

# **Corporate Performance Report**

**2022/23 Quarter 1**

**Appendix C**

**KPI Commentary**

This report provides detailed commentary for the KPIs listed in Appendix B and provides analysis and insight into performance and, where appropriate, describes the action being taken to improve.

## 1. Delivering Better Services

This section reports on the council's use of resources and the efficiency of our services in key areas.

### 1.1 Improvement journey

The Interim Executive Director of Resources is working with services to develop an integrated business planning and performance framework. This will include embedding the governance arrangements which will ensure the translation of our strategy and priorities into business plans, performance measures and dashboards that will demonstrate progress and impact. Further work will commence in the next quarter to develop additional metrics and measures relating to the Customer Experience and Staff Experience workstreams. Work to develop additional data and analysis skills within our workforce is proceeding, using apprenticeship levy funding. as is a programme of training to develop Agile, Lean and Continuous Improvement skills to deliver more efficient and responsive services.

Additional data relating to use of buildings has been developed and a pilot of additional sensor packages is underway. These data sets will support the next phases of the property review, providing a more accurate and up to date picture of building usage and efficiency.

### 1.2 Sickness absence

Sickness Absence Performance since April 2021 is shown in the graph below.

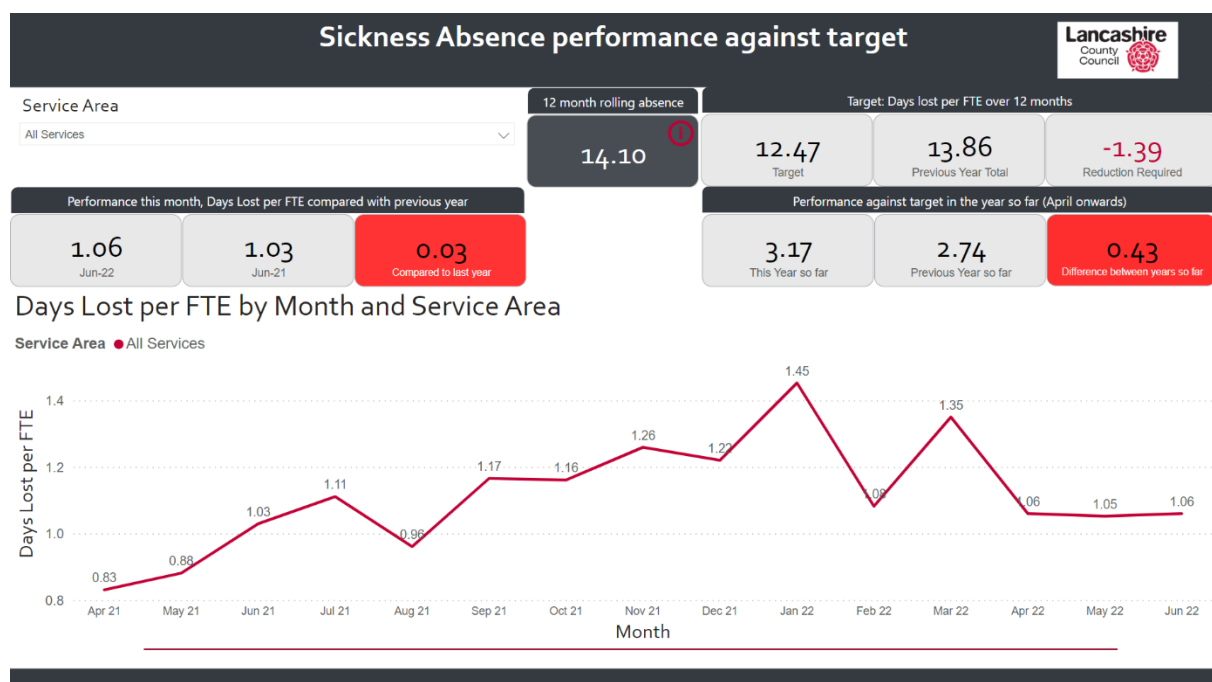


Fig1. Shows the current absence trend from April-21 for the council. The cards show previous year performance, target, required reduction and the performance against the target in the year so far.

Sickness absence for Quarter 1 2022/23 was 3.17 days per Full Time Equivalent (FTE) in comparison to Quarter 1 of 2021/22 which was 2.74. Although this is higher than the previous year, sickness absence is on a downward trend from Quarter 4 2021/22 which was 3.89 days per FTE, reflecting a large peak in absence in January from the Omicron variant. 73.77% of staff did not have any absence in Quarter 1 compared with 67.80% in the previous Quarter.

The top 3 reasons for absence follow a similar trend to previous quarters with the main reason for absence being Mental Health, which is again followed by Musculoskeletal then Covid-19.

Quarter	#1	#2	#3
Q1 2022/23	Mental Health (31.14%)	Musculoskeletal (12.92%)	Covid-19 (11.85%)
Q4 2021/22	Mental Health (30.32%)	Covid-19 (21.36%)	Musculoskeletal (10.43%)
Q1 2021/22	Mental Health (37.17%)	Musculoskeletal (14.48%)	Medical/Dental/Hospital test and treatment (9.55%)

Despite the impact of Covid, long term sickness remains the biggest cause of absence for the council.

