



Communities are safe and protected

Safeguarding adults whose circumstances make them vulnerable, protecting them from avoidable harm and acting in their best interests where they lack capacity

Safeguarding cases supported by an advocate

This measure identifies the proportion of concluded safeguarding referrals where the person at risk lacks capacity and support was provided by an advocate, family or friend.

An advocate can include:-

- * An Independent Mental Health Advocate (IMHA);
- * An Independent Mental Capacity Advocate (IMCA); or
- * Non-statutory advocates, family member or friends.

Numerator: Number of concluded safeguarding referrals where the person at risk lacks capacity where support was provided by an advocate, family or friend

Denominator: Number of concluded safeguarding referrals.

The percentage is calculated as follows: Numerator divided by the denominator multiplied by 100.



Achieved

100.0

%

Quarter 1 June 2016

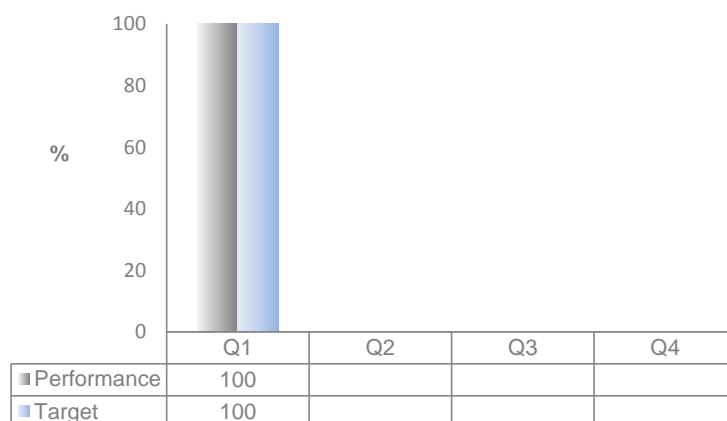


100.0

%

Target for June 2016

Safeguarding cases supported by an advocate

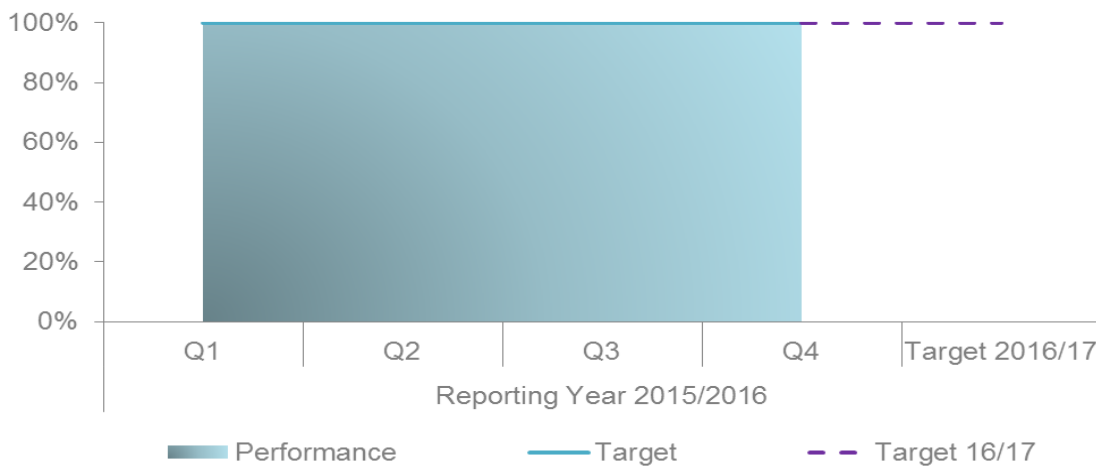


About the latest performance

After tidying up some recording issues, for Quarter 1 it has been confirmed that 100% of people who were identified as lacking capacity as part of the Safeguarding process, were supported by an advocate. This ensures that all victims have the opportunity to share their views and wishes.

Further details

Safeguarding cases supported by an advocate



Reporting Year 2015/2016					
	Q1	Q2	Q3	Q4	Target 2016/17
Performance	100.00%	100.00%	100.00%	100%	
Target	100.00%	100.00%	100.00%	100.00%	100%

About the target

Targets are based on trends and CIPFA group averages. For a definition of CIPFA please see About Benchmarking.

About the target range

This measure has a target range of +/- 5% based on tolerances used by Department of Health

About benchmarking

Lincolnshire County Council provides performance reports to the Chartered Institute of Public Finance and Accountancy (CIPFA) which facilitates a benchmarking services to enable Adult Social Care performance to be monitored against other local authorities. We benchmark against other Local Authorities within our CIPFA Group of 16 authorities.



Communities are safe and protected

Safeguarding adults whose circumstances make them vulnerable, protecting them from avoidable harm and acting in their best interests where they lack capacity

Safeguarding referrals where the source of risk is a service provider

This measure records the proportion of safeguarding referrals where 'source of risk' is a 'service provider'.

Numerator: Number of safeguarding referrals where the 'source of risk' is a 'service provider'.

Denominator: Number of safeguarding referrals.

The percentage is calculated as follows: Numerator divided by the denominator multiplied by 100.



Achieved

1.3

%

Quarter 1 June 2016

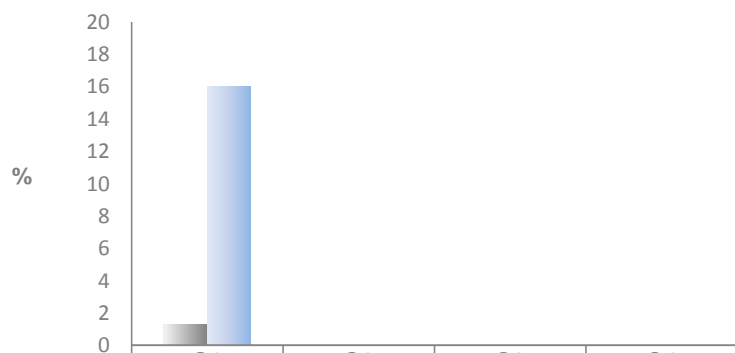


16.0

%

Target for June 2016

Safeguarding referrals where the source of risk is a service provider



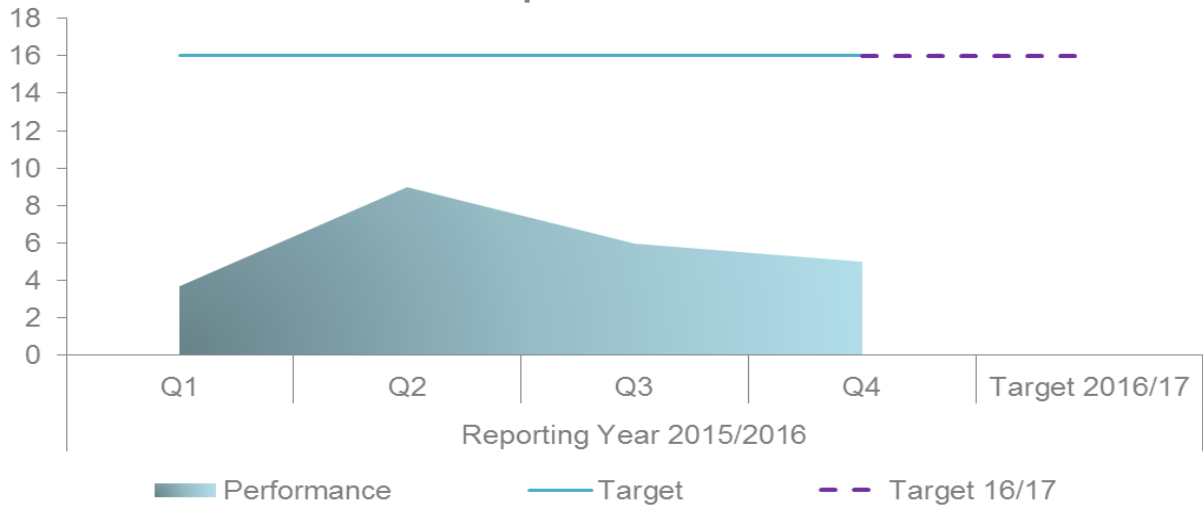
	Q1	Q2	Q3	Q4
■ Performance	1.3			
■ Target	16			

About the latest performance

This measure is populated using the Safeguarding Adults collection data for completed enquiries in the period. It relates only to higher level enquiries led by the authority. In reality, many more enquiries relate to a provider but these are more often than not delegated back to the provider to investigate and resolve locally.

Further details

Safeguarding referrals where the source of risk is a service provider



	Reporting Year 2015/2016					Target 2016/17
	Q1	Q2	Q3	Q4	Target	
Performance	3.7	9.0	6.0	5.0		
Target	16.0	16.0	16.0	16.0		16.0

About the target

Targets are based on trends and Chartered Institute of Public Finance and Accountancy (CIPFA) group averages.

About the target range

This measure has a target range of +/- 5% based on tolerances used by Department of Health

About benchmarking

Benchmarking data for this measure is not available



Communities are safe and protected

Safeguarding adults whose circumstances make them vulnerable, protecting them from avoidable harm and acting in their best interests where they lack capacity

Adult safeguarding reviews where risk was reduced or removed

This measure records the proportion of completed (and substantiated) safeguarding referrals where the risk was reduced or removed.

Numerator: Number of completed (and substantiated) safeguarding referrals where the risk was reduced or removed.

Denominator: Number of safeguarding referrals.

The percentage is calculated as follows: Numerator divided by the denominator multiplied by 100.



