

Safer Policy & Performance Board Priority Based Report

Reporting Period: Quarter 1 – Period 1st April 2012 to 30th June 2012

1.0 Introduction

This report provides an overview of issues and progress against key service area objectives and milestones and performance targets during the first quarter of 2012/13; for service areas within the remit of the Safer Policy and Performance Board.

The report has been structured by the following key priorities for Safer PPB, as identified in the Directorate and Corporate Plans:

- Community Safety
- Safeguarding and Dignity (including Consumer Protection and Substance Misuse)
- Domestic Violence

The way in which the Red, Amber and Green, (RAG), symbols have been used to reflect progress to date is explained at the end of this report.

2.0 Key Developments

There have been a number of developments within the Directorate during the first quarter which include:-

The Establishment of an Integrated Safeguarding Unit

Halton Borough Council are currently undertaking a 12 month pilot in conjunction with the local Clinical Commissioning Group to establish an integrated adults safeguarding hub within Halton Borough Council. The aim of the new model of delivery will be to provide a hub and spoke model which is an efficient, flexible and responsive service to the local population. The Unit will lead on adults safeguarding and dignity work across the Health and Social care economy. It will be headed up by a Principal Manager supported by two social workers, two Nurses, a Safeguarding/Dignity Officer, a Board Certified Behavioural Analyst and a GP. This will enable the unit to effectively operate particularly with its interface with the Community Nursing Teams, Acute Hospitals, and Care Management Teams.

Anti-Social Behaviour (ASB) powers and tools.

In Feb 2011 the Home Secretary published, *“More effective Responses to Anti-Social Behaviour”* – a transformation in the way ASB is dealt with. The Home Secretary announced new tools to combat problems of ASB. Also, the research shows the ASBO is not an effective deterrent as the persistent minority continue to breach.

Specifically, the proposals include:

- Repeal the ASBO and other court orders for anti-social individuals, and replace them with two new tools that bring together restrictions on future behaviour and support to address underlying problems
 - A Criminal Behaviour Order that can be attached to a criminal conviction, and a
 - Crime Prevention Injunction that can quickly stop anti-social behaviour before it escalates;
- Ensure there are powerful incentives on perpetrators to stop behaving antisocially
 - For example, by making breach of the new orders grounds for eviction from social housing;
- Bring together many of the existing tools for dealing with place-specific anti-social behaviour, from persistent litter or noisy neighbours, to street drinking and crack houses, into a
 - Community Protection Order;
- Bring together existing (Section 27) police dispersal powers into a single police power to direct people away from an area for anti-social behaviour;
- Make the informal and out-of-court tools for dealing with anti-social behaviour more rehabilitative and restorative; and
- Introduce a Community Trigger that gives victims and communities the right to require agencies to deal with persistent anti-social behaviour.

The above Home Office (Home Secretary) paper was produced on the back of the critical findings highlighted in the HMIC report called “Stop the Rot”. The HMIC review highlighted the failings of police forces to respond to ASB following David Askew’s tragic death. Currently, the coalition’s strategy and new tools are currently being piloted across a number of police forces. Cheshire Constabulary are awaiting the results of the pilots and further detailed government guidance.

3.0 Emerging Issues

A number of emerging issues have been identified during the first quarter that will impact upon the work of the Directorate including:-

Police & Crime Commissioners

Preparations continue for the Police & Crime Commissioner elections in November, for which the Chief Executive will be the Police Area Returning Officer. Work is currently underway preparing a briefing note for the new Police and Crime commissioner, which will set out the existing approach to community safety in Halton, including the partnership landscape, activities underway and successful outcomes achieved. The Police and Crime Commissioner, once elected, will have the responsibility for delivery of community safety and crime reduction across Cheshire, with the new un-ring fenced Community Safety Fund and any other community safety resource channelled through them from 2013/14.

Safeguarding

Interim Report – Winterbourne View

The Department of Health Review of Winterbourne View: Interim Report was published in late June. The Chief Executive of the NHS Commissioning Board Authority and Director-General of Social Care, Local Government and Care Partnerships have jointly written to all PCT's and Local Authorities to highlight the actions set out in the report and the need for Health and Social Care to work jointly at both national and local level to commission services to improve outcomes and enable people with learning disabilities to lead fulfilling and safe lives in the community. The final report is anticipated in Autumn 2012. Locally the Learning Disability Partnership Board Healthcare for All group will oversee progress. The Membership includes health and social care professionals, family carers and self-advocates.

