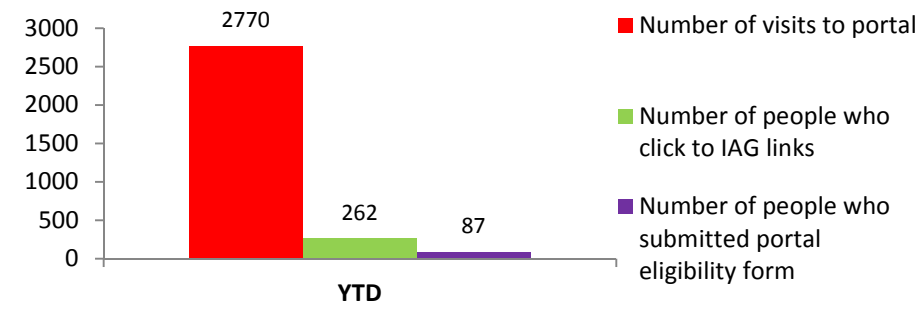
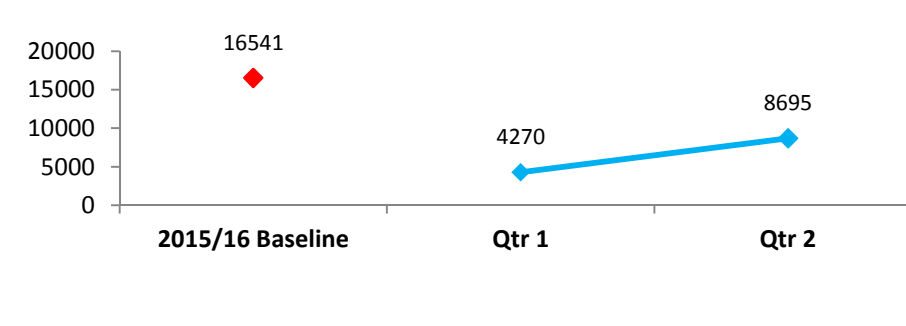
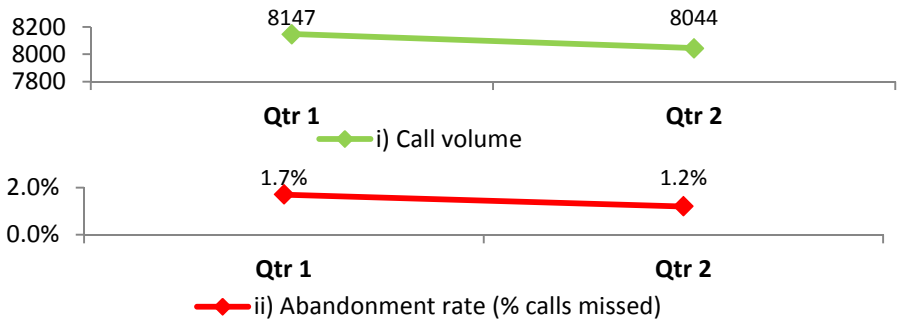
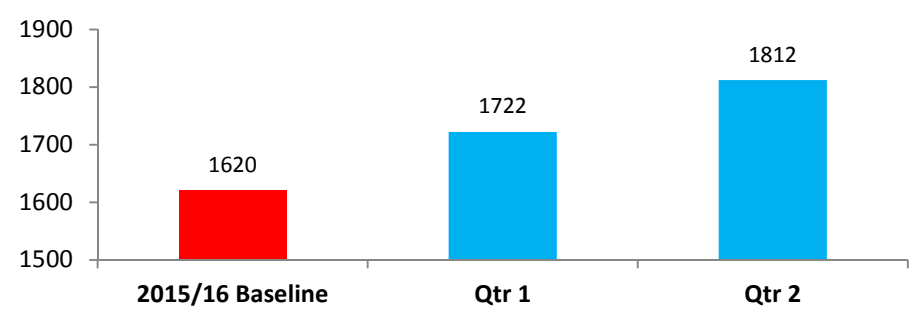
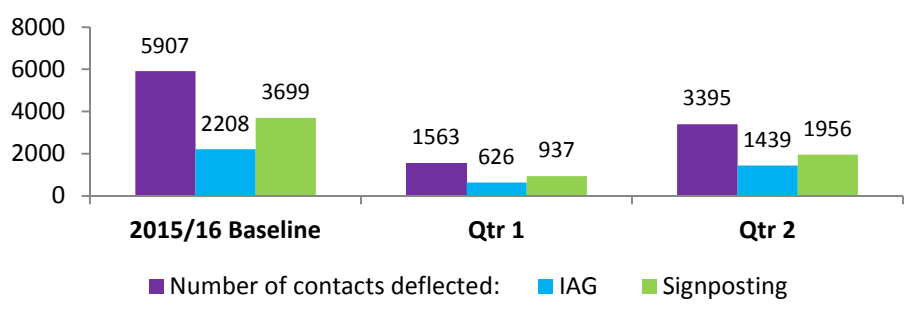
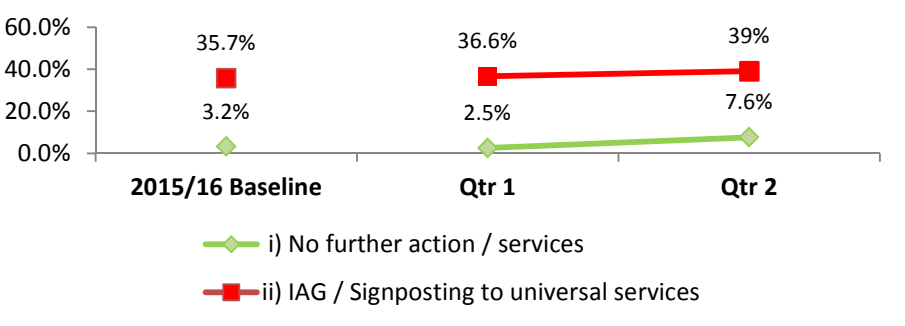


APB1a - ASC Portal (JM)	APB1b - Total number of ASC contacts received (HM)	ABP1c - Effectiveness of call handling: (HM)
 <p>Number of visits to portal: 2770 Number of people who click to IAG links: 262 Number of people who submitted portal eligibility form: 87</p>	 <p>2015/16 Baseline: 16541 Qtr 1: 4270 Qtr 2: 8695</p>	 <p>Qtr 1: i) Call volume: 8147, ii) Abandonment rate: 1.7% Qtr 2: i) Call volume: 8044, ii) Abandonment rate: 1.2%</p>
<p>DATA - Data relating to the use of the ASC Portal may be significantly inflated due to the following activities being included in the data: 1 - Testing done to ensure that enhancements applied did not disrupt use of the portal. 2 - The portal was marketed and demonstrated to partners and council teams. 3 - Other local authorities have been using our portal site to review the work we have done. We are unable to isolate any customer use from the activity detailed above, other than the submissions received by Contact and Response. ACTION - Over time testing and promotional activity will reduce giving a clearer picture of genuine customer user of the portal. Data on those users accessing Information, Advice and Guidance through links on in the portal is only available for September. This is encouraging, with 262 clicks for IAG made during the month.</p>	<p>DATA - Need to check impact of recording response work on contacts data - Using the contacts form to record response activity will increase overall figure but relates entirely to existing customers so need to be excluded if the contacts received figure relates to new contacts. Head of Service and Team Leader lead to clarify with and determine future reporting parameters. Need to cross reference with portal traffic data.</p>	<p>DATA - Data indicates good performance in relation to call handling. Trial reduction of numbers of staff allocated to telephone cover over Christmas period will see impact in Q3 figures and review.</p>
ABP1d - Number of repeat contacts within 12 months with same contact reason for the repeat contact (HM)	ABP1e - Action taken as a result of contact: (HM)	ABP1f - Percentage of contacts leading to: (HM)
 <p>2015/16 Baseline: 1620 Qtr 1: 1722 Qtr 2: 1812</p>	 <p>2015/16 Baseline: 5907 (deflected), 2208 (IAG), 3699 (signposting) Qtr 1: 1563 (deflected), 626 (IAG), 937 (signposting) Qtr 2: 3395 (deflected), 1439 (IAG), 1956 (signposting)</p>	 <p>2015/16 Baseline: i) No further action: 3.2%, ii) IAG / Signposting: 35.7% Qtr 1: i) No further action: 2.5%, ii) IAG / Signposting: 36.6% Qtr 2: i) No further action: 7.6%, ii) IAG / Signposting: 39%</p>
<p>DATA - Need to check impact of using response data in this data set. New indicator, needs some analysis to understand what data is saying eg successfully deflected for a period/not getting right first time/anything else.</p>	<p>DATA - In right direction. Still some improvement expected in both data accuracy and performance. Need to understand impact of portal/ online self service</p>	<p>DATA - In right direction. Still some improvement expected in both data accuracy and performance. Need to understand impact of portal/ online self service</p>

<p>ABP1g - Percentage of contacts acted upon with 24 hours (HM)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>81.5%</td> </tr> <tr> <td>Qtr 1</td> <td>76.8%</td> </tr> <tr> <td>Qtr 2</td> <td>68.20%</td> </tr> </tbody> </table>	Period	Percentage	2015/16 Baseline	81.5%	Qtr 1	76.8%	Qtr 2	68.20%	<p>APB2a - Percentage of new contacts who go on for a further assessment (HM)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>30.8%</td> </tr> <tr> <td>Qtr 1</td> <td>32.4%</td> </tr> <tr> <td>Qtr 2</td> <td>35.30%</td> </tr> </tbody> </table>	Period	Percentage	2015/16 Baseline	30.8%	Qtr 1	32.4%	Qtr 2	35.30%	<p>APB2b - Number of assessments completed by type (HM)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Number of assessments completed</th> <th>Contact</th> <th>SAQ</th> <th>OT</th> <th>Other</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>7555</td> <td>4022</td> <td>1586</td> <td>1935</td> <td></td> </tr> <tr> <td>Qtr 1</td> <td>1689</td> <td>884</td> <td>470</td> <td>335</td> <td></td> </tr> <tr> <td>Qtr 2</td> <td>3415</td> <td>1792</td> <td>926</td> <td>697</td> <td>214</td> </tr> </tbody> </table>	Period	Number of assessments completed	Contact	SAQ	OT	Other	2015/16 Baseline	7555	4022	1586	1935		Qtr 1	1689	884	470	335		Qtr 2	3415	1792	926	697	214
Period	Percentage																																									
2015/16 Baseline	81.5%																																									
Qtr 1	76.8%																																									
Qtr 2	68.20%																																									
Period	Percentage																																									
2015/16 Baseline	30.8%																																									
Qtr 1	32.4%																																									
Qtr 2	35.30%																																									
Period	Number of assessments completed	Contact	SAQ	OT	Other																																					
2015/16 Baseline	7555	4022	1586	1935																																						
Qtr 1	1689	884	470	335																																						
Qtr 2	3415	1792	926	697	214																																					
<p>DATA - Data indicates reduction in numbers of contacts dealt with in 24 hours - small but persistent backlog of unallocated cases due to staffing shortage. Business case developed for overtime to tackle ahead of Q3.</p>	<p>DATA - Data indicates more contacts converting to contact assessments - not as anticipated from local data collection . Head of Service to check parameters of report for accuracy / data quality.</p>	<p>DATA - Same number and type of assessments as last year</p>																																								
<p>ABP2c - Outcomes following assessment - numbers found to be: (HM)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>i) Eligible needs</th> <th>ii) No eligible needs</th> <th>iii) Screened</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>5575</td> <td>788</td> <td>1192</td> </tr> <tr> <td>Qtr 1</td> <td>1336</td> <td>269</td> <td>84</td> </tr> <tr> <td>Qtr 2</td> <td>2750</td> <td>452</td> <td>158</td> </tr> </tbody> </table>	Period	i) Eligible needs	ii) No eligible needs	iii) Screened	2015/16 Baseline	5575	788	1192	Qtr 1	1336	269	84	Qtr 2	2750	452	158	<p>ABP2d - Percentage of assessments completed with 28 days / agreed timescales. (AO)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>92.60%</td> </tr> <tr> <td>Qtr 1</td> <td>90.90%</td> </tr> <tr> <td>Qtr 2</td> <td>89.20%</td> </tr> </tbody> </table>	Period	Percentage	2015/16 Baseline	92.60%	Qtr 1	90.90%	Qtr 2	89.20%	<p>ABP2e - Characteristics of the customer population: for those deemed eligible to receive support following a completed assessments (AO)</p> <p style="text-align: center;">Please see data table</p>																
