

## Adult & Communities– Q4 2014/15

### 1.1 DELIVERY UNIT DASHBOARD

Revenue budget projected year end variance £000	Capital actual variance £000	Corporate Plan Performance	Management Agreement Performance
2,409	(1,614)	1	3

### 1.2 TOP ACHIEVEMENTS AND ACTIONS

#### Top 3 Achievements

Barnet was fully Care Act compliant as of 1 April 2015 and preparations are now underway for the further changes from 1 April 2016.

Proactive work by the hospital social work teams is keeping delayed discharges to a minimum – additional government resources have been effectively utilised to improve local performance.

Achievement of vast majority of 14/15 MTFS savings.

Key Challenges	Actions required
Financial pressures. Demographic pressures and challenging savings targets for 15/16 will make delivering on budget very difficult.	Developing alternative options with commissioners and finance.
Maintaining sustainability in the market. There are significant capacity issues in the market – especially for domiciliary care and enablement but also for residential care and supported living. The new CQC inspection regime is also identifying more providers as needing improvement.	New Care Quality structure will help to manage the risks and issues. Development of commissioning strategies by Joint Commissioning Unit and then effectively implementing these will be crucial to medium term sustainability.

## 1.2 SUMMARY OF THE DELIVERY UNIT'S PERFORMANCE

Overall, performance has been strong for 2014/15 with only a number of relatively minor level 1 escalations. However, the current revenue budget position requires a level 3 escalation. Whilst the majority of savings have been achieved, the Delivery Unit has a significant overspend attributed to demographic pressures. A £500k saving on the cost of equipment has not been achieved.

The pressures come mostly from learning disabilities (transitions and increased life expectancy) and older people (especially through dementia nursing and residential where there are few alternatives to nursing and residential care in the community).

- Spend on the cohort of 18-24 year olds has risen by 9.6% from 2010/11 to 2013/14 (£590k). The number of service users has risen by over a quarter (26%) in the same time period. Average spend per user has come down over the time period, with the service spending 13% less per user in 2013-14 compared to 2010-11. We are now spending almost two thirds of the total on the cohort of 18-24 year olds in residential & supported living.
- For Learning Disability clients 65+, there is an increase in expenditure between 2012/13 and 2014/15 of (£230k) 9% and a corresponding increase in client numbers of nine (12%).

In addition there is significant pressure in the mental health system – there were 25 new residential admissions for working age adults with mental health conditions in year.

There have also been pressures as a result of ordinary residence decisions and clients who were self-funders whose funds have depleted and are now the responsibility of the local Authority (LA). The number of self-funders who come forward is difficult to predict and the LA has a legal duty to support client's needs. There has also been pressure from Deprivation of Liberty (DoLS) demand, but this has now been funded.

Only £800k has been allocated to demographic pressures in 2015/16 and for each of the previous three years, this has meant that there has been a growing unfunded demographic pressure met through overachievement of savings and one off funding.

The delivery unit, supported by finance, continues to investigate demographic pressures and forecasting and will identify alternative savings / stop proposals that could be used to close the budgetary gap.

## 2. DELIVERING THE CORPORATE PLAN

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

<b>CPI NO</b>	<b>Indicator Description</b> <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	<b>Period Covered</b> <i>Timeframe data has been measured</i>	<b>Previous Results</b> <i>Previous result from the most relevant period</i>	<b>Target</b> <i>Achievement level expected</i>	<b>Numerator and Denominator</b> <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	<b>Result</b> <i>Most recent result of the indicator measurement</i>	<b>Target Variance</b> <i>A calculation of how far the outturn is from the target</i>	<b>DoT</b> <i>An assessment of whether performance has improved since the previous results</i>	<b>Benchmarking</b> <i>How performance compared to other councils</i>
1001	Increase the percentage of eligible adult social care customers receiving self-directed support	Mar 15	99.7%	75%	$\frac{2,617}{2,627}$	99.3%	32.4%	Worsening	n/a
1002	Increase the percentage (and number) of eligible adult social care customers receiving direct payments	Apr 14 – Mar 14	31.1%	35%	$\frac{1,273}{4,324}$	29.4%	15.9%	Worsening	n/a
1003	Increase the number of carers who receive support services (includes information and advice)	Apr 14 – Mar 15	33.9%	30%	$\frac{1,394}{3,558}$	39.2%	30.6%	Improving	n/a
1004	Reduce the number of younger adults in residential and nursing care	Mar 15	306	300	N/A	316	5.3%	Worsening	
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	Apr 14 – Mar 15	This will be reported in Q1 2015/16						
1006	Increase the overall satisfaction of people who use adult social care	Apr 14 – Mar 15	This will be reported in Q1 2015/16						