DEFRA

There is currently a consultation being carried out by DEFRA (Department of Environment, Food and Rural Affairs) about tackling irresponsible dog ownership, poor welfare and dangerous breeds of dogs. This issue has received a lot of public interest and the outcome may lead to changes in legislation which may have issues for Environmental Health and other enforcement officers within HBC.

4.0 Risk Control Measures

Risk control forms an integral part of the Council's Business Planning and performance monitoring arrangements. During the development of the 2012/13 Business Plan, the service was required to undertake a risk assessment of all key service objectives with high risks included in the Directorate Risk Register.

As a result, monitoring of all relevant 'high' risks will be undertaken and progress reported against the application of the risk treatment measures in Quarters 2 and 4.

5.0 Progress against high priority equality actions


There have been no high priority equality actions identified in the quarter.

6.0 Performance Overview

The following information provides a synopsis of progress for both milestones and performance indicators across the key priorities that have been identified for Safer PPB, as stated in the Directorate and Corporate Plans.

1 COMMUNITY SAFETY (P McW)







Key Objectives / Milestones






Ref	Milestones	Q1 Progress
CCC1	Review Community Safety Team in line with reductions in funding arrangements Mar 2013 (AOF9 & 11)	

Supporting Commentary

The review has been completed and approved by the Council's Executive Board on 12th July, 2012. This means that the service is now well positioned to deliver the Councils' objectives and fit for purpose ahead of the appointment of the Police Crime Commissioner in the Autumn 2012.

Key Performance Indicators

Ref	Measure	11/12 Actual	12/13 Target	Q1	Current Progress	Direction of travel
CCC 24 SCS / HH1a & SH10	Reduce Alcohol related hospital Admissions (Previously NI 39) (per 100,000 population)	2651.7	3027	Proxy 666.0		
CCC 25 (SCS / SH1)	Reduce the Actual Number of ASB incidents recorded by Cheshire Police broken down in youth and adult incidents (Previously NI 17)	7434	8463	1824		
CCC 26 SCS / SH2	Arson incidents (Previously NI 33 - Total deliberate fires per 10,000 population)	558	484	110		
CCC 33 SCS / SH11	Reduce the re-offending rates of repeat offenders (RO's in the Navigate IOM Scheme – NEW) (Formerly NI 30) PPO – Priority offenders RO – Repeat offenders	PPO: 77.13% reduction RO: 36.73% reduction Shift in offence type	To maintain & reduce offending rates for PPO:40% reduction and RO's:4% reduction	N/A	N/A	N/A

CCC 34 SCS / SH13	Reduce the use of custody (Ministry of Justice proposal) (New measure)	11	Target to be set once baseline established	3		N/A
CCC 35 SCS / SH14	Reduce the proportion of individuals within the navigate cohort whose offending is substance misuse related. (New measure)	New measure	Target to be set once baseline established	N/A	N/A	N/A
CCC 36 SCS / SH16	Reduce Serious acquisitive crime rate (per 1000 population) (Previously NI 16) from: <ul style="list-style-type: none"> • Domestic Burglary • Theft of motor vehicle • Theft from motor vehicle • Robbery (personal and business) 	1548 (rate 13.10 per 1,000)	1652	268		
CCC 37 SCS / SH17	New Revised Measure: Assault with injury crime rate (per 1000 population) (Previously NI 20)	804 (rate per 6.80 per 1,000)	1074	161		

Supporting Commentary

CCC24 – Q1 2012/13 is a proxy based on May 12 data. Q1 2012/13 will be updated in the next report. Key developments in the quarter include

(1) Work continues to ensure that the new core Treatment Provider is successfully integrated within the Substance Misuse Treatment System in Halton.