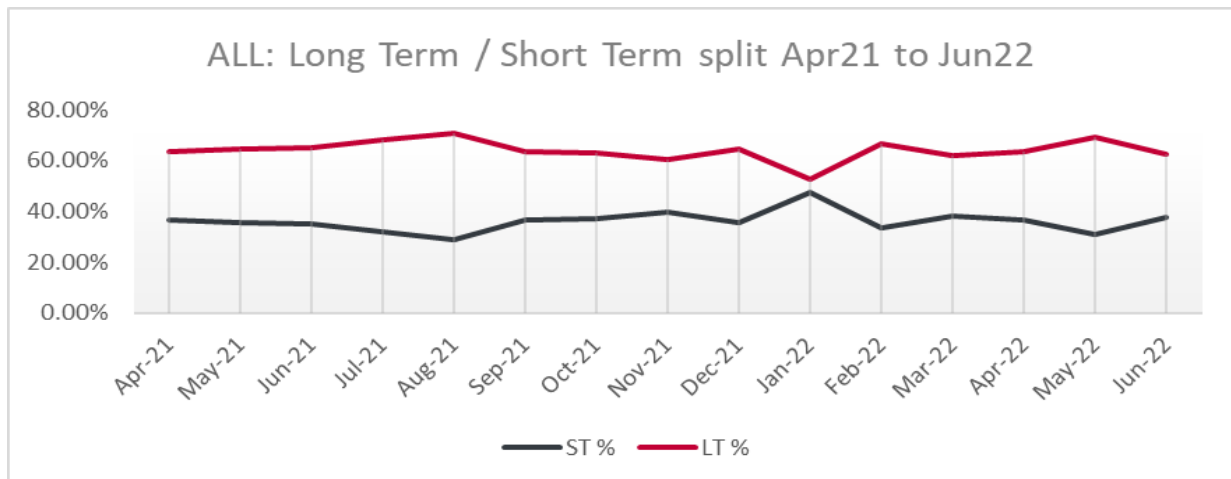


Fig 2. Shows the trend of Long Term and Short-Term percentage of absence.

When comparing against other councils that participate in the LG Inform benchmarking group, Lancashire ranks 9<sup>th</sup> of the 12 for days per FTE in Quarter 4 21/22.

Rank	Authority	Sickness days per FTE
1	Essex	1.8
2	North Yorkshire	2.2
3	Gloucestershire	2.4
4	Oxfordshire	2.5
5	East Sussex	2.7
6	Lincolnshire	2.8
7	Devon	3.3
8	Nottinghamshire	3.4
9	Lancashire	3.9
10	Surrey	4.3
11	Derbyshire	4.4
12	Cumbria	5.0

Sickness absence varies significantly across council services from 0.69 days lost per FTE to 25.37 days in 2021/22. This reflects the diversity of the services we deliver. Services have individual sickness absence reduction targets to achieve and action plans based on their more detailed data dashboards.

### **1.3 Early Years and School Places**

#### **1.3.1 Percentage receiving preferred school places**

The updated school placements for the 2022/23 entry period suggest Lancashire's performance remains on target (maintaining quartile two) and above benchmarks in relation to pupils being offered one of their top three preferences at primary (98.6% compared to 98.1% nationally and 98.3% North West) and secondary (95.9% compared to 94.3% nationally and 95.3% North West) level with both indicators maintaining quartile two positioning nationally. There was an increase in the number of parents who have been offered their first preference school. The School Admissions Team continues to work closely with Corporate Communications on a successful publicity campaign which has been effective in reducing the number of late applications received.

Factors influencing the number of pupils securing their preferred schools:

- COVID restrictions meant that very few secondary school open evenings took place. Similarly, the School Admissions Team held far fewer Year 6 parent

information sessions. Advice to parents on the secondary school application process and the wise use of preferences has therefore been very different for the last two years.

- Ongoing unprecedented levels of inward migration in Pendle and Burnley.
- The increasing number of own admission authority schools (academies, free schools and faith schools) in Lancashire. Governing bodies can determine how pupils are prioritised for places and the published admission number can be decreased, despite objections.

### **1.3.2 Take up of free funded Early Years education**

The service has proposed targets against these indicators for the 2022/23 period of 80% for eligible 2 year olds benefitting from free funded education and maintain national quartile A for 3/4 year olds benefitting from free funded education.

Published data for 2021/22 suggests in week 3 of January 2022 (school census reporting date), 76% of eligible 2 year olds benefited from free funded education, this was above the national average (72%), same as the regional (76%) and slightly below the statistical neighbours (78.2%). Lancashire was placed in quartile B nationally against this indicator. This was an improvement on the January 2021 figure (62%). Internal data suggests this figure improved to 85.3% at the end of the spring term once the processing and finalising of all claims had been completed.

In January 2022 98% of all 3/4 year olds in Lancashire benefited from free funded education, this was above the national (92%), regional (96%) and the statistical neighbours (96.3%) averages. Lancashire was placed in quartile A nationally against this indicator. Internal data suggests this figure improved to 99.6% at the end of the spring term once the processing and finalising of all claims had been completed.

A comprehensive multi agency action plan has been in place since Summer 2021 to help improve the take up of funded places for 2, 3 and 4 year olds. Actions delivered to date include:

- Raising awareness with partners & family facing services so they have the knowledge to promote and proactively encourage families to take up the offer
- Developing resources toolkits for partners and the early years sector to enable them to proactively promote the take up of early years entitlements
- Ensuring effective information sharing with Children's Social Care, Children and Family Wellbeing services and Inclusion services in order to target those families known to them whose children are not accessing an Early Years place.
- Through the Place Based Partnership Groups and Team Around School Services, working with internal and external partners to identify any local barriers, and agree strategies that will support more families in targeted communities to take up the offer

## **1.4 Use of Libraries**

### **1.4.1 Libraries visitor numbers.**

Visitor figures increased steadily throughout the previous year (2021/22), reaching around two thirds of pre-pandemic levels. Q1 2022/23 has seen some overall levelling off of visitor numbers (511,537), due in part to the move of one of our busiest libraries - the Harris - into temporary premises.

### **1.4.2 People's network (PNET) sessions.**

Q1 2022/23 continues to see a continued gradual increase in traditional online "Sessions" usage of the PNET system (58,547). Improvements made last year include a free WiFi service at all sites, improved broadband and WiFi printing. Data on these new services will soon be included in the overall PNET figures and targets will be reviewed as appropriate.

### **1.4.3 Physical Issues and e-Downloads performance now reported against a combined target.**

There were 770,314 physical issues for Q1, and 275,584 e-downloads. Therefore, the combined performance was 1,045,898. The target for the combined indicator for the full year is 3,900,000.

