Appendix A - Quarterly Performance Report

Medium Term Plan Indicators Appendix A indicators

Quarter 4 2013/14

				Performanc	ce Judgement
Report com Depends on th	parison - e nature of the indicator	Direct	ion of travel (DoT)		e (Standard scoring rules u scoring arrangements)
Seasonal	Compared to the same time period in the previous year		Performance is reducing	R	RED - target missed / off 10% below the required I
Quarter on quarter	Compared to the previous quarter		Performance remains unchanged	Α	AMBER - target missed / than 10% below the requ
Annual	Compared to one fixed point in the previous year	æ	Performance is improving	G	GREEN - Target achieve achieve target

unless the indicator specifies

off target - Performance at least distribution by the second seco

I / off target - Performance less quired level of improvement

ved or performance on track to

Overview of performance

Ref	Indicator	Performance will be	Performance reported this		ı being
		reported:	Time period	Perform	mance
Promote	e health and wellbeing and protect the vulnerable				
C 1 MTP	Protecting Vulnerable Adults	Quarterly	Quarter 4 2013/14		G
C 2 MTP	Number of additional 'Extra Care' flats provided	Quarterly	Quarter 4 2013/14		R
С 3 МТР	Percentage of decent homes (Council stock)	Quarterly	Quarter 4 2013/14		Α
C 4a MTP	Number of Village Care schemes in operation	Quarterly	Quarter 4 2013/14	æ	G
C 5a MTP	Percentage of council commissioned dementia care classed as 'good' or 'excellent'.	Quarterly	Quarter 4 2013/14		G
C 6 MTP	Clients receiving self directed support	Quarterly	Quarter 4 2013/14		R
С7 МТР	Percentage of 40 to 74 year olds offered a health check	Quarterly	Quarter 4 2013/14	æ	G

Promote health and wellbeing and protect the vulnerable

C 1 MTP	Protecting Vulnerable Adults							
Milestones: 1. Indeper	ndent audits of safeguarding case files - Annual	Latest comparator group average	-	Report comparison	-	Performance Judgement		G
2. Annual	Safeguarding Report - Annual o & implement new safeguarding performance framework – September 2013							
The necessary Monthly perform	nance: of Safeguarding cases is continuing, with action taking place where required. Good practice examples are shared changes to the Adult Social Care database (Swift) for the new reporting framework have been implemented and a nance reports are presented to the Executive and Deputy Executive members for SCHH. Idit of case file took place at the end of April and the initial feedback is positive.				/orkshops ru	n by the Safegu	arding Te	eam.
Planned Actions The monthly au	s: dit by the safeguarding team will continue into 2014-15 and the external audit of files will be produced.							

C 2 MTP	Number of additional 'Extra Care' flats provided				
Milestones: 1. Secure Pla	inning Permission; agree s106 – July 2013	Latest comparator group average	Report comparison	Performance Judgement	R
2. Procure co					
3. Commence	e Construction – January 2014				
4. Open New	Provision – by December 2014				
	king event marking the start of work on Priory View site took place on the 11th April.				
Planned Actions The anticipated	s: completion date for Priory View is August 2015.				

C 3	МТР	Per	centage o	f decent h	omes (Co	uncil stocl	k)										
Unit	Good is			201	2/13		2012/13 La		Latest comparator group average	-	Report comparison	Seasonal	Performance Judgement	æ	Α		
%	Low		Qu 1	Qu 2	Qu 3	Qu 4	Qu 1	Qu 2	Qu 3	Qu 4 / Outturn			•••••• • ••••				
	Target		98.20	98.20	99.00	100	100	100	100	100							
										99.6							
The M Planne As pre	t Perform IP target d Actions viously re	t for 20 s: eporte	013-14 has no	ne adoption of	the Housing	-				-	nent Strategy. il properties (e.g. kitchens,	bathrooms	s, etc) will not	be based on	failure of the D	ecent Ho	imes

C 4a	МТР	Number of Villag	e Care schemes i	n operation									
Unit	Good is			2013/14			Latest comparator group		Report	_	Performance		Δ
%	High	Qu 1	Qu 2	Qu 3	Qu 4	Outturn	average	co	omparison		Judgement		~
Tar	get	NA	87.1	90.3	100	100							
Act	ual	NA	87.1	87.1	100	100							
The Le Planne	t Perform ighton/Lind d Actions	nslade scheme came in s:	to being in March 2013, given to increasing the r	-	-	rd and Linslade, resu	Iting in all wards in Central B	edfordshire b	being covere	d by a Villa	ge Care scheme	Э.	

