

Adult & Communities – 2013/14

1.1 DELIVERY UNIT DASHBOARD

| Revenue budget actual variance £000 ^[1] | Capital actual variance £000 | Corporate Plan Performance | Management Agreement Performance |
|---|------------------------------|-------------------------------|-------------------------------------|
| 114 | 238 | 4 | 7 |

1.2 TOP ACHIEVEMENTS AND ACTIONS

| Top 3 Achievements | Key Escalations | Actions required |
|---|-----------------|------------------|
| <p>Increase in both User and Carers Satisfaction reported during Q1 Two separate national DH surveys published during Q1 show positive trends with large increases in both Service User and Carer satisfaction during 12/13. A greater proportion of service users are extremely satisfied with the care they've received, placing Barnet above average within its comparator group. The 'extremely satisfied' group has increased from 17% in 2010/11 to 39% in 2012/13.</p> <p>Sickness Reduction The delivery unit has continued to make positive progress in the reduction of sickness levels during this period. Our Q1 level reported was 1.43 (projected 5.72 year end). During the same period last year is was 2.27,</p> | N/a | N/a |

this is a reduction of 37% compared to the same quarter in 12/13

Reduction of Residential Placements

Our end of year performance reports during Q1 has confirmed a 5.6% reduction in the number of older people placed into residential care, compared with the previous year.

1.3 SUMMARY OF THE DELIVERY UNIT'S PERFORMANCE

The delivery unit continues to perform strongly across the majority of performance measures during Q1 and this follows on from strong 12/13 final year end data. Sickness indicators continue to follow last quarter's positive trend and measures in place to improve this remain under constant monitoring. A small number of 'Change Projects' have moved to Amber during this reporting period but robust plans are in place to ensure these projects overcome these issues and deliver.

2. DELIVERING THE CORPORATE PLAN

2.1 How the Delivery Unit is performing against its Corporate Plan indicators

| CPI NO | Indicator description | Period Covered | Previous outturn | Target | Numerator and Denominator | Outturn | Target Variance | DoT Variance | Benchmarking |
|--------|--|----------------------------------|------------------|--------|---------------------------|---------|-----------------|--------------|---|
| 1001 | Increase the percentage of eligible adult social care customers receiving self-directed support | Apr 13 - Jun 13 | 61.4% | 75% | 3322/4902 | 67.8% | 9.6% | ▲ 10.4% | 64.3% LAPS Q4 2012/13 group average |
| 1002 | Increase the percentage (and number) of eligible adult social care customers receiving direct payments to 30% | Apr 13 - Jun 13 | 24% | 30% | 1121/3654 | 30.7% | 2.3% | ▲ 27.8% | No benchmarking available - local Indicator |
| 1003 | Increase the number of carers who receive support services | Apr 13 - Jun 13 | 6% | 8% | 428/4759 | 9% | 12.4% | ▲ 49.9% | No benchmarking available - local Indicator |
| 1004 | Reduce the number of younger adults in residential and nursing care | Apr 13 - Jun 13 | 322 | 306 | N/A | 304 | 0.7% | ▲ 5.6% | No benchmarking available - local Indicator |
| 1005 | Increase the % of older people (65 and over) who were still at home 91 days after discharge from hospital into re-enablement/rehabilitation services | Data expected to report from Q2. | | | | | | | |
| 1006 | Increase the overall satisfaction of people who use adult social care services with care and support | Data expected to report in Q4. | | | | | | | |
| 1007 | Increase % of adult social care service users who say their services have made them feel safe and secure | | | | | | | | |

| CPI NO | Indicator description | Period Covered | Previous outturn | Target | Numerator and Denominator | Outturn | Target Variance | DoT Variance | Benchmarking |
|--------|---|-----------------|------------------|--------|---------------------------|---------|-----------------|--------------|--|
| 1008 | Increase in community confidence in police and the local authority dealing with crime and anti-social behaviour | | | | | | | | |
| 1009 | Reduce adult reoffending for those under probation supervision per 1000 caseload | Jan 12 - Dec 12 | 7.8% | 7.5% | N/A | 5.9% | 21.2% | ▲ 24.2% | 7.86% Home Office London Average Jan 12 - Dec 12 |
| 1010 | Reduce level of domestic burglary to 24.8 per 1,000 households | Jun 12 - May 13 | 25.4 | 24.8 | N/A | 24.8 | 0% | ▲ 2.4% | 16.4 Home Office comparator average Jun 12- May 13 |

*The relevant previous outturn used will either be the previous quarter, or the same quarter of the previous year. The same quarter of the previous year will be used for annual indicators, cumulative indicators (where the numbers add up during the year and are reported as 'year to date') and if the indicator is affected by seasonal fluctuations.

