

BE THE BEST BOROUGH IN THE NORTH

**2017-18 End of December
Corporate Performance Report**

Summary

This report provides the End of December performance for 2017/18. The 15 Super Key Performance Indicators (SKPIs) are reported along with Northern Borough rankings. Calderdale is currently placed 7th overall against the 20 Northern Boroughs.

During this reporting period, there have been data releases for 3 quarterly indicators:-

- **Total Crime** - There has been a slight decrease in Total Crime (5432) this quarter which is the lowest result this reporting year.
- **Adult Social Care** -There has been a decrease in the proportion of older people in receipt of long term adult social care from 4.29% in Q2 2017/18 to 4.02%.
- **Employment Rate** – we have reviewed the reporting frequency of this indicator and will report quarterly in future. As such, taking the latest data release for Q2 (76.3) we are on target and are currently ranked 4th against the boroughs in the north.

During this reporting period, there have been data releases for 4 of the 15 annual Super Key Performance Indicators which have resulted in:-

- **Foundation Stage education (Level of Development)** - The latest data release shows an increase in the percentage of children achieving a good level of development in the Foundation Stage Profile from 67.5% to 68.3%. However, despite this increase there has been a change in ranking against the boroughs in the north from 11th to 13th and we are performing slightly below regional and national averages (68.8% and 70.7% respectively).
- **Average Progress 8 Score Per Pupil** – Calderdale, along with statistical neighbours and regionally, have seen an increase in results in 2017. This result maintains top quartile ranking against the boroughs in the north (ranked 4th) and performance is in line with target.
- [Median Gross Weekly Pay](#) – There has been a decrease in the median gross weekly earnings for Calderdale residents (from £522 in 2016 to £503 in 2017).
- **Per Capita CO2 emissions** – The latest data relates to 2015, as it is two years retrospective, with performance slightly better than target. Since 2005 we have seen an overall reduction in emissions from 7.16 tonnes per capita down to 4.8 tonnes per capita. We remain ranked 14th against boroughs in the north.

From the wider basket of Key Performance Indicators, please note the following 5 exceptions;

Page 5 [Under 75 mortality rate from cardiovascular diseases considered preventable](#)

Page 6 [Educational Achievement Inequality Gaps](#)

Page 7 [Social care-related quality of life](#)

Page 8 [Proportion of older people \(65 and over\) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services \(effectiveness of the service\)](#)

Page 9 [Percentage of children who cease to be looked after where the outcome reason is 'adopted'](#)

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Priority	SKPI	What Does Good Performance Equal	Latest Score	Average	Previous Boroughs in the North Ranking (20)	Latest Boroughs in the North Ranking (20)	Ranking Trend	Top Performing 3 Boroughs in the North
Reduce Inequalities	Life Expectancy (Males) (2013-15)	High	78.6	78	4	4	↔	Trafford (79.9) Stockport (79.7) Kirklees (78.7)
	Life Expectancy (Females) (2013-15)	High	82.1	81.7	6	6	↔	Trafford (83.5) Kirklees/North Tyneside (82.4) Sefton (82.2)
	Percentage of physically active and inactive adults - active adults (2015/16) (post 2015 survey methodology)	High	62.4	61.9		10		North Tyneside (67.4) Stockport (67.1) St Helens (66.1)
	Proportion of older people in receipt of long term adult social care (65+) (2016/17) **	Low	4.18	4.92	7	4	↑	Wigan (3.58) Wirral (3.66) Trafford (3.77)
	Percentage achieving a good level of development (Foundation Stage Profile) (2017) *	High	68.3	68.8	11	13	↓	Trafford (73.0) Rotherham / South Tyneside (72.1) Stockport (71.6)
	Total Crimes (Q3 2017/18) ** (Annual benchmark against 2016/17)	Low	5432	20479		11		Knowsley (9644) South Tyneside (12543) St Helens (13506)
Grow the Economy	Average Progress 8 score per pupil (2017) *	High	0.01	-0.15	4	4		Trafford (0.16) Stockport (0.07) Rotherham (0.06)
	NVQ level 4+, aged 16 to 64 (2016)	High	33.9	31.2	4	6	↓	Trafford (51.9) Stockport (41.1) Bury (39.1)
	Median gross weekly pay (2017) *	High	503.3	509.4	5	10	↓	Trafford (602) Stockport (565.4) North Tyneside (545.5)
	Employment Rate (Q2 2017/18) **	High	76.3	72.2	5	4	↑	Trafford (77.8) Stockport (77.7) North Tyneside (76.8)
	Percentage of Adults in Calderdale with Digital Skills (2016/17)	High	77	77	4	8	↓	Trafford/Bury/Stockport (79)
Build a Sustainable Future	Number of new dwellings completed as a percentage of total dwellings in Calderdale (2014/15)	High	0.3	0.4	13	10	↑	Doncaster/Knowsley (0.7) Bury/South Tyneside (0.6)
	Principal roads where maintenance should be considered (2015/16)	Low	4	4	12	11	↑	Doncaster/Gateshead/Knowsley/Sefton/Wirral (2)
	Per capita CO2 emissions in the LA area (2015) *	Low	4.8	4.4	14	14	↔	Oldham (3.5) Tameside (3.6) South Tyneside / Wirral (3.8)
	Unacceptable levels of litter	Low	10	N/A				No comparator data available
	Proportion of residents using parks and green spaces (2016/17)	High	82.5	N/A				No comparator data available