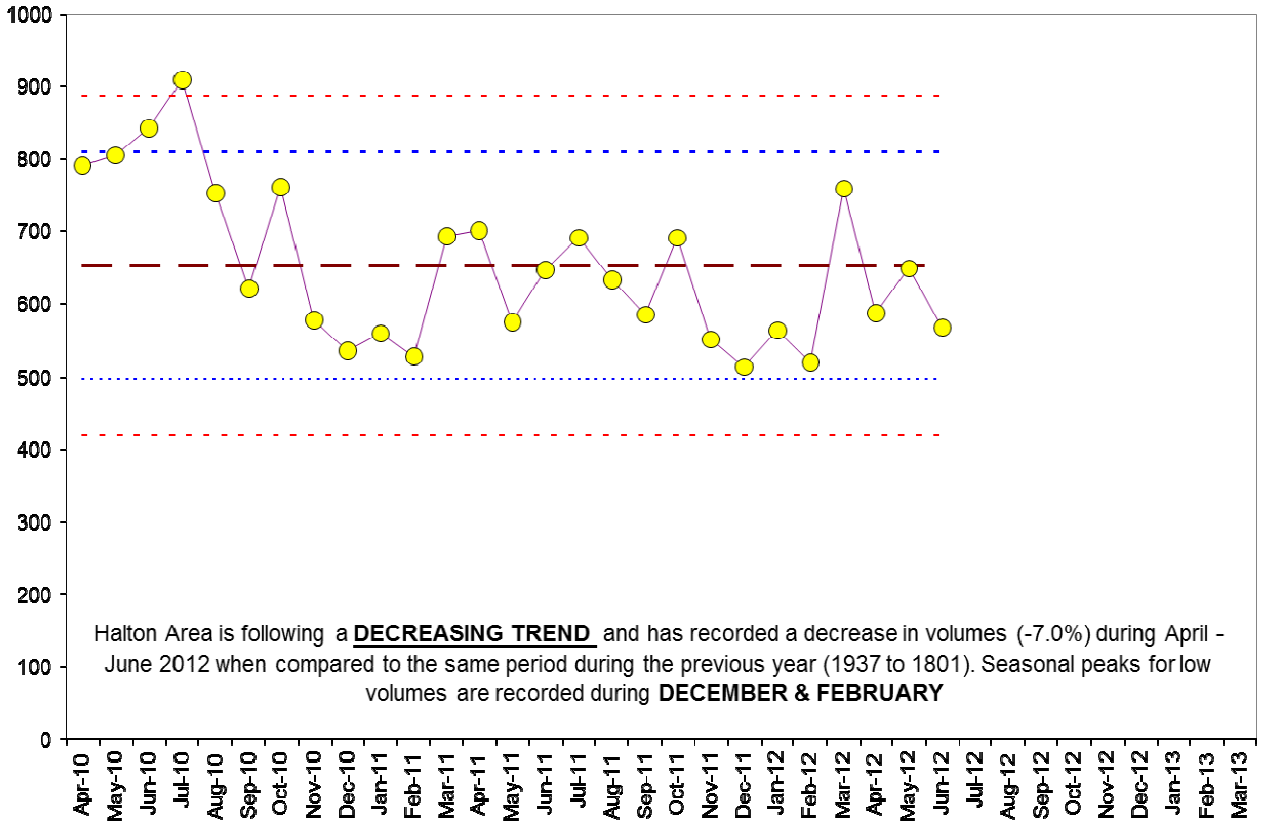
(2) A Performance Framework is being refined for the Alcohol Liaison Nursing Service at Whiston Hospital. - anticipated service start up date 1 September 2012. This initiative in particular is expected to have a significant impact on reducing the rate of increase in alcohol admissions.

(3) A Review of the Alcohol Harm Reduction DES is underway for GP Practices with a view to assessing effectiveness and value for money and looking at ways in which frontline professionals can be supported to identify alcohol misuse and offer brief advice/ onward referral where appropriate.

