

Adult Social Care and Health – Q2 2011/12 Performance Overview

1. Overview

1.1 Summary rating for this service

Revenue budget actual variance £000 ^[1]	Capital actual variance £000	Corporate Plan performance rating	HR rating	Key project rating
0	61	2.5	-5	1

1.2 Top achievements, issues and actions

Top 3 achievements	Top 3 issues	Top 3 actions needed
<ul style="list-style-type: none"> My Home Life – as part of a national initiative promoting quality of life for people in care homes, ASCH is supporting local providers help deliver improved outcomes for customers through changes in culture and practice. Award of 4-year Home & Community Support contracts w.e.f. 01.11.2011, consolidating the number of contracts from 11 to 3. Successful Serious Case Review learning event held which will help deliver better care and support for clients by professionals and providers of care. 	<ul style="list-style-type: none"> Achieving the overall target of 4,250 clients and carers receiving Self Directed Support by promotion of good assessment and review practice. Developing and achieving robust savings proposals for rolling 3-year planning cycle commencing 2012/13. Non compliance on recording HR data on SAP (sickness, absence recording, performance reviews). 	<ul style="list-style-type: none"> An action plan was put in place during Q1 to improve performance. This included setting individual targets for managers, which is monitored on a weekly basis. Continue with Financial Sustainability Group forum which helps to provide a framework for challenge and support on savings proposals. Through the corporate appraisal process, incentivise managers to comply with regular recording of HR data.

1.3 Key correlations & interdependencies

Delivering successful outcomes for service users within the context of reduced budgets is challenging and puts a premium on innovation and corporate working. Recent examples of this include:

- Transforming Passenger Services – ASCH is participating in the West London Alliance (WLA) Transport Efficiency Programme to deliver Passenger Transport Services in a shared services environment with 4 other London boroughs. The passenger services include: Special Education Needs, Adult Social Care, and Looked after Children; Fleet Services; and Concessionary Travel (Blue Badge, Taxicard and Freedom Passes).
- Health Partnerships – continued collaborative working with Health is helping to deliver whole-systems improvements in performance on enablement and hospital readmissions (refer to CPI 6013/6 in section 4).

2. Budget

2.1 Revenue

Adult Social Care and Health

Description	Variations				Comments	% Variation of Revised Budget
	Original Budget	Budget V1	Forecast 2011/12	Variation		
	£000	£000	£000	£000		
Care Services - Learning Disabilities	34,596	34,203	34,557	354	Work is on going with providers to reduce spend and continuing to move people from Residential Care to Supported Living and other Community support to realise savings in year. To date £1.6m savings have been achieved in this financial year.	1.0%
Care Services - Mental Health	6,766	6,840	6,898	58	Work is ongoing to move clients on from Residential Care to Supported Living and other Community support. Pressures caused from increase in Autism diagnosis and continuing health care placements.	0.8%
Care Services - Older Adults - Physical Disabilities	43,513	45,294	44,867	(427)	Continued effort to demand manage continuing care cases and no allowance made for increase in demand from seasonal variations.	-0.9%
Transformation & Resources	2,984	3,493	3,549	56	Ongoing work to manage implemented savings.	1.6%
Strategic Commissioning & Supply Management	11,069	10,651	10,610	(41)	Delays in filling staff vacancies.	-0.4%
Government Grant Income	(61)	(61)	(61)	-		0.0%
Total	98,867	100,420	100,420	-		0.0%

2.2 Capital

	2011/12 Latest Approved Budget	Additions/ Deletions recommended to November CRC	Slippage / Accelerated Spend recommended to November CRC	2011/12 Budget (including November CRC)	Variance from Approved Budget	% slippage of 2011/12 Approved Budget
	£000	£000	£000	£000	£000	%
Mental Health and Adults Personal Social Services Allocations	1,137	742	(681)	1,198	61	-60%
Adult Social Services	1,137	742	(681)	1,198	61	-60%

Comment added by ASCH: the capital items relate to Social Care Reform Capital Grant and Swift Replacement project. The £61k variance is not an overspend per se but reflects a request (from ASCH) to change the profile/year in which money is spent.

3. Key projects

There are no projects reporting as red for Adults Social Care in quarter 2 1011/12.

