

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:-

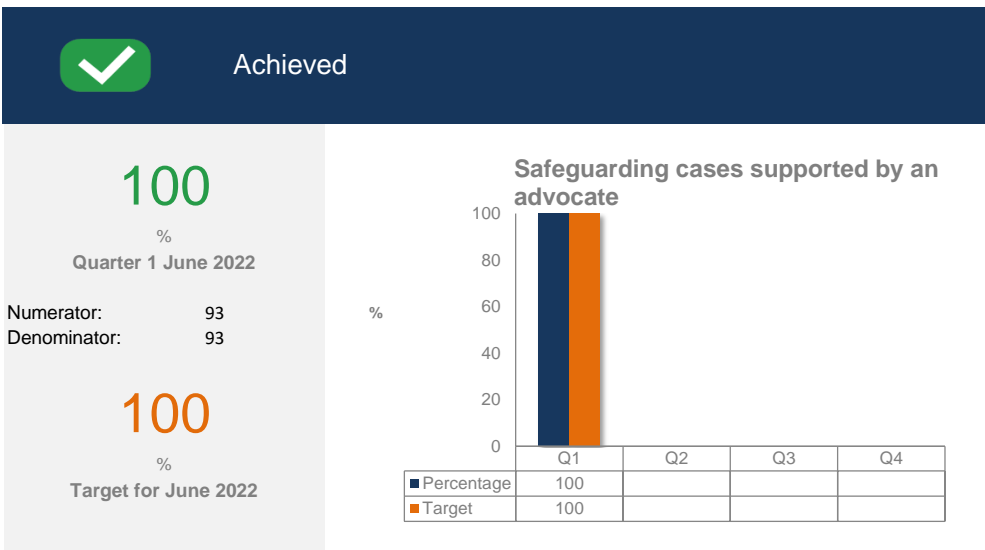
- * An Independent Mental Health Advocate (IMHA);
- * An Independent Mental Capacity Advocate (IMCA); or
- * Non-statutory advocate, family member or friends.

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.

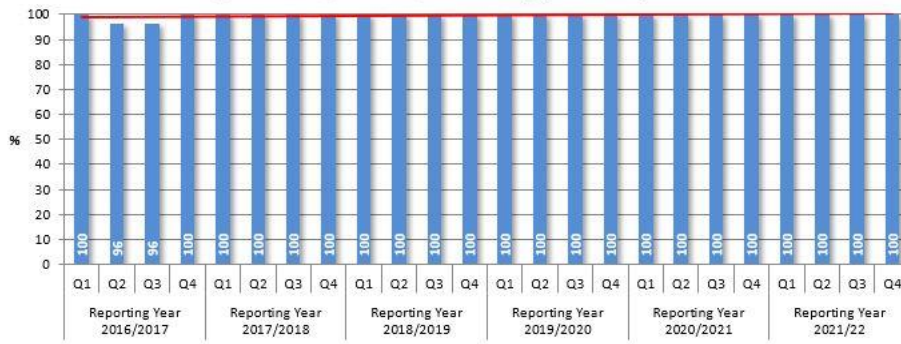


About the latest performance

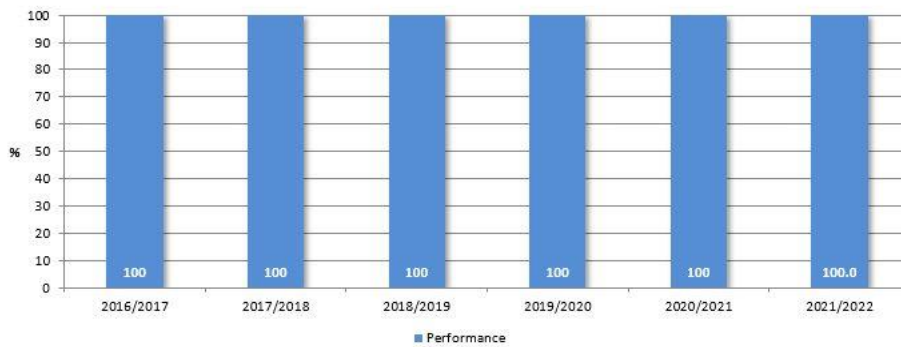
Performance against this measure is consistently strong. It provides assurance that adults at risk are receiving the necessary support to express their wishes and feelings about what action should be taken to safeguard them from abuse and neglect and evidences compliance with S68 Care Act 2014.

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

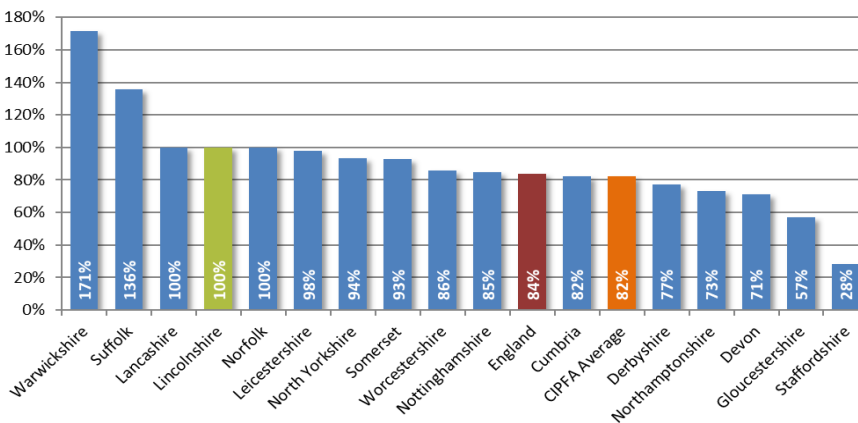
This measure has a target range of +/-5 percentage points based on tolerances used by Department of Health.

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



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.



Exceeds

66

People

Cumulative Actual as at June 2022

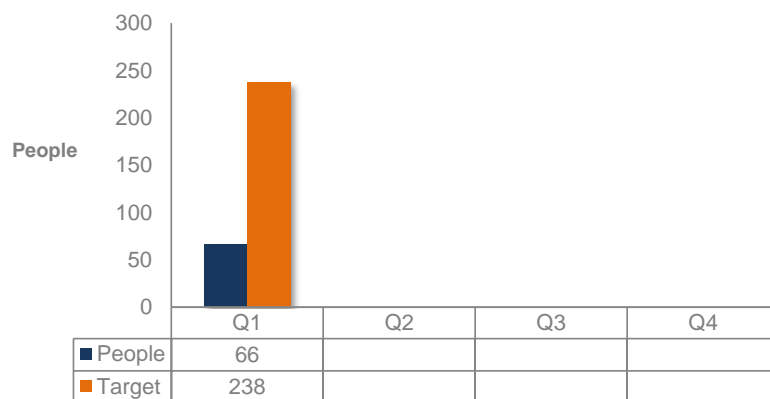


238

People

Cumulative Target for June 2022

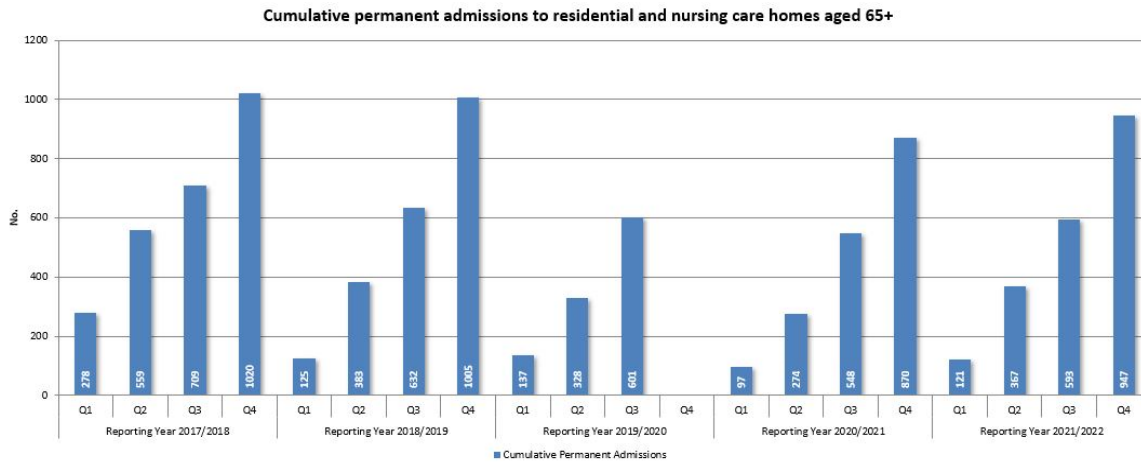
Permanent admissions to residential and nursing care homes aged 65+



About the latest performance

This is a cumulative figure and is typically low in the first quarter. Early indications show that permanent admissions will continue to remain low throughout the year, which includes new clients entering the social care system and existing clients moving to residential from a community setting. 45 of these admissions (approximately 70%) are for adults aged 80 and over which is typically the age you would expect people with deteriorating needs to require residential care.

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

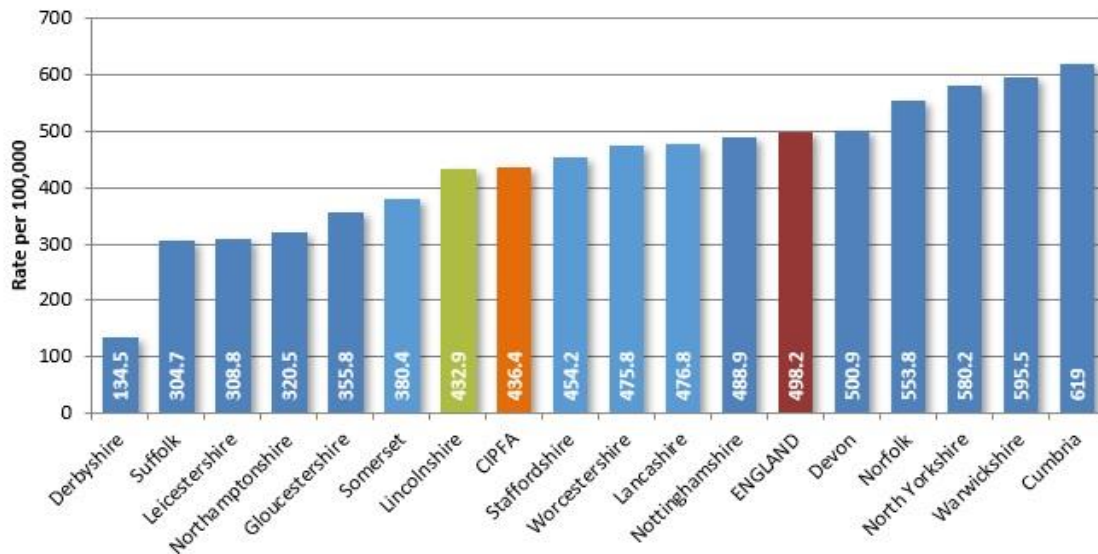
About benchmarking

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.



