

Permanent admissions to residential and nursing care homes aged 65+

The number of Lincolnshire County Council funded/part funded permanent admissions of older people, aged 65+, to residential and nursing care during the year.

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

A smaller number of people permanently admitted to residential and nursing homes indicates a better performance. Admissions into residential and nursing placements tend to increase in the winter period due to illness and increased care being required.

This measure is particularly sensitive to time lags in data recording on the system because of the complex care home placement process. As such the reported figures are as recorded at the time of the data extract.



Achieved

947

People

Cumulative Actual as at March
2022

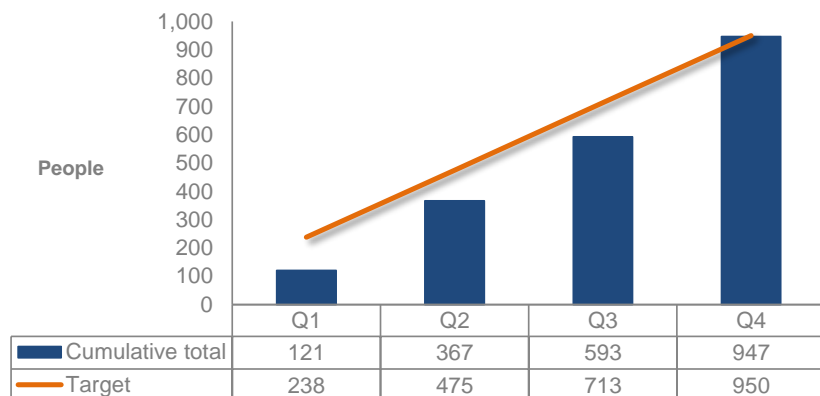


950

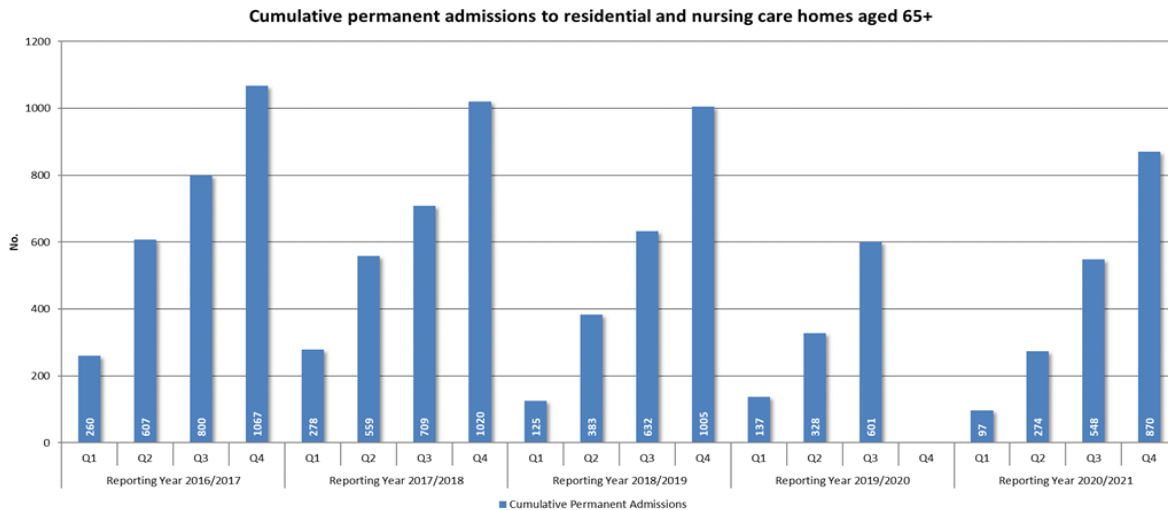
People

Cumulative Target for March
2022

Permanent admissions to residential and nursing care homes aged 65+



Further details



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

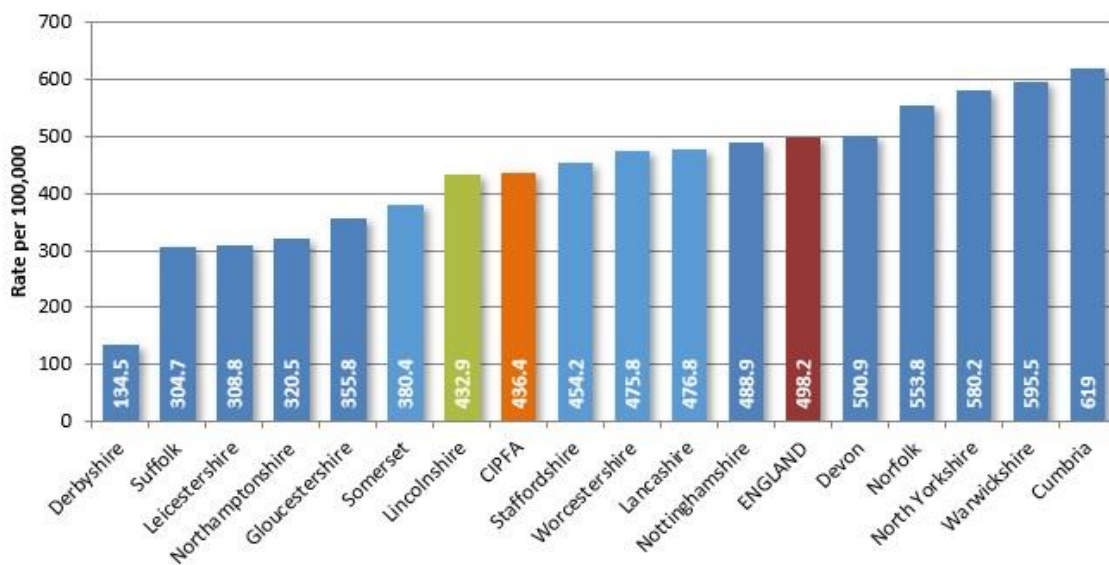
About benchmarking

Lincolnshire County Council provides performance reports to the Chartered Institute of Public Finance and Accountancy (CIPFA) which facilitates 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.

Due to the processing of national figures the benchmarked numbers for Lincolnshire may not exactly match our internally reported 2020-21 year-end figures.

Permanent admissions to residential and nursing care homes aged 65+

Source: ASCOF - LA Level Benchmarking 2020/21



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 adults aged 18 or over accessing long term support on the last day of the period.

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

This measure is reported as a snapshot in time so for example Q2 is performance as at 30th September.

A higher percentage of adults that receive a direct payment indicates a better performance.



About the latest performance

People should be given the opportunity to consider the option of direct payments, 42% of the people who are receiving services have chosen this option which is very positive and exceeds the target.

About the target

Targets are based on trends and CIPFA group averages. For a definition of CIPFA please see About Benchmarking. Based on our performance we have revised the target to 36% for the reporting year 21/22 which now covers all service users.

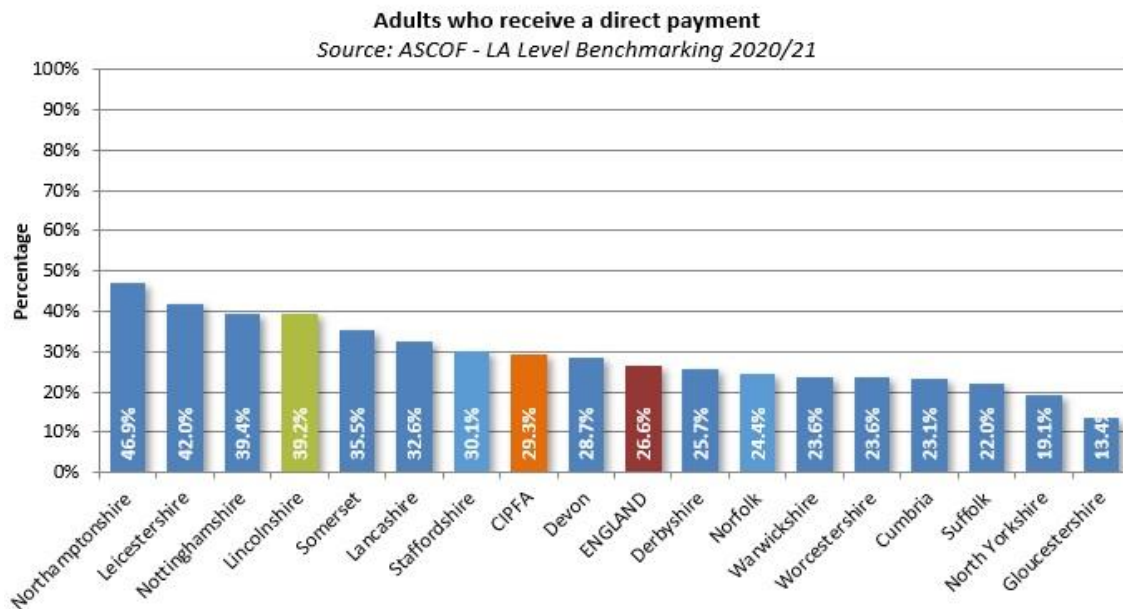
About the target range

This measure has a target range of +/- 5 percentage points 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 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.

Due to the processing of national figures the benchmarked numbers for Lincolnshire may not exactly match our internally reported year-end figures.



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: For adults in the denominator, those that have received an assessment or review of their needs in the year.

Denominator: Number of current service users receiving long term support in the community or in residential care for 12 months or more.

The percentage is calculated as follows: Numerator divided by the denominator multiplied by 100. A higher percentage of people that have been reviewed indicates a better performance.



Not achieved

79.6

%

Cumulative Actual as at March 2022

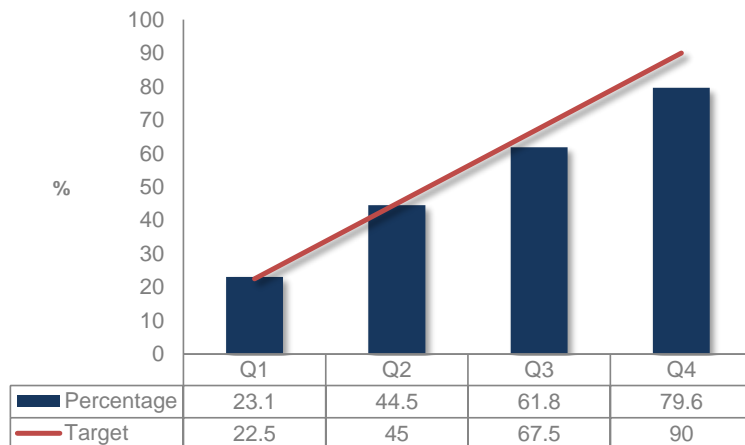
Numerator: 4331
Denominator: 5438

90

%

Cumulative Target for March 2022

People in receipt of long term support who have been reviewed

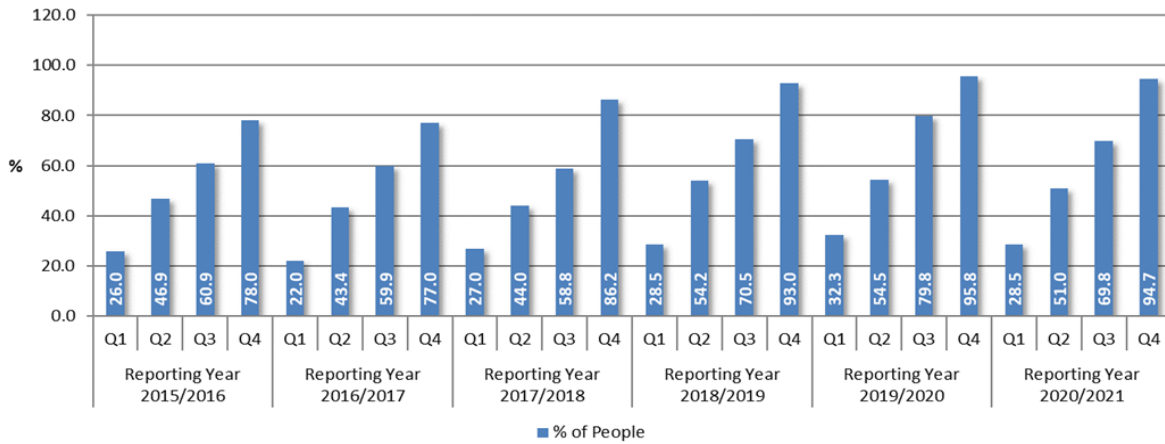


About the latest performance

This measure includes all of adult social care reviews, the challenges to review all people receiving long-term support has been in adult frailty due to competing priorities particularly due to the pressures of hospital discharge. This has resulted in the need to prioritise unplanned reviews and assessments. Plans are in pace to improve the performance over the next year.