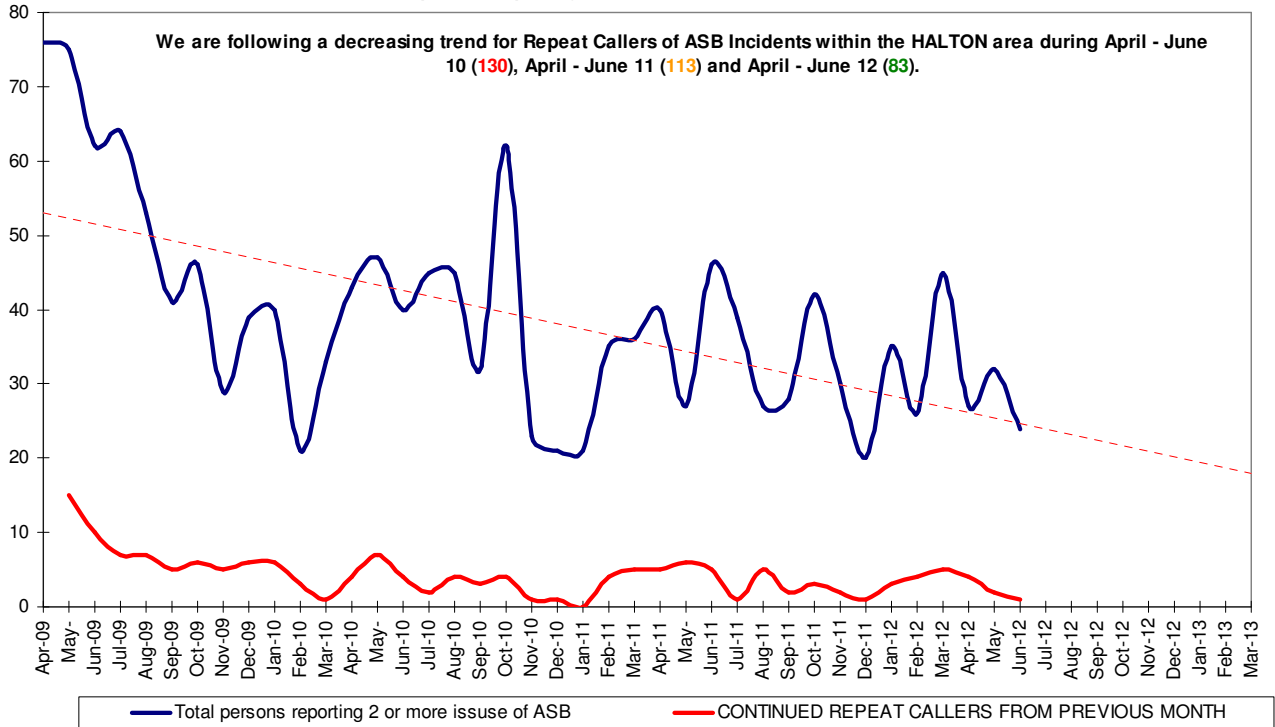
CCC25 – This is a total reduction of ASB number of 101 incidents with Runcorn reducing by 159 incidents and Widnes increasing by 58 more incidents. Both Broadheath and Riverside have increased each month in the quarter, with increases occurring more on a Saturday evening from 20.00hrs – 23.00hrs in Broadheath and a Tuesday and Sunday between 16.00hrs and 21.00hrs in Riverside. Included in the total is Youth ASB (595 incidents) with Runcorn seeing a reduction of 117 incidents compared to an increase in Widnes of 20 incidents. However, the total percentage of youth related ASB incidents as an overall total compared to last year has reduced from 36% to 33% this year. A number of multi-agency responses supporting victims and witnesses has continued this quarter with 58 individuals receiving on-going support. Trends over time are monitored monthly by Cheshire Constabulary (see below graphs), showing decreases in Anti-social

behaviour reported in Halton, with a similar reduction noted in the number of repeat incidents.

ANTI SOCIAL BEHAVIOUR INCIDENTS REPORTED WITHIN HALTON AREA



Total number of persons reporting 2 or more calls for ASB issues within Halton BCU



CCC26 – Although deliberate fires and anti-social behaviour continues to be a problem within Halton, targeted Fire Service work and initiatives in conjunction with partners continue to ensure these incidents decline steadily. Numbers of arson incidents are stated. Details of rates per 10,000 populations are awaited from the fire service.

CCC33 – Performance information in respect of re-offending rates of repeat offenders (RO's in the Navigate Integrated Offender Management Scheme) is produced by Police HQ staff. Quarter1 performance has not yet been reported.

CCC34 – This new measure will monitor custody sentences in terms of actual number and also as a rate per 1,000 aged 10-17 year local population (yearly).

The Youth Offending Team (YOT) works closely with persistent offenders as part of the multi-agency navigate (IOM) scheme to target resources to help reduce their reoffending. The YOT have introduced a compliance procedure which is reducing the incidences of breach leading to court appearances and potential custodial outcomes.

We are working with accommodation provider staff in terms of ensuring young people have appropriate accommodation in the community. All YOT staff are trained in court procedures and we enjoy a very good working relationship with our local courts.

CCC35 – New measure to monitor the navigate cohort whose offending is substance misuse related. This service due to commence in February 2012 and data to support the measurement of this outcome is in the process of being identified.