Period	i) Eligible needs	ii) No eligible needs	iii) Screened																																							
2015/16 Baseline	5575	788	1192																																							
Qtr 1	1336	269	84																																							
Qtr 2	2750	452	158																																							
Period	Percentage																																									
2015/16 Baseline	92.60%																																									
Qtr 1	90.90%																																									
Qtr 2	89.20%																																									
<p>DATA - More assessments resulting in screening out. Data indicating higher rate of deflection at point of assessment (as opposed to contact). Need to develop more formal approaches to strengths/asset based assessment and staff understanding of community alternatives.</p> <p>Data does not give us any cause of concern. However we need to maintain performance</p>	<p>DATA - Data tells us that we are seeing a reduction in the timely completion of assessments from our baseline and Q1 performance.</p> <p>ACTION - Assessments are most probably completed within timescales at the front door. Need to understand what actions are needed within specialities and localities and a discussion will be scheduled to get a clearer picture and identify where improvement may be driven. Action required to ensure that the downward trajectory is not a trend that continues.</p>	<p>DATA - Data does not give us any cause of concern. However we need to continue to monitor demographic profile of our customer base.</p>																																								

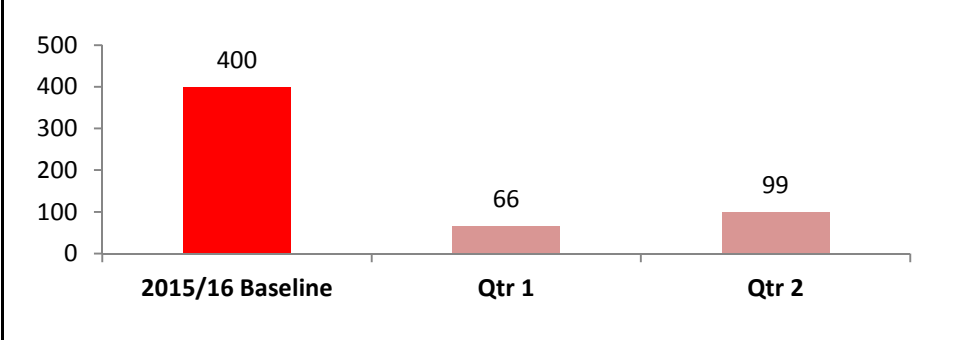
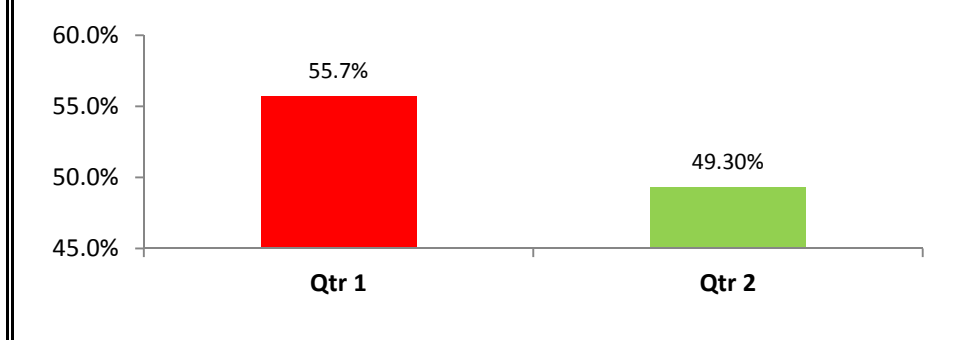
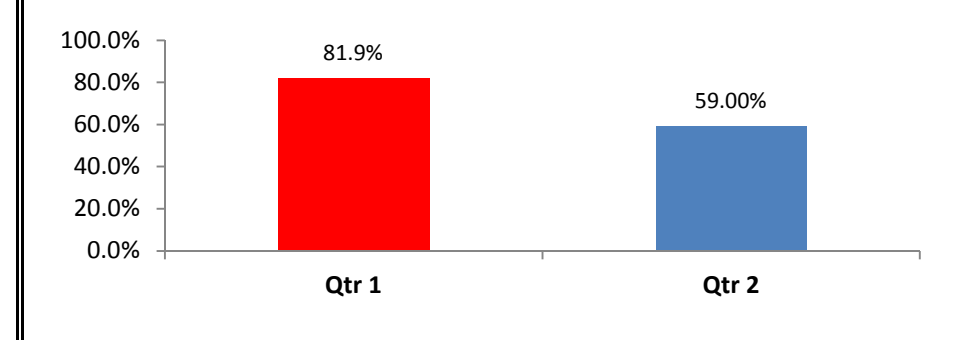
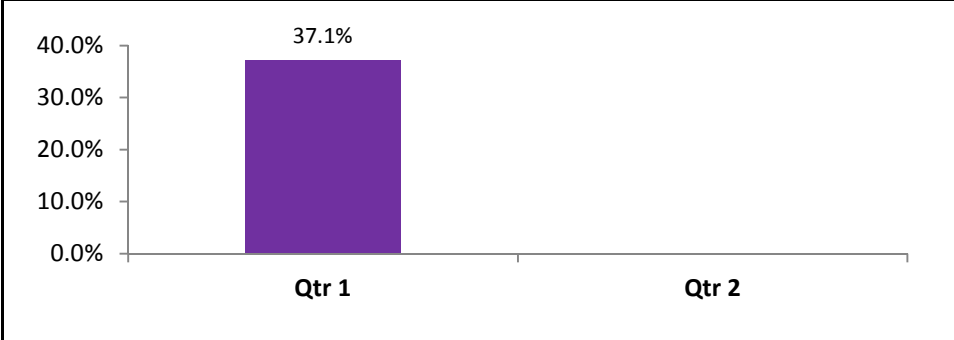
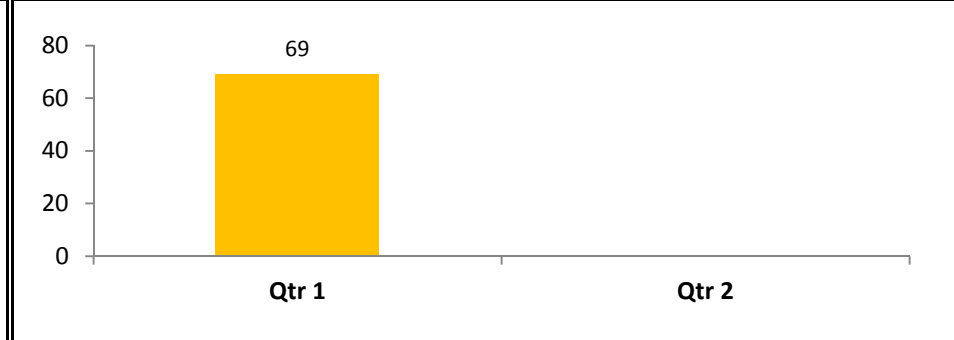
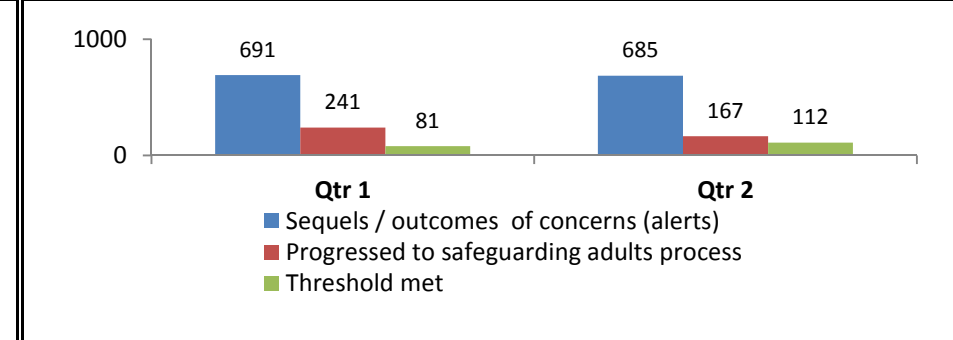
<p>ABP2f - Number of requests from new clients</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Number of requests</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>14589</td> </tr> <tr> <td>Qtr 1</td> <td>3649</td> </tr> <tr> <td>Qtr 2</td> <td>6915</td> </tr> </tbody> </table>	Period	Number of requests	2015/16 Baseline	14589	Qtr 1	3649	Qtr 2	6915	<p>ABP2g - Number of people entering ASC to receive a long term-support (LTS) package of care (SALT definition) (AO)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Number of people</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>499</td> </tr> <tr> <td>Qtr 1</td> <td>115</td> </tr> <tr> <td>Qtr 2</td> <td>233</td> </tr> </tbody> </table>	Period	Number of people	2015/16 Baseline	499	Qtr 1	115	Qtr 2	233	<p>ABP2h - Number of people in receipt of Assistive Technology (JS-B)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>No of people in receipt of Assistive Technology</th> <th>Of which were not known to AT service</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>1910</td> <td>1507</td> </tr> <tr> <td>Qtr 1</td> <td>422</td> <td>299</td> </tr> <tr> <td>Qtr 2</td> <td>843</td> <td>619</td> </tr> </tbody> </table>	Period	No of people in receipt of Assistive Technology	Of which were not known to AT service	2015/16 Baseline	1910	1507	Qtr 1	422	299	Qtr 2	843	619												
Period	Number of requests																																									
2015/16 Baseline	14589																																									
Qtr 1	3649																																									
Qtr 2	6915																																									
Period	Number of people																																									
2015/16 Baseline	499																																									
Qtr 1	115																																									
Qtr 2	233																																									
Period	No of people in receipt of Assistive Technology	Of which were not known to AT service																																								
2015/16 Baseline	1910	1507																																								
Qtr 1	422	299																																								
Qtr 2	843	619																																								
<p>DATA - The data is encouraging with a forecast of a reduction in customers approaching ASC ACTION - Maintain positive shift primarily delivered through the demand management project.</p>	<p>DATA - On the first 6 month performance the forecast is that there will be fewer customers needing long term support ACTION - Maintain current performance although no immediate action required. If trend continues we looking at a 6% reduction this year as compared to last year however we need to analyse the package costs associated with the new customers to ensure that the reduction in numbers translates to overall cost to the department.</p>	<p>DATA - There has been a decrease in the uptake of AT for quarters 1 and 2 when compared to the last two quarters last year. This decrease is predominantly due a reduction in the amount of standalone equipment referred for by ASC (1106 items of Stand Alone equipment provided in Q3 & Q4 2015 compared to 817 items of Stand Alone equipment provided in Q1 & Q2 – a decrease of 26%). This decrease in the provision of Stand Alone AT would be expected as more contacts into ASC services are diverted away from ASC via IAG and the web portal. There has also been a slight decrease (9%) for the provision of Telecare AT. ACTION - Although the reduction in the provision of Stand Alone was anticipated, there still needs to be more promotion and clarification to ASC staff as to the AT offer provided by ASC, what equipment is readily available via the offer and what type of equipment can be provided as ad-hoc's to meet specific service user needs.</p>																																								