#### **1.4.3.1 Physical Issues.**

These have always been the traditional mainstay of library usage with nearly three million (2,780,200) public issue transactions during 2021/22. Approximately 78% of pre-pandemic levels. Part of this loss is likely to be explained by the move to electronic formats, by some users, mentioned below, and it has been agreed that the new target for library loans usage should combine physical and electronic formats.

#### **1.4.3.2 e-Downloads**

Levels of e-Downloads have remained consistent, suggesting that users who have taken up or moved to our electronic formats are staying with them and with a total of 987,425 downloads during the previous year (2021/22), this service now forms a significant part of library usage. New formats such as eNewspapers have proved popular, but were not reaching anticipated usage levels, leading to a review of how customers can access them and improvements in this area should see significant increases in usage shortly.

## **1.5 Revenue forecast outturn % variance to budget**

The 2022-23 revenue monitoring position as at Quarter 1 is a forecast overspend of £17.740m, which by way of context is 1.87% of the county council's net budget. The overspend is due to a combination of variances across services and is primarily driven by the anticipated national pay award of circa 7% and increasing prices for care. The overspend is partially offset by vacancies and savings on inherited pensions liabilities.

The full money matters report is elsewhere on the agenda.

## **1.6 NHS Health Checks**

The delivery of NHS Health Checks substantially decreased during COVID and is now starting to recover with quarter one showing that 30,159 residents (representing 100% of the eligible population for that quarter as well as a significant number of additional residents as part of catch-up planning) were invited for an NHS Health Check. Of these 6,305 (35.8%) received an NHS Health Check which is an increase in uptake from the previous quarter of 5,071 (28.9%).

Although our current uptake rate is some way off the national ambition for 75% this is now steadily improving. We have well developed recovery plans to improve our performance further and we are:

- working closely with both general practice and community-based providers to incentivise provision of the scheme
- mobilising community outreach models that will help reduce the variation in uptake that still exists across Lancashire
- developing a communications and engagement plan to promote the provision and accessibility of the scheme
- providing training programmes to improve the quality of provision across all our respective providers.

## **1.7 Tobacco Control**

There are an estimated 13.9% of adults (18+) who smoke in Lancashire, which is higher than the English average of 12.1% (2020 figures) although there is significant variation in rates both by geography and population groupings. We commission a dedicated stop smoking service which is expected to treat 5% of the smoking population on an annual basis with 50% expected to quit. There was a modest fall in eligible patients accessing the service during the pandemic. From April 2022 the service returned to a face-to-face service, and the aim is to maintain the increasing percentage of eligible patients accessing the service up to pre-COVID levels. Of those using the service, numbers quitting, the service is performing just above expected target.

## **1.8 Public Health 0-19 Healthy Child Programme**

This relates to our health visiting and school nursing services which is available to all children. The national target of 95% is set for five mandated face to face visits. This was a particular challenge during the Covid-19 pandemic and was mitigated through the offer of virtual visits. There has been an overall decline in the number of mandated visits received in Q4 when comparing to the previous Quarters, particularly the antenatal and new birth visit as shown in the table below.

Indicator	Q1	Q2	Q3	Q4	Annual
Mothers who received a first face to face antenatal contact with a health visitor at 28 weeks or above	1,956	1,914	1,541	1,163	6,574
	78%	71%	58%	49%	64%
Infants that receive a face-to-face NBV within 14 days by a health visitor	2,672	2,767	2,650	1,481	9,570
	91.2%	87.2%	81.2%	52.4%	78.5%
Infants who received a 6–8-week review by the time they turned 8 weeks	2,610	2,570	2,643	2,250	10,073
	89%	84%	81%	78%	83.0%
Children who turned 12 months in the quarter who received a 12-month review, by the age of 12 months	2,555	2,494	2,413	1,889	9,351
	86.0%	84.0%	81.0%	66.0%	79.0%
Children who received a 2-2 ½ year review using Ages and Stages Questionnaire (ASQ-3)	2,364	2,320	2,314	1,616	8,614
	85%	89%	90%	90%	88%

The decline in performance is largely due to vacancies, increased sickness and maternity leave as well as holiday periods. There were also a proportion of notifications that were received late which resulted in appointments being missed or baby born before the appointment date. This was compounded by a national issue with UK mail whereby some families have not received their appointment letters on time. This has been reported and is being investigated.

To address these issues, the service continues to prioritise vulnerable families and actions have been taken to improve performance through further recruitment of Health Visitors and step down of non-urgent meetings to allow more patient facing time. The service provider is also undertaking further work to recruit and promote available vacancies across Lancashire including securing agency Health Visitors and an increased pool of bank staff to increase resilience across the service.

An interim agreement with the provider is in place to extend timescale from 14 days to 21 days allowing more new birth visits completed within 21 days. Other actions include a full review of pathways for both 12 month and 2.5-year checks, and a pilot for the Care Co-ordination hub to take over the booking of contacts to allow staff to focus their role on the mandated checks.

## 1.9 Sexual Health Services

In 2021-22, a total of 73,875 sexual health interventions were provided to local residents under the All Age contract, and 18,225 under the Young People's contract and this represents a substantial recovery from the decrease in service utilisation that occurred during the pandemic period.

The numbers of women choosing Long-Acting Reversible Contraception as their preferred contraception method through our main contracted provider consistently exceed the baseline target of 45% of the total numbers seen. As evidenced, during Qtr3 and Qtr4 over 70% of women attending for contraception chose this option after receiving counselling on all methods. This is an improving situation and demonstrates a good level of bounce-back after the impact of covid restrictions on service provision.



## 1.10 Health, Safety and Resilience Service

The service operates across three teams, supported by a Business Support Team, which include:

- Resilience - planning, training, exercising and reacting to natural and manmade disasters.
- Educational Off-Site Visits - safety of off-site learning environment
- Health, Safety & Quality - ensuring safe working conditions for staff and people using our services.

