

HEALTH AND HOUSING SCRUTINY COMMITTEE
30 AUGUST 2023

PERFORMANCE INDICATORS QUARTER 4 - 2022/23

SUMMARY REPORT

Purpose of the Report

1. To provide Members with performance data against key performance indicators for 2022/23 at Quarter 4.

Background

2. This report provides performance information in line with an indicator set and scrutiny committee distribution agreed by Monitoring and Coordination Group on 4 June 2018, and subsequently by scrutiny committee chairs. Following agreement at Council on 5 December 2019 to align Scrutiny Committees to the updated Cabinet Portfolios, the indicator set has been re-aligned accordingly.
3. The indicators included in this report are aligned with key priorities. Other indicators may be referenced when appropriate in narrative provided by the relevant Assistant Directors, when providing the committee with performance updates.
4. Thirty-six indicators are reported to the committee, nine of them on a six-monthly basis and twenty-seven annually.
5. Six indicators are reported by both Housing and Leisure Services and twenty-four by Public Health.

Latest information compared to the previous year.

Housing - 2022/23 compared to 2021/22

6. Rent arrears of current Council tenants in the financial year as a % of rent debit increased from 2.68% in 2021-22 to 3.46% in 2022-23. Performance in 2022-23 has reduced slightly compared with previous years but is still within expected levels. Rent collection in the current financial climate continues to be very challenging. Housing Services has continued to provide our tenants with financial support, assisting with benefit claims and budgeting advice. The number of tenants receiving Universal Credit (UC) has continued to increase with over 1,950 of all Council tenants claiming some element of UC. This has impacted on collection rates as UC is paid in arrears, compared to Housing Benefit.
7. The amount of rent collected as a proportion of rents owed on Council homes, including arrears brought forward debit, has decreased slightly from 97.51% in 2021-22 to 95.85% in 2022-23, for the same reasons given above.

8. The average number of days spent in Bed and Breakfast accommodation for people affected by homelessness has seen an increase from 3,697 days in 2021-22 to 7,308 days in 2022-23, reflecting the increased demand for emergency accommodation, where the Council has a statutory relief duty to alleviate homelessness. However, the average length of stay in emergency accommodation has only increased by 1.3 days for each person, demonstrating how well our Housing Services team are coping with the additional demands.
9. The number of positive outcomes where homelessness has been prevented increased from 578 in 2021-22 to 720. Again, this reflects the increased demand for homeless advice and prevention and is an excellent result for our Housing Services team.
10. The average number of days to re-let empty Council dwellings has increased from 19 days in March 2022 to 71 days in March 2023. However, taking the average re-let time for the whole year, these have increased from 48 days in 2021-22 to 56 days in 2022-23. This is just above the regional Housemark average of 48 days. Resourcing difficulties in our Repairs and maintenance team continue to impact on performance but these are currently being reviewed to ensure that we can improve our re-let times in 2023-24.
11. The percentage of dwellings without a gas service within 12 months of the last service date has increased slightly from 0.2% in 2021-22 to 0.5% in 2022-23 but is still well within the target of 1%. 5,045 Council properties were due for a gas service in 2022-23 and 5,020 were completed on-time. The remaining 25 properties not completed in 2022-23 have now had their gas service and the main reason for the delay was due to no access issues.

Leisure – 2022/23 compared to 2021/22

12. Darlington's adult population have increased their overall physical activity. The physically inactive figure decreased (33.1% to 30.1%), the physically active figure increased (54.9% to 60.9%) and the figure for those taking part in sport at least twice a week increased (68.5% to 71.5%). The Move More Team have had some successful projects that target hard to reach groups in the local wards and communities. The Haughton matters project is a good example of what can be achieved with a relatively low budget with good community support.
13. Visitor numbers to the Dolphin Centre have increased (619,748 to 851,821), with the use of business areas, large scale events and gym membership all improving.
14. The participating figures for sports development programmes have increased for pupils (12,634 to 14,167) and individuals (11,089 to 12,967). School Games funding has been secured for a further two years from the Department for Education (DFE).