Further details

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



About the target

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

About the target range

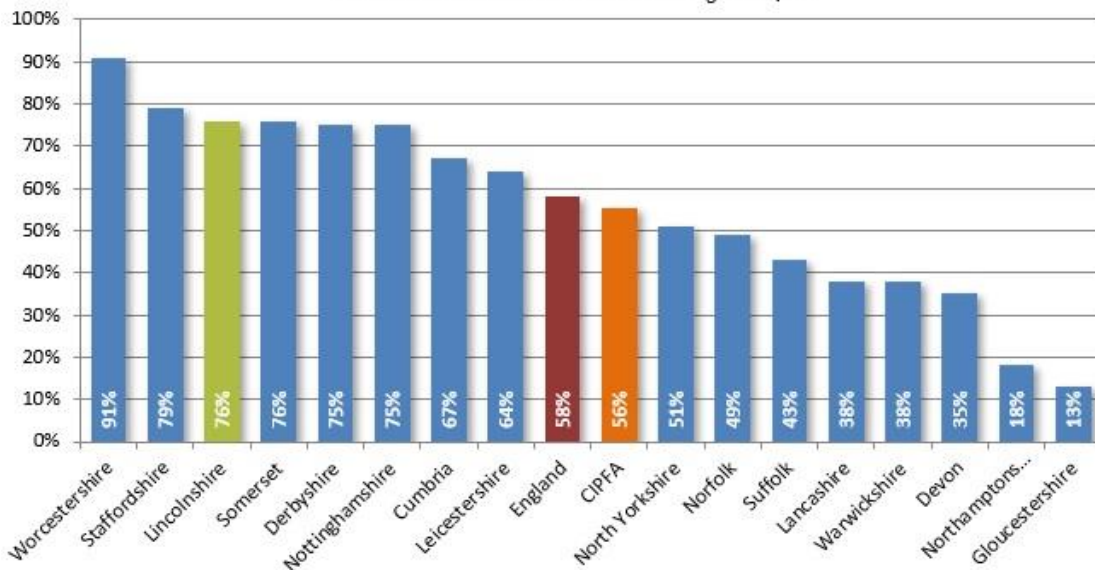
This measure has a target range of +/- 5 percentage points based on tolerances used by Department of Health

About benchmarking

Benchmarking from the statutory SALT collection is possible at an aggregated level, that is for all clients supported by Adult Care for 12 months or more where a review has taken place. However, it cannot be disaggregated by client category. The figures provided are therefore an indication of general review performance for all ages and client groups.

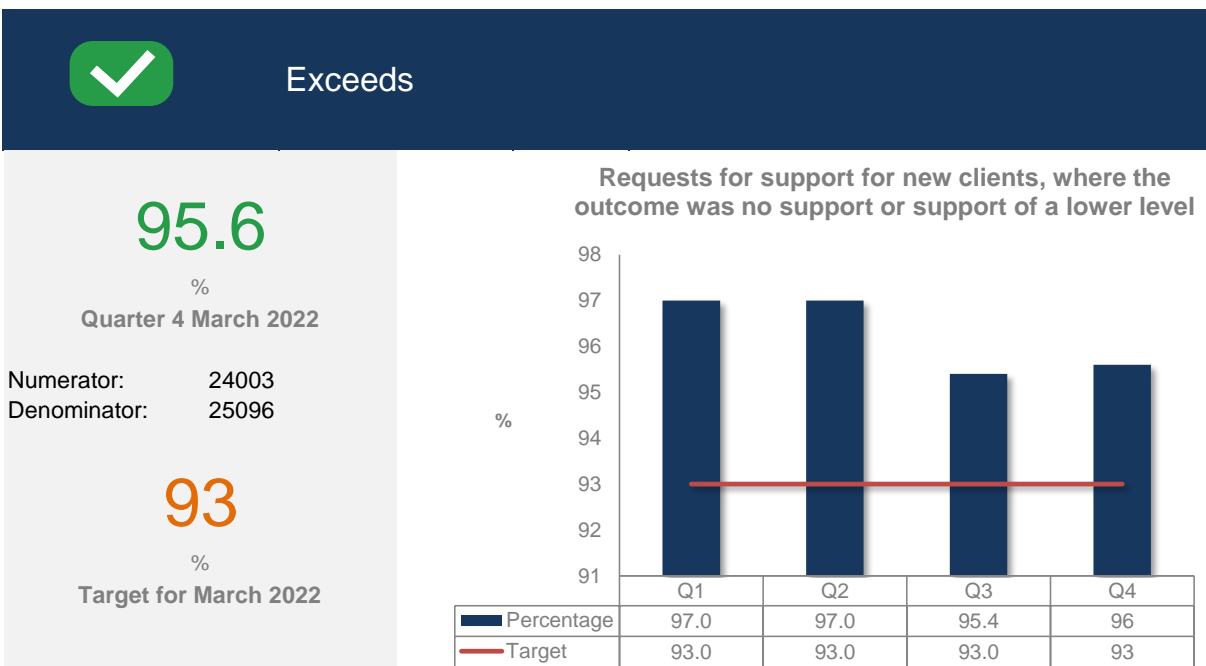
People in receipt of long term support who have been reviewed

Source: SALT LA Level Benchmarking 2020/21



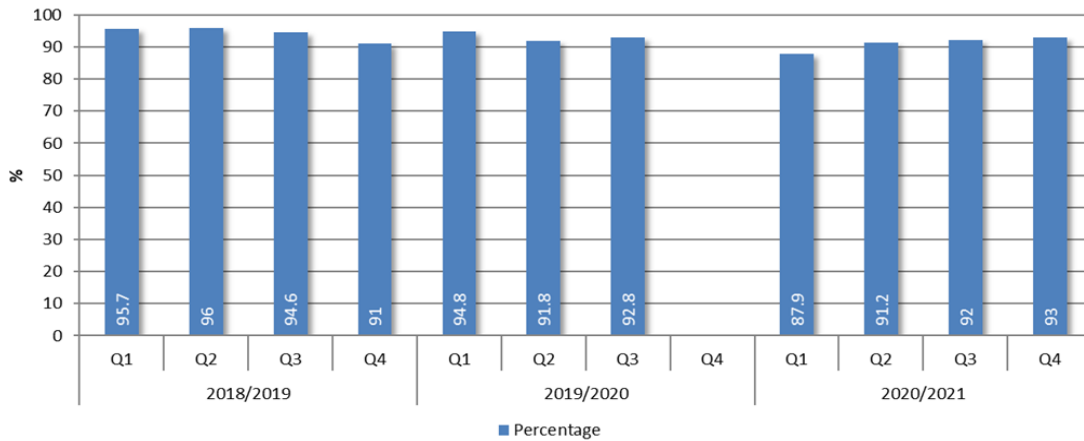
Requests for support for new clients, where the outcome was no support or support of a lower level

For all distinct requests for support from new clients aged 65 or over, the proportion where the outcome to the request was no support or support of a lower level. New clients are defined as people who were not receiving long term funded support at the time of the request. This is another demand management measure which monitors the number / proportion of people who approach the council and are signposted away from more intensive support. This measure will come directly from the Short and Long Term (SALT) requests table for people aged 65+ (STS001 table 2), and as such is underpinned by statutory guidance for recording and reporting. A higher percentage indicates a better performance.



Further details

Requests for support for new clients, where the outcome was no support or support of a lower level



About the target

The target for this measure has been set to 93% which will maintain our current level of performance.

About the target range

A target range for this measure is set at +/- 2 percentage points - the tolerance level is lower than other measures because any more than a 2% adverse variance from the target would equate to several hundred extra people accessing intensive services.

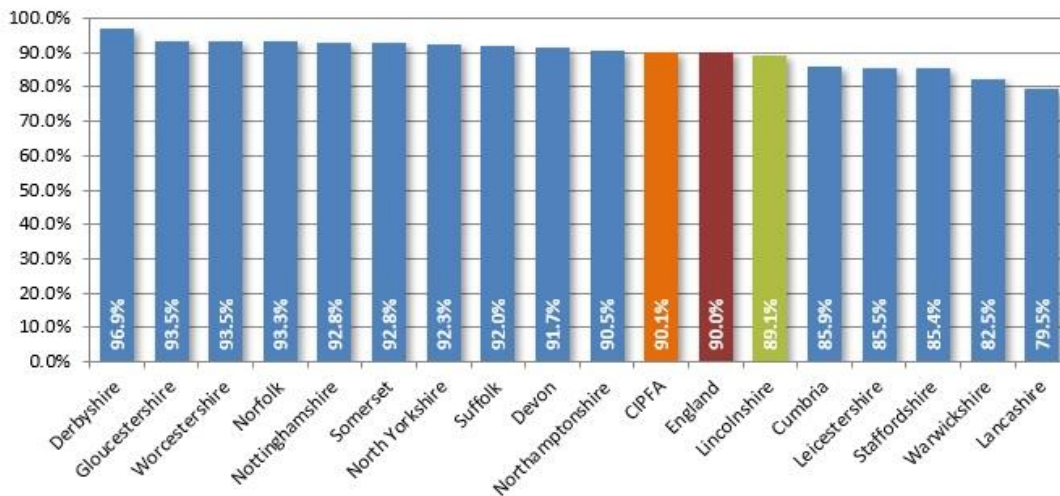
About benchmarking

Benchmarking is available for all councils from the SALT return at the end of the summer each year and will be added when it becomes available.

Due to the processing of national figures the benchmarked numbers for Lincolnshire may not exactly match our internally reported 2020-21 year-end figures.

Requests for support for new clients, where the outcome was no support or support of a lower level

Source: SALT LA Level Benchmarking 2020/21



People who report that services help them have control over their daily life

A self-reported measure from the annual Adult Social Care client Survey (ASCS) which determines whether services help people to have control over their daily lives. This has replaced the Adult Social Care Outcomes Framework (ASCOF) measure from the same survey previously reported in the Council Business Plan which asked about general feeling about control, which is not an effective way to determine the impact of support provided. A higher percentage indicates a better performance.

Numerator: The number of people in the denominator answering 'Yes'.

Denominator: The number of people answering the question: 'Do care and support services help you in having control over your daily life?'

A higher percentage indicates a better performance.



Achieved

81.5

%

April 2021 - March 2022

Numerator: 418

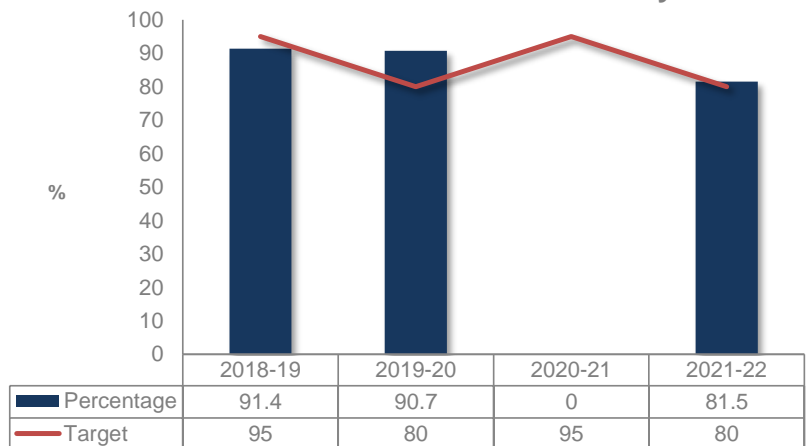
Denominator: 509

80

%

Target for April 2021 - March 2022

People who report that services help them have control over their daily life



Further details

Please see the main graphic for all available data relating to this measure.

About the target

The target for this measure has been set to 80% which will maintain our current level of performance.

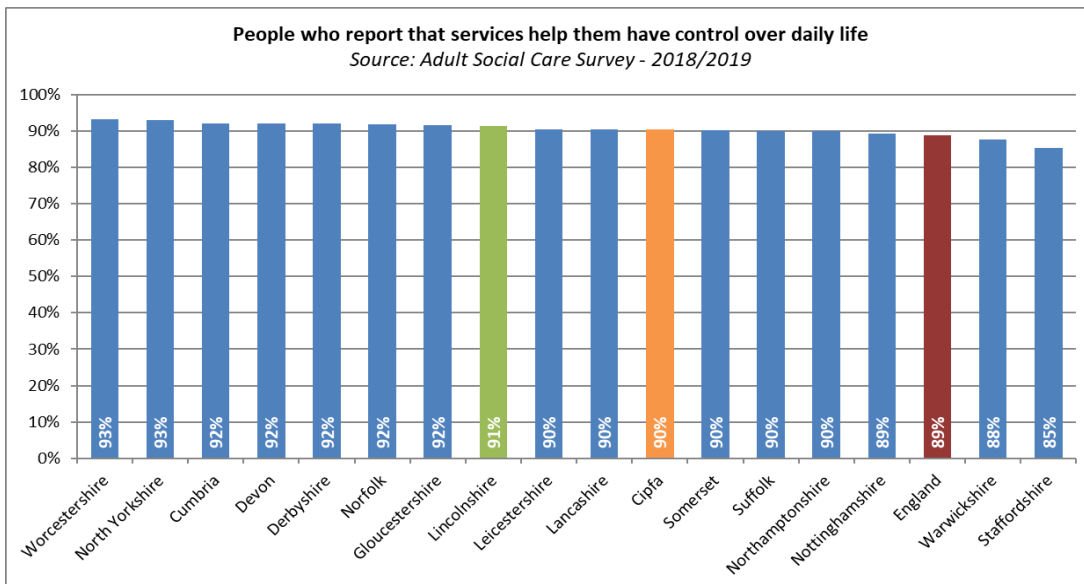
About the target range

The target range for this measure is set at +/- 5 percentage points.

About benchmarking

This data is reported to NHS-Digital annually and should be available for all councils at the end of the summer each year.

Due to the processing of national figures the benchmarked numbers for Lincolnshire may not exactly match our internally reported 2018-19 year-end figures.