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	services with care and support								
1007	Increase % of adult social care service users who say their services have made them feel safe and secure	Apr 14 – Mar 15	This will be reported in Q1 2015/16						
1008	Increase in community confidence in police and the local authority dealing with crime and anti-social behaviour	Mar 14	68%	78%	N/A	72%	7.7%	Improving	n/a
1009	Maintain the level of the rate of proven adult reoffending	Apr 12 - June 12	17.4%	22%	N/A	17.4%		Improving	n/a
1010	Maintain the reduction in the level of domestic burglary	Dec 13 - Nov 14	19.8%	22%	N/A	19.5%	11.4%	Improving	n/a

\*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.

## 2.2 Interventions & Escalations

CPI NO and title	Comments and Proposed Intervention violence
1002 Increase the percentage (and number) of eligible adult social care	Through reviews, a number of direct payments have been removed as outcomes have been met and no longer required support. Please note that two DP indicators are reported corporately. This indicator is a local indicator that does not meet with the revised Adult Social Care Outcomes Framework (ASCOF) definition for 2014/15, which produces a more favourable provisional outturn of <b>39.8%</b> against a target of 35%. The new definition only compares DP recipients against service users and carers that receive long-term on-going support and excludes the short-term and one-off services previously included.

CPI NO and title	Comments and Proposed Intervention violence
customers receiving direct payments	<p>The local indicator will be discontinued for 2015/16. The provisional 2014/15 outturn for redefined indicator is 39.8% against a target of 35%.</p> <p><i>Level 1 intervention</i></p>
<p>1004 Reduce the number of younger adults in residential and nursing care</p>	<p>The increase in the number of young Learning Disabled people entering residential care is as a result of new young people transitioning from Children’s Services to Adult Services. The increase in Mental Health has been as a result of an increase in people with complex needs and risks. The target of 300 was reached in October 2014 and reported as a key achievement for Qtr. 2 reporting.</p> <p>Admissions for 2014/15 are as follows:</p> <p><b>Residential</b> Physical Disability <b>3</b> / Learning Disability <b>2</b> / Mental Health <b>25</b></p> <p><b>Nursing:</b> Physical Disability <b>5</b> / Learning Disability <b>0</b> / Mental Health <b>1</b></p> <p><i>Level 1 Intervention</i></p>
<p>1008 Increase in community confidence in police and the local authority dealing with crime and anti-social behaviour</p>	<p>Significant improvement in this measure vs. previous year.</p> <p>The Residents perception survey results now (2014 onwards) includes ‘don’t know responses’ in its calculations – therefore the baseline has been re-collaborated to this methodology (Under the new method the Autumn 2013 baseline is now 67% and the Spring 2014 result 68%).</p> <p><i>Level 1 Intervention</i></p>

### 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			
14	5	0	0	1	3	3	6

#### 3.2.1 How is the Delivery Unit achieving against Commissioning Priorities

Commissioning Priority	Subjective RAG	Commentary
Implementation of the Care Act	Green	<p>The Care Act project has delivered Part 1 Implementation as follows:</p> <ul style="list-style-type: none"> <li>• <b>Prevention, Information, Advice and Advocacy:</b> From 1 April 2015 Barnet is meeting the new duty to have in place a range of 'prevention' services, facilities and resources to prevent, reduce and delay people's need for care and support. A local approach has been implemented in line with the Council's new Information, Advice and Advocacy Policy. This ensures that the provision of information and advice takes into account individual circumstances and needs. It includes printed information, one to one advice (in person and over the phone) and on-line services.</li> <li>• <b>Carers:</b> From 1 April 2015, carers have new rights which mean that they may be able to get more help so that they can carry on caring and look after their own wellbeing. The services available to carers in Barnet have been reviewed and revised.</li> <li>• <b>Needs &amp; Eligibility:</b> From 1 April 2015, for the first time,</li> </ul>