1. Performance

CPI NO	Indicator description	Period Covered	Numerator and Denominator	Previous relevant outturn	Target	Outturn	Target Variance	DoT Variance	Benchmarking
6015	Number of social care clients receiving Self Directed Support	Apr 11-Sep 11	N/A	2038	2828	2441	13.7%	▲ 19.8%	37.7% (London Average) 43.97% for Barnet
6013	25% reduction in avoidable re-admissions within 28 days of discharge	Apr 11-Aug 11	N/A	2297	1110	898	19.1%	▲ 60.9%	No benchmarking available
6016	% of people aged 65+ who are still at home 91 days after discharge into rehabilitation services	Apr 11-May 11	285/316	84.0%	87.0%	90.2%	3.7%	▲ 7.0%	86.1% (London average for 2010/11)
6018	Reduction of 5% of budget spent on residential and nursing care	Apr 11-Sep 11	N/A	£39.5m	£39.4m	£39.8m	1%	▼ 0.7%	Local measure
6009	Reduction in the total number of people in residential and nursing care	Apr 11-Sep 11	N/A	1205	1184.0	1191.0	0.6%	▲ 1.2%	Local measure
6017	% of Adult Protection Plans to be developed for those who need them with people identified as responsible for delivery	Apr 11-Sep 11	67/67	100.0%	100.0%	100.0%	0.0%	↔ 0.0%	No benchmarking available

CPI NO	Indicator description	Period Covered	Numerator and Denominator	Previous relevant outturn	Target	Outturn	Target Variance	DoT Variance	Benchmarking
6010	% of Adult Protection Plans reviewed by team manager within the timescales set at the case conference	Apr 11-Sep 11	53/53	10.00%	100.0%	100.0%	0.0%	↔ 0.0%	No benchmarking available
6001	At least three Pledgebank pledges supported per year per directorate	Apr 11-Sep 11	N/A	2 out of 7	7 out of 7	3 out of 7	57.1%	▲ 50%	Local measure
6011	No of people who have received a Right to Control support plan	Apr 11-Sep 11	N/A	13	20	19	5%	▲ 46.2%	No benchmarking available
6012	The % (proportion) of service users who feel they have choice and control influencing decisions that affect them	This is a new indicator reporting in quarter 4 2011/12							
6014	Reducing the mortality rate from all cardiovascular disease (including heart disease and stroke) per 100 000 people aged under 75 years	Jan 11-Aug 11	N/A	39.2	37	42.1	13.8%	▼ 7.4%	70.1 (London average)
6002	Reducing the mortality rate from cancer of all types per 100 000 people aged under 75 years	Jan 11-Aug 11	N/A	87.6	85	94.1	10.7%	▼ 7.4%	107.6 (London average)

CPI NO	Indicator description	Period Covered	Numerator and Denominator	Previous relevant outturn	Target	Outturn	Target Variance	DoT Variance	Benchmarking
6003	Number of smoking quitters in people aged 18 years and over (NHS four-week smoking quitter target)	Apr 11-Jun 11	N/A	556	1034	1119	8.2%	▲ 101.3%	No benchmarking data supplied
6004	Number of carers' assessments/re-assessments completed	Apr 11-Sep 11	N/A	964	800	1524	90.5%	▲ 58.1%	1524 equates to 24.3% of community based service users who have received a carer assessment. London average is 8.8% for Q1 2011/12.
6005	Proportion of carers who feel engaged and supported in their caring role	This is a new indicator reporting in quarter 4 2011/12							

*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.

Comments added by ASC&H, cross-referenced to the relevant CPI No:

- CPI 6015 – The 2,441 outturn on clients receiving SDS at the end of September equates to 26.5 service users per week. 75 per week needed to achieve the overall year end target of 4,250. Progress is being monitored by Leadership Team and Activity is expected to pick up (and overall target to be met) during the year. The Q2 London average benchmarking figure of 37.7% compares with 43.97% for Barnet. Refreshed Q2 data results in the figure increasing to 2487. As at 21/10/2011 (latest date) the figure is 2569 clients receiving SDS.
- CPI 6018 – ASCH expect to achieve the 5% reduction in budget spent on residential and nursing care by 31.03.2012.
- CPI 6009 – ASCH expect to achieve the overall target reduction of 30 clients in residential and nursing care by 31.03.2012.
- CPI 6001 – Outturn of 3 out of 7 pledges supported per year/Directorate is for the period April to September 2011 across the Council. Breakdown by Directorate is E&O = 2 and Children's Services = 1.
- CPI 6014/6002 – The data is not yet cleaned (available at year-end). Whilst figures may go up and down on a quarterly or even yearly basis, it is the trend that is crucial. The trend line in both cardiovascular disease and in cancer in Barnet has been downwards for several years.

