

PERFORMANCE INDICATOR TEMPLATES

This Appendix includes the templates that have been marked **R** in Appendix A (1).

Indicator:	HCS 4a Percentage of working age population with higher level qualifications (Level 3 & 4)
HCS Theme	Economic development and enterprise
HCS Outcome	A more adaptable and higher skilled workforce
Council Priority	To sustain vibrant and prosperous communities, including by securing more efficient, effective and customer-focused services, clean streets, tackling homelessness and effective emergency planning
Council Objective	A more highly skilled adult population

Judgement**R**

Cabinet Lead:	Cllr Stockton	Strategic Lead-HP Board	Sharon Gray (LSC)
Council Lead:	Mr Hughes	Features in:	HCS

- | | |
|--|-----------------------|
| 1. % of the working age population (males aged 16-64 and women aged 16-59 years) qualified to at least Level 3 | Baseline:
1. 43.4% |
| 2. % of the working age population (males aged 16-64 and women aged 16-59 years) qualified to at least Level 4 | 2. 24.8% |

Action(s) required to achieve the target (including key milestones)	Progress against action/resource/risk/mitigation/budget:
<p>1. Service Level Agreement with Herefordshire Group Training Association to deliver project aimed at assisting businesses in the engineering and manufacturing sector to access management training. Wherever possible this will be to full NVQ level 4 in Learning and Development of Management.</p> <p>1.1 Service Level Agreement to be signed July 2006.</p> <p>2. Scheme to commence July 2006.</p>	<p>5 businesses signed up to NVQ's within two weeks of launch.</p> <p>Discussion taken place with HGTA with regard to the best method of progressing the scheme and ensuring successful delivery.</p> <p>Herefordshire Council Officer responsible for monitoring and liaison with scheme recruited.</p> <p>SLA signed by Council week commencing 17th July 2006</p> <p>Scheme launched 21st July 2006.</p> <p>5 businesses signed up to NVQ's within two weeks of launch.</p> <p>Discussion taken place with HGTA with regard to the best method of progressing the scheme and ensuring successful delivery.</p> <p>Herefordshire Council Officer responsible for monitoring and liaison with scheme recruited.</p>

<p>3. 20 managers signed up to scheme – December 2006.</p> <p>4. Additional 10 managers signed up to scheme – March 2007.</p> <p>5. First managers completing training – October 2007.</p>	<p>28 managers signed up within first two months of the assisted business scheme.</p>
<p>Resource required to deliver the action(s)</p>	
<p>LPSA2 funding.</p>	
<p>Risk(s) to achievement</p>	
<p>Lack of businesses interested in the scheme.</p> <p>None completion of NVQ's by managers.</p> <p>Lack of spend on scheme due to lack of interest in scheme.</p>	
<p>Risks mitigated by</p>	
<p>HGTA have very good record of delivery of this type of scheme. Promotion of scheme will be undertaken by HGTA through their usual methods.</p> <p>HGTA have adopted an approach to training delivery that minimises drop-out rates.</p> <p>Economic Regeneration Team to undertake revue and monitoring of scheme on a monthly basis to determine take up and spend.</p>	

Roles & responsibilities

<p>Operational Lead – lead officer</p>	
<p>Support/Facilitator-Improvement Manager</p>	
<p>Data owner for PI</p>	

Indicator: **HCS 13** **The average length of stay in bed and breakfast accommodation of households (towards whom the Council has a full statutory duty)**

HCS Theme Healthier Communities and Older People

HCS Outcome Reduce health inequalities and promote healthy lifestyles

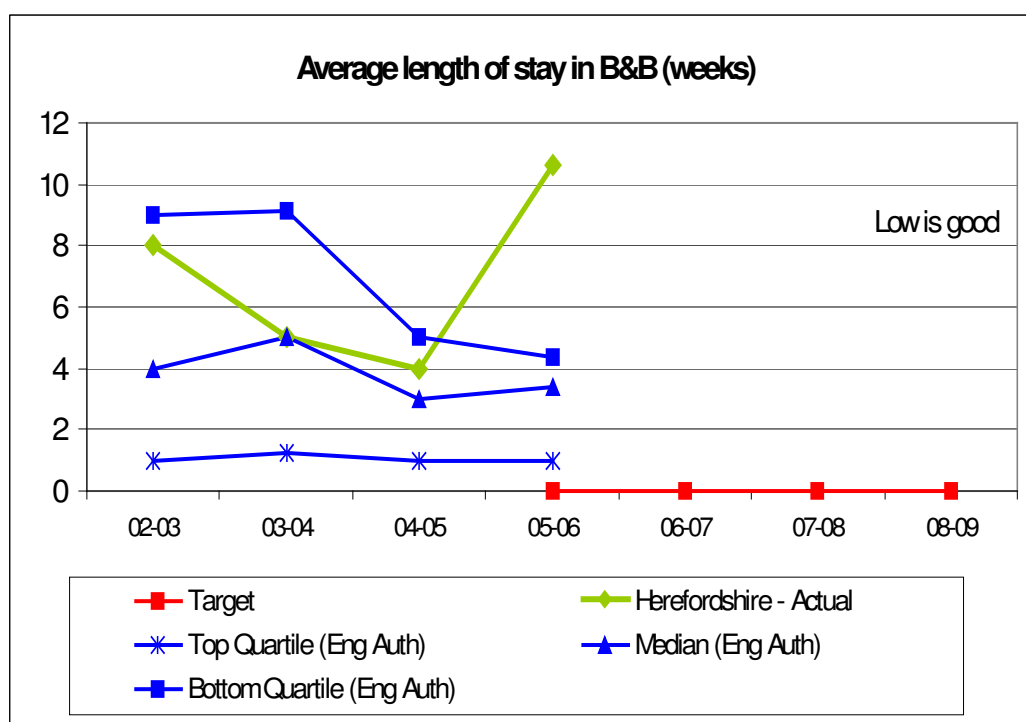
Council Priority To maximise the health, safety, economic well-being, achievements and contribution of every child, including those with special needs and those in care

Council Objective To eliminate the use of bed and breakfast accommodation for households with children

Judgement R **A** **G**

Cabinet Lead: Cllr Mrs Barnett **Strategic Lead-HP Board** Neil Pringle (Herefordshire Council)

Council Lead: Geoff Hughes **Features in:** CP, LAA



The most effective measure of the availability of adequate housing for families with children

BV183a
Average length of stay for families with children in B&B accommodation

Quarter 1 = 17.9

Q2 = 15.5

Action(s) required to achieve the target (including key milestones)