Commissioning Priority	Subjective RAG	Commentary
		<p>there is a national level of care and support needs that the Council must consider when we assess what help we can give to adults in need and carers. The Council has agreed new assessment and eligibility policies and the new criteria will be applied when people are assessed or reviewed.</p> <ul style="list-style-type: none"> <li> <p><b>Self-funders:</b> From 1 April 2015, people with eligible care needs and savings above the upper savings and capital limit can ask the Council to arrange their care for them. This will help people who are unable to or do not want to identify and contact providers to arrange their own care and support. Processes are in place to enable people to use this new service.</p> </li> <li> <p><b>Deferred Payment Agreements:</b> From 1 April 2015, Barnet's new Deferred Payment Scheme will be available. This follows national guidance set by the Department of Health and means that people should not have to sell their homes to pay for care, as they have sometimes had to do in the past. A deferred payment agreement is an arrangement with the council that will enable some people to use the value of their homes to pay for their care. If someone is eligible, we will help to pay the care home bills on their behalf. Payments can be delayed until the person chooses to sell your home, or until after their death.</p> </li> <li> <p><b>Provider Failure:</b> The Council's new Provider Failure Policy describes how Barnet will meet the new temporary duty to meet the care and support needs of people should a registered care provider be unable to carry on because of a business failure. Key staff have been trained and a robust continuity plan is being tested.</p> </li> <li> <p><b>Meeting Demand:</b> To meet the likely increase in demand the</p> </li> </ul>

Commissioning Priority	Subjective RAG	Commentary
		<p>Delivery Unit and Social Care Direct have worked together to broaden the range of functions provided at the first point of contact in order to handle a larger numbers of enquires and resolve them straight away. The changes to enable this will take effect from 1 April 2015.</p>
<p>Delivery of health and social care integration including through the Better Care Fund</p>	<p>Green</p>	<p>The Better Care Fund plan, as considered by the Health and Wellbeing Board in September 2014 and full council on the 4th November 2014, was given final approval, with no conditions, by NHS England on the 6<sup>th</sup> February. This was achieved following the provision of further assurance around the target to reduce emergency admissions and completion of additional work in collaboration with a nominated Better Care Fund advisor.</p> <p>Additional elements of the integrated care model are in operation and this now includes a pilot of an integrated locality team alongside MDT case management, single point of access, risk stratification, and care navigation team. We also have in place community based integrated stroke and dementia support.</p>
<p>Ensuring the sufficiency and quality of the social care delivery workforce</p>	<p>Green</p>	<p>Training programme for the Care Act has been rolled out across the Delivery Unit for all staff carrying out assessments. Recruitment Drive has resulted in the department employing another of professional on short time assignments. This will meet the planned Care Act demand.</p>
	<p>Green</p>	<p>The implementation of the new 'front door' model is progressing well. The HR process following consultation has meant a need for a staged implementation which will see a stepped roll-out in April and May. The revised approach will improve the arrangements between Social Care Direct and the operational services to manage demand more effectively at the first point of contact. This initiative is aligned to the Care Act project for Prevention, Information &amp; Advice and will ensure that better information and advice is available to customers, and that staff are able to signpost them to this.</p>



Commissioning Priority	Subjective RAG	Commentary
		<p>New processes and pathways have been developed to ensure that where relevant people asking for services are offered enablement services. The development of new scripts, and are working with the Investing in IT project to ensure that maximum benefit can be derived from both initiatives. Next steps will be to identify those LBB staff that will work alongside SCD, and train all staff in the new model and on the new IT to ensure they are ready for April go-live.</p> <p>The delivery unit has continued to participate in the development of new models for 0-25 disabilities and mental health services, alongside the review of the s75 agreement for learning disabilities.</p>
<p>Ensure that there is clarity of responsibilities across the Safer Communities Partnership and Safeguarding Boards for a co-ordinated approach to address violence against women and girls.</p>	<p>Green</p>	<p>The following actions have been agreed:</p> <ul style="list-style-type: none"> <li>• The Chair of the Safeguarding Boards sits on the DV &amp; VAWG Delivery Group.</li> <li>• Safer Communities Partnership Board will present an annual report to both Adult &amp; Children’s Safeguarding Board</li> <li>• The DV &amp; VAWG agenda has moved over to the Community Safety Team.</li> </ul>

### 3.2.2 Commissioning Priority Indicators (CPs): Escalated CPs only

CP NO	Indicator Description <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	Period Covered <i>Timeframe data has been measured</i>	Previous Results <i>Previous result from the most relevant period</i>	Target <i>Achievement level expected</i>	Numerator and Denominator <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	Result <i>Most recent result of the indicator measurement</i>	Target Variance <i>A calculation of how far the outturn is from the target</i>	DoT <i>An assessment of whether performance has improved since the previous results</i>	Benchmarking <i>How performance compared to other councils</i>
1111	DV sanction detection rates	Rolling 12 months to Mar 15	51%	55%	N/A	48%	5.9%	Worsening	London average over same period 46%