CCC36 – Serious Acquisitive Crime 268 incidents which represent 143 fewer victims compared to Qtr 1 2011/12. This is broken down as follows:

- Household burglary 97 crimes, (38 fewer victims, reduction of -28.1%)
- Theft of motor vehicle 42 crimes, (38 fewer victims, reduction of -47.5%)
- Theft from vehicle 118 crimes, (65 fewer victims, reduction of -35.5%)
- Robbery (personal & business) 11 crimes, (2 fewer victims, reduction of -15.4%)
















Shown in more detail in the below table:



	April - June 11	April - June 12	CHANGE	
TOTAL CRIME	2297	2058	-10.4%	239 fewer victims
SERIOUS ACQUISITIVE	411	268	-34.8%	143 fewer victims
HOUSEHOLD BURGLARY	135	97	-28.1%	38 fewer victims
VEHICLE CRIME	263	160	-39.2%	103 fewer victims
THEFT OF VEHICLE	80	42	-47.5%	38 fewer victims
THEFT FROM VEHICLE	183	118	-35.5%	65 fewer victims
ROBBERY	13	11	-15.4%	2 fewer victims
PERSONAL ROBBERY	10	6	-40.0%	4 fewer victims
BUSINESS ROBBERY	3	5	66.7%	2 more victims
SERIOUS VIOLENCE	18	12	-33.3%	6 fewer victims
ASSAULT LESS SERIOUS	195	161	-17.4%	34 fewer victims
VIOLENCE WITH INJURY	213	175	-17.8%	38 fewer victims

CCC37 – During Q1 April to June 2012 the Halton Area recorded 161 crimes of Assault with Less Serious Injury equating to 75 incidents in Runcorn and 88 incidents in Widnes. Performance has improved compared to the same period 2011/12 (194).

2 SAFEGUARDING AND DIGNITY (SWB, PMcW)

Key Performance Indicators

Ref	Measure	11/12 Actual	12/13 Target	Q1	Current Progress	Direction of travel
PA 5	Percentage of VAA Assessments completed within 28 days (Previously PA 8)	90.80%	82%	84.28%		
PA 6	Percentage of VAA initial assessments commencing within 48 hours of referral (Previously PA 9)	84.80%	64%	52.55%		
PA 8	Percentage of existing Halton BC Adult Social Care staff that have received Adult Safeguarding Training, including e-learning, in the last 3-years. (Previously PA 11)	46%	48%	41%		NA
PA 9	Percentage of Halton BC Adult Social Care staff that have received Adult Safeguarding Training, including e-learning (Previously PA 12)	127	130	29		NA
PA 10	Number of external Adult Social Care Staff that have received Adult Safeguarding Training, including e-learning (Previously PA 13)	581	250	81		N/A
PA 22	The Proportion of People who use services who feel safe – Adult Social Care Survey (ASCOF 4A) (Previously PA 35)	66.2%*	54%	Reported annually (2011/12 outturn)*	N/A	
PA 23	The Proportion of People who use services who say that those services have made them feel safe and secure – Adult Social Care Survey (ASCOF 4B Previously PA 36)	79.1%*	79.1%	Reported annually (2011/12 outturn)*	N/A	
PA 25	a) % of scheduled Local Air Pollution Control audits carried out	81%	93%	15%		Not available
	b) % of Local Air Pollution Control Audits being broadly compliant. (Previously PA 18)	85%	78%	88%		Not available
PA 27	a) % of high risk Health & Safety inspections undertaken	100%	100%	Reported annually		
	b) Number of unrated premises (and premises not currently high risk) subject to targeted interventions and risk rated under new statutory risk rating system (Previously PA 20)	268	200	Reported annually		

PA 28	Placeholder: Overarching Trading Standards Measure (TBC)	New measure	New measure	Refer to comment	N/A	N/A
CCC 29 SCS / SH7a & HH 12	Increase the % successful completions (Drugs) as a proportion of all in treatment 18+ (New measure)	13%	14.9% (Above NW Average)	11.5%		
CCC 30 SCS / SH7b & HH12	Increase the % successful completions (Alcohol) as a proportion of all in treatment 18+ (New measure)	New measure	Target to be set once baseline established in 2012/13	N/A	N/A	N/A
CCC 31 SCS / SH8a	Reduce the number of individuals re-presenting within 6 months of discharge (Drugs) (New measure)	11%	Target to be set once baseline established	N/A	N/A	N/A
CCC 32 SCS / SH8b	Reduce the number of individuals re-presenting within 6 months of discharge (Alcohol) (New measure)	New measure	Target to be set once baseline established	N/A	N/A	N/A

Supporting Commentary

PA 5 –Target exceeded for the proportion of VAA assessments completed within 28 days..