Achieved

42.2

%

Quarter 1 June 2022

Numerator: 2077

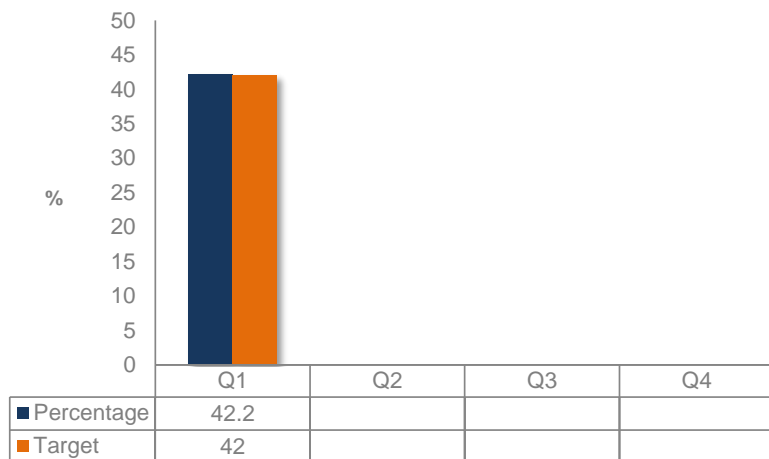
Denominator: 4918

42

%

Target for June 2022

Adults who receive a direct payment



About the latest performance

Measure is being achieved in quarter 1, so no commentary required.

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.

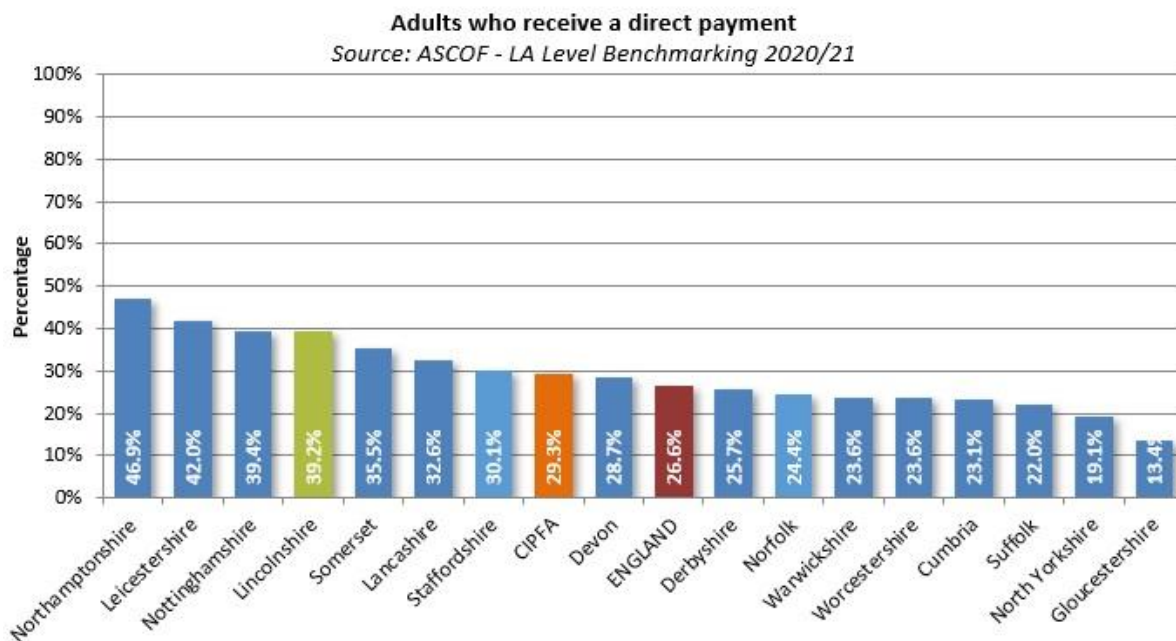
About the target range

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

16.0

%

Cumulative Actual as at June 2022

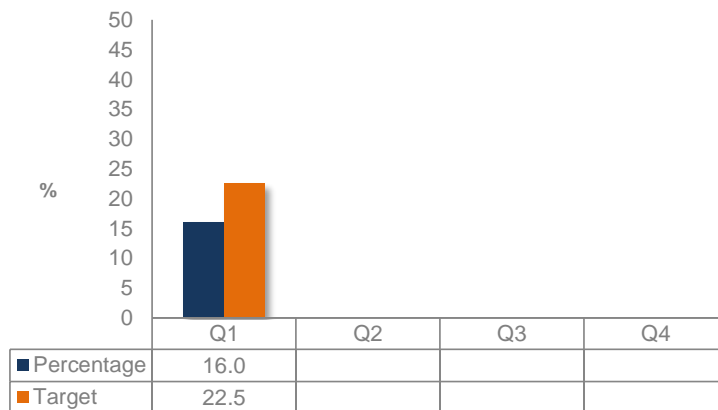
Numerator: 999
Denominator: 6249

22.5

%

Cumulative Target for June 2022

People in receipt of long term support who have been reviewed

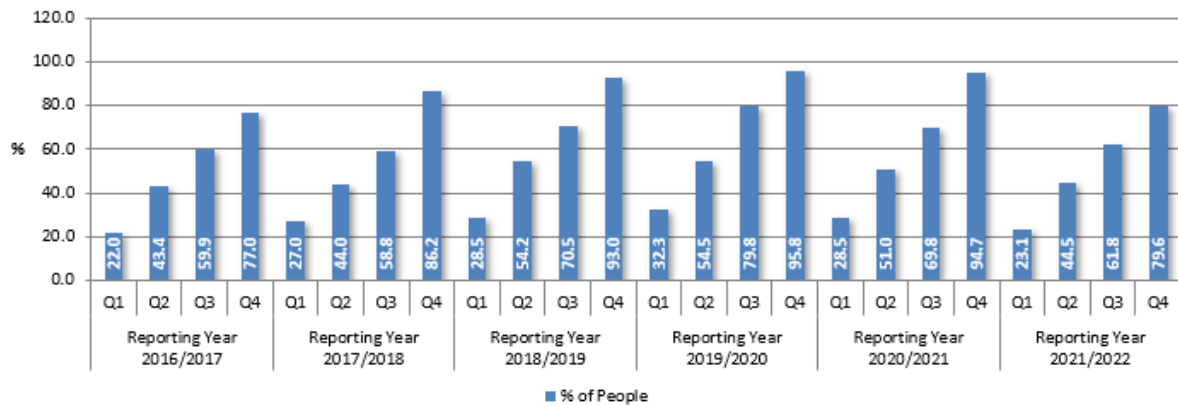


About the latest performance

There have been challenges with capacity to review people receiving long term support and as a result the Adult Frailty Teams have had to continue to prioritise assessments for new clients and interim beds. Unplanned reviews also remain a priority to ensure any one who has an unexpected change in circumstances (hospital spell or carer breakdown for example). However, the service are looking to free up the capacity within the dedicated reviewing teams to ensure more planned reviews are completed. All the while, cases are monitored to ensure everyone has a review scheduled on Mosaic, and re-scheduled if needed to spread the work throughout the year. Specialist Adults Services review performance covering mental health and learning disability is largely in line with the target trajectory.

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

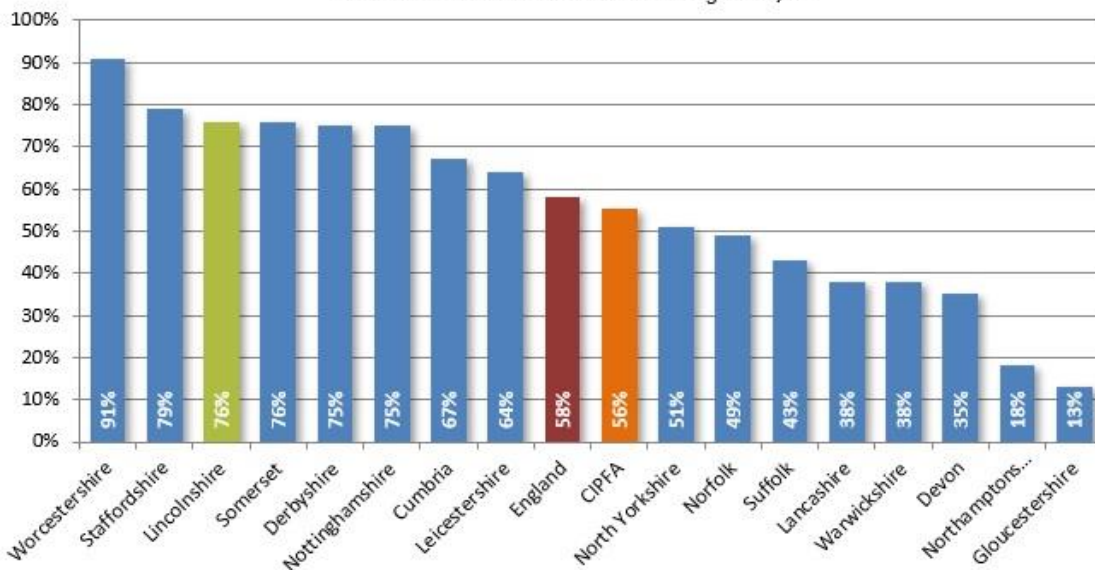
This measure has a target range of +/- 5 percentage points based on tolerances used by Department of Health