### 1.10.1 Resilience

This refers to work carried out in Health, Safety and Resilience to satisfy our statutory requirements under Control Of Major Accident Hazards and Radiation (Emergency Preparedness and Public Information) Regulations which is assured through annual performance audit by the Health & Safety Executive (HSE), Environment Agency (EA) and Office for Nuclear Regulation (ONR). Annual letters of compliance are all up to date and all competent authority meetings have been attended and recorded appropriately. In the last quarter all targets were met, and all statutory plans remain valid.

### 1.10.2 Educational Off-Site Visits

This is a required service for our maintained schools and we target an optional buy in by 75% of academies. Optional academy buy in to the service stands at 84 % for this academic year with the trends from previous years outlined below:



Fig 3 shows the percentage buy-in for Educational Off-Site Visits since 2015/16

### 1.10.3 Health, Safety & Quality

This refers to the School Health and Safety Service Level Agreements and an overall buy-in by maintained schools and academies. For this year 558 schools have bought into the Service with buy in now standing at 88.9% with 29 of these being Academies. This is against an overall target of 75% which ensures funding of the service at an appropriate level for service delivery and the trends from previous years are as outlined below:

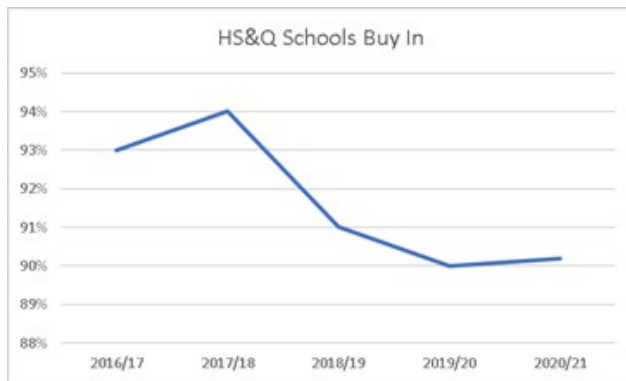


Fig 4 shows the percentage buy-in for School Health and Safety Service Level Agreements since 2016/17

### 1.11 Trading Standards and Scientific Services

Trading standards submit returns and plans on a regular basis to demonstrate compliance with legislation. They demonstrate that we are enforcing relevant legislation, taking appropriate action to ensure compliance and are including in our plans, actions and activities which are expected under codes of practice or adherence to good practice. All targets were met in 2021/22.

The KPI 'estimate of consumer detriment saved or prevented for Lancashire consumers' is a developing measure and reflects the level of detriment saved for consumers in Lancashire as a result of reactive and proactive interventions by our Trading Standards Service. It includes an estimation of money saved by consumers as a result of avoiding future scams. While the amount being high is to be taken as a positive figure, it can also be affected by increases in the number of rogue practices detected, which the service then helps consumers avoid. It does however provide an estimate of how much people have been saved as a result of the interventions and actions by the service. It should also be noted that an increased volume of Covid related complaints impacted on the 2020/21 figure (£4,363,800) before falling back down to the lower value (£3,730,798) for 2021/22 year reflecting a corresponding lower level of complaints.

Scientific Services undertakes important testing and analytical work for various organisations and Services. All external services are charged for and a survey of clients is now undertaken on an annual rather than bi-annual basis, with the gap between the current and previous survey being affected by the pandemic. The two most recent survey results show consistent and improving satisfaction.

### 1.12 Highways carriageway safety defects.

The targets for defect repairs have been reviewed and are now all consistent at 90%. In Q1 2022/23, all but two KPIs show an improvement from last year and all but one is above our set targets. When taken in the context of the continued high number of defects being reported, with the total number of 16,690, which shows a 44% increase since 2019 pre-pandemic reports, this is a really positive outcome.

Although 22 out of 27 defects were fixed on target, the overall missed target on the 4hr KPI is of some concern. On investigation, it has revealed that they either haven't

been reported correctly, haven't been recorded as complete in a timely manner or have missed the target. The teams have been reminded as to the nature of these defects and the importance of effective communication and action. We will continue to monitor this to ensure improvements are being achieved.

### **1.13 Street lighting fault repair.**

Due to lighter nights, Q1 is a period where we start to receive fewer street lighting reports. The team has performed well with 100% of non-traffic management light repairs being fixed on time (compared to 97% in the same period last year). 97% of repairs requiring traffic management were fixed compared to 100% in the same quarter last year, which reflects the difficulty in sourcing materials as a result of global supply issues. Despite these issues, performance has remained above target. To mitigate against these supply issues, we are working closely with our suppliers to understand their stock levels, although, it is still expected that the situation will remain difficult until the supply chains stabilise.

### **1.14 Percentage of Highways safety inspections on time**

Highway defect inspections are undertaken at a variety of frequencies depending on the nature of the road, with high traffic pedestrian areas inspected more frequently (monthly) than remote rural lanes (annual inspections). Quarterly inspections account for about a quarter of the inspection regime. Many of the counties key routes are covered by the quarterly inspection regime and the team have performed well in exceeding the KPI performance target.

### **1.15 Percentage of NoWcards processed within timescale (all types)**

All performance indicators for the processing of NoWcards and for the transportation of children to school (see below) are on-target and there are no indications that performance is likely to deteriorate.

### **1.16 Percentage of times that a child with SEND is successful transported to school**

The service is operating on target and performing well.

### **1.17 Customer Access Services**

The current performance of calls presented to the Customer Access Service (CAS) answered is good except for the Adult Social Care service (ASC) which is as result of vacancies being held in line with reductions to budget. Performance has also been affected by general recruitment and retention difficulties. The service is working with ASC, as part of the Living Better Lives programme and will adapt the delivery model as required to secure better resolution rates at the first point of contact. This expected to come into effect in the next financial year. The current performance of customer satisfaction is good however we have ambitions to make this indicator more meaningful and review work is underway.