Progress against action/resource/risk/mitigation/budget

<ol style="list-style-type: none"> 1. The implementation, with our partners, of our Homelessness Strategy Action Plan and in developing more affordable housing (161 units target for 06/07). 2. Establishment of Homelessness Advisory Group by end of April 2006. 3. Review of HSAP in June 2006. 4. Prevention approach to homelessness, reducing levels of applications and acceptances under the homelessness legislation (target of 417 for 06/07). 5. Target families with children who are rejected for nomination on account of former tenant history ie arrears, in partnership with RSLs. Expand private sector leasing scheme – minimum 5 extra units 06/07. 6. Expand private sector leasing scheme – minimum 5 extra units 06/07 	<p>Ongoing working document until 2008 Homelessness Strategy Implementation group established.</p> <p>Affordable homes provided on target. So far over 90 this year.</p> <p>Established and named the "Homelessness Advisory Steering Group" 2 meetings held</p> <p>Ongoing. To be finalised</p> <p>Prevention work has proved successful in fourth quarter of 05/06 with a successful intervention in 68 cases. This has resulted in a reduction in levels of applications and acceptances. This low level of Applications & Acceptances has continued into Q1 06/07.</p> <p>Q1 Acceptances - 29 Q2 Acceptances - 39</p> <p>Work to be progressed during 06 on identifying these families on the Homelessness 'database' to establish extent of problem. Discussed with RSLs at June 06 meeting and protocol will be in place by autumn 06/07 to reduce the problem by improving joint working practices</p> <p>Continuing. Will exceed target for year.</p>
Resource required to deliver the action(s)	
<ol style="list-style-type: none"> 1. Homelessness Change Manager, 2. Homelessness Prevention Officers. 3. Use of Prevention Fund – including roll forward of funds allocated in 05/06 to 06/07. 4. Flexible use of B & B budget and use of capital resources to fund new development. 	<p>Employed in 2005</p> <p>Established.</p> <p>Set up and being used</p> <p>Part of B & B budget is used on the principle of "spend to save" and used as part of the prevention fund.</p>
Risk(s) to achievement	
<ol style="list-style-type: none"> 1. Lack of affordable housing and financial resources. Unwillingness of RSLs to allocate housing to homeless households with poor track record. 2. Lack of homelessness database and reporting ICT. 	<p>Evaluating courses of action. Producing report for Geoff Hughes and Richard Gabb.</p> <p>A risk, as there is a lack of reporting capabilities from the Homelessness team. There is also a lack of capabilities to set monitored targets and inability to carry out an audit and automatic reports for our BVPI's. Team is re-submitting business case to Corporate review board.</p>

3. The options and speed of move on accommodation – i.e.- from temporary accommodation to permanent housing.	Meeting with RSLs in June 2006 to discuss proposed protocols. Were agreed and will be incorporated in autumn 06/07 in protocol document for signatures. Draft protocol produced to put to RSLs
Risks mitigated by	
1. Ongoing programme of affordable housing development.	Affordable Housing provided exceeding target
2. Strategic Housing to negotiate with RSLs direct on selected families. Meeting arranges for June 06.	Meeting was successful with a range of improved joint working practices being agreed, which will come into effect this autumn. Affordable Housing provided exceeding target
3. Permission to carry forward the underspend of the Prevention Fund into 06/07	Done – carried forward.
4. Identify alternative temporary accommodation options.	Member paper completed and strategy for reduction approved. Reduction of FWC in B&B to 0 is target for 06/07
5. Flexibility around temporary accommodation budget	Yes, and flexibility continues

Roles & responsibilities

Operational Lead –	Richard Gabb
Support/Facilitator-	
Data owner for PI	Paul Griffiths

NB – The measuring guidelines for this indicator (BVPI 183) means that an outturn is only recorded when a family is moved OUT of the B&B/hostel. Therefore a successful outcome of moving a family into permanent accommodation after a long time in temp results in a very poor BVPI outturn. For instance, a FWC (Family with Children) could have spent a number of weeks in B&B during 04/05, been moved to temporary accommodation and just recently permanently rehoused. Hence good work in getting families who have been in various forms of temporary accommodation into permanent accommodation triggers (through us being able to discharge our duty) a large outturn for BV183. It is this time lag and our success in moving families into permanent accommodation that is causing the current problems.

Indicator: HCS15 **Number of emergency unscheduled acute hospital bed days (defined in the Department of Health guidance for Local Delivery Plans 2005-2008) occupied by a person aged 75 or more in NHS hospitals, commissioned by Herefordshire PCT**

HCS Theme Healthier communities and older people

HCS Outcome Independence and choice for older people and vulnerable adults

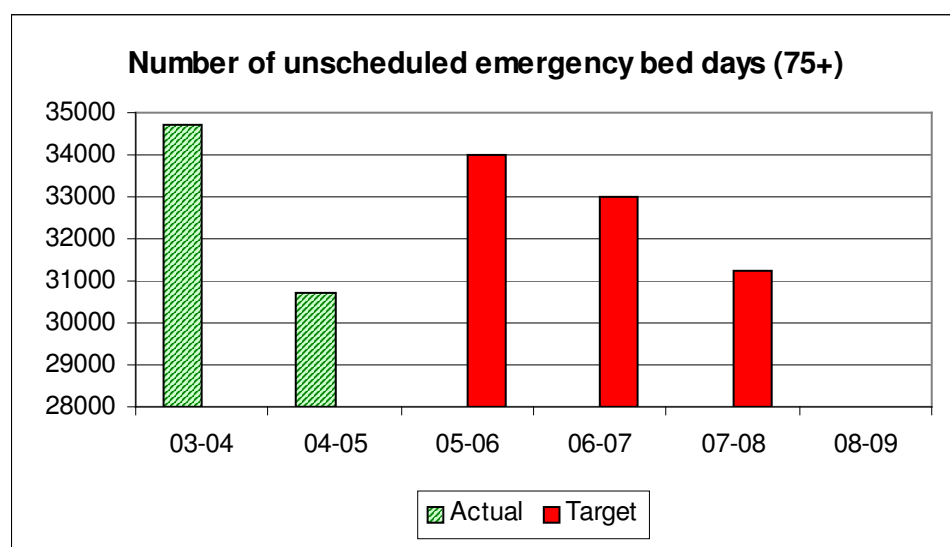
Council Priority To enable vulnerable adults to live independently and, in particular, to enable many more older people to continue to live in their own homes

Council Objective To minimise the length of time older people spend in acute hospitals

Judgement **R** **A** **G**

Cabinet Lead: Cllr Mrs Barnett **Strategic Lead-HP Board** (PCT)

Council Lead: Mr Hughes **Features in:** CP, LAA, LPSA2



Older people's independence and health is compromised if they spend longer than absolutely necessary in hospitals

Action(s) required to achieve the target (including key milestones)	Progress against action/resource/risk/mitigation/budget
<p>Leadership and multi-agency commitment:</p> <p>Ensure engagement of all key agencies in the reduction of this target – Hereford Hospitals Trust, Primary Care Trust and Social Care.</p> <p>Key managers in PCT, HHT and Social Care to ensure staff, continually monitor practice and make necessary changes designed to achieve the outcome.</p>	<p>Integrated Change Management Group to take the lead. Reporting to the Older Peoples Programme Board. Lead Officer Stephanie Canham</p> <p>Integrated Change Management Group to develop action plan and measurable timescales. Lead Officer Stephanie Canham</p>

Ensure staff understand what is needed and why, and enable them to make informed and useful suggestions or changes to practice.

Ensure the Single Assessment Process is implemented across all agencies

Continue to develop preventative services and specifically, implement LPSA 2 schemes, including village warden scheme, foot-care scheme and out of hours ambulance sitter service.

Contracts for Village Wardens Scheme to be let **August 2006.**

Performance indicators will be set prior to start of pilot schemes, including a satisfaction survey in relation to the village warden scheme. **September 2006.**

Implement the chronic disease management strategy

Continue to develop the integrated falls strategy by improving Dexa scanning service for local residents.