CP NO	Comments and Proposed Intervention
1111 DV sanction detection rates	<p>There has been a slight reduction in the DV Sanction Detection rate in the most recent 12 months compared to a year ago. However overall performance in this area remains positive as:</p> <ul style="list-style-type: none"> <li>Barnet's rate in the last 12 months is greater than the London average</li> <li>It is believed the rigorous implementation by Barnet Police of the 'Total Evidence Programme' (which aims to ensure that the police capture the best possible evidence at the scenes of DV crimes) is contributing to Barnet's performance in this area.</li> </ul>

### 3.3.1 How is the Delivery Unit achieving against its Key Performance Indicators (KPIs): Escalated KPIs only

<b>KPI NO</b>	<b>Indicator Description</b> <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	<b>Period Covered</b> <i>Timeframe data has been measured</i>	<b>Previous Results</b> <i>Previous result from the most relevant period</i>	<b>Target Achievement</b> <i>level expected</i>	<b>Numerator and Denominator</b> <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	<b>Result</b> <i>Most recent result of the indicator measurement</i>	<b>Target Variance</b> <i>A calculation of how far the outturn is from the target</i>	<b>DoT</b> <i>An assessment of whether performance has improved since the previous results</i>	<b>Benchmarking</b> <i>How performance compared to other councils</i>
TC015	Reduction in violence against the person crimes – 2010/11 Baseline of 12.935 per 1,000 population	Mar 14 - Feb 15	12.90	8.92	n/a	13.50	51.35%	Worsening	London average for same time (Mar 14 - Feb 15): 18.9  Most Similar Group (MSG) average: 16.3

### 3.3.2 Interventions & Escalations

<b>KPI NO and title</b>	<b>Comments and Proposed Intervention</b>
TC015: Reduction in violence against the person crimes – 2010/11 Baseline of 12.935 per 1,000 population	<ul style="list-style-type: none"> <li>• There has been a London wide increase in the levels of reported Violence with Injury over the last 12 months. The increases seen in Barnet have occurred at the same time as London and Barnet's Most Similar Family of Boroughs have seen increases in Violence against the Person.</li> <li>• It is believed the increase in reported offences is linked to changes in reporting and recording practices.</li> <li>• Barnet had the 6th lowest rate of Violence against the Person out of all 32 London Boroughs.</li> </ul>

## 4. RESOURCES AND VALUE FOR MONEY

### 4.1 Revenue

Adults and Communities				
Description	Budget V1	Provisional Outturn	Variation	% Variation of revised budget
	£000	£000	£000	
Births Deaths & Marriages	(160)	(12)	147	92.2%
Care Quality	1,353	1,227	(125)	-9.3%
Community Safety	1,911	1,623	(288)	-15.1%
Community Well-being	212	(135)	(348)	163.7%
Dir Adult Soc Serv & Health	187	178	(8)	-4.4%
Integrated care - LD & MH	40,845	42,711	1,866	4.6%
Integrated care - OP & DP	38,595	41,145	2,550	6.6%
Prevention & Well Being	6,471	5,175	(1,296)	-20.0%
Social Care Commissioning	936	987	52	5.5%
Social Care Management	396	319	(77)	-19.4%
<b>Total</b>	<b>90,746</b>	<b>93,218</b>	<b>2,472</b>	<b>2.7%</b>

### 4.2 Capital

	2014/15 Latest Approved Budget	Additions/ (Deletions)	2014/15 Budget (including Quarter 4)	Forecast to year-end	Variance from Approved Budget	% slippage of 2014/15 Approved Budget
	£000	£000	£000	£000	£000	%
Adults and Communities	2,570		2,570	956	(1,614)	-62.8%
<b>Adults and Communities</b>	<b>2,570</b>		<b>2,570</b>	<b>956</b>	<b>(1,614)</b>	<b>-62.8%</b>

## 5. OVERVIEW OF DELIVERY UNIT

### 5.1 Managing the business

- See section 1.2 for budget commentary
- Performance in responding to FOIs and complaints within timescales has been strong.
- The number of agency staff continues to be a concern and the workforce plan being implemented is seeking to increase recruitment through a number of different methods.