Not achieved

41.7

%

Quarter 1 June 2016

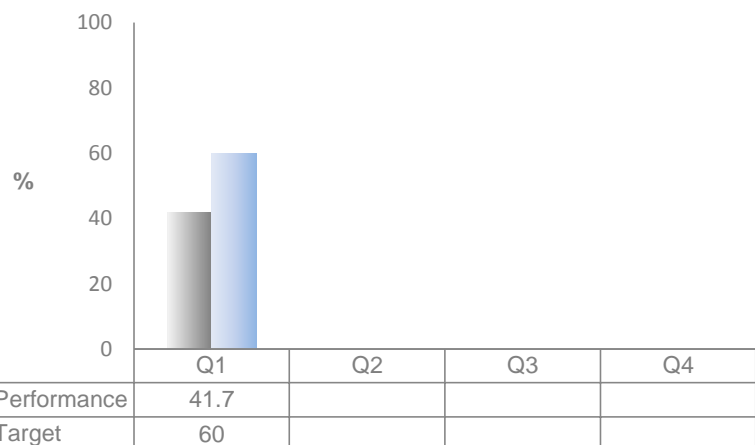


60.0

%

Target for June 2016

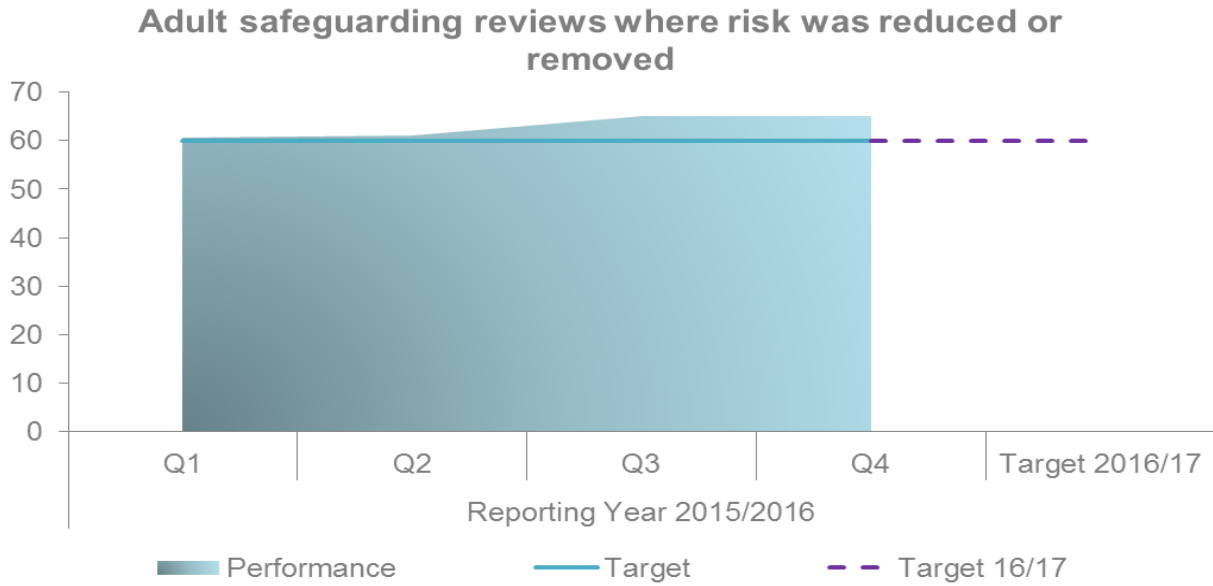
Adult safeguarding reviews where risk was reduced or removed



About the latest performance

One element of assessing the effectiveness of the safeguarding intervention is to monitor whether the risk has been reduced or removed. For 42% of enquiries, this has been the case, which is below the 60% target. However, safeguarding is about empowering people to manage their own risk and respect their wishes.

Further details



Reporting Year 2015/2016					
	Q1	Q2	Q3	Q4	Target 2016/17
Performance	60.6	61.0	65.0	65.0	
Target	60.0	60.0	60.0	60.0	60.0

About the target

Targets are based on trends and Chartered Institute of Public Finance and Accountancy (CIPFA) group averages.

About the target range

This measure has a target range of +/- 5% based on tolerances used by Department of Health

About benchmarking

Benchmarking data for this measure is not available



Health and Wellbeing is improved

Enhanced quality of life and care for people with learning disability, autism and or mental illness

Adults with learning disabilities who live in their own home or with family

The measure shows the proportion of all adults with a learning disability who are known to the council, who are recorded as living in their own home or with their family.

Individuals 'known to the council' are adults of working age with a learning disability who received long term support during the year.

'Living on their own or with family' is intended to describe arrangements where the individual has security of tenure in their usual accommodation, for instance, because they own the residence or are part of a household whose head holds such security.


Numerator: Of those adults who received long-term support with a primary support reason of learning disability, those who are recorded as living in their own home or with their family within the current financial year.

Denominator: Adults who received long-term support during the year with a primary support reason of learning disability.

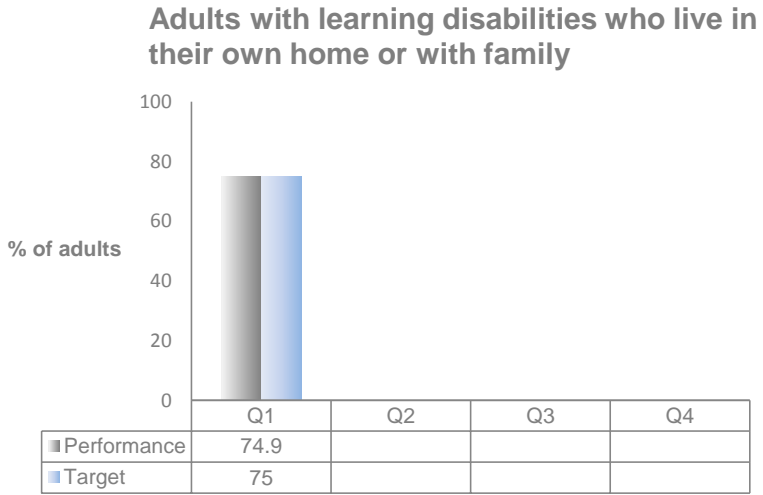
The percentage is calculated as follows: Numerator divided by the denominator multiplied by 100.

 **Achieved**

74.9
% of adults
Quarter 1 June 2016



75.0
% of adults
Target for June 2016

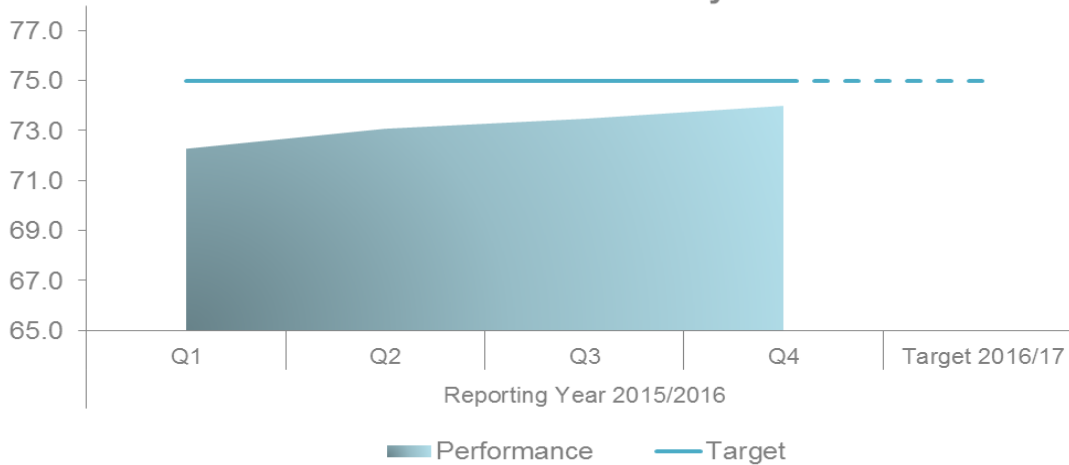


About the latest performance

The measure is intended to improve outcomes for adults with a learning disability by demonstrating the proportion in stable and appropriate accommodation. The nature of accommodation for people with a learning disability has a strong impact on their safety and overall quality of life and the risk of social exclusion. However, it should be recognised that outcomes for people with complex needs can be improved in a residential setting. There has been a slow and steady improvement in the proportion of adults living at home or with family since March 2016. The only people now classed as 'unsettled' are in a care home setting. Also, a higher proportion of new clients in the year are living at home or with family with fewer admissions to residential care.

Further details

Adults with learning disabilities who live in their own home or with family



	Reporting Year 2015/2016					Target 2016/17
	Q1	Q2	Q3	Q4		
Performance	72.3	73.1	73.5	74.0		
Target	75.0	75.0	75.0	75.0		75.0

About the target

Targets are based on trends and CIPFA group averages. For a definition of CIPFA please see About Benchmarking.

