

# **NEATH PORT TALBOT COUNTY BOROUGH COUNCIL**

## **Social Care Health & Housing Cabinet Board**

**14 July 2016**

### **REPORT OF THE HEAD OF COMMISSIONING AND SUPPORT SERVICES – ANGELA THOMAS**

#### **Matter for Monitoring**

**Wards Affected: ALL**

#### **Report Title**

1. Quarterly Performance Management Data 2015-16 - Quarter 4 Performance (1st April 2015 - 31st March 2016)

#### **Purpose of the Report**

2. To report quarter 4 performance management data for the period 1st April 2015 to 31st March 2016 for Chief Executive's and Finance & Corporate Services Directorates and, the performance management data for the same period for services that are within the remit of the other four main Scrutiny Committees (CYPE, SCHH, E&H and ECR). This will enable the Social Care, Health and Housing Cabinet Board and Scrutiny Members to discharge their functions in relation to performance management.

#### **Executive Summary**

3. Adult social care has seen a number of changes within the last year, which include changes in practice, reconfiguration and the development of an intake service.

The service has shown marked improvement on the predicted 250 days target for this year. Customer satisfaction surveys reveal a very high level of satisfaction, over 96% of respondents indicating that their quality

of life had improved as a result of the adaptation and 100% agreeing that they no longer need to consider moving home. The number of private rented tenancies made available by the Housing Options Service that were suitable and likely to be available for at least 6 months greatly exceeded the annual cumulative target of 50. The percentage of all potentially homeless households for whom homelessness was prevented for at least 6 months has deteriorated slightly on last year at 91%.

## **Background**

4. Failure to produce a compliant report within the timescales can lead to non-compliance with our Constitution. Also failure to have robust performance monitoring arrangements could result in poor performance going undetected.

## **Financial Impact**

5. No financial impact

## **Equality Impact Assessment**

6. This report is not subject to an Equality Impact Assessment.

## **Workforce Impacts**

7. No workforce impact.

## **Legal Impacts**

8. This Report is prepared under Section 15(3) of the Local Government (Wales) Measure 2009 and discharges the Council's duties under sections 2(1), 3(2), 8(7) and 13(1).

This progress report is prepared under:

1. The Local Government (Wales) Measure 2009 and discharges the Council's duties to "make arrangements to secure continuous improvement in the exercise of its functions".

2. The Neath Port Talbot County Borough Council Constitution requires each cabinet committee to monitor quarterly budgets and performance in securing continuous improvement of all the functions within its purview.

## **Risk Management**

9. Failure to produce this report could result in undetected poor performance throughout Adult Social Care, Health and Housing.

## **Consultation**

10. No requirement to consult.

## **Recommendations**

11. Members monitor performance contained within this report.

## **Reasons for Proposed Decision**

12. Matter for monitoring. No decision required.

## **Implementation of Decision**

13. No decision required.

## **Appendices**

14. Appendix 1 - Quarterly Performance Management Data 2015-2016 - Quarter 4 Performance (1st April 2015 - 31st March 2016) - APPENDIX 1

## **Officer Contact**

15. Angela Thomas, Head of Business Strategy and Public Protection, Neath Civic Centre 01639 684731

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## Quarterly Performance Management Data 2015-2016 – Quarter 4 Performance (1<sup>st</sup> April 2015– 31<sup>st</sup> March 2016)

### Section 1: Key points.

#### **Adults Services**

Adult social care has seen a number of changes within the last year, which include changes in practice, reconfiguration and the development of an intake service. We expect performance in all areas to improve in the forthcoming year as the new act embeds and practice and pathway changes are fully implemented.

#### **Housing - Private Sector Renewal**

The average time taken to deliver a Disabled Facilities Grant has improved from 252 to 228 days. The data indicates the quicker process can be attributed to improvements in the system and a change in the type of demand, this year the demand for extensions is down 30% compared to last year. The service has shown marked improvement on the predicted 250 days target for this year.

Customer satisfaction surveys reveal a very high level of satisfaction, over 96% of respondents indicating that their quality of life had improved as a result of the adaptation and 100% agreeing that they no longer need to consider moving home

#### **Homelessness**

At 92, the number of private rented tenancies made available by the Housing Options Service that were suitable and likely to be available for at least 6 months greatly exceeded the annual cumulative target of 50. This success was largely due to Homelessness Grant Transitional Funding (TF) made available by

the Welsh Government. The amount of TF grant allocation for 2016/17 is however significantly reduced on 2015/16 and so it should be noted that ongoing performance at this level is not guaranteed.

