

WIRRAL COUNCIL
Families and Wellbeing and Public Health Performance Report as at 31st March 2014



No.	Description	Data Source	Performance 2012/13	North West 2012/13	Target/Plan 2013/14	YTD Target 2013/14	YTD Performance	Overall Status	Monthly Trend	Reporting Period	Accountable Officer (Head of Service)	Comments
PERFORMANCE												
Tackling Health Inequalities												
Domain 2: Health Improvement												
1	Alcohol-related admissions to hospital (PHOF 2.18)	Secondary Uses Service	2,486.9	NYA	2,355.2	2,355.2	2,283.5	G	↓	May 12 - Apr 13	G Rickwood	This year we have seen a decrease in the rate of alcohol-related admissions to hospital. October 2013 saw the launch of the local alcohol strategy whose implementation is being overseen by a multi-agency partnership. This is a key target for the Health and Wellbeing Board.
2	Smoking quitters (4 weeks) (PHOF 2.14)	Stop Smoking Service	2,259	NYA	3,500	3,500	1,691	R	↓	Apr - Mar	G Rickwood	The drop of 30% of 4 week quitters from the previous financial year (2012/2013) reflects regional and national levels. 4 week quit target has been renegotiated for 2014/2015. A revised monthly monitoring framework has been agreed using lessons learnt from 2013/2014.
3	Smoking status at time of delivery: rate per 100 maternities (PHOF 2.3)	Integrated Performance Measures Monitoring Return	12.0%	16.4%	11.5%	11.5%	13.7%	R	↑	Apr - Mar	G Rickwood	Clinical Commissioning Group (CCG) commissions the maternity services delivered by Wirral University Trust Hospital (WUHT). Public Health has responsibility for reporting on SATOD target. Current data is reporting an increase in women smoking at the time of delivery. WUTH have reported issues with the reporting of maternity data but have not specified what these issues are. It has been made clear to WUTH that further detail is required in order to identify the challenges are in the system. Public Health are working with the CCG to strengthen the effectiveness of the commissioning partnership. As part of this offer, Public Health will be working with WUTH to develop a programme of support that will address specialist smoking cessation training for midwives and also service audit. This will be implemented during
4	Under 18 conceptions: rate per 1,000 population aged 15-17(PHOF 2.4)	Office for National Statistics (ONS)	34.6 (2011 national)	32.8 (2011)	32.9	32.9	33.5	G	↑	Jan - Dec 2012	J Graham	Current data is showing a small decrease in the under 18 conception rate per 1,000 population compared to the previous quarter (Jul to Sep 2012, 35.6). This is also a decrease from the same point in 2011 (34.9). The Merseyside cluster, North West and England all experienced a reduction in rate for the same reporting period. The numbers of young women who become pregnant are relatively small and therefore a slight increase or decrease in numbers produces large fluctuations in the trend data.
5	Excess weight in 4-5 year olds: reception year classified as overweight or obese (PHOF 2.6i)	NCMP	22.3%	22.9%	24.7%	24.7%	22.3%	G	↓	2012-13	J Graham	Data for the school year 2012/13 is reporting a decrease in the number of children recorded as overweight and obese, the numbers are at the lowest recorded since 2006/07. The number of children weighed and measured in Wirral continues to remain high at 97%.
6	Excess weight in 10-11 year olds: year 6 classified as overweight or obese (PHOF 2.6ii)	NCMP	33.3%	33.4%	35.6%	35.6%	33.3%	G	↓	2012-13	J Graham	
7	Proportion of opiate drug users that left drug treatment successfully who do not re-present to treatment within 6 months (PHOF 2.15i)	NDTMS	9.11%	NYA	10.0%	10.0%	7.76%	R	↓	Oct 12 - Sep 13	G Rickwood	This target is underperforming, a remedial action plan is in place with quarterly milestones with Cheshire and Wirral Partnership NHS Foundation Trust as the main provider of drug treatment services. This target is robustly monitored at bi-monthly contract monitoring meetings with the provider. Performance tolerance ranges are being reviewed for the next financial year based on local performance against a cluster of 33 similar councils. Contractual penalties have been imposed because of persistent performance below target. This service will be recommissioned in 2014-15. This is a key outcome for the new service and will be closely monitored.
8	Proportion of non-opiate drug users that left treatment successfully who do not re-present to treatment within 6 months (PHOF 2.15ii)	NDTMS	39.28%	NYA	53.0%	53.0%	52.37%	A	↑	Oct 12 - Sep 13	G Rickwood	Current performance has improved over the last three months, although below target it is above the national target. Close monitoring of performance will continue as this target is subject to fluctuation. This service will be recommissioned in 2014-15. This is a key outcome for the new service.

