

## Quarter 4 2022/23

### Purpose of the report

To provide a strategic overview of the Council's performance for Quarter 4 2022/23.







### The following scorecards are enclosed:

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Prepared by the Performance and Improvement Team




# Key to Symbols

Reporting Basis	
Year to Date	Performance accumulated over the year
Rolling Year	Average performance over a 12 month period
Annual	Performance measured once a year
Latest Quarter	Performance this quarter
Snapshot	Performance at a particular point in time
Forecast	Predicted position at the end of the year

Measure Symbols	
	Performance Better than Target
	Performance Worse than Target
	Performance significantly worse than Target
	No information
	Missing Target
	No Value
Bigger is Better	A bigger value for this measure is good
Smaller is Better	A smaller value for this measure is good
Plan is best	Where it is better for performance to be on target rather than above or below

Risk	Impact/Consequence				
	1 Insignificant	2 Minor	3 Moderate	4 Major	5 Critical
Highly Likely (5)	5	10	15	20	25
Likely (4)	4	8	12	16	20
Possible (3)	3	6	9	12	15
Unlikely (2)	2	4	6	8	10
Remote (1)	1	2	3	4	5

Risk Rating  
(calculated by multiplying the Impact with the Likelihood of each risk)

Risk Symbols	
	Risk Value Increasing
	Risk Value Decreasing
	No Change

Level of Risk	Score
Low	1 - 6
Moderate	7 - 12
High	13 - 25

# Transforming Adult Social Care Delivery

## Contact Activity

	Good Performance High/Low	Reporting Basis	Mar-22	Jun-22	Sep-22	Dec-22	Actual Mar-23	Target Mar-23		Comments	Comparator Group
% of all ASC Contacts with a decision within 1 working day	Bigger is Better	Latest Quarter	93.8%	92.0%	92.4%	94.0%	89.9%	95.0%	▲		n/a
% of ASC contacts signposted or closed	Bigger is Better	Latest Quarter	39.9%	37.4%	37.0%	36.1%	35.0%	33.0%	★		n/a

## Assessments

	Good Performance High/Low	Reporting Basis	Mar-22	Jun-22	Sep-22	Dec-22	Actual Mar-23	Target Mar-23		Comments	Comparator Group
% of Service Users who have had a review/ re-assessment of their needs within the last 12 months	Bigger is Better	Snapshot	50.7%	42.4%	44.8%	48.6%	57.9%	60.0%	●		n/a
Average number of weeks people have been awaiting Brokerage	Smaller is Better	Snapshot		4.8	4.0	3.1		5.6		At the end of March 2023 there were 468 individuals awaiting brokerage (down from 494 at the end of December 2022).	n/a
% of FAB Assessments Open after 60 working days (as a proportion of all Open Assessments)	Smaller is Better	Latest Quarter		70.4%	71.1%	76.1%		81.2%		At the end of March 2023 there were 632 open Assessments of which 513 (81.2%) had been open for 60 working days or longer. There are no outstanding open Assessments from 2021/22.	n/a
% of FAB Assessments taking more than 19 working days to close (as a proportion of all closed Assessments)	Smaller is Better	Latest Quarter		87.4%	88.2%	89.1%		85.9%		There were 822 Assessments closed in Quarter 4 of which 706 (85.9%) took more than 19 working days to complete.	n/a

## Hospital Discharge and Reablement

	Good Performance High/Low	Reporting Basis	Mar-22	Jun-22	Sep-22	Dec-22	Actual Mar-23	Target Mar-23		Comments	Comparator Group
% of clients who need no long term care after their period of reablement	Bigger is Better	Latest Quarter	89.4%	90.0%	90.2%	85.8%		85.0%		No figures available for Quarter 4	81.0%
Delayed transfers of care from hospital due to Adult Social Care per 100,000 population	Smaller is Better	Rolling Year						3.50		DTOC measures were suspended on 1st March 2020 There is no data available at present.	

## Adult Safeguarding

	Good Performance High/Low	Reporting Basis	Mar-22	Jun-22	Sep-22	Dec-22	Actual Mar-23	Target Mar-23		Comments	Comparator Group
% of Section 42 enquiries this quarter where the risk was reduced or removed	Bigger is Better	Latest Quarter	81.8%	81.7%	82.6%	83.1%	90.1%	85.0%	★	There were 121 Section 42 closures during the Quarter, of which 5 (4.1%) were closed where the risk remained, and 7 (5.8%) which were 'Inconclusive'.	90.3%
% of S42 Enquiries open for more than 26 weeks	Smaller is Better	Latest Quarter	24.2%	17.7%	20.1%	16.9%	22.2%	25.0%	★		n/a

