

Appendix A Summary of those measures where the target was not achieved in Quarter 2

The following 5 commissioning strategies had mixed performance. It is worth noting that all of the measures detailed below did not achieve the target in Q1 and Q2 with the exception of '16-17 year old Looked After Children participating in learning' (where performance is expected to improve) and 'Health and Social Care staff trained in Making Every Contact Count (MECC)' (where the annual target is expected to be achieved).

Carers

Of the 3 measures reported in Q2, 1 achieved the target and 2 measures did not achieve the target.

- 'Carers who receive a direct payment' continues not to achieve the target and is unlikely to meet the target by the end of the year. There are two routes to get carers services, the carer:-
 - Can go through the carers service managed by Serco and CarersFIRST, in which case the carer will be assessed in their own right and receive a direct payment as the exclusive deployment of a personal budget. Historically this has been where the majority of the activity has been, and where there has been a high percentage of direct payments provided to carers;
 - May be assessed jointly with the person they care for by an Adult Care Team. The resulting personal budget to the person they care for may typically take the form of respite care in a residential care home. Although the service is directly for the client (i.e. they are placed in a care home), the service is actually recorded as an 'indirect' carer service, as it meets the needs of the carer by offering them a break.

There has been an increase in the carers offer by Adult Care Teams over the last 2 years, which is offsetting the percentage of carers with a direct payment. This whole family approach is not to be discouraged though. As a consequence, this measure is currently being reviewed as the measure may no longer be suitable for monitoring the aims of the strategy. (Measure 54)

- 'Carers supported to delay the care and support for the person they care for' as reported in Q1, this measure was included in the Council Business Plan to illustrate the preventative element of the Carers Service in delaying the support needs of the adults that carers are looking after. It shows the proportion of carers receiving services where the adult cared-for does not receive a service from Adult Care. Interestingly, there is a slight downwards trend from Q1. This is for two reasons:-
 - More and more carers are in fact being identified and referred by Adult Care (i.e. where the adult does receive a service from Adult Care). This is a trend to be welcomed and means that Adult Care is moving towards a practice of 'Thinking Family' when it comes to assessing need.
 - The downward trend indicates that within the 'Health and Care Community' as a whole, we are not identifying carers early enough. Strategically, the earlier we can identify and help carers, the more resilient and well supported the carer is. Early identification and early help is key to strong performance.

We need the full and active engagement of all our partners in primary, community based, specialist and acute health care to identify and signpost carers to available support at the earliest opportunity. Our new Better Care Fund projects working with pharmacies and Health teams will help support these outcomes. The NHS Five Year Forward View Memorandum of Understanding will also support this approach, requiring all Health partners to describe how they will identify and support family carers. It should be noted that carers who are supported within our hospital based in-reach service are not yet counted here (unless they progress onto an assessment). At the moment, Adult Care is not yet able to report on referral sources to the Customer Service Centre to evidence improvement in carer identification by our

partners. We are not on track to achieve the target as it stands for the year end without significant changes in practice in carer identification by the wider Health & Care community. (Measure 57).

The following 3 measures are reported biennially in Q4. Latest performance relates to 2016/2017 and was reported in Q4 2016/2017:- 'Carer reported quality of life' (Measure 55), 'Carers included or consulted in discussions about the person they care for' (Measure 56), 'Carers who find it easy to find information about services' (Measure 58).

Protecting the public

A summary of the 7 measures that did not achieve the target in Q2 for Protecting the Public Commissioning Strategy are:-

- 'Alcohol related antisocial behaviour incidents' Alcohol related anti-social behaviour is 10% lower in Q2 than in Q2 2016/2017. Alcohol related anti-social behaviour continues to fall and remains the lowest this quarter than it has been in Quarter 2 for the past six years. Alcohol related crime occurring at night has decreased particularly. Although the target has not been achieved this quarter, the figure is closer to the target than in Q1 2017-18. (Measure 5)
- 'Alcohol related violent crime incidents' alcohol related violence is up 38% compared to Q2 2016/2017 and is higher than last quarter. Overall, all types of alcohol related crime are continuing an upwards trend with alcohol related violence accounting for the largest proportion. An increase in overall violent crime is currently being experienced nationally. (Measure 6)
- 'Reported incidents of domestic abuse' domestic abuse incidents reported to the police are 8% lower in Quarter 2 than in Q 2 2016/2017. In terms of locality, all districts except for Boston and North Kesteven have seen a decrease in reports compared to the same quarter last year. Although there remains a gap between the prevalence estimates provided by the Crime Survey for England and Wales and those reported to the police, it is important to note that these figures don't include incidents reported to other agencies and support services such as district councils or housing agencies. (Measure 7)
- 'Juvenile first time reoffenders' the most recent published FTE (first time entrants) figure for Lincolnshire is 283 actual young people for the period of April 2016 to March 2017 is higher than the target figure of 203. As highlighted in Q1, the number of young people entering the criminal justice system for the first time is mostly controlled by external influences, e.g. Police policies, and therefore it is difficult to predict future performance. However, there are no expectations that this figure is likely to rise sharply in the near future. The figure of 283, when expressed as a rate per 100,000, 10 to 17 year old population is 454, which is higher than the local Midlands region of 359, and the National average of 321. In June we launched a new diversionary project in Lincolnshire in conjunction with Lincolnshire Police. This, through joint co-operation between both Services, will divert young people that offend at a low level, through local panels that will try to prevent those young people from getting a criminal record. What we should see will be a more effective restorative justice process, instead of giving the young person a criminal record that will unfairly affect their future life chances. This also should therefore help reduce the numbers of first time entrants. The first impact on the FTE rate will show in the Q3 figures. (Measure 15)
- 'Primary fires' we are currently behind target having seen a 7% increase (41 incidents) over the 6 month period compared with last year (up from 560 at Q2 last year to 601 this year). The increase can be attributed mainly to dwelling fires (increase of 16 or 9%) and vehicle fires (increase of 22 or 17%). The increase seen

at Q2 is less significant than that at Q1 and this has had the effect of bringing the measure closer to target. (Measure 19)