## **2 Protecting our environment**

This section reports on the work being undertaken to protect our environment, both by providing services to Lancashire's citizens and by improving the environment footprint of the council's services.

### **2.1 Recycling**

The amount of recycling collected in the first two months of the year is slightly down by 1,700 tonnes compared to the same period in 2021/22. Doorstep collected residual waste also dropped by 3,500 tonnes over this period. This is in the context of total annual arisings of circa 100,000 tonnes of collected recycling and 300,000 tonnes of collected residual waste. Generally, waste arisings went up during the pandemic and are now falling. The overall recycling rate as a percentage of waste has however remained consistent.

Thornton and Farington Waste Recovery Parks are on target to treat in the region of 175,000 tonnes of residual waste, converting a large proportion into Refuse Derived Fuel (RDF), which is used to create electricity or in the cement industry. On the 1<sup>st</sup> June 2022 a new contract commenced increasing RDF output from Thornton from 65,000 tonnes to 75,000 tonnes per year, securing an outlet for this waste stream for the next 3 years. The Thornton facility also employs a 'mass loss' process which, in effect, 'composts' the residual waste, reducing its volume by around 20,000 tonnes per annum. Through RDF production and mass loss the Thornton and Farington facilities divert over 95% of the residual waste they process away from landfill.

Farington Waste Recovery Park houses the council's Materials Recovery Facility (MRF) which separates out the collected co-mingled recycling. The MRF continues to operate at full capacity, processing circa 53,000 tonnes of recycling per annum, with surplus tonnage being sent to third party MRFs.

Recycling rates at Household Waste Recycling Centres fell as a result of the pandemic. The recycling rate for 2021/22 was 57.3% compared to 61.1% in 2019/20. The quarterly recycling rate reported for Q1 is 58%.

The reduction in performance was largely because staff were not able to engage with the public or handle waste items during the pandemic. Earlier this year site supervisors were given targets for the improvement of recycling performance and a number of measures put in place to support this. The service expects that improvements will be seen as staff are able to engage visitors more proactively again.

### **2.2 Staff Mileage**

A performance indicator is being worked on to monitor the rate of staff mileage claims per full time equivalent employee and will be included in the Q2 2022/23 report. The aim being to reduce the need to travel wherever possible.

### **3. Supporting Economic Growth**

This section reports on the council's activities to support new businesses, including the development of infrastructure and, recognising the importance of knowledge and skills development, educational attainment.

#### **3.1 Supporting new businesses and business growth**

##### **3.1.1 Rosebud**

This quarter saw a positive upturn in activity resulting in 5 investments totalling £502,000 and supported by a robust pipeline of potential investments valued at £1,990,000 across 19 prospective companies. Uncertainties cloud the market with a variety of factors affecting business mood and growth plans – namely; surge in fuel prices, cost of energy, rise in raw material costs, supply chain issues, increasing inflation coupled with rising interest rates and a reluctance from banks to lend with a cautious and risk averse approach being adopted. This has created demand in the alternative lending market for products such as Rosebud with enquiries rising dramatically however, we need to approach with a level of caution particularly at a time when businesses are highly geared with stretched balance sheets leaving little room for failure.

##### **3.1.2 Boost ERDF Support**

The business support services provided by Boost now have funding committed until September 2023, but the new and re-commissioned delivery partners that we work with (new programme started in Jan 2022) have struggled to deliver the number of business-starts and business support interventions that we had forecast. The under-performance reflects a continued reluctance on the part of businesses to make time away from the core business to engage in business improvement activity, but also from the lag between the interaction with businesses in the new programme resulting in reportable jobs and growth. We would though have expected to see some uplift in new business start support as the pandemic has prompted a trend towards career change. The Business Growth Service continues to closely manage the performance of its contractors, is supporting the delivery of their improvement plans through enhanced marketing activity and is looking at options longer-term to amend services as European funding and delivery conditions end in the Summer of 2023.

##### **3.1.3 Strategic Economic Development**

A KPI is being developed that will be an overview of performance delivering major strategic economic development projects that the county council is pursuing.

## **3.2 Education and skills**

### **3.2.1 Educational attainment**

Educational out-turn figures are not updated in this quarter. Targets will be set once 2021-22 attainment figures are published.

### **3.2.2 16/17-year-olds in Employment Education or Training (EET).**

Previously, the 3-month average for all young people and for young people with Special Educational Needs or Disabilities (SEND) in employment, education or training have both achieved their targets. The service has proposed more ambitious targets against these indicators for the 2022/23 period of 94.9% for all young people (to equal the latest national rate) and 91.2% for all young people with a SEND (0.1% above the previous year performance).

At 94.7%, the end of Q1 2022/23 position for all young people in EET is 0.4% below Q1 2021/22 position. The performance is affected by the notable increase in the size of the cohort – there are now almost 1,200 more young people in the cohort. At 90.5%, the end of Q1 2022/23 position for young people with SEND in EET is 0.6% above Q1 2021/22 position.

Whilst the Q1 position has dropped slightly from last year, our overall performance has improved and this, in the main, has been sustained. This reflects both the hard work of the team and also the sector in terms of supporting young people to make positive and sustained transitions to post 16 education, employment or training. Over summer, as part of the Covid-19 recovery plan, the Careers and Enterprise Company transition support funded project will take place which takes the form of commissioned and targeted support for Year 11 leavers who have no post 16 intended destination. The Authority did a similar piece of work last summer using some Covid funding and the outcomes were very positive. An analysis of the commissioned support showed that 982 young people were contacted and at the end of January 2022, 88.2% were in a positive destination.