Completed episodes of Reablement

Reablement is an early intervention for vulnerable people to help them restore their independence, accessed before a formal assessment of need. This is a key part of demand management for Adult Care and Community Wellbeing. Positive outcomes for those people who use the service are a good measure of the effectiveness of the intervention and help to delay or reduce the need for longer term funded support from the authority. The measure is the annual ASCOF 2D measure, so is underpinned by national guidance for recording and reporting. A higher percentage of completed episodes of Reablement indicates a better performance.

Numerator: Of the episodes in the denominator, the number where the outcome to Reablement was: "Ongoing Low Level Support" or "Short Term Support (Other)" or "No Services Provided - Universal Services/Signposted to Other Services" or "No Services Provided - No identified needs".

Denominator: Number of new clients who had completed an episode of short-term support to maximise independence (aka Reablement) in the period. (SALT STS002a)



Achieved

92.5

%

Quarter 4 March 2022

Numerator: 2363

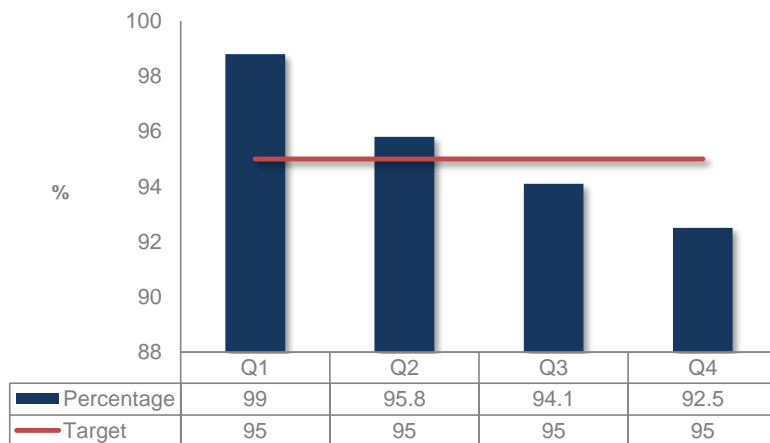
Denominator: 2555

95

%

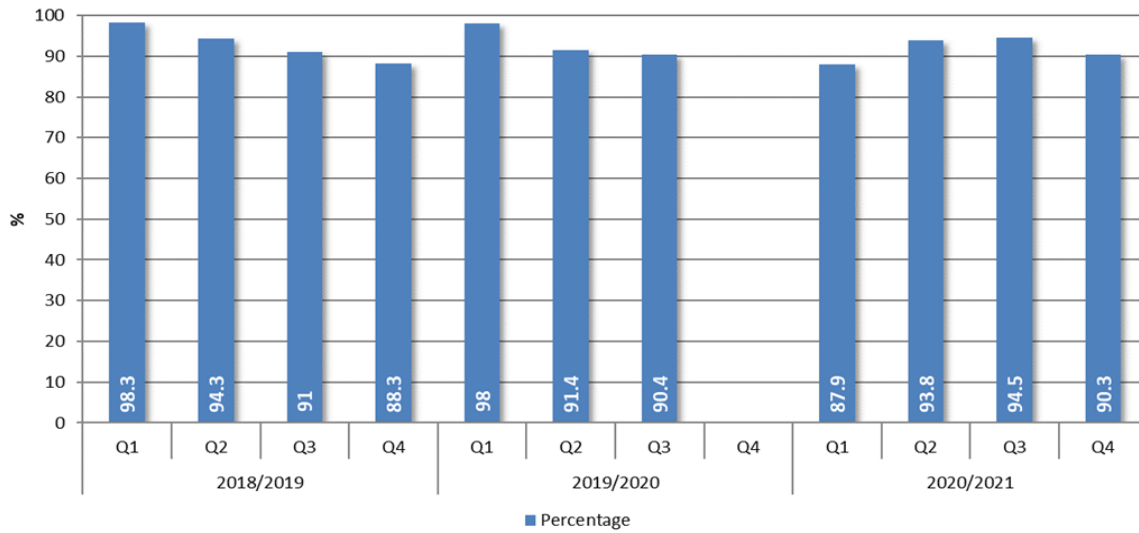
Target for March 2022

Completed episodes of Reablement



Further details

Completed Episodes of Reablement



About the target

The target for this measure has been set to 95%, based on CIPFA comparator averages. Our aim is to maintain this level of performance.

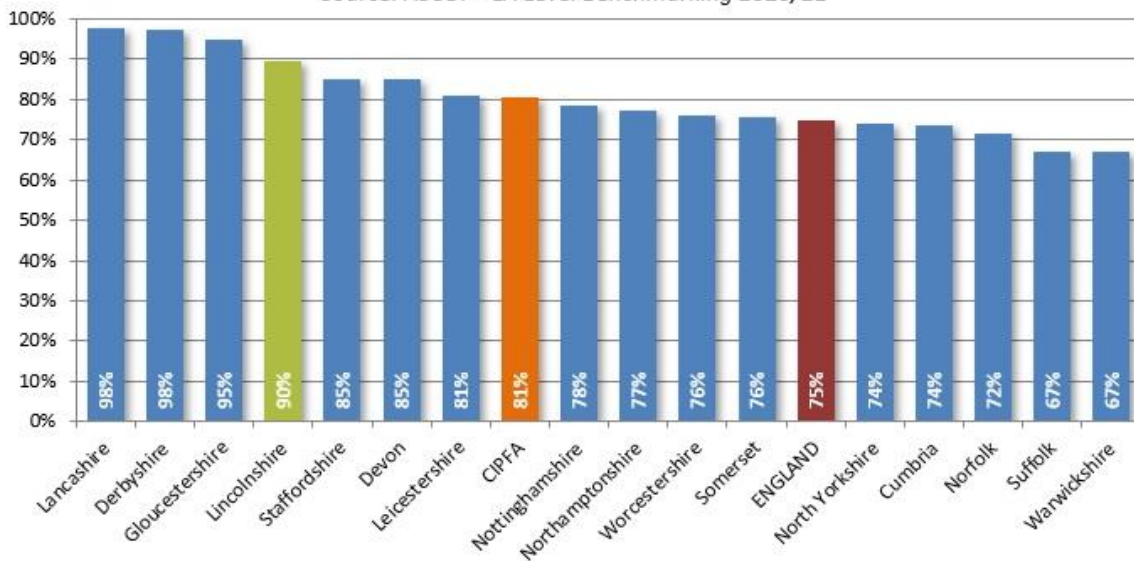
About the target range

The target range for this measure is set at +/- 5 percentage points.

About benchmarking

Since this measure is an ASCOF measure, benchmarking is available each year in the Summer. Due to the processing of national figures the benchmarked numbers for Lincolnshire may not exactly match our internally reported 2020-21 year-end figures.

Completed episodes of reablement
Source: ASCOF - LA Level Benchmarking 2020/21



Carers supported in the last 12 months

This measure reflects the number of carers including young carers who have been supported in the last 12 months and is expressed as a rate per 100,000 population. A higher rate of carers supported indicates a better performance.

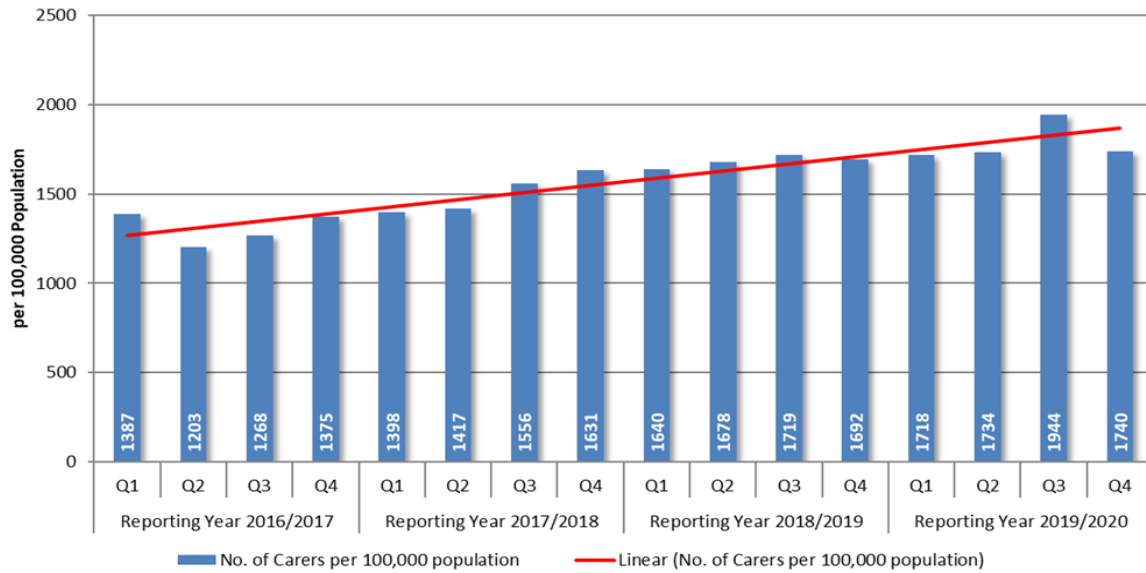


About the latest performance

9266 Adult Carers and 2989 Young Carers were supported during 2021/2022. This is an increase of 537 (4.6%) compared to the Quarter 3 outcome. The target of 1730 carers supported per 100,000 population has not been met this quarter, though we do see an upward trend.

Further details

Carers supported in the last 12 months



About the target

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

About the target range

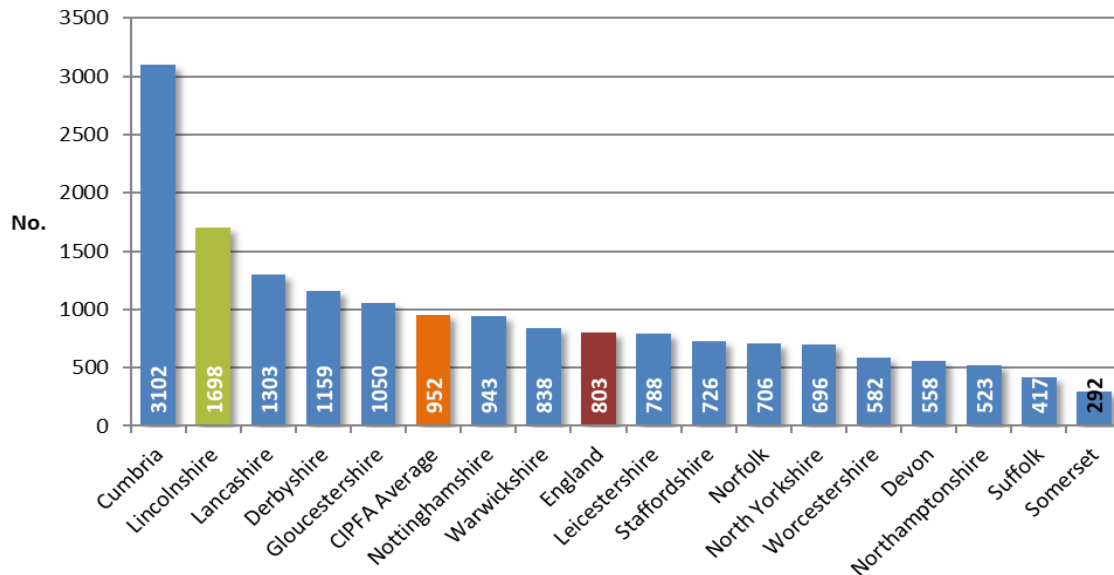
This measure has a target range of +/- 5% based on tolerances used by Department of Health

About benchmarking

Lincolnshire County Council provides performance reports to the Chartered Institute of Public Finance and Accountancy (CIPFA) which facilitates 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.

Due to the processing of national figures the benchmarked numbers for Lincolnshire may not exactly match our internally reported 2018-19 year-end figures.

Carers supported per 100,000 population (2018/2019)



Carers who said they had as much social contact as they would like

There is a clear link between loneliness and poor mental and physical health. The vision for social care is to tackle loneliness and social isolation, supporting people to remain connected to their communities and to develop and maintain connections to their friends and family. This measure draws on self-reported levels of social contact in the statutory Survey of Adult Carers in England (SACE), as an indicator of social isolation. Numerator: Of those carers that responded to the question, the number responding: 'I have as much social contact as I want'

Denominator: In the Survey of Adult Carers in England (SACE), the number of carers that responded to the question:

"By thinking about social contact you've had with people you like, which statement best describes your present social situation?"

- I have as much social contact as I want
- I have some social contact but not enough
- I have little social contact and I feel isolated

A higher percentage indicates a better performance.



About the latest performance

Of the 279 carers who answered the question on the latest Survey of Carers in England (2021/2022), 86 (30.8%) said that they had as much social contact as they wished with people they like. While this result is within 5% of the target, it has reduced from the figure of 33.3% (-2.5%) reported on the previous survey in 2018/2019.

Note that the response rate for the 2021/2022 carers survey was not high enough to meet the usual confidence level of +/-5%. As such, the survey results should be taken as indicative rather than fully representative of the full cohort of carers in Lincolnshire."

Further details

Please see the main graphic for all available data relating to this measure.

About the target

The target for this measure is set at 35%. This is based on the national average for 2016/17.

