

## Appendix 2: Quarter 2 2015/16 Corporate Performance Report

RAG Rating	Direction of Travel (DOT)	Description
<b>Green</b>	On or within the 'variable tolerance' of the quarter target ↑	<b>Short Term:</b> Performance is better than the previous quarter <b>Long Term:</b> Performance is better than at the same point last year Corporate Plan Indicator Outturns reported cumulatively (C) Outturns reported as snapshot (S) Outturns reported as rolling year (R)
<b>Amber</b>	More than the 'variable tolerance' off the quarter target but where performance has improved or been maintained. →	<b>Short Term:</b> Performance is the same as the previous quarter <b>Long Term:</b> Performance is the same as at the same point last year
<b>Red</b>	More than the 'variable tolerance' off the quarter target and where performance is worsening ↓	<b>Short Term:</b> Performance is worse than the previous quarter <b>Long Term:</b> Performance is worse than at the same point last year

Ref.	Indicator	Value	2015/16 Annual Target	2015/16 Quarter 2 Target	Variable Tolerance	2015/16 Quarter 2 Performance	Short Term DOT against 2015/16 (Q1)	Long Term DOT against 2014/15 (Q2)	Comments
<b>SAFE: Supporting our community</b>									
ASCOF 2A(i) (C)	Rate of permanent admissions to residential and nursing care homes per 100,000 population (aged 18-64)	Smaller is Better	10	5	±10%	6.8 (10 of 14,7134) RED	↓ 2.7 (4 of 14,7134)	↓ 3.4	The rate of permanent admissions for individuals aged between 18-64 years is currently worse than target; however, this performance indicator is particularly stretching as it only allows for 14 admissions for the year. It is unlikely that this target will be met by year end as performance would need to remain almost static until December to be on target. Increasingly services are managing a number of complex placements where clients can no longer be supported in the community. The services are aware of upcoming transitions cases and all services are monitoring clients in the community that may need moving to residential placements in the near future, particularly those with older carers.
ASCOF 2A(ii) (C)	Rate of permanent admissions to residential and nursing care homes per 100,000 population (aged 65+)	Smaller is Better	598.1	301.1	±10%	291.8 (133 of 45582) GREEN	↓ 142.6 (65 of 45,582)	↓ 265.5	Performance in this area is positive and above target at Q2. As ever, there is continued pressure for placements in the Borough and work is continuing to ensure that admissions are timely and appropriate. The average age of council-supported permanent admissions of adults (aged 65+) to residential and nursing care is 84 years.
L7 (BCF)	Total non-elective admissions into hospital (general & acute), all-age per 100,000 population	Smaller is Better	No annual target. Targets set for each quarter	2263	±0%	2734 (6747 of 246731) (Q1) RED	↓ 2,730 (6,735 of 246,731) (Q4 2014/15 time lag)	– NEW	Due to different frequencies of reports to the NHS, it was agreed that they would standardise their reporting arrangements for A&E, RTT, cancer, diagnostics, ambulances, 111 and delayed transfers of care so that all the data is published on one day each month. This means that there is a time lag on when their data is presented in house. Performance is worse than target and that of the previous quarter (Q4 2014/15). <b>Corrective Action:</b> Colleagues in CCG and BHRUT are continuing to look into the reasons for the underperformance.
ASCOF 1F (C)	Percentage of adults in contact with secondary mental health services in paid employment	Bigger is Better	6.5%	6.5%	±10%	5.4% (26 of 481) RED	↓ 7.3% (35 of 480)	↓ 7.9% (38 of 483)	This performance indicator is led by NELFT. Performance is currently below target in this area however the target is expected to be met by year end. Mental Health Services are committed to the recovery model and work closely with service users to support them to fulfil their potential in accessing employment opportunities.
ASCOF 1G (C)	Percentage of adults with learning disabilities who live in their own home or with their family	Bigger is Better	63%	29%	±10%	29.2% (147 of 503) GREEN	↑ 11% (56 of 498)	↓ 30% (138 of 459)	Performance in this area is just above target in Q2 and focused work is ongoing within the Community Learning Disabilities Team (CLDT) to ensure that performance is continues to improve by Q3 and the target is met by year end.
ASCOF 1H (C)	Percentage of adults in contact with secondary mental health services living independently, with or without support	Bigger is Better	94%	94%	±10%	86.7% (417 of 481) GREEN	↓ 88% (421 of 480)	↓ 91% (439 of 483)	This performance indicator is led by NELFT. Performance is currently slightly below target and has reduced further since Q1. NELFT continues to work to remove the barriers to Mental Health service users accessing and remaining in settled accommodation, and coming out of residential settlements back into the community

