

QUARTERLY MONITORING REPORT

DIRECTORATE: Health & Community
SERVICE: Health & Partnerships
PERIOD: Quarter 2 to period end 30th September 2008

1.0 INTRODUCTION

This quarterly monitoring report covers the Health & Partnerships Department second quarter period up to 30 September 2008. It describes key developments and progress against all objectives and performance indicators for the service.

The way in which traffic light symbols have been used to reflect progress to date is explained in Appendix 7.

It should be noted that this report is presented to a number of Policy and Performance Boards. Those objectives and indicators that are not directly relevant to this Board have been shaded grey.

2.0 KEY DEVELOPMENTS

Consumer Protection

The new consumer protection regulations continue to place extra demands on both the criminal and consumer civil advice teams as officers face a steep learning curve in relation to the new requirements and scheme of sanctions. With the completion of the Runcorn Town Hall refurbishments, the Registration Service moved back into its Registration Office accommodation in August. For the last 11 months or so it had been temporarily accommodated in the Town Hall's Committee Room 2. The success of using the Civil Suite for ceremonies during this period has led to the continued use of these rooms for Registration Service ceremonies, subject to civil and other demands for this popular facility.

Direct Payments & Appointee & Court Appointed Deputy Service

Continued excellent performance maintained, though numbers have fallen in Older Peoples Services as some service users have died and others have obtained Continuing Healthcare funding. The number of service users in receipt of Direct Payments at 30th September 2008 is 192 service users and 219 carers (compared to 185 service users and 193 carers receiving their service via a direct payment at 30.9.2007). Further training has been undertaken on changes to the Mental Health Act 1983 Amendments (in force from Nov 2008) as relevant to the team given the linkages between this Act and the Mental Capacity Act, in force from 1st October 2007.

Performance Management and I.T

The Directorate continues to work with Corporate ICT on a number of key IT developments, including the electronic monitoring of care (Private Sector and

In House). One of the main priorities for Team is around Carefirst 6 implementation. The hardware and software for the implementation of Carefirst 6 have now been purchased and installed and software system assembly has commenced using Careassess, which is an electronic form that allows us to design forms which can be pre populated and have mandatory fields attached. The Carefirst 6 Project Team has now reached a point where further operational input is required in order to progress implementation.

Supporting People and Contracts

The contract for the provision of support services at Grangeway court was awarded to Arena Options. The new service will commence with effect from 6th October 2008. The contract for the provision of support to BME clients has been awarded to CDS. The service is due to commence in October. The tender process for the provision of Domiciliary Care has commenced. This is a major contract and information about the tender has been sent out to members, HBC staff, key stakeholders and service users. Agreement has been reached with Liverpool MBC regarding the awarding of a cross authority contract to develop a single point of access for SP services and a gateway for move on to general needs accommodation. Work on phase one (research and baseline position) is due to commence in October.

Commissioning

Work has been completed to identify the needs of ALD service users 2008-2011. The next step is the development of an action plan to address the gaps/weaknesses identified in the data document. This work will inform an update of the full ALD commissioning strategy. Quotes have been invited for a review of Long Term Conditions and Therapy services.

Service Planning

Work is nearing completion on Halton's Joint Strategic Needs Assessment. A summary of the document is expected to be published for consultation in November.

Housing

The homelessness service will be brought back in house on 6th October 2008 and the Grangeway Court management and housing support contract will transfer to the new provider, Arena Options, on the same date. Construction of the new Traveller transit site is expected to be completed on 10th October 2008, following which decommissioning of the temporary facility at Haddocks Wood can begin. A programme of development for the Halton/Warrington/St Helens Growth Point is currently being developed by Officers in Planning outlining how the partners aim to deliver additional housing growth. The outline programme is to be submitted before the end of October 2008.

3.0 EMERGING ISSUES

Consumer Protection

Several officers are contributing to the joint Halton / Warrington Trading Standards Project and as the transfer date gets closer, the volume of project work is likely to increase. Political approval having been granted, The

Registration Service will be submitting its application to the Office of the Immigration Services Commissioner at the beginning of quarter 3, with a view to offering the Nationality Checking Service for individuals and families wishing to apply for British Citizenship later in quarter 3, or early in quarter 4.

Performance Management and I.T

Performance Management for Adult Social Care is experiencing a period of change in terms of central performance requirements, in line with the Transformation of Adult Social Care. Changes to statutory returns, such as the the introduction of the National Indicator Set, response to consultations and an increased requirement for evidence of outcomes for service users, has resulted in an increase in the workload for the team. The immediate priority for the Performance and Data team is to ensure that statutory deadlines are met and that staff are recruited to vacant posts, including induction and training.

Commissioning

The National Autistic Society has recently completed a report on Autism needs in Halton, (commissioned jointly by H&C and CYP). The report identifies a significant number of recommendations for action. A project group will be established to progress delivery of the recommendations.

Finance – Management Accounts Team

As part of the Directorate Three Year Financial Strategy further work will be undertaken to identify savings for the 2009/10 budget setting round and review income generated/ received by charging for services, with findings of the Fairer Charging Review Group reported back to members. Work has also progressed well to identify future funding to be transferred for the Commissioning of Social Care for Adults with a Learning Disability from the NHS to Local Government under the Valuing People Now agenda, from 1.4.2009. To achieve this agreement need to be reached by 1st December 2008 and the DOH informed.

Housing




The Housing and Regeneration Act which received royal assent in July 2008 will impact on the work of the team, specifically:

The merging of the Housing Corporation and English Partnerships to form the Homes and Communities Agency.

Indications are that the HCA will enter into “single conversations” with councils regarding their housing and regeneration priorities, which could ultimately impact on funding levels, the formation of a new regulatory body, the Tenants Services Authority, for social landlords, and improved security of tenure for Gypsies and Travellers on local authority sites.

November will see the formation of the new Liverpool City Region Housing and Spatial Planning Board, which will report to the Liverpool City Region Leaders Cabinet. This is likely to result in increased sub regional working.

4.0 PROGRESS AGAINST MILESTONES/OBJECTIVES




Total	19		12		7		0
--------------	-----------	---	-----------	---	----------	---	----------

All service plan milestones are being reported this quarter. (Those milestones in *italic* text are 'other' milestones that are routinely reported in quarters 2 and 4). Of the 19 milestones for the service, 12 are on track at the half year point. Seven have been assigned amber lights. For a full commentary against each milestone, please refer to Appendix 1.

5.0 SERVICE REVIEW




Finance- Management Accounts Team
 The Directorate Management Accounts Team is continuing to provide support to critically review all areas of spend and services provided and achieve cashable Gershon savings. In addition, the team is actively supporting Operational Services to identify ways of reducing the ALD overspend, and securing additional funding as part of the three-year financial strategy from the PCT. During the last quarter, financial support was provided to the ALD team reconfiguration with staff transferring from the PCT on 1.8.2008 to HBC.