The percentage of all potentially homeless households for whom homelessness was prevented for at least 6 months has deteriorated slightly on last year at 91%. Although this is only a minor deterioration on 2014/15, it should be noted that the deterioration would be likely to have been significantly higher were it not for the Homelessness Grant Transitional Funding (TF) made available by the Welsh Government. The amount of TF grant allocation for 2016/17 is however significantly reduced on 2015/16 and so it should be noted that ongoing performance at this level is not guaranteed.

## Section 2: Quarterly Performance Management Data and Performance key

### 2015-2016 – Quarter 4 Performance (1<sup>st</sup> April 2015 – 31<sup>st</sup> March 2016)

**Note:** The following references are included in the table. Explanations for these are as follows:









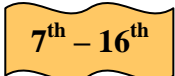

**(NSI) National Strategic Indicators (NSIs)** - are used to measure the performance of local authorities at a national level and focus on key strategic priorities. Local authorities are under a legal duty to collect & report on these measures.

**(PAM) Public Accountability Measures** - consist of a small set of “outcome focussed” indicators, selected initially from within the existing Performance Measurement Framework. They will reflect those aspects of local authority work which local authorities agree are considered to be important in terms of public accountability. For example, recycling, educational attainment, sustainable development, etc. This information is required and reported nationally, validated, and published annually.

**(SID) Service Improvement Data** - can be used by local authority services and their regulators as they plan, deliver and improve services.

**All Wales** - The data shown in this column is the figure calculated using the base data supplied by all authorities for 2014/2015 i.e. an overall performance indicator value for Wales.

**(L)** Local Performance Indicator set by the Council.

|   | <b>Performance Key</b>  |
|---|---|
|    | Maximum Performance   |
|    | Performance has improved  |
|    | Performance has been maintained   |
|    | Performance is within 5% of previous years performance  |
|    | Performance has declined by 5% or more on previous year's performance - Where performance has declined by 5% or more for the period in comparison to the previous year, an explanation is provided directly below the relevant performance indicator. |
|    | No comparable data (data not suitable for comparison /no data available for comparison)   |
|    | No All Wales data available for comparison.   |
|    | 2014/15 NPT performance in upper quartile (top six of 22 local authorities) in comparison with All Wales national published measures (NSI & PAM's).   |
|  | 2014/15 NPT performance in mid quartiles (7 <sup>th</sup> – 16 <sup>th</sup> ) in comparison with All Wales national published measures (NSI & PAM's).  |
|  | 2014/15 NPT performance in lower quartile (17 <sup>th</sup> – 22 <sup>nd</sup> ) in comparison with All Wales national published measures (NSI & PAM's).  |

#### 4. Social Care - Adults Services

| No | PI Reference      | PI Description  | NPT Actual 2013/14 | All Wales 2014/15              | NPT Quarter 4 (full year) 2014/15 | NPT Quarter 4 (full year) 2015/16 | Direction of Improvement |
|----|-------------------|---|--------------------|--------------------------------|-----------------------------------|-----------------------------------|--------------------------|
| 1  | SCA/018a (PAM)    | The percentage of carers of adult service users who were offered an assessment or review of their needs in their own right during the year. | 100%               | 88.3%<br>Joint 1 <sup>st</sup> | 100%                              | 100%                              | 😊                        |
| 2  | SCA/019 (NSI/PAM) | The percentage of adult protection referrals completed where the risk has been managed.   | 100%               | 95.6%<br>Joint 1 <sup>st</sup> | 100%                              | 100%                              | 😊                        |
| 3  | SCA/020 *(SID)    | The percentage of adult clients who are supported in the community during the year.<br>* . –No longer a PAM from 1 <sup>st</sup> April 2015 | 85.0%              | 85.2%<br>12 <sup>th</sup>      | 85.1%                             | 88.25%                            | ↑                        |
| 4  | SCA/003b (SID)    | The percentage of clients who are supported in the community during the year, in the age groups:<br>Aged 65+                                | 81.98%             |                                | 81.66%                            | 85.90%                            | ↑                        |
| 5  | SCA/003a (SID)    | The percentage of clients who are supported in the community during the year, in the age groups:<br>Aged 18-64.                             | 92.45%             |                                | 93.27%                            | 94.06%                            | ↑                        |
| 6  | SCA/018c (SID)    | The percentage of carers of adult service users who were assessed during the year who were provided with a service.                         | 66.7%              |                                | 71.4%                             | 81.1%                             | ↑                        |
| 7  | SCA/002a (NSI)    | The rate of older people (aged 65 or over):<br>Supported in the community per 1,000 population aged 65 or over at 31 March.                 | 107.8              | 67.30<br>2 <sup>nd</sup>       | 111.46                            | 109.7                             | v                        |



