

TRAFFORD COUNCIL

Report to: Executive
Date: 6 January 2020
Report for: Information
Report of: Executive Member for Public Safety, Governance and Reform

Report Title

Corporate Plan 2019/20 Quarter 2 Report

Summary

The attached report provides a summary of performance against the Council's Corporate Plan, 2019/20. The report covers the period 1st July to 30th September 2019.

Recommendation(s)

That Executive notes the contents of the Corporate Plan Second Quarter Report.

Contact person for access to background papers and further information:

Name: Dianne Geary
Extension: 1821

Background Papers: None

Implications:

Relationship to Policy Framework/Corporate Priorities	The Corporate Plan 2019/20 Quarter 2 report summarises the Council's performance in relation to the Council's Corporate Priorities.
Relationship to GM Policy or Strategy Framework	<i>The Corporate Plan is aligned to the GM policy and strategy where required.</i>
Financial	<i>None</i>
Legal Implications:	<i>None</i>
Equality/Diversity Implications	<i>None</i>
Sustainability Implications	<i>None</i>
Resource Implications e.g. Staffing / ICT / Assets	<i>None</i>
Risk Management Implications	<i>None</i>
Health & Wellbeing Implications	<i>None</i>
Health and Safety Implications	<i>None</i>

1.0 Background

- 1.1 The report provides a summary of performance against the Council's Corporate Plan 2019/20 and supporting management information, for the period 1st July to 30th September 2019.
- 1.2 The Council's Corporate Plan reports key performance indicators and activity against the corporate priorities:
 - Building Quality, Affordable and Social Housing
 - Health and Wellbeing
 - Successful and Thriving Places
 - Children and Young People
 - Pride in Our Area
 - Green and Connected
 - Targeted Support
 - Corporate Services
- 1.3 Regular performance monitoring ensures that Executive and the Corporate Leadership Team can take necessary action to keep performance on track and aligned to the priorities.

2.0 Performance Update

- 2.1 Each priority has a summary of activity for quarter 2 – these activities are a combination of qualitative and quantitative activity. The output for each quarter depends on the deliverables that are achieved for that quarter. As several of the key performance indicators are annual the end of year report will be a larger set.

2.2 These are the key performance indicators for each priority and the quarter 2 outturn:

		DEFINITION	Target	Actual Q2	RAG	Q or A
Corporate Plan	Building Quality and Affordable Housing	The number of housing completions	600A	167 Q2 609A	↑	Q
		The number of affordable housing completions	100A	42 Q2 69A	↑	Q
	Health and Wellbeing	The percentage of the eligible population (age 40-74) who received a NHS Health Check	2.5%	1.7%	↓	Q
	Successful and Thriving Places	Through the Trafford Pledge increase the number of people into employment	100A	77 Q2	↑	Q
		Increase the number of people who engage with libraries	912,891A 228,222Q	235,801 Q2	↑	Q
	Children and Young People	Maintain the low level of 16-17 year olds who are not in education training or employment (NEET) in Trafford	2.75%	2.63%	↓	Q
		Children who are "looked after" rate per 10,000	73	71.7	↓	Q
	Pride in Our Area	Percentage of household waste which has been collected for recycling	57.3%	60.9%	↑	Q
	Green and Connected	Number of green flag awards achieved in Trafford	10	11	↑	A
	Targeted Support	Admissions to Residential or Nursing Care for Older People during the year per 100,000 population (ASCOF 2Aii)	600A 348Q	317	↑	Q
		Delayed Transfers of Care attributable to Adult Social Care per 100,000 pop 18+ (ASCOF 2Cii)	5.0	5.8	↑	Q
		Increase the number of people prevented from becoming homeless	400A 100Q	113	↑	Q
	Central Services	% of major planning applications processed within timescales	90%	92%	↑	Q
		Percentage of Council Tax collected	98.1%	57.8%	↑	Q
		Enquires shifted to online	10,000	18,223	↑	Q

3.0 Exception Report

For any indicator off target with a red or amber status an exception report has been prepared to outline why performance is below target and what action is in place to improve performance. For Quarter 2 2019, there are two indicators with an amber status, as outlined in Appendix 1.

Finance Officer Clearance NB.....
Legal Officer Clearance DS.....



CORPORATE DIRECTOR'S SIGNATURE

To confirm that the Financial and Legal Implications have been considered and the Executive Member has cleared the report.