6.0 PROGRESS AGAINST KEY PERFORMANCE INDICATORS

Total	7		3		0		1
--------------	----------	---	----------	---	----------	---	----------

Of the 7 key indicators for the service, four have a report of progress against target. A further three indicators cannot currently be reported as data is not available, three of these are new National Indicators for which data protocols are not yet established. For further information and commentary, please refer to Appendix 2.

6.1 PROGRESS AGAINST OTHER PERFORMANCE INDICATORS

Total	23		8		1		1
--------------	-----------	---	----------	---	----------	---	----------

Of the 23 other indicators for the service, ten have a report of progress against target. A further thirteen indicators, eleven of which are new National Indicators, cannot currently be reported as data is not yet available. For further information and commentary, please refer to Appendix 3.

7.0 PROGRESS AGAINST LPSA TARGETS

There are no LPSA targets for this service

8.0 RISK CONTROL MEASURES

During the production of the 2008-09 Service Plan, the service was required to undertake a risk assessment of all Key Service Objectives.




Where a Key Service Objective has been assessed and found to have associated 'High' risk, progress against the application of risk treatment measures is to be monitored, and reported in the quarterly monitoring report in quarters 2 and 4. Please refer to Appendix 4.

9.0 PROGRESS AGAINST HIGH PRIORITY EQUALITY ACTIONS




During 2007/08 the service was required to undertake an Equality Impact Assessment. Progress against actions identified through that assessment, with associated High priority are to be reported in the quarterly monitoring report in quarters 2 and 4. Please refer to Appendix 5.

10.0 APPENDICES



Appendix 1- Progress against Key Objectives/ Milestones
Appendix 2- Progress against Key Performance Indicators
Appendix 3- Progress against Other Performance Indicators
Appendix 4- Progress against Risk Treatment Measures
Appendix 5- Progress against High Priority Equality Actions
Appendix 6- Financial Statement
Appendix 7- Explanation of traffic light symbols

Service Plan Ref.	Objective	2008/09 Milestone	Progress to date	Commentary
HP 1	Ensure that high level strategies are in place, and working to deliver service improvements, and support frontline services to deliver improved outcomes to the residents of Halton	<i>Review Housing and Homelessness Strategies to ensure that the action plans are implemented and that identified needs are met within the resources available Mar 2009</i>		<i>A draft Housing Strategy was circulated for stakeholder consultation earlier this year, resulting in a number of useful comments, many of which have been incorporated into a revised document, which will be presented to PPB on 19th November 2008. Work to review the Homelessness Strategy is on schedule to meet the March 2009 deadline.</i>
		<i>Review Supporting People Strategy to ensure any change to grant allocation is reflected in priorities Jul 2008</i>		<i>Review of spend against commissioning intentions completed in order to inform commissioning decisions for 2008-2011. (Proposals approved by Exec sub)Commissioning Plan to be submitted to SP commissioning Body by Dec 08.</i>
		Review and update the Joint Strategic Needs Assessment (JSNA) to ensure that the outcomes, with identified priorities are incorporated into the LAA May 2008		Draft JSNA produced in Sept 08. Updated draft and summary document to be completed for consultation by the end of October 08.




**APPENDIX ONE - PROGRESS AGAINST OBJECTIVES/MILESTONES
Health & Partnerships**

Service Plan Ref.	Objective	2008/09 Milestone	Progress to date	Commentary
HP 2	Work with operational managers to make best use of the workforce and IT resources, to improve service delivery and assist services to continuously improve within a robust performance management framework	<i>Review and revise the performance monitoring framework according to changing service needs to ensure that any changing performance measure requirements are reflected in the framework and the performance monitoring cycle Sep 2008.</i>		<i>Performance Management Team have conducted a user survey to assess the performance information needs for Adult Social Care. Stakeholders have been ascertained with a view to improving the performance framework.</i>
		<i>Develop and implement appropriate workforce strategies and plans to ensure that the Directorate has the required staff resources, skills and competencies to deliver effective services Mar 2009</i>		<i>The Directorate Workforce Development Plan 2008/09 has been implemented. A new Recruitment and Retention Strategy is currently under development and due for implementation by the end of December 2008. A report is going to SMT in October pulling out the main implications of the IdeA interim document "Strengthening Partnership Working: Joining Up Workforce Strategies"</i>
		<i>Review the Directorate IT strategy and business processes in conjunction with Corporate IT to ensure that systems available are accessible and deliver a quick and responsive service to those that need them Jun 2008.</i>		<i>Work continues with Corporate IT on a number of developments including the electronic monitoring of care and the implementation of Carefirst 6.</i>





**APPENDIX ONE - PROGRESS AGAINST OBJECTIVES/MILESTONES
Health & Partnerships**

Service Plan Ref.	Objective	2008/09 Milestone	Progress to date	Commentary
		<p><i>Develop and implement an electronic solution to the Single Assessment Process (SAP) to ensure that data currently written in assessments can be effectively loaded into Carefirst, Health and other agency services information systems Jun 2008.</i></p>		<p><i>SMT have approved the Carefirst 6 implementation of SAP. Next steps include advising the SAP Board, determining sources of funding and determining where the implementation of SAP fits within the overall implementation of Carefirst 6.</i></p>
		<p><i>Review complaints procedures in light of national guidance to ensure a more consistent and holistic approach, leading to lessons learned being shared with colleagues across the sector Nov 2008.</i></p>		<p><i>The complaints procedure has been reviewed along with our own Policy and Procedure, reflecting national guidance. However, this will need doing again to reflect the "Making Experiences Count" proposals to introduce a common complaints procedure, across health and social care, by April 2009. National guidance is not yet available, as this is currently being developed by "Early Adopter" sites. The traffic light system, to remind people dealing with complaints, and their managers, of impending deadlines is up and running. Initial indications were that it has encouraged deadlines to be met, but we will keep it under review.</i></p>



**APPENDIX ONE - PROGRESS AGAINST OBJECTIVES/MILESTONES
Health & Partnerships**

Service Plan Ref.	Objective	2008/09 Milestone	Progress to date	Commentary
HP 3	To deliver high quality Bereavement, Consumer and Registration Services, that are fit-for-purpose and meet the needs, dignity and safety requirements of the Halton community	Develop a project plan to deliver longer-term cemetery provision, based on member decision, and commence delivery in accordance with project plan timeframes, to ensure the continued availability of new grave space to meet the needs of the Community in 2015 and beyond Jun 2008.		Whilst the June milestone has not been met, a cost benefit analysis of the various options will be completed by October. This should result in decisions being made and the development of the project plan prior to calendar year end.
		Produce an initial Consumer Protection Strategic Assessment, in line with the National Intelligence Model, to support intelligence-led Trading Standards service delivery during 2009/10 Dec2008		On schedule. Some of the work undertaken for the joint Halton / Warrington project doubles as the background work for this milestone.
		Benchmark performance against national standards with relevant benchmarking group to inform improvement plan aimed at supporting continual service improvement Sep 2008.		The Service has benchmarked its performance against the national standards in the GRO/LACORS Good Practice Guide with other "new governance" services. It is hoped that a North West benchmarking exercise can be completed later in the year.