<p>APB3a Number of contacts that go on to receive reablement (short term support to maximise independence) - SALT (JS-B)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Number of contacts</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>1419</td> </tr> <tr> <td>Qtr 1</td> <td>345</td> </tr> <tr> <td>Qtr 2</td> <td>791</td> </tr> </tbody> </table>	Period	Number of contacts	2015/16 Baseline	1419	Qtr 1	345	Qtr 2	791	<p>APB3b - Reablement - Outcomes post reablement: (JS-B)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>% fully independent</th> <th>% reduced needs</th> <th>% same level needs</th> <th>% increased needs</th> <th>% with on-going support needs</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>54.0%</td> <td>32.4%</td> <td>32.9%</td> <td>8.7%</td> <td>37.4%</td> </tr> <tr> <td>Qtr 1</td> <td>50.3%</td> <td>27.8%</td> <td>65.4%</td> <td>6.8%</td> <td>37.4%</td> </tr> <tr> <td>Qtr 2</td> <td>52.6%</td> <td>32.1%</td> <td>58.2%</td> <td>9.6%</td> <td>33.8%</td> </tr> </tbody> </table>	Period	% fully independent	% reduced needs	% same level needs	% increased needs	% with on-going support needs	2015/16 Baseline	54.0%	32.4%	32.9%	8.7%	37.4%	Qtr 1	50.3%	27.8%	65.4%	6.8%	37.4%	Qtr 2	52.6%	32.1%	58.2%	9.6%	33.8%	<p>ABP3c - Proportion of people (65+) who are still at home 91 days after discharge from hospital into reablement /rehabilitation services (JS-B)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Proportion of people (65+) still at home</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>88.2%</td> </tr> <tr> <td>Qtr 1</td> <td>94.5%</td> </tr> <tr> <td>Qtr 2</td> <td>93.3%</td> </tr> </tbody> </table>	Period	Proportion of people (65+) still at home	2015/16 Baseline	88.2%	Qtr 1	94.5%	Qtr 2	93.3%
Period	Number of contacts																																									
2015/16 Baseline	1419																																									
Qtr 1	345																																									
Qtr 2	791																																									
Period	% fully independent	% reduced needs	% same level needs	% increased needs	% with on-going support needs																																					
2015/16 Baseline	54.0%	32.4%	32.9%	8.7%	37.4%																																					
Qtr 1	50.3%	27.8%	65.4%	6.8%	37.4%																																					
Qtr 2	52.6%	32.1%	58.2%	9.6%	33.8%																																					
Period	Proportion of people (65+) still at home																																									
2015/16 Baseline	88.2%																																									
Qtr 1	94.5%																																									
Qtr 2	93.3%																																									
<p>DATA - The data shows that there is a 22% increase for Q2 in number and percentage of contacts that go on to receive reablement (short term support to maximise independence). If this trend was to continue until the end of the year the we can forecast and 11% increase from the previous years baseline.</p>	<p>DATA - Fully independent 2.3 % higher than Q1- moving in right direction Ongoing support needs 3.6% less than Q1 but seen a positive move. However the increased needs seems to have gone up by 2.8% for Q2 as compared to Q1. The increase is only slightly higher than the previous years baseline by 0.9%. The increase can be attributable to the a number of cases that had to be doubled up due to deterioration of the service users health after discharge from hospital. ACTION - To ensure service user is safe for discharge and able to utilise a home environment.</p>	<p>DATA - Q2 93.3% slightly decreased from Q1 at 94.5% . Generally very positive outcome as well above the baseline rate of 88.2%.</p>																																								

<p>ABP3d - Proportion of older people (65 and over) offered reablement services following discharge from hospital. (JS-B)</p> <table border="1"> <thead> <tr> <th>Category</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>3.9%</td> </tr> <tr> <td>Qtr 1</td> <td>3.4%</td> </tr> <tr> <td>Qtr 2</td> <td>3.6%</td> </tr> </tbody> </table>	Category	Value	2015/16 Baseline	3.9%	Qtr 1	3.4%	Qtr 2	3.6%	<p>ABP3e - Percentage of new enablement cases allocated with 48 hrs (MM)</p> <table border="1"> <thead> <tr> <th>Category</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Qtr 1</td> <td>77.0%</td> </tr> <tr> <td>Qtr 2</td> <td>79%</td> </tr> </tbody> </table>	Category	Value	Qtr 1	77.0%	Qtr 2	79%	<p>ABP3f - The percentage of those service users effectively enabled (QoL factors improved) (MM)</p> <table border="1"> <thead> <tr> <th>Category</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Qtr 1</td> <td>59.6%</td> </tr> <tr> <td>Qtr 2</td> <td>53.4%</td> </tr> </tbody> </table>	Category	Value	Qtr 1	59.6%	Qtr 2	53.4%		
Category	Value																							
2015/16 Baseline	3.9%																							
Qtr 1	3.4%																							
Qtr 2	3.6%																							
Category	Value																							
Qtr 1	77.0%																							
Qtr 2	79%																							
Category	Value																							
Qtr 1	59.6%																							
Qtr 2	53.4%																							
<p>DATA - Year-end forecast for those completing reablement in the year – 868 Q2 moving in the right direction as compared to Q1 but year-end numbers for those completing rehab have dropped from baseline ACTION - Reduced numbers is attributable to service user being commissioned to other services such as enablement and also to better advice and guidance by contact and response in diverting away from services.</p>	<p>DATA - Shows a 2% rise in the allocation of cases from the Enablement Referral Team (ERT) decision process in accepting cases onto enablement.</p>	<p>DATA - Shows a 6.2% decrease in the quality of life/satisfaction outcomes from the user post enablement. ACTION - Scrutiny of how we measure the 'success' of enablement is underway with the performance measure potentially changing.</p>																						
<p>ABP3g - Reablement / intermediate care outcomes; result from intervention: Sequel to ST Max as per SALT (JS-B / MM)</p> <table border="1"> <thead> <tr> <th>Category</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>1356</td> </tr> <tr> <td>Qtr 1</td> <td>341</td> </tr> <tr> <td>Qtr 2</td> <td>735</td> </tr> </tbody> </table>	Category	Value	2015/16 Baseline	1356	Qtr 1	341	Qtr 2	735	<p>ABP4a - Delayed transfers of care (attributable to ASC) per 100,000 pop. (AO)</p> <table border="1"> <thead> <tr> <th>Category</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>1.7</td> </tr> <tr> <td>Qtr 1</td> <td>0.2</td> </tr> <tr> <td>Qtr 2</td> <td>0.5</td> </tr> </tbody> </table>	Category	Value	2015/16 Baseline	1.7	Qtr 1	0.2	Qtr 2	0.5	<p>ABP4b - Percentage of discharges completed without a discharge notice. (AO)</p> <table border="1"> <thead> <tr> <th>Category</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Qtr 1</td> <td>64%</td> </tr> <tr> <td>Qtr 2</td> <td>71%</td> </tr> </tbody> </table>	Category	Value	Qtr 1	64%	Qtr 2	71%
Category	Value																							
2015/16 Baseline	1356																							
Qtr 1	341																							
Qtr 2	735																							
Category	Value																							
2015/16 Baseline	1.7																							
Qtr 1	0.2																							
Qtr 2	0.5																							
Category	Value																							
Qtr 1	64%																							
Qtr 2	71%																							