Commentary added by Adults & Communities cross-referenced to Table in section 2.1

CPI 1001: The 75% target is a national target based on the full year actual. Red rag status is a reporting issue based on the quarter's performance being measured against the year end target. Our quarter 1 performance is higher than last year's out-turn and higher than the latest bench marking average (64.3% Q4 2012/13 group average – source LAPS). If we continue to improve at a similar rate over the coming quarters we will achieve or surpass our target for the year end.

2.2 Interventions & Escalations

| CPI NO | Comments and Proposed Intervention |
|--------|------------------------------------|
| | None |

3. BUSINESS PLANNING

3.1 Overview of performance against Management Agreement

| Total No. of KPIs | RAG ratings | | | | Positive/neutral DoT | Negative DoT | No. of indicators expected to report this quarter |
|-------------------|--------------|-------------|-----------|--------------|----------------------|--------------|---|
| | Green | Green Amber | Red Amber | Red | | | |
| 31 | 8 (88.9%) | 0 (0%) | 0 (0%) | 1 (11.1%) | 8 | 2 | 10* |

*One indicator is for monitoring purposes so no target has been set

See section 3.2 commentary below.

3.2 How is the Delivery Unit achieving against its Management Agreement

| KPI NO and title | Indicator description | Period Covered | Previous outturn | Target | Numerator and Denominator | Outturn | Target Variance | DoT Variance | Benchmarking |
|------------------|---|---------------------------------|------------------|--------|---------------------------|---------|-----------------|--------------|-----------------------------------|
| OP008 | Reduction in homecare hours following enablement | Apr 13 - May 13 | 32% | 34% | 2/7 | 28.6% | 16% | ▼ 10.7% | No benchmarking - local indicator |
| EQ029 | Ensure equality of access to personal budgets by monitoring the take up of personal budgets by protected characteristics – age, gender, ethnicity, type of disability etc | Data not reported this quarter. | | | | | | | |
| EQ030 | Ensure equality of access by monitoring the breakdown of people who receive an assessment by protected characteristics | | | | | | | | |

Commentary added by Adults & Communities cross-referenced to Table in section 3.2

KPI OP008: The results of this KPI are over April - May. The numbers that make up this percentage are small numbers and will fluctuate depending on nature of referrals going through the service. An increase of 1 for the numerator would move the measure into the green banding. It should also be noted that this measure is also impacted by the large increase in people that exit enablement without **ANY** home care services (OP009 Exit enablement without any home care services – performing at 61.7%, above target and previous out-turn, suggesting a shift from ‘reduced hours’ to ‘no homecare need’)

3.3 Interventions & Escalations

| KPI NO and title | Comments and Proposed Intervention |
|------------------|------------------------------------|
| OP008 | No intervention required. |

4. RESOURCES AND VALUE FOR MONEY

4.1 Revenue

| Description | Variations | | | | Comments | % Variation of revised budget |
|---|-----------------|---------------|---------------|------------|--|-------------------------------|
| | Original Budget | Budget V1 | Q1 forecast | Variation | | |
| | £000 | £000 | £000 | £000 | | |
| Births Deaths & Marriages | (260) | (472) | (382) | 90 | Pressure on service in achieving the income target. | -19.1% |
| Community Well-Being Trans & Res Team | 464 | 464 | 347 | (117) | One-off benefit from underspend on staff vacancies | -25.2% |
| Community Safety | 1,969 | 2,091 | 2,014 | (77) | Underspend relates to staff vacancies and underspend on maintenance costs due to essential maintenance only | -3.7% |
| Prevention & Well Being | 7,670 | 8,522 | 9,079 | 557 | Overspend relates to proportion of savings still to be received | 6.5% |
| Social Care Commissioning | 1,279 | 1,305 | 1,267 | (38) | Underspend due to staff vacancies | -2.9% |
| Social Care Management (Adults) | 1,281 | 1,281 | 408 | (873) | Holding code for demographic pressures £800k credit- to be distributed across social care purchasing budgets. | -68.1% |
| Care Quality | 1,927 | 1,599 | 1,691 | 92 | Overspend on staffing | 5.8% |
| Integrated care - Learning Disabilities & Mental Health | 41,938 | 41,973 | 41,659 | (314) | Underspend mainly from the early achievement of savings from the supported living framework (E16 on MTFs), partly offset by the increase in number of clients on the Autistic spectrum and increase in Direct Payments | -0.7% |
| Care Services - Older Adults - Physical Disabilities | 39,603 | 40,225 | 41,028 | 803 | Overspend due to Increase in number of EMI clients and Direct Payments | 2.0% |
| Dir Adult Soc Serv & Health | 184 | 184 | 175 | (9) | | -4.9% |
| Total | 96,055 | 97,172 | 97,286 | 114 | | 0.1% |