**APPENDIX ONE - PROGRESS AGAINST OBJECTIVES/MILESTONES
Health & Partnerships**

Service Plan Ref.	Objective	2008/09 Milestone	Progress to date	Commentary
HP 4	Ensure that effective financial strategies and services are in place to enable the Directorate to procure and deliver high quality value for money services that meet people's needs.	<i>Monitor and review Joint Commissioning Strategies to ensure priorities are still met and enhance service delivery and cost effectiveness Mar 2009.</i>		<i>Report on commissioning needs for ALD services completed Sept 08. Work completed on extra care housing strategy. Work ongoing to monitor progress against milestones in all joint-commissioning strategies.</i>
		<i>Review contract management and monitoring arrangements across all service areas to ensure contracts are offering value for money Mar 2009.</i>		<i>Annual work plan for SP, contracts and procurement agreed. All areas on target except the development of the residential care strategy. Additional resources have been re-directed to this area in order to bring the project back on target.</i>
		Commence procurement for new domiciliary care contracts, to enhance service delivery and cost effectiveness, with a view to new contracts being in place April 2008.		Project back on target. Draft commissioning strategy complete. Tender exercise underway. Additional resources for project team secured.
		Commence procurement for new residential care contracts, to enhance service delivery and cost effectiveness, with a view to new contracts being in place April 2008.		Additional Resources for the project team secured to work on the financial modelling and consult with providers. Work on the overall strategy has remained on target and it is still anticipated that the new contracts will be in place by April 09

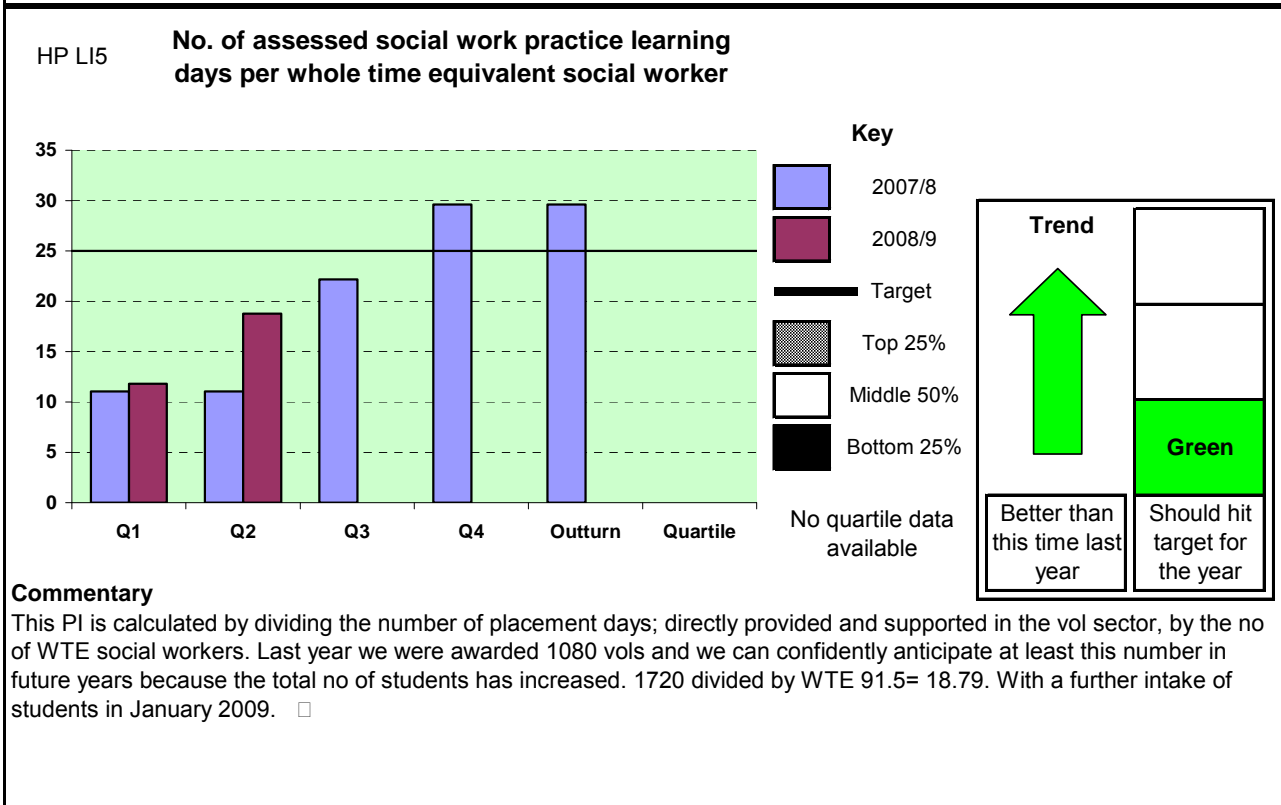
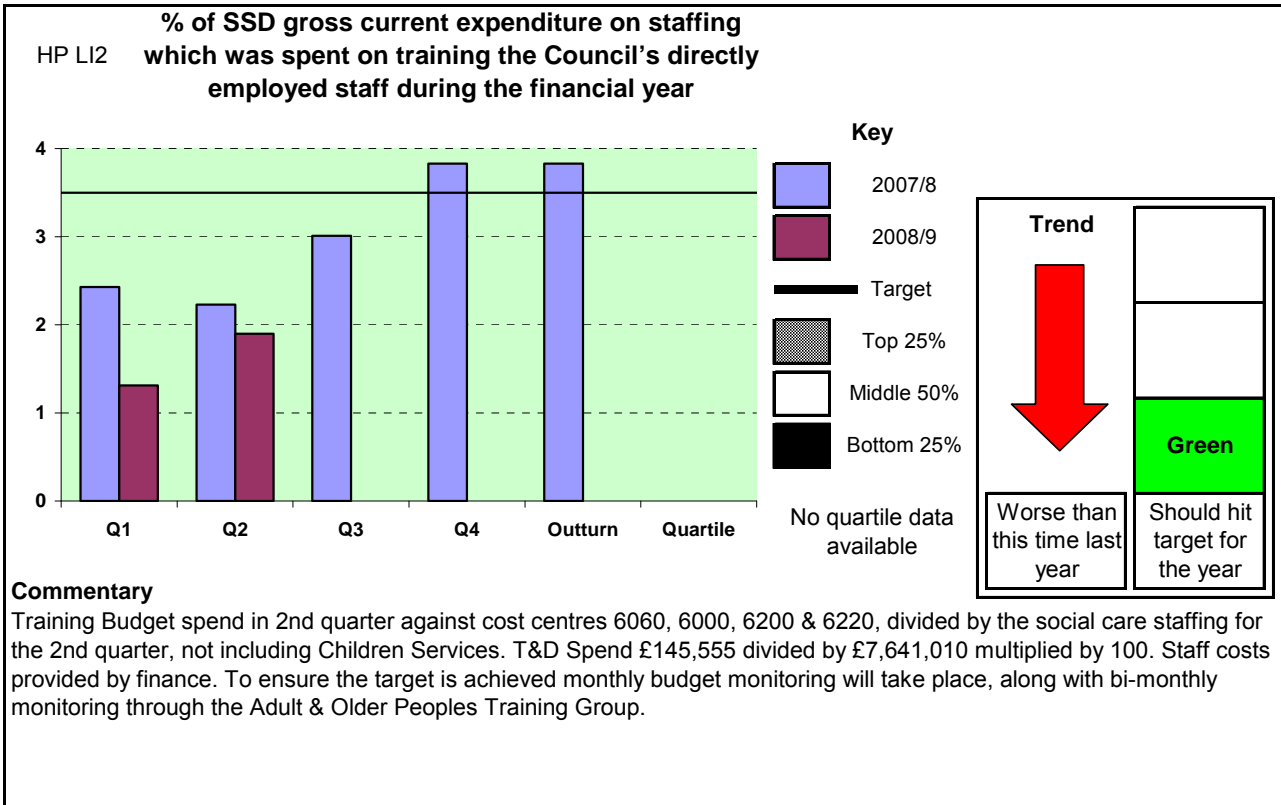
APPENDIX ONE - PROGRESS AGAINST OBJECTIVES/MILESTONES
Health & Partnerships

