



Annex R Adult Social Care

BU	Key Business Measure (KBM)	Aim-is Higher or Lower Better	Q3 Actual	Year End Forecast	2017-18 Target	Year End Forecast RAG	Comments	Actions to be taken
SCS & SSC	No of permanent admissions of older people (aged 65 and over) to residential and nursing care homes	Lower	421	629	528	Red	Actual as at 30 November 2017. Year end forecast based on average admissions per month.	Pressure within residential and nursing care continues. No further "alternatives" to 24 hour care are available following the last Extra Care Housing (ECH) scheme in North Warwickshire being filled this year. Voids within ECH remain low and no new units planned for 2018 for Older People. Teams can continue to maximise voids and increase the use of block contract beds. There are plans to ensure ECH schemes have night support on site to ensure moves from ECH into residential care are minimal. Pressure of admissions come from Hospital discharges and Continuing healthcare exit's, as well as community teams. Recent increases in residential admissions are also in direct relation to the reduction of Older People waiting lists and more responsive times in assessment completion.
SCS & SSC	No. of permanent admissions of people to residential and nursing care homes (aged 18-64)	Lower	37	53	33	Red	Actual as at 30 November 2017. Year end forecast based on average admissions per month. Transfers of eligibility and funding responsibility from Continuing healthcare (CHC) to social care continues to remain a risk particularly for people with a Physical Disability	There are a number of specialised accommodation with care units opening in 2017/18 for people under 55 and including people out of county which will offer an alternative solution to people than residential care. Application of Continuing healthcare (CHC) criteria and challenging decisions will continue to be required to ensure numbers of people in residential care do not increase.
	No. of admissions to long term community care (including both residential and community settings) (all ages 18+).	Lower	1101	1649	2000	Amber	Actual as at 30 November 2017. Year end forecast based on average admissions per month.	-
SCS & SSC	Proportion of adults receiving a direct payment ASCOF 1C Part 2A	Higher	28.10%	29	30	Amber	Actual as at 30 November 2017. All customers who are eligible for council funded support are expected to be offered a Direct Payment. This needs to be evidenced in customer recording and measured in case file audits	All customers who are eligible for council funded support will be offered a Direct Payment. Evidence of this is required in case file recording and one of the measures audited in case file audits. All new staff are required to complete mandatory e-learning on Direct payments and a refresher is being arranged via team meetings for existing staff. Operational guidance on Direct Payments is also being reviewed to streamline current guidance.

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SCS & SSC	Delayed transfers of care (delayed days) from hospital per 100,000 population (average per month) BCF.	Lower	366	353	271	Red	<p>Actual as at October 2017, this is the latest available information.</p> <p>As stated above, the target set by NHS England is that by Nov-17 there should be no more than 40 beds occupied by a delayed Warwickshire resident on an average day and that this should be maintained until Mar-19. This equates to 271 days delayed per 100k population in an average month, as such the target for this measure has been amended from 396 to 271.</p>	<p>The Delayed Transfer of Care (DToC) project has been focusing on key elements that have direct impact on the day to day customer discharges across the County.</p> <p>Driven through the implementation of a standard DToC Dashboard analysis tools and bespoke statistics, that provide accurate and weekly delay reasons allowing Route Cause Analysis to evidence the areas that are causing the most problems, leading to actions to resolve delays quickly. This has had a very positive impact with the performance improving constantly and continually each month.</p> <p>There has been very positive input and support from Senior stakeholders over this period with strong support in identifying and engaging with key personnel across both Health and Social Care for supporting the workstreams.</p> <p>The project has identified the requirements for key communications and agreed a way forward utilising existing communications structures but ensuring that all areas are represented and engaged. As the project progresses this will be strengthened to ensure that the structures provide for two way communication as the initiatives from the workstreams roll out into services.</p> <p>The next key activities are around:</p> <ul style="list-style-type: none"> - Standards and coding workshop to ensure aligned understanding and agreement to use across the County. - Consolidation of service criteria across the system to identify key issues and blockages across Intermediate Care Team (ICT), Community Emergency Response Team (CERT) and Reablement via the DToC Digit Requirements Workshop - Continued County wide roll-out across all the hospitals of the DToC Dashboard Google Sheets - Supporting DToC Dashboard Standard Operating Procedure to be developed, to support staff training and understanding. - Ongoing detailed analysis of deep dive results to be conducted at University Hospitals Coventry and Warwickshire NHS Trust (UHCW) and St.Cross to look at the constraints behind the DToC Reason Codes :- "E-Care Package in own home" and "Di – Residential Home Placement" - Further roll-out of the Deep Dive process across the Community hospitals.
SCS & SSC	% of customers not needing on-going social care 91 days after leaving reablement (all ages).	Higher	78.00%	78	75	Green	Actual as at 30 November 2017	-