### **3.2.3 Care leavers aged 18-20 in Employment, Education or Training (EET)**

The service has proposed looking at the 18-20 year old cohort with a 55% target at the end of 2022/23. At the end of June 2022, 301 of the 620 care leavers aged 18-20 were in Employment, Education or Training, this equates to 49%. This is lower than the same period the previous year 51% (June 2021). EET figures often drop at the end of the academic year when college courses and training come to an end and young people are deciding what they want to do next. The service work alongside the Employment Support Team to ensure they know the young people's intended destination and support them to reach their goals. EET remains a priority focus of practice and is monitored through weekly data, local performance meetings and audits.

## **4. Caring for the vulnerable**

This section includes performance about our support to children, young people and their families, and adult social care services and public health.

## **4.1 Children and families**

### **4.1.1 Children and Families Wellbeing Service.**

Previously, the children and young people who received targeted early help support from Children and Families Wellbeing service which successfully met their identified needs achieved its target of 66%. The service has proposed a more ambitious target against this indicator for the 2022/23 period of 70%.

The Q1 2022/23 outturn was 61%, this is a decrease on the 2021/22 out turn (69.5%) and Q1 2021/22 (70%). The decrease in the needs met outcome in Q1 is in part due to the impact of an increase in other primary closure reasons. There has been an increase in the 'step up' category due to identification of escalating risks requiring a statutory response and an increase in the disengagement categories. These both reflect the repositioned and higher thresholds of support that Children and Families Wellbeing Service provide following the transformation. Workshops have recently taken place across the service to improve practice around obtaining and maintaining engagement with families and there has also been action around simplifying options to minimise incorrect categorisation of closure reasons. There is a focus in developing staff to work in a more strength-based way to recognise positive outcomes alongside needs being met and we are embedding these through practice development workshops.

### **4.1.2 Lancashire Looked after children actually living in Lancashire.**

This indicator was below target (80%) at the end of Q1 2022/23 (78.4%). Due to improved reporting mechanisms, some looked after children placed close to the Lancashire boundary are now classed as residing outside the boundary. Children's social care teams, including fostering and residential teams have worked with commissioning colleagues and with independent fostering and residential providers to ensure children and young people can remain within their communities, where possible, enabling them to continue to access their educational establishments and be close to family and friends where it is safe to do so.

### **4.1.3 Lancashire Starting to be Looked After Children**

Historic data published by DfE suggests that up until 2019/20, the rate of children starting to be looked after in Lancashire was higher than National and Statistical Neighbours rates. However, during 2020/21, with 537 children starting to become looked after, the Lancashire rate (21.0 per 10,000 population aged 0-17) was lower than the National (24.0) Regional (28.0) and Statistical Neighbours (26.7) rates. Lancashire was positioned in National Quartile B against this indicator during this period as opposed to Quartile C historically, demonstrating our improved performance.

The latest internal data suggests the 2021/22 figure for Lancashire is 605 children starting to be looked after, this equates to a rate of 23.9 per 10,000 population aged 0-17. This demonstrates an increase on the previous year's numbers (537) prompting further investigation and increased monitoring. The comparator data for 2021/22 will be published November 2022.

## **4.2 Adult Social Care**

### **4.2.1 Number of new requests for support received per 100,000 people aged 18+**

We have seen a reduction in the number of people coming forward for formal support. In Q4 2021/22 we saw 760 people coming forward for support per 100,000 population aged 18+, in Q1 2022/23 this fell to 715 people per 100k population. Work is underway to look at alternative ways of supporting people thereby enabling us to manage the demand for our formal support services. There will be a focus on supporting people to identify early intervention and prevention focussed services which are available to support them in their local communities either as an alternative or as a complimentary support system to formal services. In addition, improvements are planned in relation to our online access to information and self-serve options to provide people with the information they need to resolve their own inquiries. We are increasing our support to people in exploring alternative technology options as well as low-level equipment to support, promote and maintain independence.

### **4.2.2 Number of people waiting for an Adult Social Care assessment**

The number of people waiting for an assessment has grown over the period of the Covid-19 pandemic with over 1600 people waiting at the end of March 2022. Targeted work is underway to reduce waiting lists across Adult Social Care. This provision is a separate (internal), focussed team who will work to reduce waiting times and numbers and this work is currently making good progress, with under 1200 waiting for an assessment at the end of June 2022. Performance and progress are being measured and reported weekly. In addition, the progress being made in reducing the need for formal services will support the continued reduction and risk of forming further waiting lists which are above appropriate and safe levels.

### **4.2.3 Total number of people in receipt of long-term support plus trend over time per 100,000 population aged 18+**

There has been a very slight increase in the rate of people receiving long term support from 1775.60 in Q4 to 1782.3 in Q1 (per 100k population aged 18+). The aim is to reduce the number of people needing long term formal support by 5% which equates to approximately 850 people. The slight increase could relate to the overall increase in demand and people awaiting a Social Care Assessment which is being addressed via a number of strategies and may in the short-term impact on the total number of people receiving a long-term service. The total number of people in receipt of long term care was 17,361 at Q1, against 17,296 at Q4 2021/22