Northern Boroughs; Barnsley, Bolton, Bury, Calderdale, Doncaster, Gateshead, Kirklees, Knowsley, North Tyneside, Oldham, Rochdale, Rotherham, Sefton, South Tyneside, St Helens, Stockport, Tameside, Trafford, Wigan, Wirral

* Indicators which have had an annual data release

** Indicators which have had a quarterly data release



Top quartile



Second quartile



Third quartile



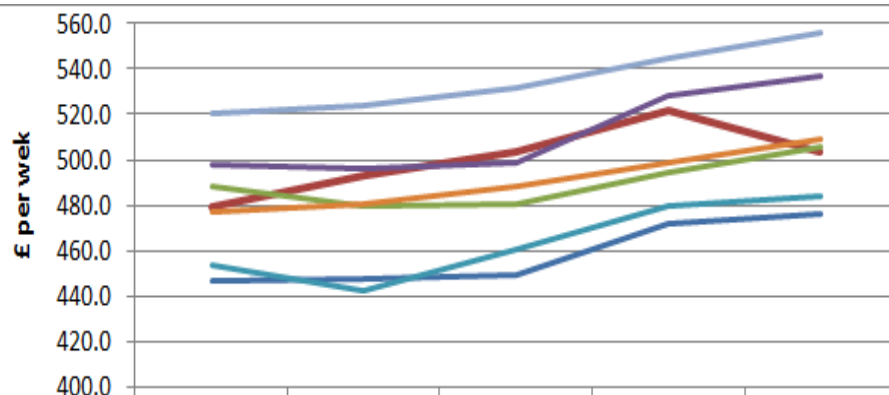
Fourth quartile

Median Gross Weekly Pay For Full Time Workers

Q3 2017/18



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What are we doing to improve?

Work is underway within Leeds City Region around new grants for capital investment for local businesses to build their confidence in growth during the transition of understanding the full implications of Brexit. Work is still developing around inspiring local residents to grow their skills and qualifications through European funded programmes and the authority's core budget. The Digital Strategy is being implemented which will grow the opportunities for residents to use digital technology and develop skills which will lead to higher paid opportunities. We are establishing links with Leeds Beckett University enabling new businesses to start and grow offering scope for new employment which exceeds the £50,000 salary.

Key Partners

Collaborative working with Calderdale Council and Leeds Beckett University will allow easier access to skill development and enable curriculum to be relevant to future economic growth. Working with the Health sector will be a key area to address skill shortage and offer opportunities for sustainable careers. Calderdale and Kirklees Manufacturing Alliance are working closely with the authority to help with succession planning for an ageing workforce and to grow digital skills.

What will it take to turn the curve?

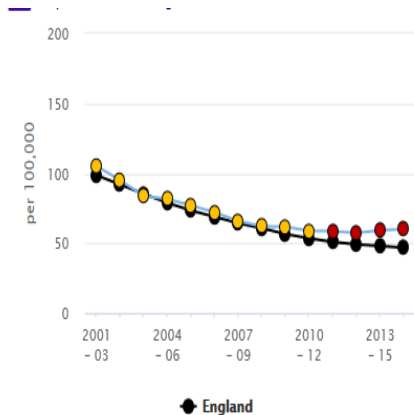
Promotion of future careers which offer higher paid opportunities need to be embedded within our schools and college to promote the importance to help recruit future workforce. Development of programmes to support people over the age of 25 in developing diverse and transferrable skills will help residents on low paid, low skilled occupations to develop. Work to be investigated around zero hour contracts and how employers can be encouraged to establish better working practices to offer stability and career progression.