2. Human Resources

Comments added by ASCH, cross-referenced to the relevant indicator:

- (A) ASC&H is working with its HR Business Partner to drill down to the staff affected and produce a targeted response with local managers to improve rates.
- (B) ASC&H is working with its HR Business Partner to drill down to the staff affected and produce a targeted response with local managers to improve rates.
- (C) Analysis by ASCH reveals that there are 63 cases with mitigating reasons which if discounted would improve the Q2 performance from 75.2% to 87.8%. Examples of reasons include: staff on long term sick; new starter; As & When staff; staff holding 2 similar posts – a common shift pattern in LD; SAP “locked” because of changes in organisational structure and previously raised with HR Connect, which prevents managers inputting on SAP. In addition there are a significant number of Mental Health staff with no SAP access but counted as eligible in compiling the HR statistics. As part of finalising the s75 Mental Health agreement, consideration is being given to include provision for Trust staff complying with Council HR recording procedures using SAP.

Performance Indicator	Period covered	Target	Amber criteria	Q2 Actual (No.)	Q2 Actual % of total	Q2 (numerator/denominator)	Target Variance	Q1 DoT	Council average	Benchmarking
Attendance										
(A) Average number of absence days per employee (Rolling year)	Oct 10 - Sept 11	6	6 - 6.5	9.4	N/A	3995/425	-56.5%	▼ 17.4%	8.1	9 days (CIPFA, All Members & other Unitary Authorities 2010)
(B) Average number of absence days per employee this quarter (target is seasonally adjusted)	July 11 - Sept 11	1.44	1.3 - 1.5	2.8	N/A	1145/417	-91.0%	▼ 28.5%	1.8	2.25 days (CIPFA, All Members & other Unitary Authorities 2010)
% managers submitting a monthly absence return	July 11 - Sept 11	100%	>90%	34	60.7%	34/56	39.3%	▼ 3.9%	55.9%	N/A : measure applicable to LBB only
Performance Review										

(C) % objectives set for eligible staff only	July 11 - Sept 11	100%	>90%	330	75.2%	330/439	24.8%	▲ 6.6%	84.1%	N/A : measure applicable to LBB only
% mid year performance reviews undertaken for eligible staff only (to be reported in Q3)	July 11 - Sept 11	100%	>90%	Available for Quarter 3 2011/2012						84% (CIPFA, All Members & other Unitary Authorities 2010)
Cost										
Variance of total paybill to budget	July 11 - Sept 11	4,778,456	+/-5%	4,533,929	-5.1%	4533929/4778456	-5.1%	▼ 326.4%	-4.7%	N/A : measure applicable to LBB only
Management Indicator	Period covered			Q2 Actual (No.)	Q2 Actual % of total	Q2 (numerator/ denominator)	DoT Q1 outturn %		Council average	Benchmarking
Diversity data										
Percentage of top 5% earners that are female	As at 30 September 2011			16	64.0%	16/25	▲ 28%		50.9%	Women in leadership posts 37% (CIPFA, All Members & other Unitary Authorities 2010)
Number of BME employees as % of total employees	As at 30 September 2011			177	39.2%	177/452	▼ 5.6%		32.8%	Black and Minority Ethnic local population 33.1% (State of the Borough June 2011)
Number of declared disabled staff as % of total employees	As at 30 September 2011			14	3.0%	14/472	▲ 2.3%		1.7%	5.1% (CIPFA, All Members & other Unitary Authorities 2010)
Employee Relations										
High Risk - Employee Relations cases as % of total cases	As at 30 September 2011			0	0.0%	0/11	▼ 100%		14.4%	N/A : measure applicable to LBB only

	ESTABLISHMENT				OCCUPANCY				Variance	OTHER	
	Permanent	Fixed Term	Vacant	TOTAL	Permanent	Fixed Term	Agency / Interim	TOTAL		Consultants	Casual
Adult Social Care and Health	384.08	19.9	35.86	439.84	396.42	21.61	53.00	471.02	31.18	2	87.00

3. Risk Overview and Top four risks

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	0	0	0	0
	4 Likely	0	0	0	1	0
	3 Possible	0	0	7	4	0
	2 Unlikely	0	0	0	5	0
	1 Rare	0	0	0	0	0

Comments added by ASCH cross-referenced to the Risks:

Note: unless stated otherwise, risks are not recommended for escalation to monitoring at a corporate level.