Commentary added by Adults & Communities cross-referenced to Table in section 4.1

Controllable budget has been maintained in a balanced position. However, some demand driven areas have overspent within the service, as care provision is a statutory requirement. All overspends in this area are being managed through robust operational budget management working within the resource allocation system (RAS) and regular monitoring.

4.2 Capital

| | 2013/14 Latest Approved Budget | Additions/ (Deletions) - Quarter 1 | (Slippage) / Accelerated Spend - Quarter 1 | 2013/14 Budget (including Quarter 1) | Forecast to year end | Variance from Approved Budget | % slippage of 2013/14 Approved Budget |
|-------------------------------|--------------------------------|------------------------------------|--|--------------------------------------|----------------------|-------------------------------|---------------------------------------|
| | £000 | £000 | £000 | £000 | £000 | £000 | % |
| Adults and Communities | 1,904 | 477 | (239) | 2,142 | 2,142 | 238 | -13% |
| Adults and Communities | 1,904 | 477 | (239) | 2,142 | 2,142 | 238 | -13% |

Commentary added by Adults & Communities cross-referenced to Table in section 4.2

Variance relates to NSCSO delays in the IT Case Management replacement project which has effected project mobilisation.

5. OVERVIEW OF DELIVERY UNIT

5.1 Managing the business

N/A

5.2 Change projects

| Project | Outturn | Direction of Travel | Commentary |
|---|---------|---------------------|--|
| Older People Integrated Care Pilot Project (Health & Social Care Integration Spearhead Project 1) | Amber | ▼ | <i>Project is underway; positive feedback from participants. There are issues with certain care homes not attending meetings and training sessions may impact the success of the project, although a number of mitigations are in place.</i> |
| Care Home Improvement Pilot Project (Health & Social Care Integration Spearhead Project 1) | Amber | ▼ | <i>Multi-disciplinary case conferences are now operational including social care, secondary, community and primary care. Care navigators have started working. Information sharing issues are delaying the effective use of the risk stratification software which is otherwise ready to use. Plans are underway to seek to resolve this governance issue and a work around is in place to 'case find' patients.</i> |
| Neighbourhood Model | Green | ↔ | Procurement completed - consortium provider is Age UK project on track. |
| Carers contingency and NHS carers health support | Green | ↔ | <i>Carers contingency plans are now being rolled out.</i> |
| Implementation of community safety enhancements and CCTV procurement | Green | ↔ | <i>ITT is 1 week behind schedule but this is not expected to impact the overall project timeframe and is within project tolerances.</i> |
| Complex needs programme – transitions | Amber | ▲ | <i>New pathway and scope for transitions team has been agreed with CS and will now be implemented, following a delay.</i> |

5.3. Risk Overview

The following is the 5 X 5 matrix 'heat map' highlighting the number of risks at a Directorate Level and where they are currently rated:
Insert table here:

| PROBABILITY | SCORE | IMPACT | | | | |
|-------------|----------------|------------|-------|----------|-------|--------------|
| | | 1 | 2 | 3 | 4 | 5 |
| | | Negligible | Minor | Moderate | Major | Catastrophic |
| 5 | Almost Certain | 0 | 0 | 0 | 0 | 0 |
| 4 | Likely | 0 | 0 | 2 | 2 | 0 |
| 3 | Possible | 0 | 2 | 12 | 2 | 1 |
| 2 | Unlikely | 1 | 1 | 3 | 4 | 0 |
| 1 | Rare | 0 | 0 | 0 | 0 | 0 |

Risk Commentary for Adults & Communities. Unless otherwise stated these risks have not been escalated for monitoring at the corporate level. Risk registers have been realigned to reflect the new Delivery Unit structure. Governance arrangements are being enhanced and to ensure best practice is applied the assistance of the Corporate Risk Manager has been sought and work is scheduled to refine the way the Delivery Unit's risks are overseen.