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



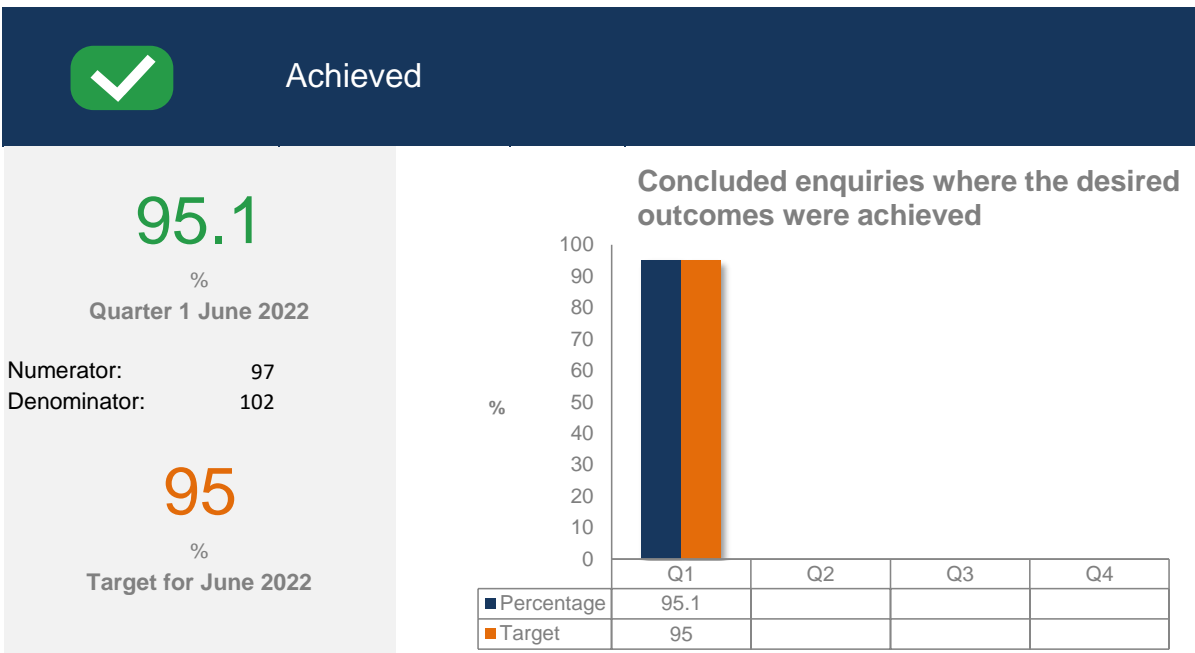
Concluded safeguarding enquiries where the desired outcomes were achieved

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.

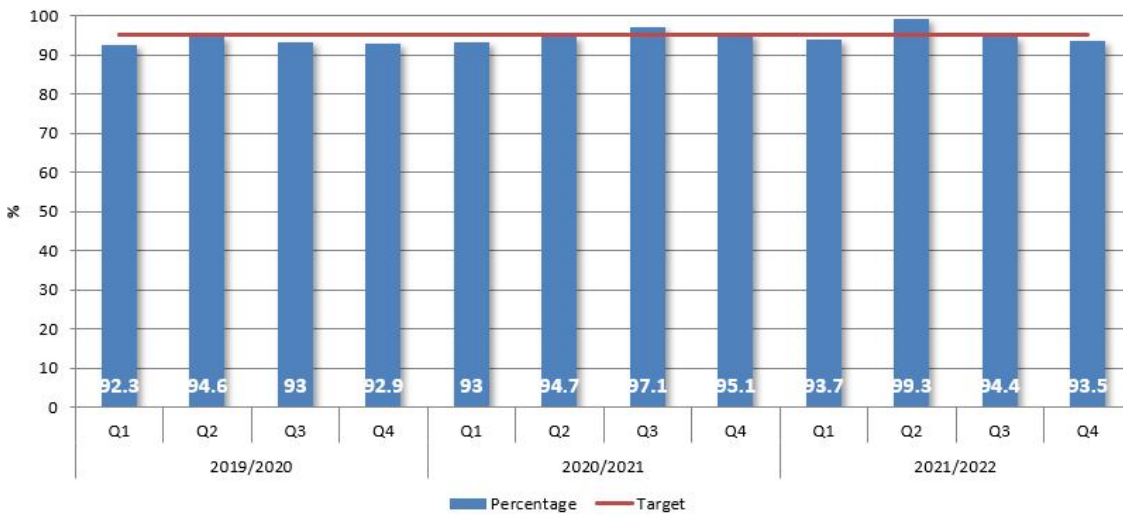


About the latest performance

Measure is being achieved in quarter 1, so no commentary required.

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

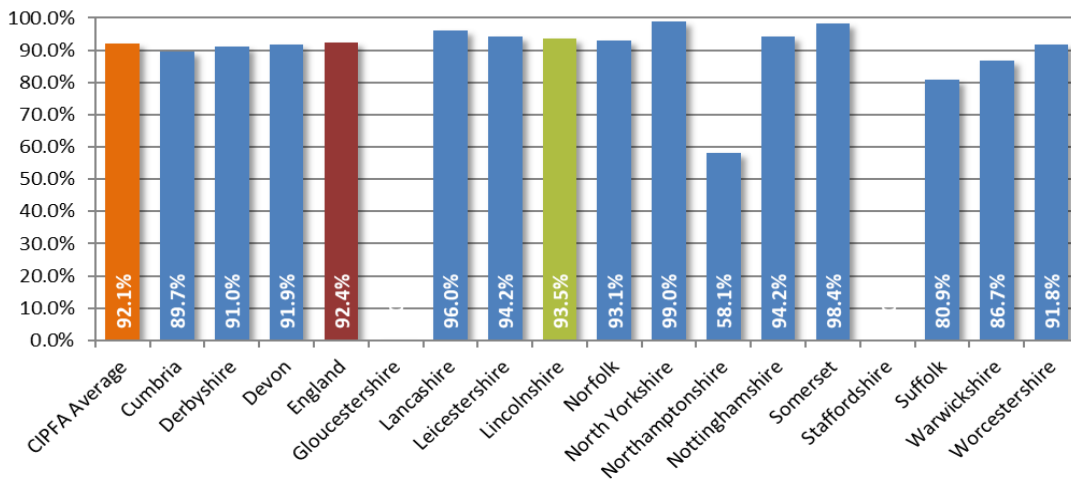
This measure has a target range of +/-5 percentage points.

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.

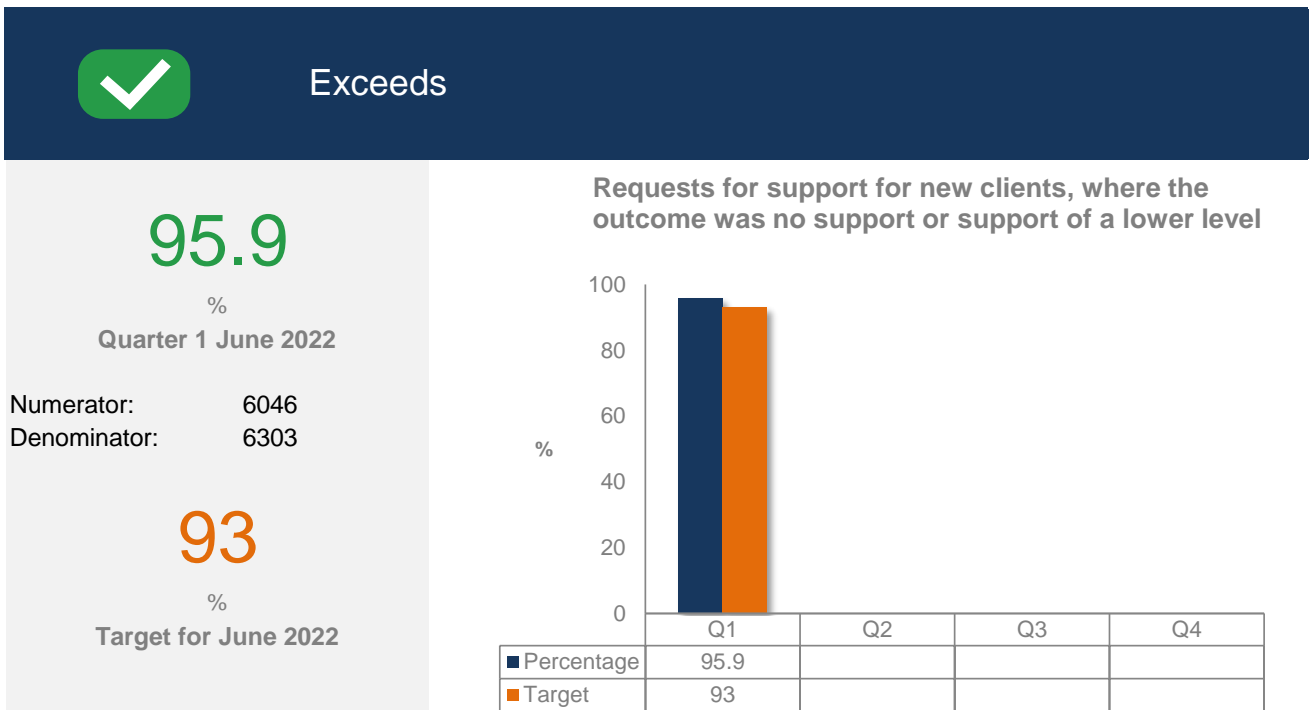
Safeguarding enquiries where the desired outcomes were achieved

Source: SAC SG4a: Making Safeguarding Personal 2018-2019



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.

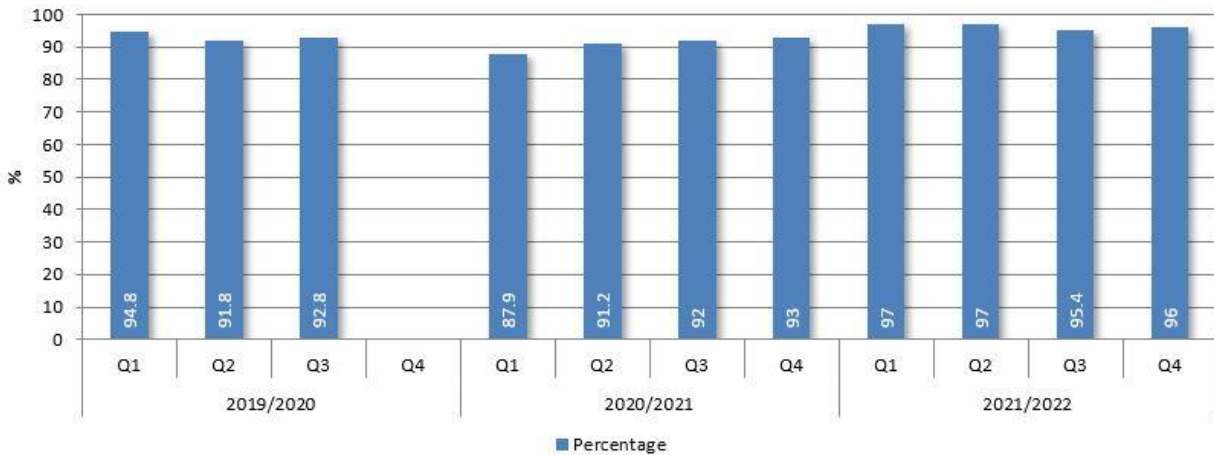


About the latest performance

The investment in strength-based practice resulting in the increased use of proportionate assessments (Initial Conversations) has resulted in more people being empowered to access lower level support, more community based solutions and/or find their own personal support from existing support arrangements, rather than needing LA-funded support.