Appendix 1: Exception Reports

Theme / Priority:	Health and Wellbeing		
Indicator / Measure detail:	The percentage of the eligible population (age 40-74) who received a NHS Health Check		
Baseline:			
Target and timescale:	2.5%	Actual and timescale:	1.7% Q2
Why is performance at the current level?			
<ul style="list-style-type: none"> • Is any variance within expected limits? • Why has the variance occurred? • Is further information available to give a more complete picture of performance? • What performance is predicted for future periods? 			
<p>1,181 received a health check giving percentage of the eligible population who received a Health Check of 1.7% (compared to 1.6% in Q1).</p> <p>Percentage of the eligible population offered a Health Check was 3.1% (number=2,171). This is down slightly from 4.1% in Q1. Target = 5%</p>			
What difference does this make – the implications of not meeting target?			
<ul style="list-style-type: none"> • Impact on service users/public. • Impact on corporate priorities and plans. • Impact on service/partner priorities. • Impact on equalities, sustainability or efficiency <p>Can we move resources to support this or other priorities?</p>			
<p>By not delivering more health checks, less of the population can be informed of their cardiovascular risk and take action to reduce their risk of cardiovascular disease and other diseases which cause premature death in Trafford.</p> <p>The NHS Health checks programme is a mandatory service for local authorities.</p> <p>By picking up risk factors and disease earlier, both the NHS and social care can save resources downstream. Also this can reduce premature mortality and a healthier working age population which in turn supports the local economy.</p> <p>It is particularly important to deliver the NHS Health Check programme in areas of social deprivation where the risk factors for and the prevalence of disease is likely to be higher.</p>			
How can we make sure things get better?			
<ul style="list-style-type: none"> • What activities have been or will be put in place to address underperformance? Make specific reference to action plans. • When performance will be brought back on track? • Assess the need for additional resources/funding/training/investment. • Identify the source of additional resources/funding/training/investment. • Consult with other services, staff, managers, relevant Members and partners. 			
<p>Public Health are working with GP practices to increase the number of health checks that are undertaken in the borough. While we do encourage the practices to spread their health check offer evenly throughout the year, we do see fluctuations in offer and uptake.</p> <p>Health Checks training events have been held at a GP learning event and Practice Nurse meeting. One more training event has been paid for that will be held in the new year. We are working with Voice of BME to promote the increase of uptake of health checks in the North of the borough.</p> <p>Participating in the GM Health Checks work is part of the GM partnership work and we are looking at learning from this on the most effective models for targeting this work and increasing uptake in our highest risk populations.</p>			

Theme / Priority:	Corporate Priority: Targeted Support		
Indicator / Measure detail:	Delayed Transfers of Care attributable to Adult Social Care per 100,000 pop 18+ (ASCOF 2Cii)		
Baseline:	8.1 at the end of 18/19		
Target and timescale:	5	Actual and timescale:	5.8 (Q2)
Why is performance at the current level?			
<ul style="list-style-type: none"> • Is any variance within expected limits? • Why has the variance occurred? • Is further information available to give a more complete picture of performance? • What performance is predicted for future periods? 			
<p>Although delayed transfers of care (DTC) attributable to Adult Social Care is currently underperforming; the performance has improved significantly from 18/19 where in the same time frame, the performance was 11.3 compared to the 5.8 – it has nearly halved. Performance for Q1 was 5.9 so there has been a slight improvement in Q2. The main reasons for the delays are sourcing provision for a residential or nursing home particularly where people require complex care.</p> <p>Patient choice while not the highest reason, does contribute markedly to the overall DTC performance in Trafford. Each Hospital Trust has a Patient Choice policy and enforcing this policy remains the responsibility of the respective Trust.</p> <p>There continues to be a high volume of delayed discharges from South Manchester (Wythenshawe) that is due to a range of factors including the following:</p> <p>Historically (2017), some homecare providers were having insufficient provision for business continuity to cover peak periods due to recruitment difficulties. We have been working closely with providers over the last 18 months to resolve this and have been commissioning new providers. Home care letting is monitored twice daily to ensure that referrals for packages of care are processed across from the Integrated Discharge Teams (IDT's) to the home care brokerage teams. Most home care is now being sourced within 2-3 days.</p> <p>There are 36 intermediate care beds in Trafford which is complimented by 29 Discharge to Assess beds. Additional discharge to assess beds have been purchased to support winter pressures. There are also 5 supported living flats that can also be utilised at Limelight.</p> <p>The next phase of work has an agreed target for March 2020 which equates to 3.3% of the bed base in each hospital. This equates to 16 delays for Trafford across all hospitals. At the time of writing this report (18/12/19) our DTC across all four hospital sites are;</p> <p>Salford Royal Foundation Trust (SRFT) - 1 Trafford General Hospital - 2 Wythenshawe Hospital - 13 acute/3 non acute MRI - 6</p>			
What difference does this make – the implications of not meeting target?			
<ul style="list-style-type: none"> • Impact on service users/public. • Impact on corporate priorities and plans. • Impact on service/partner priorities. • Impact on equalities, sustainability or efficiency <p>Can we move resources to support this or other priorities?</p>			
<p>The implications of not meeting the target include:</p> <ul style="list-style-type: none"> • Patients remaining in hospital longer than necessary and this may impact on their independence and recovery. • The delays contribute to pressures on bed availability. • The acute providers' ability to maintain NHS targets may be compromised. • The reputation of the organisation is affected negatively. 			