Story behind the baseline

There has been a decrease in the median gross weekly earnings for Calderdale residents (from £522 in 2016 to £503 in 2017). This has resulted in a change in ranking against the boroughs in the north from 5th to 10th. Businesses have reported that the uncertainty of Brexit and lack of Government policy are a key influence in future investment. Businesses have been implementing efficiencies and using different packages of incentives which are not always around wage growth. Universal credit is now implemented across Calderdale and is helping residents on low wages to see growth although residents who earn between £25,000 and £50,000 are seeing wage freezes rather than growth.

Under 75 Mortality Rate From Cardiovascular Diseases Considered Preventable (Persons)

Q3 2017/18



Recent trend: -

Period	Count	Value	Lower CI	Upper CI	Yorkshire and the Humber	England
2001 - 03	449	105.3	95.7	115.5	107.6	98.6
2002 - 04	411	95.1	86.0	104.8	98.3	91.9
2003 - 05	370	83.9	75.5	92.9	91.2	85.3
2004 - 06	368	81.7	73.5	90.6	86.0	78.9
2005 - 07	353	77.1	69.2	85.6	80.9	73.4
2006 - 08	336	72.1	64.5	80.3	77.0	68.9
2007 - 09	309	65.9	58.7	73.7	72.0	64.3
2008 - 10	297	62.1	55.1	69.6	69.2	60.7
2009 - 11	302	61.7	54.9	69.2	64.8	56.6
2010 - 12	297	58.9	52.4	66.1	61.3	53.5
2011 - 13	303	58.6	52.2	65.7	57.8	50.9
2012 - 14	305	57.4	51.1	64.2	56.4	49.2
2013 - 15	317	59.3	52.9	66.2	55.3	48.1
2014 - 16	329	60.1	53.7	66.9	54.0	46.7

Source: Public Health England (based on ONS source data)

Data development agenda

We need to examine this more closely and look at the detail of the numbers to see if there are any patterns compared to previously, e.g. gender, ethnicity, deprivation, and possible reasons for the increase. Public health is already undertaking some work around CVD with Calderdale CCG and this will help inform the further analysis required.

Key Partners

- Primary care / CCG
- Stop Smoking Service
- NHS England (AAA Screening)

Story behind the baseline

Whilst there have been huge reductions since 2000 across England and Calderdale, there has been a levelling off in improvement and indeed a slight increase (although not statistically significant). The detail behind this indicator suggests that it includes all deaths from Ischaemic Heart Disease (IHD), Deep Vein Thrombosis with pulmonary embolism and aortic aneurysm and dissection. These are largely preventable by public health interventions but rely on concerted whole system action to continue to reduce smoking prevalence, ensure hypertension, diabetes and other risk factors are identified and managed optimally in primary care including timely secondary care and uptake in screening (for Abdominal Aortic Aneurysms (AAA)).

There is a strong correlation between under 75 cardiovascular disease (CVD) and deprivation. Risk factors for these conditions include tobacco use; high blood pressure; hardening of the arteries; trauma and infection (in the case of AAA) and some hereditary factors.

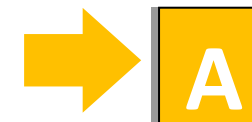
What will it take to turn the curve?

We need to work with colleagues in primary and secondary to ensure that the identification and management treatment of high blood pressure (hypertension), CVD, diabetes, etc is optimised. We need to ensure that we continue to work around reducing smoking prevalence and that people are taking up the offer of NHS Checks. We know that physical activity has the ability to improve health and reduce the incidence of CVD and IHD.

Until we have a greater understanding of the fuller picture and the issues behind the numbers we are not in a position to further identify what it will take to turn the curve.

Educational Achievement Inequality Gaps

Q3 2017/18



		2014	2015	2016	2017	Trend
% inequality gap in achievement across all the Early Learning Goals	Calderdale	38.8%	33.9%	33.4%	33.4%	
	Comparator	34.4%	32.9%	32.0%	31.6%	
% Inequality gap in Level 2 qualification achievement rate by age 19	Calderdale	24.5%	19.5%	19.4%		
	Comparator	20.0%	17.6%	20.0%		
% Inequality gap in Level 3 qualification achievement rate by age 19	Calderdale	28.2%	27.1%	28.2%		
	Comparator	34.4%	32.9%	32.0%		

Story behind the baseline

Early Years Foundation Stage (EYFS)

At EYFS Calderdale results have continued to improve over the past 3 years, however the good level of development still remains lower than national average. This appears to be a West Yorkshire wide issue, of which Calderdale is the top ranked Local Authority. (LA).