### 5.2 Change projects

Project	Outturn	Direction of Travel	Commentary
Older People Integrated Care Project (OPIC) (Health & Social Care Integration Spearhead Project 2)	Green	Improving	The Barnet Integrated Locality Team (BILT) is progressing well with increasing numbers of joint casework with health partners. Implementation review of benefits delivered is imminent.
Shared Care Record	Red	Worsening	The project is on hold pending the outcome of the CCG IT strategy.
Implementation of community safety enhancements and CCTV procurement	Green	Improving	<p>CCTV: The control room is now ready to be moved to Enfield within the next month, all CCTV cameras in the borough have been upgraded to wireless &amp; improved technology. We are now moving to commission installation of automatic number plate recognition cameras (ANPR).</p> <p>Enhancement:</p> <ul style="list-style-type: none"> <li>• An increase in offender management cohort of Integrated Offender Management has taken place, with increase from 85 individuals to 118 being supported. The target is to achieve 200 by March 2016.</li> <li>• The Restorative Justice Panel project has been reviewed and agreed by the Mayor's Office of Policing &amp; Crime (MOPAC - funders). This is being delivered by Victim Support and now incorporates targeted support to repeat victims of anti-social behaviour (ASB).</li> </ul>

### 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:

SCORE		IMPACT				
		1	2	3	4	5
		Negligible	Minor	Moderate	Major	Catastrophic
PROBABILITY	5 Almost Certain	0	1	1	3	0
	4 Likely	0	0	2	0	0
	3 Possible	0	2	10	3	0
	2 Unlikely	1	1	1	1	1
	1 Rare	0	0	0	0	0

#### Risk Commentary for Delivery Unit:

The Delivery Unit risks focus on the Social Care aspect of the service and include both strategic business risks of managing increasing numbers of clients with complex needs in a period of austerity, combined with the legal requirements imposed by the Care Act.

In summary, these increase cost pressures and increase the draw on staff resources. The mitigation of these risks are managed within the Adults and Communities Delivery Unit Transformation Programme to provide new ways of working and delivering services to bridge the gap between service demand and resources.

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		
	Major 4	Almost Certain 5	High 20				Moderate 3	Unlikely 2	Medium Low 6
AS0007 - Financial management – the risk of increased demand and the inability to deliver all planned savings projects leading to overspends and erosion of the Council's minimum reserve position.					Treat	Quarterly			

Risk	Current Assessment			Control Actions	Risk Status	Board Assurance (timing)	Target Assessment		
	Impact	Probability	Rating				Impact	Probability	Rating
AS0044 - Information governance - risk that the Directorate may not be appropriately safeguarding personal information or responding to queries from members of the public.	Major 4	Possible 3	Medium High 12		Transfer	Quarterly	Moderate 3	Unlikely 2	Medium Low 6
AS0083 - If Adults and Communities are unable to put in place sufficient resources to meet the Care Act demand then they may be overwhelmed with Calls and Assessment requests. This may further generate a further Safeguarding Risk for missed calls.	Major 4	Possible 3	Medium High 12		Treat	Quarterly	Major 4	Unlikely 2	Medium High 8
AS0087 - The Care Act Universal Deferred Payment (UDP) Scheme could have significant impact on the Council's cash flow with increased expenditure and reduced income collection from 2015/16 until 2018/19. While under the Act the care costs can be re-couped the risk remains that this will not be possible (i.e. dependants remain within the property).	Major 4	Almost Certain 5	High 20		Treat	Quarterly	Negligible 1	Almost Certain 5	Medium Low 5
AS0088 - The Care Act increases the number of clients and carers who are entitled to either be assessed and / or receive a care package. This may increase the demand pressure on budgets; both to administer and	Major 4	Almost Certain 5	High 20		Treat	Quarterly	Moderate 3	Almost Certain 5	High 15

Risk	Current Assessment Impact Probability Rating			Control Actions	Risk Status	Board Assurance (timing)	Target Assessment Impact Probability Rating		
provide care.									
AS0089 - Provider failure The Care Act increases the current scope of the DU as it requires the Council to be the lead agency to make customers safe and enable the provision of care to be continued.	Moderate 3	Likely 4	Medium High 12		Treat	Quarterly	Moderate 3	Likely 4	Medium High 5
AS0090 - The Care Act empowers self-funders to request the Council purchases care on their behalf due to the greater purchasing power of the Council. If many individuals wish to buy their care in this way then it is likely care providers will increase their care costs, be unable to provide care safely or cease to trade.	Moderate 3	Likely 4	Medium High 12		Treat	Quarterly	Moderate 3	Likely 4	Medium High 5
AS0091 - Changes to the Mental Capacity Act arising from a recent Court ruling has led to an increase in the number of Dols (Deprivation of Liberty) assessments required to be undertaken by LA's.	Moderate 3	Almost Certain 5	High 20		Treat	Quarterly	Minor 2	Almost Certain 5	Medium High 10