Data management

Ensure accurate data collection, interpretation and reporting

Achieve multi-agency agreement to the data

Commissioning:

Develop a robust commissioning and performance management system

Lead Officers Stephanie Canham, Trish Jay

SAP is not yet introduced to acute hospital or by GPs. SAP Coordinator to work with both from August 2006. System complete by **March 2007.** **Lead officer Pam Saunder.**

The Village Warden contract has been let to the Red Cross. First four wardens have been appointed plus coordinator. **Lead Jean Howard**

It has been decided to undertake a wider establishment of baseline data and this will be complete by January 2007. **Lead Officer Jean Howard**

Signposting post currently being advertised, with secondment option to speed up process. **Lead Officer Jean Howard.**

Lead Officer Trish Jay reporting to Physical Disability programme Board

Peter Sowerby working with Paul Ryan

Lead Officers Stephanie Canham, Trish Jay and Alan Dawson

Robust systems for commissioning including performance review e.g. as defined by the Audit Commission "Making Ends Meet" are undeveloped. A joint commissioning plan agreed in June 2005 made a useful start to consider strategic commissioning but both the plan and the underpinning systems need to be developed and embedded. The proposed Commissioning and Improvement Services Division evidences intentions to build the necessary capacity; this development is on hold pending the emergence of the Public Service Trust (see mitigation section below)

Resource required to deliver the action(s)

Staffing:

Redefine roles across health and care organisations to ensure modernisation can occur

Work on a joint workforce development strategy is to start in **Autumn 2006** as part of the Public Service Trust development and in response to the

<p>Be clear about what is to be achieved and ensure staff are adequately informed and trained</p> <p>Finance:</p> <p>Ensure that commissioning plans contain sound financial commitment, including development of funding sources and how the transition will be managed and funded when re-engineering services</p> <p>Ensure funding pick up for successful LPSA 2 pilots is reflected in PCT and Social Care budget cycles.</p>	<p>Service Trust development and in response to the Social Care recovery plan. The scope will cover Health Social Care, the Alliance and private sector partners. Framework to be completed by March 2007.</p> <p>Joint leads Liz French Social Care and Jan Parfitt, PCT.</p> <p>Older Peoples Commissioning Plan due to be completed Autumn 2006. Lead officer Peter Sowerby.</p> <p>Learning Disability Commissioning Plan due to be completed December 2006. Lead Officer Mike Metcalf.</p> <p>Physical Disability Commissioning Plan due to be completed June 2007 Lead Officer TBA.</p> <p>Health and Care Joint Commissioning Group to sign off and senior commissioners from each organisation represented on group to take appropriate action. September 2007.</p>
Risk(s) to achievement	
<p>This performance indicator is managed and reported by Hereford Hospitals Trust, which makes it difficult to manage by Social Care or the PCT. This is compounded by fragmented data collection and performance management.</p>	<p>Integrated Change Programme Board to agree common understanding of how this statistic is calculated and then ensure compliance through agreed mechanisms. Lead Officer Stephanie Canham.</p>
Risks mitigated by	
<p>Probable development of a Public Service Trust which should at least provide a single commissioning and performance management system across the PCT and Social Care. Better commissioning should lead to improved service delivery for providers.</p>	<p>Draft PST proposals complete, high level sign off being established currently. Target date for new joint management structure is October 2006. Lead Officers Neil Pringle and Paul Bates</p>
Budget and financial performance	
£353,000	Schemes cost breakdown available in next report

Roles & responsibilities

Operational Lead – lead officer	Stephanie Canham, Social Care 01432 260320
Support/Facilitator	Jean Howard, IMPACT 01432 363942
Data owner for PI	Ian Lamputt PCT 01432 363907

Indicator: HCS 16 **The number of people aged 65 and over helped to live at home, per 1000 adults aged 65 and over**

HCS Theme Healthier communities and older people

HCS Outcome Independence and choice for older people and vulnerable adults

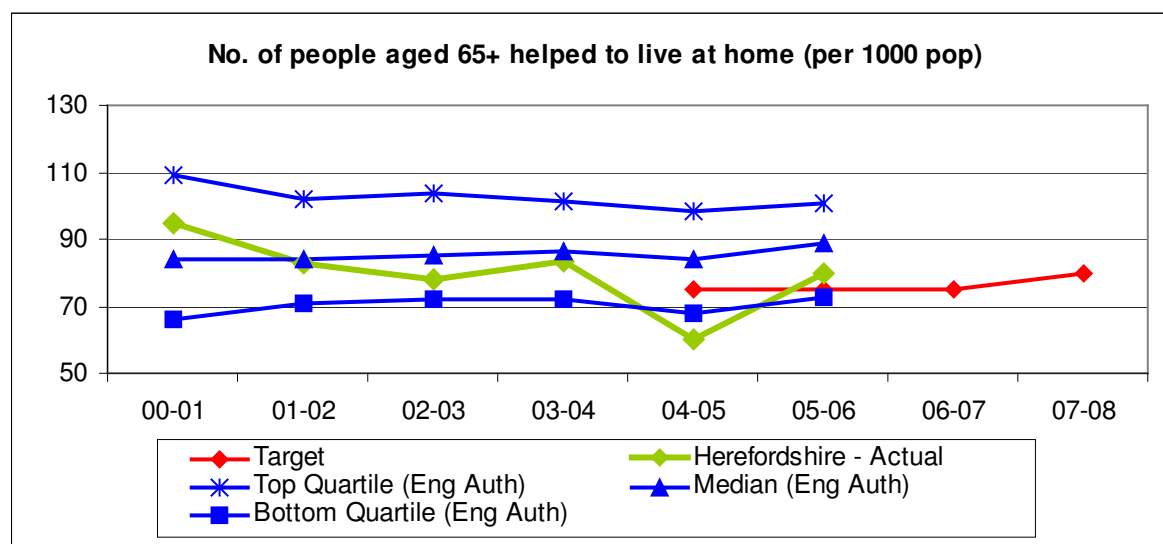
Council Priority To enable vulnerable adults to live independently and, in particular, to enable many more older people to continue to live in their own homes

Council Objective To maximise the independence of older people

Judgement R **A** **G**

Cabinet Lead: Cllr Mrs Barnett **Strategic Lead-HP Board** Neil Pringle (Herefordshire Council)

Council Lead: Mr Hughes **Features in:** CP, LAA



Low level care received at home can prevent or postpone a person needing more intensive care packages or residential care

Action(s) required to achieve the target (including key milestones)	Progress against action/resource/risk/mitigation/budget
<ol style="list-style-type: none"> 1. Re-draft the eligibility criteria to reflect the change in emphasis from critical to low/moderate. <ol style="list-style-type: none"> 1.1 Key Milestones to be linked to the Improvement Plan, eligibility criteria re-drafted Dec 2006 2. Training for the Teams, multi-disciplinary approach to identify services users who require prevention services. 	<p>Part of improvement plan</p> <p>September sessions delivered.</p>