Intervention measures have been put in place to improve flow and new Homecare providers have been awarded contracts to support the continuous demand.

How can we make sure things get better?

- What activities have been or will be put in place to address underperformance? Make specific reference to action plans.
- When performance will be brought back on track?
- Assess the need for additional resources/funding/training/investment.
- Identify the source of additional resources/funding/training/investment.
- Consult with other services, staff, managers, relevant Members and partners.

Trafford published a Winter Plan document on 01/12/19. The purpose of this plan is to provide assurance about community health and social care preparedness to address seasonal winter pressures that could further impact on the delayed transfers of care. Below are some of the initiatives in place:

- **SAMS in-Reach:** Trafford will have dedicated SAMS reablement providers at Wythenshawe and Salford Royal, conducting joint SAMS assessments with IDTs in each site. Each provider will also have the capability to complete simultaneous home assessments and to collect small items of equipment to support safer discharge. This will speed up the assessment process, reduce inappropriate referrals and also speeds up the brokerage process for reablement packages. NB: this is a new service offer and will depend on integrated working with discharge teams in each site.
- **Ownfone Pilot:** Trafford Council has developed an additional service offer, in partnership with Trafford Housing Trust Telecare service and British Red Cross Assisted Discharge Service. People who are suitable for discharge but require some low level support will be offered a free SIM based pendant alarm, which can be immediately activated, and an emergency key safe to support telecare operatives to complete welfare checks, alongside informal support from British Red Cross. NB: this is a pilot and therefore cannot be relied on to meet excessive demand for services.
- **British Red Cross Assisted Discharge Service:** Trafford has commissioned a dedicated service for Trafford residents in Trafford General Hospital and Wythenshawe, to provide informal, low level and flexible support to people who can be discharged but lack confidence or require welfare checks to ensure they are safe.
- **Homecare Visits in Hospital:** British Red Cross will provide additional, targeted welfare checks, for people who are in receipt of homecare and are admitted to hospital. British Red Cross will ensure the individual has personal items they require whilst in hospital and will also liaise with homecare providers and health and social care professionals to maximise the likelihood that they can be discharged with support from their existing care provider. It is envisaged that this will reduce length of stay for people in receipt of homecare. NB: this is a pilot and cannot therefore be relied upon to meet excessive demand
- **Telecare and assistive Technology:** Trafford Housing Trust will be hosting a series of open events and information stands at Trafford General Hospital and Wythenshawe over the winter, to promote telecare as a support option to help people leave hospital safely. This will include promotional activity with integrated discharge team and professionals, family members and carers and with Trafford residents who are in hospital and could benefit from telecare support or assistive technology.
- **Home for Holidays Campaign:** This campaign ensures that all requests for long term 24 hour care placements are managed centrally by the Urgent Care Control Room (UCCR). These anonymised referrals are then disseminated to all Greater Manchester providers. This enables Social Care officers to spend increased time assessing the needs of more people to improve patient flow and further enables the market to respond quickly to the needs of our residents. The pilot commenced late November and has been well received by Social Care staff and providers alike. Additionally, the

initial data supports that this approach is more efficient and effective. A formal evaluation will commence in February 2020.

- Further extend the **discharge to assess beds** across Trafford within a more **flexible IMC model**. Six new discharge to assess beds have been commissioned and commence on the 23rd Dec 19.
- Best Bed is at Home communication campaign is being launched by GM and is aligned to Trafford's 'Home for Holidays' Campaign. This is also supported in the guidance issued nationally to professionals – **'Why not home? – Why not today?'**