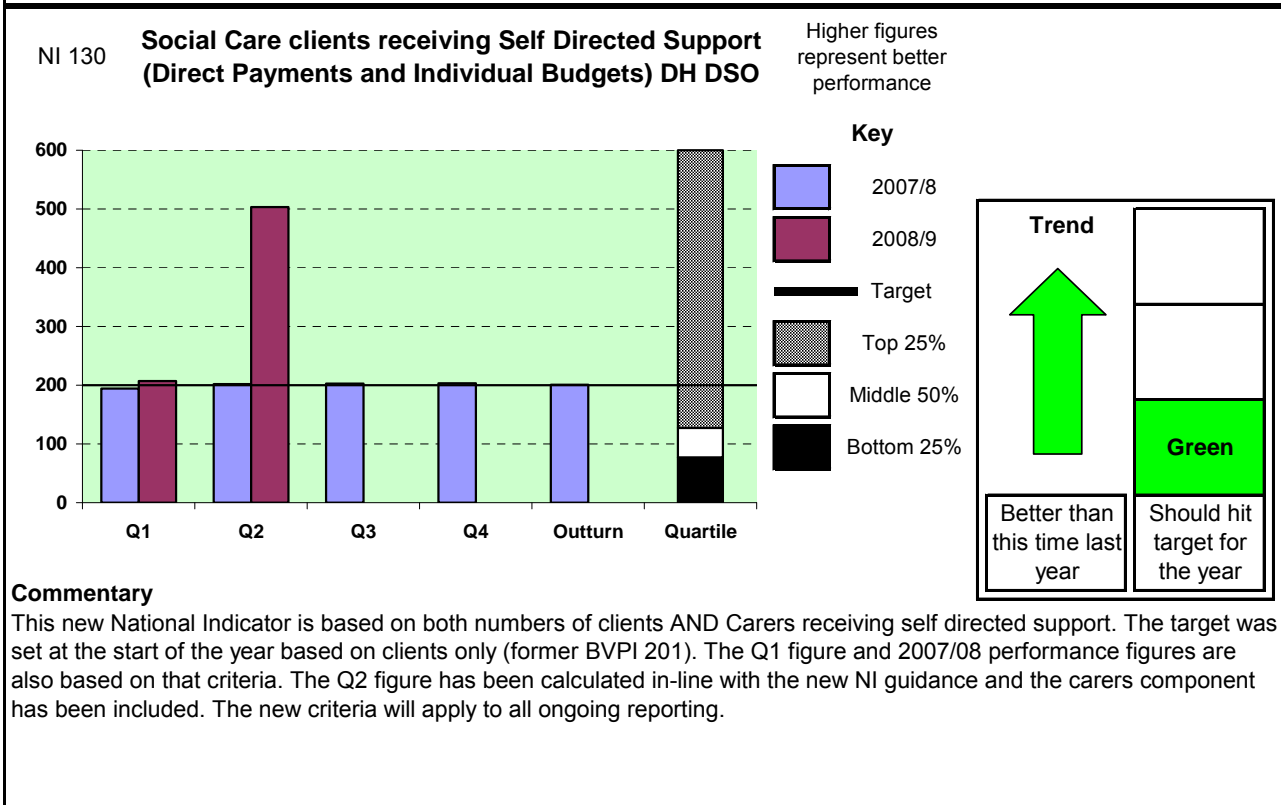
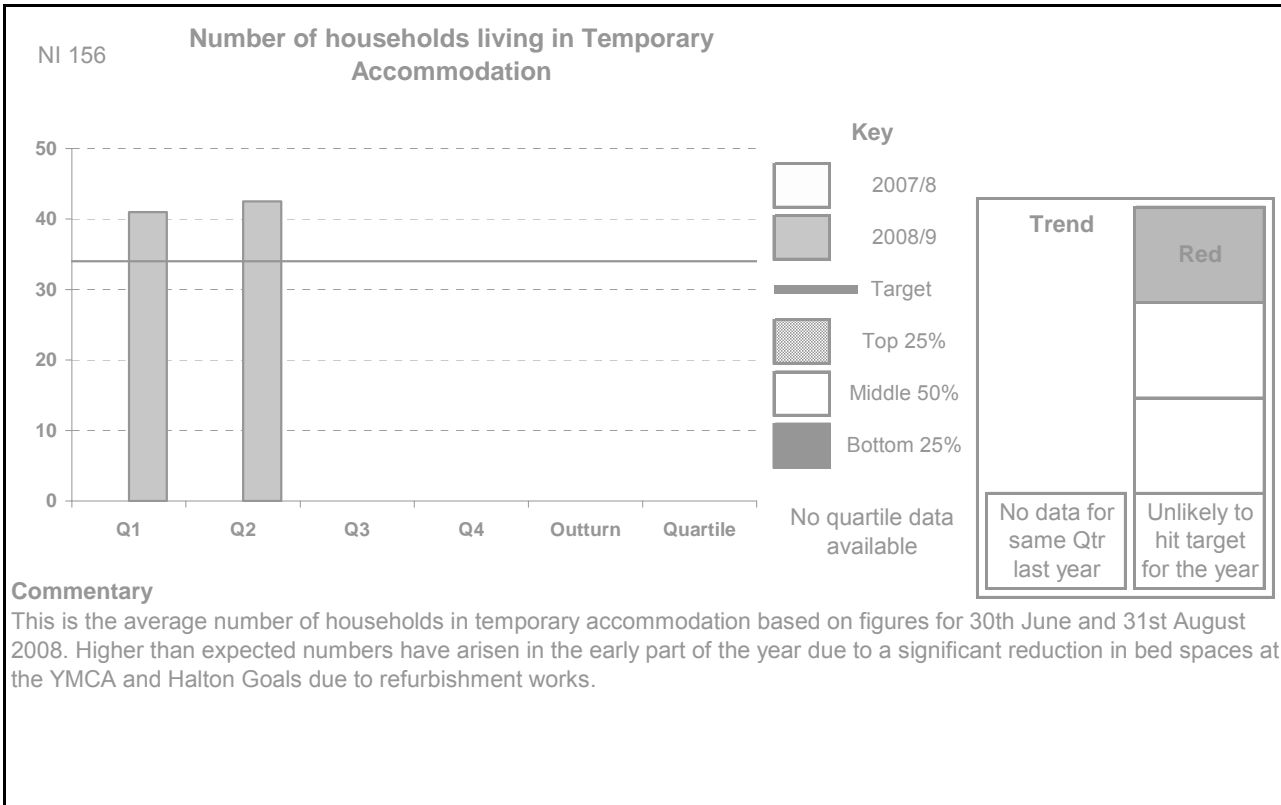
Service Plan Ref.	Objective	2008/09 Milestone	Progress to date	Commentary
		<p><i>Project team to be established to ensure implementation of the recommendations of the commissioning framework Mar 2009.</i></p>		<p><i>Dave Sweeney is in the process of establishing a team to progress the detail behind the section 75 agreement. This work will take into account the requirements set out in the Commissioning Framework.</i></p>
		<p><i>Monitor, on a quarterly basis, the financial strategy to ensure that changing service requirements are being met by allocated funding March 2009</i></p>		<p><i>A draft Directorate three-year financial strategy 2008/9 to 2010/11 was prepared for SMT. This included the Council background and context, future Directorate Service developments and pressures, CSR 2007 three year grant announcements, SP funding, Gershon I & II, detailed analysis for 2008/9 and the following years 2009/10 to 2010/11. The further development of this strategy for 2009/10 and 2010/11 will continue in 2008/9 to support the budget process 2009/10.</i></p>

