

Report to ASC & Health Scrutiny Board

Corporate Performance Report 2024/25 for Q1 Corporate Performance Report (1st April to 30th June 2024)

Portfolio Holder (CPR): Cllr Arooj Shah, Cabinet Member for Building a Better Oldham

Officer Contact (CPR): Steve Hughes, Assistant Director Strategy & Performance

Report Author (CPR): Gail M. Stott, Performance Improvement Lead, Strategy & Performance

CPR collated by: Performance Improvement Team, Strategy & Performance

Contact: StrategyandPerformance@oldham.gov.uk

Date: 8th October 2024

Reason for decision

Scrutiny of corporate performance aims to provide assurance that:

- our corporate priorities are aligned to the needs of our residents (resident focus)
- our services are good, or are on track to good
- any services that are not on track, or have identified risks, are being supported or challenged to rectify this
- any demand indicators or resource pressures are being noted and service provision is being re-assessed accordingly
- the organisation has robust performance management processes in place.

Summary

The purpose of this report is to provide an overview of corporate performance against agreed service business plan measures for the 2024/25 Q1 period (April – June).

The current reporting format has been developed with the intent of bringing more mature performance reporting online once the ongoing Business Insight, Performance and Strategy Programme (BIPS) Programme and Digital Services Foundation (DSF) Project have been completed.

Historically, a full CPR has gone to the Governance, Strategy and Resources (GSR) Scrutiny Board; however, now there are four Scrutiny Boards, it is deemed more appropriate that the constituent parts go to the appropriate meeting to enable more indepth analysis and discussion of the CPR alongside other associated reports.

Recommendations

Scrutiny Board members are asked to:

- note the progress in implementing the business plan objectives
- celebrate areas of consistent good performance
- note the comments on progress
- consider areas for review (good or poor) that could produce learning for the organisation
- note the interconnection of these actions with ongoing activities within the Directorate or Portfolio and corporate key projects such as our <u>Cost of Living Response</u> and <u>Don't</u> <u>Trash Oldham</u>
- consider benchmarking reports from open data sources
- review performance in the context of our borough and the demands on our services.

Corporate Performance Report 2024/25 Quarter Q1

1. Background

Business Planning

1.1 The <u>Corporate Plan</u> 2022/27 was approved by Cabinet in September 2022; service and business plans are closely aligned to the priorities set out in this Plan.

1.2 Revised guidance for the development of directorate or service level business plans was issued for 2024/25 in January 2024.

1.3 Directorate or service level business plans include a range of performance metrics, both 'business as usual' and transformational, aimed at achieving the aspirations of the Corporate Plan and putting our Residents First.

1.4 It is noted that business plans can be influenced by both internal and external factors, including increased demand, available funding or resources, changes in legislation or policies, and so are kept under review.

1.5 It is important that performance is viewed in the context of our borough; our published <u>district profiles</u> and the <u>Oldham JSNA</u> provide more detail on our borough alongside open data sources, such as the <u>the Health Foundation Local Authority Dashboard</u>. These statistics and projections need to be considered when reviewing current and projected service levels and demands.

Performance Reporting Systems

1.6 The fundamental foundation of a Performance Management Framework is a performance management system that generates data that is utilised at all levels for decision-making; together with a transparent and efficient performance reporting cycle supported by good governance processes.

1.7 As part of the Council's ongoing management processes, each service has regular opportunities, via forums such as their Directorate Management Team (DMT), Performance Area Meeting (PAM) or Portfolio meeting, to review their performance at a service and directorate level. It is in these forums that services can:

- raise issues or concerns
- consider performance more holistically in the wider context of the service
- reflect on changes in demands or resources
- agree actions to improve or maintain performance levels.

1.8 Data scrutinised in these forums will be more detailed and focused on the particular service or function. It is from these discussions that the comments made in the CPR by Heads of Service and Portfolio Holders are derived.

1.9 The intent of the CPR is to enable key (high-level) data to be presented to provide reassurance, whilst also allowing space for discussion. Historically, a full CPR – covering all service areas - has gone to the Governance, Strategy and Resources (GSR) Scrutiny Board. From 2024/25 it has been agreed that it is more appropriate for the constituent parts go to the appropriate scrutiny meeting:

- **People CPR** split between Children & Young People Scrutiny Board **and** Adult Social Care & Health Scrutiny Board
- **Place CPR** Place, Economic Growth and Environment Scrutiny Board
- Resources CPR Governance, Strategy and Resources Scrutiny Board

1.10 This will support more in-depth analysis and discussion of the CPR alongside other relevant reports, supported by relevant senior officers from each area. The Performance Improvement Team will continue to offer support and capture feedback where required.