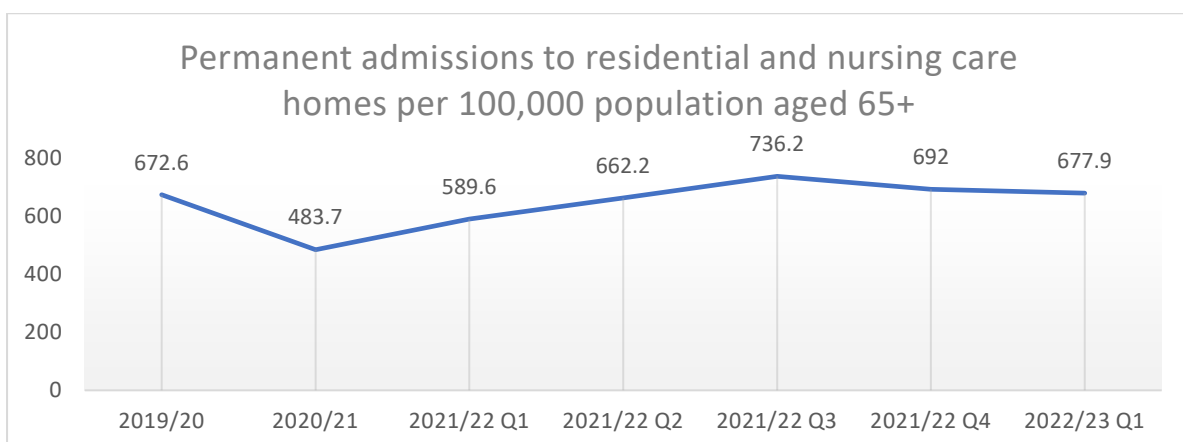
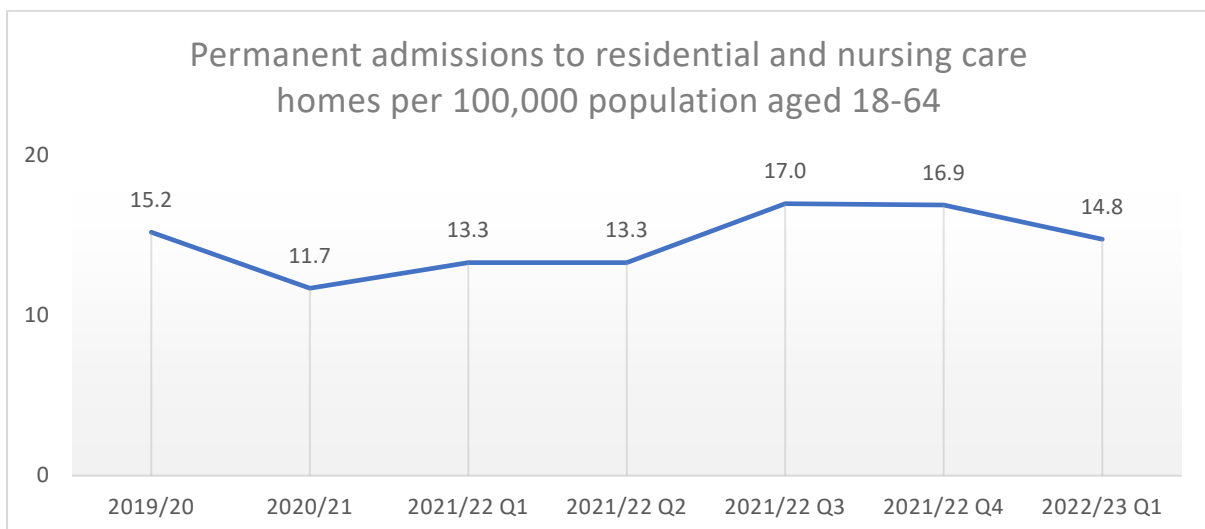
There are a number of initiatives in place and being rolled out to address this with the major Living Better Lives in Lancashire practice transformation programme expected to have the biggest impact, along with the work being undertaken at the front door i.e. when people first approach us for support, and in working more collaboratively with public health and our partners to address health and social care needs, to deliver the Adult Social Care vision.



#### 4.2.4 Permanent admissions to residential and nursing care homes per 100,000 population aged 18+ and aged 65+ during the year

There has been a very slight reduction in the number of people being admitted to permanent residential or nursing care in the year to 30<sup>th</sup> June 2022 compared to the year to 31<sup>st</sup> March 2022. As shown in the graphs below, the pattern of admissions was heavily influenced by the pandemic. It remains our priority to hold performance to our comparator levels which requires close involvement of NHS to avoid unnecessary step downs into care from hospital. The Adult Social Care vision and key principle of supporting people to remain independent at home, or as close to home as possible and the fact we are an outlier in comparison to the regional Adult Social Care Outcomes Framework (ASCOF) benchmark, as well as this being an identified savings area, means this will be a key focus going forwards.

This was previously identified as a service challenge prior to the Covid pandemic and there will be a review and update of the previous plan. There are a range of initiatives to consider including areas of practice and commissioning activity required, and this will link closely to the Living Better Lives in Lancashire programme.



*Figs 5 and 6: show the number of permanent admissions in a rolling year, i.e. 2022/23 Q1 reports the number of permanent admissions from 1<sup>st</sup> July 2021 to 30<sup>th</sup> June 2022.*

#### **4.2.5 Long term support average cost per person per week vs. budget**

This is currently on track and remains consistent, however we are reviewing benchmarking information to satisfy ourselves that the target is appropriate.

#### **4.2.6 Adult social care Quality of Life survey**

The annual survey of people receiving services from adult social care in 21/22 resulted in a quality of life score of 19.3, which is in line with the latest nationally reported figures (from before the pandemic) and provides reasonable assurance that our services are supporting people to maintain their quality of life.

#### **4.2.7 The proportion of people aged 65 and over who were still at home 91 days after discharge from hospital into reablement/rehabilitation services**

Significant work has been undertaken to improve the operational flow of the Reablement Service and improve quality of provision to people to achieve better outcomes and promote their independence. A review of the service continues to both inform future operational delivery and inform the re-procurement of the service which is due in 2022/23. An increase in the proportion of people who were still at home 91 days after discharge from hospital and into reablement/rehab services can be seen since Q4 2021/22 (87.8%) to Q1 2022/23 (92.91%). For Q1 2022/23 we are above the Adult Social Care Outcomes Framework (ASCOF) England average score for 20/21 by some way, at 92.91%, compared to 79.1%. Therefore, our aim is to maintain these levels we have achieved, at a minimum.

#### **4.2.8 Proportion of adults with learning disabilities who live in their own home**

There has been an 11-percentage point increase in the proportion of people with learning disabilities living in their own home since Q4 2021/22 (82.41%) to 93.21% in Q1 2022/23, and we will look to maintain at least 90% for our target going forward.