**APPENDIX ONE - PROGRESS AGAINST OBJECTIVES/MILESTONES
Health & Partnerships**

Service Plan Ref.	Objective	2008/09 Milestone	Progress to date	Commentary
		Review the usage of Direct Payments against performance target strategy to ensure that targets on uptake are being met March 2009		Continued excellent performance maintained, though numbers have fallen in Older Peoples Services as some service users have died and others have obtained Continuing Healthcare funding. At the 30th September there were 192 service users (compared to 191 at 31.3.2008) and 219 carers in the first six months receiving their service using a Direct Payment.
		<i>Assess, on a quarterly basis, the impact of the Fairer Charging Policy strategy to ensure that the charging policy is fair and operates consistently with the overall social care objectives Dec 2008.</i>		<i>Charging policy consultation group convened with appropriate representatives from all service areas in attendance at the first meeting on 29.9.2008. The Portfolio Holder for Health will attend the Group. Charging Policy and Income received in Halton has been benchmarked against neighboring Local Authorities, and will be further discussed with this group. A report will be prepared for Members detailing the findings of this consultation.</i>

**APPENDIX ONE - PROGRESS AGAINST OBJECTIVES/MILESTONES
Health & Partnerships**





Key Performance Indicators not reported this quarter;

NI 127, Self reported experience of Social Care Users





This indicator cannot be reported on in quarter 1 as it is based on a survey which does not take place until Quarter 4.

NI 182, Satisfaction of Businesses with Local Authority Regulation Services




This is a new indicator that forms part of the new National Indicator data set and systems are not currently in place to calculate the out-turn percentage. However, the indicator is based on survey data and in Quarter 1, 40% of Consumer Protection respondees gave the highest rating whilst 60 % gave the second highest rating in answer to the two relevant questions. The single, year-end return will also include the performance of the Environmental Health and Licensing functions of the Council.

NI 183, Impact of LA Regulatory Services on the Fair Trading Environment


This is a new indicator that forms part of the new National Indicator data set. It is a year-end return based on four factors, two of which are to be provided to local authorities by central government at year-end. Hence it is not possible to provide quarterly performance information.

Ref.	Description	Actual 2007/08	Target 2008/09	Quarter 2	Progress	Commentary
Cost & Efficiency						
HP LI1	% of SSD directly employed posts vacant on 30 September	-	8	8.67		On target. Exit interview questionnaires continue to be analysed on an annual basis and reported to SMT. A new Recruitment and Retention Strategy is being developed and will be in place by the end of 2008.
Fair Access						
HP LI4	No. of initiatives undertaken to raise the profile of the Service in the 5 most deprived wards	-	5	2		A theatre group has begun working in St Mary's school in Windmill Hill exploring consumer issues around the theme of 'Making the Right Decisions', the script was developed jointly with Consumer Protection. Before the end of September, the theatre group will start work with the Park School in Windmill Hill.
Quality						
HP LI6	Percentage of consumer service users satisfied with the Trading Standards Service, when last surveyed	-	90	92		Target achieved, although the Service experienced a very low response rate. This was in spite of the fact that a prize draw was set up for all participants who returned a survey.
HP LI7	Percentage of Bereavement Service users who rated the staff courteousness / helpfulness as reasonable / good / excellent when last surveyed	-	96	100		The 21 survey forms that were returned included 19 responses to the relevant question about staff performance. All of these respondents rated this performance as reasonable/good/excellent.