<p>2.1 Key Milestone to incorporate through developing Excellence Sessions which are ongoing.</p> <p>3. Developing Supporting People services.</p> <p>3.1 Key Milestone access additional funding by October 2007 to support re-ablement, telecare and Handy Man services</p> <p>4. Review literature available.</p> <p>4.1 Key Milestone: All literature to be produced by March 2007.</p> <p>4.2 Direct Payments, Carers Services, Re-ablement literature to be produced by September 2006.</p> <p>5. Target key groups and monitor the number of referrals received.</p> <p>5.1 Key Milestone awareness raising sessions with key stakeholders to be delivered by December 2006.</p> <p>6. Develop the use of assistive technology to support older people to remain in their own homes.</p> <p>6.1 Key Milestone through 3 pilot projects to be implemented by September 2006.</p> <p>7. Partnership working with the Voluntary Sector and Health to develop a joint prevention strategy and Commission appropriate services.</p> <p>7.1 Key Milestone: Prevention Strategy and Commissioning Plan drafted by November 2006. Prevention matrix to include signposting, Village/Community Wardens, Welfare Rights information and advice.</p> <p>7.1 Key Milestone: introduction of services by January 2007.</p>	<p>September sessions delivered.</p> <p>Proposals drawn up for submission to next supporting people board.</p> <p>No milestone achieved</p> <p>Awareness Raising Seminar held on the 08/08/06. Project Co-ordinator appointed, commence 02/10/06.</p> <p>Prevention Strategy Group set up and planning and commissioning framework agreed.</p> <p>Wardens Scheme now operational. Joint Team Manager is appointed</p>
<p>Resource required to deliver the action(s)</p>	
<p>Named worker to redraft eligibility criteria, provide training to teams, liaise with multi-disciplinary stakeholders to promote prevention services and prepare literature and awareness raising in the community.</p> <p>Ensure maximisation of Supporting People Monies</p> <p>Re-invest any de-investment monies e.g. SLA's reviews.</p>	<p>Part of improvement work</p> <p>On going</p> <p>Planned for New Year.</p>

Risk(s) to achievement	
Lack of investment monies to develop prevention services. Excess demand Lack of Supporting People Providers.	
Risks mitigated by	
Framework to be developed and resource identified to review all SLA's. Agreement to re-invest any savings. Develop prioritisation criteria for service provision. Work in partnership with providers to promote the development of Supporting People Providers.	

Roles & responsibilities

Operational Lead – lead officer	
Support/Facilitator -Improvement Manager	
Data owner for PI	

Indicator: HCS 30 % of pupils achieving 5+ A*-G grades at GCSE (incl. Maths & English) or equivalent

HCS Theme Children and Young People

HCS Outcome Children and young people achieve educational, personal, social and physical standards

Council Priority To maximise the health, safety, economic well-being, achievements and contribution of every child, including those with special needs and those in care

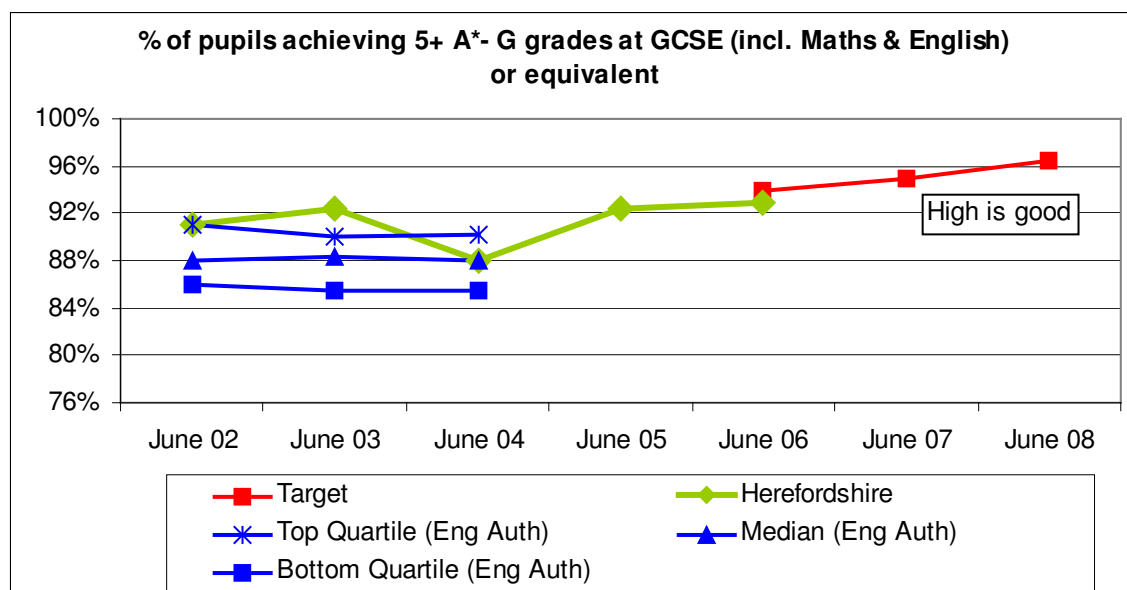
Council Objective To improve the educational attainment of Herefordshire pupils

Judgement R **A** **G**

Cabinet Lead: Cllr Rule **Strategic Lead-HP Board** Neil Pringle

Council Lead: Ms Fiennes **Features in:** LAA, LPSA2G, HCS, CP

2006 Data: Herefordshire 92.9%: 25th Centile 86.1 Median: 88.4 75th Centile 90.5



Good performance at GCSE is a crucial foundation for future educational achievement and improved life chances

Action(s) required to achieve the target (including key milestones)	Progress against action/resource/risk/mitigation/budget
Use Secondary Strategy Staff and expertise to: <ul style="list-style-type: none"> - analyse and interpret individual school and pupil related performance data for all secondary schools - identify schools below the national floor targets at KS3 Maths, Science & English 	2006 GCSE Results: 5+ A* - G (E,M) 92.9% No schools below target.

<ul style="list-style-type: none"> - identify schools with low contextual value added (CVA) between KS2 – KS3, KS3 – KS4 & KS2 – KS4 - identify schools with low conversion rates from KS2 – KS3 – KS4. - identify schools with low or declining performance in 5A*-G grades. - Data is provided by QCA, NCER late August-October. <p>Target consultant teaching, learning & leadership support at the identified schools or departments.</p> <p>Initial analysis by late September using QCA data.</p> <p>Detailed analysis by late October.</p> <p>Target setting data provided to schools and SIS team by autumn half term break.</p>	<p>CVA to be published January 2007.</p> <p>4 schools identified.</p> <p>1 school identified.</p> <p>Data received and analysed.</p> <p>Support plans in place.</p> <p>Initial analyses conducted. Meeting with Regional advisors 13/10/2006.</p> <p>Detailed analyses underway.</p> <p>Target setting planned for w/c 16/10/2006.</p>
Resource required to deliver the action(s)	
<p>Annual DfES Grant: £332,835 (2006/7) to support Secondary Strategy Staff and administration costs</p> <p>Additional targeted support provided by central inspection team</p>	
Risk(s) to achievement	
<p>Loss of staff</p> <p>Restructuring</p> <p>Gender imbalance in cohort</p>	
Risks mitigated by	
<p>Monitoring of pupil progress.</p> <p>Early intervention strategies for pupils falling behind</p> <p>Schools provide end of year progress information via teacher assessments (May/June)</p>	

Roles & responsibilities

Operational Lead – lead officer	
Support/Facilitator -Improvement Manager	
Data owner for PI	

Indicator: HCS 35a Absenteeism of looked after children**HCS Theme** Children and Young People**HCS Outcome** Children and young people achieve educational, personal, social and physical standards**Council Priority** To maximise the health, safety, economic wellbeing, achievements and contribution of every child, including those with special needs and those in care.**Council Objective** To improve the outcomes for looked after children by increasing school attendance**Judgement** **R** **A** **G****Cabinet Lead:** Cllr Rule **Strategic Lead-HP Board** Neil Pringle (Herefordshire Council)**Council Lead:** Ms Fiennes **Features in:** LAA, LPSA2G, HCS, CP

		00-01	01-02	02-03	03-04	04-05	05-06	06-07	07-08	08-Sep
Herefordshire	Target						9	9	8	7
	Number	26	20	8	13	14	11			
	Percentage	21%	16%	6%	12%	13%	9%			
English Authorities	Top Quartile	7%	8%	8%	9%	10%				
	Median	11%	12%	11%	12%	12%				
	Bottom Quartile	15%	16%	15%	16%	15%				

The number children looked after by Herefordshire continuously for at least 12 months during the previous year missing 25 days or more for any reason.