Public Health – 2022/2023 compared to 2021/22

15. There has been an update to how the data for rate for admission episodes for alcohol-related conditions is calculated, so the current figure cannot be compared to previous years until the data is revised.

Public Health – 2021/2022 compared to 2020/21

16. The percentage of children being born with a low birthweight decreased (3.3% to 2.3%). The 0-19 year's contract includes a Health Visitors visit an expectant mother by 24 weeks of their pregnancy. This visit provides an opportunity to provide information, advice and support to maximise the mother's health the optimum conditions for a healthy pregnancy.
17. The rate of breastfeeding prevalence at 6-8 weeks after birth has increased (34.1% to 35.1%). The midwifery team in the hospital initiates breastfeeding with new mothers at the time of delivery. When the mother and baby is discharged from the midwifery service the Health Visiting team then provides a proactive offer of structured breastfeeding help, including extra visits and calls, to new mothers experiencing difficulties.
18. The percentage of smoking at time of delivery decreased (14.4% to 14.0%). Work continues with local maternity services, midwives and health visitors through the Council's commissioned Stop Smoking Service to continue supporting and encouraging residents, including pregnant mothers, to quit smoking at every opportunity.
19. The proportion of children aged 2-2½yrs offered ASQ-3 as part of the Healthy Child Programme or integrated review remained the same at 99.5%. The Health Visiting team work with Education and Early Years settings to ensure those with poor scores are identified and referred to specialist services.
20. The prevalence of overweight children at reception increased (25.0 to 26.2), whereas for Year 6 it decreased (42.4 to 38.7). The Darlington Childhood Healthy Weight Plan identified evidence-based interventions delivered with partners to address underlying causes of obesity in children and young people. Work includes activity with schools and local commercial food premises to develop a healthy catering standard for a healthy food offer.
21. The rate of hospital admissions caused by unintentional and deliberate injuries in children for children aged 0-4 years (146.2), 0-14 years (124.7), 15-24 years (252.2) and self-harm cannot be currently compared with the previous years due to the Office for National Statistics (ONS) is carrying out reconciliation and rebasing of the mid-year population estimates (MYE) it produces following the 2021 Census.
22. The rate of prevalence of smoking among persons aged 18 years and over decreased (13.8% to 10.6%). It is anticipated that further falls may be recorded going forward due to the ongoing impact of measures to reduce smoking in the community such as increased prices and smoke free places. The NHS is also offering stop smoking interventions for those people currently receiving hospital treatment.
23. The rate for the successful completion of drug treatment increased for opiate users (3.1% to 4.2%). This rise in opiate users reflects the work the provider of substance misuse services in Darlington has undertaken to increase access to treatment and improve the numbers in treatment. They are also implementing evidence-based interventions such as optimising prescribing to ensure treatment is optimised and effective.
24. The rate for the successful completion of drug treatment increased for non-opiate users (18.0% to 27.8%). This is a key performance indicator within the STRIDE service contract monitoring tool. This Service delivery model focusses on supporting sustained recovery in the community. It uses the most up to date evidence and model's pf best practice to provide the best support to those who use substances.

