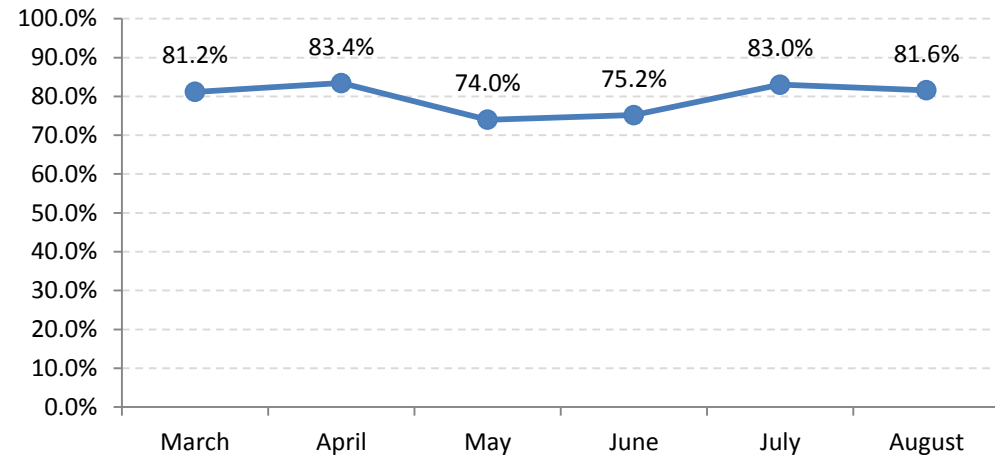


March	81.2%
April	83.4%
May	74.0%
June	75.2%
July	83.0%
August	81.6%

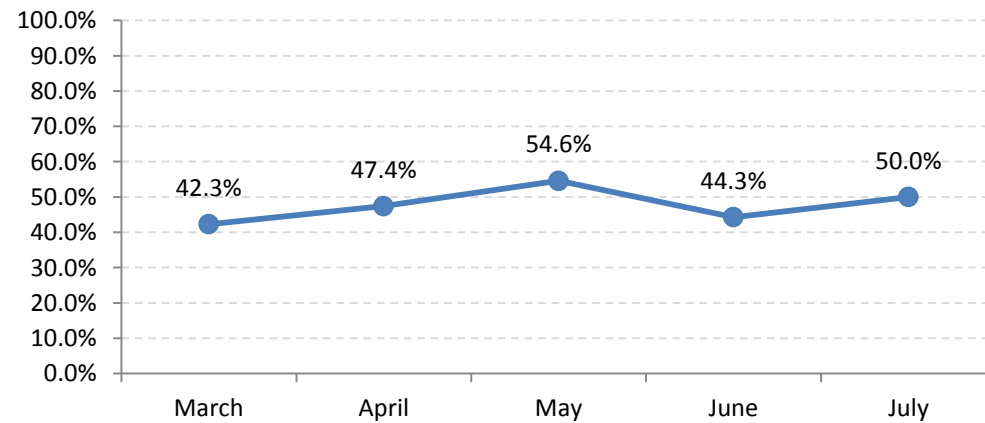
March	42.3%
April	47.4%
May	54.6%
June	44.3%
July	50.0%

March	77.0%
April	75.9%
May	75.6%
June	75.2%
July	74.3%

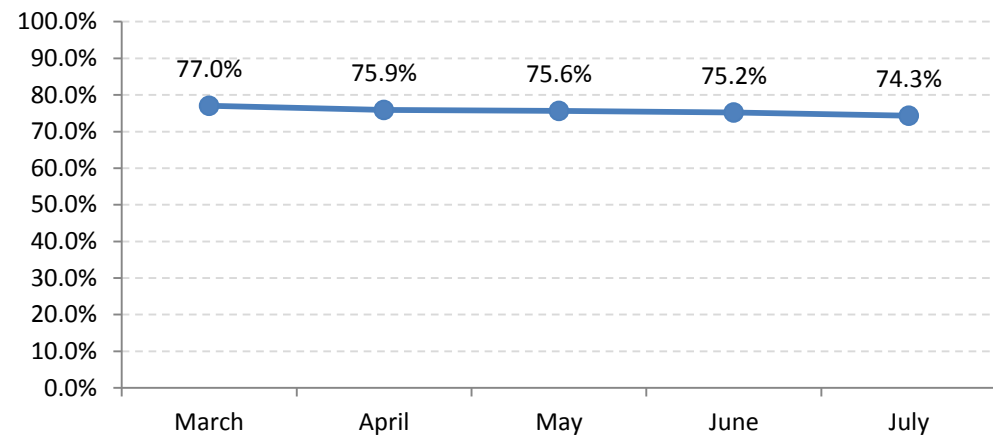
The Percentage of concluded Safeguarding enquiries where the individual or representative was asked what their desired outcomes were