1.11 The Corporate Performance Reports (CPR) are currently presented in PowerPoint for clarity and in keeping with previous feedback; they include:

- a summary for each service
- service successes
- key metrics
- areas for development
- capacity for Head of Service / Director's comments
- opportunity for Portfolio holder comments
- a glossary / list of acronyms and colour key (if required).

1.12 The current reporting format (agreed 5th October 2023 GSR Scrutiny Board) was developed as a solution to the decommissioning of CorVu but, with a view to bringing more mature performance reporting online once the Business Insight, Performance and Strategy Programme (BIPS) Programme and Digital Services Foundation (DSF) Project are fully completed. These projects remain ongoing into 2024/25.

Benchmarking

1.13 In addition to reviewing in-house reporting, Scrutiny Boards may wish to consider performance reports from open data sources. This will enable them to benchmark Oldham against other authorities. Much of this data is historical and on its own does not present a complete picture of the Council's performance however, these reports can be used to generate questions or key lines of enquiry.

1.14 <u>LG Inform</u> provides a number of ready built reports that use published data; they provide useful trend or comparator information.

1.15 The Office for Local Government (Oflog) <u>Local Authority Data Explorer</u> was launched with the primary purpose of '*providing a transparent and authoritative source of information about the performance of local government*' - current reporting is in relation to:

Adults Social Care

<u>Planning</u>

Corporate & finance

- <u>Roads</u>
- Waste management

1.16 Greater Manchester Combined Authority (GMCA) produces business intelligence to inform all Greater Manchester priorities. This includes the <u>Greater Manchester Strategy</u> <u>Performance Dashboards</u> - six-monthly dashboards that assesses performance against the ten priority targets of the Greater Manchester Strategy.

Please contact <u>StrategyandPerformance@oldham.gov.uk</u> if you require any assistance in accessing these reports.

Performance Reporting – ongoing development

1.17 As part of the 2024/25 business planning cycle, data owners (Heads of Service) are reviewing their metrics and Key Performance Indicators (KPIs) with support from the Performance Improvement Team. The aim is to ensure services have the right measures that demonstrate the right outcome or impact. They also need to ensure they correlate to Oflog measures and any other statutory returns where possible.

1.18 Our ongoing review has determined that a standardised 'one size fits all' approach to performance monitoring is not feasible as the performance data that services produce differs. Some services produce data that is quantitative and readily assessed against milestones. However, in order for these to have the maximum relevance they need to be set in an appropriate timeframe – for example education services data needs to be reported termly as opposed to in financial year quarters. Similarly, some strategic programmes, such as public health initiatives, will only show meaningful results over a number of years.

• Any variance in timeframe or other aspects of the KPI will be highlighted in reporting.

1.19 Many core services provide a supporting role to others, so performance within their functions cannot be measured quantitively and success is identified by 'outcomes' or the performance of the services they support. These services are developing business plans outlining their overarching strategies but with performance measures that are outcome, milestone or project based. To avoid repetitive or inaccurate reporting for these services, performance reporting may only occur at the beginning and the close of the year when major milestones can be effectively and accurately reflected on.

1.20 Member and officers are recommended to avail themselves of the resources provided by the Local Government Association; these include:

- **performance management guide for councillors** an overview of what performance management is and the role of councillors in the performance management of the council
- **performance management e-learning module for councillors** key points from the guide are available in a convenient and free to access module which should take around 30 minutes to complete
- <u>performance management guide for local authority officers</u> provides a helpful overview of performance management in local government for officers.

Appendix:

1. People CPR - Adult Social Care; Public Health

Report to ASC & Health Scrutiny Board

Corporate Performance Report 2024/25 for Quarter 1: 1st April to 30th June 2024

Portfolio Holder (CPR): Cllr Arooj Shah, Cabinet Member for Building a Better Oldham

Contact Officer (CPR): Steve Hughes, Assistant Director Strategy & Performance

Report date: 8th October 2024

CPR collated by: Performance Improvement Team <u>StrategyandPerformance@oldham.gov.uk</u>



People Key Performance Indicators

RED	KPIs underperforming by more than 5%	
AMBER	KPIs underperforming by less than 5%	
GREEN	KPIs meeting or outperforming target	
TEAL	KPIs with no targets set	

Adult Social Care					
2	0	2	4		
			_		
Public Health					
4	0	1	0		

Adult Social Care Performance Measures & Business Plan Report

Portfolio Holder: Cllr Barbara Brownridge, Cabinet Member for Adults, Health & Wellbeing