SS & SSC = Social Care & Support and Strategic Commissioning



Annex R Health & Wellbeing

BU	Key Business Measure (KBM)	Aim-is Higher or Lower Better	Q3 Actual	Year End Forecast	2017-18 Target	Year End Forecast RAG	Comments	Actions to be taken
PH	% smoking at the time of delivery (Warwickshire whole)	Lower				N/A		
PH	Teenage conception rate per 1,000 population (Warwickshire)	Lower		19.6	18	Red	<p>There is time lag with data for teenage conception rate. The rate per 1,000 population for 2016 will be available in March/April 2018. The target is set as 7.5/1000 decrease over 5 years (=1.5/1000 decrease for 1 year using 2015 figure as baseline) and the YE forecast is taken as the average of the last 4 quarters worth of data available.</p> <p>Warwickshire's rate continues to be below the national teenage conception rate; the latest figure (2015) was 19.5 per 1,000 (this is what has been used for the 2016/17 actual figure) compared to 20.8 for England (statistically similar). However, there was some variation at District/Borough level: North Warwickshire 29.6 per 1,000 (n=32); Nuneaton & Bedworth 25.4 per 1,000 (n=56); Rugby 18.8 per 1,000 (36); Stratford-on-Avon 11.5 per 1,000 (n=23); and Warwick 16.2 per 1,000 (n=34).</p> <p>Rates for North Warwickshire, Rugby and Warwick increased from 2014 but decreased in Nuneaton & Bedworth and Stratford on Avon. However, the small numbers of pregnancies involved can result in these annual fluctuations and all Districts and Boroughs rates were either statistically similar, or in the case of Stratford on Avon better, than the England rate.</p>	<p>The condom distribution programme has now commenced in the North of the County to assist in the reduction of the teenage pregnancy rates, along with the 'Acting on Teenage Pregnancy' group which is looking specifically at this issue.</p> <p>The increases seen in some areas of the county will continue to be closely monitored to understand if a trend emerges.</p>
PH	% children aged 11 who are obese	Lower	17.1	17.1	17	Amber	<p>This is the 2016/17 annual rate.</p> <p>Although the level of obesity at 17.1% is very slightly above target it is considerably better than the England rate of 20.0% for children aged 11.</p>	<p>The Warwickshire Fitter Future service aims to address child obesity; referrals are made by other agencies, with results showing a positive improvement for participants through increases in: intake of fruit & vegetables, physical activity and self-esteem score.</p> <p>Increase referrals to Family Weight Management Services (Fitter Futures)</p>
PH	Alcohol related admissions per 100,000 (KBM)	Lower	594	625	625	Green	<p>The data is published annually usually at the end of the financial year, therefore the target is a modelled estimate based on the previous year's data.</p> <p>Quarterly reporting is not possible for this indicator, however, we estimate that the modelled target will be met.</p>	<p>Continued partnership work with groups/teams including Criminal Justice, Social Care, Health etc. The Public Health England update on their Fingertips tool has indicated a lower actual but prevalence is increasing. Work with Clinical Commissioning Groups (CCGs) to agree oversight of Commissioning for Quality and Innovation (CQUIN) in community health this year and acute health environments next year.</p>
PH	Hospital admissions as a result of self-harm - children and young people 10-24 per 100,000	Lower	510.7	510.7	510.7	Green	<p>This data relates to 2015/16.</p> <p>The 2016/17 data will not be released until the Child Health Profiles are updated in March 2018.</p>	
PH	% health check offers taken up (seen) by eligible population each year across all CCGs	Higher	37.4	40	40	Green	<p>This data is cumulative to Q2 for 2017/18</p>	<p>Expect to achieve YE target</p>

PH = Public Health