Proportion of contacts progressed to 2nd response who are referred for an assessment / enablement



**The proportion of clients reviewed, reassessed or assessed within
12 months**



Adults Council Vision Scorecard 2017/18 - Month 4 (July)

Performance Indicator		Frequency	Target	Baseline	Period Target	Current Period	Prev Period	Status	DOT	Commentary
Scorecard										
1	Uptake of Direct Payments	Monthly	TREND	21.1%	TREND	22.8%	22.3%	G	↑	8236 clients received a service that was eligible for some form of Self Directed Support on the last day of July, of which 1874 (22.8%) received this as a Direct Payment – with 36.0% of Younger Adults receiving a Direct Payment compared to 13.8% of Older Adults. This exceeds June’s result of 22.5%. Overall numbers of direct payments have increased by 289 in the last 12 months, up from 1585. Weekly reports continue to be produced, with targets set for all areas and teams, and the Direct Payments group continues to look at all aspects of this service to improve the proportions in line with the new offer.
2	The percentage of people who receive Adult Social Care in their own home.	Monthly	TREND	69.7%	TREND	69.5%	69.8%	G	↓	
3	The proportion of clients receiving Residential, Nursing or Home Care from a provider that is rated as Good	Quarterly	75%	65.1%	75%	...	TBC	TBC	N/A	This is a quarterly measure. Q1 performance data available middle September.

Cabinet Member Service Scorecard 2017/18 - Month 4 (July)

Performance Indicator		Frequency	Target	Baseline	Period Target	Current Period	Prev Period	Status	DOT	Commentary
1	Uptake of Direct Payments	Monthly	25.0%	21.1%	22.4%	22.8%	22.3%	G	↑	<p>8236 clients received a service that was eligible for some form of Self Directed Support on the last day of July, of which 1874 (22.8%) received this as a Direct Payment – with 36.0% of Younger Adults receiving a Direct Payment compared to 13.8% of Older Adults. This exceeds June’s result of 22.5%. Overall numbers of direct payments have increased by 289 in the last 12 months, up from 1585. Weekly reports continue to be produced, with targets set for all areas and teams, and the Direct Payments group continues to look at all aspects of this service to improve the proportions in line with the new offer.</p> <p>In July, 13,046 people received a service, of which 9,072 (69.5%) were living in the community rather than in a residential or nursing home. Whilst this is an increase in terms of the absolute number of clients living in the community, the proportion has reduced due to a larger increase in the total number of clients</p> <p>Performance has remained stable on this measure for a number of months. It is recognised that the current availability of Shared Lives opportunities requires a step change. Service leads are currently developing a robust plan to recruit the additional carers required to increase the availability of this care option and it is expected that the impact of this will be seen in the performance report of January 2018.</p> <p>From a low baseline, a challenging target of 75% has been set. Incremental improvement towards this target is required over the course of the year. Current performance - at 43.8% - is ahead of the projected target of 40% for this month.</p> <p>Following month-on-month reductions in the level of delayed transfers of care that are due to social care, the rate significantly increased this month. Analysis of the recorded reasons for DToC’s suggests that this increase was due to delays in accessing nursing care. In order to improve performance on these measures a great deal of activity is underway locally across the whole health and social care system. Social care activity to improve performance will primarily be driven through the use of the Improved Better Care Fund. Actions will be set out in the Better Care Fund Plan, but include:</p> <ul style="list-style-type: none">- More in-depth analysis of system issues - in particular the admission from residential and nursing care into A and E and the interfaces between Health and Social Care. This system analysis work is underway;- Establishing one consistent process between NHS providers and Social Care for counting and validating DToCs on a daily basis – currently being piloted at Heartlands Hospital;- Implementation of the Patient/Family Choice Policy to incentives providers to assess before offering choice;- Commissioning additional nursing and interim bed capacity to respond to the immediate pressure;- Working with the voluntary and community sector to support patients to be discharged home from hospital where appropriate- Longer-term activity to reduce demand in the system
2	The percentage of people who receive Adult Social Care in their own home.	Monthly	TREND INCREASE	69.7%	TREND INCREASE	69.5%	69.8%	A	↓	
3	The number of people who have Shared Lives	Monthly	78	72	75	72	74	R	↓	
4	The proportion of Community Assessments completed within 28 days of referral. (Excluding Enablement)	Monthly	75%	23.0%	40.0%	43.8%	33.8%	G	↑	
5	Daily Average Delay beds per day per 100,000 18+ population - Social Care	Monthly	5.8	12.0	10.5	13.6	10.2	R	↓	
6	Daily Average Delay beds per day per 100,000 18+ population - Joint NHS and Social Care	Monthly	1.0	1.1	1.0	1.3	1.3	R	=	