|   |                   |  |       |                            |       |       |   |
|---|-------------------|--|-------|----------------------------|-------|-------|---|
| 8 | SCA/002b<br>(NSI) | The rate of older people (aged 65 or over):<br>Whom the authority supports in care homes per 1,000 population aged 65 or over at 31 March. | 23.86 | 18.85.<br>19 <sup>th</sup> | 21.71 | 21.96 | V |
| 9 | SCA/018b<br>(SID) | The percentage of carers of adult service users who had an assessment in their own right during the year.                                  | 20.0% |                            | 40.5% | 39.4% | V |

#### 4. Social Care – Adult Services – continued

| No   | PI Reference     | PI Description  | NPT Actual 2013/14 | All Wales 2014/15         | NPT Quarter 4 (full year) 2014/15 | NPT Quarter 4 (full year) 2015/16 | Direction of Improvement |
|--|------------------|---|--------------------|---------------------------|-----------------------------------|-----------------------------------|--------------------------|
| 10   | SCA/001<br>(NSI) | The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over.                                     | 3.49               | 4.83<br>11 <sup>th</sup>  | 3.21                              | 4.36                              | ↓                        |
| We expect this to now fall as the intake model was introduced in October in addition to step up / down bed and as this new model begins to imbed we expect to see a fall in delays for social care reasons . Delays at present are mainly down to housing related issues.  |                  |   |                    |                           |                                   |                                   |                          |
| 11   | SCA/007<br>(NSI) | The percentage of clients with a care plan at 31st March whose care plans should have been reviewed that were reviewed during the year. | 81.7%              | 80.0%<br>12 <sup>th</sup> | 79.3%                             | 72.70%                            | ↓                        |
| A new social work model of practice was implemented in April 2015 and teams re- structured and integrated with health board staff. A large programme of cultural change has just concluded and we expect to see performance improved over the next year as changes are implemented and embed in readiness for the Social Services and Wellbeing Act. |                  |   |                    |                           |                                   |                                   |                          |

## 5. Housing – Homelessness and Housing Advice

| No  | PI Reference              | PI Description  | NPT Actual 2013/14 | All Wales 2014/15            | NPT Quarter 4 (full year) 2014/15 | NPT Quarter 4 (full year) 2015/16 | Direction of Improvement |
|---|---------------------------|---|--------------------|------------------------------|-----------------------------------|-----------------------------------|--------------------------|
|   | <b>HHA/013</b><br>(SID)   | The percentage of all potentially homeless households for whom homelessness was prevented for at least 6 months.  | 95.2%              | 65.4%<br><i>* See note 1</i> | 95.5%                             | <b>91.0%</b>                      | <b>V</b>                 |
| <p><u>Note 1</u><br/>A Wales Audit Office report (published in 2013 identified a wide variation in how local authorities interpret guidance for indicator HHA/013 relating to homelessness prevention, resulting in a wide variation of performance reported. Due to these variations, the Welsh Government Statistical Release has advised in the publication of this data that the indicator should not be compared across local authority boundaries; however comparisons can be made over time within individual local authorities. This measure is no longer a statutory indicator.</p> <p><u>Note 2</u><br/>Data excludes the period 1<sup>st</sup> - 26<sup>th</sup> April 2015 because it was not possible to amalgamate data relating to the homelessness legislation prevailing at this time with that relating to the Housing (Wales) Act 2014 (which was collected from 27<sup>th</sup> April 2015.</p> |                           |   |                    |                              |                                   |                                   |                          |
|   | <b>HOS/001</b><br>(Local) | The number of private rented tenancies made available by the Housing Options Service that were suitable and likely to be available for at least 6 months. | N/a New            |                              | N/a New                           | <b>92</b>                         | —                        |

