

17 January 2012

ITEM 5

Health & Well Being Overview & Scrutiny Committee

Corporate Scorecard Performance Report Quarter 2 - focus on 1C (NI130) Self Directed Support

Portfolio Holder: Cllr Tony Fish; Portfolio Holder for Adult Social Care

Wards and communities affected: Key Decision:

N/A N/A

Accountable Head of Service: Roger Harris, Head of Commissioning

Accountable Director: Jo Olsson, Director of People Services

This report is Public

Purpose of Report:

To advise Overview & Scrutiny Committee of a key performance issue arising from the monitoring of the Corporate Scorecard 2011-12

EXECUTIVE SUMMARY

This report provides Overview & Scrutiny Committee with a summary of performance relating to a key IN FOCUS indicator within the Corporate Scorecard 2011-12.

The area of focus in this report is an indicator measuring the percentage of social care clients receiving self directed support.

1. **RECOMMENDATIONS**:

That Health and Well Being Overview & Scrutiny Committee:

1. Notes the performance of NI130, the actions taking place and identifies, if it feels necessary, any further actions or areas of concern on which to focus

2. INTRODUCTION AND BACKGROUND:

- 2.1 This relates to the Month 6/Quarter 2 [September] performance report for the Corporate Scorecard 2011/12. The corporate scorecard is used to monitor the performance of key priorities set out in the Corporate Plan and enables Members, Directors and other leaders to form an opinion as to the delivery of these priorities.
- 2.2 As part of the Council's performance management process, the Performance Board a council wide group of performance leads reviews the progress of



the Corporate Scorecard on a monthly basis to provide assurance to the Directors' Board, Cabinet and Overview & Scrutiny Committee of delivery.

- 2.3 Where the Performance Board identifies issues that it considers to be of concern or indeed merits the highlighting of good performance it recommends these to the Directors' Board, Cabinet and Overview & Scrutiny Committee for their consideration.
- 2.4 In response to a request from the Chair of the Corporate Overview and Scrutiny Committee, on 7th December 2011 Cabinet agreed that this report be considered by the Health and Well Being Overview and Scrutiny Committee.
- 2.5 The area of focus in this report is an indicator measuring the percentage of social care clients receiving self directed support.

3.0 KPI identified as 'IN FOCUS'

3.1 1C (NI130) Self Directed Payments - Adult Social Care

Definition	This PI measures the number of adults, older people and carers receiving self-directed support – either through direct payments or a personal budget, in the year to 31st March as a percentage of clients receiving community based services and carers receiving carers specific services aged 19 or over. Changed RAG status to RED ie underperforming				
Reason for IN FOCUS					
September Actual	Latest Target (April -Sept)	Year End Target			
47%	48.5%	55.1%			
Benchmark	National Average (2009/10) 13.8%				

Position as at September 2011

Performance at quarter two falls just under target although continues to show an improvement on the previous year. The 2011-12 year-end target of 55% is a challenging one, however this is expected to be met. The council has a strategy in place with our support agency for direct payments and self-directed support (Essex Coalition of Disabled People) to continue to increase the take-up of direct payments among both service users and carers.

While the take-up of direct payments has increased significantly in the year to date (from 177 to 311), the majority of new payments have been to users who already have existing payments.

Recent improvement actions to increase the take-up of payments among both new service users and those completing a review in addition to providing more direct payments to those who already have one include:

 Allocation of funding to increase options for carers respite breaks and to arrange via direct payments



 Introduction of recovery budgets for mental health clients to be used as direct payments

Performance will continue to be monitored to assess the impact of the above initiatives on performance.

3.2 Update: latest data available as at 9 December 2011

October Actual	Latest Target (April -Oct)	Year End Target
45%	49.6%	55.1%

Performance at October again missed the profiled monthly target. Performance has been affected by low take-up of individual budgets and individual support funds in the year to date and the increase in carers supported. Actual cash payments through direct payments continue to increase and at October stand at 311 up from 177 in April.

The year-end target of 55% is a challenging one. However, at this stage of the year we anticipate it being met with the implementation of improvement actions.

Key Actions:

Steps being taken to both improve performance against this indicator and importantly, to ensure the embedding of a personalised and self-directed approach across the service include:

- Establishing self-directed support champion practitioners at Deputy Manager level in each frontline team to promote a shift in practice and encourage innovation
- Team Managers to review progress monthly through team performance meeting
- A programme of staff surgeries have been set up led by our direct payments support organisation to help build confidence within the practitioners and promote and share innovative use of direct payments and personalised budgets
- Allocation of funding to increase options for carers respite breaks through direct payments expected to generate around 30-40 new users
- Introduction of recovery budgets for mental health clients to be used through direct payments expected to generate a further 40-50 new users
- A User Support Forum has been set up and meets for the first time in December to capture the experiences of people in receipt of self-directed support and to inform service improvement
- Review of self-direct processes in line with recent guidance produced in Think Local Act Personal scheduled for Q4 2011-12 and aims to support the first formal offer to all service users as a direct payment

[Commentary agreed by Roger Harris]



4.0 IMPACT ON CORPORATE POLICIES, PRIORITIES, PERFORMANCE AND COMMUNITY IMPACT

4.1 This monitoring report will help decision makers and other interested parties, form a view of the success of the Council's actions in meeting its political and community priority ambitions.

5.0 IMPLICATIONS

5.1 Financial

Implications verified by: Mike Jones

Telephone and email: 01375 652772 mjones@thurrock.gov.uk

This is a monitoring report and there are no direct financial implications arising. However any recovery planning commissioned by the Council may well entail future financial implications.

5.2 **Legal**

Implications verified by: Jamie Hollis

Telephone and email: 01375 652442 jhollis@thurrock.gov.uk

This is a monitoring report and there are no direct legal implications arising.

5.3 **Diversity and Equality**

Implications verified by: Samson DeAlyn

Telephone and email: 01375 652472 sdealyn@thurrock.gov.uk

This is a monitoring report and there are no direct diversity implications, however the actions being taken by the service need to have due regard for the Council's policy on equality and diversity.

5.4 Other implications (where significant) – i.e. Section 17, Risk Assessment, Health Impact Assessment, Sustainability, IT, Environmental

There are no other relevant implications.

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^{2nd month} 1C (NI130) Social Care clients receiving Self Directed Support

APPENDIX 1



Description	Unit	Good performan	RAG	DOT	Actual in Month	YTD	Latest Target	Y/E Target
This PI measures the number of adults, older people and carers receiving self-directed support - either through direct payments or a personal budget - in the year to 31st March as a percentage of clients receiving community based services and carers receiving carer's specific services aged 18 or over.	Percen	Bigger is Better	×	*	45.00	45.00	49.60	55.10

Commentary:

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