- 'Deliberate primary fires' we are currently behind target having seen an increase of 35 (32%) deliberate primary fires compared to Q2 last year. This is mainly due to an increase in deliberate vehicle fires (from 42 to 71), again compared to Q2 last year. However, the increase seen at Q2 is less significant than that at Q1 and this has had the effect of bringing the measure closer to target. (Measure 21)
- 'Deliberate secondary fires' we are currently behind target having seen a 26% increase (39 incidents) in deliberate secondary fires compared to this time last year. The increase can be attributed mainly to deliberate fires involving refuse/refuse containers (up by 40 from 84 at Q2 last year to 124 this year). The increase seen at Q2 is less significant than that at Q1 and this has had the effect of bringing the measure closer to target. (Measure 22).

Protecting and sustaining the environment

A summary of the 2 measures that did not achieve the target in Q2 for Protecting and Sustaining the environment Commissioning Strategy are:-

- The Household Waste Recycling Centre (HWRC) the percentage of household waste recycled in Q2 is 73.8% and although currently above the yearend forecast of 73.2%, it is anticipated that this figure will decrease in quarters 3 and 4. This is due to a decrease in composting because of weather changes and growing conditions. As reported in Q1, we are seeing an overall reduction in the HWRCs recycling rate; a contributing factor will be the processing of some materials has been moved down the waste hierarchy from recycling to recovery. The Environment Agency have concerns around some materials being stored which has reduced the available recycling outlets in Lincolnshire. (Measure 76)
- 'Household waste recycled' the household waste recycled figure is 50.1% and the service anticipates a decrease in performance over quarters 3 and 4 as we see a reduction in composting during the winter months. As reported in Q1, the service is forecasting an overall decrease of household waste recycled. The year-end forecast is 45.8% for the 2017/2018 reporting year, compared with 46.7% in 2016/2017. This is due to an increase in the reported level of contamination (non-recyclables) in the mixed dry recyclable material collected at the kerbside and the actual overall waste tonnage presented has reduced slightly. The service is predicting a slight drop in the overall levels of green waste due to the growing conditions this summer. The aspirational target of 55% was set in our Joint Municipal Waste Strategy and needs to be addressed. The Strategy is being refreshed in partnership with the District Councils. (Measure 78)

Readiness for Adult Life

Of the 2 measures that can be reported in Q2, performance for '16-17 year old Looked After Children participating in learning' is below target and represents approximately two young people. The Virtual School Team have identified all of those 16-17 year olds not participating in learning and have been successful in finding appropriate placements for the majority of students in the period September to October 2017. This has brought performance within the tolerance range for this indicator as of 23rd October 2017, which although outside of Q 2 reporting parameters, shows a positive increase. (Measure 45)

Wellbeing

A summary of the 3 measures that did not achieve the target in Q2 for Wellbeing Commissioning Strategy are:-

'Successful completion of alcohol treatment' following the new contracts commencing in October 2016 it was anticipated that performance would dip, this has been realised with a reduction in outcomes to 34.9% compared with a target of 40%. Although the transition period to the new contracts was problematic and very disruptive to service delivery and its users, local data now shows performance starting to improve but this has yet to be reflected in the verified data from the Department of Health. (Measure 31)

'Chlamydia diagnosis' Service Credits are now in place from June 2017 due to continuing non achievement of the chlamydia target. The Detection Rate Indicator in East Midlands (all chlamydia diagnoses in 15 to 24 year olds attending specialist and non-specialist sexual health services (SHSs), who are residents in England, expressed as a rate per 100,000 population) ranked Lincolnshire 5th out of 9 Local Authorities which is a downwards position, compared with Lincolnshire's rank of 2nd out of 9 Local Authorities in Q 1; it should be noted however, that Detection rates are falling across the country overall. The positivity rate remains high at 8.8% (target 8 percent) ranked 1st out of 9 Local Authorities. The Public Health England (PHE) Regional Advisor for Sexual Health has advised that the focus should be on the positivity rate as the main quality indicator. Action is ongoing to ensure Data Quality is accurate and a Chlamydia Pathway workshop for Lincolnshire Integrated Sexual health Services (LISH) is planned for November 2017 which will audit recent outputs. A workshop was held in October 2017 to address development of improved chlamydia testing and a new improvement plan was agreed. The monthly Contract Management Meeting (CMM) will monitor progress. The issues have been raised at a strategic level with the recent addition of a Strategic Contract Management Meeting (CMM). LISH have now set targets for their sub-contracted outreach team The Terrence Higgins Trust (THT) and are renewing relationships with their contracted General Practitioner's and Pharmacies to improve.

'Health and Social Care staff trained in Making Every Contact Count (MECC)' although it has been broken down into quarterly segments for the purposes of reporting, the target for this measure is annual. The service expected that performance in quarters 1 and 2 to be low as this period has been spent planning and developing the programme. The service is reporting that overall, the measure is still on track to meet the annual target. (Measure 103)