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.

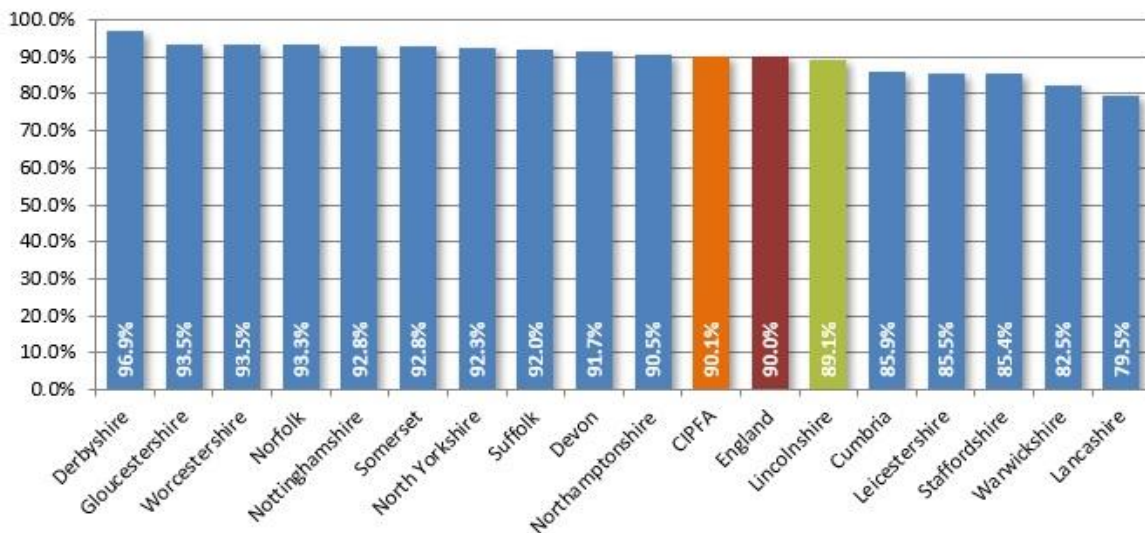
About benchmarking

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



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

96.3

%

Quarter 1 June 2022

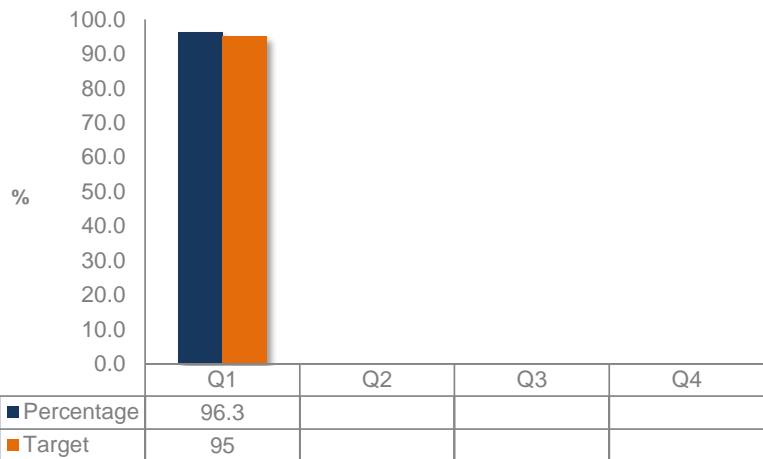
Numerator: 287
Denominator: 298

95

%

Target for June 2022

Completed episodes of Reablement

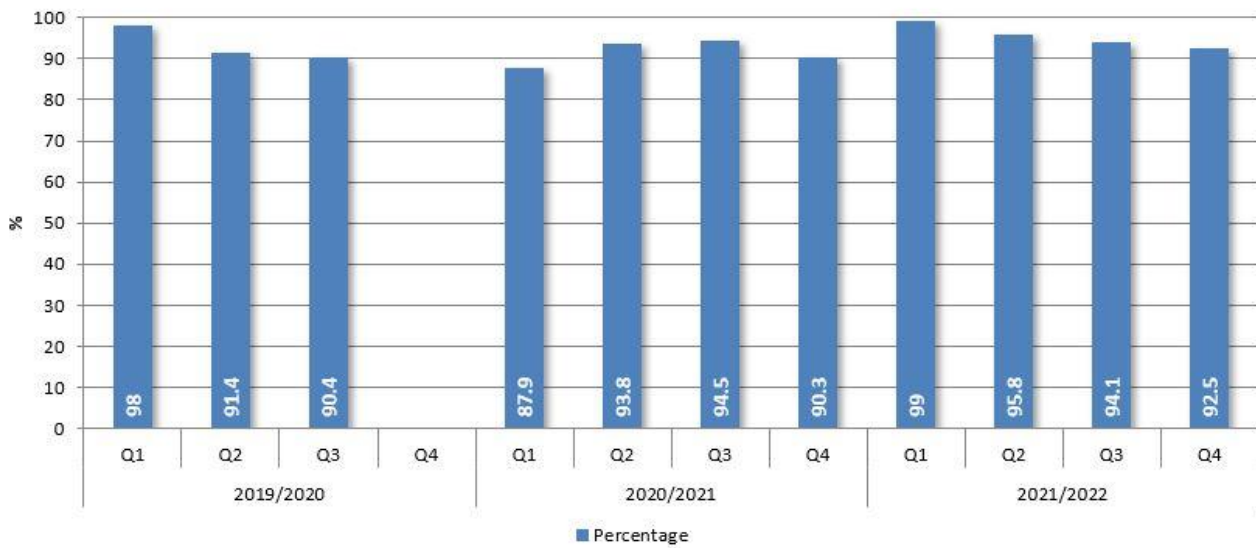


About the latest performance

The measure is being achieved in quarter 1, so no commentary is required.

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.