AS0015 – Perennial risk which is monitored on an ongoing basis by the Associate Director – Joint Commissioning (and monthly by SMT). No issues currently flagged.

AS0044 – Information Governance Council set up in Service within corporate IG framework. Perennial risk which is monitored by Head of Transformation. Would expect risk profile to reduce and remain at Possible/Minor (6). Risk reviewed monthly at Leadership Team. No issues currently flagged.

AS0045 – Medium term risk monitored by Head of Transformation. Risk reviewed monthly at Financial Sustainability Group, chaired by Deputy Director. No issues currently flagged.

ASB0035 – This is a volatile medium/long-term risk area that requires close monitoring by the Head of Strategic Commissioning & Supply Management. Additional corporate funding for high risk placements has helped mitigate the risk which is reviewed by SMT monthly. No issues currently flagged.

ASB0036 – Medium term risk involving a relatively large number of contracts in ASCH and which are being reviewed and regularised in priority order using specialist interim resource. Monitoring by the Head of Strategic Commissioning & Supply Management provided to s151 Officer plus the Leadership Team via the Monthly Directorate Summary. No issues currently flagged.

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

Risk	Current Assessment			Control Actions	Risk Status	Target Date (Priority)	Target Assessment		
	Impact	Probability	Rating				Impact	Probability	Rating
AS0015 – Financial Increases in the number of transfers from health - as they reduce continuing care payments by reviewing them and transferring to social care. 108 packages and the potential to transfer £1.1m	Major 4	Likely 4	High 16	Discussions with NHS Barnet are taking place to ensure there is a consistent approach In Progress (on-going)	Treat	31/03/2011 (normal)	Major 4	Unlikely 2	Medium High 8
AS0044 – Reputational Failure to have robust data security built into our systems and ways of working.	Major 4	Possible 3	Medium High 12	Review data security procedures in systems including DOLS process. Under Review New protocols to be created in line with IS strategy. Under Review Set up ASCH Information Governance Council. In Progress (on-going)	Treat	21/03/2011 (normal) 29/04/2011 (normal) 15/07/2011 (normal)	Major 4	Possible 3	Medium High 12
AS0045 – Financial That Adult Social Care and Health's work on social capital will not deliver expected savings.	Major 4	Possible 3	Medium High 12	Work with Social Capital project board to deliver action plan and monitor savings. In progress (on-going)	Treat	30/03/2012 (normal)	Major 4	Unlikely 2	Medium High 8
ASB0035 - Financial Managing the market: Risk of Provider service closure as a result of 3-years of 0% inflationary uplift on fees paid by ASCH combined with increases in sector running costs.	Major 4	Possible 3	Medium High 12	Financial assessment status report of all OP care home providers plus analysis of unit costs to inform future procurement. Corporate bid for inflationary pressures fund to secure prices for high risk placements. Secure joint approach with NHS Barnet to ensure placements are only with providers who meet cost and quality thresholds - In progress (on-going).	Treat	30/03/2012	Major 4	Unlikely 2	Medium High 8

Risk	Current Assessment			Control Actions	Risk Status	Target Date (Priority)	Target Assessment		
	Impact	Probability	Rating				Impact	Probability	Rating
ASB0036 - Financial Contract management: Risk that procurement does not comply with corporate procurement procedures.	Major 4	Possible 3	Medium High 12	Implement corporate procurement framework within ASCH. Additional capacity and expertise brought in for limited timescale to assist with implementation - In progress (on-going).	Treat	Immediate	Major 4	Unlikely 2	Medium High 8

4. Corporate Plan Improvement Initiatives (CPIIs)

There are no CPIIs for Adult Social Care and Health in 2011/12

Version Control:

- V1 – 26/10/11, original final created by R. D'Costa and forwarded to Corporate Performance Team, 26/10/11
- V1.1 – 3/11/11, revised comments by R.D'Costa added to Section 2.2 (Capital); HR (page 7, footnote c); and Risk overview (section 3, page 9).