<p>DATA - Year-end forecast 1,470 More people completing reablement as compared to last year Q2 – a greater outcome of early cessation is noted (yr-end forecast 224 as compared to baseline – 161) this is due to a better feedback mechanism and reduction of services quicker once outcomes are reached to ensure a non dependence on services. Less people with no identified needs as compared to last year (16/17 forecast 332 as compared to 442 last year). The reduction in numbers with no identified needs could be due to better gate keeping by out contact and response team and offering advice and guidance to alternative services.</p>	<p>DATA - Data is extremely positive . ACTION - Need to maintain current levels of performance and be mindful of winter pressures.</p>	<p>DATA - Improvement from q1 from 64% to 71%. This saved bed days for the acute trust and is also patient centred. ACTION - Need to maintain current levels of performance. However, given the pressures within Health and the likely volume increase during winter pressures, this is likely to be a challenge.</p>																						

<p>APB5a - Allocations by team: (I) Number of cases allocated to each team (SD)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Total number of cases</th> <th>Total number of cases in allocation trays awaiting allocation to a worker awaiting</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>7603</td> <td>-</td> </tr> <tr> <td>Qtr 1</td> <td>7540</td> <td>303</td> </tr> <tr> <td>Qtr 2</td> <td>7482</td> <td>546</td> </tr> </tbody> </table> <p>Legend: Total number of cases (purple), Total number of cases in allocation trays awaiting allocation to a worker awaiting (red)</p>	Period	Total number of cases	Total number of cases in allocation trays awaiting allocation to a worker awaiting	2015/16 Baseline	7603	-	Qtr 1	7540	303	Qtr 2	7482	546	<p>ABP5d - Number of people in receipt in receipt of a long-term support (LTS) package of care</p> <table border="1"> <thead> <tr> <th>Period</th> <th>During the year</th> <th>Snap shot</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>6339</td> <td>5019</td> </tr> <tr> <td>Qtr 1</td> <td>5362</td> <td>5066</td> </tr> <tr> <td>Qtr 2</td> <td>5637</td> <td>5046</td> </tr> </tbody> </table> <p>Legend: During the year (blue), Snap shot (green)</p>	Period	During the year	Snap shot	2015/16 Baseline	6339	5019	Qtr 1	5362	5066	Qtr 2	5637	5046	<p>ABP5e - Number of permanent admissions into Residential / Nursing Care by narrow age-band and Primary Support Reason (BP)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Admissions</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>297</td> </tr> <tr> <td>Qtr 1</td> <td>61</td> </tr> <tr> <td>Qtr 2</td> <td>132</td> </tr> </tbody> </table>	Period	Admissions	2015/16 Baseline	297	Qtr 1	61	Qtr 2	132
Period	Total number of cases	Total number of cases in allocation trays awaiting allocation to a worker awaiting																																
2015/16 Baseline	7603	-																																
Qtr 1	7540	303																																
Qtr 2	7482	546																																
Period	During the year	Snap shot																																
2015/16 Baseline	6339	5019																																
Qtr 1	5362	5066																																
Qtr 2	5637	5046																																
Period	Admissions																																	
2015/16 Baseline	297																																	
Qtr 1	61																																	
Qtr 2	132																																	
<p>DATA - The number of cases waiting to be allocated has increased in East and West Locality Teams, Learning Disability (LD) and Adult Mental Health (AMH) ACTION - Q1 - Cases are prioritised in terms of</p> <ul style="list-style-type: none"> • safeguarding concerns • need to establish capacity/Court of Protection work required • level of risk, including health and safety risks, i.e. moving and handling • Service user's situation with informal support network balanced with risk of carer strain • Outstanding debt/contribution or mismanagement of DP/inappropriate use of services • whether adequate services are in place or not, • Whether preventative services will delay the need for statutory involvement, i.e., enablement – establishing baseline/levels of independence/strengths etc. before assessing 	<p>DATA - The direction of travel for the numbers of people in residential care are on par with our strategic objectives ie moving / diverting people away from residential care services and supporting people at home. There is a slight increase in number of people receiving support from the baseline data which can be partly accounted for by the fact that non planned services are now being put onto a support plan and therefore are now being counted. Also to note that the number of people in nursing care has increased indicating additional application of joint funding (FNC /CHC). Community packages have risen slightly in response to reducing numbers of residential care which is to be expected. The overall direction of travel is positive and no remedial action is required at this stage.</p>	<p>DATA - Forecast 264 - On track with this measure. Forecasting to meet the year end target both for 18-64 and 65+ age group. Because of the winter pressure we need to be aware of the impact. Decrease in admission in MH but increase in memory and cognition for the primary support reason</p>																																
<p>ABP5f - Number of Leavers from residential / nursing care by narrow age-band and Primary Support Reason (BP)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Leavers</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>415</td> </tr> <tr> <td>Qtr 1</td> <td>74</td> </tr> <tr> <td>Qtr 2</td> <td>164</td> </tr> </tbody> </table>	Period	Leavers	2015/16 Baseline	415	Qtr 1	74	Qtr 2	164	<p>ABP5g - Number of people who have had a review in a period by age-band and PSR (SM)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Reviews</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>3887</td> </tr> <tr> <td>Qtr 1</td> <td>924</td> </tr> <tr> <td>Qtr 2</td> <td>1820</td> </tr> </tbody> </table>	Period	Reviews	2015/16 Baseline	3887	Qtr 1	924	Qtr 2	1820	<p>ABP5h - Percentage of people in receipt of a service who has not been reviewed for: (SM)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Percentage of people in receipt of a service who has not been reviewed for 12 to 24 months</th> <th>Percentage of people in receipt of a service who has not been reviewed for 15 to 24 months</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>24.0%</td> <td>-</td> </tr> <tr> <td>Qtr 1</td> <td>25.4%</td> <td>-</td> </tr> <tr> <td>Qtr 2</td> <td>23.2%</td> <td>14.6%</td> </tr> </tbody> </table> <p>Legend: Percentage of people in receipt of a service who has not been reviewed for 12 to 24 months (green), Percentage of people in receipt of a service who has not been reviewed for 15 to 24 months (red)</p>	Period	Percentage of people in receipt of a service who has not been reviewed for 12 to 24 months	Percentage of people in receipt of a service who has not been reviewed for 15 to 24 months	2015/16 Baseline	24.0%	-	Qtr 1	25.4%	-	Qtr 2	23.2%	14.6%				