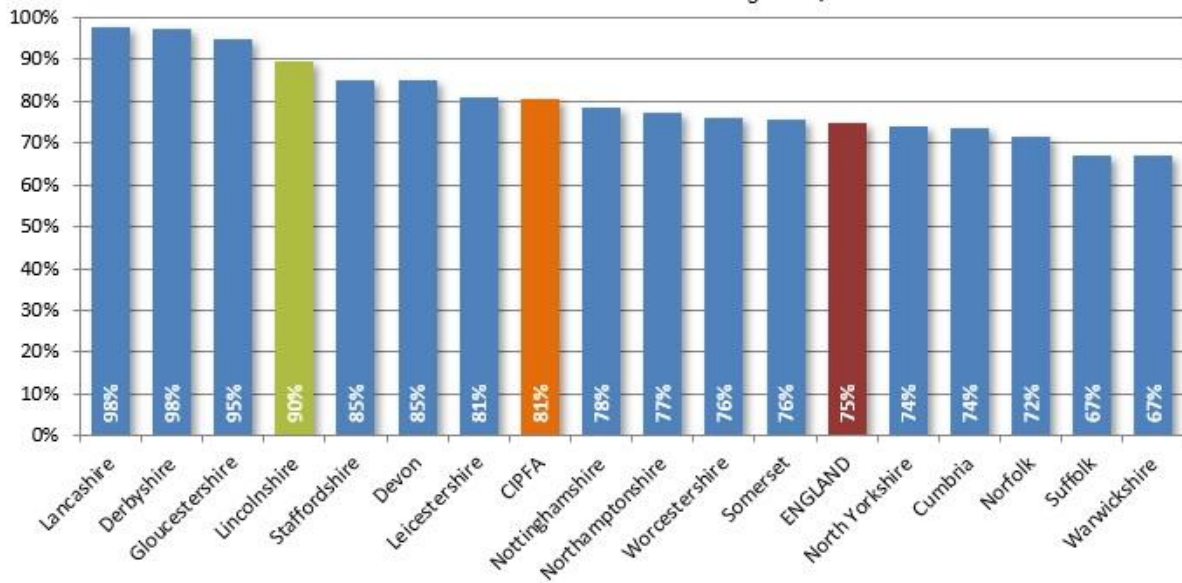
About the target range

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



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

87.0

%

Quarter 1 June 2022

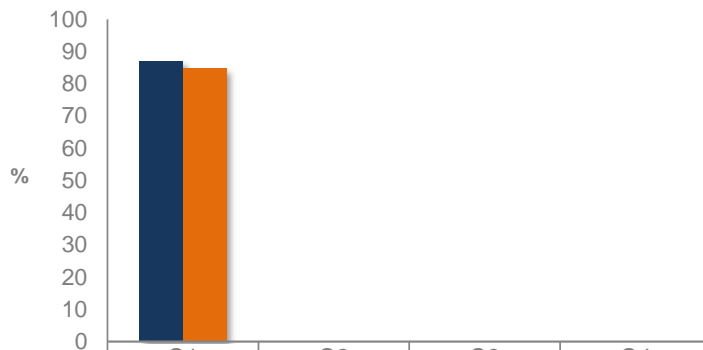


85

%

Target for June 2022

People who remain at home 91 days after discharge



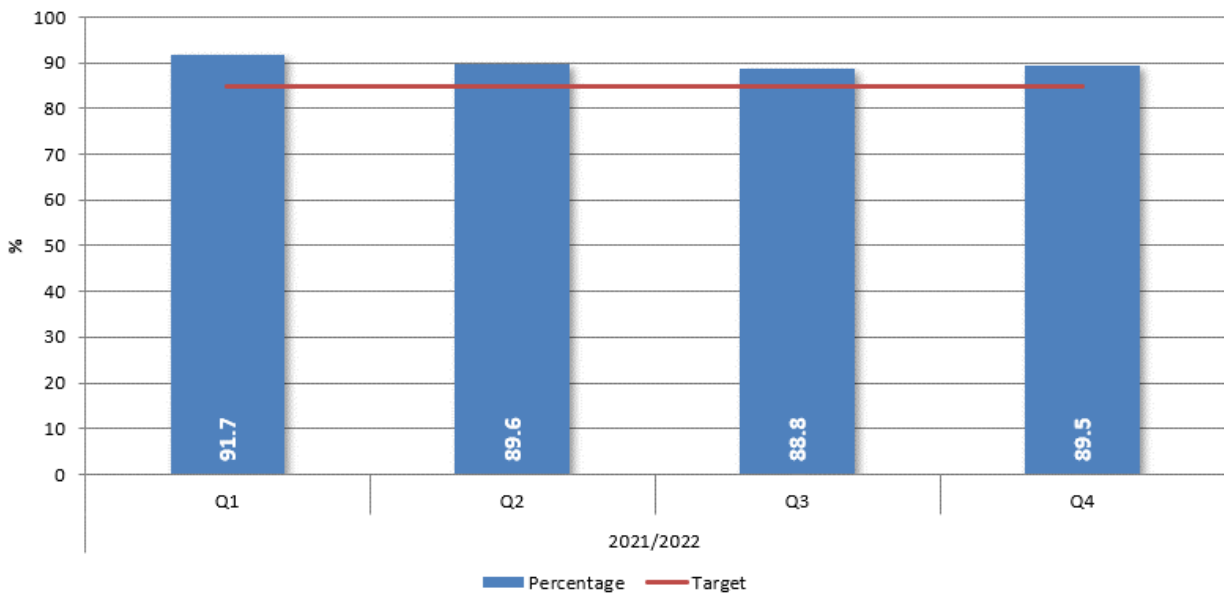
	Q1	Q2	Q3	Q4
■ Percentage	87.0			
■ Target	85			

About the latest performance

The measure is being achieved for quarter 1, so no commentary required.

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 8 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

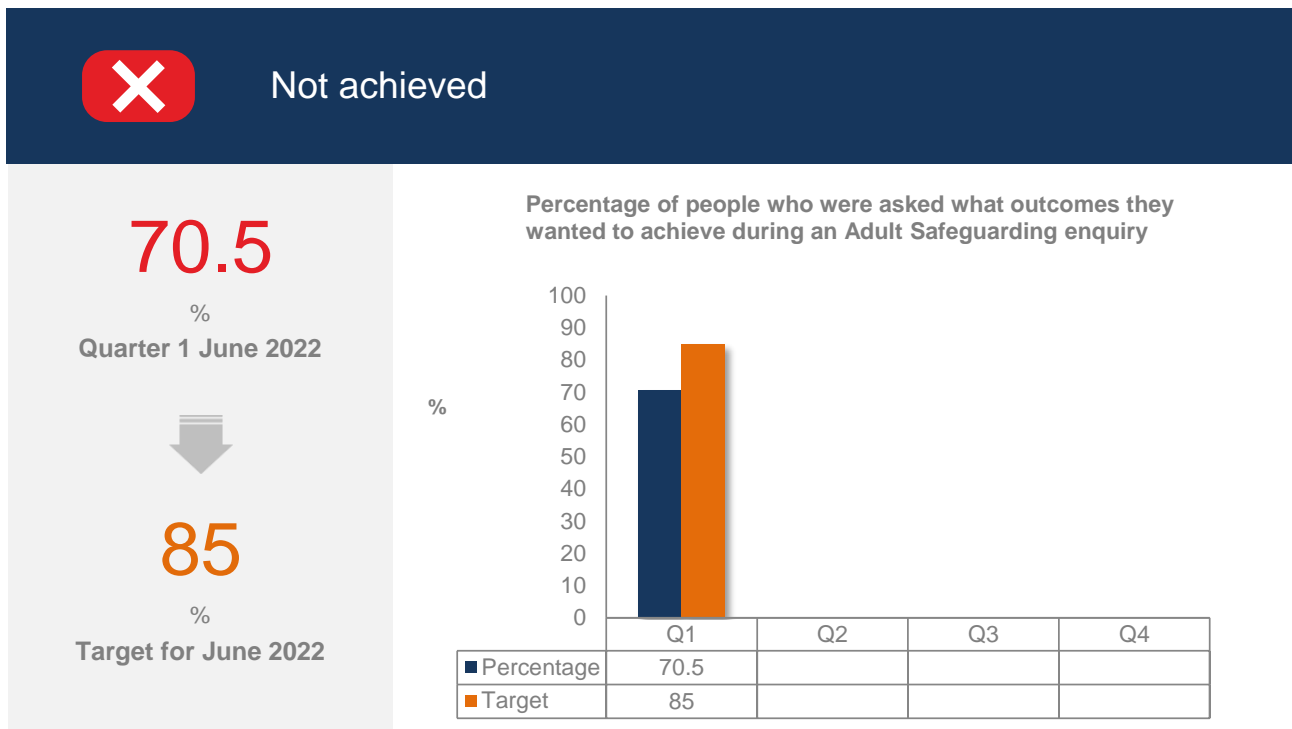
The target range for this measure is set at +/- 5 percentage points.

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 people who were asked what outcomes they wanted to achieve during an Adult Safeguarding enquiry

This is a Making Safeguarding Personal (MSP) measure, with data taken from the Safeguarding Adults Collection. In order to establish whether people's outcomes have been achieved, it is important to ensure each individual is given the opportunity to express their desired outcomes.

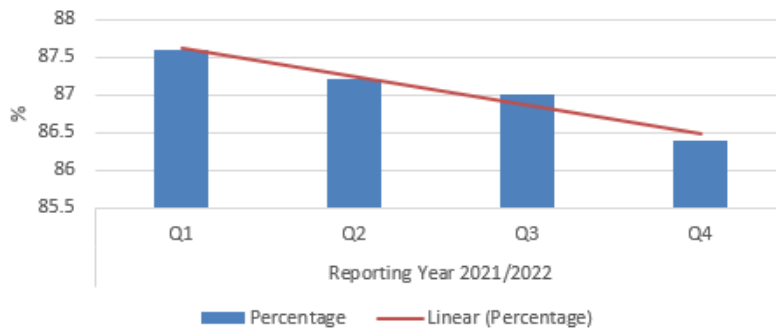


About the latest performance

This is a new measure for 2022/23. In 2021/22 the baseline performance was 86%. The target has been set to maintain performance at this level, as it is not always possible to ask what outcomes the person would like to achieve. Since this is the first year of reporting, the target will however be kept under review. The Q1 performance is 71% which is below target. However it is understood that there are some data quality issues in Q1 that are leading to under reporting. The performance, mosaic and practice teams are working together to ensure that the data is more accurate in future reporting periods. The service is confident that they will meet the 85% target by year end. This indicator is being developed to help reinforce the overall aim of 'Making Safeguarding Personal' and ties in well with other indicators eg. use of an advocate. Further work is needed however to ensure this is fully understandable to a much wider audience.

Further details

Percentage of people who were asked what outcomes they wanted to achieve during an Adult Safeguarding enquiry



About the target

The target for this measure has been set by the service area at 85%

About the target range

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

About benchmarking

Benchmarking data is available for all councils in England, however NHS Digital have identified that as a consequence of the variability of the data across the country, the benchmarking data is unreliable so we are choosing not to include it.

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

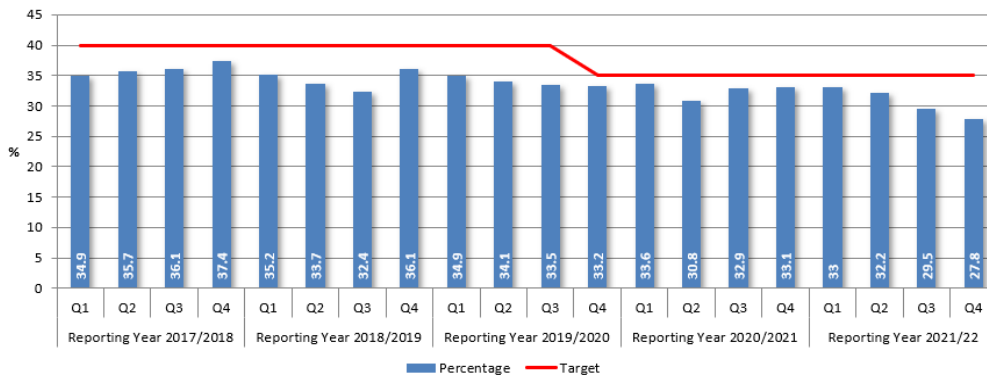
Performance has dropped since the last report from 29.5% to 27.8% which is 7.2% below target. This is not acceptable and is being addressed with the provider. There are several contributing factors that have led to this reduction which include an increase in client numbers over the last 12 months by nearly 18%, an increase in complexity of new clients which is believed to be a result of the pandemic and a difficulty recruiting to some vacancies especially along the East coast. Work with the provider has now shown the recruitment issues have been resolved but it takes time for new staff to become fully operational, so it may be some time before we see those benefits.

Additional funding is being invested in services as part of the Supplemental Substance Misuse Treatment and Recovery Grant, this will start to reduce caseload numbers and improve quality of services and outcomes, but again these posts need time for recruitment and training before they will start to impact on performance figures.