About the target range

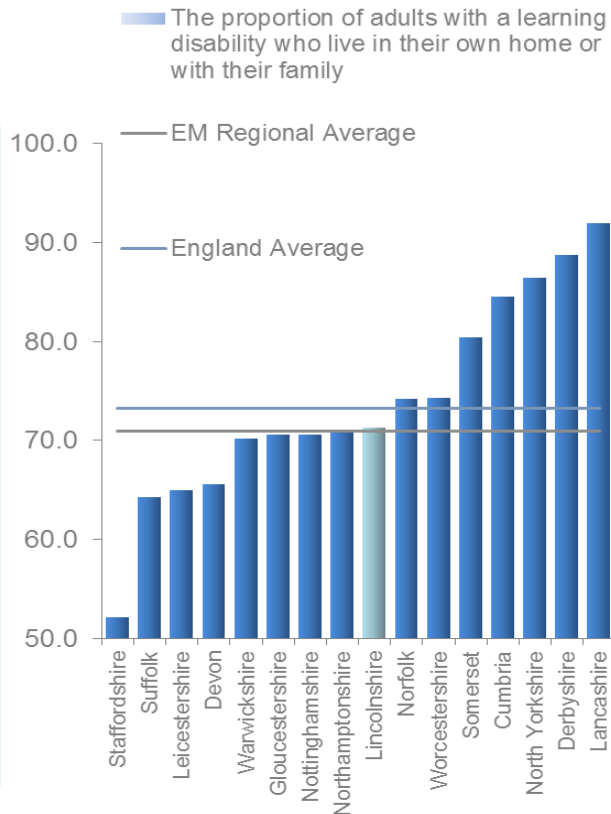
This measure has a target range of +/- 5% based on tolerances used by Department of Health

About benchmarking

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**Adults with learning disabilities who live in their own home or with family
CIPFA Comparators 2014/15**

	*Numerator	**Denominator	***Outcome
Staffordshire	890	1,705	52.2
Suffolk	1,110	1,730	64.3
Leicestershire	795	1,225	65.0
Devon	1,025	1,565	65.6
Warwickshire	770	1,095	70.2
Gloucestershire	915	1,295	70.6
Nottinghamshire	1,430	2,025	70.6
Northamptonshire	1,140	1,605	71.1
Lincolnshire	1,070	1,500	71.3
Norfolk	1,710	2,305	74.2
Worcestershire	950	1,275	74.3
Somerset	1,190	1,480	80.4
Cumbria	1,025	1,210	84.6
North Yorkshire	1,305	1,505	86.5
Derbyshire	1,690	1,900	88.8
Lancashire	2,670	2,900	92.0
EM Regional Average	34,975	49,240	71.0
England Average	91,080	124,230	73.3



*Number of working age (18-64) service users who received long-term support during the year with a primary support reason of learning disability support, who are living on their own or with their family

**Number of working age (18-64) service users who received long-term support during the year with a primary support reason of learning disability support

***Proportion of working age (18-64) service users who received long-term support during the year with a primary support reason of learning disability support, who are living on their own or with their family (%)



Health and Wellbeing is improved

Enhanced quality of life and care for people with learning disability, autism and or mental illness

Adults in contact with secondary community health teams living independently

The measure shows the percentage of adults receiving secondary mental health services living independently at the time of their most recent assessment, formal review or other multi-disciplinary care planning meeting.

Adults 'in contact with secondary mental health services' is defined as those aged 18 to 69 who are receiving secondary mental health services and who are on the Care Programme Approach (CPA).

'Living independently, with or without support' refers to accommodation arrangements where the occupier has security of tenure or appropriate stability of residence in their usual accommodation in the medium-to-long-term, or is part of a household whose head holds such security of tenure/residence.

Numerator: Number of adults aged 18-69 who are receiving secondary mental health services on the Care Programme Approach recorded as living independently (with or without support).

Denominator: Number of adults aged 18-69 who have received secondary mental health services and who were on the Care Programme Approach at the end of the month.

The percentage is calculated as follows: Numerator divided by the denominator multiplied by 100.



Achieved

57.70

% of adults

Quarter 4 March 2016

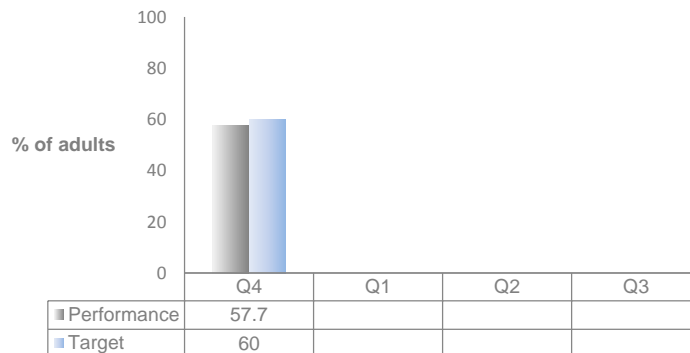


60.00

% of adults

Target for March 2016

Adults in contact with secondary community health teams living independently

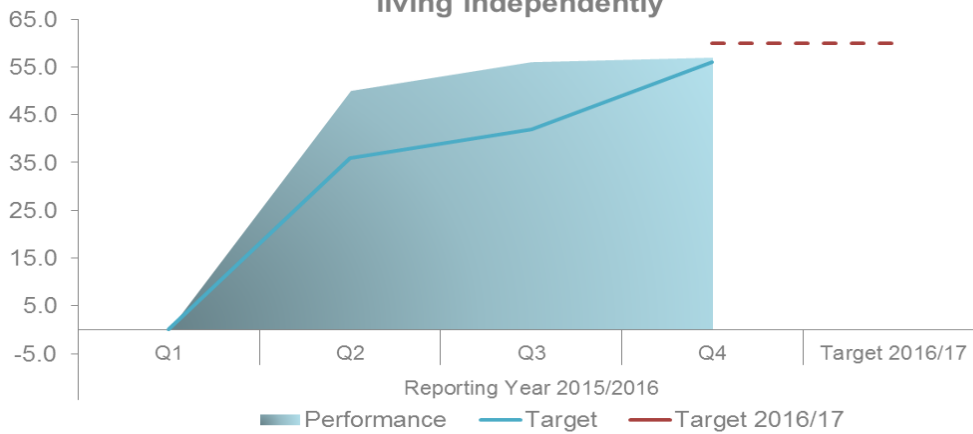


About the latest performance

Data comes from the published Mental Health Minimum dataset which is collected and reported by NHS Digital (formerly the Health and Social Care Information Centre). Figures quoted for Q1 2016-2017 are the latest available (March 2016).

Further details

Adults in contact with community mental health teams living independently



Reporting Year 2015/2016					
	Q1	Q2	Q3	Q4	Target 2016/17
Performance	Not reported	50.0	56.0	57.0	
Target	Not reported	36.0	42.0	56.0	60.0

About the target

Targets are based on trends and CIPFA group averages. For a definition of CIPFA please see About Benchmarking.

About the target range

This measure has a target range of +/- 5% based on tolerances used by Department of Health

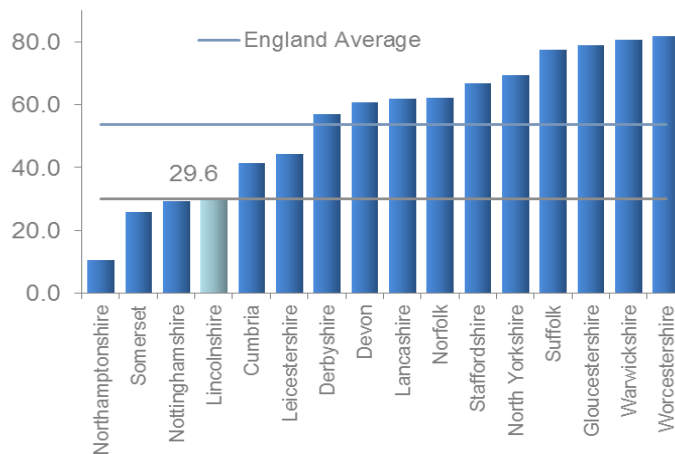
About benchmarking

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Adults in contact with community mental health teams living independently CIPFA Comparators 2014/15

■ The proportion of adults in contact with secondary mental health services living independently, with or without support
 — EM Regional Average

	*Outcome
Northamptonshire	10.6
Somerset	26.0
Nottinghamshire	29.4
Lincolnshire	29.6
Cumbria	41.5
Leicestershire	44.5
Derbyshire	57.1
Devon	60.9
Lancashire	62.1
Norfolk	62.3
Staffordshire	66.8
North Yorkshire	69.6
Suffolk	77.4
Gloucestershire	79.1
Warwickshire	80.6
Worcestershire	81.8
EM Regional Average	33.5
England Average	59.7



*Proportion of working age adults (18-69) who are receiving secondary mental health services and who are on the Care Programme Approach (CPA) at the end of the month, who are recorded as living independently (with or without support) (%)



Health and Wellbeing is improved

Enhanced quality of life and care for people with learning disability, autism and or mental illness

Adults who receive a direct payment (Learning Disability or Mental Health)


This measure reflects the proportion of people using services who receive a direct payment.
 Numerator: Number of Learning Disability and Mental Health service users receiving direct or part direct payments.
 Denominator: Number of Learning Disability and Mental Health service users aged 18 or over accessing long term support.
 The percentage is calculated as follows: Numerator divided by the denominator multiplied by 100.