Action(s) required to achieve the target (including key milestones)	Progress against action/resource/risk/mitigation/budget:
<p>ELSS attendance monitoring officer to commence bi weekly attendance collection from primary schools. Sept 2006</p> <p>Members of EWS to raise profile of service in schools via assemblies, leaflets etc. To form part of SLA with each school. To be reviewed termly.</p> <p>Principal officer EWS invited to speak at Foster Forum</p> <p>Use LPSA2 funding to recruit an additional EWO from September 2006. Review effectiveness on annual basis.</p> <p>Use LPSA2 funding to appoint an attendance-monitoring officer within ELSS.</p> <p>Monthly meetings with other colleagues / services monitoring attendance data to assess</p>	<p>Data collection commenced. A member of ELSS follows up children for whom attendance is a concern.</p> <p>Creating extra posters for distribution during August 2006</p> <p>Foster Forum 13th October 2006</p> <p>Post advertised, interviews held appointee commences on September 1st 2006.</p> <p>Agreed at recent policy review and dates set. Meetings have taken place.</p>

effectiveness of actions.	Meetings have taken place.
Action(s) required to achieve the target (including key milestones)	Progress against action/resource/risk/mitigation/budget:
ELSS to establish a system of recording and tracking the attendance of all looked after children and young people	System established June 2006
ELSS team members to discuss attendance with schools, carers and social workers to raise the awareness of the LPSA target and need for care and vigilance when appropriate opportunities arise.	ELSS/PEWO to present at a foster forum- Oct 06
Resources required to deliver the action(s)	
Attendance Monitoring Officer required	Attendance Monitoring Officer started 17 th May.
Certificates and reward vouchers to reward attendance to be ordered	Certificates ordered July 2006. Voucher orders to be placed October 2006
Risk(s) to achievement	
<p>Unexpected absence due to ill health or exclusions from school cannot be anticipated</p> <p>Delays in school admission particularly when moving out of county- e.g. when placed for adoption.</p> <p>Holidays taken in term time.</p> <p>Time lost during school transition, particularly for children placed for adoption</p> <p>Inability to collect data from all schools in the same format and using the same absence coding structure</p>	<p>Carers prompted to contact ELSS or EWS to support at Foster Forum talk</p> <p>Discussion with Adoption manager to take place a.s.a.p.</p> <p>Resources manager has included guidance relating to this in the Fostering Handbook</p> <p>Discussion with Childcare managers to take place a.s.a.p.</p> <p>Standardised format use becoming more frequent</p>
Risks mitigated by	
<p>Close monitoring of the LAC cohort with very high-risk group and CYP causing concern.</p> <p>Access to home tutorial or Hospital school with long-term sickness.</p> <p>Liaison with Social Inclusion officer where at risk of exclusion.</p> <p>Support from colleagues in EWS</p> <p>Visits from family social worker or family support where discerned</p>	<p>Carried out by monitoring officer on a bi-weekly basis and followed up by team members</p> <p>Regular meetings to discuss issues and concerns</p>
Budget and financial performance	
£10k per annum for three years to include new post and certificates and rewards for attendance.	

Roles & responsibilities

Operational Lead – lead officer	
Support/Facilitator -Improvement Manager	
Data owner for PI	

Indicator:	HCS42a British Crime Survey comparator crimes
HCS Theme	Safer and stronger communities
HCS Outcome	Reduced levels of, and fear of, crime, drugs and anti-social behaviour
Council Priority	Reduce crime, the harm caused by illegal drugs and to reassure the public reducing the fear of crime.
Council Objective	To reduce British Crime Survey (BCS) Comparator Crime Figures by 2007-08

Judgement	R	A	G
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Cabinet Lead:	Clr Stockton	Strategic Lead-HP Board	West Mercia Constabulary
Council Lead:	Ms Fiennes	Features in:	LAA, HCS, CP

Performance:

04/5 6207

05/6 6002

06/7 -

Apr 530 May 480 Jun 514 Jul 490 Aug 558 Sep 584 Oct 621

Nov 554

Year to date total - 4331

To reduce outturns by 15% by 2007/08.

Baseline 6909 (03/4)

Targets

06/07 5986

07/08 5872

Action(s) required to achieve the target (including key milestones):	Progress against action/resource/risk/mitigation/budget:
<p>Implementation of the Herefordshire Crime, Disorder and Drugs Reduction Strategy 2005-08 as follows:</p> <ul style="list-style-type: none"> - Recruit Marketing Officer to promote work of partnership, deliver crime reduction and harm minimisation messages – in post by September. - Recruit Community Development Workers (2) to engage with the community and enable them to tackle community safety issues – by September. - 3 month radio campaign to promote Domestic Violence Helpline, Road Safety and Zig Zag (young people's drug service). - Drug Intervention Programme – assessment to be carried out on 60% of adults with whom 	<p>1 Community Development post already started. There has been a considerable delay due to team restructure. This is now moving forward, issues around staff contracts with partners agencies have been resolved and so progress can be made. Recruiting in new year, expect to have posts filled February 2007.</p> <p>Radio campaign completed on 31st July 2006.</p> <p>100% have received assessment by the Drug Intervention Programme. (Jul – Sept results,</p>

<p>initial contact is made and who are not already on the DIP caseload.</p> <ul style="list-style-type: none"> - Drug Intervention Programme – Direct 95% of adults on the caseload into treatment. - Promote services of DASH (adult Drug Treatment service) and at key locations in county. <p>Review progress against outturn and agree remedial action – Mar 07</p>	<p>delay in data reports from H.Office)</p> <p>Achieved to date 89.5%. (Jul – Sept results, delay in data reports from H.Office)</p> <p>Developing a leaflet for promoting drug services to clients. Due to be printed early in the new year and then distributed.</p> <p>National Drug Treatment Monitoring System report due out in Aug 06. Positive report, performance good against targets.</p> <p>Next report due January 2007.</p>
Resource required to deliver the action(s)	
Herefordshire Community Safety and Drugs Partnership team and police Community Safety team, plus partner agency staff	See all other templates for progress reports.
Risk(s) to achievement	
As per details on other templates	See all other templates for progress reports.
Risks mitigated by	
As per details on other templates	See all other templates for progress reports.