Taken in isolation the completions rate looks poor, but overall contract performance is good. Representations are one of the best ways to measure long term recovery and Lincolnshire is amongst the best in England with only 3.9% of successful completions returning in the 6 months after 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

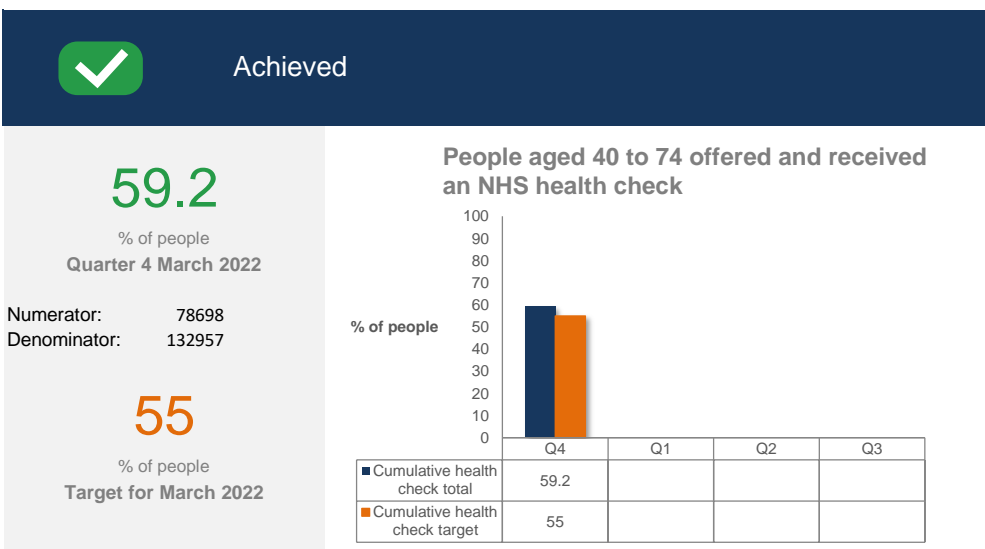
The NHS Health Check programme aims to improve the health and wellbeing of adults aged 40-74 years through the promotion of early awareness, assessment and management of the major risk factors for cardiovascular disease. Local authorities are required to make arrangements for each eligible person aged 40-74 to be offered an NHS Health Check every five years.

This measure tracks the cumulative percentage of the eligible population aged 40-74 offered an NHS Health Check who take up the invite, measured on a 5-year rolling cycle, so for example performance reported at 2021/22 Q4 is cumulative from 2017/18 Q1.

Numerator: People taking up an NHS Health Check invite

Denominator: People invited for an NHS Health Check

A higher percentage of people who are invited and taking up an NHS Health Check indicates a better performance.



About the latest performance

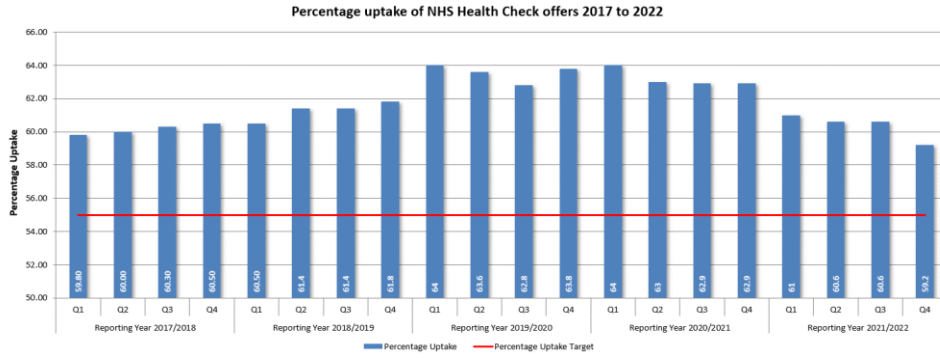
In Lincolnshire during the period Quarter 1 2017/18 - Quarter 4 2021/22, the overall percentage of people taking up an NHS Health Check invite was 59.2% (compared to 44.8% in England and 53.2% in East Midlands). During this timescale, 132,957 people have been invited for a check and 78,698 have taken up the invite. 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 fully seen in this performance indicator.

The Office for Health Improvement and Disparities (OHID) provides the estimated eligible population for the NHS Health Check programme. This is 226,407 for Lincolnshire for 2022-23. People are invited every five years and therefore this means approximately 45,000 are eligible to be invited in 2022/23. Each general practice has been provided with their individual eligible population.

Plans are being developed for the NHS Health Check Programme from April 2023 because the current contract with Lincolnshire general practices is until 31st March 2023 .

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.

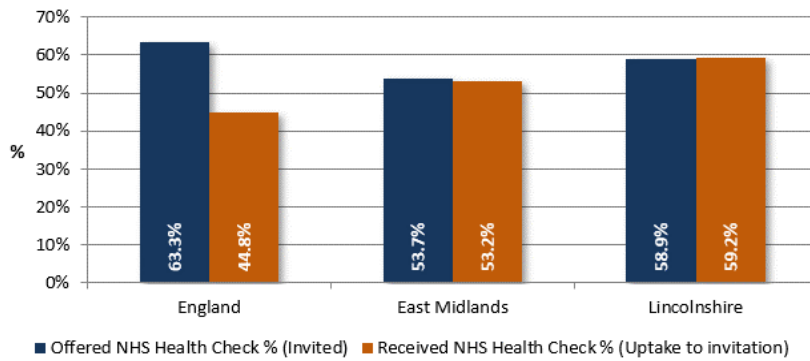
About the target range

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, East Midlands, and England. The East Midlands and England data is provided here and additional data on individual local authorities can be found on The Office for Health Improvement and Disparities Fingertips website: <https://fingertips.phe.org.uk/profile/nhs-health-check-detailed>

**Cumulative NHS Health Check Data
2017/18 Q1 - 2021/22 Q4**



	England	East Midlands	Lincolnshire
Offered NHS Health Check % (Invited)	63.3%	53.7%	58.9%
Received NHS Health Check % (Uptake to invitation)	44.8%	53.2%	59.2%

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.

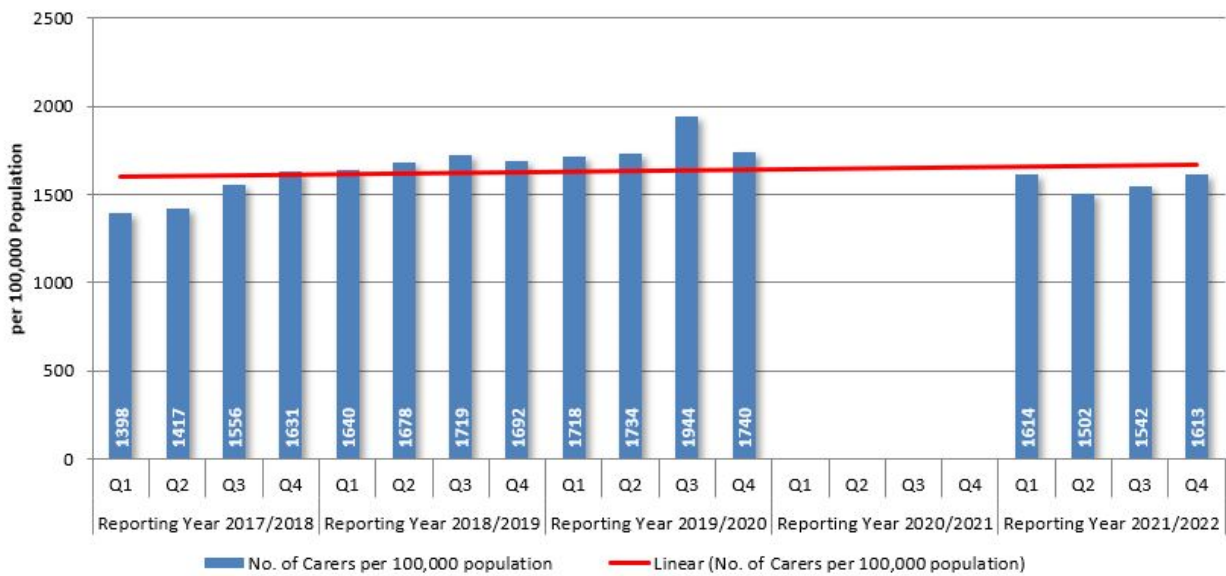


About the latest performance

Demand for carers support continues on an upward trajectory for adults, despite the target not being achieved. Overall, there has been a reduction of approximately 1,000 carers supported in the last 12 months compared to Q4 of 2021/22. This is purely a reduction in young carers and improved data capture, since new and improved data is being used from Children’s Services. In terms of adult carers though, LCC have supported 2,000 newly identified carers in the 12 months to 30 June 2022, with evidence in quarter 1 that a similar level of new demand is expected throughout the year. A re-commissioning exercise has now completed with the contract being awarded to the existing provider, to commence on 1 October 2022. As a result of feedback from carers and benchmarking information, we are amending the service model to provide a clearer route to information, advice and support, with digital options providing greater flexibility for those in caring roles. Nationally and locally, the expectation is for the number of carers supported to rise, with more emphasis on working with health to identify and support carers earlier in their caring journey. A pilot is planned for later in the year to target and proactively support more carers initially in coastal areas of the county, a specific area of need identified by the Primary Care Network in that area.

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

Benchmarking information is not available for this cohort

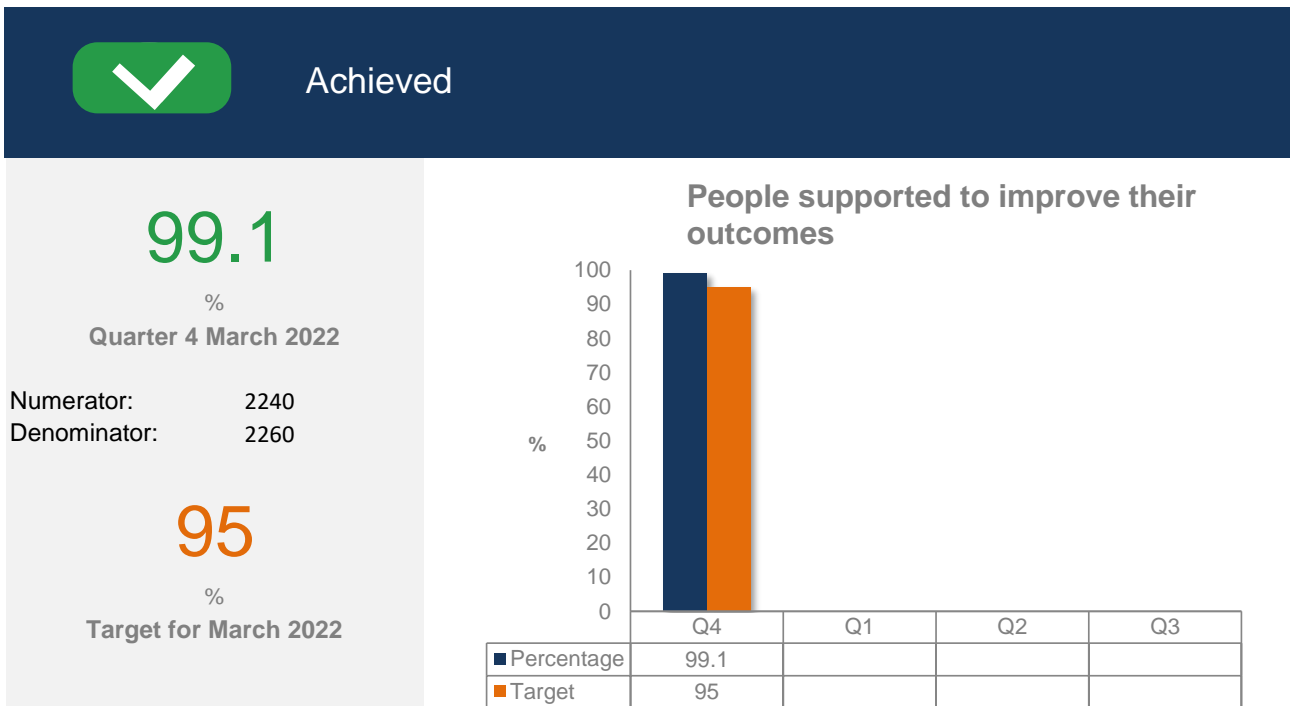
Percentage of people supported to improve their outcomes following Wellbeing intervention

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.