✘ Not Achieved

41.7

%

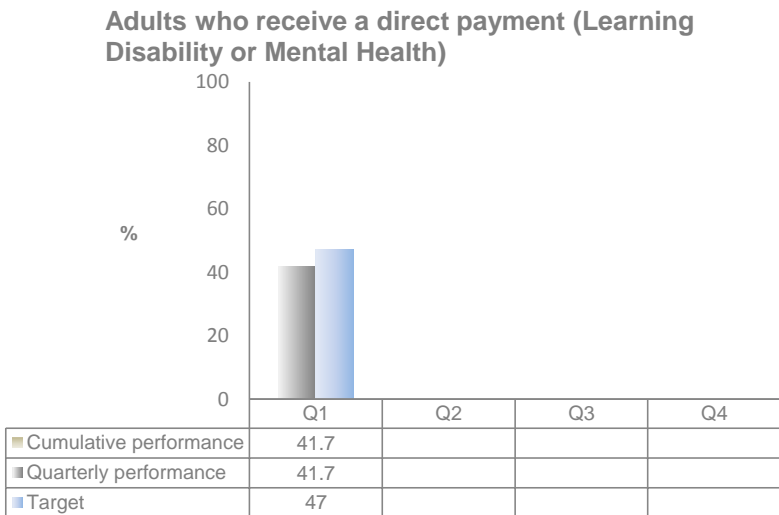
Quarter 1 June 2016



47.0

%

Target for June 2016



About the latest performance

This measure has been amended for 2016/17 to focus on direct payments provided to clients with a learning disability or a mental health need. Previously the measure only counted direct payments for learning disability clients. Direct Payments for people under the Specialist Adults Strategy are almost at saturation point, particularly in the Learning Disability service where almost two thirds of clients are supported in the community with a managed personal budget service. The high cost and complexity of these peoples' needs make it difficult to convert their packages to a direct payment. However, growth is still possible since a high proportion of young adults transferring from Children's Services into Adult Care community services receive a direct payment, although these are relatively few in number. With Mental Health services, direct payments are the main offer to clients, with very few managed services. Overall the number of direct payments has fallen since 2015/16 because a number of direct payments paid to mental health clients in that year were one-off payments and have now been closed. An additional 75 clients (approximately) are required to hit the year-end target of 47%.

Further details

No further information available, as measure not reported in 2015/16.

About the target

The target is based on historical trends and is indicative of the expected direction of travel.

About the target range

This measure has a target range of +/- 5% based on tolerances used by Department of Health

About benchmarking

This measure is local to Lincolnshire and therefore is not benchmarked against any other area.



Health and Wellbeing is improved

Enhanced quality of life and care for people with learning disability, autism and or mental illness

Adults who have received a review of their needs (Learning Disability or Mental Health)

Lincolnshire County Council has a statutory duty to assess people with an eligible need and once the person has a support plan there is a duty to reassess their needs annually. This measure ensures people currently in receipt of long term support or in a residential / nursing placement are reassessed annually.

Numerator: Number of current Learning Disability and Mental Health service users who have received an assessment or reassessment of need in the year. Denominator: Number of current Learning Disability and Mental Health service users receiving long term support in the community or a residential / nursing placement.

The percentage is calculated as follows: Numerator divided by the denominator multiplied by 100.



Not achieved

16.4

%

Quarter 1 June 2016

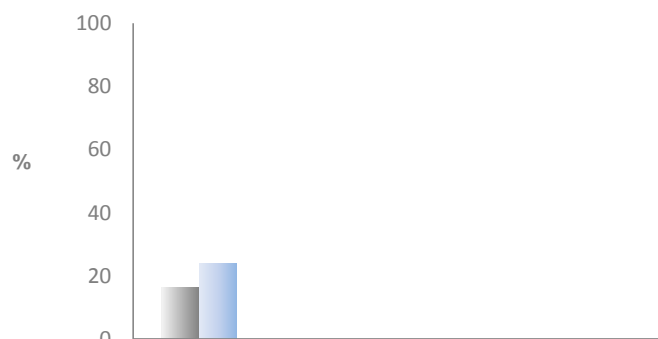


23.8

%

Target for June 2016

Adults who have received a review of their needs (Learning Disability or Mental Health)



	Q1	Q2	Q3	Q4
Cumulative performance	16.4			
Quarterly performance	16.4			
Target	23.8			

About the latest performance

In quarter 1, review performance in learning disability teams is below target. This is consistent with previous years and is likely down to how reviews have been scheduled through the year - most are loaded towards the second half of the year, where review performance usually picks up. The disruption to activity and recording expected when Mosaic is implemented in October is likely to mean that review performance may not converge with the target trajectory, which may lead to a reasonable reduction in the target for the year (to be reviewed at a later date). At present the figures only include review activity for people with a learning disability. In quarter 3, when all activity is recorded in Mosaic, mental health reviews will also be reported

Further details

New measure for 2016/2017, so further information unavailable for previous years.

About the target

The target is based on historical trends and is indicative of the expected direction of travel.

About the target range

This measure has a target range of +/- 5% based on tolerances used by Department of Health

About benchmarking

This measure is local to Lincolnshire and therefore is not benchmarked against any other area.

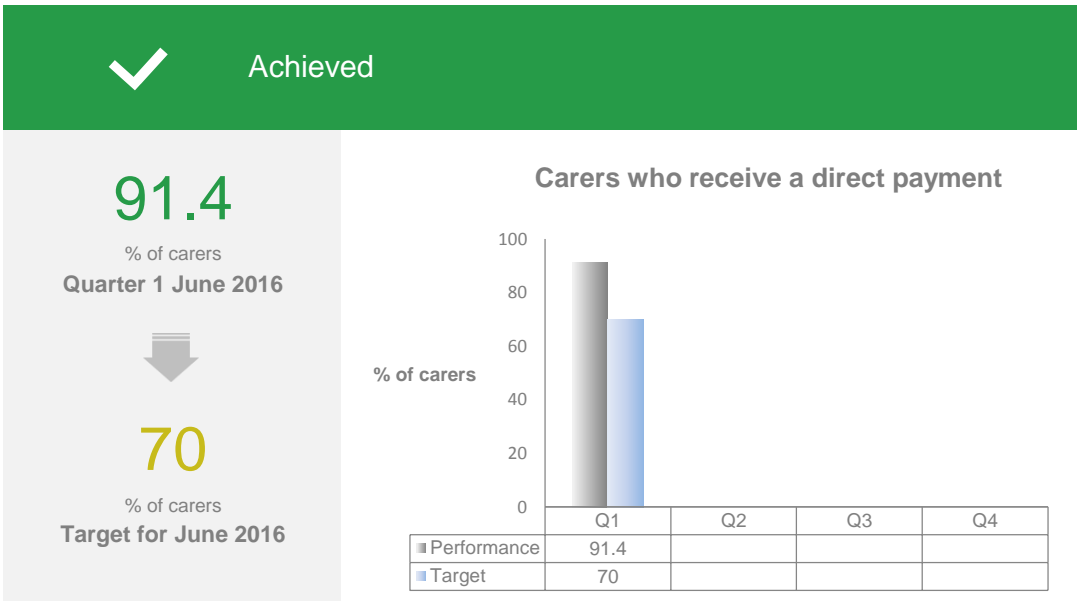


Health and Wellbeing is improved

Carers feel valued and respected and able to maintain their caring roles

Carers who receive a direct payment

This measure reflects the proportion of carers who receive a direct payment.
 Numerator: Number of carers who are and have been receiving direct payments and part direct payments in the last 12 months.
 Denominator: Number of carers receiving carer specific support services.
 The percentage is calculated as follows: Numerator divided by the denominator multiplied by 100.

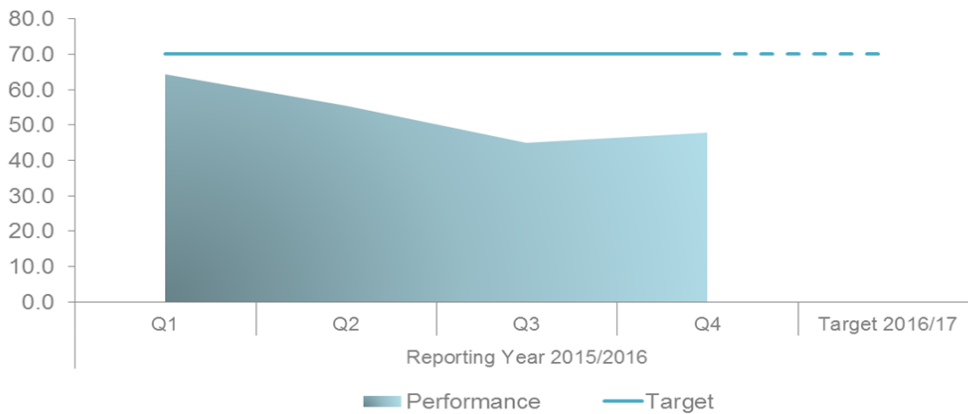


About the latest performance

There has been a definite shift in the provision of services to carers; away from personal budgets and council provided services to universal services provided by the new provider, Carers First. Fewer new and existing carers are eligible for funded support based on the Care Act 2014 national threshold. For Carers that are eligible for care and support, a direct payment is no longer the default service. 8 weeks of support planning means that a higher proportion of carers' needs are being met without a direct payment. Carers who do get direct care are more than likely going to receive it as a direct payment. The apparent turn around in performance is a result of data changes made in readiness for migration to the new case management system, Mosaic. The majority of carers included in the denominator, and thus depressing the measure were deemed to be receiving ongoing 'professional support' from a support worker. There is now no need for this generic service as these cases will be transferred to Carers First for a universal support service that will be available for as long as the carer needs. As a consequence, these carers are outside the scope of a personal budget / direct payment unless their circumstances change in the future.

Further details

Carers who receive a direct payment



Reporting Year 2015/2016					
	Q1	Q2	Q3	Q4	Target 2016/17
Performance	64.5	55.6	45.0	48.0	
Target	70.0	70.0	70.0	70.0	70.0

About the target

Targets are based on trends and CIPFA group averages. For a definition of CIPFA please see About Benchmarking.