Roles & responsibilities

Operational Lead – lead officer	
Support/Facilitator -Improvement Manager	
Data owner for PI	

Indicator: HCS 42b **No. of criminal damage incidents**

HCS Theme Safer and stronger communities

HCS Outcome Reduced levels of, and fear of, crime, drugs and anti-social behaviour

Council Priority To sustain vibrant and prosperous communities, including by providing more efficient, effective and customer-focused services, clean streets and emergency planning

Council Objective To reduce the number of criminal damage incidents in Herefordshire

Judgement

R

A

G

Cabinet Lead: Cllr Stockton

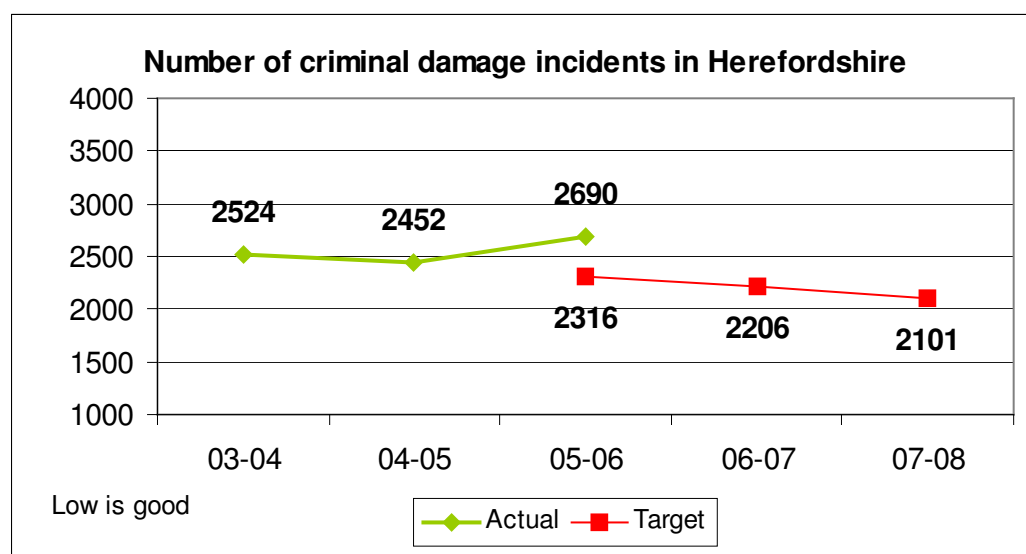
Strategic Lead-HP Board

West Mercia
Constabulary

Council Lead: Ms Fiennes

Features in:

LAA, LPSA, CP



Criminal damage is one of the major factors affecting the quality of life in communities

The number of criminal damage incidents

Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	YTD
252	211	245	211	254	266	294	296					2029

Action(s) required to achieve the target (including key milestones)	Progress against action/resource/risk/mitigation/budget:
<p>Establish sub-group of Anti-social Behaviour Group to tackle this area, by July, working with StreetScene</p> <p>Carry out hotspot analysis using police and environment data, by July</p>	<p>Sub group established.</p> <p>Hotspot analysis completed, however no pattern emerged or concentration of crimes.</p>

<p>Develop action plan, by August</p> <p>Introduce team of Ward Officers, by September – led and managed by Police</p> <p>Introduce tasking for Community Development Worker, via ASB Group, and link in with Ward Officers, by August</p> <p>Work with the police to set up PACT (Partners and Communities Together) meetings across county, as part of Local Policing Project, by October - led and managed by Police</p> <p>Recruit Community Development Workers (2) to engage with the community and enable them to tackle community safety issues – by September</p> <p>To track progress on agreed performance targets with police, on a quarterly basis Re-establish graffiti database between environmental services and the police , to aid hotspot analysis and evidence gathering.</p>	<p>Action plan delayed due to no identified hotspots. Establishing best practise around the country to assist.</p> <p>There has been a delay in police recruitment due to lack of training courses available. This has now been rectified and recruitment processes started.</p> <p>Tasking of the Community Development worker is currently being formalised; it is however working in an informal manner now.</p> <p>The PACT process is being developed across the county and will assist us tackling this area of work; any areas of concern highlighted through this route will tasked via Anti-social Behaviour Group</p> <p>One worker has been recruited, other delayed due to team restructure.</p> <p>Anti-social behaviour group is regularly reviewing performance and analysing data to identify trends and then tasking. The re-establishment of the database is being investigated, however staff shortages may have a negative impact, as the post holder responsible has been seconded elsewhere. This is being pushed forward.</p>
Resource required to deliver the action(s)	
<p>LPSA2 Funding from a range of organisations to include LPSA2 funding</p> <p>Co-operation of staff from other agencies and officers to drive work forward</p> <p>Additional staffing (Community Development Workers and Ward Officers)</p>	
Risk(s) to achievement	
<p>Community apathy to engagement work</p> <p>Delays in employment</p> <p>Relationship with key stakeholders</p>	
Risks mitigated by	
<p>Wide ranging publicity campaign to ensure awareness of partnership work and key educational / prevention messages</p> <p>A robust performance management framework</p> <p>Maintain a positive relationship with key stakeholders</p>	

Roles & responsibilities

Operational Lead – lead officer	
Support/Facilitator -Improvement Manager	
Data owner for PI	

Indicator:	HCS 42c Numbers of all recorded crime (overall crime rate)
HCS Theme	Safer and stronger communities
HCS Outcome	Reduced levels of, and fear of, crime, drugs and anti-social behaviour
Council Priority	Reduce crime, the harm caused by illegal drugs and to reassure the public reducing the fear of crime.
Council Objective	To reduce British Crime Survey (BCS) Comparator Crime Figures by 2007-08

Judgement	R	A	G
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Cabinet Lead:	Cllr Stockton	Strategic Lead-HP Board	WMC
Council Lead:	Sue Fiennes	Features in:	LAA HCS CP

Baseline 2005/6 – 12,034 Target 2005/6 – 11,418 Performance – 11,535 2006/7 – 10,831 2007/8 – 10,229	Actual performance 06/7 – Apr 984 May 961 Jun 971 Jul 971 Aug 1133 Sep 1045 Oct 1018 Nov 1036 Year to date total - 8119
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Action(s) required to achieve the target (including key milestones)	Progress against action/resource/risk/mitigation/budget:
Implementation of the Herefordshire Crime, Disorder and Drugs Reduction Strategy 2005-08 as follows: <ul style="list-style-type: none"> - Recruit Marketing Officer to promote work of partnership, deliver crime reduction and harm minimisation messages – in post by September. • Recruit Community Development Workers (2) to engage with the community and enable 	Job description has been developed and currently being evaluated. Aiming to recruit Feb 07. 1 Community Development post already started. There has been a considerable delay due to team