PA 6 - It has been identified that some initial assessments have not yet been closed down on the system. This is being addressed and as a result, the figure is expected to improve next quarter.

PA 8 - This information is obtained by matching the Communities Directorate staffing list to training records to determine percentage receiving training. There is no comparison to the same period 2011/12 as information was being split into divisions for further verification.

PA 9 - Obtained 2012-13 training registers to date and produced e-learning report, identified HBC staff that have attended courses or completed the e-learning. There is no comparison to the same period last year as information was being split into divisions for further verification.

PA10 - Obtained 2012-13 training registers to date and produced e-learning report, identified external staff that have attended courses or completed the e-learning. There is no comparison to the same period last year as information was being split into divisions for further verification.

PA 22 - Performance increased from 2010/11 51.3% to 2011/12, 66.2% of those who responded to the Adult Social Care survey in 2011/12 reported 'I feel as safe as I want'.

PA 23 - 79.1% of those who responded to the Adult Social Care survey for the first time in 2011/12 reported that support services helped them to feel safe. This indicator reflects directly whether the support services that Halton Borough Council provides has an impact on an individual's safety. This is in comparison to PA21 which is a general measure of whether an individual feels safe – which could be as a result of a multitude of factors. A higher figure is better.

PA 25 –15% - Inspections low due to staff leave. This will be adjusted by Q2. 88% of Air Pollution Control Audits are compliant and have already exceeded the target during Q1. Data was not available for comparative purposes in Qtr 1 of 2011/12.

PA26 - This is an annual measure and progress is reported at end of the year. However, from inspections undertaken to date, we are on target to ensure food establishments in the area are broadly compliant with food hygiene law.

PA27 - This is an annual measure and progress is reported at the end of the year. However, from inspections undertaken to date, we are on track to achieve the target by year end.



PA28 - Measure under discussion with the Department.

CCC29 – As of May 2012 Halton recorded 11.5% successful completions as a proportion of all those in treatment (63/548). In order to meet the target of 14.9% (NW average) based on numbers in treatment (548) a total of 80 successful completions would be needed – an increase of 17 over the current figure.

CCC30, CCC31 and CCC32 – Details not yet available from new provider - CRI Crime Reduction Initiatives.

3 DOMESTIC VIOLENCE (PMcW)

Key Objectives / Milestones

Ref	Milestones	Q1 Progress
CCC1	Conduct a review of Domestic Violence Services to ensure services continue to meet the needs of Halton residents Mar 2013 (AOF11)	
CCC1	Introduce specialist support provision for victims of a serious sexual offence Mar 2013 (AOF11)	

Supporting Commentary

Review of Domestic Violence Services



A Domestic Abuse Project Group has been set up to consider how supported accommodation will be provided to Halton residents fleeing domestic abuse in the future. This pilot will consider alternative accommodation options alongside the traditional refuge provision model. Due to this pilot the tender currently held by Women's Aid to provide the Halton Domestic Abuse Service consisting of Refuge Provision, Sanctuary Measures,

Floating Support and Independent Domestic Violence Advocate (IDVA) service will continue to be funded until 2014. As part of the remit of this group an appraisal of all aspects of domestic abuse service provision is to be included as we look to develop and shape a future service that meets the need of our local client base.

Sexual Assault Referral Centre

Many more reported cases are now being taken on by the Crown Prosecution Service (CPS). From now until the end of 2012, there are five separate trial dates set for ISVA (Independent Sexual Violence Advocates) clients in Halton – including two young people - with several more awaiting CPS decision. This is a vast improvement for an area where historically, very few clients saw their cases reach Crown Court. The NHS - specifically Mental Health services - and the Police continue to provide frequent referrals. Professional relationships with the Police have been excellent, with good communication and joined up support for Clients.

Key Performance Indicators

Ref	Measure	11/12 Actual	12/13 Target	Q1	Current Progress	Direction of travel
CCC 28 SCS / SH6	Reduce repeat incidents of domestic abuse within the MARAC Cohort (Formerly NI 32)	27.6%	27%	31%		

Supporting Commentary

CCC28 – Almost all cases appearing at MARAC relate to a series of domestic incidents; therefore even when a case appears at MARAC for the first time it is arguably a ‘Repeat’. An increase in the number of ‘Repeats’ appearing at MARAC could be indicative of victims / public becoming more aware that domestic abuse is not acceptable, that it is a not a private matter and that agencies are willing and able to assist victims more effectively now than ever before. Performance has decreased in comparison to Q1 2011/12 which considered 42 cases at MARAC, 10 of which related to repeat incidents - which equates to 28%.