**APPENDIX THREE - PROGRESS AGAINST OTHER INDICATORS
Health & Partnerships**

Ref.	Description	Actual 2007/08	Target 2008/09	Quarter 2	Progress	Commentary
HP LI8	Percentage of general Registration Service users who rated the staff's helpfulness / efficiency as excellent or good, when last surveyed.	-	96	98		The above figure related to the general survey that was conducted in February 2008. A total of 50 questionnaires were returned, representing a 70% response rate.
Service Delivery						
HP LI9	The % change in average number of families in temporary accommodation	-	-5	-11.8		Good performance on this indicator with a better reduction than at this time last. This percentage is based on figures for 30th June and 31st August 2008 compared with 30th June and 30th September 2007.
HP LI10	Number of households considering themselves homeless for whom advice casework intervention resolved their situation	2.66945 6066945 61	1.6	0		The Directorate established a Homelessness Welfare/Prevention Team in 2007 to assist in the prevention of Homelessness. This indicator has been carried over from the BVPI set. Although the service can evidence 104 successful interventions for April 2008 - June 2008 (equivalent to a BVPI indicator outturn of 2.12), these outcomes cannot be included for PI measurement purposes, due to the way in which the service is funded.
HP LI11	Proportion of statutory homeless households accepted as statutory homeless by LA within last 2 years	-	1.2	1.1		Only one case of repeat homelessness has been recorded out of 86 total homelessness acceptances for the period April 2008 - August 2008.

APPENDIX THREE - PROGRESS AGAINST OTHER INDICATORS
Health & Partnerships

Ref.	Description	Actual 2007/08	Target 2008/09	Quarter 2	Progress	Commentary
HP LI12	Has there been a reduction in cases accepted as homeless due to domestic violence that had previously been re-housed in the last 2 years by that LA as a result of domestic violence	-	Yes	0		This indicator is based on part 8 of the old BVPI 225. No repeat cases of homelessness attributable to domestic violence have been recorded this quarter.
NI 39	Alcohol-harm related hospital admission rates PSA 25	-	-	Refer to comment	-	This is a new National Indicator and the PCT is responsible for reporting the associated data. The data is not yet available, however an initial meeting has taken place and a follow-up meeting is due to be held at the end of October to review the data available against this PI. It is hoped that the data will be available to enable the PI to be reported in Q3.
NI 119	Self-reported measure of people's overall health and wellbeing DH DSO	-	-	Refer to comment	-	This indicator is based on the Place Survey which is not due to be undertaken until 2009.
NI 120	All-age all cause mortality rate PSA 18	-	-	Refer to comment	-	This is a new National Indicator and the PCT is responsible for reporting the associated data. The data is not yet available, however an initial meeting has taken place and a follow-up meeting is due to be held at the end of October to review the data available against this PI. It is hoped that the data will be available to enable the PI to be reported in Q3.


APPENDIX THREE - PROGRESS AGAINST OTHER INDICATORS
Health & Partnerships

Ref.	Description	Actual 2007/08	Target 2008/09	Quarter 2	Progress	Commentary
NI 121	Mortality rate from all circulatory diseases at ages under 75 DH DSO	-	-	Refer to comment	-	This is a new National Indicator and the PCT is responsible for reporting the associated data. The data is not yet available, however an initial meeting has taken place and a follow-up meeting is due to be held at the end of October to review the data available against this PI. It is hoped that the data will be available to enable the PI to be reported in Q3.
NI 122	Mortality from all cancers at ages under 75 DH DSO	-	-	Refer to comment	-	This is a new National Indicator and the PCT is responsible for reporting the associated data. The data is not yet available, however an initial meeting has taken place and a follow-up meeting is due to be held at the end of October to review the data available against this PI. It is hoped that the data will be available to enable the PI to be reported in Q3.
NI 123	16+ current smoking rate prevalence PSA 18	-	-	Refer to comment	-	This is a new National Indicator and the PCT is responsible for reporting the associated data. The data is not yet available, however an initial meeting has taken place and a follow-up meeting is due to be held at the end of October to review the data available against this PI. It is hoped that the data will be available to enable the PI to be reported in Q3.




**APPENDIX THREE - PROGRESS AGAINST OTHER INDICATORS
Health & Partnerships**

Ref.	Description	Actual 2007/08	Target 2008/09	Quarter 2	Progress	Commentary
NI 124	People with a long-term condition supported to be independent and in control of their condition DH DSO	-	-	Refer to comment	-	The data for this indicator comes from the PCT Patient Survey which is not due to be undertaken until 2009.
NI 126	Early access for women to maternity services PSA 19	-	-	Refer to comment	-	This is a new National Indicator and the PCT is responsible for reporting the associated data. The data is not yet available, however an initial meeting has taken place and a follow-up meeting is due to be held at the end of October to review the data available against this PI. It is hoped that the data will be available to enable the PI to be reported in Q3.
NI 128	User reported measure of respect and dignity in their treatment DH DSO	-	-	Refer to comment	-	This indicator cannot be reported at the current time. The Department for Communities and Local Government have not yet supplied information regarding how Local Authorities should measure this indicator. Once this is received, performance will be calculated and a report made at the earliest opportunity.
NI 137	Healthy life expectancy at age 65 PSA 17	-	-	Refer to comment	-	This indicator comes from the Place Survey which is not due to be undertaken until 2009.




APPENDIX THREE - PROGRESS AGAINST OTHER INDICATORS
Health & Partnerships

Ref.	Description	Actual 2007/08	Target 2008/09	Quarter 2	Progress	Commentary
HP LI13	% of SSD directly employed staff that left during the year.	7.69	8	3.69		Performance is on target at the half year stage. Exit interview questionnaires continue to be analysed on an annual basis and reported to SMT. A new Recruitment and Retention Strategy is being developed and will be in place by the end of 2008.
HP LI14	% of Social Services working days/shifts lost to sickness absence during the financial year.	9.48	9	Refer to comment	-	At the time of writing, data for quarter 2 is not yet available. A report will be made in quarter 3.
HP LI15	% of undisputed invoices, which were paid in 30 days.	97	97	Refer to comment	-	At the time of writing, data for quarter 2 is not yet available. A report will be made in quarter 3.
NI 12	Refused and deferred Houses in Multiple Occupation (HMO) license applications leading to immigration enforcement activity	-	-	Refer to comment	-	This is a new National Indicator is not due to be collected until 2009/10. The Home Office will lead on this indicator and further guidance is awaited.