Period	Leavers																																	
2015/16 Baseline	415																																	
Qtr 1	74																																	
Qtr 2	164																																	
Period	Reviews																																	
2015/16 Baseline	3887																																	
Qtr 1	924																																	
Qtr 2	1820																																	
Period	Percentage of people in receipt of a service who has not been reviewed for 12 to 24 months	Percentage of people in receipt of a service who has not been reviewed for 15 to 24 months																																
2015/16 Baseline	24.0%	-																																
Qtr 1	25.4%	-																																
Qtr 2	23.2%	14.6%																																
<p>DATA - Forecast 328 - Less than the previous year. People living longer post admission is having an impact on the figures</p>	<p>DATA - Performance is improving but not at the rate required. The data needs to be reviewed to confirm that all work is being captured. ACTION - Heads of Service developing productivity reports and expectations, Team Leaders (TLs) to implement with workers. TLs to use monthly reports to target priorities for reviews. HoS has met with IT colleagues and identified data recording errors - guidance to be created and issued to staff. REVIEW - Reviews targets are monitored monthly through the Programme Board and the teams are targeting reviews. This work has meant that we are on target to perform better than 2015/16.</p>	<p>DATA - The data shows that teams have been prioritising the most out of date reviews so, whereas the numbers of reviews more than 24 months out of date is decreasing, the number between 15 and 24 months remains the same and the number between 12 and 24 months is increasing. ACTION - Heads of Service developing productivity reports and expectations, TLs to implement with workers. TLs to use monthly reports to target priorities for reviews. HoS has met with IT colleagues and identified data recording errors - guidance to be created and issued to staff. Team Leaders to use supervision to ensure workers are undertaking reviews on current caseloads. REVIEW - Reviews targets are monitored monthly through the Programme Board and the teams are targeting reviews. This work has meant that we are on target to perform better than 2015/16.</p>																																

<p>ABP5i - Number and percentage of people in receipt of a service who has not been reviewed for 24 months or more (SM)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Number of people</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>1012</td> <td>20.2%</td> </tr> <tr> <td>Qtr 1</td> <td>927</td> <td>18.3%</td> </tr> <tr> <td>Qtr 2</td> <td>778</td> <td>13.8%</td> </tr> </tbody> </table>	Period	Number of people	Percentage	2015/16 Baseline	1012	20.2%	Qtr 1	927	18.3%	Qtr 2	778	13.8%	<p>ABP5j - Direct Payments: (SD)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>The number of service users receiving DPs</th> <th>The number of services users receiving DPs with only set-up support from DPSS</th> <th>The number of users issued with pre-paid cards (new and existing service users)</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>2057</td> <td>0</td> <td>0</td> </tr> <tr> <td>Qtr 1</td> <td>1879</td> <td>328</td> <td>713</td> </tr> <tr> <td>Qtr 2</td> <td>1889</td> <td>0</td> <td>0</td> </tr> </tbody> </table>	Period	The number of service users receiving DPs	The number of services users receiving DPs with only set-up support from DPSS	The number of users issued with pre-paid cards (new and existing service users)	2015/16 Baseline	2057	0	0	Qtr 1	1879	328	713	Qtr 2	1889	0	0	<p>ABP5k - Number of people receiving domiciliary care (TS)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Number of people</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>2607</td> </tr> <tr> <td>Qtr 1</td> <td>1981</td> </tr> <tr> <td>Qtr 2</td> <td>2135</td> </tr> </tbody> </table>	Period	Number of people	2015/16 Baseline	2607	Qtr 1	1981	Qtr 2	2135
Period	Number of people	Percentage																																				
2015/16 Baseline	1012	20.2%																																				
Qtr 1	927	18.3%																																				
Qtr 2	778	13.8%																																				
Period	The number of service users receiving DPs	The number of services users receiving DPs with only set-up support from DPSS	The number of users issued with pre-paid cards (new and existing service users)																																			
2015/16 Baseline	2057	0	0																																			
Qtr 1	1879	328	713																																			
Qtr 2	1889	0	0																																			
Period	Number of people																																					
2015/16 Baseline	2607																																					
Qtr 1	1981																																					
Qtr 2	2135																																					
<p>DATA - The number of people who haven't received a review within 24 months is decreasing as these most out-of-date reviews are prioritised. ACTION - Reviews targets are monitored monthly through the Programme Board and the teams are targeting reviews. The most out of date reviews have been prioritised so the numbers are falling month-on-month</p>	<p>DATA - i) The number of service users receiving DPs -----1899 ii) The number of services users receiving DPs with only set-up support from DPSSupport Service -- 762 iii) Pre-Payment Card (PPC) cases 448 Existing (new and existing service users) not including pilot cases which is now 79 cases. Difficulty with encouraging service users and their suitable person to go over to the PPC service especially when they are loyal to third parties. Issues with DPSS providers discouraging the PPC to service users,</p>	<p>DATA - There has been a slight decrease in 2016-17 of individuals in receipt of directly commissioned Dom Care, compared to previous years. Whilst this may be representative of actual activity, there are many other factors that could potentially account for this. For example, it may be that a greater number of individuals are receiving Dom Care through a Direct Payment, which would therefore mask net activity as a seeming reduction . ACTION - Contract Team and Performance Team to undertake some more in-depth analysis of this in the near future. Added to forward work plan. The team will also investigate how Dom Care commissioned through Direct Payments can be tracked more clearly.</p>																																				