25. The rate of successful completion of alcohol treatment increased (19.0% to 27.4%). This is a KPI within the STRIDE service contract monitoring tool. Service delivery model focusses on supporting sustained recovery in the community. It uses the most up to date evidence and models of best practice to provide the best support to those who use alcohol.
26. The percentage of the eligible population aged 40-74 offered an NHS Health Check who received an NHS Health Check in the five-year period decreased (48.9% to 47.4%). This is incentivised to encourage the GP Practices to offer a health check to the maximum number eligible.
27. The rate of chlamydia detection per 100,000 young people aged 15 to 24 is a measure of chlamydia control activity, an increased detection rate is indicative of increased control activity, the rate decreased (1,674 to 1,547). Sexual Health Service provides online testing service for those over 16 years, and this has increased the number of people getting tests. The School Nursing Service is also working with schools and PHSE leads to ensure that Chlamydia screening is promoted within the PHSE curriculum to young people in schools and colleges in Darlington.
28. The adjusted figure for antibiotic prescribing in primary care by the NHS increased (0.78 to 0.95). The NHS has an action plan to help reduce antibiotic prescribing and is working with individual GP Practices and hospital doctors and microbiologists to ensure good antibiotic stewardship. The NHS produces information campaigns to reduce the demand and expectations for antibiotics from patients for relatively minor and self-limiting illnesses.
29. The under 75 mortality rates from cancer (1 year range) decreased (160.9 to 136.7). The public health team supports a range of partners in their work to contribute to reducing early deaths from cancer in Darlington. This includes providing support to smokers in quitting smoking with the support and advice they need to maximise their chance of a successful quit.
30. There is no previous year comparison for the percentage of 5-year-olds with experience of visually obvious dental decay.

Public Health – 2020/2021 compared to 2019/20 (%)

31. The rate of under-18 conceptions decreased (19.3 to 16.8). The Authority coordinates a broad range of evidence-based interventions and programmes across partners to tackle and contribute to the reduction in teenage conceptions through the Teenage Pregnancy and Sexual Health Strategy and action plan.
32. Under 75 mortality rates from cardiovascular diseases considered preventable (1 year range) decreased (32.6 to 24.0). The Authority commissions the NHS Health Checks provided by all 11 GP Practices in Darlington. The Public Health team are supporting the Primary Care Network (PCN) to identify those in high-risk communities and improve access early identification and treatment.
33. Under 75 mortality rates from respiratory disease (1 year range) increased (38.9 to 44.8). Public Health commission a range of primary prevention interventions including a Stop Smoking Service which supports individuals to quit which improves their respiratory

health and reduces the effects of second-hand smoke and interventions for children and young people which highlights the harms from tobacco.

34. There was no previous year comparable information for HIV late diagnosis.

Performance Summary

35. 13 of the 36 indicators reported had 2022/23 Quarter (Qtr) 4 data to report and could be compared with Quarter 4 data from the previous year 2021/22.

36. 18 of the 36 indicators reported had 2021/22 Quarter (Qtr) 4 data to report and could be compared with Quarter 4 data from the previous year 2020/21.

37. 3 of the 36 indicators reported had 2020/21 Quarter (Qtr) 4 data to report and could be compared with Quarter 4 data from the previous year 2019/20.

38. When taking into consideration what is best performance for each indicator:

- a) 20 of the 36 indicators show performance better than from when last reported.
- b) 13 of the 36 indicators show performance not as good as when last reported.
- c) 1 of the 36 indicators show's performance has remained the same from when last reported.

39. A detailed performance scorecard is attached at Appendix 1.

40. Detailed performance and narratives for each indicator is attached at Appendix 2.

Recommendation

41. It is recommended that performance information provided in this report is reviewed and noted, and relevant queries raised with appropriate Assistant Directors.

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Background Papers

Background papers were not used in the preparation of this report.

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| S17 Crime and Disorder | This report supports the Councils Crime and Disorder responsibilities |
| Health and Well Being | This report supports performance improvement relating to improving the health and wellbeing of residents |
| Carbon Impact and Climate Change | There is no impact on carbon and climate change as a result of this report |

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| Diversity | This report supports the promotion of diversity |
| Wards Affected | This report supports performance improvement across all Wards |
| Groups Affected | This report supports performance improvement which benefits all groups |
| Budget and Policy Framework | This report does not represent a change to the budget and policy framework |
| Key Decision | This is not a key decision |
| Urgent Decision | This is not an urgent decision |
| Council Plan | This report contributes to the Council Plan by involving Members in the scrutiny of performance. |
| Efficiency | Scrutiny of performance is integral to optimising outcomes. |
| Impact on Looked After Children and Care Leavers | This report has no impact on Looked After Children or Care Leavers |