   stions to   8.4		0.0	AMBLIX	RED		ations to Jun 2015)		

Ref	PI 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					
29	CASAS8	Percentage of successful completions of those in drug treatment - non-	39.9	2014 (re- present	40.8	RED	37.7	GREEN	39.2		2014 (represent ations to					
25	ONONOO	opiates (Also in Altogether Safer)	33.3	ations to Jun 2015)	40.0	KLD	01.1	OKELN	GREEN		Jun 2015)					
30	CASCYP8	Percentage of mothers smoking at time of delivery (Also in Altogether	18.1	Apr - Jun 2015	18.2	GREEN	17.9	RED	10.7	16.3*	Apr - Jun 15 (NE - Durham, Darlington					
		Better for Children and Young People)							2015					RED	RED	and Tees area team)
31	CASAH1	Four week smoking quitters per 100,000 smoking population	712	Apr - Jun 2015	706	GREEN	New definition	<u>NA [1]</u>								
32	CASAH11	Adults aged 65+ per 100,000 population admitted on a permanent basis in the year to residential or nursing care	361.0	Apr - Sep 2015	337.8	RED	396.7	GREEN								
33	CASAU12	Percentage of adult social care service users that receive self-directed support such as a direct payment or personal budget	care service users that	care service users that	91.0	As at Sep	90.0	GREEN	New New	NIA F41	83.7		2014/15			
33	CASAH12		a direct	2015	20.0	GREEN	definition	NA [1]	GREEN		2014/13					
34	CASAH13	Percentage of service users reporting that the help and support they receive has made their quality of life better	users reporting that the	90.0	GREEN	93.0	RED	91.9	93.4*	2014/15						
34			91.9	2015	90.0	GKLLN	93.0	KLD	AMBER	RED	2014/13					

Ref	PI 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
35	CASAH14	Proportion of older people who were still at home 91 days after discharge from hospital into reablement/ rehabilitation services	88.0	Jan - Jun 2015	85.7	GREEN	89.8	RED	82.1  GREEN	85.2** GREEN	2014/15
36	CASAH24	Percentage of people who use services who have as	48.7	2014/15	Not set	NA	51.0	RED	44.8	47.6*	2014/15
									GREEN	GREEN	=5 : "."

<sup>[1]</sup> Due to changes to the definition data are not comparable/available

**Table 2: Key Tracker Indicators** 

Ref	PI ref	Description	Latest data	Period covered	Previous period data	Performance compared to previous period	Data 12 months earlier	Performance compared to 12 months earlier		*North East figure **Nearest statistical neighbour figure	Period covered
Altog	ether Healtl	hier									
	CASCYP	Percentage of children aged 4 to 5 years classified as overweight		2013/14 ac					22.5	24.4*	2013/14
136	18	or obese (Also in Altogether Better for Children and Young People)	23.8	yr	21.9	RED	21.9	RED	RED	GREEN	ac yr
137	CASCYP 19	Percentage of children aged 10 to 11 years classified as overweight or obese (Also in 36.1	36.1	2013/14 ac	35.9	AMBER	35.9	AMBER	33.5	36.1*	2013/14
		Altogether Better for Children and Young People)		yr					RED	AMBER	ac yr
	CASCYP	Prevalence of breastfeeding at 6 to 8 weeks from birth (Also	30.5	Apr - Jun					45.2	28.4*	Apr - Jun 2015 (NE - Durham,
138	25	in Altogether Better for Children and Young People)		2015	28.8	GREEN	28.9	GREEN	RED	GREEN	Darlington and Tees area team)
139	CASAH 18	Male life expectancy at birth (years)	78.0	2011-13	77.9	GREEN	77.9	GREEN	79.4 <b>RED</b>	78*  AMBER	2011-13
140	CASAH 19	Female life expectancy at birth (years)	81.3	2011-13	81.5	AMBER	81.5	AMBER	83.1 <b>RED</b>	81.7* <b>RED</b>	2011-13
444	0404110	Under 75 mortality rate from cardiovascular diseases (including heart disease and stroke) per 100,000 population	from cardiovascular	0044.40	_	ODEEN		ODEEN	78.2	88.9*	
141	CASAH6		2011-13	91.3	GREEN	91.3	GREEN	RED	GREEN	2011-13	
		Under 75 mortality rate	166.6	2011-13	164.2	AMBER	164.2	AMBER	144.4	169.5*	2011-13

Ref	PI ref	Description	Latest data	Period covered	Previous period data	Performance compared to previous period	Data 12 months earlier	Performance compared to 12 months earlier		*North East figure **Nearest statistical neighbour figure	Period covered
		from cancer per 100,000 population							RED	GREEN	
143	CASAH9	Under 75 mortality rate from respiratory disease per 100,000 population	43.4	2011-13	40.1	RED	40.1	RED	33.2 RED	42.6* <b>RED</b>	2011-13
144	CASAH8	Under 75 mortality rate from liver disease per 100,000 population	21.9	2011-13	21.7	RED	21.7	RED	17.9 <b>RED</b>	22.3* GREEN	2011-13
145	CASAH 23	Percentage of registered GP patients aged 17 and over with a diagnosis of diabetes	6.9	2013/14	6.8	RED	6.8	RED	6.2 RED	6.5* RED	2013/14
146	CASAH 20	Excess winter deaths (%) (3 year pooled)	19.0	2010-13	16.8	RED	16.8	RED	17.4 RED	16* RED	2010-13
147	CASAH 22	Estimated smoking prevalence of persons aged 18 and over	22.7	2013	22.2	RED	22.2	RED	18.4 <b>RED</b>	22.3* RED	2013
148	CASAH 25	Number of residential/nursing care bed days for people aged 65 and over commissioned by Durham County Council	233,130	Jul - Sep 2015	228,868	AMBER	239,631	GREEN			
149	CASAH 20i	Delayed transfers of care from hospital per 100,000 population	4.9	Apr - Aug 2015	4.5	RED	8.3	GREEN	11.1 GREEN	7.4*  GREEN	2014/15
150	CASAH	Delayed transfers of care from hospital, which are attributable to adult	1.5	Apr - Aug	1.1	RED	1.5	AMBER	3.7	1.6*	2014/15
.55	20ii	social care, per 100,000 population		2015		I.I KED	1.0		GREEN	GREEN	2011110
	040411	Suicide rate (deaths from suicide and injury of	13.4	2011-13	11.3	RED	11.3	RED	8.8	10.6*	2011-13

Ref	PI ref	Description	Latest data	Period covered		Performance compared to previous period	11212 17	Performance compared to 12 months earlier	National figure	*North East figure **Nearest statistical neighbour figure	Period covered
		undetermined intent) per 100,000 population (Also in Altogether Safer)							RED	RED	
152	NS11	Percentage of the adult population (aged 16+) participating in at least 30 minutes sport and active recreation of at least moderate intensity on at least three days a week	24.9	Apr 2013 - Mar 2015	26.0	RED	28.2	RED			