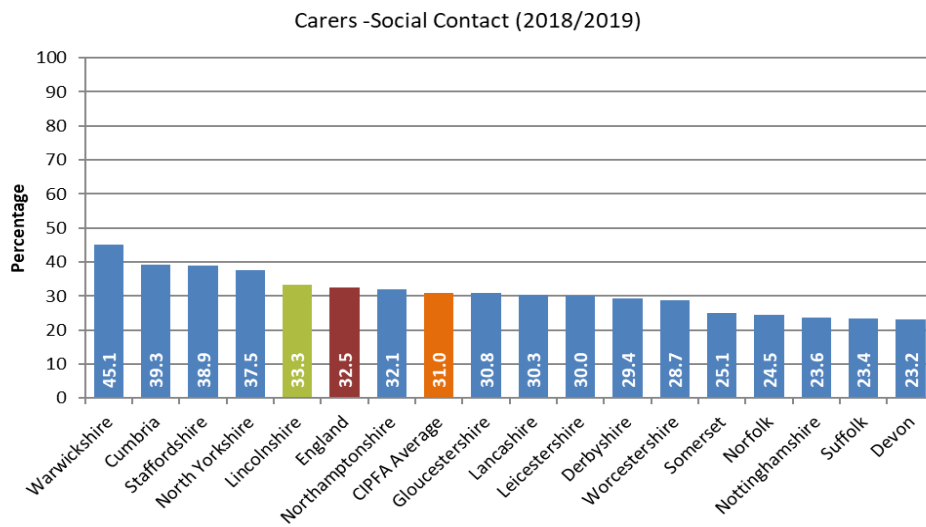
About the target range

The target range for this measure is set at +/- 5 percentage points.

About benchmarking

Benchmarking is available on a biennial basis from the ASCOF outturns (end of the summer for March year end figures). Based on 16/17 figures, 32% of carers in Lincolnshire reported having as much social contact as they wanted. This was the same as the regional average, but below the average for our comparator (and similarly rural) authorities, which was 34%. The national average was 35%.

Due to the processing of national figures the benchmarked numbers for Lincolnshire may not exactly match our internally reported 2018-19 year-end figures.

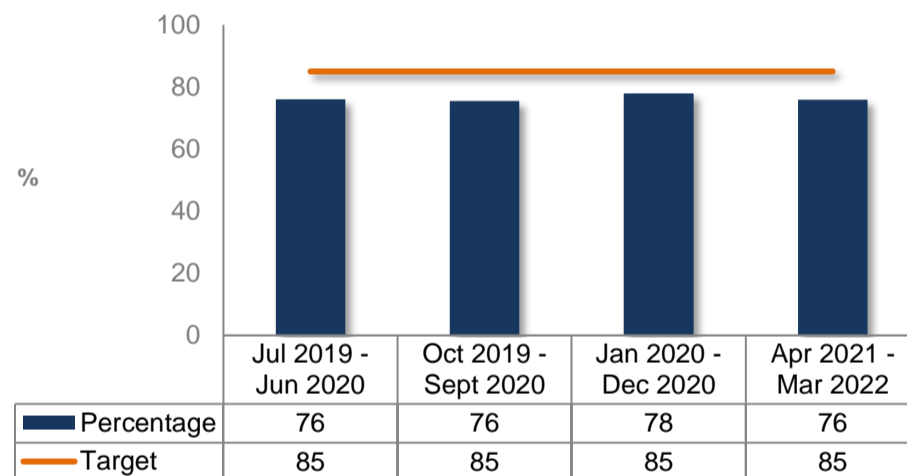


Carers who have received a review of their needs

This measure monitors whether carers, who were eligible for support under the Care Act 2014 and who received funded direct support, received their annual review of needs as per their entitlement. The measure is based on the carers table (LTS003) in the statutory Short and Long Term (SALT) collection, and is therefore underpinned by statutory guidance on recording and reporting. This measure is reported on a rolling 12 month basis e.g. Quarter 1 will show performance from July of the previous year to June of the current reporting year.



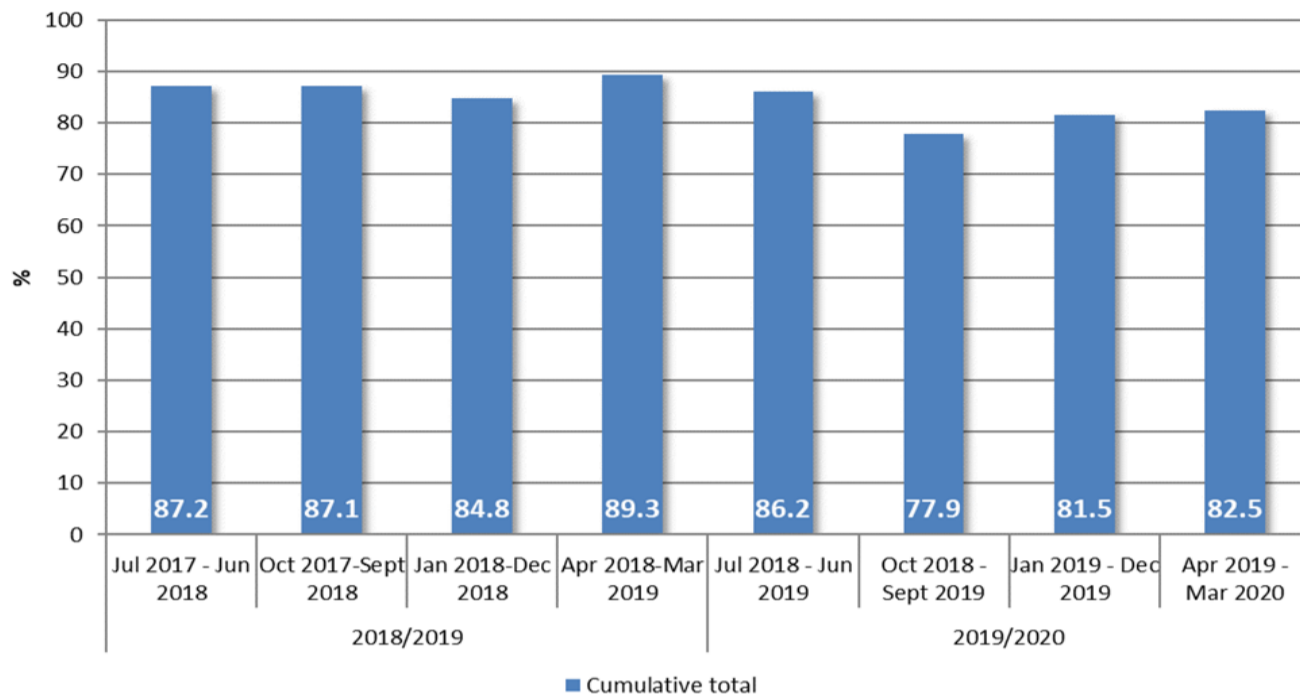
Carers who have received a review of their needs



About the latest performance

Of the 891 Carers provided with a direct payment, 676 (77.9%) received a review of their needs. 624 (92.3%) of these reviews were undertaken by the Carers Service with the remaining 52 (7.7%) coming through Adult Care Area Teams. Changes to the informal care section of the Adult Care Review forms have been requested which will improve this outcome, though we will not see the effect of these changes until 2022-23 Quarter 1.

Carers who have received a review of their needs



About the target

The target for this measure has been set to 85%. The baseline for this new measure is 70% and so this is an aspirational target.

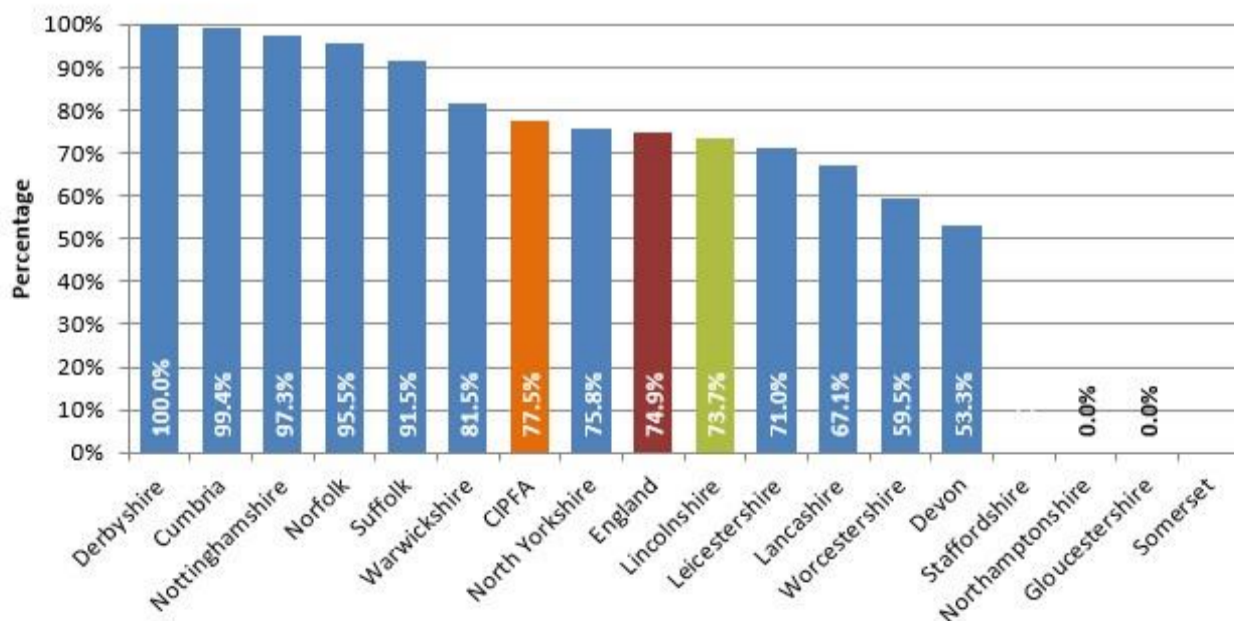
About the target range

The target range for this measure is set at +/- 5 percentage points.

About benchmarking

Benchmarking is available for this measure from the SALT return on an annual basis. Due to the processing of national figures the benchmarked numbers for Lincolnshire may not exactly match our internally reported 2018-19 year-end figures.

Carer Reviews and Assessments (2020/21)



No data for Staffordshire, Northamptonshire, Gloucestershire & Somerset reviews

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 advocate, family member or friends.

Numerator: Number of concluded S42 ('Section 42' under the Care Act 2014) safeguarding enquiries in the denominator, where support was provided by an advocate, family or friend

Denominator: Number of concluded S42 ('Section 42' under the Care Act 2014) safeguarding enquiries in the period, where the person at risk lacks Mental Capacity

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

A higher percentage of cases supported by an advocate indicates a better performance.



About the latest performance

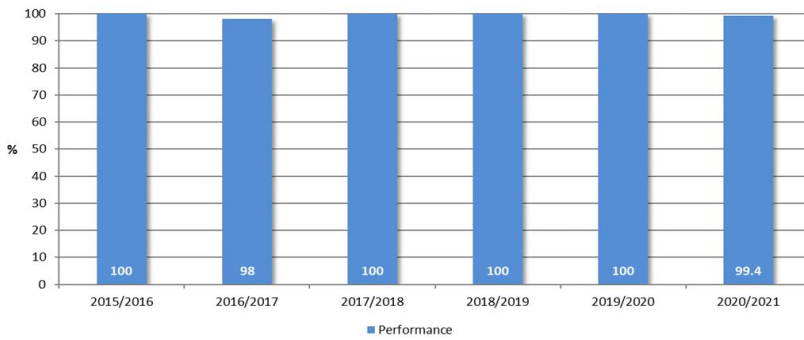
Performance against this measure has remained strong throughout the 2021/22 financial year and demonstrates that all adults requiring support to make their views and wishes heard are receiving this support, in line the making safeguarding personal and statutory guidance .

Further details

Percentage of Safeguarding Cases Supported by an Advocate



Annual Percentage of Safeguarding Cases Supported by an Advocate



About the target

Targets are based on trends and CIPFA group averages.

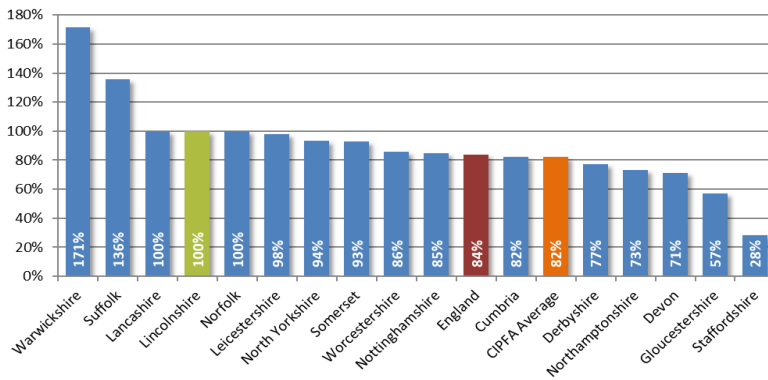
About the target range

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

About benchmarking

Benchmarking data is available for all councils in England in the summer following the annual submission of the Safeguarding Adults Collection (SAC). There was significant variation in the figures across the return. This is most likely to be differences in practice and interpretation of the SAC return descriptions, and many councils were unable to complete the return. For this reason, benchmarking must be treated with caution and is not necessarily a true reflection of comparative performance. As a result, the SAC return is being reviewed. Please note: The benchmarking data is extracted from NHS Digital and is shown as recorded.