The risk rating for the Delivery Unit's business continuity risk, a long term risk, recommended for escalated to the corporate risk register has remained static from quarter 3. Actions in progress include, for example, enhancing the plan to withstand a disruption to the Delivery Unit's case management system, SWIFT. The information governance risk rating, another long term risk, has remained at a rating of 12 since it was last reported.

Risks relating to CCTV and leisure services are included in this register as these teams have been incorporated into the Adults and Communities Delivery Unit structure.

The following risk register lists those risks rated as 12 and above:






| Risk | Current Assessment Impact Probability Rating | | | Control Actions | Risk Status | Board Assurance (timing) | Target Assessment Impact Probability Rating | | |
|--|---|-------------|-------------------|---|-------------|-----------------------------|--|---------------|-----------------|
| Unable to meet cost pressure of PSI and younger adult placements Cause: demand management projects fail / inadequate budget provision. Consequence: reduction or delay in the provision of care. | Moderate 3 | Likely 4 | Medium-High 12 | Panel of senior managers review and approve high cost placements to ensure robust challenge. Refocusing in-house brokerage on placement cost negotiation rather than placement sourcing. | Treat | Quarterly | Moderate 3 | Unlikely 2 | Medium-Low 6 |

| Risk | Current Assessment | | | Control Actions | Risk Status | Board Assurance (timing) | Target Assessment | | |
|--|--------------------|---------------|----------------|--|-------------|--------------------------|-------------------|---------------|--------------------|
| | Impact | Probability | Rating | | | | Impact | Probability | Rating |
| <p>Information governance - risk that the Directorate may not be appropriately safeguarding personal information or responding to queries from members of the public.</p> <p>Cause: development of poor practice over time, as identified by the ICO / Internal Audit across the Council.</p> <p>Consequence: potential lack of safety of sensitive data, lack of compliance with DPA or FOI.</p> | Major 4 | Possible 3 | Med High 12 | Delivery Unit Governance Group addressing key issues as it progresses with its work programme. | Treat | Quarterly | Moderate 3 | Unlikely 2 | Medium Low 6 |
| <p>Budget pressures related to Management Fees due for annual inflation but no inflation within the annual budgets.</p> <p>Cause: no inflation uplift factored into the annual budget.</p> | Major 4 | Likely 4 | High 16 | Budgets are monitored and controlled closely to reduce pressures where possible. | Treat | Quarterly | Moderate 3 | Unlikely 2 | Medium Low 6 |
| <p>Business continuity – risk that care services do not continue as normal / required minimal acceptable levels, in the event of an incident or a disaster.</p> <p>Cause: lack of plans to continue business as usual and define the necessary tasks in these instances.</p> <p>Consequence: services will not continue and residents will be affected this may include some of the Council's most vulnerable service users.</p> | Catastrophic 5 | Possible 3 | High 15 | Business continuity plans have been produced. An exercise to identify the Directorate's critical tasks has been completed. Disaster Recovery (DR) SAP (finance and procurement) DR arrangements in place Website DR arrangements in place Back ups are undertaken. | Treat | Quarterly | Moderate 3 | Unlikely 2 | Medium Low 6 |

| Risk | Current Assessment | | | Control Actions | Risk Status | Board Assurance (timing) | Target Assessment | | |
|--|--------------------|-------------|------------|--|-------------|--------------------------|-------------------|---------------|---------------------|
| | Impact | Probability | Rating | | | | Impact | Probability | Rating |
| CCTV: existing facility is at capacity and unlikely to support future needs. System at risk of breakdown due to age and is potentially difficult to repair due to obsolescence of equipment and system. Breakdown may occur pending replacement. | Major 4 | Likely 4 | High 16 | Close monitoring of demands; options review Maintenance contract Review of options for accelerated procurement. | Treat | Quarterly | Moderate 3 | Possible 3 | Medium High 9 |