C 5a	MTP	Percentage of Co	ouncil commissio	ned dementia car	e classed as 'go	ood' or 'excelle	nt'					
Unit	Good is			2013/14			Latest comparator group	_	Report	_	Performance	G
%	High	Qu 1	Qu 2	Qu 3	Qu 4	Outturn	average		comparison	-	Judgement	G
Ta	get	60	60	60	60	60						
Ac	tual	NA	61.2	61.2	61.2	61.2						
Using t Planne	t Perform he Assoc d Actions	ciation of Directors of Ac s:	dult social Care (ADASS)									

C 6 I	МТР	Client	s recei	ving s	elf dire	ected s	uppor	t (ASC	OF1c)								
Unit	Good	2011/12			201	2/13					201	3/14		1	Latest comparator group average	44.1 CIPFA 2011/12	Repor comparis
Unit	is	Outturn	Target (Outturn)	Qu 1	Qu 2	Qu 3	Qu 4	Outturn	Target (Outturn)	Qu 1	Qu 2	Qu 3	Qu 4	Outturn		2011/12	
%	High	52.9	100	54.7	66.2	71.7	75.9	75.9	100	77.1	77.5	75.3	74.6	74.6			

Comment:

Current Performance:

Provisional Outturn - Whilst performance has dipped at the end of the year, the Council's performance remains strong and is likely to perform well against the Council's statistical Between April 2013 and March 2014, 3,236 people received self-directed support, The final outturn for this measure will be available from the end of May and it is considered likely that the outturn will increase following a period of data cleansing.

Planned Actions:

Work will continue to strive towards the ambitious MTP target of 100%.

ort rison	Quarter on Quarter	Performance Judgement		R
al nei	ghbours and	within the East	ern regio	n.

С 7 МТ	Ρ	NHS He	alth chec	ks (perc	entage of	people age	ed 40 to 74	years of age	e offered a	a health che	eck).					
Unit	Good is									Latest compara averag		Report comparison	Quarter on Quarter	Performance Judgement	æ	G
%	Lliab		2010/11	2011/12			2012/13					2013/14				
70	High		Outturn	Outturn	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Outturn	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Outturn		
	Target	Number	12,999	20,822	6,014	6,014	6,014	6,016	24,058	3,979	3,979	3,997	3,997	15,952		
Percentage offered a health check	Actual	Number	14,923	21,466	5,057	4,978	9,083	6,651	25,769	6,091	4,312	5,129	5,526	21,058		
	Actual	%	115	103	84	83	151	111	107	153	108	128	138	132		
Number of	Target	Number	6,500	10,411	3,007	3,007	3,007	3,008	12,029	2,767	2,767	2,767	2,767	11,068		
Health checks	Actual	Number	7,547	10,499	1,992	2,398	2,949	3,148	10,487	2,714	2,328	2,267	2,290	9,599		
delivered	Actual	%	116	101	66	80	98	105	87	98	84	82	83	87		
In addition to th	Health Ch le figures	relating to t	hose having	been offere	d Health Che	cks, the cumul	ative percentag		cks delivered	d was 87% for t	he 2013/14, a s	imilar level of per ould not be fully s				

The reasons for not achieving the annual target for Health Checks delivered included some significant underperformance by some providers. This under-activity could not be fully supplemented by either alternative GP providers or alternative commissioned services.

Planned Actions:

Work will continue to support the underperforming Primary Care providers with as well as exploring alternative methods of delivery, including clustering delivery around high-performing providers within GP localities. Horizon Health Choices will also be contracted to increase delivery options, both in supporting under-performing providers and ensuring supplementary delivery of the NHS Health Check service in a range of community settings.