Safeguarding cases supported by an advocate
Source: SAC SG3a: Mental Capacity 2018-2019



Concluded safeguarding enquiries where the desired outcomes were achieved

This measure records the proportion of concluded enquiries ('Section 42' under the Care Act 2014 and other), where the desired outcomes were fully or partially achieved. This measure is a key element of the Making Safeguarding Personal (MSP) national agenda, and monitors the effectiveness of Safeguarding interventions where desired outcomes were expressed and met. The figures are taken directly from the Safeguarding Adults Collection, and is therefore underpinned by statutory guidance on recording and reporting.

Numerator: The number of concluded enquiries in the denominator where the person's desired outcome was fully or partially achieved.

Denominator: The total number of S42 safeguarding enquiries concluded in the period where the person or their representative was asked about and expressed their desired outcomes.

A higher percentage indicates a better performance.



Achieved

93.5

%

Quarter 4 March 2022

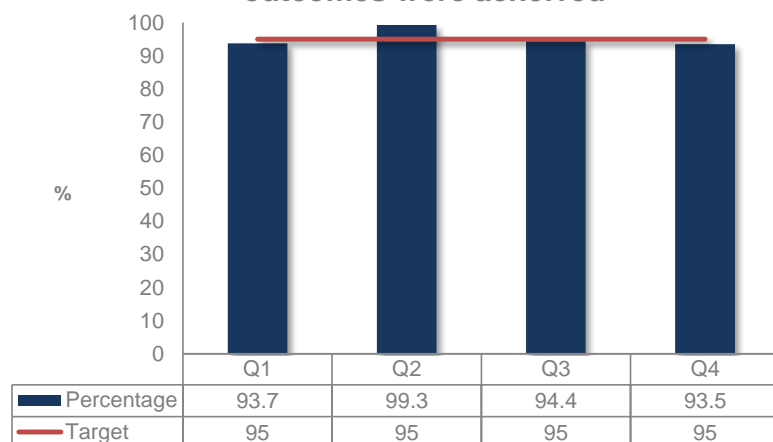
Numerator: 100
Denominator: 107

95

%

Target for March 2022

Concluded enquiries where the desired outcomes were achieved

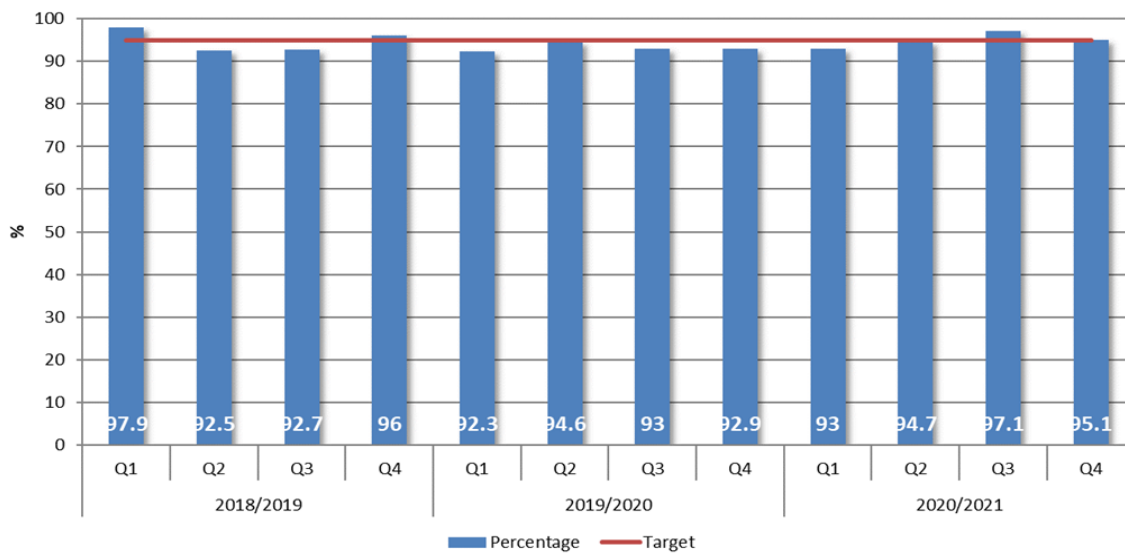


About the latest performance

This measure has remained high, although it has declined slightly since Q3, and remains within the tolerance boundaries and has therefore been achieved. Work continues to ensure that the wishes of people involved in the safeguarding processes are recorded and acted upon effectively.

Further details

Concluded Enquiries Where Desired Outcomes Were Achieved



About the target

The target for this measure has been set to 95%. This comes from the CIPFA comparator group average for 2016/2017 based on incomplete voluntary submissions from Councils.

About the target range

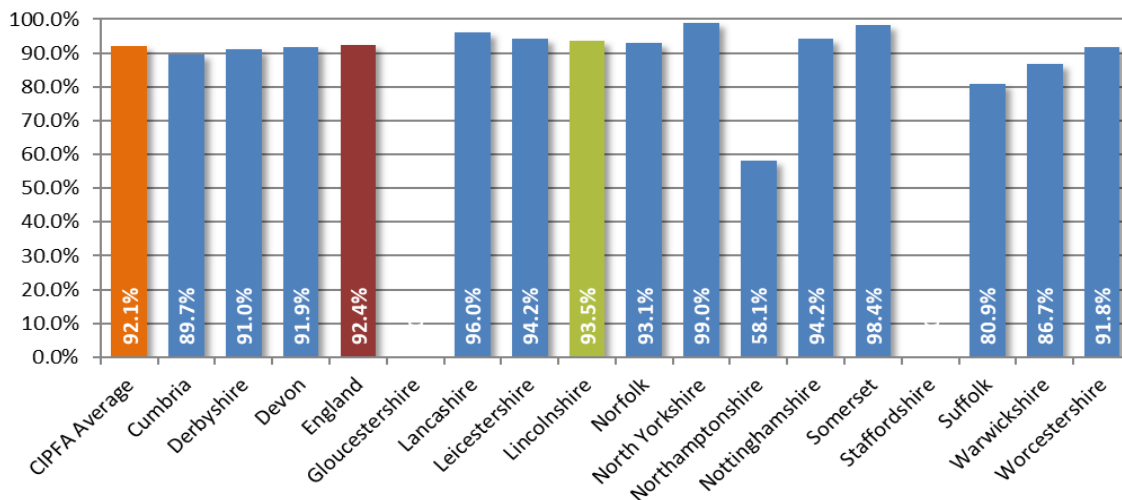
This measure has a target range of +/-5 percentage points.

About benchmarking

Benchmarking data is available for all councils in England in the summer following the annual submission of the Safeguarding Adults Collection (SAC). There was significant variation in the figures across the return. This is most likely to be differences in practice and interpretation of the SAC return descriptions, and many councils were unable to complete the return. For this reason, benchmarking must be treated with caution and is not necessarily a true reflection of comparative performance. As a result, the SAC return is being reviewed.

Safeguarding enquiries where the desired outcomes were achieved

Source: SAC SG4a: Making Safeguarding Personal 2018-2019



Adult Safeguarding concerns that lead to a Safeguarding enquiry

The LCC Safeguarding Service want to encourage providers, partners and professionals to submit concerns to the Local Authority only where appropriate, and to ensure these concerns have already been managed and considered within the remit of their organisations and only escalated to the authority as necessary. The Safeguarding Service would therefore expect a higher proportion of concerns progressing to an enquiry, with a corresponding reduction in concerns that do not warrant a full enquiry.

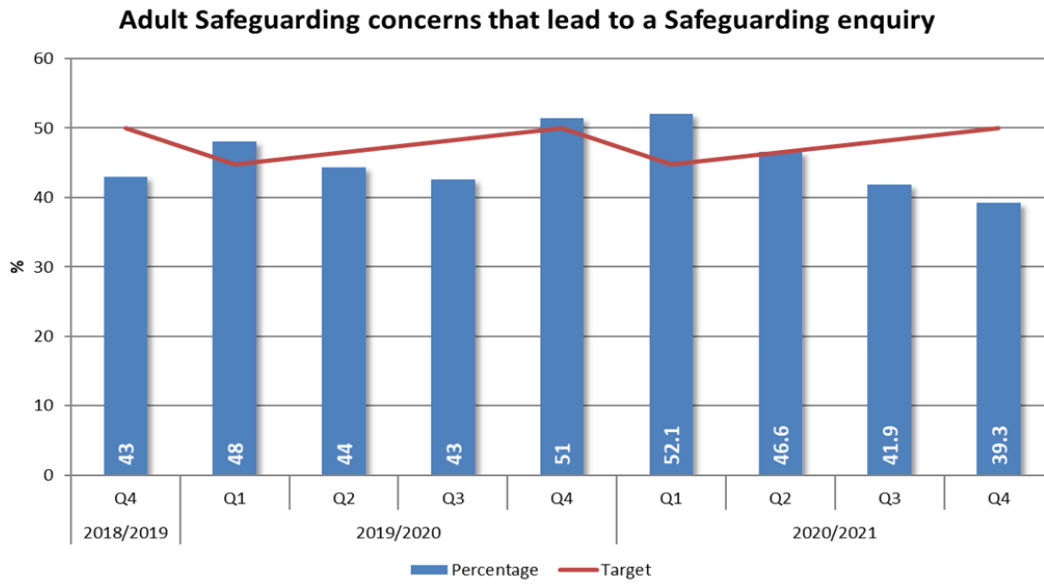


About the latest performance

Following a review of this measure commissioned by Adult Care and Wellbeing Scrutiny Committee the definition has been updated to ensure that initial enquiries completed by the Adult Safeguarding Team are also counted in addition to full section 42 Adult Safeguarding enquiries. The updated definition better represents the true level of performance and includes activity that was previously discounted. This measure will be discontinued in 2022-23 and an alternative Making Safeguarding Personal measure will be developed which will place greater emphasis on evidencing a Making Safeguarding Personal approach by all Lincolnshire Safeguarding Adult Board (LSAB) partners.

All previous quarters have been updated using the amended definition for consistency of reporting throughout the year. The associated benchmarking for this measure from the annual Safeguarding Adults Collection has been removed due to the unreliability of the national collection data. This is mostly to do with different interpretation of how local authorities count the different types of enquiries in the collection.

Further details



About the target

The target is based on Lincolnshire trend data only, specifically 2018/19 performance year to date. The target is profiled to monitor an increase to 50% by the end of 2019/20, which means an increment of 1.75 percentage points is applied quarterly.

An increment of 5 percentage points for each subsequent year has been proposed, however this may need to be reviewed after a period of monitoring to determine whether this is realistic.

About the target range

This measure has a target range of +/-5 percentage points.

Adults aged 18-64 living independently

This measure has been adapted from an Adult Social Care Outcomes Framework national measure, ASCOF 1H, which identifies all mental health clients aged 18 to 69 in contact with secondary mental health services on the Care programme Approach (CPA) who are living independently. The measure to be reported in the Council's performance framework is a subset of the national measure - mental health clients aged 18 to 64 who are also receiving long term funded support from the authority. These clients are supported by the Lincolnshire Partnership Foundation Trust (LPFT) under a S75 agreement whereby the authority delegates responsibility of service provision to the mental health trust. This is a contract measure with the Trust and only these clients in the national measure can be influenced under the contract, making it more meaningful. Since this is a local measure, there will no longer be a 3 month time lag waiting for the official publication of the MHMDS (Mental Health Monthly Data Set) submission.



Achieved

75

%

Quarter 4 March 2022

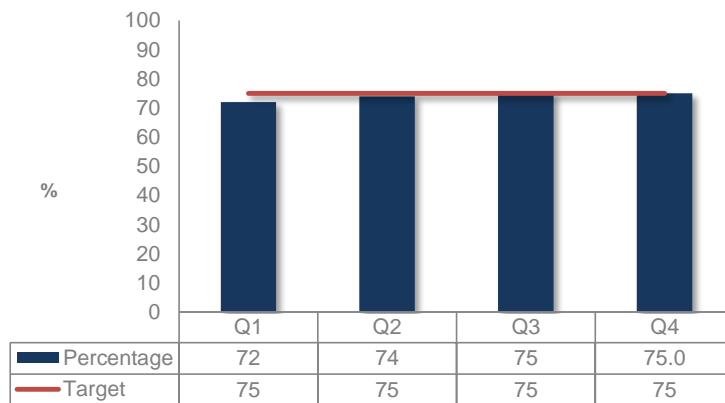
Numerator: 78
Denominator: 104

75

%

Target for March 2022

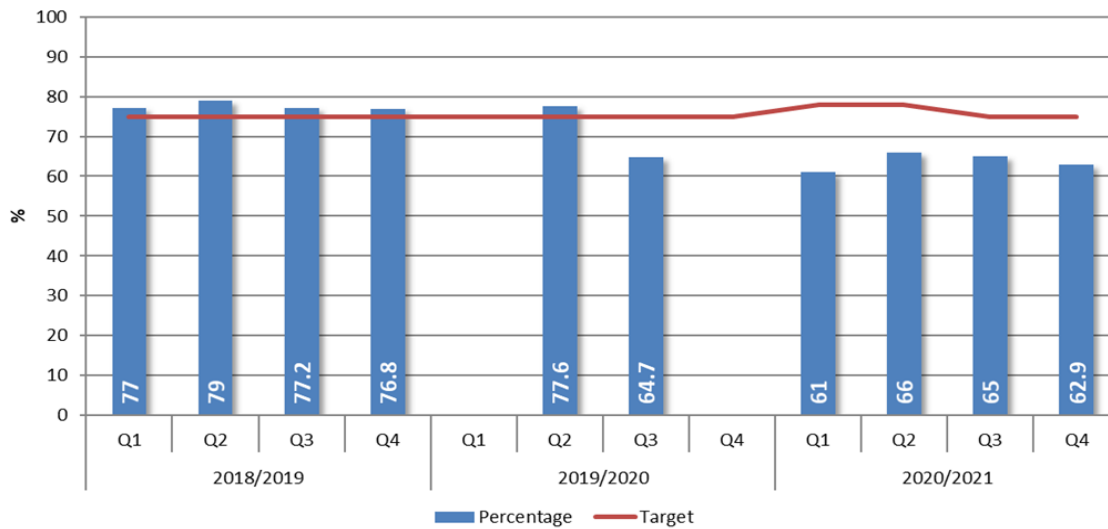
Adults aged 18-64 living independently



About the latest performance

The previously reported quarterly figures have been updated for consistency, and relate to a specific cohort of mental health clients supported by LPFT in receipt of social care services, but who also have their care clinically coordinated under the Care Programme Approach (CPA). This is a hybrid measure based on a national Adult Social Care Outcomes Framework (ASCOF) measure, but the Care Programme Approach has now been abolished. As such, the national indicator will be changed to be purely health-focussed and no longer in scope of the S75 agreement with LPFT to provide social care support to mental health clients. This measure is therefore proposed for deletion in 2022/23, with similar intelligence gleaned from other measures in the Corporate Plan.