<p>ABP5l - Number of domiciliary care hours delivered (TS)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Number of hours</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>960000</td> </tr> <tr> <td>Qtr 1</td> <td>239636</td> </tr> <tr> <td>Qtr 2</td> <td>474858</td> </tr> </tbody> </table>	Period	Number of hours	2015/16 Baseline	960000	Qtr 1	239636	Qtr 2	474858	<p>ABP5m - Number of working age customers moved out of residential care into supported accommodation (RR)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Number of customers</th> </tr> </thead> <tbody> <tr> <td>Qtr 1</td> <td>7</td> </tr> <tr> <td>Qtr 2</td> <td>10</td> </tr> </tbody> </table>	Period	Number of customers	Qtr 1	7	Qtr 2	10	<p>ABP5n - The number of people with mental health needs (including dementia) in residential care (SM)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>By Primary Client Type</th> <th>By Primary Support Reason</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>143</td> <td>0</td> </tr> <tr> <td>Qtr 1</td> <td>136</td> <td>145</td> </tr> <tr> <td>Qtr 2</td> <td>138</td> <td>140</td> </tr> </tbody> </table>	Period	By Primary Client Type	By Primary Support Reason	2015/16 Baseline	143	0	Qtr 1	136	145	Qtr 2	138	140										
Period	Number of hours																																					
2015/16 Baseline	960000																																					
Qtr 1	239636																																					
Qtr 2	474858																																					
Period	Number of customers																																					
Qtr 1	7																																					
Qtr 2	10																																					
Period	By Primary Client Type	By Primary Support Reason																																				
2015/16 Baseline	143	0																																				
Qtr 1	136	145																																				
Qtr 2	138	140																																				
<p>DATA - Direction of travel slightly up in Q2, but down compared to previous year. Benchmarking data: 2014-15 = 931,777 hours 2015-16 = 954,930 hours Again, potential issues relating to Dom Care commissioned through a Direct Payment may be (but is not necessarily) a factor, and will be investigated as above. ACTION - Contracts Team and Performance Team to undertake some more in-depth analysis of this in the near future. Added to forward work plan. The teams will also investigate how Dom Care commissioned through Direct Payments can be tracked more clearly.</p>	<p>DATA - NEW MEASURE - NO COMPARABLE DATA</p>	<p>DATA - The numbers of people in res care has gone up by two from the previous quarter but remains lower than at the end of 2015/16. ACTION - All placements within residential care have to be authorised by a HoS and reasons for this are logged to ensure that any unmet needs are fed into commissioning plans. This is to continue.</p>																																				

<p>ABP5o - The number of people with a learning disability in residential care (RR)</p> <table border="1"> <caption>ABP5o - Residential Care (RR)</caption> <thead> <tr> <th>Period</th> <th>By Primary Client Type</th> <th>By Primary Support Reason</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>182</td> <td>-</td> </tr> <tr> <td>Qtr 1</td> <td>177</td> <td>178</td> </tr> <tr> <td>Qtr 2</td> <td>176</td> <td>177</td> </tr> </tbody> </table> <p>Legend: ■ By Primary Client Type: ■ By Primary Support Reason:</p>	Period	By Primary Client Type	By Primary Support Reason	2015/16 Baseline	182	-	Qtr 1	177	178	Qtr 2	176	177	<p>ABP5p - The number of people in interim residential care placements (BP)</p> <table border="1"> <caption>ABP5p - Interim Residential Care (BP)</caption> <thead> <tr> <th>Quarter</th> <th>Interim</th> <th>Short term</th> <th>Respite</th> </tr> </thead> <tbody> <tr> <td>Qtr 1</td> <td>5</td> <td>37</td> <td>6</td> </tr> <tr> <td>Qtr 2</td> <td>6</td> <td>64</td> <td>9</td> </tr> </tbody> </table> <p>Legend: ■ Interim ■ Short term ■ Respite</p>	Quarter	Interim	Short term	Respite	Qtr 1	5	37	6	Qtr 2	6	64	9	<p>ABP5q - Case management – Cases allocated to worker for more than 100 days (BP)</p> <table border="1"> <caption>ABP5q - Case Management (BP)</caption> <thead> <tr> <th>Category</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Cases open for more than 100 days</td> <td>738</td> </tr> <tr> <td>Of those had an open service</td> <td>504</td> </tr> </tbody> </table> <p>Legend: ■ Cases open for more than 100 days ■ Of those had an open service</p>	Category	Value	Cases open for more than 100 days	738	Of those had an open service	504						
Period	By Primary Client Type	By Primary Support Reason																																				
2015/16 Baseline	182	-																																				
Qtr 1	177	178																																				
Qtr 2	176	177																																				
Quarter	Interim	Short term	Respite																																			
Qtr 1	5	37	6																																			
Qtr 2	6	64	9																																			
Category	Value																																					
Cases open for more than 100 days	738																																					
Of those had an open service	504																																					
<p>DATA - This data supports our strategic priorities to reduce number of people in residential care. ACTION - There is potential for improvement in this figures , however it is recognised that the reprovision process can be lengthy and subject to the following * appropriate SL provision * reassessment and capacity assessment to determine best interest decision where appropriate * appropriateness of enablement input to reduce costs REVIEW - This work is monitored via the residential care board</p>	<p>DATA - HoS is working on this to understand the cause of the increase on short term and have more info for Q3 West - 13 East- (inc. SRCT) - 21 AMH - 6 LD - 14 Substance - 10 Transition - 2</p>	<p>DATA - New measure this year - Further breakdown of data requested to identify spread across teams and reasons for cases remaining open beyond 100 days. Data analysis an urgent priority for Q4.</p>																																				
