

<b>Committee:</b>	<b>Dated:</b>
Health and Wellbeing Board	<b>14/06/2019</b>
<b>Subject:</b> Bi-Annual Performance Report	<b>Public</b>
<b>Report of:</b> Andrew Carter, Director of Community and Children's Services	<b>For Information</b>
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### **Summary**

This report presents the performance data for 2018/19 across a range of agreed key performance indicators. Appendix 1 contains the Health Outcome indicators, and during Q4 2018/19, three-quarters of the targets (75%) were met or exceeded.

### **Recommendations**

Members are asked to:

- Note the report.

### **Main Report**

#### **Background**

1. This is the performance report for 2018/19 for the key indicators being used to assess progress in delivering the Joint Health and Wellbeing Strategy (see appendix 1).

#### **Priority 1: Good Mental Health**

2. The number of those in agreement that library services have a positive impact on their family's health and wellbeing has been consistently high in 2018-19 (between 94% and 99%), exceeding our target for this indicator (86%).
3. During 2018-19, 22 safeguarding conversations were held, of which 15 discussed the outcomes that service users would like to achieve in line with the Making Safeguarding Personal approach to safeguarding. All reported that these expressed outcomes had been either fully or partially met.
4. The reported quality of life scores for adult social care users in 2018-19 averaged 19.3 out of 24, which is above the London average and an improvement of the score of 18.1 out of 24 in 2016-17 (the last available date

for which figures are available). For carers the score was 7.5, which is a little lower than in 2016-17 (when it was 7.7) but is above the London average.

## **Priority 2: Healthy Urban Environment**

5. The targets for number of construction starts (amber) and completions (red) of social homes have not been met in 2018-19, although there have been 66 starts. Significant progress has been made with the delivery of ten flats in Middlesex Streets and extensive consultation is taking place in Sydenham Hill for the delivery of 130+ new flats.
6. All City housing meets the 'decent home' standard and has had a fire risk assessment.
7. There has been a significant increase in the number of people deemed to be 'living on the streets' in the second half of 2018-19, rising from 34 in Q1 to 74 in Q4, which is significantly above the target of 'less than 46'. This increase has corresponded to a decrease in the numbers of rough sleepers in neighbouring boroughs, suggesting that often entrenched rough sleepers may be coming into the City from other parts of London.
8. Several factors affect the City's rough sleeping population:
  - Drug dependency is a barrier to some rough sleepers accessing No Second Night Out (NSNO) support.
  - The City has a comparatively high number of intermittent rough sleepers who are not eligible for NSNO.
  - There are capacity issues, as the hubs are often closed.

The Homelessness and Rough Sleeping Sub-Group of the CCS Grand Committee is closely monitoring developments and overseeing a programme of work to improve outcomes for rough sleepers.

## **Priority 3: Effective Health and Social care integration**

9. There were 305 delayed transfers of care (DTOCs) attributable to the NHS in 2018-19, significantly exceeding the annual target of 182. The bulk of the delays were for those awaiting assessment for continuing healthcare and/or awaiting a residential home placement. Where these are recorded as NHS delays, they are often affecting people who self-fund care. The City of London can assist in advising self-funders on how to look for care providers and can offer some interim support to reduce any delays in their transfer; but, if this is refused, then it is the responsibility of the NHS provider to ensure that the patient is moved into the community.

10. DTOCs attributed to the City of London's adult social care provision totalled 17 in 2018-19 against an annual target of 73.
11. Seventy per cent of new rough sleepers slept out just once, below the annual target of 76%. However, fewer new rough sleepers went on to join the 'living on the streets' cohort in Q4 compared to Q3.

#### **Priority 4: Children have the best start in life**

12. Performance for all Early Years Foundation Profile (EYFSP) pupils including those in private, voluntary and independent settings is 81.3% (n = 48). Performance for children at Sir John Cass is 77.4%, however, performance of City resident children attending Sir John Cass and Islington primary schools (19 pupils) are in line with target at 78.9%.
13. There has been a notable improvement of the take up of youth services for children and young people with SEND in 2018-19, from 3 in Q1 to 6 in Q4.

#### **Priority 5: Promoting healthy behaviours**

14. The percentage of people engaging in the City cessation programme who have successfully quit smoking is 59% (210/361). This exceeds the annual target of 50%; but the number of people starting smoking cessation – at 361 – is significantly below the annual target of 500.
15. The overall number of residents taking up an NHS health check in 2018-19 was 466, somewhat below the annual target of 529. The services has faced challenges with community engagement, and with a lack of available venues within the City. Corporation officers have met with the provider to review the action plan to identify how performance can be improved so future targets can be met.
16. The total number of participants in the exercise on referral programme who were still active 6 months after their initial assessment in 2018-19 was 12. The provider was issued with a poor performance notice in 2017/18 and this appears to have resulted in some improvements in recruitment to the programme.
17. Young people made a total of 6,526 visits to the Golden Lane Sport and Fitness Centre in 2018-19, which was 90% of the target figure of 7,282. It should be noted that this measure will include residents of other London Boroughs, and we are looking at how we can capture use by City residents in future.

## **Conclusion**

18. Members are asked to note the performance reported in Appendix 1.

## **Appendices**

- Appendix 1 – Health & Wellbeing Outcome Indicators

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