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9	Take up of the NHS Health Check programme by those eligible - Health check offered (PHOF 2.22i)	Integrated Performance Measures Monitoring Return	25.5%	18.5%	20% (Q2-Q4)	20%	17.7%	A	↓	Jun 13 - Mar 14	J Harvey	The NHS Health Checks programme offers those between 40-74 years an assessment of their risk for vascular disease. Considering there was a 'pause' in the programme in Q1 - to enable national changes in programme to be adopted into new contracts and for a hundred healthcare professionals to be trained - this level of invites is very good. An updated clinical template has also been sent to practices to improve recording of health checks activity. A new training programme delivered to healthcare professionals and a opportunity for GP practices to give a greater focus to this programme for 2014-15.
10	Take up of the NHS Health Check programme by those eligible - Health check take up (PHOF 2.22ii)	Integrated Performance Measures Monitoring Return	57.80%	51.0%	50% (Q2-Q4)	50.0%	53.1%	G	↑	Jun 13 - Mar 14	J Harvey	
Domain 3: Health protection												
11	Crude rate of chlamydia diagnoses per 100,000 young adults aged 15-24 years	Health Protection Agency (HPA)	2,505 per 100,000 (2011)	2378.4 (2011)	2,505 per 100,000	2,505	2,122	A	↓	Apr 13 - Mar 14	J Graham	A true picture of performance for chlamydia screening and diagnosis will be available in June 2014 when Public Health England publish a revised and updated set of chlamydia testing and diagnosis tables for the annual year (January -December 2013).The delay is due to a reconfiguration of laboratory reporting systems which affected some local screening programmes, including Wirral. We anticipate that the current estimate of an amber rating will be maintained and that remedial work to improve the programme will result in a green rating for the second year of this contract. Performance meetings with the local provider is maintaining a focus on the achievement of this target.
Domain 4: Healthcare, public health and preventing premature mortality												
12	Under 75 mortality rate from all cardiovascular diseases (including heart disease and stroke) (PHOF 4.4)	Office for National Statistics (ONS)	68.7 (2009-2011)	74.19 (2009-2011)	64.0	64.0	68.5	G	↓	2010 - 2012	J Webster	Cardiovascular disease is one of the major causes of premature mortality (deaths in under 75s) in England. We are ranked 113 out of 150 local authorities for the level of premature deaths. We were ranked 14th in our peer group of 15. We have seen a reduction in premature death rates from heart disease and stroke, interventions which have led to this reduction include – stop smoking services, identification and management of high blood pressure, prescribing of aspirin and statins to those people with established heart disease. Newly published data by Public Health England now reports this key performance indicator as 87.9 per 100,000 population, due to changes in the methodology used. We will report against this new figure in 2014-15. Preliminary investigation does not indicate a significant decline in performance.