7.0 Financial Statements

Commissioning and Complex Care

Revenue Budget as at 30th June 2012

	Annual Budget	Budget To Date	Actual To Date	Variance To Date (overspend) £'000
	£'000	£'000	£'000	
<u>Expenditure</u>				
Employees	7,345	1,746	1,736	10
Other Premises	319	142	151	(9)
Supplies & Services	2,195	166	169	(3)
Contracts & SLA's	477	44	22	22
Transport	170	43	41	2
Emergency Duty Team	103	0	0	0
<u>Community Care:</u>				
Residential & Nursing Care	895	159	125	34
Domiciliary Care	310	48	55	(7)
Direct Payments	133	38	28	10
Block Contracts	178	34	30	4
Day Care	15	6	7	(1)
Carers Breaks	203	1	1	0
Food Provision	25	6	4	2
Other Agency Costs	1,448	46	39	7
Payments To Providers	4,053	1,162	1,166	(4)
Grants To Voluntary Organisations	259	107	102	5
Total Expenditure	18,128	3,748	3,676	72
<u>Income</u>				
Residential & Nursing Fees	-69	-10	-12	2
Direct Payment Charges	-3	-1	-5	4
Community Care Income	-4	-1	-1	0
Sales & Rents Income	-184	-110	-117	7
Fees & Charges	-444	-52	-48	(4)
PCT Reimbursements : Care	-257	-8	-8	0
PCT Reimbursements :Service	-2140	-591	-594	3
Reimbursements	-250	-50	-48	(2)
Government Grant Income	-255	-34	-39	5
Transfer From Reserves	-700	-568	-568	0
Total Income	-4,306	-1,425	-1,440	15
Net Operational Expenditure	13,822	2,323	2,236	87
<u>Recharges</u>				
Premises Support	458	115	115	0
Transport	441	12	12	0
Central Support Services	2,403	557	557	0
Asset Charges	461	2	2	0
Internal Recharge Income	-88	0	0	0
Net Total Recharges	3,675	686	686	0
Net Departmental Total	17,497	3,009	2,922	87

Comments on the above figures:

Net operational expenditure is £87,000 below budget profile at the end of the first quarter of the financial year.

Employee costs are projected to be £40,000 below budget at the year-end. This results from savings made on vacant posts. The staff turnover savings target incorporated in the budget for this Department is £394,000, the £40,000 represents the value by which this target is projected to be over-achieved.

The Community Care element of Mental Health Services, for this financial year is forecast to be £185,000 below budget based on current data held for all known care packages. This figure is subject to fluctuation, dependent on the number and value of new packages approved, and the termination or variation of existing packages. At the end of quarter 1 the net position is £46,000 below budget profile.

Expenditure on Contracts and Service Level Agreements is projected to be £54,000 below budget at the year-end. This relates to savings in respect of payments to bed & breakfast providers for homelessness support. There has historically been significant variations in demand for this service, although current expenditure patterns are stable, and the projected underspend seems realistic.

Income is currently marginally above the target to date. Community Centres income is particularly vulnerable to economic pressures, consisting of a large volume of discretionary public spend relating to social activities. However, action has been taken to maximise income from room lettings, and it is currently anticipated that the target will be achieved. The figures in the table above include a projected over-achievement of Community Care income of £25,000 for the full year, which is included within the £185,000 projected net underspend for Community Care referred to above.

At this stage, net expenditure for the Complex & Commissioning Care Division is anticipated to be £300,000 below budget at the end of the financial year. Of this figure, £185,000 relates to Community Care.