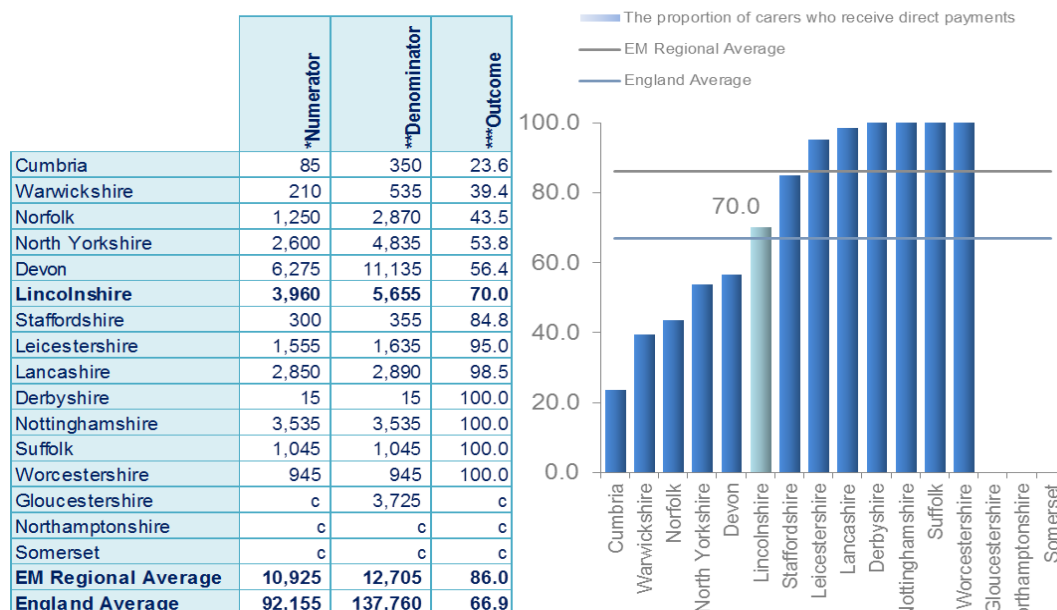
About the target range

This measure has a target range of +/- 5% based on tolerances used by Department of Health

About benchmarking

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Carers who receive a direct payment - CIPFA Comparators 2014/15



*Number of carers receiving direct payments or part-direct payments in the year (14/15) to 31 March
 **Number of carers receiving carer-specific services in the year (14/15) to 31 March
 ***Proportion of carers receiving carer-specific services in the year (14/15) to 31 March who received direct payments (%)



Health and Wellbeing is improved

Carers feel valued and respected and able to maintain their caring roles

Carers included or consulted in discussions about the person they care for

This measures responses to the question in the Carers Survey "In the last 12 months, do you feel you have been involved or consulted as much as you wanted to be, in discussions about the support or services provided to the person you care for?", to which the following answers are possible:

- * There have been no discussions that I am aware of in the last 12 months
- * I always felt involved or consulted
- * I usually felt involved or consulted
- * I sometimes felt involved or consulted
- * I never felt involved or consulted

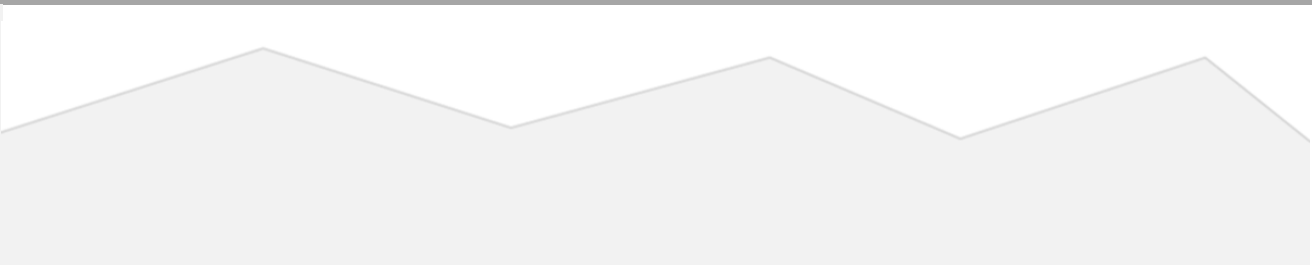
Numerator: All those responding who choose the answer "I always felt involved or consulted" and "I usually felt involved or consulted".

Denominator: Total number who responded to the survey.

The percentage is calculated as follows: Numerator divided by the denominator multiplied by 100.



Reported
biennially in Q4



About the latest performance

Further details

No further information available, as measure not reported in 2015/16.

About the target

Targets are based on trends and CIPFA group averages. For a definition of CIPFA please see About Benchmarking.

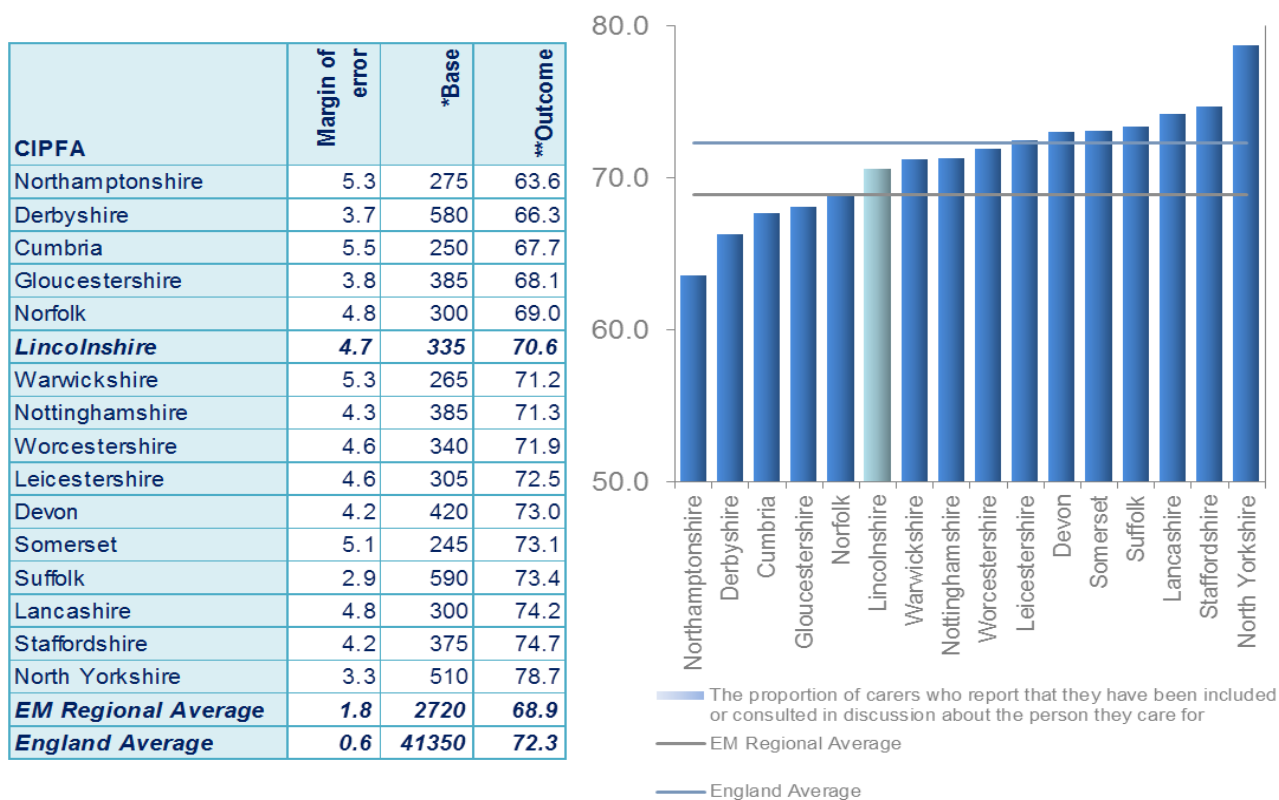
About the target range

This measure has a target range of +/- 5% based on tolerances used by Department of Health

About benchmarking

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Carers included or consulted in discussions about the person they care for - CIPFA Comparators



*Number of respondents who answered Carers Survey (CS)

**Proportion of respondents who answered Carers Survey (CS) Q15 who said that they usually or always felt involved or consulted in discussion about the person they care for (%)



Health and Wellbeing is improved

Carers feel valued and respected and able to maintain their caring roles

Carers who find it easy to find information about services

The relevant question is drawn from the Carers Survey "In the last 12 months, have you found it easy or difficult to find information and advice about support, services or benefits? Please include information and advice from different sources, such as voluntary organisations and private agencies as well as Social Services". The following answers are possible:

- * I have not tried to find information or advice in the last 12 months
- * Very easy to find
- * Fairly easy to find
- * Fairly difficult to find
- * Very difficult to find

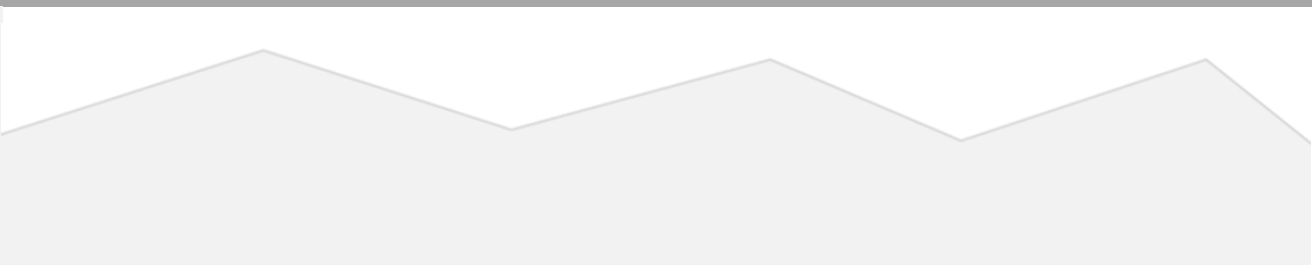
Numerator: Number of those responding who select the response "very easy to find" and "fairly easy to find".

