










Appendix 1: Council Plan Monitoring – Q3 2015/16 Health and Adult Social Care Overview and Scrutiny Committee Detailed Report.




Key

PI Status	Trend* Arrows	Success is
 This PI is significantly below target	 The performance of this PI has improved	 Higher figures are better
 This PI is slightly below target	 The performance of this PI has worsened	 Lower figures are better
 This PI has met or exceeded the target	 The performance of this PI is static	N/A - Desired performance is neither too high nor too low
 This PI is data only. There is no target and is provided for reference only.	N/A – Rating not appropriate / possible, or target is cumulative	
*Short trend compares to last quarter.		
*Long trend compares to average of previous 4 quarters.		

2.1 We will work closely with our NHS and voluntary sector partners




Code	Short Name	Success Is	2013/14	2014/15	Q2 2015/16	Q3 2015/16			Q3 2015/16	2015/16	Note	
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend		Target
ASC07ii	Delayed transfers of care from hospital which are attributable to adult social care		1.3	4.3	8.5	8.4	8.5				8.5	<p>15-Jan-2016 8.4 reflects October and November data only; NHS England will publish December data in mid-February, when this result can be updated. Provisional data based on information from Medway Foundation Trust projects an overall increase to around 8.9, which would be above target</p> <p>The Emergency Care Intervention Programme is working with Medway Foundation Trust to develop improvements in the care pathway. Although few delays relate to adult social care, they can be delayed for a considerable period of time. In addition, there are increased numbers of Medway residents who are patients in other NHS facilities such as Kent and Medway Partnership Trust and Medway Community Health that are experiencing delays that can last for a considerable time.</p>
ASC13	ASCOF 2A(1) Permanent admissions to residential and nursing care homes, per 100,000 population – 18-64		11.3	23.61	4.7	1.2	3.5				14	<p>08-Jan-2016 Care home admissions are still high. In the first nine months of the year so far there have been 19 admissions of younger adults, with an expectation that the two recorded in Q3 will increase as services are recorded retrospectively - this has happened in both of the previous quarters. Monitoring of all new care home services at a team level has been established to help improve performance.</p>
ASC14	ASCOF 2A(2) Permanent admissions to residential and nursing care homes, per 100,000 population –		NA	741.94	184.12	114.8	144				576	<p>08-Jan-2016 Care home admissions are still high. In the first nine months of the year so far there have been 193 admissions of older adults, with an expectation that the 48</p>







Code	Short Name	Success Is
	65+	
ASCOF 2Bii	The percentage of older people offered reablement services on discharge from hospital	

2013/14	2014/15	Q2 2015/16	Q3 2015/16				Q3 2015/16	2015/16
Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target
NA	NA	Not measured for Quarters	Not measured for Quarters					3.3%

Note
recorded in Q3 will increase as services are recorded retrospectively - this has happened in both of the previous quarters. Monitoring of all new care home services at a team level has been established to help improve performance.
This is an annual measure and will be reported at year end

2.2 We will ensure that people have choice & control in support

Code	Short Name	Success Is
ASC18	ASCOF 1C(1i) The percentage of clients accessing services through self directed support	
ASC19	ASCOF 1C(2i) The percentage of clients accessing services through a direct payment	
ASCOF 1B	The percentage of service users who report they have control over their daily life	

2013/14	2014/15	Q2 2015/16	Q3 2015/16				Q3 2015/16	2015/16
Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target
NA	NA	88.8%	92.3%	81%				81%
NA	NA	25.4%	26.9%	25%				25%
NA	NA	Not measured for Quarters	Not measured for Quarters				Not measured for Quarters	76.7%


Note
07-Jan-2016 Performance continues to improve as more clients receive their long term services in the form of a personal budget, including direct payments.
07-Jan-2016 Overall levels of personalisation continue to improve as a proportion of the reducing numbers of residents receiving long term services due to the prioritisation of direct payments and use of reablement and ongoing low level support such as technology enabled care services and equipment.
This is an annually reported figure. Provisional results are expected to be available towards year end

2.3 We will support carers in the valuable work they do

Code	Short Name	Success Is	2013/14	2014/15	Q2 2015/16	Q3 2015/16			Q3 2015/16	2015/16	Note	
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend		Target
ASC02	ASCOF 3B Carer satisfaction with adult social care services		46.70	40.90	Not measured for Quarters	Not measured for Quarters			Not measured for Quarters	NA	08-Jan-2016 Carer Satisfaction is measured through the Carer Survey, which is undertaken every two years. No survey is due to take place in 2015/16, but co-production work planned with the Carer Partnership Board to explore ways of evaluating Carer satisfaction through qualitative analysis techniques.	
ASC10	Carers receiving an assessment or review		26.5%	30.9%	14.4%	23.0%	22.5%				30.0%	08-Jan-2016 816 carer assessments have been completed so far this year, nearly 91 per month on average. This represents a significant improvement in care management work in the last three months. It is planned to undertake co-production work with the Carer Partnership Board to develop improved Carer services that can be offered following an assessment.
ASC17	The proportion of carers who felt that they had been included or consulted in discussions about the person they care for		NA	72.9	Not measured for Quarters	Not measured for Quarters			Not measured for Quarters	NA	08-Jan-2016 Carer consultation and engagement is measured through the Carer Survey, which is undertaken every two years. No survey is due to take place in 2015/16, but co-production work planned with the Carer Partnership Board should improve carer engagement, and will be reflected in the survey undertaken in 2016/17.	