Adults Aged 18-64 With a Mental Health Problem Living Independently



About the target

The target for this measure has been set at 75% - this is based on the care setting of Lincolnshire County Council funded clients, and the expectation that we should aim to maximise the independence and security of tenure for clients in the community.

About the target range

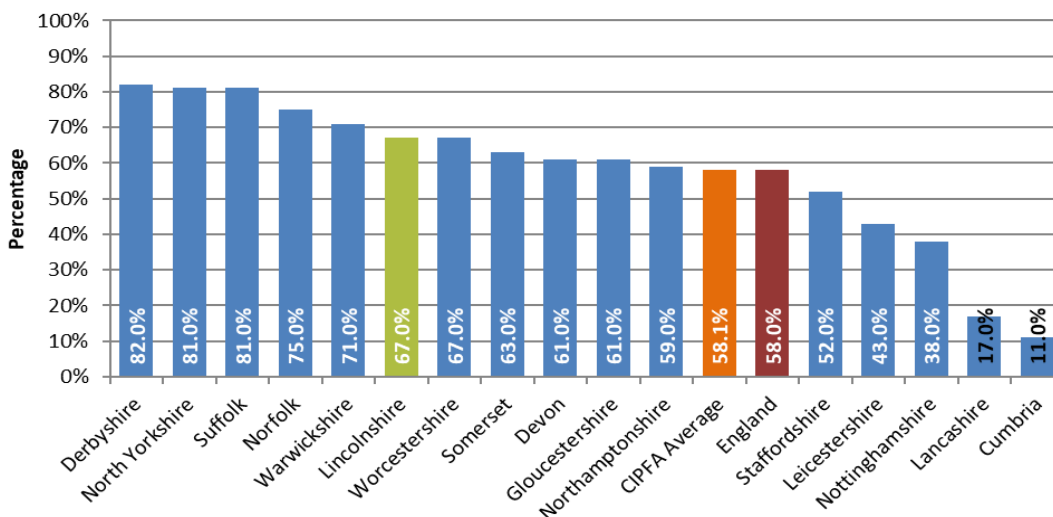
The target range for this measure is set at +/- 5 percentage points.

About benchmarking

The source data is submitted in the Mental Health Minimum Dataset on a quarterly basis, this is for all clients on the Care Programme Approach (CPA) in contact with secondary mental health services, not just those that are also receiving funded social care support.

Due to the processing of national figures the benchmarked numbers for Lincolnshire may not exactly match our internally reported 2018-19 year-end figures.

The proportion of adults in contact with secondary mental health services living independently (2018/2019)



People who remain at home 91 days after discharge

The hospital teams discharge clients from hospitals and this new measures will look at all confirmed hospital discharges from acute sites for 18+ year old who were discharged in the previous quarter. This measures how many were still at home 91 days after discharge, being at home is defined as people living in their own home in the community.



Achieved

89.5

%

Quarter 4 March 2022

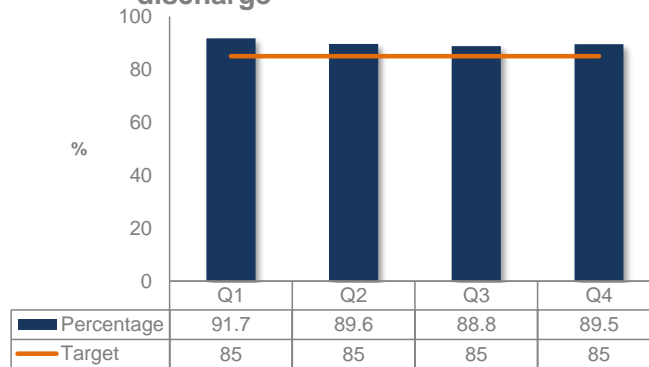
Numerator 1388
Denominator 1550

85

%

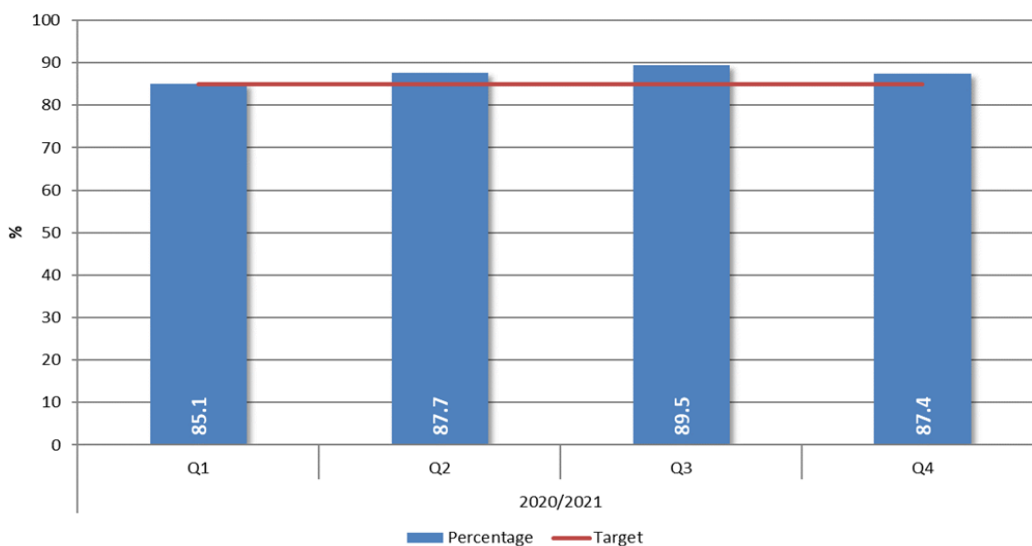
Target for March 2022

People who remain at home 91 days after discharge



Further details

People who remain at home 91 days after discharge



About the target

The target for this measure has been set to 85%, based on the average of the past 6 quarters. Our aim is to give us an indicator of how well our commissioned services are at keeping people in the community after a hospital discharge.

About the target range

The target range for this measure is set at +/- 5 percentage points.

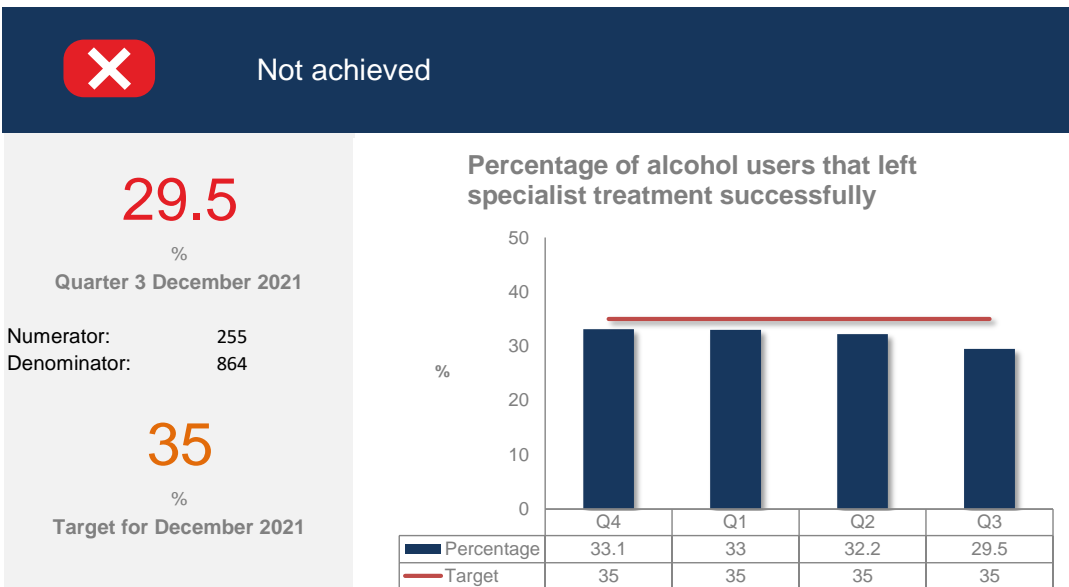
About benchmarking

This is an internal measure so cannot be bench marked nationally, however can be benchmarked internal for the same period last year.

Percentage of alcohol users that left specialist treatment successfully

This measure tracks the proportion of clients in treatment in the latest 12 months who successfully completed treatment. Data is reported with a 3 month (1 quarter) lag.
Leaving treatment for substance misuse in a structured, planned way, having met all of the goals set at the start and throughout the treatment journey (by the service user and their key worker) is known to increase the likelihood of an individual sustaining their recovery in the longer-term. The wider impacts on society are measured by alcohol influenced antisocial behaviour and violence in the 'Protecting the public' commissioning strategy.
The definition for this indicator has been revised in Quarter 2 of the 2018/19 reporting year to align more closely with the National Drug Treatment Monitoring System (NDTMS); this has no effect on previous figures reported for this measure.

Numerator: Number of successful completions (NDTMS)
Denominator: Number of completions (NDTMS)
A higher percentage of alcohol users that leave specialist treatment successfully indicates a better performance.



About the latest performance

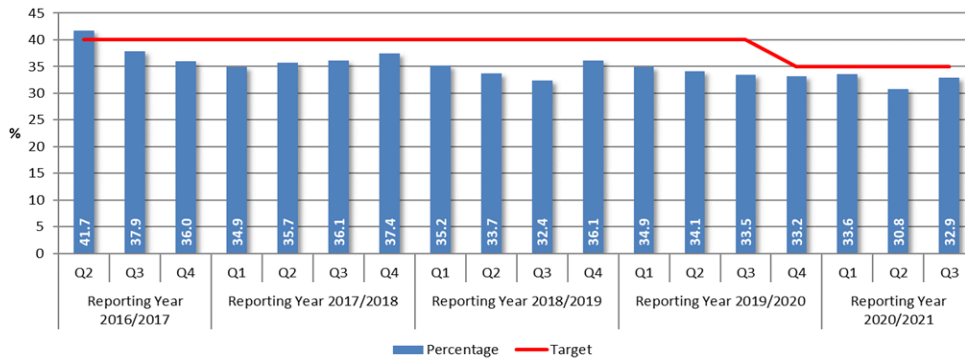
During this report period We Are With You have fully moved into recovery from Covid 19. Many precautions remain and PPE is still used where appropriate. Many more face to face appointments are being offered with some clients still receiving virtual appointments where they are preferred.

The trend in more complex alcohol presentations continues. These clients are more likely to have multiple issues and drop out or require more intense residential services than generic clients. This impacts on discharge rates as treatment takes longer and is less likely to be successful straight away.

There is a lag in data reporting which means these figures are solely within the period of Covid restrictions and lockdowns (Jan 21-Dec 21). Services were still active during this time but alcohol clients presenting were becoming ever more complex and difficult to treat. Representation rates remain very good with only 7.2% of clients returning to treatment within 6 months of discharge

Further details

Percentage of alcohol users that left specialist treatment successfully



About the target

A target of 35% has been set to reflect the wording and definition of this measure.

About the target range

The target range for this measure is between 33% and 37% (of people who leave specialist treatment in a planned and successful way). This is based on an expectation of fluctuation in performance across the year.

About benchmarking

No benchmarking data is available as this is a commissioned service producing local level information to help tell the story of our services to members and the wider public.