Denominator: Number of those who responded to the survey.

The percentage is calculated as follows: Numerator divided by the denominator multiplied by 100.



Reported
biennially in Q4



About the latest performance

Further details

No further information available, as measure not reported in 2015/16.

About the target

Targets are based on trends and CIPFA group averages. For a definition of CIPFA please see About Benchmarking.

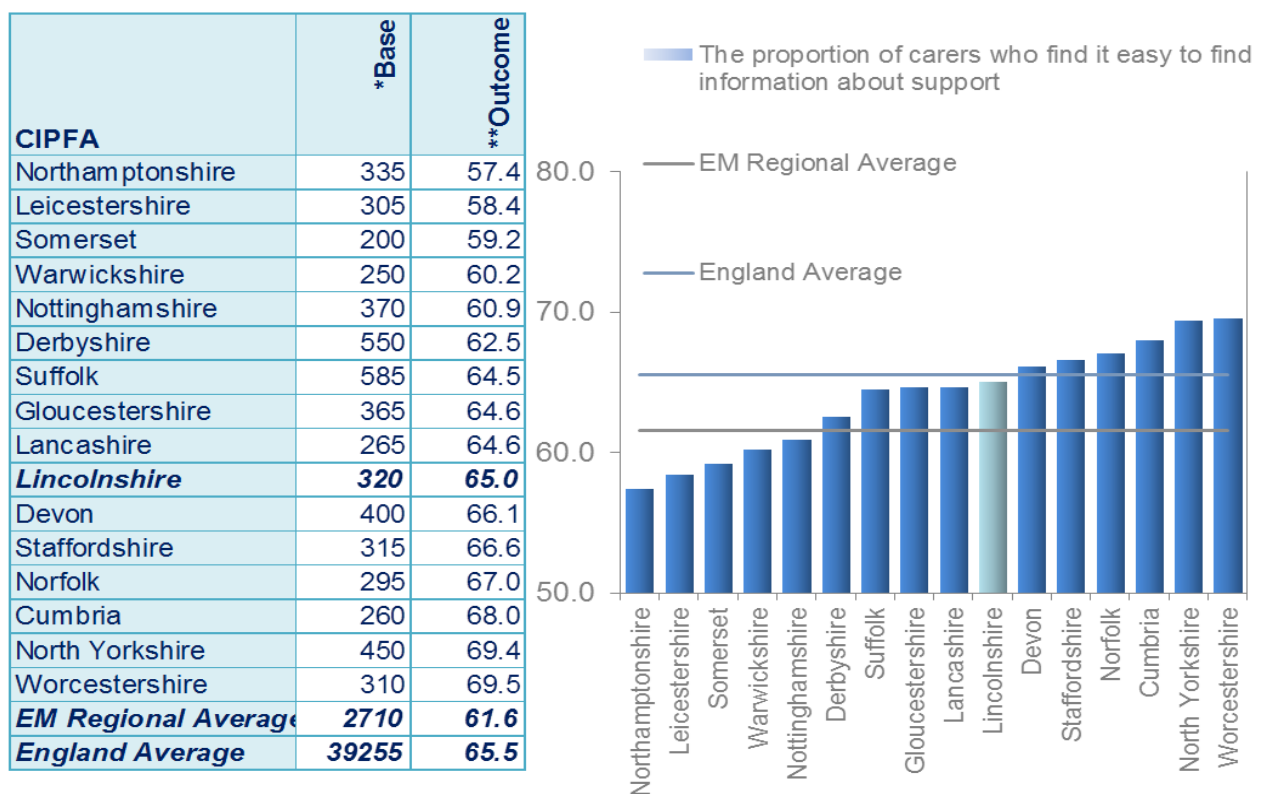
About the target range

This measure has a target range of +/- 5% based on tolerances used by Department of Health

About benchmarking

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Carers who find it easy to find information about services - CIPFA Comparators



*Number of respondents who answered Carers Survey (CS) Q13

**Proportion of respondents who answered Carers Survey (CS) Q13 who find it "very easy" or "fairly easy" to find information about services (%)



Health and Wellbeing is improved

People are supported to remain independent and at home

Permanent admissions to residential and nursing care homes aged 65+

The number of admissions of older people to residential and nursing care homes relative to the population size (65+).

Numerator - The number of LCC funded/part funded permanent admissions of older people, aged 65+, to residential and nursing care during the year.

Denominator - Size of older people population (aged 65+) in Lincolnshire based on the Office of National Statistics mid-year population 2013 estimates.

The desired outcome is fewer permanent admissions to residential and nursing care homes (65+).

This is a Adult Social Care Outcomes Framework (ASCOF) 2a part 2 and reported in the Better Care Fund (BCF).



Not achieved

260

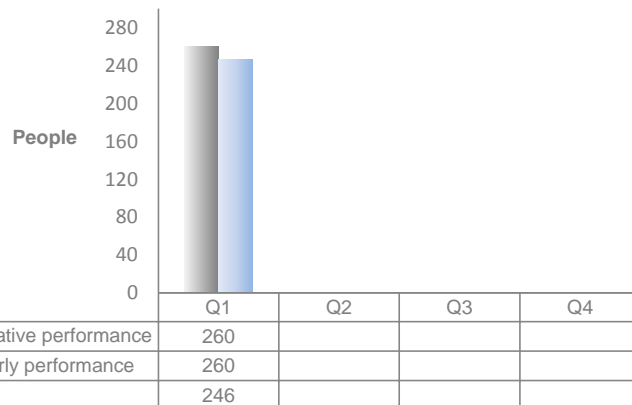
People
Quarter 1 June 2016



246

People
Target for June 2016

Permanent admissions to residential and nursing care homes aged 65+

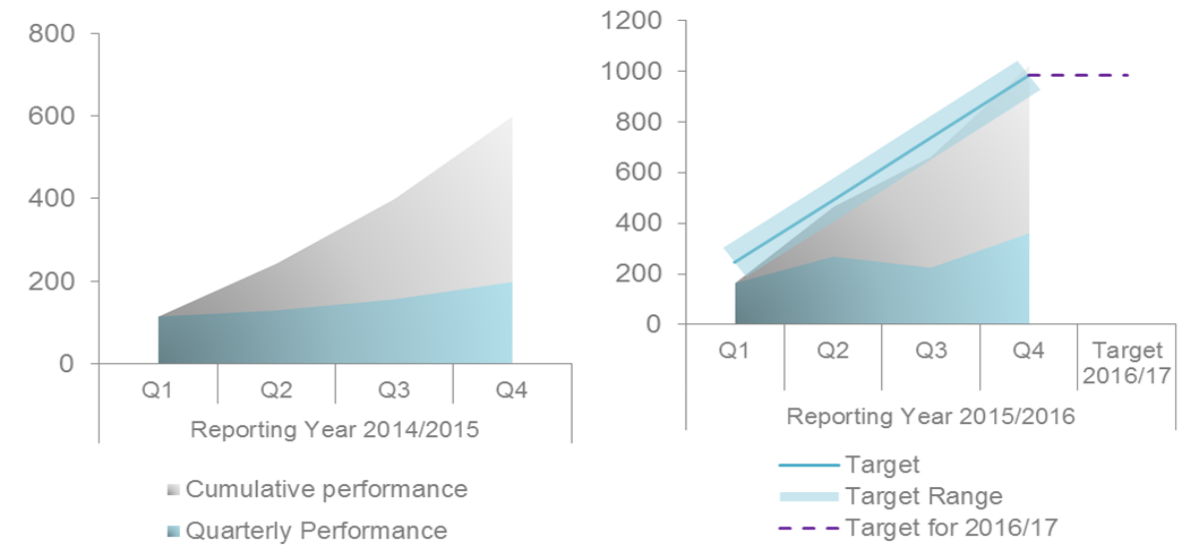


About the latest performance

Admission in quarter 1 are higher than target, primarily driven by the number of older people requiring residential placements, with unusually high admissions in May.

Further details

**Permanent admissions to residential and nursing care home
Per 100,000 population aged over 65 years**



	Reporting Year 2014/2015				Reporting Year 2015/2016				Target 2016/17
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
Cumulative performance	115.0	243.8	401.4	600.2	163.0	462.0	658.0	1019.0	
Quarterly Performance	115.0	128.8	157.6	198.8	163.0	269.0	226.0	361.0	
Target	189.8	379.5	569.3	759.0	246.0	491.0	737.0	982.0	982.0
Upper Range	199.2	398.5	597.7	797.0	258.3	515.6	773.9	1031.1	
Lower range	180.3	360.5	540.8	721.1	233.7	466.5	700.2	932.9	
Target Range	189.8	379.5	569.3	759.0	246.0	491.0	737.0	982.0	

About the target

Targets are based on trends and CIPFA group averages. For a definition of CIPFA please see About Benchmarking.