Risk	Current Assessment Impact Probability Rating			Control Actions	Risk Status	Board Assurance (timing)	Target Assessment Impact Probability Rating		
	Major 4	Possible 3	Medium High 12				Minor 2	Unlikely 2	Medium Low 4
AS0094 - Quality of service provision cannot be guaranteed, the service is staffed by over 20% agency staff and they may leave with little notice.					Treat	Quarterly			

## 5.4. Equalities

Equalities description	Comments and Proposed Intervention
Equality Action Plan	Equalities Impact Assessments have been undertaken for : Care Act project Independent Living Fund project Market Position Statement is undergoing a refresh and the Equalities section strengthened.

## 5.5. Customer Experience

Comments and Proposed Intervention
<p>The new Integrated Social Care Direct Service went live on 1 April 2015. The new service comprised of Social Care Direct for the first point of contact, the Urgent Response Team and the Assessment, Enablement and Review Team. This new way of working, putting more of our resources at the 'front door' triage/ early intervention stage will enable us to offer the right level of support more quickly.</p> <p>The delivery unit conducted a Department of Health Adult Social Care Survey to get feedback about how our customers experience the support and services we provide or arrange. The outcome will be published in the autumn.</p>

**Appendix**

**Commissioning Priorities**

<b>CP NO</b>	<b>Indicator Description</b> <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	<b>Period Covered</b> <i>Timeframe data has been measured</i>	<b>Previous Results</b> <i>Previous result from the most relevant period</i>	<b>Target</b> <i>Achievement level expected</i>	<b>Numerator and Denominator</b> <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	<b>Result</b> <i>Most recent result of the indicator measurement</i>	<b>Target Variance</b> <i>A calculation of how far the outturn is from the target</i>	<b>DoT</b> <i>An assessment of whether performance has improved since the previous results</i>	<b>Benchmarking</b> <i>How performance compared to other councils</i>
CP012	Community based packages have support plans that are fully person-centred and reviews indicate that outcomes are achieved	Apr 14 - Mar 15	94.0%	90%	$\frac{2,886}{3,107}$	92.9%	3.2%	Worsening	No benchmarking-local indicator.
AC004	Reduction in percentage of people reporting the extent to which they are very/fairly worried about ASB in their area	Jan 14 - Dec 14	22%	26%	N/A	20%	23.1%	Improving	

KPIs

<b>KPI NO</b>	<b>Indicator Description</b> <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	<b>Period Covered</b> <i>Timeframe data has been measured</i>	<b>Previous Results</b> <i>Previous result from the most relevant period</i>	<b>Target Achievement</b> <i>level expected</i>	<b>Numerator and Denominator</b> <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	<b>Result</b> <i>Most recent result of the indicator measurement</i>	<b>Target Variance</b> <i>A calculation of how far the outturn is from the target</i>	<b>DoT</b> <i>An assessment of whether performance has improved since the previous results</i>	<b>Benchmarking</b> <i>How performance compared to other councils</i>
1106	Exit enablement without any home care services	Apr 14 - Mar 15	68.7%	52%	$\frac{897}{1,281}$	70%	34.7%	Improving	
1110	Reduction in per cent of repeat incidents of DV	Apr 14 - Mar 15	5.5%	8.9%	$\frac{20}{306}$	6.5%	n/a	Worsening	
AC001	Increase the proportion of service users who say that they have control over their lives	Not due to report this quarter							
AC003	Increase the percentage of service users who are happy with the way that their care workers treat them								
RN023	Satisfied customers (registrars and nationality services)	Jan – Mar 15	98%	95%	N/A	99%	4.2%	Same	
VA025-27	Outer London average cost of services	Not due to report this quarter							

<b>KPI NO</b>	<b>Indicator Description</b> <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	<b>Period Covered</b> <i>Timeframe data has been measured</i>	<b>Previous Results</b> <i>Previous result from the most relevant period</i>	<b>Target</b> <i>Achievement level expected</i>	<b>Numerator and Denominator</b> <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	<b>Result</b> <i>Most recent result of the indicator measurement</i>	<b>Target Variance</b> <i>A calculation of how far the outturn is from the target</i>	<b>DoT</b> <i>An assessment of whether performance has improved since the previous results</i>	<b>Benchmarking</b> <i>How performance compared to other councils</i>
EQO 31	Hate crimes reported monitored by protected characteristics	Not due to report this quarter							