

**HEALTH AND HOUSING SCRUTINY COMMITTEE  
28 AUGUST 2024**

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**PERFORMANCE INDICATORS QUARTER 4 - 2023/24**

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**SUMMARY REPORT**

**Purpose of the Report**

1. To provide Members with performance data against key performance indicators for 2023/24 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 are updated on a six-monthly basis and twenty-seven annually. The annual indicators are updated throughout the year depending on their national release date.
5. Six indicators are reported by both Housing and Leisure Services and twenty-four by Public Health.
6. All six Housing and Leisure Services and one Public Health indicator have year-end 2022/23 data to report. The other thirty-five Public Health indicators latest information is from 2020 to 2023.

**Housing Indicators**

**April to March 2022/23 comparison to 2023/24**

7. Rent arrears of current Council tenants in the financial year as a percentage of rent debit has increased (HBS 013 – 3.46% to 3.69%). The team collected £27.9m throughout 2023/24. Collection rates were affected by bank holidays and delayed payments hitting accounts. Had direct debits and payments hit accounts appropriately the level would have been 3.1% and would have met the target of 3.4%. The team continue to collect with care, offering guidance, help and support to customers, assisting with benefit claims and budgeting skills at the beginning of a tenancy and throughout.

8. The amount of rent collected as a proportion of rents owed on Council homes, including arrears brought forward debit, has increased from the previous year (HBS 016 – 95.9% to 96.0%). Collection rates during quarter 4 were affected by a double bank holiday and delayed payments hitting accounts. Managed Migration to Universal Credit is due to commence in Darlington from spring/summer 2024 and collection rates are expected to be affected as tenants await their payments and move from weekly to monthly payments. The team are planning some joint events with the Department for Work and Pensions to support and guide tenants through the period of migration.
9. The average number of days spent in Bed and Breakfast accommodation for people affected by homelessness has increased (HBS 025 – 7,308 to 9,616). The average length of stay per household has increased by 1.3 from 18.5 to 19.8 nights per household. Waiting lists for social rented accommodation have increased and access to the private rented market has become more difficult and expensive. More people are presenting who meet the priority need category due to their vulnerabilities. The number of households placed has increased from 395 in 22/23 to 518 in 23/24.
10. The number of positive outcomes where homelessness has been prevented decreased (HBS 027i - 720 to 547). The reduction in the number of presentations to the Housing Options Service, changes in the housing market, availability of private rented accommodation and the increased demands on the social housing waiting lists have all impacted on the number of positive outcomes.
11. The average number of days to re-let empty Council dwellings has increased (HBS 034 – 70.75 to 99.35). The re-let process has been improved for officers with the introduction of the new allocation system Darlington Homesearch. There difficulties in recruiting qualified tradespeople in Housing Repairs has resulted in the introduction of a program of recruitment within that team.
12. The percentage of dwellings not with a gas service within 12 months of the last service date has decreased (HBS 072 – 0.5% to 0.48%). The Council met its statutory obligation with the completion of all properties due a gas service receiving one in quarter 4. This result shows the priority given to ensuring the health and safety of Council tenants within their homes.

## **Leisure Indicators**

### **April to September 2022/23 comparison to 2023/24**

13. The Active Lives Adult Survey carried out by the leading research company IPSOS-MORI and produced by Sport England gathers data on how adults aged 16 and over in England engage with sport and physical activity to provide local data. The information for the indicators on physical inactivity (CUL 008a), physical activity (CUL 009a) and taking part in sport (CUL 010a) are taken from this survey.
14. Physical inactivity has decreased (CUL 008a - 30.1% to 25.9%). Physically active has increased (60.9% to 64.5%). Taking part in sport and physical activity at least twice has increased (71.5% to 77.9%). The Adult sport activities, organised and ran by the council from the Eastbourne Sports Complex, attracted over 10,000 visits over the year. They deliver activities such as Walking, Inclusive Activities, Nordic Walking, Walking Football and

Weight Goals. A new 5-year Physical Activity Strategy is in development outlining how the council in partnership with other organisations can develop, organise, and promote new projects to encourage adult participation in physical activity and continue the upward trends.

15. Visitor numbers to the Dolphin Centre have decreased (CUL 030 – 851,821 to 742,527). The extended main pool closure has had an effect on attendance figures. Due to the re-opening of the pool in January, the number of visitors rose from an average of 177,00 per quarter to 211,515. Membership numbers and income levels also reached their highest during the quarter 4 period of January to March.
16. The number of school pupils participating in the sports development programme has decreased by 2,652 (CUL 063 – 14,167 to 11,515). The capital project works at Eastbourne Sports Complex and the delay in completion of the track had an effect on the figure. The 2024/25 full School Games for Primary/Secondary Athletics has already been booked.
17. Number of individuals participating in the community sports development programme has increased by 6,000 (CUL 064 – 12,987 to 18,987). The development of the Move More projects and activities, provided by the team at Eastbourne Sports Complex, has increased uptake by residents over the past year. Examples the Holiday Activity Project, Eastbourne Sports Complex Move More Programme, Houghton Matters and The Sheltered Housing Activity project.