APPENDIX THREE - PROGRESS AGAINST OTHER INDICATORS
Health & Partnerships

Key Objective	Risk Identified	Risk Treatment Measures	Target	Progress	Commentary
HP 2 Work with operational managers to make best use of the workforce and IT resources, to improve service delivery and assist services to continuously improve within a robust performance management framework	Failure to provide IT systems that record activity and care services provided places both the organisation and service users/carers at risk.	Data quality checking mechanisms to reconcile data to care arranged and payments made.	01/03/2009		Cross-match analyses between the Carefirst and MSR systems continue to be undertaken by the Performance and Data Team so that operational teams can check and amend records to ensure a true reflection of the provision of current care packages. Any anomalies are flagged up for further investigation and amendment.
		Managerial control of data inputters to ensure data is loaded accurately in a timely manner.	01/03/2009		Supervision of Data Input staff continues to be overseen by the Data Quality Project Co-ordinator to ensure that data is loaded in a timely manner and in accordance with operational procedures.
		1/4ly performance monitoring reports to SMT	01/03/2009		Reports continue to be submitted to SMT on a regular basis.





**APPENDIX FOUR – PROGRESS AGAINST RISK TREATMENT MEASURES
Health & Partnerships**

Key Objective	Risk Identified	Risk Treatment Measures	Target	Progress	Commentary
HP4 Ensure that effective financial strategies and services are in place to enable the Directorate to procure and deliver high quality value for money services that meet people's needs	Failure to provide a user interface for professionals to record details of assessments electronically places both the Health and Social Care organisations involved and service users / carers at risk	Monitor progress surrounding outcome of Strategic Review of IT systems and confirm SMT approval to continue.	01/03/2009		Review completed and decision taken by SMT (August'08) to go with Care Assess as the ESAP solution. Working Group to take forward work.
	Failure to enable data in assessments using SAP to be loaded directly into Carefirst places both the Health and Social Care organisations involved and service users / cares at risk.	Monitor progress surrounding outcome of Strategic Review of IT systems and confirm SMT approval to continue	01/03/2009		ESAP working group to be established. Preliminary discussions to be held between HBC, PCT and Corporate IT
	Failure to enable Health and other agency services to download SAP data collected directly into their information systems places both the Health and Social Care organisations involved and service users / carers at risk.	Monitor progress surrounding outcome of Strategic Review of IT systems and confirm SMT approval to continue.	01/03/2009		The implementation of SAP within Carefirst 6 has been approved by SMT. Access to SAP data by partner organisations will need to be considered as part of the implementation of SAP via Carefirst.


**APPENDIX FOUR – PROGRESS AGAINST RISK TREATMENT MEASURES
Health & Partnerships**

Key Objective	Risk Identified	Risk Treatment Measures	Target	Progress	Commentary
	Failure to provide mobile workers with the ability to input data electronically places both the Health and Social Care organisations and service users / carers at risk.	Monitor progress surrounding outcome of Strategic Review of IT systems and confirm SMT approval to continue	01/03/2009		Mobile working to be considered as part of the scope required for the ESAP ProjectA digital pen pilot for reviewers is being scoped by Corporate IT – Need to ascertain priority area for the pilot.
	Lack of support from Senior Management	Senior manager to be identified as project sponsor, with regular updates to SMT.	01/03/2009		Peter Barron is SAP project sponsor
	Loss of key project staff	Ensure key staff are supported appropriately.	01/03/2009		Staff have left but to date the team have managed to cover activities. Adverts pending.

APPENDIX FOUR – PROGRESS AGAINST RISK TREATMENT MEASURES
Health & Partnerships

Strategy/Policy/Service	HIGH Priority Actions	Target	Progress	Commentary
Contract Monitoring	Monitoring of contracts with provider services – do residential/domiciliary providers employ staff from other backgrounds who have additional language skills which could be used to translate on behalf of service users whose first language is not English	2008/9		Liase with CHAWREC to explore work which could be undertaken with contracted providers to encourage staff who have additional language skills, for translation purposes, that could be used for service users whose first language is not English.
Cheshire, Halton & Warrington Race Equality Council (CHWREC)	Develop further links with CHAWREC	2008/9		CHAWREC has attended the Directorate Equalities Group to outline to the Group the organization's role and how Halton's funding is spent. There is scope for further work with CHAWREC, subject to additional funding, and opportunities for this is kept under constant review.
Corporate Equality Scheme	Contribute to a Corporate Working Group to simplify the Authority's equality-related policies/strategies etc to produce a Corporate Equality manual which is relevant and applicable to all Directorates	2008/9		The Directorate is currently contributing to the work being taken forward Corporately on the amalgamation of a number of equality related policies. A working group has been established to take forward this work.
	Health and Community EIA systems to be strengthened and adopted on a Corporate basis	2008/9		The Directorate is currently contributing to the work being taken forward Corporately on the revision of the EIA system. A working group has been established to take forward this work.

APPENDIX FIVE – PROGRESS AGAINST HIGH PRIORITY EQUALITY ACTIONS
Health & Partnerships

Diversity Training	Systems developed and implemented to ensure that all new staff attend Corporate Equality & Diversity training (1 day session); and all existing staff attend condensed Equality session.	2008/9		This is still being developed at a Corporate level. It is hoped to make E & D training mandatory. Within the Directorate, staff have the option of attending the Corporate training, and the Directorate also delivers it's own equality training.
---------------------------	--	--------	---	---

HEALTH & COMMUNITY - HEALTH AND PARTNERSHIP

Revenue Budget as at 30th September 2008

	Annual Revised Budget	Budget To Date	Actual To Date	Variance To Date (overspend)	Actual Including Committed Items
	£'000	£'000	£'000	£'000	£'000
Expenditure					
Employees	3,442	1,628	1,623	5	1,715
Premises Support	244	0	0	0	0
Other Premises	47	10	5	5	6
Supplies & Services	470	158	162	(4)	209
Training	226	10	7	3	16
Transport	16	8	10	(2)	10
Departmental Support Services	169	0	0	0	0
Central Support Services	602	0	0	0	0
Agency Related	248	107	114	(7)	114
Supporting People Payments to Providers	7,603	3,015	3,011	4	3,011
Specific Grants	14	0	0	0	0
Asset Charges	1,222	0	0	0	0
Total Expenditure	14,303	4,936	4,932	4	5,081
Income					
Sales	-13	-7	-6	(1)	-6
Receivership	-28	-16	-32	16	-32
Rents	-65	-63	-102	39	-102
Supporting People Main Grant	-7,659	-3,818	-3,816	(2)	-3,816
Disabled Facilities Grant	-40	-30	-32	2	-32
Departmental Support Services	-3,730	0	0	0	0
Other Grants	-626	-345	-349	4	-349
Re-imburements	-170	-169	-183	14	-183
Other Income	-142	-58	-58	0	-58
Total Income	-12,473	-4,506	-4,578	72	-4,578
Net Expenditure	1,830	430	354	76	503

Comments on the above figures:

In overall terms the revenue spending at the end of Quarter 2 is £76k below budget profile, due in the main to the overachievement of income targets.