Providers of supported accommodation have been producing development plans to support the strategic objectives of the service which are to support people with learning disabilities in their home. A savings target of £2.6m has been set, to be delivered over the next two years. The 'Housing with Care and Support' Strategy 2018-25 has been published and we are currently seeking to strengthen our approach to working with providers, developers and partners including district councils to encourage and enable investment in new types of innovative and flexible housing.

#### **4.2.9 Proportion of registered carers receiving formal support**

Almost 92% of registered carers received formal support from the county council in the form of direct payments in Q1. This compares favourably to the national average of 75%.

#### **4.2.10 Percentage of Care Quality Commission registered locations rated Good or Outstanding**

There has been a welcome increase in the percentage of services rated good or outstanding with 81.9% of residential care (compared to 80.6% in Q4) and 96.2% compared to 96% in Q4), meeting our previous target of 85% overall. However, the

target has now been raised to 90% (with this indicator rated as requiring improvement) as there is a continuous programme of improvement. Post pandemic, it is still a challenging time for care providers with continuing pressures in relation to workforce and added implications of cost rises in fuel and utility services. This is being mitigated where possible with Quality and Improvement planning processes along with supportive workforce programs across the health and social care network.

For residential homes that are Lancashire County Council maintained, we achieved 83.33% for Q1 compared to 75% in Q4. For Lancashire County Council maintained community services, we achieved 100% in Q1 2022/23 compared to 90% the previous quarter.

#### **4.2.11 Safeguarding Conversion Rate**

It is positive that the need for statutory safeguarding enquiries has reduced in the last two quarters, from 41% in Q4 2021/22 to 39.4% in Q1 2022/23. Whilst more data is needed to be confident of a trend, we are optimistic that the implementation of a redesigned safeguarding service (implementation over the last 12 months and completed in April 22) is delivering an improved service to adults who are suffering from or at risk of abuse.

#### **4.2.12 Size of Care Market Workforce.**

The development of a dataset to capture data for this metric is being investigated.

#### **4.2.13 Number of People waiting for a package of care**

Data capture processes are being developed by the Care Navigation team to enable robust reporting of this performance indicator going forward.

### **4.3 Domestic Abuse**

LCC plays a crucial role in commissioning a range of services providing specialist support for domestic abuse victims, adults and children and challenging perpetrating behaviours.

#### **4.3.1 Provision of support in safe accommodation**

This is now a statutory duty on all Local Authorities following the Domestic Abuse Act 2021. The demand for safe accommodation for victims of domestic abuse and their children who need immediate safety from harm/risk of death is much higher than the available accommodation for victims. Data shows that nationally approximately only 25-30% of people applying for a place in a refuge are accommodated. The Safe Accommodation service commissioned by Lancashire County Council provides specialist support to domestic abuse victims, including those with complex needs and victims with no recourse to public funds, across the county in 11 of the districts.

Improvements have been made recently, with quarter 4 data 2021/22 showing a reduction in the number of referrals for safe accommodation meaning 46% of families were able to be accommodated. This is supported by the new outreach service supporting victims to remain safe in their own homes as well as other Local Authorities' responses to the new statutory duty reducing the demand from out-of-area requests.

### **4.3.2 The perpetrator programme**

This is a voluntary trauma-informed course designed to help perpetrators of abuse address their harmful behaviours, understand the impact on their families, and prevent perpetuation of the abuse. Referrals to the Domestic Abuse perpetrator programme has been decreasing over the last few years, with the service only achieving 77% in 2020/21 and 73% in 2021/22 of the performance target for the last 2 years. The main cause of a reduction in referrals has been since the introduction of the Family Safeguarding model in Lancashire County Council, as 60-70% of the programme's referrals were received from Children's Social Care. These perpetrators now receive a perpetrator programme from within the Lancashire Family Safeguarding service. This performance is being addressed by raising awareness of the programme for all perpetrators.

## **4.4 Substance Misuse and Alcohol**

### **4.4.1 Successful Completion and Re-presentation Rates**

Successful completion of alcohol treatment has been reducing nationally although Lancashire is performing significantly better than the England average (Lancashire 48.1%, England 36.6%) and improved performance last quarter). whilst in contrast successful drug treatment completion (opiate) in Lancashire declined slightly and is similar to the England average (Lancashire 5.7%, England 5.0%), although this is in the context of a higher-than-average number of Lancashire drug users accessing support.

Substance dependence is a chronic relapsing condition and over the last 10 years we have seen the residents coming into treatment have become increasingly complex cases with multiple issues. This has had a negative impact on recovery rates across the whole country and to a lesser extent in Lancashire. It is reassuring to note that our providers have been able to outperform the national average in terms of successful completions and re-presentations. We continue to work with our providers to maintain the levels of support and deliver effective treatment for the people of Lancashire.

### **4.4.2 Residents Accessing Treatment**

It is estimated that the number of people with alcohol dependence in Lancashire is circa 14,364, with 84.3% not accessing treatment, compared to 80.5% nationally (at the end of quarter 4 2021-22). In terms of opiate use the corresponding unmet need in Lancashire is estimated to be 39.9%, compared with a figure of 47.1% nationally.

Planned investment in the treatment system will allow us to more widely engage with alcohol users, providing more community-based treatment. The government has implemented a three-year investment programme from 2022 – 2025, including £2.6 million for Lancashire in 2022/23, which increases in future years. This drives a requirement for the Lancashire treatment system to increase the numbers in treatment by 20% in 2024-25 to 7200. With our providers we will do this by;

- reducing workers caseloads

- provide targeted work to engage primary and secondary health services particularly focused on increasing the number of alcohol users into treatment
- offer a broader range of treatment options particularly for opiate users
- deliver outreach programmes aimed specifically at the criminal justice system improving the pathways from Prison into community treatment
- ensure that people are supported into education and employment to protect and develop their recovery

Lancashire has also received additional monies to develop and pilot innovative housing solutions for substance users in the community, preventing homelessness and promoting recovery