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DEPARTMENT OF CHILDRENS SERVICES												
Children looked after												
13	Rate of Children Looked After (per 10,000 population 0 – 17)	SSDA 903 Return	100.1	79.0	95.7	95.7	100.0	A	↓+	Mar	E Taylor	Key performance areas are being targeted to begin to reduce the LAC population. Current focus is on discharging care orders in favour of SGO's.
14	Percentage of LAC leaving care who are adopted		8.9	16.0	11.4	11.4	26.7	G	↑	Feb	E Taylor	This performance is skewed as there have been a higher than expected number of adoptions during the first two months of the year.
15	Percentage of Adoptions within timescale		64.7	65.3 (2011/12)	76.0	76.0	75.0	G	↓	Mar	E Taylor	There are 36 adoptions that have taken place. Of which 27 children have been adopted within timescale.
16	Rate of Children in Need (per 10,000 population 0 – 17)	Children in Need Census	415.5	343.1	396.8	396.8	401.6	G	↓+	Mar	E Taylor	Frontline teams have a plan to review all CIN cases. Working alongside colleagues within Targeted Services , cases will be identified which can either be closed or stepped down to TAF (Team Around the Family) over the next 12 weeks.
17	Preventative Services – Qualitative Measure (Placeholder)	A qualitative outcome metric to evaluate the impact of the new designed Targetted Services on the experience of families has been developed. It will quantify the improvements reported by the families involved in a multiagency CAF process from the first a									D Gornik	A measure has been identified linked to the multiagency distance travelled tool. A data recording mechanism is being prepared for baselining of this information.
Strategic relationship with schools												
18	Gap in attainment at KS2 - (FMS/NonFSM)	DfE	18.0	Changes to DfE reporting mean that the 2012 and 2013 data are not comparable. For 2012 the measure included English and maths, from 2013 it includes reading, writing and			20.9	G		2013	D Gornik	No targets have been set for 2013/14 exams as this was no longer a statutory requirement from the DfE. However, targets for 2014 onward will be agreed. DfE changes to KS2 measure mean that the 2013 results are not comparable to previous years.
19	Gap in attainment at KS4 - (FMS/NonFSM)	DfE	30.0	-	-	-	34.8			2013	D Gornik	
20	Gap in attainment Level 2 at aged 19 - (FMS/NonFSM)	DfE	21.0	-	-	-	-	G		Annual	D Gornik	
21	Gap in attainment Level 3 at aged 19 - (FMS/NonFSM)	DfE	34.0	-	-	-	-			Annual	D Gornik	
22	Percentage of Young People NEET	DfE	7.5	7.1 (2011)	7.0	7.0	5.7	G		Mar	D Gornik	
23	LAC attainment at KS2 - English and maths	DfE	48.0	Changes to DfE reporting mean that the 2012 and 2013 data are not comparable. For 2012 the measure included English and maths, from 2013 it includes reading, writing and			42.9	G		2013	D Gornik	
24	LAC attainment at KS4 - Including English and maths	DfE	12.0	-	-	-	11.8	G		2013	D Gornik	