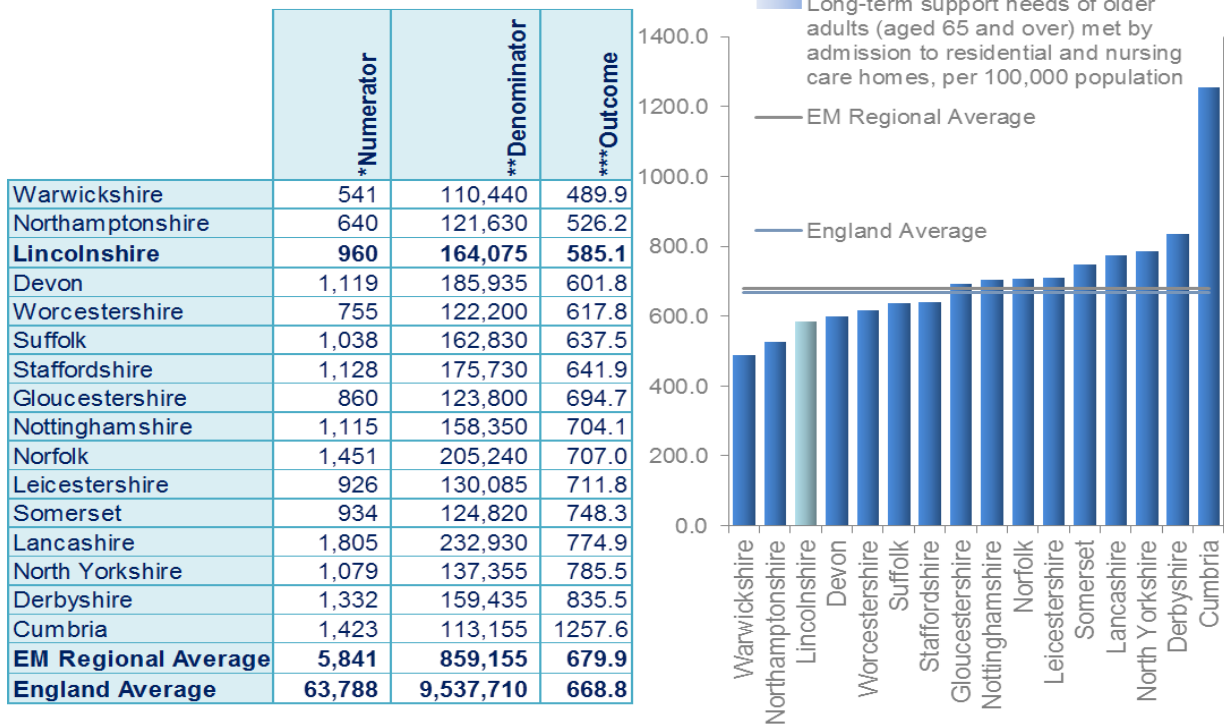
About the target range

This measure has a target range of +/- 5% based on tolerances used by Department of Health

About benchmarking

Lincolnshire County Council provides performance reports to the Chartered Institute of Public Finance and Accountancy (CIPFA) which facilitates a benchmarking services to enable Adult Social Care performance to be monitored against other local authorities. We benchmark against other Local Authorities within our CIPFA Group of 16 authorities.

Permanent admissions to residential and nursing care homes aged 65+ CIPFA Comparators 2014/15



*The number of council-supported older adults (aged 65 and over) whose long-term support needs were met by a change of setting to residential and nursing care during the year (excluding transfers between residential and nursing care)

**Size of the older adult population (aged 65 and over) in the area

***Number of council-supported older adults (aged 65 and over) whose long-term support needs were met by admission to residential and nursing care homes, per 100,000 population



Health and Wellbeing is improved

People are supported to remain independent and at home

Requests for support for new clients, where the outcome was universal services/ signposting

This measure demonstrates that the:-

Customer Service Centre (CSC);

Field Work Team; and

Emergency Duty Team (EDT) is able to effectively screen people and signpost to the appropriate agencies without the need for social care intervention.

Numerator: Number of requests for support for new clients, where the outcome was universal services / signposting to other services.

Denominator: Customer Service Centre based teams for new clients in the period.

The percentage is calculated as follows: Numerator divided by the denominator multiplied by 100.

New client defined as not known to Adult Care at the time of the contact.

This is a count of contacts, not the number of people.



Achieved

66.3

%

Quarter 1 June 2016

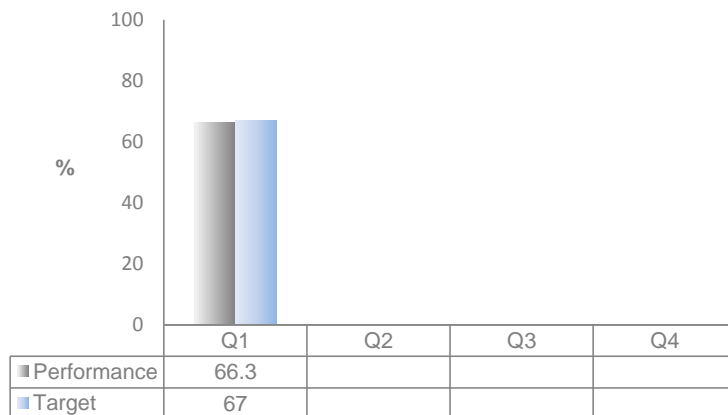


67

%

Target for June 2016

Requests for support for new clients, where the outcome was universal services/ signposting



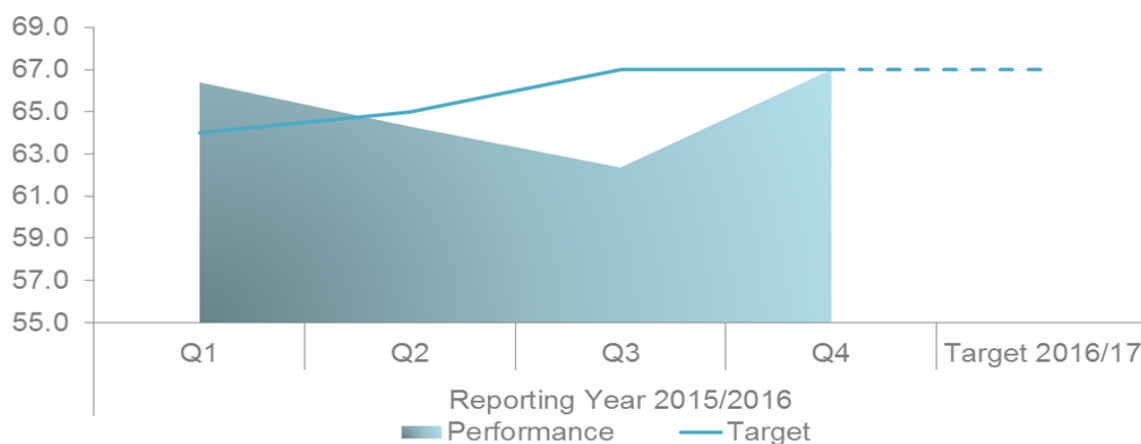
About the latest performance

This measure is currently being achieved, and has been relatively stable over the last 18 months. This is testament to the information offer and screening ability of the Serco Customer Service Centre.

Looking at the bigger picture though, should the measure show a decrease, this would be an indication of the success of other lower level and preventative services such as Reablement, wellbeing, equipment provision etc., so it can't be judged in isolation.

Further details

Requests for support for new clients, where the outcome was universal services/ signposting



	Reporting Year 2015/2016				Target 2016/17
	Q1	Q2	Q3	Q4	
Performance	66.4	64.3	62.4	67.0	
Target	64.0	65.0	67.0	67.0	67.0

About the target

Targets are based on trends and CIPFA group averages. For a definition of CIPFA please see About Benchmarking.

About the target range

This measure has a target range of +/- 5% based on tolerances used by Department of Health

About benchmarking

Lincolnshire County Council provides performance reports to the Chartered Institute of Public Finance and Accountancy (CIPFA) which facilitates a benchmarking services to enable Adult Social Care performance to be monitored against other local authorities. We benchmark against other Local Authorities within our CIPFA Group of 16 authorities. Benchmarking data is not available for this measure.



Health and Wellbeing is improved

The quality of life for the most vulnerable people is improved

Adults who receive a direct payment

This measure reflects the proportion of people using services who receive a direct payment.

Numerator: Number of users receiving direct or part direct payments.

Denominator: Number of clients aged 18 or over accessing long term support.

The percentage is calculated as follows: Numerator divided by the denominator multiplied by 100.