<p>ABP5r - Number of Section 117 cases – with and without an open care package (SM)</p> <table border="1"> <caption>ABP5r - Section 117 Cases (SM)</caption> <thead> <tr> <th>Period</th> <th>Total</th> <th>Open package</th> <th>No open package</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>741</td> <td>-</td> <td>-</td> </tr> <tr> <td>Qtr 1</td> <td>746</td> <td>393</td> <td>353</td> </tr> <tr> <td>Qtr 2</td> <td>764</td> <td>370</td> <td>394</td> </tr> </tbody> </table> <p>Legend: ■ Total ■ Open package ■ No open package</p>	Period	Total	Open package	No open package	2015/16 Baseline	741	-	-	Qtr 1	746	393	353	Qtr 2	764	370	394	<p>ABP6a - Number of Carers receiving needs assessment (HM)</p> <table border="1"> <caption>ABP6a - Carers Needs Assessment (HM)</caption> <thead> <tr> <th>Period</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>2257</td> </tr> <tr> <td>Qtr 1</td> <td>580</td> </tr> <tr> <td>Qtr 2</td> <td>1081</td> </tr> </tbody> </table>	Period	Value	2015/16 Baseline	2257	Qtr 1	580	Qtr 2	1081	<p>ABP6b - Number of separate assessments /Joint assessments (HM)</p> <table border="1"> <caption>ABP6b - Assessments (HM)</caption> <thead> <tr> <th>Period</th> <th>Joint</th> <th>Separate</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>1711</td> <td>400</td> </tr> <tr> <td>Qtr 1</td> <td>484</td> <td>66</td> </tr> <tr> <td>Qtr 2</td> <td>906</td> <td>99</td> </tr> </tbody> </table> <p>Legend: ■ Joint ■ Separate</p>	Period	Joint	Separate	2015/16 Baseline	1711	400	Qtr 1	484	66	Qtr 2	906	99
Period	Total	Open package	No open package																																			
2015/16 Baseline	741	-	-																																			
Qtr 1	746	393	353																																			
Qtr 2	764	370	394																																			
Period	Value																																					
2015/16 Baseline	2257																																					
Qtr 1	580																																					
Qtr 2	1081																																					
Period	Joint	Separate																																				
2015/16 Baseline	1711	400																																				
Qtr 1	484	66																																				
Qtr 2	906	99																																				
<p>DATA - The fact that there are more people open on LiquidLogic (LL) with S117 status shows an improvement in data recording. ACTION - Guidance to be re-issued to staff to make sure that S117 cases are being appropriately recorded and people understand the process for discharging people from S117 obligations. REVIEW - Guidance has increased people's understanding of S117, leading to an increase in the recording of this.</p>	<p>DATA - Data indicates similar level of performance as last year. The anticipated increase in requests for carers assessments following the introduction of the Care Act has not as yet materialised.</p>	<p>DATA - We continue to improve the ratio of joint assessments (i.e. service user and carer assessed together) over separate assessments of the carer.</p>																																				

<p>ABP6c - Number of carers provided with information through the 'Carer's Training Plan'</p>  <table border="1"> <thead> <tr> <th>Period</th> <th>Number of carers</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>400</td> </tr> <tr> <td>Qtr 1</td> <td>66</td> </tr> <tr> <td>Qtr 2</td> <td>99</td> </tr> </tbody> </table>	Period	Number of carers	2015/16 Baseline	400	Qtr 1	66	Qtr 2	99	<p>ABP7a - Percentage of concerns responded to within 24 hours (JB)</p>  <table border="1"> <thead> <tr> <th>Quarter</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Qtr 1</td> <td>55.7%</td> </tr> <tr> <td>Qtr 2</td> <td>49.30%</td> </tr> </tbody> </table>	Quarter	Percentage	Qtr 1	55.7%	Qtr 2	49.30%	<p>ABP7b - Percentage of enquiries completed within 28 days (JB)</p>  <table border="1"> <thead> <tr> <th>Quarter</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Qtr 1</td> <td>81.9%</td> </tr> <tr> <td>Qtr 2</td> <td>59.00%</td> </tr> </tbody> </table>	Quarter	Percentage	Qtr 1	81.9%	Qtr 2	59.00%				
Period	Number of carers																									
2015/16 Baseline	400																									
Qtr 1	66																									
Qtr 2	99																									
Quarter	Percentage																									
Qtr 1	55.7%																									
Qtr 2	49.30%																									
Quarter	Percentage																									
Qtr 1	81.9%																									
Qtr 2	59.00%																									
<p>DATA - There will be no further monitoring of this measure as Carers Training Plan is no longer in place.</p>	<p>DATA - Issues with definition interpretation have been identified with this measure. The wording could easily be seen as referring to a response to a received alert, when in actual fact it is intended to measure the timescale between the safeguarding threshold being met and the strategy meeting taking place. Furthermore, LL and the Dashboard report timescales differently - the former counts working days, the latter calendar days. ACTION - Simplify LL recording and ensure that workforce are clear about data entry. Align the dashboard and LL to provide assurance on the accuracy and robustness of data. It would be advisable to run a monthly report to monitor performance following these actions and consider remedial action if indicated.</p>	<p>DATA - Whilst recording and whether calendar or working days are used might contribute to the drop, irrespective of this fact, performance appears to have deteriorated by a significant percentage. ACTION - Further analysis of the data collection is required to exclude any data quality issues, alongside looking at whether there have been spikes in the total number of referrals that might be skewing the percentages. Following this an audit exercise will be undertaken to drill down into the issue to enable appropriate action to be taken.</p>																								
<p>ABP7c - Percentage of people who have had their desired safeguarding outcomes met (JB)</p>  <table border="1"> <thead> <tr> <th>Quarter</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Qtr 1</td> <td>37.1%</td> </tr> <tr> <td>Qtr 2</td> <td>0%</td> </tr> </tbody> </table>	Quarter	Percentage	Qtr 1	37.1%	Qtr 2	0%	<p>ABP7e - MSP – Number of people where the principles of MSP were adhered to (JB)</p>  <table border="1"> <thead> <tr> <th>Quarter</th> <th>Number of people</th> </tr> </thead> <tbody> <tr> <td>Qtr 1</td> <td>69</td> </tr> <tr> <td>Qtr 2</td> <td>0</td> </tr> </tbody> </table>	Quarter	Number of people	Qtr 1	69	Qtr 2	0	<p>ABP7f - Sequels / outcomes of concerns (alerts) (JB)</p>  <table border="1"> <thead> <tr> <th>Quarter</th> <th>Sequels / outcomes of concerns (alerts)</th> <th>Progressed to safeguarding adults process</th> <th>Threshold met</th> </tr> </thead> <tbody> <tr> <td>Qtr 1</td> <td>691</td> <td>241</td> <td>81</td> </tr> <tr> <td>Qtr 2</td> <td>685</td> <td>167</td> <td>112</td> </tr> </tbody> </table>	Quarter	Sequels / outcomes of concerns (alerts)	Progressed to safeguarding adults process	Threshold met	Qtr 1	691	241	81	Qtr 2	685	167	112
Quarter	Percentage																									
Qtr 1	37.1%																									
Qtr 2	0%																									
Quarter	Number of people																									
Qtr 1	69																									
Qtr 2	0																									
Quarter	Sequels / outcomes of concerns (alerts)	Progressed to safeguarding adults process	Threshold met																							