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DEPARTMENT OF ADULT SOCIAL SERVICES												
Enhance the quality of life for people with care and support needs												
25	Proportion of people using social care who receive self directed support (ASCOF 1Ci)	RAP	79.0%	61.5%	80.0%	80.0%	83.9%	G	↑	Mar	C Beyga	
26	Proportion of service users in receipt of a community based service	RAP	82.1%	N/A	84.0%	84.0%	83.2%	G	↓	Mar	C Beyga	
27	Proportion of adults with a learning disability in paid employment (ASCOF 1E)	ASC-CAR	8.4%	5.6%	8.0%	8.0%	7.2%	A	↓	Mar	C Beyga	Performance against this indicator is likely to deteriorate monthly due to there being a static population of individuals in employment. The denominator (L1) will increase monthly as new people with a Learning Disability receive an assessment in year. Prospectively this target will be addressed corporately through the
Delay and reduce the need for care and support												
28	Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population (ASCOF 2Ai)	ASC-CAR & Office for National Statistics (ONS)	908.8	810.2	695.0	703.0	835.9	R	↑	Mar	C Beyga	2013-14 Activity by Quarter: Quarter 1 = 160 (53 per month) Quarter 2 = 125 (42 per month) Quarter 3 = 131 (44 per month) Quarter 4 = 124 (41 per month) The average monthly number of placements equates to 45 against a target of 37.
29	Delayed transfers of care (aged 18 years and over) attributable to Adult Social Care, per 100,000 population (ASCOF 2Cii)	SitRep	2.4	2.2	2.0	2.0	1.4	G	↔	Mar	C Beyga	Between the Apr '13 & Mar '14 there have been a total of 24 delayed discharges attributable solely to DASS and 24 attributable to both DASS and the NHS. 2013-14 Activity by Quarter Quarter 1 = 13 (4 per month) Quarter 2 = 9 (3 per month) Quarter 3 = 10 (3 per month) Quarter 4 = 16 (5 per month)
30	Number of episodes of reablement or intermediate care intervention for clients aged 65 years and over, per 100,000 population	Swift	260.9	331.0	280.0	276.0	309.9	G	↓	Mar	C Beyga	During 2013-14 there have been approximately 2,000 episodes of rehabilitation / reablement recorded. 15% of activity was bed based intermediate care and 85% of activity was home based reablement.
Ensure that people have a positive experience of care and support												
31	Overall satisfaction of people who use services with their care and support (ASCOF 3A)	Adult Social Care Survey	66.7%	66.1%	70.0%	-	63.0%	R	↓	Mar	C Beyga	Overall satisfaction with services is 64%, LD services is 51% 4% of people are dissatisfied with their services, LD services is 5%
32	Proportion of people who use services and carers who find it easy to find information about support (ASCOF 3D)	Adult Social Care Survey / Carers Survey	65.4%	-	70.0%	-	75.5%	G	↑	Mar	C Beyga	
33	Proportion of carers who report that they have been included or consulted in discussions about the person they care for (ASCOF 3C)	Carers Survey	59.2%	73.6%	65.0%	-	Carers survey not completed in 2013/14	-	-	-	C Beyga	Carers survey is biennial next due for collection in 2014-15. An alternative carers survey has been developed locally and is waiting to be piloted.
34	Social care assessments completed within 28 days	RAP	84.1%	-	100%	100%	97%	G	↑	Mar	C Beyga	A total of 56 assessments have been recorded as having taken longer than 28 days to complete. NB. This measure excludes assessments completed by Occupational Therapy / Visual Impairment teams due to different business processes to other DASS teams.

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Safeguard adults whose circumstances make them vulnerable and protecting them from harm												
35	Proportion of people who use services who say that those services have made them feel safe and secure (ASCOF 4B)	Adult Social Care Survey	85.6%	77.8%	86.0%	-	71.7%	R	↓	Mar	C Beyga	Out of 480 respondents to this question a total of 132 have stated that the services they receive do not make them feel safe and secure. 88 of the 132 respondents are solely in receipt of assistive technology. In response to Q7a 27 people indicated that
36	Safeguarding: % of Safeguarding Referrals actioned within 24hrs	Swift	98.2%	-	100%	100%	98.4%	G	↔	Mar	J Evans	A total of 44 safeguarding referrals were not actioned within 24 hours out of a total of 2,713 2013-14 Activity by Quarter Quarter 1 = 13 (4 per month) Quarter 2 = 21 (7 per month) Quarter 3 = 5 (2 per month) Quarter 4 = 5 (2 per month)
37	Percentage of completed scheduled monitoring visits to residential homes	DASS Contracts Team	81.0%	-	100%	91.6%	100.0%	G	↑	Mar	J Evans	
Transform the business to be as efficient and effective as possible												
38	Projected net expenditure for 2013-14 as a percentage of the 2013-2014 net budget for Adult Social Services	Departmental Budget Projections	117%	-	100%	100%	100%	G	↔	Mar	J Evans	

Performance is improving
Lower is better
 Performance is improving
Higher is better
 Performance is deteriorating
Lower is better

Performance is deteriorating
Higher is better
 Performance sustained
in line with targets set

Performance within tolerance for target set.
 Performance target slightly missed (outside of tolerance).
 Performance not on track, action plan required.

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