Cabinet Member Service Scorecard 2017/18 - Month 4 (July)

Performance Indicator		Frequency	Target	Baseline	Period Target	Current Period	Prev Period	Status	DOT	Commentary
7	The proportion of clients receiving Residential, Nursing or Home Care from a provider that is rated as Good	Quarterly	75%	65.1%	75%	...	TBC	TBC	N/A	This is a quarterly measure. Q1 performance data available middle September.
8	Percentage of concluded Safeguarding enquiries where the individual or representative was asked what their desired outcomes were	Monthly								Whilst performance continues to fall below the target, there has been a 7.8% improvement against M3. Regional benchmarking suggests that Birmingham performs relatively well against this measure – ranked 3 out of 9 authorities who shared this information in 2016/17.
9	Proportion of contacts progressed to 2nd response who are referred for an assessment / enablement	Monthly								Performance has improved this month to meet the required target for the period.
10	The proportion of clients reviewed, reassessed or assessed within 12 months.	Monthly	80%	76%	77.0%	74.3%	75.2%	R	↓	Performance on delivery of reviews has dropped whilst teams focus on assessment. A plan of actions to prioritise reviews to improve performance is being develop and it is expected that performance will improve to target by December 2017.

Public Health data is currently reporting Q4 2016/17

Performance Indicator		Frequency	2017/18 Target	Baseline (Annual outcome 2016/17)	Q4 2016/17 Period Target	Q4 (2016/17)	Prev Period	Status	DOT	Commentary
11	Proportion of women receiving a home visit after delivery (Percentage of births that receive a face to face new born visit with 14 days)	Quarterly	90%	91%	90%	92%	92.0%	G	=	The data reported is for Q4 2016/17. The data shows that 92% of women receive a face to face new born visit from a health visitor within 14 days of delivery, exceeding the target of 90%.
12	Proportion of eligible population receiving a NHS Health Check	Quarterly						G	↑	The data reported is for Q4 2016/17, it shows 3.2% of the eligible cohort attended for an NHS Health Check in Birmingham, exceeding the national target of 2.5%. The introduction of a ‘pop up’ reminder facility on general practice clinical systems identifying eligible patients has contributed increased activity.
13	Rate of positive Chlamydia screens	Quarterly						R	↓	The data reported is for Q4 2016/17. It shows a detection rate of 1,876 per 100,000 of the eligible population against a national target of 2,300. Although below target, this is higher than the regional rate (1,715) for the period. The service is currently exploring how best to effectively expand their targeted screening approach in order to address the shortfall in detection.
14	Number of smoking quitters at 12 weeks	Quarterly	670	674	214	181	156	A	↑	The data reported is Q4 2016/17. Data for Q1 is not available until the next reporting period given a smoker must be smoke free for 12 weeks if they are to be considered a successful quit during that period. The data shows that in Q4, 181 where quit at 12 weeks against a target of 214. Although below target there is a upwards trajectory and those quit represents 50% of citizens setting a quit date at the start of the service. The service has undertaken a significant transformation as a result of the reduction in public health grant last year. As a result activity is lower than previous years due to a reduction in providers. That aside quit success rate continues to improve and the number progressing from a 4 week quit status to a 12 week quit status remains 15% above with national data which is 35%. It is expected that the numbers going through the service will continue to improve during 2017/18 and we will maintain success rates above the national average. Baselines and targets will be reviewed as the new service is established and further data is received.
15	Drugs users who are in full time employment for 10 working days following or upon discharge	Quarterly	30%	30.6%	30%	31.0%	29.0%	G	↑	The data reported is for Q4 2016/17. It shows 31% of drug users were in full time employment for ≥10 days in the last 28 day period at treatment exit, exceeding the target of 30%. The target is currently being reviewed as part of the PbR element for contract year 3.

Cabinet Member Service Scorecard 2017/18 - Month 4 (July)

Performance Indicator		Frequency	Target	Baseline	Period Target	Current Period	Prev Period	Status	DOT	Commentary
16	Children under 5 attending Wellbeing Service	Quarterly	54000	30185	13500	6942	6540	R	↑	The data reported is for Q4 2016/17. The under 5’s offer within the Wellbeing Service continues to be below the expected targets. In Q4, 6942 attendances was achieved against a target of 13,500; this is 51% of the expected attendances. Annually the outcome represents only 56% of their target achieved. This is a key PH priority and performance has been reported to CMB. Performance continues to be monitored and the service is seeking to address the shortfall.
17	People over 70 attending Wellbeing Service	Quarterly	78000	69950	19500	20339	16659	G	↑	