

RAG Rating		Direction of Travel (DOT)	Description
Green	On or within the 'target tolerance' of the annual 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
Amber	More than the 'target tolerance' off the annual 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
Red	More than the 'target tolerance' off the annual 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	VariableTarget Tolerance	2015/16 Annual Performance		Short Term DOT against 2015/16 (Q3)		Long Term DOT against 2014/15 (Annual)	Comments	Service	O&S Sub-Committee
SAFE: Supporting our community												
(C)	Rate of permanent admissions to residential and nursing care homes per 100,000 population (aged 18-64)	Smaller is Better	10	±10%	10.2 (15 / 147,134) GREEN	➡	10.2 15/147,134	🔴	9.6	The rate of permanent admissions for individuals aged between 18-64 years has missed target slightly but is within tolerance. This performance indicator was particularly stretching as it only allowed for 14 admissions for the year. By year end there had been 15 admissions into long stay care. 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.	Adult Social Care <i>Reported to Department of Health (DH)</i>	Individuals
(C)	Rate of permanent admissions to residential and nursing care homes per 100,000 population (aged 65+)	Smaller is Better	598.1	±10%	594.5 (271 / 45,582) GREEN	🔴	445.4 203/45,582	🟢	606.9	Performance in this area remains positive and the target for 2015/16 has been met. As with previous years, there is continued pressure for placements in the Borough and work within the service continues 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. Performance when compared to Q4 in 14/15 is a slight improvement with 271 admissions in 15/16 compared to 272 in 14/15	Adult Social Care <i>Reported to Department of Health (DH)</i>	Individuals
(C)	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	±0%	2,425 (Q3) (5,960 / 245,731) GREEN	🟢	2,433 (Q2) 6,003 / 246,731	🟢	2,427 5,965 / 245,731	This indicator is led by the Clinical Commissioning Group and is split into 4 quarterly targets. Performance in this area has improved from Q2 to Q3. Performance for Q4 is currently unknown due to the delay in reporting, however it is expected to be consistent with Q3.	Adult Social Care <i>Reported to Department of Health (DH)</i>	Individuals or Health
(C)	Percentage of adults in contact with secondary mental health services in paid employment	Bigger is Better	6.5%	±10%	4.7% (22 / 467) RED	🔴	5.1% (25 / 493)	🔴	6.8% (31 / 459)	<p>This performance indicator is led by the North East London Foundation Trust (NELFT). Performance is currently below target in this area and is worse than at the same stage last year. Mental Health Services continue to be committed to the recovery model and work closely with service users to support them to fulfil their potential in accessing employment opportunities.</p> <p><b>Corrective Action:</b></p> <p>The NELFT Leadership Team has signed off the plan for Recovery Community, which will help to push clients back into employment. There was a gap between those under primary and secondary care, with the clients in the middle fitting into the Recovery Community.</p>	Adult Social Care <i>Reported to Department of Health (DH)</i>	Individuals
(C)	Percentage of adults with learning disabilities who live in their own home or with their family	Bigger is Better	63%	±10%	63.5% (322 / 507) GREEN	🟢	47.4% (240 / 506)	🟢	62.7% (319 / 509)	Performance in this area has met target for 15-16; At year end there were 322 service users with a Learning Disability in settled accommodation. This compares well to 319 in 14/15.	Adult Social Care <i>Reported to Department of Health (DH)</i>	Individuals

