Key Performance Indicators

To: Adults and Health Committee

Meeting Date: 15 December 2022

From: Jyoti Atri, Director of Public Health, Debbie McQuade, Director of Adult

Social Care

Electoral division(s): All

Key decision: No

Forward Plan ref: N/A

Outcome: The Committee receives performance reports at future meetings

containing information on agreed indicators

Recommendation: Adults and Health Committee are recommended to:

note and comment on the performance information outlined in this

report, and take remedial action as necessary.

Officer contact:

Name: Val Thomas / Tina Hornsby

Post: Deputy Director of Public Health / Head of Adults Performance and Strategic

Development

Email: val.thomas@cambridgeshire.gov.uk / tina.hornsby@peterborough.gov.uk

Tel: 07884 183374 / 01733 452428

Member contacts:

Names: Cllr R Howitt / Cllr S van de Ven

Post: Chair / Vice-Chair

Email: Richard.howitt@cambridgeshire.gov.uk

Susanvandeven5@gmail.com

Tel: 01223 706398

1. Background

- 1.1 The Council adopted a new Strategic Framework and Performance Management Framework in February 2022, for the financial year 2022/23. The new Performance Management Framework sets out that Policy and Service Committees should:
 - Set outcomes and strategy in the areas they oversee
 - Select and approve addition and removal of KPIs for the committee performance report
 - Track progress quarterly
 - Consider whether performance is at an acceptable level
 - Seek to understand the reasons behind the level of performance
 - Identify remedial action
- 1.2 Following from a paper for the Committee on 9 December 2021, exploring the key considerations for performance frameworks in the areas of adult social care and health services, a workshop was held with lead officers and Committee members to develop a draft set of KPIs to support ongoing performance monitoring arrangements. The Committee reviewed and agreed these draft KPIs in the meeting held on the 14 July 2022, and form the basis of this report.

2 Adult Social Care performance update

- 2.1 It was agreed that KPIs would be grouped into small bundles linked to a theme to provide a more rounded picture of performance whilst still reflecting headline performance.
- 2.2 The four agreed themes are;
 - Early intervention and prevention supporting people early with targeted information and advice and low-level and community support and reablement services, to prevent or delay the need for long term care and support.
 - Long term care and support when needed is personalised and keeps people connected to their communities
 - Adults at risk are safeguarded from harm in ways that meet their desired outcomes.
 - Transitions between health and social care services work well There are 11 indicators in total.
- 2.3 Targets for these indicators will be set and included in the quarter 3 report. The absence of targets for these measures means that the indicators cannot be 'RAG' rated, therefore a comparison with the previous quarter is used to determine the current 'status' of each indicator.
- 2.4 Appendix 1 contains further details about these indicators, including trends over time, comparisons with national and statistical neighbours, and performance commentary.
- 2.5 Early intervention and prevention supporting people early with targeted information and advice and low-level and community support and reablement services, to prevent or delay the need for long term care and support.

Indicator	FY 21/22	Q1 22/23	Q2 22/23	Status
230: Number of new client contacts for Adult Social Care per 100,000 of the population	4127.6	1214.7	2422.5	Improving
231: % of new client contacts not resulting in long term care and support	93.0%	88.2%	88.1%	Declining
140: The proportion of people receiving reablement who did not require long term support after reablement was completed.	87.7%	88.5%	86.5%	Declining

2.6 Long term care and support when needed is personalised and keeps people connected to their communities

Indicator	FY 21/22	Q1 22/23	Q2 22/23	Status
126: Proportion of people using social care who receive direct payments (%)	21.3%	17.3%	18.4%	Improving
232: Proportion of people receiving long term support who had not received a review in the last 12 months % of all people funded by ASC in long-term	50.2%	32.9%	25.1%	Improving
233: Number of carers assessed or reviewed in the year per 100,000 of the population.	65.6	17.1	38.5	Improving
234: % Of total people accessing long term support in the community aged 18-64	84.1%	89.4%	90.0	Improving
235: % total people accessing long term support in the community aged 65 and over	51.6%	60.8%	62.7%	Improving