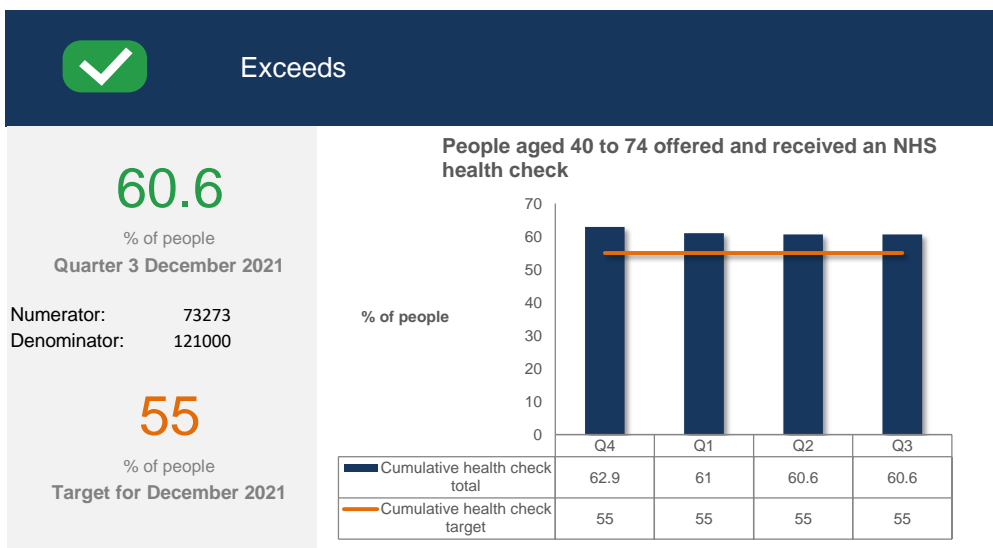
Percentage of people aged 40 to 74 offered and received an NHS health check

The NHS Health Check programme aims to help prevent heart disease, stroke, diabetes and kidney disease. Everyone between the ages of 40 and 74, who has not already been diagnosed with one of these conditions, will be invited (once every five years) to have a check to assess their risk of heart disease, stroke, kidney disease and diabetes and will be given support and advice to help them reduce or manage that risk. A high take up of NHS Health Checks are important to identify early signs of poor health leading to opportunities for early interventions.

This measure tracks the cumulative percentage of the eligible population aged 40-74 offered an NHS Health Check who received an NHS health check, which is measured on a 5 year rolling cycle. So for example performance reported at Q2 2018/2019 is cumulative from April 2014 to 30th September 2018.

Numerator: Number of people aged 40-74 eligible for an NHS Health Check who received an NHS health check in the financial year (Integrated Performance Measures Monitoring Return (IPMR_1), NHS England)
Denominator: Number of people aged 40-74 eligible for an NHS Health Check who were offered an NHS Health Check in the financial year (IPMR_1, NHS England)

A higher percentage of people who were offered and received an NHS health check indicates a better performance.



About the latest performance

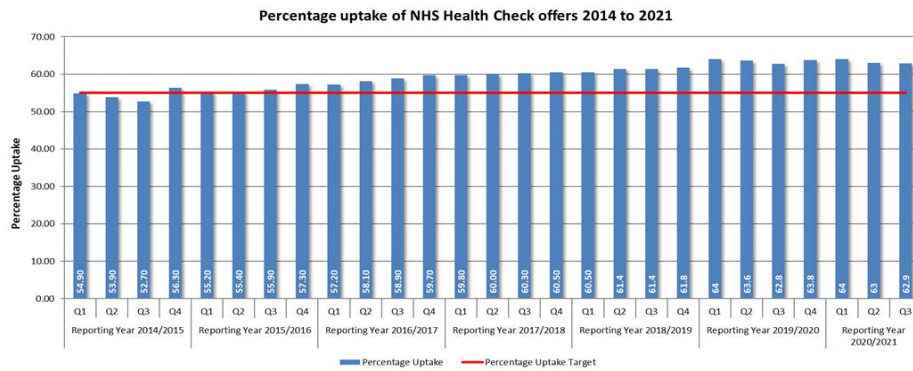
The data for this submission is, is the same as the last quarter. This is because, Local Authorities were given an extended deadline for submitting the Q3 national return (due to the impact of omicron and the acceleration of the Covid-19 booster vaccination programme on NHS Health Check providers) and therefore Q3 will be published nationally at the same time as Q4 (July 2022). In quarter 3 (Dec 2021), general practices were informed by NHSE/I that they should pause some services to support the vaccination programme. The NHS Health Check Programme was impacted by this. Despite this pausing, the data that was submitted nationally for Q3 shows that in Lincolnshire, 4274 people were invited for an NHS Health Check and 2203 Health Checks were completed.

In Lincolnshire during the period Quarter 1 2017/18 - Quarter 2 2021/22, the overall percentage of people taking up an NHS Health Check invite was 61% (compared to 45% in England). Due to the measure being over a 5 year period, the impact of Covid-19 on the NHS Health Check programme has yet to be seen in this performance indicator.

The new provider of the NHS Health Check Support Service (TCR Nottingham Ltd), which provides software and related technical support to Lincolnshire General Practices, is working well.

The NHS Health Check Programme supports the delivery of the Lincolnshire Health Inequalities and Prevention programme, specifically the priorities in relation to cardiovascular disease prevention.

Further details



About the target

The target has been set to ensure our programme exceeds the national average and is in line with regional performance.

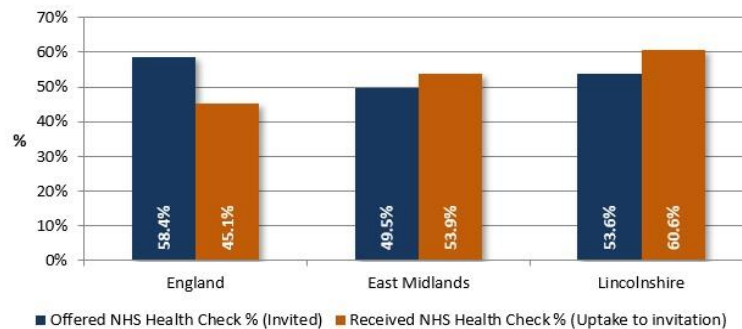
About the target range

The target range for this measure is between 50% and 60%, this is based on an expectation of fluctuation in performance across the year

About benchmarking

Benchmarking currently available for this measure is comparator local authorities based on CIPFA nearest neighbours. Numbers for those offered NHS health checks are subject to change on an annual basis. Current methodology dictates that the number of people offered an NHS health check is applied to the full 5 year activity; as the numbers of people offered an NHS health check are lower than in previous years, to date Lincolnshire's performance is reported as over 100%.

Cumulative NHS Health Check Data 2017/18 Q1 - 2021/22 Q2



	England	East Midlands	Lincolnshire
Offered NHS Health Check % (Invited)	58.4%	49.5%	53.6%
Received NHS Health Check % (Uptake to invitation)	45.1%	53.9%	60.6%

Percentage of people supported to improve their outcomes following Wellbeing intervention

This measure identifies the percentage of people exiting the Wellbeing Service who demonstrated overall improvements across the outcomes they identified when entering the service. There are eight outcomes which the service focuses on and these are around supporting people to Manage Money, Participation, Social Contact, Physical Health, Mental Health and Wellbeing, Substance Misuse, Independence and Staying Safe. This measure is reported with a 1 quarter lag, therefore data from Quarter 1 will be published in Quarter 2 of the reporting year.

Numerator: The number of service users exiting the service with a higher Exit Score than Entry Score

Denominator: The total number of service users exiting the service.

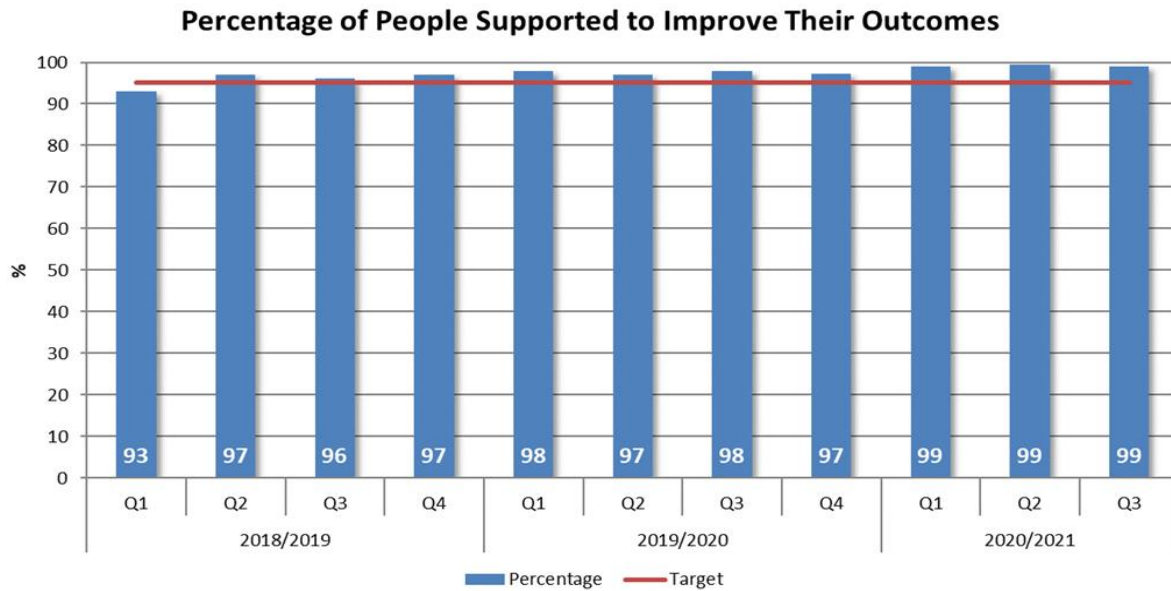
A higher percentage of people supported to improve their outcomes indicates a better performance.



About the latest performance

The Wellbeing Service continues to maintain consistently high performance in this self-determined outcomes measure for services delivered during Q3 2021-22. The service has increased in person delivery although is employing a mixed approach to support and trusted assessments. Referral volumes were slightly lower than Q2 2021-22 owing to the seasonal drop in demand during December although the service continues to maintain a strong recovery since the Covid-19 pandemic. Please note there is a quarter delay in reporting this indicator to account for the up to 12 weeks of support provided by the Wellbeing Service.

Further details



About the target

By reducing and delaying escalation of individuals into more costly care services, the Wellbeing Service enables users to maintain and enhance their independence for longer. This measure supports and monitors the effectiveness of the service and supports the Council to meet its Care Act responsibilities regarding prevention. The measure is aligned to a crucial Key Performance Indicator (KPI) in the newly commissioned Wellbeing Service.

About the target range

The target range for this measure has been set to +/-5 percentage points.

About benchmarking

No benchmarking data is available as this is a service commissioned specifically for Lincolnshire and not part of a wider national programme.

People supported to successfully quit smoking

This measure identifies people who are supported to quit smoking by the commissioned stop smoking service (SSS) to a 4-week quit. These services raise awareness about the harms of tobacco and support smokers to quit smoking. A higher number indicates a better result.

The SSS employs a core team of specialists, delivering direct to clients; and supporting the GP and Pharmacy network of sub-contracted service providers. There is an expectation that the core team will deliver 50% of the target 4-week quits and the sub-contractors will deliver the remaining 50%.

People accessing the service are measured at 4 weeks; the time deemed to have successfully quit smoking, which aligns to national reporting standards. The service offers up to 12 weeks of treatment to clients beyond the 4-weeks. Due to the outcome of some service users being unknown at the time of reporting and being captured and recorded later, this can lead to slight discrepancies in recorded numbers. However, this is reconciled at year end.

It is important to recognise quality indicators, e.g., an increase in quit rate (QR), indicating better/worse performance. This is determined by dividing the number of 4 week quits by the number of set quits as a percentage. (45% -50% is seen as average expected).

This measure is reported with a 1 quarter lag. For example, data from Quarter 1 will be published in Quarter 2.



About the latest performance

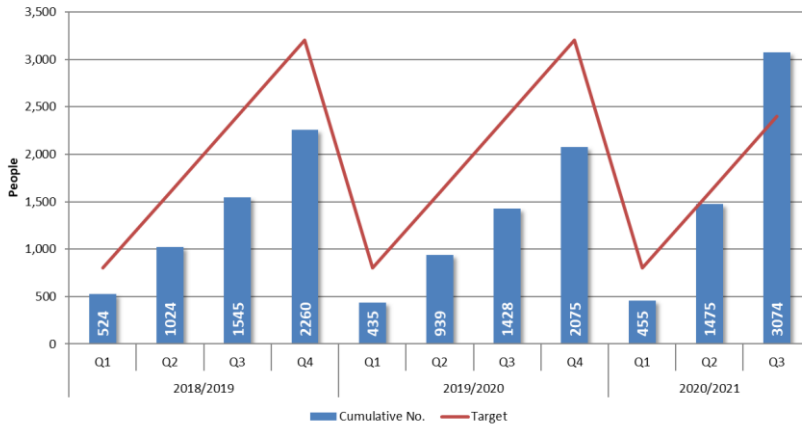
One you Lincolnshire report that whilst they have again failed to reach their quarterly target for smoking, they are seeing a slight increase in referral numbers. It is also important to note that their focus over the past 3 quarters has included our most vulnerable smokers, particularly pregnant women, which accounts for around 5% of the cumulative figure.

The quality of the Qrt 3 (Oct-Dec) performance has surpassed the previous qrt with the quit rate of the core team now at a 60% average, well exceeding the national average despite them delivering 89% of the figures, target 50%. Sub-contractors remain slow to actively deliver smoking cessation with 11% of the figures attributed, target is 50%, There are some signs that as Covid eases more are starting to deliver.