The percentage gap between all children and the bottom 20% remained static between 2016 and 2017. This compares to a regional reduction of 0.3%, with Yorkshire and Humber's gap equal in 2017 to Calderdale's. Nationally the gap increased slightly by 0.3%, however the national gap remains narrower than either the region or Calderdale's by 1.7%.

Level 2 and 3 at age 19

In 2016, performance at level 2 for the cohort previously eligible for free school meals was slightly below the national comparison, but higher than both statistical neighbours and the rest of the Yorkshire and Humber region. The extent of the gap was due to the performance of the non-free school meals group in Calderdale, emphasising the difference. The level 3 equality gap is constantly narrower than our comparator gap.

Key Partners

LA Early Years, Learning and Childcare Teams, LA School Effectiveness Team, LA Workforce Development Team, Public Health/Healthy Early Years' Service, Schools Early Years and Childcare Providers Children's Centres, Schools and post 16 education providers

How will we improve performance?

Early Years Foundation Stage (EYFS)

Targeted and focused programmes are in place which are challenged and monitored by the Early Years Narrowing the Gap steering group, which is chaired by the Service Manager: Early Years Learning and Childcare and has membership of the key partners.

EYFSP has been confirmed beyond 2018 and this will allow the steering group to continue to monitor progress in closing the gaps, which good progress has already been made for some pupils.

To turn the curve we need to continue with the targeted and focused programmes that we have in place along with robust monitoring to evidence progress and embed the programmes that result in positive outcomes.

Level 2 and 3 at age 19

Calderdale's School Effectiveness Service are working with secondary schools by providing facilitated school cluster networks focused on addressing the inequality gaps at age 19 and that pupil premiums for free school meals students is being spent effectively.



Story behind the baseline

An annual survey is carried out by every council to measure the quality of life of people in receipt of long term support from Adult Social Care. The survey covers people in both community and residential settings. 1,500 surveys are sent out each year in Calderdale and around 450 completed responses are received. This measure uses the responses from 8 questions within the survey to calculate the score. The maximum score is 24.

Nationally in 2016/17 scores ranged from 17.8 to 20.3. In 2014/15 Calderdale was a top quartile performer in all comparator groups. Since then performance has declined whilst comparator group averages remain stable. Calderdale is now in the 3rd quartile across all comparator groups. Nationally 109th out of 152, Regionally 10th out of 15, CIPFA 12th out of 15 and boroughs in the north 13th out of 20.

Key Partners

Adult Social Care and Social Care Providers.

What will it take to turn the curve?

99% of all community based social care clients now receive their support via a support plan and are in receipt of a personal budget. 32% of community clients receive their support via a direct payment. Whilst the mechanisms for providing support have become increasingly flexible and personal this has not been reflected in service users quality of life with performance slipping rather than improving as could have been expected.

Of the 8 questions used to calculate the measure Calderdale scores poorly on questions around choice and control and how people spend their time. Only 33% of people state they have as much choice and control as they would like and only 35% state they are able to spend their time doing the things they want.

Support plans need to be co-produced by workers and service users, empowering people to be creative and flexible and to fully express their choice and control. Throughout the support planning process Adult Social Care need to convey the message to service users that the support planning process allows them to state their desired outcomes and a personal budget should allow those outcomes to be met. The Council needs to be assured that personal budgets are not simply a new payment mechanism for traditional services but they are impacting and improving service users' quality of live.

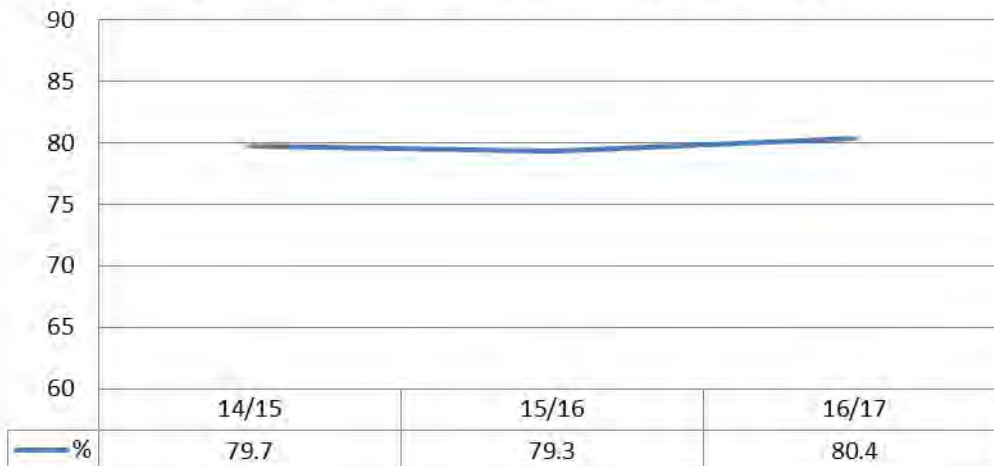
Further market development work needs to take place to ensure that services users are able to access new and increasingly flexible and outcome focused services to ensure support plans can be driven by outcomes rather than services.