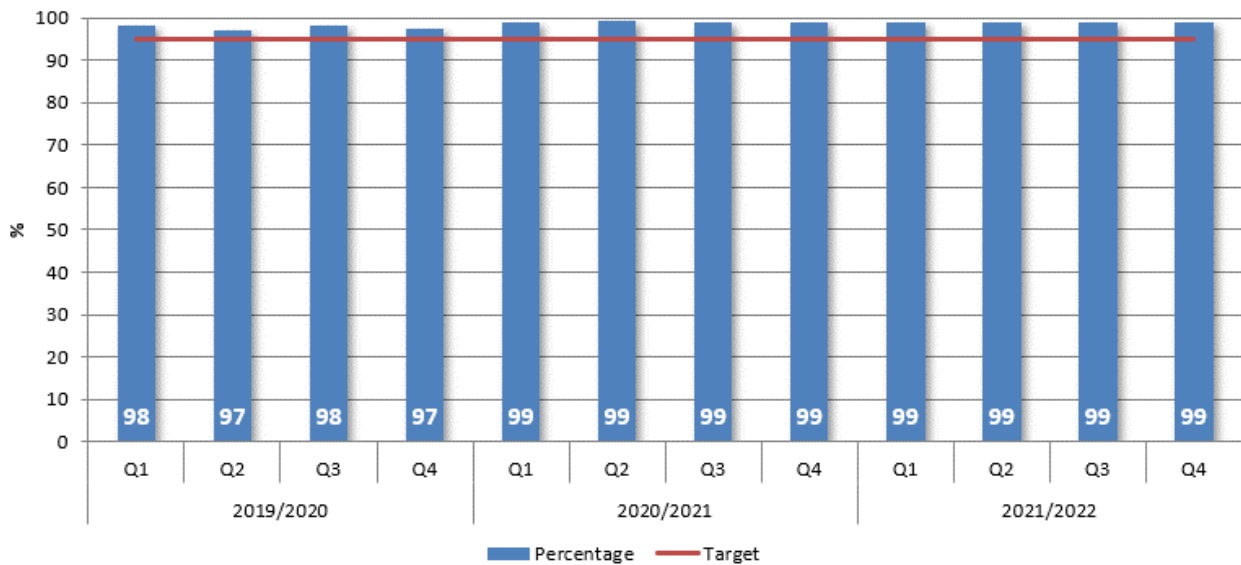


About the latest performance

Due to the time delay on this measure to account for the up to 12 weeks of intervention this data is for Quarter 4 2021-22. During this period, the service has maintained its high performance in this self-determined outcome measure showing 99% of individuals made improvements in their outcomes through service interventions. The service is continuing to provide a mix of face to face and remote support dependent on service user circumstances and preferences.

Further details

Percentage of People Supported to Improve Their Outcomes



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

Despite not achieving the overall annual target of 3,200 4 week quits, missing out by 21%; One You Lincolnshire (OYL) our core provider, have continued to perform at a high level in this quarter, providing a quality stop smoking service to the people of Lincolnshire. They achieved 89% of the total number of 4 weeks quits delivered, ahead of their 50% target and whilst some sub-contractors (GP's & Pharmacies) are beginning to offer stop smoking clinics following covid interruptions, their contribution against the target remains low at 11%, their contribution should also be 50%. Quit rates from the sub-contractors has improved from the previous quarter (42.1%) and is now within recommended levels bringing the combined core service and sub-contractors 4 week quit rate up to 57.9% (accepted range is 35% - 75%). Most of the stop smoking support is being delivered via telephone, with medication posted out to clients, this enables each adviser to support more clients. Face to face clinics have restarted in some areas and is expected to increase once more of the sub-contractors increase their contribution. Not all venues previously used pre-covid are available due to policy change or increases in room hire costs. OYL are working hard to identify and secure new venues to host their service in the communities with greatest need.

Further details



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.

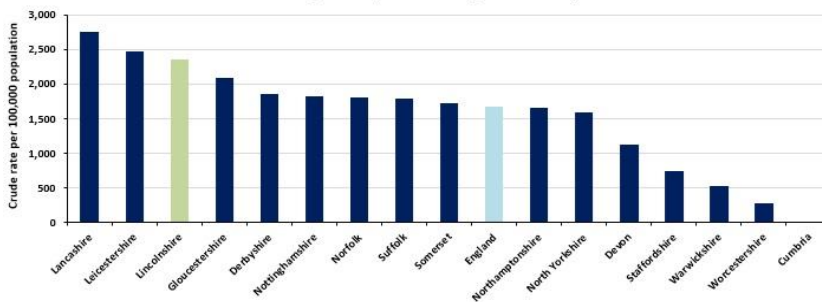
About the target range

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)

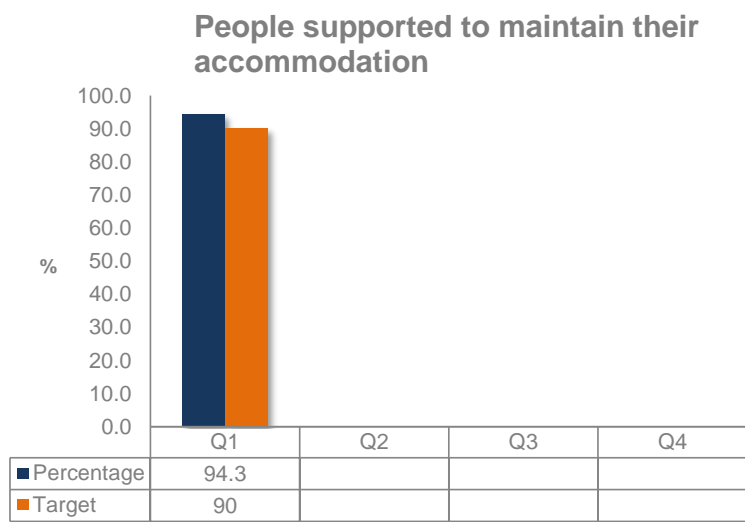
Percentage of service users supported to achieve an overall improvement across their outcomes following a period of three months of housing related support which is the expected average length of support someone will receive.

Achieved

94.3
%
Quarter 1 June 2022

Numerator: 132
Denominator: 140

90
%
Target for June 2022

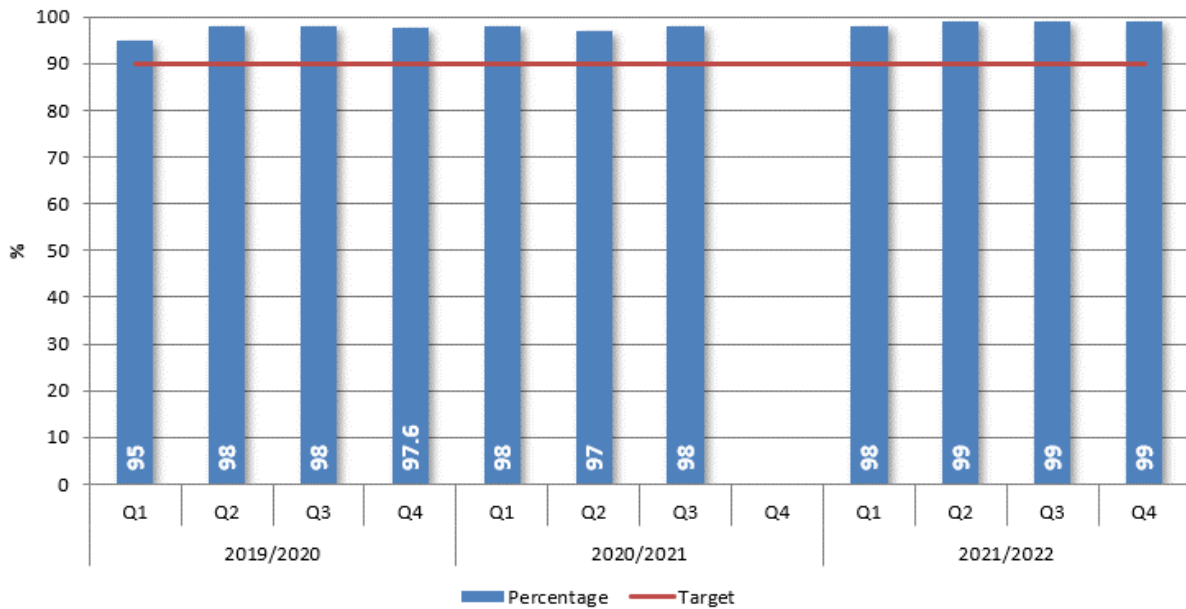


About the latest performance

Framework continue to support their service users to meet their outcomes. The supported 96.6% of floating support service users and 92.6% of accommodation-based service users to develop new and improved skills to manage a tenancy/mortgage independently from services.

Further details

People Supported to Maintain Their Accommodation



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.