Ref.	Indicator	Value	2015/16 Annual Target	2015/16 Quarter 2 Target	Variable Tolerance	2015/16 Quarter 2 Performance	Short Term DOT against 2015/16 (Q1)		Long Term DOT against 2014/15 (Q2)		Comments
L3 (C)	Percentage of people who return to Adult Social Care 91 days after completing reablement	Smaller is Better	5%	5%	±10%	4.9% (17 of 346) GREEN	↓	4.2% (7 of 168)	↓	3.5% (12 of 339)	This indicator monitors the success of reablement and measures the percentage of service users who return after a successful reablement phase. The current outturn is close to target therefore it is possible that this indicator will be below target by Q3. <b>Corrective Action:</b> The majority of referrals into reablement are from hospital. As always discharge into reablement services will continue to be monitored to ensure appropriateness.
L6 (BCF) (S)	Carers who request information and advice	Bigger is Better	75%	75%	±10%	88.9% (144 of 162) GREEN	→	89% (144 of 162)	–	NEW	This data is taken from the bi-annual statutory survey. This indicator is monitored annually as part of the Better Care Fund submissions.
L8 (BCF)	Patient/service user experience (managing long term conditions)	Bigger is Better	34%	34%	±10%	33.1% (Jul 15) (578 of 1748) GREEN	↑	32.1% (547 of 1,703)	–	NEW	Performance in this area is consistent. Data is taken from GP patient survey and will be monitored as part of the Better Care Fund submissions.
ASCOF 2C(i)a (C)	Overall rate of delayed transfers of care from hospital per 100,000 population	Smaller is Better	6	6	±10%	2.7 (5.2 of 192716) GREEN	↑	2.9 (5.5 of 192,716)	↑	4.1	The overall rate of delayed transfers of care from hospital is better than target and is better than both last quarter and the same period last year. Performance in this area is robustly monitored following the creation of the Joint Assessment and Discharge Team. ASC will continue to work with Health colleagues to maintain positive performance in this area and to improve discharge processes in the Borough
ASCOF 2C(i)b (C)	Rate of delayed transfers of care from hospital per 100,000 population	Smaller is Better	389.1	355.6 (Q1)	±10%	360.57 (698 of 193582) (Q1) GREEN	↓	252.4 (233 of 193,582) (Q4 2014/15)	–	NEW	Due to different frequencies of reports to the NHS, it was agreed that they would standardise their reporting arrangements for A&E, RTT, cancer, diagnostics, ambulances, 111 and delayed transfers of care so that all the data is published on one day each month. This means that there is a time lag on when their data is presented in house. Performance is positive in this area and is expected to remain so throughout the year. This indicator is monitored through the Better Care Fund submission.
ASCOF 2C(iii) (C)	Rate of delayed transfers of care attributable to Adult Social Care (ASC) only per 100,000 population	Smaller is Better	1.0	1.0	±10%	0.4 (0.8 of 192,716) GREEN	↑	0.5 (1 of 192,716)	↑	0.6	Performance in this area is within target and is better than at the same point last year. ASC continue to focus efforts with the JAD team to ensure timely discharges take place for all clients with social care needs.
SAFE: Using our influence											
ASCOF 2C(ii) (C)	Rate of delayed transfers of care from hospital attributable to Adult Social Care (ASC) and Health per 100,000 population	Smaller is Better	2.8	2.8	±10%	0.5 (1 of 192716) GREEN	→	0.5 (1 of 192,716)	↑	1.6	Performance in this area is well within target and significantly better than at the same point last year with the number of instances of a delayed transfer of care reducing greatly. ASC continues to use its influence to ensure timely discharges take place for all clients with a social care need.
SAFE: Leading by example											
ASCOF 1C(i) (S)	Percentage of people using social care who receive self-directed support and those receiving direct payments	Bigger is Better	82%	82%	±10%	67.8% (1368 of 2018) AMBER	↑	67.1% (1,363 of 2,031)	↓	73% (1,522 of 2,078)	Self-Directed Support (SDS) and personalisation continues to be at the heart of the service offer within Adult Social Care (ASC). ASC is currently below target for this indicator and performance is worse than at the same point last year but slightly better than last quarter. The Service will be reviewing a number of non SDS cases to establish if there are any specific or different reasons for the current low take up. It is anticipated that this project will lead to an increase in clients receiving services under SDS and that target will be met by year end.
ASCOF 1C(ii) (S)	Direct payments as a percentage of self-directed support	Bigger is Better	45%	45%	±10%	36.6% (738 of 2018) AMBER	↑	36.2% (735 of 2,031)	→	37% (779 of 2,078)	Direct Payments (DPs) are one component of the Self Directed Support (SDS) offer. ASC is currently below target for this indicator and is worse than at the same point last year. However, the performance has improved slightly since the last Quarter. A working group has been set up to focus on increasing SDS performance, and also to consider increasing DP take up by service users, where possible. However, in line with the national picture, ASC continues to face challenges in increasing the take up of DPs for older people and considering Havering's significant older population this explains the scale of the challenge the service has in this area