2.4 We will ensure that disabled adults and older people are safe



Code	Short Name	Success Is	2013/14	2014/15	Q2 2015/16	Q3 2015/16			Q3 2015/16	2015/16	Note	
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend		Target
ASC SVA 01	Number of SVA concerns/alerts		NA	244	378	639	NA		NA	NA	NA	08-Jan-2016 Safeguarding alerts have increased by 30% since Quarter 2 from 185







Code	Short Name	Success Is
ASC04	ASCOF 4B The proportion of people who use services who say that those services have made them feel safe and secure	

2013/14	2014/15	Q2 2015/16	Q3 2015/16				Q3 2015/16	2015/16
Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target
86.95	84.17	Not measured for Quarters	Not measured for Quarters				Not measured for Quarters	65.00


Note
to 261 per quarter. This is an average of 71 per month. This reflects improved reporting and recording; only 169 alerts (now known as concerns) went on to become an enquiry.
No target has been set in this benchmarking year.
21-Jul-2015 This is an annually reported figure. Provisional results are expected to be available towards year end.




2.5 We will promote & encourage healthy lifestyles for adults

Code	Short Name	Success Is
PH10	Percentage of people completing an adult weight management service who have reduced their cardiovascular risk	
PH13	Rate per 100,000 of self-reported 4 week smoking quitters aged 16 or over	

2013/14	2014/15	Q2 2015/16	Q3 2015/16				Q3 2015/16	2015/16
Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target
NA	76.4%	76.7%	78.7%	70.0%				70.0%
868	665	281	281 Q2	165 Q2				588


Note
06-Jan-2016 Of the 605 completing exercise referral and Tipping the Balance, 476 reduced their cardiovascular risk at the end of the intervention. This includes achieving a significant weight loss, waist circumference reduction, increase in physical activity level, reduction in blood pressure or reduced blood cholesterol.
06-Jan-2016 Q3 data not yet available. During Q1 and Q2 281 per 100,000 population quit, higher than the mid-year target of 165 per 100,000. Medway has seen a decline in the numbers setting a quit date and successful quitters, as has England. However, Medway has consistently achieved rates higher than the England average. Declining quit attempts may be due to




Code	Short Name	Success Is
PH9	Number of cardiovascular health checks completed	

2013/14	2014/15	Q2 2015/16	Q3 2015/16				Q3 2015/16	2015/16
Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target
NA	7,583	3,176	4,311	4,875				6,500


Note
<p>factors such as the increased numbers of people using electronic cigarettes (E-cigs), lack of national advertising and access to illicit tobacco. The service is now able to provide behavioural support to those that are using E-cigs.</p> <p>Success rates remain stable at around 47% of those who set a quit date successfully quitting in Medway.</p> <p>The Stop Smoking Team has launched a High Street shop to raise awareness and to provide services in a town centre location.</p> <p>06-Jan-2016 The health check programme is behind target at the end of quarter 3, due to a post that was vacant for the first half of the year. The post has now been filled and in quarter 4 the post holder will be working closely with GP practices to increase uptake of health checks in Medway. A detailed feedback report has been circulated to each practice to encourage better performance and this will continue at regular intervals throughout the year.</p>




3.5 We will tackle and reduce the harm caused by alcohol and drugs

Code	Short Name	Success Is
PH11	Number of users of opiates that left drug treatment successfully (free of drug dependence) who do not then represent to treatment again within 6 months as a percentage of the total	

2013/14	2014/15	Q2 2015/16	Q3 2015/16				Q3 2015/16	2015/16
Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target
NA	6.1%	5.1%	5.1% Q2	6.0% Q2				8.2%

Note
<p>18-Jan-2016 Q3 data not yet available - Performance in Q2 is 5.1%. The commissioning manager is now meeting weekly with the provider to drive improvement, and monitor delivery of the revised improvement action plan. The service has recruited a new clinical lead</p>

Code	Short Name	Success Is
	number of opiate users in treatment	
PH12	The percentage of alcohol users that were in treatment in the last 12 months who successfully complete treatment.	

2013/14	2014/15	Q2 2015/16	Q3 2015/16				Q3 2015/16	2015/16
Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target
NA	45.1%	39.2%	39.2% Q2	39.0% Q2				35.0%

Note
<p>which will have a significant impact on service delivery and a new structured intervention is being offered to clients on a low titration of methadone to support them to become drug free</p> <p>11-Jan-2016 Q3 data not yet available - Performance in Q2 is 39.2%. This is a significant improvement for Turning Point (the provider) from Q1 of 32.6% and in line with than national average of 39.12%. Turning Point were set a target of increasing outcomes for alcohol clients and have opened alcohol specific clinics in the evenings to offer an alternative to clients having to attend along side opiate service users. We will work with the service to ensure these levels are maintained.</p>