Achieved

99.5

%

Quarter 1 June 2022

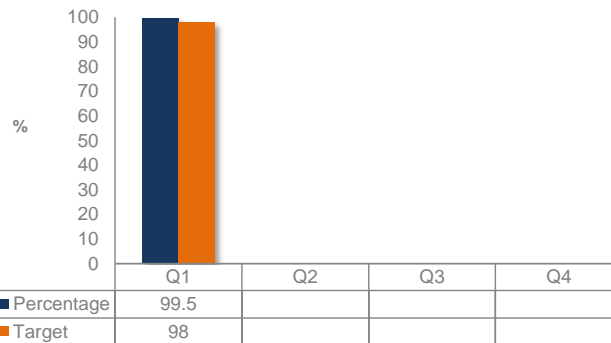
Numerator: 7238
Denominator: 7272

98

%

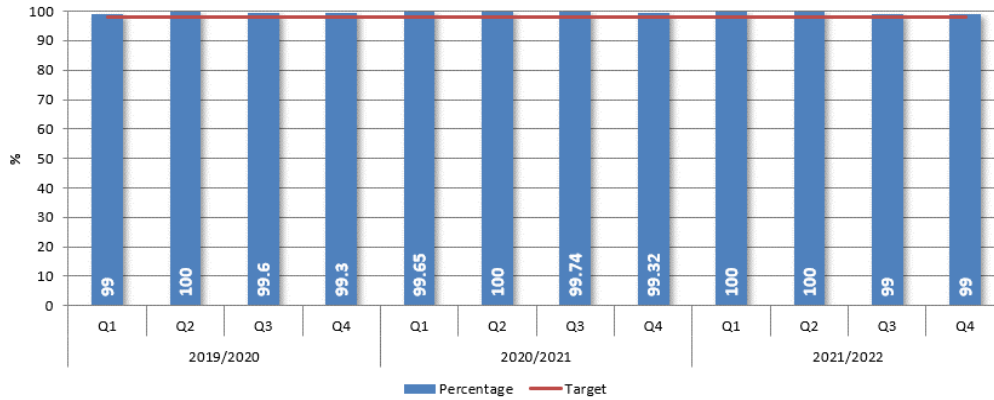
Target for June 2022

Emergency and urgent deliveries and collections completed on time



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

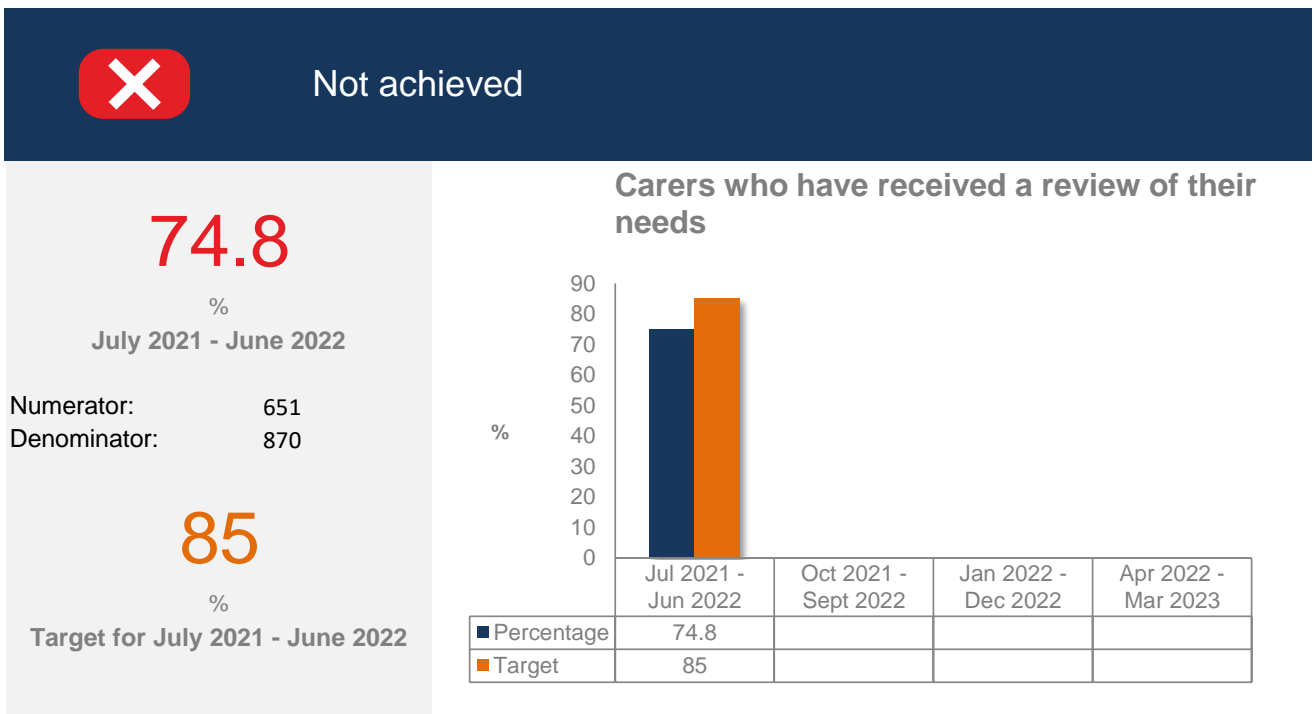
This measure allows for no fluctuation against the target.

About benchmarking

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

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.

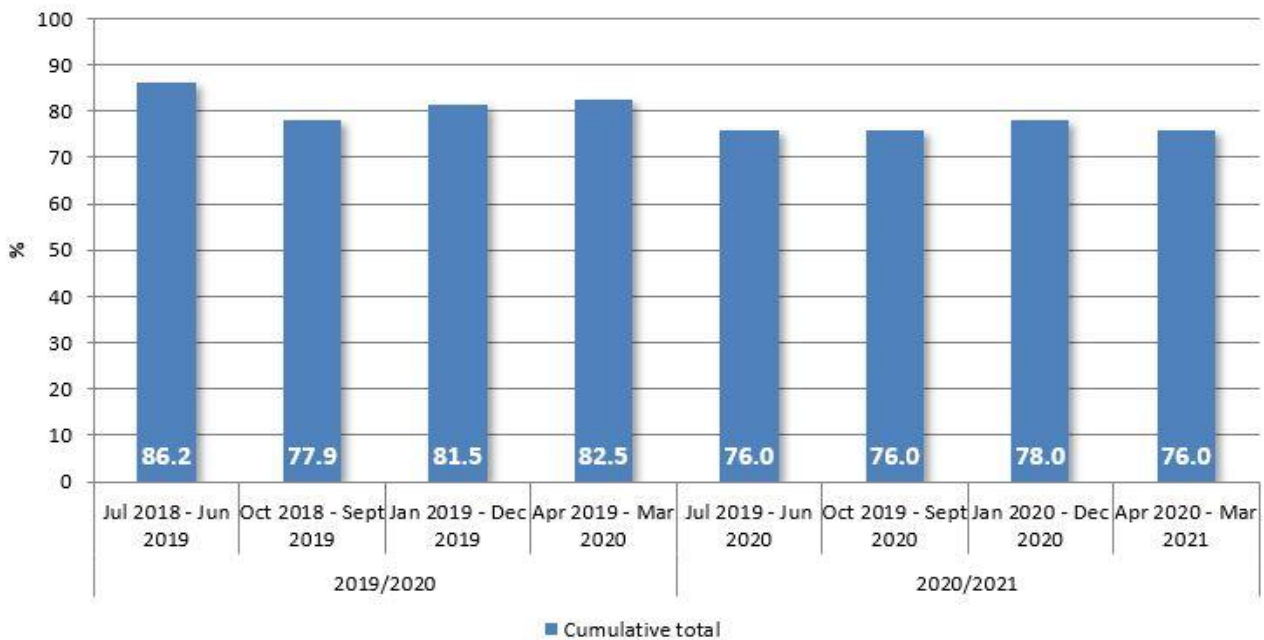


About the latest performance

The measure is currently below target but following further analysis of the cohort in the denominator, it has come to light that not all carers who received a personal budget at any point during the last 12 months are eligible for an annual review. 22% of these carers ceased to receive a personal budget within the year and therefore do not require a review. The implication is that the target of 85% can never be achieved so two options need to be explored; to amend the target to 80% - the maximum achievable for the current measure; or to amend the measure to track reviews for current carer personal budget recipients with a 90% target. The latter is the preferred option since this would align the review measures for both adult clients and carers. Based on the analysis, it is evident that the carers service are reviewing over 95% of carers who are eligible which is excellent performance, but can never be recognised with the current measure or target.

Further details

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

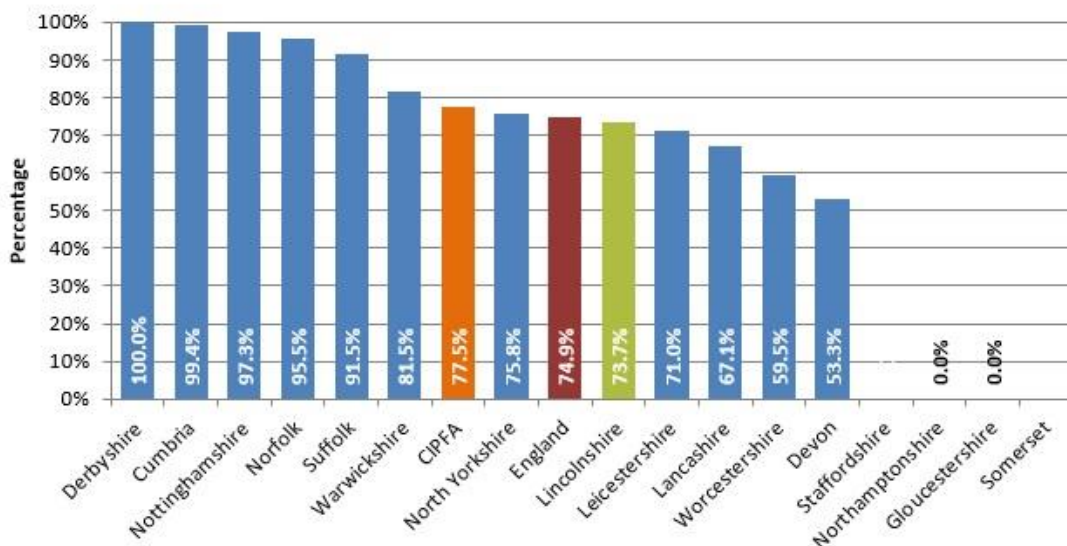
The target range for this measure is set at +/- 5 percentage points.

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