## 6. Housing - Private Sector Renewal

| No | PI Reference                | PI Description  | NPT Actual 2013/14 | All Wales 2014/15       | NPT Quarter 4 (full year) 2014/15 | NPT Quarter 4 (full year) 2015/16 | Direction of Improvement |
|----|-----------------------------|---|--------------------|-------------------------|-----------------------------------|-----------------------------------|--------------------------|
|    | <b>PSR/002</b><br>(NSI/PAM) | The average number of calendar days taken to deliver a Disabled Facilities Grant.                               | 204                | 231<br>14 <sup>th</sup> | 252                               | 228                               | ↑                        |
|    | <b>PSR/009a</b><br>(SID)    | The average number of calendar days taken to deliver a Disabled Facilities Grant for: Children and young people | 310                |                         | 437                               | 354                               | ↑                        |
|    | <b>PSR/009b</b><br>(SID)    | The average number of calendar days taken to deliver a Disabled Facilities Grant for: Adults                    | 197                |                         | 233                               | 220                               | ↑                        |

### Section 3: Compliments and Complaints

#### Cumulative data

| No  | PI Description                             | Quarter 4<br>2014/15 | Quarter 4<br>2015/16 | Direction of<br>Improvement |
|---|--|----------------------|----------------------|-----------------------------|
| 1   | <b><u>Total Complaints - Stage 1</u></b>   | 54                   | 30                   | ↑                           |
|   | a - Complaints - Stage 1 upheld            | 7                    | 7                    |                             |
|   | b - Complaints - Stage 1 <u>not</u> upheld | 20                   | 13                   |                             |
|   | c - Complaints - Stage 1 partially upheld  | 12                   | 4                    |                             |
| d – Complaints – Stage 1 other (inc. withdrawn; passed to other agency; on-going) | 15   | 6                    |                      |                             |
| 2   | <b><u>Total Complaints - Stage 2</u></b>   | 0                    | 4                    | ↓                           |
|   | a - Complaints - Stage 2 upheld            | 0                    | 0                    |                             |
|   | b - Complaints - Stage 2 <u>not</u> upheld | 0                    | 1                    |                             |
|   | c- Complaints - Stage 2 partially upheld   | 0                    | 2                    |                             |
| d – Complaints – Stage 2 other  | 0  | 1                    |                      |                             |

| No | PI Description  | Quarter<br>4<br>2014/15 | Quarter<br>4<br>2015/16 | Direction of<br>Improvement |
|----|---|-------------------------|-------------------------|-----------------------------|
|    | <b><u>Total - Ombudsman investigations</u></b>  | 0                       | 0                       | ↔                           |
| 3  | a - Complaints - Ombudsman investigations upheld  | 0                       | 0                       |                             |
|    | b - Complaints - Ombudsman investigations <u>not</u> upheld   | 0                       | 0                       |                             |
| 4  | <b>Number of Compliments</b>  | 12                      | 20                      | ↑                           |
|    | <p><b>Narrative</b></p> <p><b>Stage 1</b><br/>2015/16 has seen a significant <b>DECREASE</b> in the number of complaints received when compared to 2014/15 from <b>54 to 30 (45%)</b>; there are a number of factors this can be attributed to, including the continual service developments and improvements. Members will be aware that the new WG complaints policy was introduced in August 2014, which resulted in new procedures being introduced by the Directorate; this was accompanied by extensive training for front-line staff and managers.</p> <p><b>Stage 2</b> – 2015/16 has seen an <b>INCREASE</b> in the number of Stage 2 complaints received - <b>4</b>; Members should note that these were spread across the Services, with 1 in Adult Services, 2 were required for Housing Options and 1 within Environment &amp; Trading Standards.</p> <p><b>Feedback / Lessons Learned</b><br/>Often there are a number of further actions or lessons to be learned from complaints, particularly where a complaint is complex. The Service will, where necessary, develop an action plan to address any on-going requirements or service developments. Members will note that the Directorate’s Complaints Annual Report will provide further detail.</p> <p><b>Compliments</b> – the number of compliments has <b>INCREASED by 67%</b>; this can be attributed to improvements in service delivery as well as improved reporting from services receiving praise and thanks. It is acknowledged that activity still remains relatively low and the complaints team will continue to raise the profile for the need to celebrate and report such incidences.</p> <p><b>Welsh Language</b><br/>The Directorate received <b>NO</b> complaints in relation to the Welsh Language.</p> |                         |                         |                             |