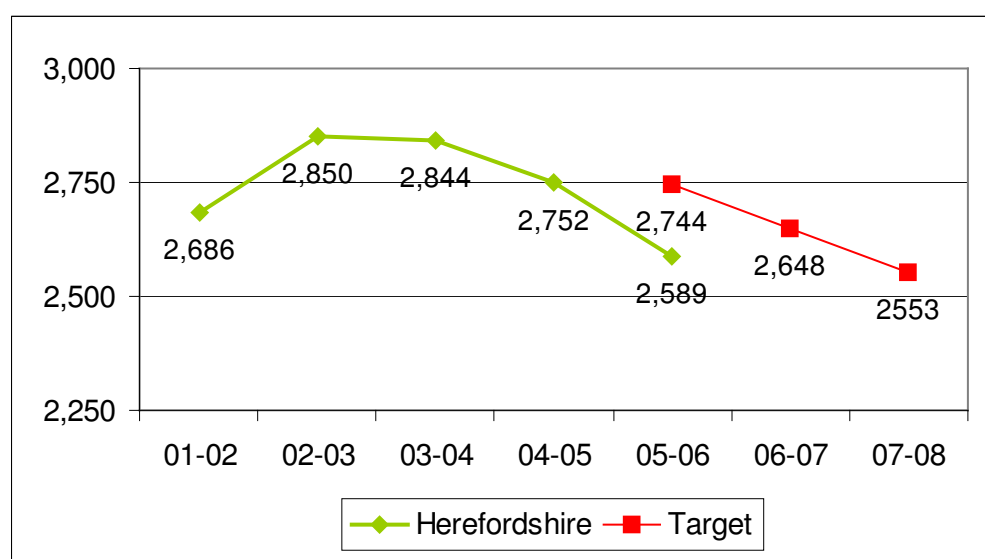
<p>them to tackle community safety issues – by September.</p> <ul style="list-style-type: none"> - 3 month radio campaign to promote Domestic Violence Helpline, Road Safety and Zig Zag (young people’s drug service). - Drug Intervention Programme – Direct 95% of adults on the caseload into treatment. - Promote services of DASH (adult Drug Treatment service) and at key locations in county. <p>Review progress against outturn and agree remedial action – Mar 07</p>	<p>restructure. This is now moving forward, issues around staff contracts with partners agencies have been resolved and so progress can be made. Recruiting in new year, expect to have posts filled February 2007.</p> <p>Radio campaign completed on 31st July 2006.</p> <p>89.5% previously received assessment by the Drug Intervention Programme. 90% now achieved. 100% of the client caseload is engaged with treatment.</p> <p>(Jul – Sept results, delay in data reports from H.Office)</p> <p>Developing a leaflet for promoting drug services to clients. Due to be printed early in the new year and then distributed.</p> <p>National Drug Treatment Monitoring System report due out in Aug 06. Positive report, performance good against targets. Next report due January 2007.</p>
Resource required to deliver the action(s)	
Herefordshire Community Safety and Drugs Partnership team and police Community Safety team, plus partner agency staff	See all other templates for progress reports
Risk(s) to achievement	
As per details on other templates	See all other templates for progress reports.
Risks mitigated by	

Roles & responsibilities

Operational Lead –	
Support/Facilitator-	
Data owner for PI	

Indicator: HCS 45 Number of Violent Crimes**HCS Theme** Safer and stronger communities**HCS Outcome** Reduced levels of, and fear of, crime, drugs and anti-social behaviour**Council Priority** To sustain vibrant and prosperous communities, including by providing more efficient, effective and customer-focused services, clean streets and emergency planning**Council Objective** To reduce the number of violent crimes in Herefordshire**Judgement****R****A****G****Cabinet Lead:** Cllr Stockton**Strategic Lead-HP Board**West Mercia
Constabulary**Council Lead:** Ms Fiennes**Features in:**

LAA, LPSA, CP



LPSA2G Target 7

Target

2648 (06/07)

2553 (07/08)

Baseline 03/4 2844

Performance 04/05

2752

Performance 05/06

2589 (target 2744)

The number of violent crimes in Herefordshire (LPSA2G)

Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Y.T.D.
220	204	203	219	239	261	242	236					1824

Action(s) required to achieve the target (including key milestones)	Progress against action/resource/risk/mitigation/budget:
1. Work with police to introduce an Alcohol Co-ordinator, by September – led and managed by police Develop work action plan for post holder, by September	1. Alcohol Co-ordinator now in post, induction and initial training completed. Work programme currently being developed by line manager

<p>2. a) Continuation of the Alcohol Referral Scheme, on-going – led by Partnership, PCT and Police</p> <p>b) Improve effectiveness of bail condition part of referral scheme, by September – led by police</p> <p>c) Improve relationships with A&E, by September – led by PCT</p> <p>d) Review Alcohol Referral Scheme, September - Partnership, PCT and Police</p> <p>3. Introduction of Night-time Economy Beat Manager, by September – led and managed by police</p> <p>Develop work action plan for post holder, by September</p> <p>4. Develop CCTV service to provide improved monitoring for evidence gathering</p>	<p>2. a) Alcohol Referral Scheme has recently been reviewed.</p> <p>b) Bail conditions are being used more effectively, after custody staff received training and support and planning a trial with a Fixed Penalty Scheme referral for 6 months, from 1st November 2006.</p> <p>c) Meetings been held with A&E staff. Assessing alternative ways of relationship building, considering new post to act as a conduit.</p> <p>d) Alcohol Co-ordinator is monitoring all referrals and assessing effectiveness of scheme.</p> <p>3. Delays in recruitment by West Mercia.</p> <p>4. Installation of new camera in Union Street started. Commercial Street BT Fibre Optic links have been replaced. Questionnaire sent to all Heads Of Service to assess where CCTV can assist across the council.</p>
Resource required to deliver the action(s)	
<p>LPSA2</p> <p>Officer and other agency staff time to support developments</p> <p>Additional staff (Alcohol Co-ordinator and Night-time Economy Beat Manager)</p>	
Risk(s) to achievement	
<p>Delays in employment</p> <p>Changes to PCT</p> <p>Relationship with partners</p>	
Risks mitigated by	
<p>Maintain a positive relationship with key stakeholders</p> <p>A robust performance management framework</p>	

Roles & responsibilities

Operational Lead – lead officer	
Support/Facilitator -Improvement Manager	

Data owner for PI	
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Indicator **HC 74b** **Adults with mental health problems helped to live at home per 1,000 population aged 18-64**

HCS Theme

HCS Outcome

Council Priority

To enable vulnerable adults to live independently and, in particular, to enable many more older people to continue to live in their own homes

Council Objective

To maximise the independence of vulnerable adults

Judgement

R

Cabinet Lead:

Cllr Mrs Barnett

Strategic Lead-HP Board

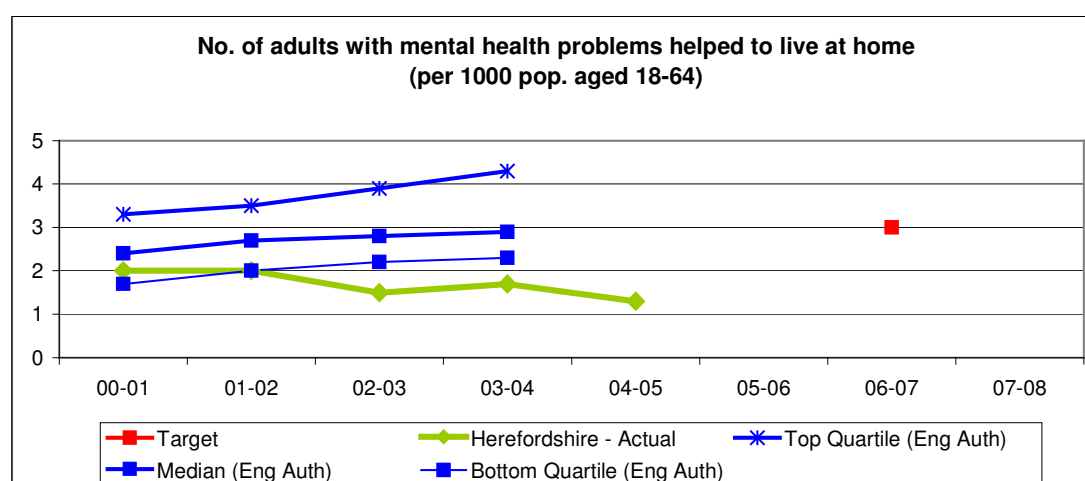
N/a

Council Lead:

Mr Hughes

Features in:

CP



Low level care received at home can prevent or postpone a person needing more intensive care packages or residential care

Target:

06/07 = 4.0

Out Turn = 37

Action(s) required to achieve the target (including key milestones)	Progress against action/resource/risk/mitigation/budget
<ol style="list-style-type: none"> Expand early intervention service and carers' support. Expand deliberate self-harm service Ensure all activity is recorded on Clix, as well as CPA (activity is currently under-reported) Housing strategy to be developed. 	<p>Position on hold as part of PCT cost improvement plan (CIP)</p> <p>This has been expanded through the Crisis Assessment & Home Treatment Team providing 24/7 availability to A&E</p> <p>Need to review roles of admin' staff to input CPA data into CLIX</p> <p>Housing Strategy is currently being developed, anticipated to be finalised early in the new year</p>

Resource required to deliver the action(s)	
Additional resource identified through PCT LDP Crisis team to expand their role to incorporate deliberate self-harm Clix clerk to be deployed 2 days per month to reconcile data	Review of CIP to release savings and re-visit CIP
Risk(s) to achievement	
Resource could be withdrawn due to PCT budget recovery plan Non-identified Recruitment timescales could mean data not fully reconciled by out-turn in March 2007. Affordable housing not easily available.	Formal consultation required with staff to incorporate Crisis and Deliberate Self-Harm teams into one team
Risks mitigated by	
CMHT absorbs the role Action plan developed to prioritise activities Work with Strategic Housing to develop alternative options	

Roles & responsibilities

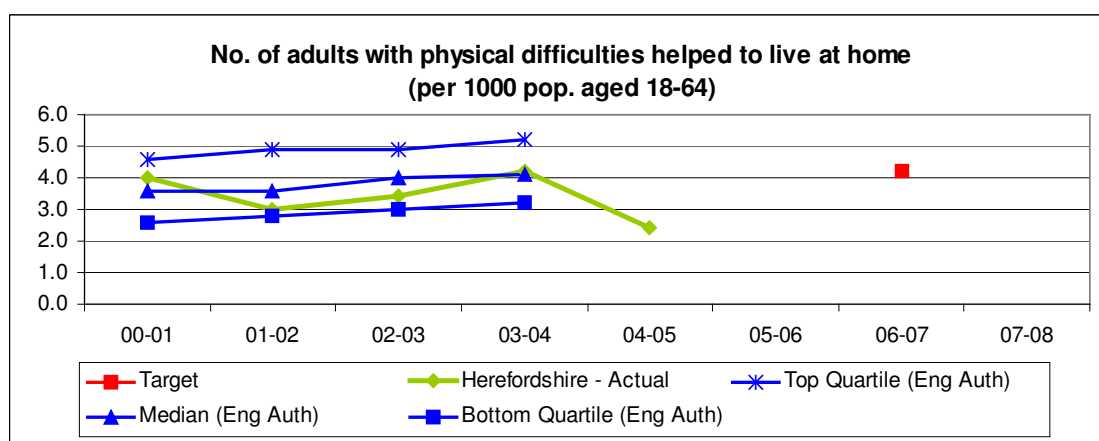
Operational Lead	
Support/Facilitator	
Data owner for PI	

Indicator: **HC 74c Adults with physical disabilities helped to live at home**
HCS Theme N/a
HCS Outcome N/a
Council Priority To enable vulnerable adults to live independently and, in particular, to enable many more older people to continue to live in their own homes
Council Objective To maximise the independence of vulnerable adults

Judgement R **A** **G**

Cabinet Lead: Cllr Mrs Barnett **Strategic Lead-HP Board** N/a

Council Lead: Mr Hughes **Features in:** CP



- Low level care received at home can prevent or postpone a person needing more intensive care packages or residential care

Target 06/07 = 5.0

Adults with physical disabilities helped to live at home per 1,000 population aged 18-64

Action(s) required to achieve the target (including key milestones)	Progress against action/resource/risk/mitigation/budget
<p>1. Implement the Best Value Review Action Plan</p> <p>1.1 Key Milestones: Meet the key milestones identified in the Best Value Review Action Plan. Ongoing. A Best Value Action Plan has been developed and the Implementation Group works to the key milestones identified in the plan.</p> <p>2. Modernisation of Day Opportunities, moving from a building based approach to a community-based model. Promoting employment, training and volunteering opportunities.</p>	<p>Community Equipment</p> <p>Transport and programme board have been signed off by the group</p> <p>Involving people training for consultation</p>

2.1 Key Milestone: Strategic Plan and Commissioning Strategy to be completed by December 2006. Change Programme to be commenced March 2007.

3. Promote flexibility within Direct Payments, through the setting up of an Operational Group and the development of team plans and targets to increase the uptake of Direct Payments.

3.1 Key Milestone: is to develop reference group and operational group by July 2006. How will these groups promote flexibility? Will they produce a plan or strategy?

4. Re-model transport provision.

4.1 Key Milestone: to implement Transport Strategy groups findings and recommendations December 2006.

5. Implement Assistive- Technology Projects.

5.1 Key Milestone: Implement 3 pilot projects September 2006.

6. Maximise welfare benefits, through the development of a model for partnership delivery with the Voluntary Sector. Outcome based SLA's to be agreed.

6.1 Key Milestone: Current SLA's reviewed and services re-commissioned, September 06.

7. Development of a Prevention Strategy to be delivered in partnership with the Voluntary Sector.

Work ongoing to feed into the commissioning strategy

Operational Group will meet second time in December.

Reference Group members identified and meeting being arranged for new year

Operational Group will meet second time in December.

Reference Group members identified and meeting being arranged for new year

Transport planning post agreed and Job Description and Person Specification drafted.

Supporting People Bid drafted to include an independent travel training services.

Criteria redrafted for transport.

Charging to be reviewed as part of improvement plan.

Transport planning post agreed and Job Description and Person Specification drafted. Supporting People Bid drafted to include an independent travel training services. Criteria redrafted for transport. Charging to be reviewed as part of improvement plan.

Project fully operational. Currently 28 referrals being processed,

Joint Team Manager appointed and Customer Service Officer post appointed.

<p>7.1 Key Milestones: Prevention Strategy and Commissioning Plan drafted by November 2006. Introduction of services January 2007.</p> <p>8. Develop Supporting People services.</p> <p>8.1 Key Milestone: Commissioning of new services through approved providers by Oct 2006, to include handy persons schemes, reablement services and telecare. These new service won't have an effect on this year's target if the deadline is the end of the year.</p> <p>9. Develop advocacy services.</p> <p>9.1 Key Milestone: Benchmark existing services September 2006. Draft service specification by December 2006.</p>	<p>This work is now part of the transformation board.</p> <p>Handy Persons Scheme proposal completed and to be taken to the next Supporting People Commissioning Board.</p>
Resource required to deliver the action(s)	
<p>Physical Disabilities Team Manager in post.</p> <p>Project Manager identified to lead modernisation of Day Opportunities and Transport</p> <p>Telecare Grant</p> <p>Joint Team Management</p> <p>Investment needed for advocacy services.</p>	
Risk(s) to achievement	
<p>Budgetary Pressures</p> <p>Excess demand</p> <p>Failure to award Supporting People Funding</p> <p>Resistance to manage change.</p>	
Risks mitigated by	
<p>Appropriate eligibility Criteria</p> <p>Working with providers to develop the market</p> <p>Change management programme- awareness raising training</p>	

Roles & responsibilities

Operational Lead	
Support/Facilitator	
Data owner for PI	