Qtr 1	691	241	81																							
Qtr 2	685	167	112																							
<p>DATA - It has very recently come to the attention of the Head of Safeguarding that there have been significant reporting issues over the period that would make the available data high inaccurate for reporting purposes. Whilst a time scaled plan has been implemented to retrospectively capture this data, it was not available within the timeframe for this performance report. ACTION - Briefings have already been arranged for all TLs to ensure that the workforce is clear about the reporting requirements and an analysis will be undertaken on the data when available to add a further level of assurance. A low level audit will be undertaken during the next reporting period to enable a proactive approach to be taken to any performance concerns identified on this key priority area</p>	<p>As per narrative for ABP7c</p>	<p>DATA - The numbers of alerts have remained broadly the same in Q1 and Q2, although in Q2 fewer have progressed to full information gathering, but of these a greater number have met the threshold for a full S42 enquiry. It is not possible to draw any definitive professional conclusions from this without further data analysis, but at this point there is nothing specific to note. This will be considered further when Q3 data is available.</p>																								

<p>ABP7g - Number of repeat enquiries within the year (JB)</p> <table border="1"> <thead> <tr> <th>Quarter</th> <th>Number of repeat enquiries</th> </tr> </thead> <tbody> <tr> <td>Qtr 1</td> <td>204</td> </tr> <tr> <td>Qtr 2</td> <td>211</td> </tr> </tbody> </table>	Quarter	Number of repeat enquiries	Qtr 1	204	Qtr 2	211	<p>ABP8a - Proportion of contracted providers to be compliant at the point of assessment, of those eligible to receive a QAF assessment (TS)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Proportion of compliant providers</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>80.9%</td> </tr> <tr> <td>Qtr 1</td> <td>81.5%</td> </tr> <tr> <td>Qtr 2</td> <td>78.7%</td> </tr> </tbody> </table>	Period	Proportion of compliant providers	2015/16 Baseline	80.9%	Qtr 1	81.5%	Qtr 2	78.7%	<p>ABP8c - Total number of contract breaches within the period (Notice to Remedy Breach issued) (TS)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Total number of contract breaches</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>18</td> </tr> <tr> <td>Qtr 1</td> <td>6</td> </tr> <tr> <td>Qtr 2</td> <td>7</td> </tr> </tbody> </table>	Period	Total number of contract breaches	2015/16 Baseline	18	Qtr 1	6	Qtr 2	7
Quarter	Number of repeat enquiries																							
Qtr 1	204																							
Qtr 2	211																							
Period	Proportion of compliant providers																							
2015/16 Baseline	80.9%																							
Qtr 1	81.5%																							
Qtr 2	78.7%																							
Period	Total number of contract breaches																							
2015/16 Baseline	18																							
Qtr 1	6																							
Qtr 2	7																							
<p>DATA - This measure looks at data over a 12 month rolling period. The number of repeat referrals has remained at broadly the same (204/211) and this does merit further analysis to understand themes, trends and to form a professional judgement on the effectiveness of safeguarding activity. There is some evidence that Leicester City has a higher than average number of repeat referrals, but a deeper level of analysis is required, as well as looking at the impacts of MSP before any definitive conclusions can be drawn.</p> <p>ACTION - Undertake a deeper level analysis of data - including setting (residential vs Community), PSR, audit of cases where risks remain and outcomes of second enquiries. Benchmarking and recording analysis would also provide useful data for further consideration.</p> <p>DATA - The new methodology for calculating QAF compliance only began in Q1 2016-17, and as a result it is difficult to make any observations regarding trend/DoT at present. This will materialise more clearly by the end of 2016-17.</p> <p>ACTION - All providers deemed to be non-compliant with the Quality Assurance Framework (QAF) will be subject to a follow up process by CaAS, which will include action planning and subsequent QAF reviews. It is expected that following this intervention by CaAS, all providers should be compliant within 12 months of their initial QAF assessment.</p> <p>DATA - In Q1 2016-17, a total of six contracts were found to be in breach. All six of these breaches related to Residential/Nursing care contracts. In fact, two providers were issued with breaches to three contracts each, accounting for the total breaches. In Q2 2016-17, a total of seven contracts were found to be in breach. There were three Residential/Nursing care Legal Histories recorded (One contract termination, one NTRB re-issued, and one NTRB for Health and Safety). There were also four VCS Legal Histories recorded, all related to the same provider across four contracts. These issues were in regards to a DPA breach, and consisted of an NTRB and SOP across all contracts).</p>																								
<p>ABP8f - The proportion of NOCs directly related to 'Contractual Concerns' to be completed and closed within 28 days (TS)</p> <table border="1"> <thead> <tr> <th>Quarter</th> <th>Proportion of NOCs completed and closed within 28 days</th> </tr> </thead> <tbody> <tr> <td>Qtr 1</td> <td>53.9%</td> </tr> <tr> <td>Qtr 2</td> <td>31.7%</td> </tr> </tbody> </table> <p>DATA - There has been a notable increase in the number of Notifications of Concern (NOCs) closed within Q2 (but outside of the 28 day target), contributing to the overall rate of completion falling by 22.2%. However, this is largely due to a clean-up of outstanding NOCs by contract managers/officers, following a significant period of change to contract portfolios. We would expect the total number of closed NOCs to fall in Q3, coupled with an increased rate of NOCs closed within target</p> <p>ACTION - Contracts Team have recently set up a new NOC dashboard to monitor and track NOC closure activity within the team. Unfortunately, we are not in a position to report on the non-regulated NOCs at this time. However, we are going to be working closely with the BAS team to make sure that this is available in future reporting. Hence, the data presented for Q1-Q2 2016-17 is representative of regulated services only.</p>			Quarter	Proportion of NOCs completed and closed within 28 days	Qtr 1	53.9%	Qtr 2	31.7%																
Quarter	Proportion of NOCs completed and closed within 28 days																							
Qtr 1	53.9%																							
Qtr 2	31.7%																							