Receivership income has continued to overachieve against budget profiles during the second quarter of the year. This is due to the continued trend of service users changing from appointee to receivership status in line with the Mental Health Act. The additional income will be used to fund a post in order to meet current demand and facilitate the transfer of appointee service users from Halton Supported Housing Network to the Appointee and Receivership section.

Rents received during this period continue to be higher than anticipated at budget setting time

Other income includes £58k received from the PCT to be spent on training. This income relates to the future training of Council, PCT and External Provider staff, which are members of the Joint Training Partnership, previously managed by the PCT and now managed by HBC.

Health And Partnerships

Capital Projects as at 30th September 2008

	2008/9 Capital Allocation £'000	Allocation To Date £'000	Actual Spend To Date £'000	Allocation Remaining £'000
<u>Private Sector Housing</u>				
Housing Grants/Loans	284	130	115	169
Disabled Facilities Grants	1,573	190	181	1,392
Travellers' Transit Site	474	425	420	54
Home Link	10	0	0	10
Energy Promotion	100	5	4	96
Riverview	55	5	4	51
Adaptations Initiative	92	10	0	92
Contingency	194	0	0	194
Total Expenditure	2,782	765	724	2,058

HEALTH & COMMUNITY – LOCAL STRATEGIC PARTNERSHIP BUDGET

Budget as at 30th September 2008

	Annual Budget	Budget To Date	Actual To Date	Variance To Date (Overspend)	Actual Including Committed Items
	£'000	£'000	£'000	£'000	£'000
Priority 1 Healthy Halton					
Diet & Exercise Programme	22	11	0	11	0
Vol. Sector Counselling Proj.	40	10	5	5	5
Info. Outreach Services	34	10	9	1	9
Reach for the Stars	35	9	0	9	0
Health & Comm Care & Vol Sector Carers' Forum	40	10	10	0	10
Healthy Living Programme	20	5	0	5	0
Advocacy	64	25	21	4	21
Priority 2 Urban Renewal					
Landlord Accreditation Programme	30	15	19	(4)	19
Priority 4 Employment Learning & Skills					
Halton Family Group	31	8	0	8	0
Voluntary Sector Sustainability	7	2	0	2	0
Priority 5 Safer Halton					
Good Neighbour Pilot	10	4	2	2	2
Grassroots Development	9	4	2	2	2
Total Expenditure	342	113	68	45	68

HEALTH & COMMUNITY

Capital Budget as at 30th September 2008

	2008/09 Capital Allocation £000	Allocation To Date £000	Actual Spend To Date £000	Allocation Remaining £000
<u>Social Care & Health</u>				
Redesign Oakmeadow Communal Spaces & Furnishings	72	0	0	72
Major Adaptations for Equity release/Loan Schemes	100	0	0	100
Pods utilising DFG	40	0	0	40
Women's Centre	19	3	2	17
DDA	24	0	0	24
Total Spending	255	3	2	253

It is anticipated the capital budget will be fully committed by the end of the year.

FAIR TRADING & LIFE EVENTS

Revenue Budget as at 30th September 2008

	Annual Revised Budget £'000	Budget To Date £'000	Actual To Date £'000	Variance To Date (overspend) £'000	Actual Including Committed Items £'000
<i>Expenditure</i>					
Employees	754	368	380	(12)	385
Premises Support	120	0	0	0	0
Other Premises	255	48	46	2	75
Hired & Contracted Services	52	24	26	(2)	27
Supplies & Services	100	60	64	(4)	117
Transport	26	12	12	0	13
Support Services	402	0	0	0	0
Asset Charges	58	0	0	0	0
Total Expenditure	1,767	512	528	(16)	617
<i>Income</i>					
Sales	-88	-37	-63	26	-63
Fees & Charges	-646	-281	-281	0	-281
Grants	-1	-1	-1	0	-1
Rents	-4	-4	-3	(1)	-3
Support Recharge	-93	0	0	0	0
Total Income	-832	-322	-347	25	-347
Net Expenditure	935	190	181	9	270

Comments on the above figures:

In overall terms the revenue spending to the end of quarter 2 is £9,000 below the budget profile.

Expenditure on employees needs to be monitored. The 2008/09 Budget includes a £75,000 saving item relating to the proposed outsourcing of the Consumer Protection Service. Whilst negotiations are currently underway, this transfer has yet to take place, and will not take place until 1st December at the earliest. It would therefore seem prudent to assume that this saving will not be fully achieved during the current financial year from within this Division's budgets. However, a number of vacant posts have been kept unfilled with a view towards contributing to this savings item, and the current spend above budget profile on employee costs for the first two

quarters is in the region of £12,000. (Note that without the £75,000 savings item, spend on employee costs for the 2 quarters would have been under the budget profile by £25,500).

Income budgets are running broadly to target at this stage in the year. Income from burials and cremations is running below the budget profile, although this is offset by memorials income running above target. However, due to the nature of the service it is difficult to estimate whether this trend will continue for the year.

Capital Projects as at 30th September 2008

	2008-09 Capital Allocation £'000	Allocation To Date £'000	Actual Spend To Date £'000	Allocation Remaining £'000
Headstone Safety Programme	50	9	0	50




Bereavement Services Capital Programme

Approximately £21k of the total spend will fund the capitalisation of a salary to deliver the scheme. This will be journalled across at year-end. Sufficient materials for the scheme were carried forward from last year, so no spend on materials / equipment was planned for Q1, and an original planned spend of £9k in Q2 was deferred to Q3.

LSP, External or Grant Funded Items as at 30th September 2008

	Annual Revised Budget £'000	Budget To Date £'000	Actual To Date £'000	Variance To Date (overspend) £'000	Actual Including Committed Items £'000
Budgeting Skills Project	33	16	8	8	8

The traffic light symbols are used in the following manner:

	<u>Objective</u>	<u>Performance Indicator</u>
<u>Green</u>	 <p>Indicates that the <u>objective is on course to be achieved</u> within the appropriate timeframe.</p>	<p>Indicates that the <u>target is on course to be achieved</u>.</p>
<u>Amber</u>	 <p>Indicates that it is <u>unclear</u> at this stage, due to a lack of information or a key milestone date being missed, <u>whether the objective will be achieved</u> within the appropriate timeframe.</p>	<p>Indicates that it is either <u>unclear</u> at this stage or too early to state whether the target is on course to be achieved.</p>
<u>Red</u>	 <p>Indicates that it is <u>highly likely or certain that the objective will not be achieved</u> within the appropriate timeframe.</p>	<p>Indicates that the <u>target will not be achieved</u> unless there is an intervention or remedial action taken.</p>