Ref.	Indicator	Value	2015/16 Annual Target	VariableTarget Tolerance	2015/16 Annual Performance	Short Term DOT against 2015/16 (Q3)		Long Term DOT against 2014/15 (Annual)		Comments	Service	O&S Sub-Committee
(C)	Percentage of adults in contact with secondary mental health services living independently, with or without support	Bigger is Better	94%	±10%	86.1% (402 / 467) GREEN	↑	84.8% (418/493)	↓	88.2% (405 / 459)	This performance indicator is led by the North East London Foundation Trust (NELFT). Performance did not meet target, but is within the target tolerance, and the outturn has increased since Q3. NELFT continues to work to remove the barriers to mental health service users accessing and remaining in settled accommodation, and coming out of residential settings back into the community.	Adult Social Care <i>Reported to Department of Health (DH)</i>	Individuals
(C)	Percentage of people who return to Adult Social Care 91 days after completing reablement	Smaller is Better	5%	±10%	5.9% (42 / 715) RED	↓	5.0% (28 / 562)	↓	4.4% (28 / 640)	This indicator monitors the success of reablement and measures the percentage of service users who return for on-going services after a reablement phase. The year end target was missed, and performance was worse than at the same stage last year. The average age of a service user who uses reablement is 81 years old, however the average age of a service user who returns requiring on-going long term support is 86.  <b>Corrective Action:</b> There will be close monitoring of this indicator during 16-17 to identify suitability for reablement.	Adult Social Care <i>Local performance indicator</i>	Individuals
(S)	Carers who request information and advice	Bigger is Better	75%	±10%	85.8% GREEN	↓	88.9%	–	NEW	Although the short term direction of travel has reduced, there has been a positive outturn for this indicator with year end target being met. This indicator will change next year as per the Better Care Fund Submission.	Adult Social Care <i>Reported to Department of Health (DH)</i>	Individuals
(S)	Patient/service user experience (managing long term conditions)	Bigger is Better	34%	±10%	33.1% 595 / 1,800 (January 2016) GREEN	→	33.1% 578/1,748 (July 2015)	↑	32.1% 547/1,703 (January 2015)	This indicator is monitored twice a year and is taken from the GP patient survey. Performance remains consistent and will continue to be monitored in 16/17 as part of the Better Care Fund.	Adult Social Care <i>Reported to Department of Health (DH)</i>	Individuals or Health
(C)	Overall rate of delayed transfers of care from hospital per 100,000 population	Smaller is Better	6	±10%	3.9 7.5 / 192,716 GREEN	↑	4.2 8.0/192,716	↑	4.5	The overall rate of delayed transfers of care from hospital is better than target and is an improvement when compared with the previous 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. To date an average of 7.5 patients per month are classed as delayed on the snapshot day.	Adult Social Care <i>Reported to Department of Health (DH)</i>	Individuals or Health
(C)	Rate of delayed transfers of care from hospital per 100,000 population	Smaller is Better	389.1	±10%	438.06 RED	↓	313.56 (Q2)	–	NEW	This indicator is monitored as part of the Better Care Fund submissions. This measure is monitored on a quarterly basis, with 4 targets set throughout the year. Performance for Q4 was worse than target with 848 days delayed for the 3 month period across Health and Social Care. The majority of delays occurred in the Acute Sector with the main responsibility for delay being Health.	Adult Social Care <i>Reported to Department of Health (DH)</i>	Individuals
(C)	Rate of delayed transfers of care attributable to Adult Social Care (ASC) only per 100,000 population	Smaller is Better	1.0	±10%	0.7 (1.4 / 192,716) GREEN	→	0.7 (1.4 / 192,716)	↑	1.1	Performance in this area is better than target and is better than at the same point last year. ASC continues to focus efforts with the JAD team to ensure timely discharges take place for all clients with a social care need. As at quarter 4 there had only been an average of 1.4 delays per month where the responsibility was Adult Social Care across both the acute and non acute sectors. The majority of the delays were in the non-acute sector where 13 of the 17 delays occurred.	Adult Social Care <i>Reported to Department of Health (DH)</i>	Individuals
SAFE: Using our influence												
(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	±10%	1.1 (2.1 / 192,716) GREEN	↓	0.9 (1.8/192,716)	↑	2.0	This part of the indicator monitors where the delay is the responsibility of Adult Social Care only or is a shared delay with Health. To date there has been an average of 1.1 delays per month across both the acute and non acute sectors. 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.	Adult Social Care <i>Reported to Department of Health (DH)</i>	Individuals
SAFE: Leading by example												
(S)	Percentage of people using social care who receive self-directed support and those receiving direct payments	Bigger is Better	82%	±10%	82.2% (1,678 / 2,041) GREEN	↑	71.4% (1,438 / 2,013)	↑	75.4% (1,536 / 2,036)	Self-Directed Support (SDS) and personalisation continue to be at the heart of the service offer within Adult Social Care (ASC). ASC has achieved target for this indicator and has improved performance when compared to the same point last year. At the end of quarter 4 there were 1,678 service users receiving their long term community care via self-directed support.	Adult Social Care <i>Reported to Department of Health (DH)</i>	Individuals

Ref.	Indicator	Value	2015/16 Annual Target	VariableTarget Tolerance	2015/16 Annual Performance	Short Term DOT against 2015/16 (Q3)		Long Term DOT against 2014/15 (Annual)		Comments	Service	O&S Sub-Committee
(S)	Direct payments as a percentage of self-directed support	Bigger is Better	45%	±10%	35.1% (717 / 2,041) RED	↓	36.8% (741/2,013)	↓	36.1% (736/2,036)	<p>Direct Payments (DPs) are one component of the SDS offer. ASC is currently below target for this indicator and performance is worse than at the same point last year. There are 717 currently service users receiving a direct payment.</p> <p><b>Corrective Action:</b> The working group continues 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</p>	<p><b>Adult Social Care</b> <i>Reported to Department of Health (DH)</i></p>	Individuals