Proportion Of Older People (65 and over) At Home 91 days After Discharge From Hospital (Reablement Services)

Q3 2017/18



% of people at home after 91 days



Story behind the baseline

This performance data is calculated annually via the annual Short and Long Term Services (SALT) statutory return, combining data from Calderdale and Huddersfield Foundation Trust (CHFT) and Adult Social Care. The majority of referrals into reablement are made via the community rather than the hospital, there are 102 people included in the 2016/17 cohort on this measure of which 82 were still at home 91 days after being discharged from hospital. Calderdale's performance is consistently around 80%. 2016/17 performance put Calderdale in the 3rd quartile nationally and in the CIPFA comparator group, but in the bottom quartile regionally and against other boroughs in the north.

Data Development Agenda

Further development work and identification of Resources within Calderdale Council and CHFT, is required to allow monitoring to take place of this measure on a quarterly basis.

Key Partners

Reablement is delivered via a partnership between Adult Social Care and CHFT and Calderdale CCG.

What will it take to turn the curve?

Whilst performance is stable there are areas we need to improve. Criteria for acceptance to reablement has been in place for a number of years which has not always been strictly adhered to, due to pressure to move people out of hospital as soon as possible and the social care market often does not have capacity to take cases. As a result people are often referred to and accepted into reablement despite them not meeting the criteria for the service.

Reablement team leaders are working more closely with hospital social work teams to ensure that referrals are appropriate to ensure that only cases where the service can make a difference and increase independence and positively impact outcomes are accepted. Reablement are now taking cases from the hospital 7 days a week to ensure a faster response. Waiting times for Reablement have now reduced from 9 days to 3.

A new specification for managed home care is currently being developed and will go out to tender later in 2018, it is hoped that the new contract will create more capacity in the system to take cases which would have previously been accepted by the reablement service.

All vacancies within the teams have now been filled which allows the team to provide a higher quality of service and allow people to reach their full reablement potential.

These actions should positively impact upon performance of this measure.



% of children who cease to be looked after where the outcome reason is 'adopted'



Story behind the baseline

There is a fall in the percentage of children leaving care through adoption for a variety of interlinking reasons

1. There are a number of children in adoptive placements, where we are awaiting the final order.
2. 14 children were made subject to Special Guardianship orders at end of Q3. This indicates those children who cannot return safely to their birth parents care have been placed with extended family members, affording them permanence within the birth family .
3. There is still some residual effect from the Courts being more hesitant to make placement orders.
4. There have been a small number of children where they have been reunified with their birth family , against the original local authority care plan where the original plan was placement outside the family . We await to see whether these are successful reunifications.

Key Partners

Our key partners are One Adoption, The Children and Family Court Advisory and Support Service, The Courts and the Independent Reviewing Officers.

What will it take to turn the curve?

We are confident that in 2018-2019 we will see an upturn in the numbers leaving care through adoption. Whilst the new regional arrangements have brought about changes in practice, Care Planning remains the responsibility of the local authority.

The recent pilot Ofsted inspection on adoption and permanence found we had robust systems in place to ensure appropriate and timely permanence plans were made for the children in our care, including adoption planning.

We have embedded early permanence placements into our practice in Calderdale, e.g. 3 of the 6 children adopted this year were early permanence placements. This means we are moving children through the system speedily and in accordance with their needs.

We currently have 15 children placed, all of whom will be adopted within the next few months. There are also 7 children subject to a should be placed for adoption date, where we are awaiting final Court hearings. There is a current shortage of adopters, which has the potential to impact on timeliness of placement for older children, however One Adoption is actively recruiting across the region.

As a result of the above we expect performance on this measure to improve in the coming months.