**Appendix
Adults & Communities KPIs**

| KPI NO | Indicator description | Period Covered | Previous outturn | Target | Numerator and Denominator | Outturn | Target Variance | DoT Variance | Benchmarking |
|--------|---|---------------------------------|------------------|--------|---------------------------|---------|-----------------|--------------|-----------------------------------|
| AS0 01 | Increase the proportion of people who use services and their carers who find it easy to find information about support | Data not reported this quarter. | | | | | | | |
| AS0 02 | Increase the proportion of service users who say that they have control over their lives | | | | | | | | |
| IL00 3 | Deliver increased access to peer-led advice, information and support through Barnet Centre for Independent Living (BCIL) | Apr 13 - Jun 13 | 2536 | 2700 | N/A | 5736 | 112.4% | ▲ 126.2% | No benchmarking - local indicator |
| CR0 04 | Increase the proportion of carers who say that they are supported to sustain their caring role | Data not reported this quarter. | | | | | | | |
| CR0 05 | Increase the number of carers who report that they can balance their caring role and maintain their desired quality of life | | | | | | | | |
| CR0 06 | Proportion of carers who report that they had as much social contact as they would like | | | | | | | | |
| RD0 07 | Develop a basket of measures that evaluate the impact of telecare with the aim of identifying what helps | | | | | | | | |

| | | | | | | | | | |
|-------|---|---------------------------------|------|---------------|---------|-------|-------|--|--|
| | maintain independent living and reduce care costs (TBC) | | | | | | | | |
| OP009 | Exit enablement without any home care services | Oct 12 - Dec 12 | 50% | 52% | 187/303 | 61.7% | 18.7% |  23.4% | No benchmarking - local indicator |
| YA010 | Reducing the number of younger adults (18 - 64) in residential and nursing care | June 13 | 322 | 306 | N/A | 304 | 0.7% |  5.6% | No benchmarking - local indicator |
| OP011 | Monitor the number of older people placed into residential care and compare with previous years. Account for any difference | June 13 | 788 | No Target Set | N/A | 744 | N/A |  5.6% | No benchmarking - local indicator |
| CP012 | Community based packages have support plans that are fully person-centred and reviews indicate that outcomes are achieved | Data not reported this quarter. | | | | | | | |
| AS013 | Increase the percentage of service users who are happy with the way that their care workers treat them | | | | | | | | |
| TC014 | Reduction in percentage of people reporting the extent to which they are very/fairly worried about ASB in their area | | | | | | | | |
| TC015 | Reduction in violence against the person crimes per 1000 population | Jun 12- May 13 | 9.6 | TBC | N/A | 9.7 | TBC |  1.0% | 12.8 Home Office comparator average Jun 12- May 13 |
| TC016 | Reduction in repeat offending of those on the probation caseload | Jan 12- Dec 13 | 7.8% | 7.5% | N/A | 5.8% | 22.7% |  25.6% | 7.86% Home Office London Average Jan 12 - Dec 12 |

| | | | | | | | | | |
|-----------|--|---------------------------------|------|------|---------|------|----|----|---------------------------|
| TC0 17 | Increase public confidence in police and council in dealing with ASB and crime issues that matter in their area | Data not reported this quarter. | | | | | | | |
| GL0 18 | Ensure GLL provides a good relationship with its customers and user: Ensure customer correspondence is dealt with within 10 working days | | | | | | | | |
| GL0 19 | Improve customer satisfaction levels with leisure services provided by LA | | | | | | | | |
| GL0 20 | To challenge GLL to increase income | | | | | | | | |
| GL0 21 | To decrease LBB expenditure | | | | | | | | |
| GL0 22 | To reduce the cost of the service per user | | | | | | | | |
| RN0 23 | Increase percentage of satisfied customers with registrars and nationality service | | | | | | | | |
| RN0 24 | Nationality ceremony to be offered within 90 days of receipt of letter from Home Office | Apr 13 - Jun 13 | 100% | 100% | 647/647 | 100% | 0% | 0% | No benchmarking available |
| VA0 25 | Achieve Outer London Average for homecare spend per week for people with LD under 65 | Data not reported this quarter. | | | | | | | |

| | | | | | | | | | |
|-----------|--|--------------------|-----|-----|-----|-----|-------|------------|--|
| VA0 26 | Achieve Outer London Average for day care costs per week for people with LD aged under 65 | | | | | | | | |
| VA0 27 | Achieve Outer London Average for day care costs per week for people with PD aged under 65 | | | | | | | | |
| WF0 28 | Reduce sickness levels per employee | Apr 13 - Jun 13 | 9.9 | 6.0 | N/A | 5.6 | 6.7% | ▲ 43.4% | 9 (CIPFA, All Members & other Unitary Authorities 2012) |
| EQ0 31 | Increase in hate crime reported monitored by protected characteristics | Apr 13 - Jun 13 | 42 | 46 | N/A | 60 | 30.4% | ▲ 42.9% | No benchmarking |