Capital Projects as at 30th June 2012

	2012/13 Capital Allocation £'000	Allocation To Date £'000	Actual Spend To Date £'000	Allocation Remaining £'000
Renovation Grant	85	21	0	85
Disabled Facilities Grant	650	60	0	650
Stairlifts	250	63	61	189
Energy Promotion	6	1	0	6
RSL Adaptations	550	137	43	507
Choice Based Lettings	29	16	16	13
Extra Care Housing	463	0	0	463
User Led Adaptations	55	0	0	55
Bungalows At Halton Lodge	464	0	0	464
Unallocated Provision	109	0	0	109
Total Spending	2,661	298	120	2,541

Prevention and Assessment Services

Revenue Budget as at 30th June 2012

	Annual Budget	Budget To Date	Actual To Date	Variance To Date (overspend)
	£'000	£'000	£'000	£'000
<u>Expenditure</u>				
Employees	7,854	1,821	1,801	20
Other Premises	72	13	10	3
Supplies & Services	654	190	189	1
Consumer Protection Contract	386	106	106	0
Transport	116	25	25	0
Food Provision	17	4	4	0
Aids & Adaptations	113	13	13	0
Contribution to JES	231	0	0	0
Community Care:				
Residential & Nursing Care	8,619	1,546	1,801	(255)
Domiciliary & Supported Living	6,970	1,022	1,045	(23)
Direct Payments	2,400	704	680	24
Day Care	235	40	63	(23)
Other Agency	79	33	33	0
Contribution to Intermediate Care Pool	2,206	459	419	40
Total Expenditure	29,952	5,976	6,189	(213)
<u>Income</u>				
Other Fees & Charges	-93	-12	-8	(4)
Sales Income	-25	-26	-26	0
Reimbursements	-274	-25	-34	9
Residential & Nursing Income	-2,631	-506	-557	51
Community Care Income	-576	-154	-179	25
Other Community Care Income	-186	-46	-52	6
Direct Payments Income	-105	-26	-42	16
PCT Contribution to Care	-901	-35	-20	(15)
Transfer from Reserves	-340	0	0	0
LD & Health Reform Allocation	-4,489	0	0	0
Capital Salaries	-84	0	0	0
PCT Contribution to Service	-1,078	-467	-467	0
Total Income	-10,782	-1,297	-1,385	88
Net Operational Expenditure	19,170	4,679	4,804	(125)
<u>Recharges</u>				
Premises Support	429	103	103	0
Asset Charges	160	6	6	0
Central Support Services	3,382	821	821	0
Internal Recharge Income	-419	0	0	0
Net Total Recharges	3,552	930	930	0
Net Departmental Total	22,722	5,609	5,734	(125)

Comments on the above figures:

In overall terms the Net Operational Expenditure for Quarter 1 is £165,000 over budget profile excluding the Intermediate Care Pool.




Staffing is currently showing £20,000 under budget profile. This is due to savings being made on vacancies within the Department. Some of these vacancies are expected to be filled by the end of Quarter 2.

The figures above include the income and expenditure relating to Community Care, which is currently showing £194,000 over budget profile, net of income. Community Care includes expenditure on clients with Learning Disabilities, Physical & Sensory Disabilities and Older People. These figures will fluctuate throughout the year depending on the number and value of new packages being approved and existing packages ceasing. This budget will be carefully monitored throughout the year to ensure an overall balance budget at year end.

This budget was significantly overspent in 2011/12, however action was taken to restrict the scale of the overspend as far as possible. This action and close monitoring will continue during the current year to again restrict expenditure as far as possible, however it is anticipated that expenditure on Community Care will still be above budget by year end.




8.0 Explanation of Symbols

Symbols are used in the following manner:

Progress		<u>Objective</u>	<u>Performance Indicator</u>
Green		Indicates that the <u>objective is on course to be achieved</u> within the appropriate timeframe.	<i>Indicates that the annual target <u>is on course to be achieved</u>.</i>
Amber		Indicates that it is <u>uncertain or too early to say at this stage</u> , whether the milestone/objective will be achieved within the appropriate timeframe.	<i>Indicates that it is <u>uncertain or too early to say at this stage</u> whether the annual target is on course to be achieved.</i>
Red		Indicates that it is <u>highly likely or certain</u> that the objective will not be achieved within the appropriate timeframe.	<i>Indicates that the target <u>will not be achieved</u> unless there is an intervention or remedial action taken.</i>

Direction of Travel Indicator

Where possible performance measures will also identify a direction of travel using the following convention

Green		Indicates that performance is better as compared to the same period last year.
Amber		Indicates that performance is the same as compared to the same period last year.
Red		Indicates that performance is worse as compared to the same period last year.
N/A		Indicates that the measure cannot be compared to the same period last year.

Operational Director Initials

PMcW - Paul McWade – Operational Director Commissioning & Complex Care

SWB - Sue Wallace Bonner – Operational Director Prevention and Assessment