We are encouraged by the positivity of the provider and their willingness to engage with some of the most challenging groups of smokers in our community, which historically are more difficult to get to quit but the benefit of their stopping on both their health and wellbeing is huge.

Further details

People Supported to Quit Smoking



About the target

Smoking remains the biggest cause of premature mortality in England, accounting for around 80,000 deaths each year, approximately 1,200 to 1,300 in Lincolnshire. This measure supports a number of areas of the Joint Strategic Needs Assessment (JSNA) and aligns to the Public Health Outcomes Framework (PHOF) which measures a number of population level outcomes regarding smoking. Target is aligned to the Key Performance Indicator within the contract which is considerably higher than baseline performance level.

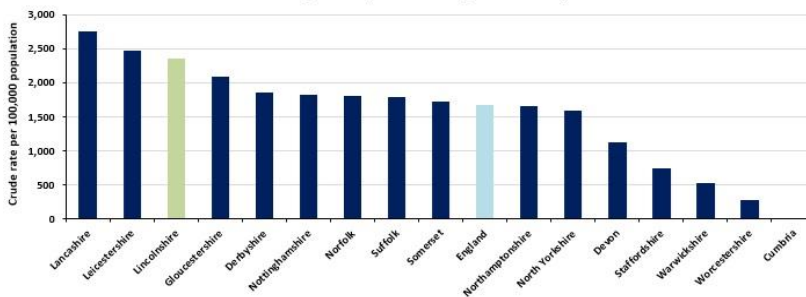
About the target range

The target range for this measure has been set to +/-5%.

About benchmarking

The latest published data by PHE for 2020/21 showed that the crude rate per 100,000 population aged 16+ for smokers that successfully quit at 4 weeks in Lincolnshire was 2,352; this is higher than the East Midlands regional rate (1,813 per 100,000 population aged 16+). Of Lincolnshire's comparator areas Lancashire (2,757 per 100,000 population aged 16+) performed better than its counterparts, with Worcestershire (280 per 100,000 population aged 16+) and Warwickshire performed significantly worse (527 per 100,000 population 16+). Since 2015/16 the rate of successful quits has been reducing in Lincolnshire which is comparable to the national trend.

Crude rate of smokers that have successfully quit at week 4 per 100,000 population aged 16+ (95% confidence level) by Lincolnshire comparator areas (Source: NHS Digital for Statistics on NHS stop smoking services in England, 2020-21)



Area Name	Value
Lancashire	2,757
Leicestershire	2,472
Lincolnshire	2,352
Gloucestershire	2,091
Derbyshire	1,854
Nottinghamshire	1,813
Norfolk	1,803
Suffolk	1,780
Somerset	1,725
England	1,670
Northamptonshire	1,661
North Yorkshire	1,585
Devon	1,130
Staffordshire	735
Warwickshire	527
Worcestershire	280
Cumbria	0

People supported to maintain their accommodation via Housing Related Support Service (HRSS)

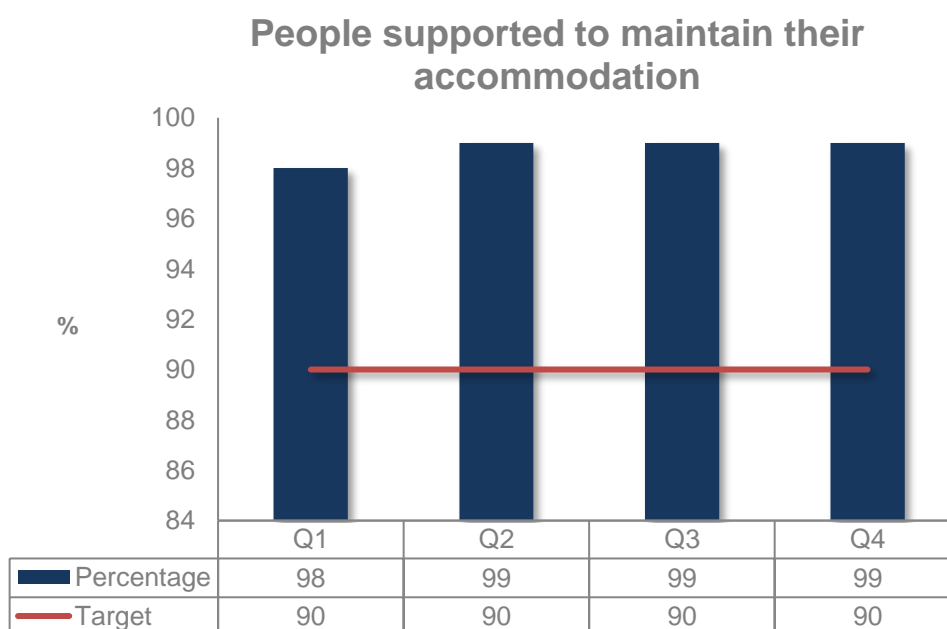
Percentage of service users supported to achieve an overall improvement across their outcomes following a period of three months of housing related support which is the expected average length of support someone will receive.

Exceeds

99
%
Quarter 4 March 2022

Numerator: 183
Denominator: 184

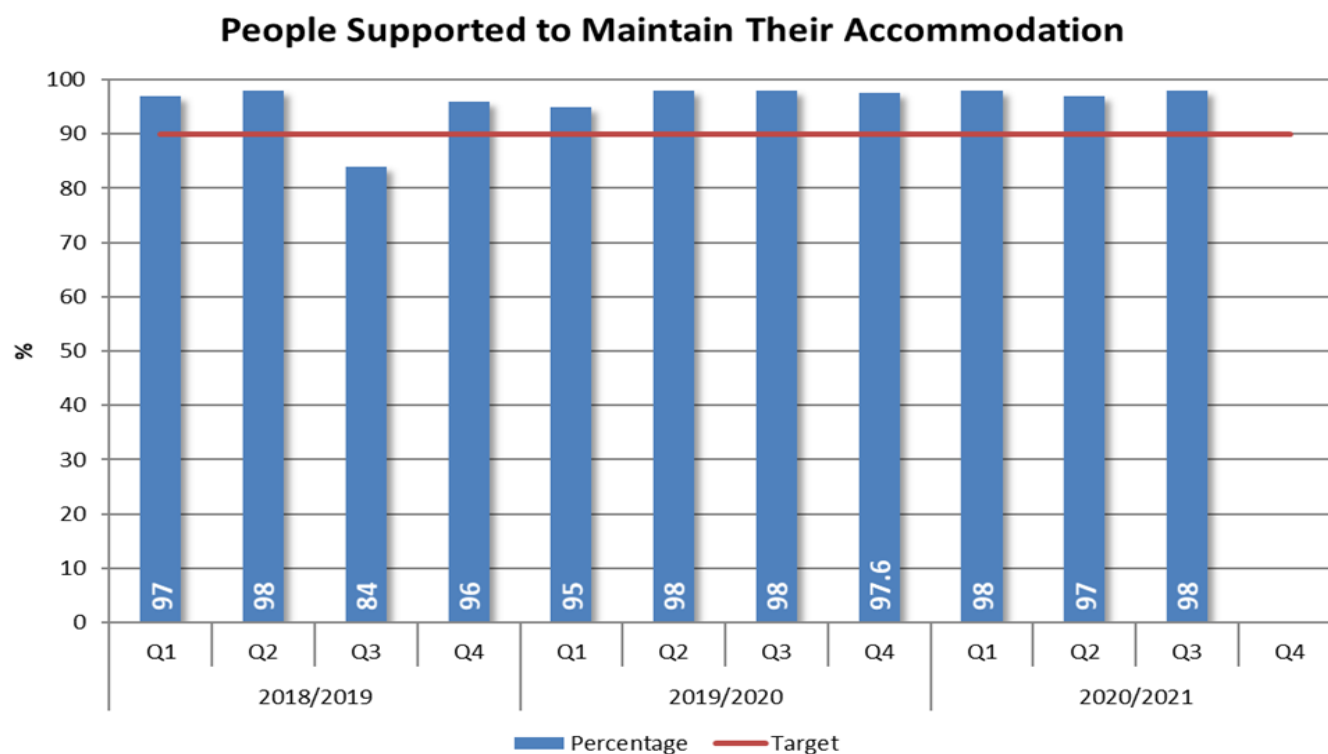
90
%
Target for March 2022



About the latest performance

Framework continue to support their service users to improve their outcomes. They supported 100% of floating support service users and 99% of accommodation-based service users to develop new and improved skills to manage a tenancy/mortgage independently from services. It is important to note, that this service has now changed to support service users with a high level of need.

Further details



About the target

Housing related support services help people to access and maintain accommodation in order to prevent them from needing more costly forms of support. This measure is crucial to ensure service quality, assessing needs highlighted versus needs met for all people accessing services. It also supports the Council to meet its Care Act responsibilities regarding prevention and supports wider Public Health Outcome Framework (PHOF) outcomes regarding housing. The target is aligned to the KPI in the provider's contract.

About the target range

This measure allows for no fluctuation against the target.

About benchmarking

No benchmarking data is available as this is a service commissioned specifically for Lincolnshire and not part of a wider national programme.

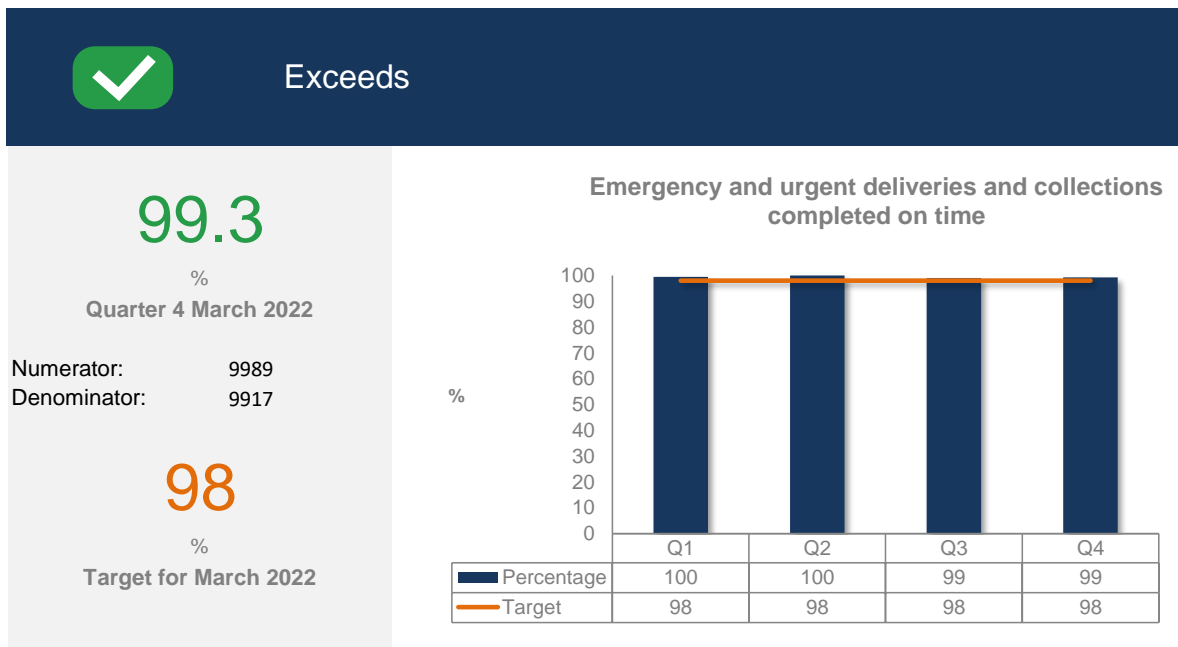
Emergency and urgent deliveries and collections completed on time

The delivery of emergency and urgent pieces of equipment is crucial as the situations within which these are requested will often involve individuals who require equipment in order to support discharge from hospital, prevent hospital admission or provide end of life care. In the event of the death of a service user, it is crucial to commence the process of collecting equipment quickly to ensure that, where possible, it can be recycled to support other users who may have need for it. Emergency deliveries and collections are defined as being undertaken within 4 hours of receipt of the authorised order. Urgent deliveries are within 24 hours and urgent collections are within 48 hours of receipt of the authorised order. The measure is an amalgamation of four KPIs within the Integrated Community Equipment Service contract which consist of: Number of emergency deliveries (within 4 hours); number of emergency collections (within 4 hours); number of urgent deliveries (within 24 hours) and; number of urgent collections (within 48 hours).

Numerator: Number of emergency deliveries and collections within 4 hours, number of urgent deliveries within 24 hours and number of urgent collections within 48 hours.

Denominator: Total number of emergency and urgent deliveries and collections.

A higher percentage indicates a better performance.



About the latest performance

The service continues to meet targets in the backdrop of high demand from health and social care prescribers and supply chain difficulties.

Further details

Emergency and Urgent Deliveries and Collections Completed on Time



About the target

This is a core commissioned service within the Community Wellbeing Commissioning Strategy and supports the Council to meet its Care Act responsibilities. Target is aligned to four KPIs within the Integrated Community Equipment Service contract.

About the target range

This measure allows for no fluctuation against the target.

About benchmarking

No benchmarking data is available as this is a service commissioned specifically for Lincolnshire and not part of a wider national programme.