Officer Contact: Jayne Ratcliffe, Director of ASC

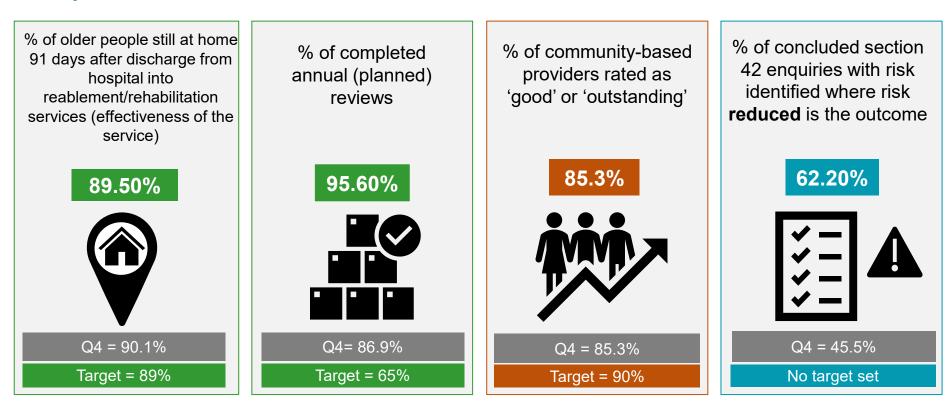
Service Summary:

Adult Social Care in Oldham – "Supporting you to be independent, healthy, safe and well".

Adult Social Care, working with the rest of the Council, the voluntary sector, local communities and NHS partners will encourage and enable you, your family and community to stay healthy, safe and well. The aim is to enable Oldham residents to live as independently as possible. Where residents need support, we will help to identify the best solutions. If people need help but are not able to arrange their own care, the support we identify with residents will help you to live the best life they can, with the help they have around them.



Adults Social Care Key Metrics



Adults Social Care Key Metrics

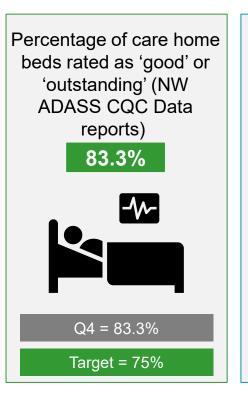
Number of individuals in a permanent nursing or residential placement per ten thousand population 65 years +



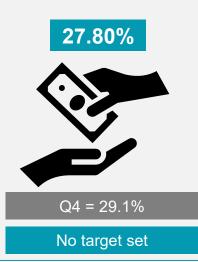
Target = 200

Percentage learning disability service users in settled accommodation





Percentage service users receiving direct payments



Adults Social Care

Successes

% learning disability service users in settled accommodation	An improved process for void management led by commissioning to ensure clarity on the vacancies in commissioned services thus providing assurance in the utilisation of commissioned frameworks as the first option as opposed to out of area and/or non-commissioned providers.
% completed annual (planned) reviews	A much-improved position than in recent months/years. The recovery plan in relation to annual reviews is positive. The REED support is expected to continue for a further 3 months to sustain & improve our position further.
% of concluded section 42 enquiries with risk identified where risk reduced is the outcome	This is a positive position, demonstrating where risk are not able to be removed, the work undertaken by the service are reducing the risk of harm.
% service users receiving direct payments	Focussed work is being undertaken with the direct payment steering group & financial recovery group to review all current direct payments in line with SBA.

Adults Social Care Areas for Development

Number of individuals in a permanent nursing or residential placement	We continue to work to ensure we meet the needs of residents who are experiencing rapid discharge from hospital due to hospital trusts pressures. This has meant that individuals are not healthy enough to be reenabled. We are working closely with enable to ensure the in-reach offer to individuals in residential, nursing care & short stay care is utilised.
% of older people still at home 91 days after discharge from hospital into reablement/rehabilitati on services	This is a positive position and aligns to our TOM outcomes and SBA outcomes. However, this links to the increased activity in homecare being provided, which is impacting the budget position.
Percentage of care home beds rated as 'good' or 'outstanding'	The work of the CMM has provided support to the providers in embedding improvements with the aim of these being sustained. However, it is worth noting that we have one provider that has unexpectedly advised us they are closing, which will result in this percentage reducing in Q2.

Adults Social Care Comments

Q4: Jayne Ratcliffe (Director of ASC)

The service has made significant progress with the introduction and launch of the Adult Social Care strategy. This provides clear direction in relation to embedding new ways of working. The service is committed to promoting the independence of Oldham residents and reducing their reliance on statutory support services.

Q1: Jayne Ratcliffe (Director of ASC)

The directorate is continuing to strive to achieve strategic and operational improvements, in accordance with the Adult Social Care (ASC) strategy. The delivery of the changes are being undertaken at pace, to achieve positive outcomes for Oldham residents. Significant work has been completed to review commissioning outcomes, aligned to operational requirements ensuring the service continues to strengthen its local offer.

Signed Off: 11/07/24

Adults Social Care Portfolio Holder Comments

Q4: Cllr Barbara Brownridge

I am pleased that the new model of working has been embraced fully by the workforce and is delivering real benefits. The ongoing fragility of the care home sector is a serious concern, but the department is keeping a close eye on it and has a strategy to deal with any issues that might arise.