### **Public Health Indicators**

18. All of the 24 indicators reported by Public Health are annually reported. Information is available for one indicator for 2020/21, five for 2021/22, seventeen for 2022/23 and one for 2023/24.

### **2019/20 comparison to 2020/21**

19. The latest rate of under 75 mortalities from cardiovascular diseases considered preventable decreased (PBH 056 – 32.6 to 24.0), statistically similar to the North East and England. 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 to early identification and treatment.

### **2018/19 comparison to 2021/22**

20. The percentage of 5-year-olds with experience of visually obvious dental decay increased, (PBH 054 – 22.3% to 24.8%), statistically similar to both the England and North East. Dental decay is the most common cause of hospital admissions for 5- to 9-year-olds. The Health Visiting service commissioned by Public Health is working with families on healthy weaning for babies, to help reduce dietary sources of sugar. The Public Health team also commission a Supervised Toothbrushing programme across 16 schools and nurseries in Darlington.

### **2020/21 comparison to 2021/22**

21. The percentage low birth weight of term babies has decreased (PBH 009 - 3.3% to 2.3%), statistically similar to the North East and England. An action in the 0-19 year's contract is that Health Visitors visit expectant mothers between 28 and 36 weeks of their pregnancy to provide information, advice, and support to maximise the mother's health the optimum conditions for a healthy pregnancy. New government funding is enabling the authority to provide more targeted and effective support to pregnant women who smoke to quit which helps reduce the risk of low birthweight.
22. The rate of under-18 conceptions per 1,000 population has increased slightly (PBH 016 – 16.8 to 17.1), statistically similar with North East and England averages. 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. This includes commissioning Sexual Health Services and support schools in their delivery of Sex and Relationship Education to a high standard.
23. The percentage of HIV late diagnosis has increased, still below the North East and England averages (PBH 050 – 25.0% to 33.3%). This equates to two individuals who were identified as being diagnosed late using the CD4 cell count at diagnosis. Early diagnosis improves treatment and long-term outcomes. The Sexual Health Service has increased new patients receiving a HIV risk assessment and there is more and easier routes to access HIV testing including postal testing kits and access to Pre-Exposure Prophylaxis treatment to reduce the potential for exposure to HIV.
24. The rate of under 75 mortalities from respiratory disease has decreased (PBH 060 - 44.8 to 44.6), statistically similar to the North East but statistically worse and England. The Public Health team commission a range of prevention interventions including a Stop Smoking Service which supports individuals to quit, improving their respiratory health and the effects of second-hand smoke and interventions to children and young people. Extra government money has enabled the authority to significantly increase investment into the stop smoking services to provide a more comprehensive offer and provision to reach more people to help them quit.

### **2021/2022 compared to 2022/23**

25. The percentage of infants that are totally or partially breastfed at age 6-8 weeks has increased (PBH 013c - 35.1% to 38.0%), statistically similar to the North East but statistically worse than England. The midwifery team in the hospital initiates breastfeeding with new mothers at the time of delivery. The Health Visiting team then provides a proactive offer of structured breastfeeding help new mothers maintain their breastfeeding at home.
26. The percentage of women who smoke at time of delivery has decreased (PBH 014 - 14.0% to 12.9%), statistically similar to the North East however worse than England. The NHS provides stop smoking support through local maternity services. The Local Authority commissions a specialist stop smoking service that supports women to stop smoking before and after being pregnant. New government funding is enabling the authority to significantly increase investment into the stop smoking services which has enabled a more comprehensive offer and provision of effective support to pregnant women who smoke to quit

