

Deadline for return – 18 August 2009 (Quarter 1 Performance Report)

Local Area Agreement 2008-2011

LAA Priority: Promote Independence (LAA10) (Rapid Response)

Lead Contact: Alison Golby

RAG Status: Amber (delete as appropriate)

Delivery Board Recommendations *(Please list any decisions/actions required on the part of the Delivery Board)*

Delivery Board are asked to:

Summary Statement:

Outline business case is currently being scrutinised and refined to ensure most cost effective service delivery and to minimise implementation costs. The business case will be presented to a senior joint agency executive subgroup of the Urgent care board for approval and recommendations on funding forwarded for agreement by the chief executive group and joint commissioning board. Subject to final approval, implementation will commence from 10/09.

Performance Indicators – National and Local

Code	Title	+/- (see 1 below)	Year	Annual Target	Status (see 2 below)	Improvement (see 3 below)	Actual to Date	Officer Notes
NI 125	Achieving independence for older people through rehabilitation / intermediate care	+	FY					Deferred Target – to be agreed Oct 09
NI 130	Social care clients receiving self directed support per 100,000 population	+	FY 2009/10	156.3	Well above target	↑	191.16	Based on a rolling 12 month period. Monitored and reported monthly within ACS performance report. Next reporting will be against new NI definition.
NI 132	Timeliness of social care assessment (all adults)	+	FY 2009/10	80.0%	Below target	↓	70.17%	Based on a rolling 12 month period. Monitored and reported monthly

								within ACS performance report. ACS actions: Overtime offered to care management staff to increase performance on completion of assessments and reviews. Rapid Improvement Process underway. Audit Commission inspection against this indicator underway.
NI 134	The number of emergency bed days per head of weighted population	-	FY 2009/10	347,936	Well Below Target	↓	364,483 (Apr09)	PCT data lag of approx. 4 months behind quarter in order to obtain finalised SUS data. Q1 position - 364,483 is 12 months to 30/04/09 SUS data, a forecasted position for 12 month period to end of Jun09 is 365,981 but data yet to be verified via SUS.

Key to symbols (insert as appropriate):

1. + equals higher figures are better and – equals lower figures are better
2. **No Data/Well Below Target/Below Target/On Target/Above Target/Well Above Target**
3. Improved Performance ↑ Worse Performance ↓ Unchanged ↔

Key Milestones (Last Quarter – Quarter 1 09/10, ends 30 June 09)

	Description	Date	Outputs expected	Achieved/missed
1.	Incorporate Exeter into Pilot	06/09	Additional validation of Benefits	Missed
2.	One "To Be" Process Model Agreed	06/09	Process Model	Achieved
3.	Agreed Co-ordination Centre model	06/09	Plan to deploy Rapid Response co-ordination centre	Missed
4.	Plan for Service Delivery	06/09	Plan to deploy Rapid Response Services	Achieved
5.	Service Specification Delivered	06/09	Service Specification	Missed

Key Milestones (This Quarter – Quarter 2 09/10, ends 30 September 09)

	Description	Date	Outputs expected
1.	Incorporate Exeter into Pilot	07/09	Additional validation of Benefits
2.	Agreed Co-ordination Centre model	09/09	Implementation Plan
3.	Plan for Service Delivery	09/09	Revised Implementation Plan
4.	Service Specification Delivered	09/09	Service Specification
5.	Business Case Approval and funding agreement	09/09	Business Case

Key Risks (*Please refer to scoring guidelines below)

Risk	Impact	Likelihood	Score	Mitigation
1. Not being able to recruit all required staff from in house Dom Care staff	Delayed/More expensive deployment 5	Low 2	10	HR and Dom Care Director engaged in encouragement activity
Delay in identifying suitable Call centre accommodation	Delay in roll out to service in South Delay in achieving benefits loss of momentum on project 3	Mod 2	6	Joint agency review of suitable accommodation under way
Delay in implementation of process and system improvements to call centre	Delay in achieving benefits loss of momentum on project 2	Mod 3	6	To be process identified Recruitment process commenced in readiness IT specification drafted
5. Cost and Benefits not agreed by ACS, PCT (Commissioning and Provider) Finance	Delay/no sign off of Business Case 5	High 2	10	All Finance teams actively involved in agreement of all figures.
Delay in funding agreements between partners	Delay in achieving benefits – loss of momentum on project – impact on credibility 2	High 5	10	Ongoing discussions with Finance and Project Sponsor. Comms to stakeholders and key partners
2. No budget for interim service	Pilot would have to cease with all benefits and relationships built up with referrers would cease. This would have to be pump primed at a later date – so causing delay and reducing benefits 4	Mod 2	8	Funding released until end September 09. Ongoing discussions with Finance and Project Sponsor.

3.No funding agreement between partners for ongoing service and Devon wide implementation	Project would have to close, existing services decommissioned impact on credibility 5	Mod 2	10	Ongoing discussions with Finance and Project Sponsor. Contingency planning commenced
4.Referral Levels lower than predicted	Benefits case may be impacted adversely Loss of confidence in impact of the service 3	High 5	15	Comms to be delivered to various referral groups in areas identified to increase referrals Comms to manage expectation of likely ramping up of referral rates.

Spatial Implications

District	Impact (insert √ or x or unknown)	Disaggregated Data (√ or x)	Examples of Local Delivery Outcomes
Exeter	√	√	
East Devon	√	√	Exmouth Call Centre
Mid Devon	√	√	
North Devon	√	√	Barnstable Call Centre
Torridge	√	√	
West Devon	√	√	
South Hams	√	√	
Teignbridge	√	√	

*Risks – Scoring Guidelines:

Likelihood of risk:

- 1 – Very low
- 2 – Low
- 3 – Medium
- 4 – High
- 5 – Very high

Impact of risk:

- 1 – Insignificant
- 2 – Minor
- 3 – Moderate
- 4 – Serious
- 5 – Very serious

Total risk score (likelihood x impact)

- 1 – 6 Low**
- 8 – 12 Medium**
- 14 – 20 High**
- Over 20 Very high**