2.7 Adults at risk are safeguarded from harm in ways that meet their desired outcomes

Indicator	FY 21/22	Q1 22/23	Q2 22/23	Status
236: Percentage of cases where Making Safeguarding Personal (MSP) questions have been asked	89.8%	85.6%	83.5%	Declining
105: Percentage of those able to express desired outcomes who Fully or	93.8%	95.7%	96.9%	Improving

Partially Achieved their desired				
outcomes.				
229: Percentage of safeguarding				
enquiries where risk has been reduced	91.5%	88.9%	90.0%	Improving
or removed				_

2.8 Transitions between health and social care services work well

Detail of indicators to follow – discussions are still ongoing with colleagues in health services (maximum 3)

3. Public Health performance update

- 3.1 There were not any objections or specific issues raised in relation to the choice of indicators during the review workshop and a list of priority indicators were agreed by Committee on the 14 July 2022. These indicators reflect our high value contracts that are primarily preventative or provide treatment e.g., Drugs and Alcohol Treatment Service. Included are some targets for the Healthy Child Programme that is funded from the Public Health Grant. As these are not currently monitored by the CYP Committee they are included here as priority indicators. There are 9 priority indicators in this set.
- 3.2 Indicators are 'RAG' rated where targets have been set.
 - Red current performance is off target by more than 10%
 - Amber current performance is off target by 10% or less
 - **Green** current performance is on target by up to 5% over target
 - **Blue** current performance exceeds target by more than 5%
 - **Baseline** indicates performance is currently being tracked to inform the target setting process
 - Contextual these measures track key activity being undertaken, to present a rounded view of information relevant to the service area, without a performance target.
 - In Development measure has been agreed, but data collection and target setting are in development

3.3 Drug and Alcohol Treatment Services

Indicator	FY 21/22	Q1 22/23	Q2 22/23	Status
201: % Achievement against target for drug and alcohol service users who successfully complete treatment. (national benchmark)		21.76%	ТВС	Green

3.4 Health Behaviour Change Services (lifestyles)

Indicator	FY 21/22	Q1 22/23	Q2 22/23	Status
82: Tier 2 Weight Management Services: % achievement of the target for Tier 2 Weight Management adult service users who complete the course and achieve a 5% weight loss. (30% recommended)	38%	42%	56%	Blue
237: Health Trainer: (Structured support for health behaviour change): % achievement against target for adult referrals to the service from received from deprived areas	31%	34%	34%	Blue
56: Stop Smoking Services: % achievement against target for smoking quitters who have been supported through a 4-week structured course. (national benchmark)	36.2%	25.8%	ТВС	Red
53: NHS Health Checks (cardiovascular disease risk assessment) Achievement against target set for completed health checks	6,408	2,450	3,097	Red

3.5 **Healthy Child Programme**

Indicator	FY 21/22	Q1 22/23	Q2 22/23	Status
59: Health visiting mandated check - Percentage of births that receive a face-to-face New Birth Visit (NBV) within 14 days, by a health visitor.	55%	42%	40%	Red
60: Health visiting mandated check – percentage of children who received a 6–8-week review by 8 weeks.	28%	32%	37%	Red
62: Health visiting mandated check - Percentage -of children who received a 2-2.5-year review.	42%	48%	42%	Red
57: % Of infants breast feeding at 6-8 weeks (need to achieve 95% coverage to pass validation).	50%	52%	58%	Green

4. Alignment with corporate priorities

4.1 Environment and Sustainability

There are no significant implications for this priority.

4.2 Health and Care

The indicators detailed here provide a comprehensive overview of performance in key priority areas and will enable appropriate oversight and management of performance once regular reporting begins.

4.3 Places and Communities

There are no significant implications for this priority.

4.4 Children and Young People

There are no significant implications for this priority.

4.5 Transport

There are no significant implications for this priority.

5. Source documents

5.1 None.