Q1: Cllr Barbara Brownridge

I am delighted that in particular our new initial information point is able to give people the right advice to allow them to remain healthy and independent but the service is facing significant pressure as a result of the increased complexity of the residents who do require formal support.

Signed Off: 25/07/24

Public Health Performance Measures & Business Plan Report

Portfolio Holder: Cllr Barbara Brownridge, Cabinet Member for Adults, Health & Wellbeing

Officer Contact: Rebecca Fletcher, Director of Public Health

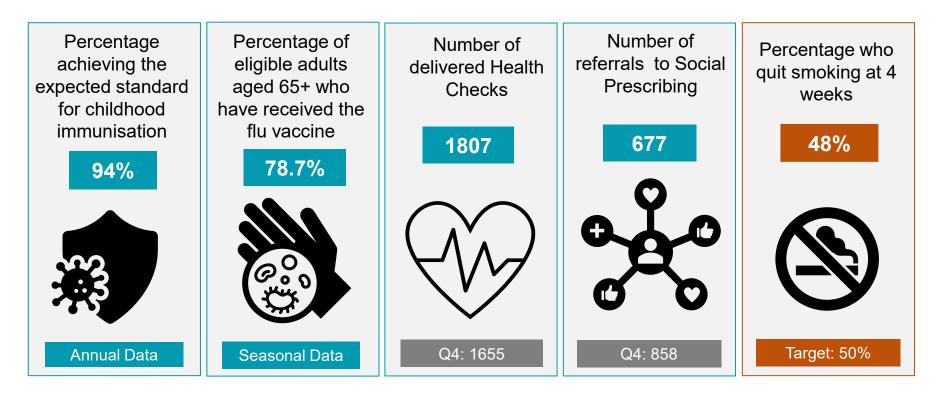
Service Summary:

Public Health are focused on helping people and communities in Oldham to improve their health and wellbeing, including the protection from threats to illness.

This service uses data and intelligence to meet statutory requirements, whilst championing the reduction of the health inequalities that we observe between Oldham and the England average; and within the borough between Oldham's most and least deprived wards.



Public Health Key Metrics



Public Health Successes

Percentage achieving the expected standard for childhood immunisation	Establishment of district networks to improve partnership working and awareness across systems. Targeted work in primary care (incl. call/recall) and communities (most recently, community events with Fatima Women's Association, at mosques, and engagement with key representatives from Community Champions groups).
Percentage of eligible adults aged 65+ who have received the flu vaccine	The flu season has now ended. Data from this season will be used to inform priorities and the approach for the coming season.
Number of delivered Health Checks	NHSHC specification revised to reflect requirement for increased quality and completeness.

Public Health Areas for Development



We are assessing the outcomes of intensive call/recall activity at a sample of practices and gathering data on successes and challenges relating to this to inform extensions of this work. We are linking Werneth practice activity to the community pharmacy to improve uptake here. Community work is also continuing, with improving engagement with a range of networks. Finally, 'Vax chat' training is being provided to key representatives, both individually and as a ToT model, across the borough.



As the adult smoking prevalence rates continue to fall, the people who continue to smoke are more entrenched and have higher levels of dependency so require more assertive outreach to engage in treatment and higher levels of intensive support to achieve and maintain a quit. The service continues to prioritise supporting those who are most at risk of tobacco related harm. The roll out of the Swap to Stop vape offer will help to support more people to achieve a 4WQ.

Public Health Comments

Q4: Rebecca Fletcher (Director of Public Health)

We continue to prioritise our response to the measles risk through working across the system this includes increasing MMR uptake but also ensuring that the system can respond to any positive cases. We have seen recent increases in the numbers accessing treatment through our drugs and alcohol service including in women, and opiate users. We have the highest uptake of Healthy Start Vouchers in GM which is a result of work by our integrated 0-19 service.

Q1: Rebecca Fletcher (Director of Public Health)

Work is continuing on improving vaccination rates in Oldham with a focus on working with our communities. NHS Health Checks are a key method to prevent cardiovascular disease in our residents. There is a programme of work to improve the quality of health checks to ensure that they are effective as possible. The reduction in our smoking quit rates is related to our focus on working with our most vulnerable, resistant and complex smokers. Work here is essential but quits are more challenging to achieve.

Signed Off: 15/07/24

Public Health Portfolio Holder Comments

Q4: Councillor Barbara Brownridge

I am delighted that we have made significant improvements to vaccine take up although more remains to be done. We are making progress across the board with health improvements but the continuing pressure on Council and NHS budgets remains a significant cause for concern.

Q1: Councillor Barbara Brownridge

Improvements in vaccine take up continue and I am sure that the development of family hubs will help in this. I also welcome the lung health monitoring that is currently in Oldham as this will identify potential lung disease early as well as providing detailed information to help people to quit smoking altogether

Signed Off: 25/07/24