Not achieved

31.5

%

Quarter 1 June 2016

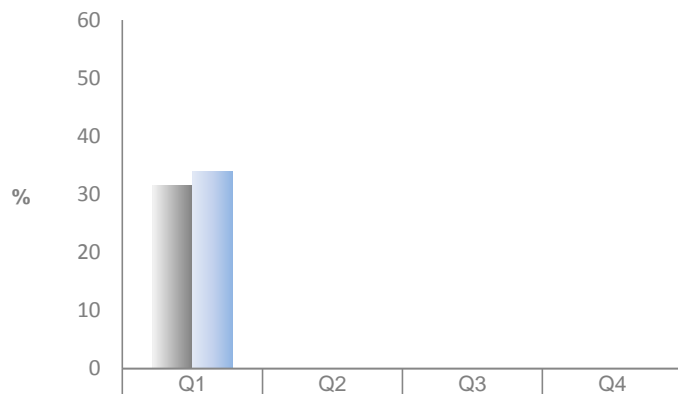


34

%

Target for June 2016

Adults who receive a direct payment



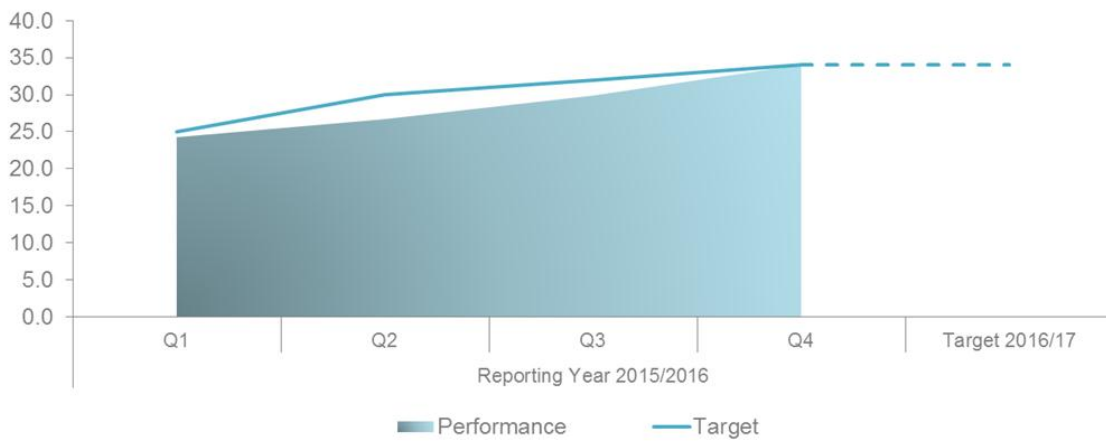
	Q1	Q2	Q3	Q4
Cumulative performance	31.5			
Quarterly performance	31.5			
Target	34			

About the latest performance

The position with direct payment provision is fairly static at present. New direct payments set up since March 2016 have been offset by closing direct payments that are no longer being provided. This is a result of the validation work that has been carried out for system migration purposes. The only growth area is in older people where 50 new direct payments have been provided in the last 3 months.

Further details

Adults who receive a direct Payment



	Reporting Year 2015/2016				Target 2016/17
	Q1	Q2	Q3	Q4	
Performance	24.2	26.7	29.8	34.0	
Target	25.0	30.0	32.0	34.0	34.0

About the target

Targets are based on trends and CIPFA group averages. For a definition of CIPFA please see About Benchmarking.

About the target range

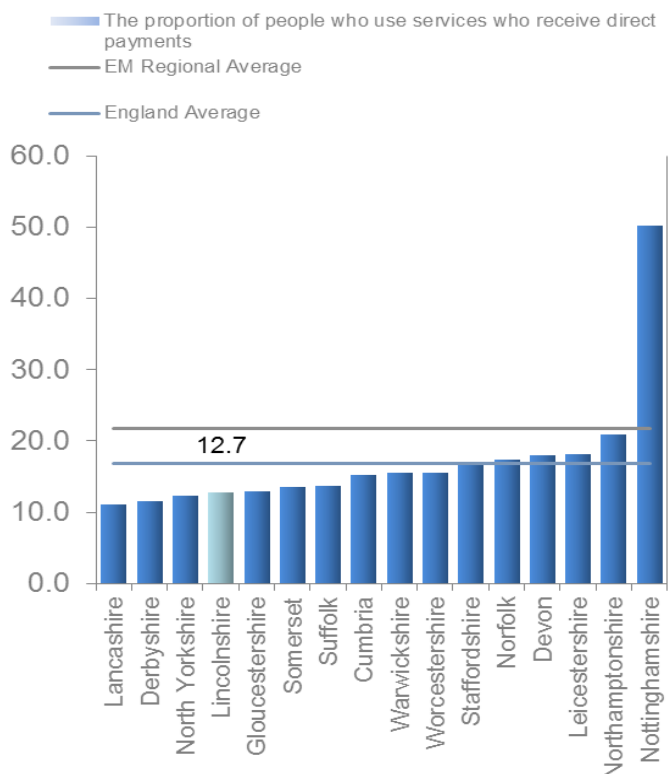
This measure has a target range of +/- 5% based on tolerances used by Department of Health

About benchmarking

Lincolnshire County Council provides performance reports to the Chartered Institute of Public Finance and Accountancy (CIPFA) which facilitates a benchmarking services to enable Adult Social Care performance to be monitored against other local authorities. We benchmark against other Local Authorities within our CIPFA Group of 16 authorities.

Service users who receive a direct payment - CIPFA Comparators 2014/15

	*Numerator	**Denominator	***Outcome
Lancashire	655	5,895	11.1
Derbyshire	495	4,300	11.5
North Yorkshire	415	3,430	12.2
Lincolnshire	465	3,640	12.7
Gloucestershire	270	2,080	12.9
Somerset	380	2,840	13.5
Suffolk	440	3,225	13.6
Cumbria	425	2,795	15.2
Warwickshire	365	2,350	15.5
Worcestershire	310	2,010	15.5
Staffordshire	810	4,770	17.0
Norfolk	760	4,410	17.3
Devon	815	4,550	17.9
Leicestershire	550	3,030	18.1
Northamptonshire	470	2,245	20.9
Nottinghamshire	1,670	3,330	50.2
EM Regional Average	4,720	21,765	21.7
England Average	42,785	253,535	16.9



*Number of service users receiving direct payments or part-direct payments at the year end 31 March (14/15)

**Number of service users accessing long-term support at the year end 31 March (14/15)

***Proportion of service users accessing long-term support at the year-end 31 March (14/15) who were receiving direct payments (%)



Health and Wellbeing is improved

People have a positive experience of care and support

Percentage of people in receipt of long term support who have been reviewed

Lincolnshire County Council has a statutory duty to assess people with an eligible need and once the person has a support plan there is a duty to reassess their needs annually. This measure ensures people currently in receipt of long term support or in a residential / nursing placement are reassessed annually.

Numerator: Number of current service users who have received an assessment or reassessment of need in the year. Denominator: Number of current service users receiving long term support in the community or a residential / nursing placement.

The percentage is calculated as follows: Numerator divided by the denominator multiplied by 100.



Achieved

22

%

Quarter 1 June 2016

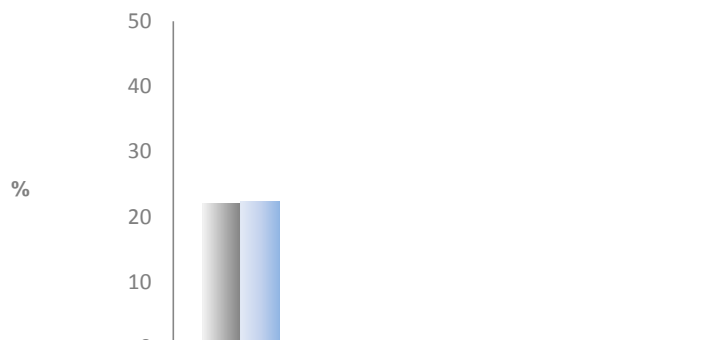


22.3

%

Target for June 2016

Percentage of people in receipt of long term support who have been reviewed



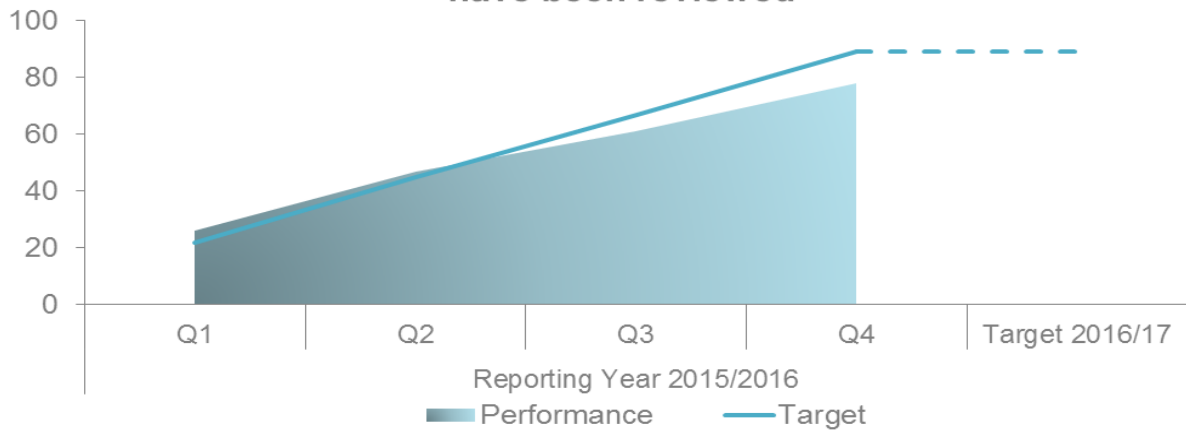
	Q1	Q2	Q3	Q4
Cumulative performance	22			
Quarterly performance	22			
Target	22.3			

About the latest performance

This measure is currently on track. However, there is expected to be a disruption to the recording of social work activity during September and October and for the remainder of the year as the new case management system, Mosaic is being implemented. All reviews completed in the new system will have to be a full re-assessment of need which will involve more practitioner time to complete and record. This will have a significant bearing on the department's ability to hit the year end target of 89%.

Further details

Percentage of people in receipt of long term support who have been reviewed



Reporting Year 2015/2016

	Q1	Q2	Q3	Q4	Target 2016/17
Performance	26.0	46.9	60.9	78.0	
Target	22.0	45.0	67.0	89.0	89.0

About the target

The target is based on historical trends and is indicative of the expected direction of travel.

About the target range

This measure has a target range of +/- 5% based on tolerances used by Department of Health

About benchmarking

This measure is local to Lincolnshire and therefore is not benchmarked against any other area.

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