# Transforming Adult Social Care Commissioning



## Quality Assurance

	Good Performance High/Low	Reporting Basis	Mar-22	Jun-22	Sep-22	Dec-22	Actual Mar-23	Target Mar-23		Comments	Comparator Group
% of GCC Commissioned Providers judged to be Good or Outstanding by CQC	Bigger is Better	Latest Quarter	91.2%	91.3%	90.2%	88.1%	90.8%	90.0%	★	The latest data from CQC (in relation to 237 providers) indicates: <ul style="list-style-type: none"> <li>217 providers were rated as either Good or Outstanding, up from 207 in Q3. Of the 217, 18 were rated as Outstanding, and the remaining 199 were Good.</li> <li>However, those who are rated as Requires Improvement continues to increase, from 23 in Q1 to 30 in Q4.</li> <li>There are 3 providers who were rated as Inadequate this Quarter.</li> </ul>	n/a

## Assessments

	Good Performance High/Low	Reporting Basis	Mar-22	Jun-22	Sep-22	Dec-22	Actual Mar-23	Target Mar-23		Comments	Comparator Group
Average waiting time for a Carers Care Act Compliant Assessment (in working days)	Smaller is Better	Snapshot	17.0	6.0	6.0	18.0	18.0	30.0	★		n/a

## Long Term Care

	Good Performance High/Low	Reporting Basis	Mar-22	Jun-22	Sep-22	Dec-22	Actual Mar-23	Target Mar-23		Comments	Comparator Group
Permanent admissions 18-64 to residential & nursing care homes per 100,000 population	Smaller is Better	Rolling Year	14.8	13.6	6.3	7.1	7.4	13.0	★		13.0
Permanent admissions aged 65+ to residential & nursing care homes per 100,000 population	Smaller is Better	Rolling Year	249.3	239.1	248.6	241.5	235.1	496.1	★		496.1

## Mental Health

	Good Performance High/Low	Reporting Basis	Mar-22	Jun-22	Sep-22	Dec-22	Actual Mar-23	Target Mar-23		Comments	Comparator Group
% of referrals for an AMHP assessment that led to support or protection being put in place	Bigger is Better	Latest Quarter	57.4%	62.2%	62.1%	69.1%	55.5%	60.0%	▲	There were 315 AMHP Assessments completed in the Quarter (up by 5% from Quarter 3). The outcome from 175 Assessments (55.5%) was detention or other support being put in place.	n/a
% of Adults receiving secondary Mental Health services in settled accommodation	Bigger is Better	Snapshot	89.0%	89.0%	88.0%	87.0%	88.0%	85.0%	★		27.5%

## Learning Disability

	Good Performance High/Low	Reporting Basis	Mar-22	Jun-22	Sep-22	Dec-22	Actual Mar-23	Target Mar-23		Comments	Comparator Group
% of Adults with Learning Disabilities in settled accommodation	Bigger is Better	Snapshot		59.9%	59.8%	60.8%	63.5%	72.0%	▲	Out of a total cohort of 615, 390 are recorded as being in settled accommodation. NOTE That figures in 2022/23 exclude LD individuals who are in Supported Living and figures have been refreshed for the last 3 quarters to reflect this.	72.0%
Total number of people in Employment with a Disability (or work limiting health condition) supported by GCC Forward Services	Bigger is Better	Latest Quarter		547	558	632	734	590	★	53 new people known to Social Services added in the quarter including 12 Care Leavers	n/a
% of Adults with Learning Disabilities in Employment	Bigger is Better	Annual	3.1%	0.8%	2.7%	5.3%		5.3%		Locally benchmarked in line with ASCOF definition	5.0%

# Levelling Up Our Communities

## Addressing Public Health Inequalities

	Good Performance High/Low	Reporting Basis	Dec-21	Mar-22	Jun-22	Sep-22	Actual Dec-22	Target Dec-22		Comments	Comparator Group
Proportion of all Opiate Users in treatment, who successfully completed treatment and did not represent within 6 months of completion	Bigger is Better	Quarter in Arrears	4.1%	4.3%	4.3%	5.0%	5.1%	6.3%	▲	The Q3 performance is 5.1% (67/1,302), which is slight increase from the previous quarter. Projecting forward by 6 months we are anticipating that this performance will drop slightly to around 4.9%. The primary reason for this low performance is the anticipated effect of the recommissioning of the service which will likely drive performance down further. It would require 19 further completions to bring this into the LA family comparator top quartile	5.7%
Proportion of all Non-Opiate Users in treatment, not representing 6 months after completion	Bigger is Better	Quarter in Arrears	20.3%	23.7%	26.4%	28.4%	29.4%	33.2%	▲	The Q3 performance is 29.4% (207/704), this is an increase from last quarter. Projecting forward 6 months from this point we are anticipating that the performance will drop slightly to around 27.3%. The primary reason for this low performance is the anticipated effect of the recommissioning of the service which will likely drive performance down further. 56 further completions would be required to bring this to LA family comparator top quartile.	36.9%
Proportion of adult alcohol misusers who successfully completed treatment and did not represent within 6 months of completion	Bigger is Better	Quarter in Arrears	26.7%	29.5%	35.6%	37.6%	38.9%	35.0%	★	The Q3 performance is 38.9% (320/822), this is an increase from the last quarter and remains above target. Projecting forward 6 months we are anticipating that the performance will drop slightly below target, to around 34% before recovering. 14 further completions would be required to bring this to LA family comparator top quartile.	36.6%
% of pregnant smokers achieving a 4 week quit	Bigger is Better	Quarter in Arrears	67.0%	80.0%	66.0%	90.0%	80.0%	70.0%	★	The target for this indicator is 70%. The service continues to perform well with 80% (41/51) of pregnant women achieving a 4-week quit in Q3. This is lower than the Q2 figure of 90% (53/58) and significantly higher than the latest national data (April 2022 to September 2022) of 44.6%.	n/a
% of HLS customers that achieve a significant risk factor improvement	Bigger is Better	Quarter in Arrears	67.3%	68.4%	71.0%	71.4%	70.5%	65.0%	★	The performance for this indicator remains steady with the percentage achieving improvement in Q3 being 70% (923/1310) compared to 71% (1040/1457) in Q2 against a target of 65%.	n/a

