

**Deadline for return – 21 January 2010 Quarter 3 Performance Report
(30th Sept – 31st Dec 09)**

Local Area Agreement 2008-2011

LAA Priority: Promote Independence (LAA10) (Personalisation)

Lead Contact: Alison Golby

RAG Status: **Amber**

RED =fundamental blockage to progress with milestones and/or achievement of target
AMBER = positive movement but with risks to achievement of milestones and/or target (so cannot say with confidence that priority would be achieved)
GREEN = on track to achieve target and Milestones

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

Delivery Board are asked to: Note the report

Summary Statement:

Good progress is being made, but there has been some slippage.
 Work has begun to increase the offering and uptake of Direct Payments for less complex care packages although the roll-out of this has been delayed due to other pressures on the time of operational staff.
 Indicative budget figures are now being shared with Learning Disability service users.
 Collection of the sample data to allow FACE to develop the RAS model for Devon has been delayed to coincide with the v6 Overview Assessment going live in CF6 to minimise duplication of effort for operational staff.
 The Service User Reference Group has been established and consultation is planned in a number of areas.

Update for Qtr 3 if possible

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 at LAA refresh
NI 130 (new def)	Social care clients receiving self directed support per 100,000 population		FY 09/10	8.70%	Below target	↓	4.13% (Dec 09)	New definition calculates no. of DP/SDS recipients as a % of all service3 users receiving a community based service. ADASS target of

								30% of by Mar 11. Project plan in place to deliver this target.
NI 132	Timeliness of social care assessment (all adults)	+	FY 2009/10	80.0%	Below target	↓	70.21% (Dec 09)	Based on a rolling 12 month period. Performance has been relatively static for Q1 - Q3 but still below target. Rapid Improvement workshops completed, actions identified re systems/process/practice/reporting now being followed up. Priority area for improvement for ACS performance sessions, recent session to highlight issues with Operational Managers, monthly monitoring/reporting in progress
NI 134	The number of emergency bed days per head of weighted population	-	FY 2009/10	347,936	Well Below Target	↓	363,340 (Aug09)	PCT data lag of approx. 4 months behind quarter in order to obtain finalised SUS data. Slight reduction in EBDs seen in 12 month period to Aug 09 but still not low enough to meet target.

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 3 09/10, ends 31 December 09)

	Description	Date	Outputs expected	Achieved/missed
1.	CDP Direct Payments Model rolled out	November 09	All CDP's calculating Direct Payments for Domiciliary Care	Missed
2.	Direct Payments Equipment Model rolled out	December 09	All REMAS clients offered Direct Payment	Missed
3.	LD Begin to tell Service Users their indicative budget	October 09	LD Service Users made aware of	Achieved

			indicative budget	
4.	Data collection for FACE RAS Model complete	December 09	250 samples supplied to FACE to build Devon RAS model	Missed
5.	Get sign off for Personal Budgets Policy	October 09	Personal Budgets Policy	Achieved
6.	Start pilot for Equipment Direct Payments	September 09		Achieved

Key Milestones (This Quarter - Quarter 4 09/10, ends 31 March 2010)

	Description	Date	Outputs expected
1.	CDP Direct Payments Model rolled out	February 10	All CDP's calculating Direct Payments for Domiciliary Care
2.	Direct Payments Equipment Model rolled out	March 10	All REMAS clients offered Direct Payment
3.	Data collection for FACE RAS Model complete based on overview assessment	February 10	250 samples supplied to FACE to build Devon RAS model
4.	Data Collection of FACE RAS sample for Contact Assessment Complete	February 10	50 samples supplied to FACE to test prototype
5.	Review of Direct Payment delivery mechanisms complete	January 10	Delivery mechanism option appraisal
6.	Review of Direct Payments Service complete	January 10	Direct Payment Service option appraisal
7.	Staff Reference Group Established	March 10	Staff Reference Group

Key Risks (*Please update with reference to scoring guidelines below)

Risk	Impact	Likelihood	Score	Mitigation
Provider market insufficiently developed	5	3	15	Work with market to enable change and development
Capacity of DCC staff to undertake work	3	5	15	Ensure that resource requirements are identified and funded Ensure that work is prioritised
RAS allocation is not sufficient to meet eligible need	5	3	15	Develop processes to cater for this and develop market

Spatial Implications

District	Impact (insert ✓ or x or unknown)	Disaggregated Data (✓ or x)	Examples of Local Delivery Outcomes
Exeter	Unknown	✓	Data of number of people receiving self directed support can be disaggregated down to an ACS Cluster group level, and by client group if required.
East Devon	Unknown	✓	

Mid Devon	Unknown	✓	
North Devon	Unknown	✓	
Torrige	Unknown	✓	
West Devon	Unknown	✓	
South Hams	Unknown	✓	
Teignbridge	Unknown	✓	

*Risks – Scoring Guidelines:		
Likelihood of risk:	Impact of risk:	Total risk score (likelihood x impact)
1 – Very low 2 – Low 3 – Medium 4 – High 5 – Very high	1 – Insignificant 2 – Minor 3 – Moderate 4 – Serious 5 – Very serious	1 – 6 Low 8 – 12 Medium 14 – 20 High Over 20 Very high