	Good Performance High/Low	Reporting Basis	Sep-18	Sep-19	Sep-20	Sep-21	Actual Sep-22	Comments	Comparator Group
% Reception Children with obesity (including severe obesity)	Smaller is Better	Academic Year	9.8%	9.1%	10.0%	13.6%	8.7%	The 2021/22 school year NCMP data was the first full year of data collection since the start of the Covid-19 pandemic. We previously reported a significant increase in levels of obesity and severe obesity in 2020/21 compared to pre-pandemic levels. The 2021/22 data indicate that rates have now decreased, compared to last year. Obesity levels among Reception age children in Gloucestershire have reverted to pre-pandemic levels according to the 2021/22 data (8.7%)	10.1%
% Year 6 Children with obesity (including severe obesity)	Smaller is Better	Academic Year	16.3%	18.3%	18.4%	21.6%	20.7%	The 2021/22 school year NCMP data was the first full year of data collection since the start of the Covid-19 pandemic. We previously reported a significant increase in levels of obesity and severe obesity in 2020/21 compared to pre-pandemic levels. The 2021/22 data indicate that rates have now decreased, compared to last year. Obesity levels among Year 6 children in Gloucestershire remain significantly above pre-pandemic levels in 2021/22 data (20.7%)	23.4%
Reception: Inequality in the prevalence of obesity (including severe obesity)	Smaller is Better	Academic Year	7.4%	6.8%	5.3%	8.5%	5.5%	In Gloucestershire there are differences in being very overweight in childhood depending on your gender, level of deprivation, ethnicity and rurality in both Reception and Year 6. From reception to year 6 the gaps appear to widen with rates becoming markedly higher in more deprived areas. We use the Slope Index of Inequality (SII) as a measure of how much being very overweight in Childhood varies with deprivation. The latest data is showing a decreasing trend similar to pre-covid SII levels. In Reception Year the gap in obesity rates between most deprived and least deprived in the last 5 years of recording (2016-21) stands at 5.5%, down from 8.5% (2015-2020) however at Year 6 this gap is 15.5% (2016-21) down from 16.3% (2015-2020). SII data is not currently released at a national or a regional level.	n/a
Year 6: Inequality in the prevalence of obesity (including severe obesity)	Smaller is Better	Academic Year	12.2%	16.7%	18.0%	16.3%	15.5%	In Gloucestershire there are differences in being very overweight in childhood depending on your gender, level of deprivation, ethnicity and rurality in both Reception and Year 6. From reception to year 6 the gaps appear to widen with rates becoming markedly higher in more deprived areas. We use the Slope Index of Inequality (SII) as a measure of how much being very overweight in Childhood varies with deprivation. The latest data is showing a decreasing trend similar to pre-covid SII levels. In Reception Year the gap in obesity rates between most deprived and least deprived in the last 5 years of recording (2016-21) stands at 5.5%, down from 8.5% (2015-2020) however at Year 6 this gap is 15.5% (2016-21) down from 16.3% (2015-2020). SII data is not currently released at a national or a regional level.	n/a

	Good Performance High/Low	Reporting Basis	Dec-18	Dec-19	Dec-20	Dec-21	Actual Dec-22	Target Dec-22	Comments	Comparator Group
Suicide rate per 100,000 Population	Smaller is Better	3-Year Average	10.4	10.2	11.0	11.3	11.3	11.4	★ The suicide rate in Gloucestershire for the three year period 2019-2021 is 11.3 per 100,000 of the population. This is a very slight increase from the rate in the previous three year period (11.0 in 2018-20); however the Gloucestershire rate remains in line with the national and regional rate for suicide deaths. The number of suicide deaths in 2021 registered also remains in line with the average number of deaths per year from suicide over the last 10 years in Gloucestershire. The Gloucestershire Suicide Prevention Partnership continues to monitor deaths from suicide in the county as part of the ongoing delivery of the countywide suicide prevention strategy and action plan.	11.3