27. The percentage of children aged 2-2½yrs offered Ages & Stages Questionnaire 3 (ASQ-3) as part of the Healthy Child Programme or integrated review has remained the same for the third year (PBH 018 – 99.5% to 99.5%), statistically better than the North East and England. ASQ-3 is a comprehensive assessment of a child's development including motor, problem solving and personal development. The Health Visiting team work with the Education service, Early Years settings and parents to ensure those identified with additional needs are offered an integrated assessment so that the child and family can receive appropriate support.
28. The percentage excess weight among Reception pupils has increased slightly (PBH 020 – 26.2% to 26.7%), statistically similar to the North East however worse than England. The percentage excess weight among Year 6 pupils decreased (PBH 021 – 26.2% to 26.7%), statistically similar to the North East and England. 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.
29. The rate of hospital admissions caused by unintentional and deliberate injuries in children aged under 5 years increased (PBH 026 – 124.7 to 153.5), statistically worse than the North East and England. Most of these admissions are due to avoidable accidents in the home.
30. The rate of hospital admissions caused by unintentional and deliberate injuries in children aged under 15 years increased (PBH 026 – 124.7 to 153.5), statistically worse than the North East and England. A large proportion include accidental injuries including road accidents. The Health Visiting team are informed of any child's hospital admission and will contact parents and provide them with information, guidance and support.
30. The rate of emergency Hospital Admissions for Intentional Self-Harm decreased (PBH 031 – 252.1 to 186.5), statistically similar to the North East however worse than England. Self-harm is a complex and poorly understood act with varied reasons for a person to harm themselves irrespective of the purpose of the act. This indicator is a measure of intentional self-harm events severe enough to warrant hospital admission and not a measure of the actual prevalence of severe self-harm. The authority works with partners including the NHS as part of the local Mental Health network to continue to work on a range of prevention approaches and strategies.
31. The prevalence of smoking among persons aged 18 years and over has increased, (PBH 033 – 10.6% to 11.5%), statistically similar to the North East and England. There is an ongoing impact of measures to reduce smoking in the community such as the proposed introduction of new legislation aimed at increasing the legal age to buy tobacco. New government funding has enabled the authority to increase investment in the stop smoking services which includes a new offer to support those under 18 who are smokers to quit. The authorities Trading Standards team are also active in identifying and tackling underage sales of tobacco and the sale of illicit tobacco. They have successfully taken enforcement action against different outlets including serving closure orders on premises.
32. The percentage of opiate users successfully completing their treatment has increased (PBH 035i – 4.2% to 4.4%), statistically similar to the North East and England. The provider of substance misuse services has undertaken to increase access to treatment and improve

the numbers in treatment. This has been achieved through the investment of significantly increased funding from the government which has enable the authority to increase and improve the provision of a range of evidence-based interventions and work with partners to increase referrals into services and improve their support in the community.

33. The percentage of users on non-opiates successfully completing their treatment has decreased (PBH 035ii – 27.8% to 15.2%), statistically worse than the North East and England. This reduction reflects the changing patterns of substance misuse and the emergence of new substances which are more resistant to treatment along with the focus on improving opiate treatment in the national strategy.
34. The percentage of alcohol users successfully completing their treatment has decreased (PBH 035iii – 27.4% to 18.0%), statistically worse than the North East and England. This reduction reflects the ongoing increasing impact of alcohol on our local communities resulting in a growing demand for alcohol treatment services in Darlington with increasing levels of dependency in people presenting for treatment. This requires a multiagency action to respond and mitigate the impact of alcohol in our communities.
35. The percentage of eligible population aged 40-74 offered an NHS Health Check who received an NHS Health Check in the five-year period has decreased slightly, (PBH 046 – 47.4% to 45.8%), statistically better than England and the North East. The authority commissions the GP Federation who works with local practices to support them to ensure that they continue to provide an offer of a health check to the eligible population.
36. The rate of Chlamydia diagnoses in 15–24-year-olds has increased (PBH 048 – 1,513 to 1,964), statistically better than England and similar to the North East. An increased detection rate is indicative of increased control activity; the detection rate is not a measure of disease in the community. The council commissions a specialist Sexual Health Service which has been working to improve uptake of screening by targeting younger people under 25 years and including access to online testing for over 16 years. The School Nursing Service work with schools and Personal, Social & Health Education leads to ensure Chlamydia screening is promoted within the curriculum.
37. The adjusted antibiotic prescribing in primary care by the NHS has increased slightly (PBH 052 – 0.95 to 1.07), statistically similar to both England and the North East. 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.
38. The Under 75 mortality rate from cancer increased (PBH 058 – 136.7 to 141.6), statistically similar to England and the North East. The public health team works with a broad range of partners in their work to contribute to preventing and reducing early deaths from cancer. This includes increasing the offer of support to smokers in quitting. The public health team is also working with NHS partners to improve the uptake of screening to improve early detection and treatment to maximise those who survive a diagnosis of cancer.

**2021/2022 compared to 2022/23**

39. The rate of admission episodes for alcohol-related conditions per 100,000 population looks to have decreased (PBH 044 – 774 to 659), statistically worse than England but statistically similar to the North East. The council commissions treatment services and is engaged with partners to implement strategies to reduce admissions. These high rates of admissions on reflect the ongoing increasing impact of alcohol on our local communities resulting in increasing levels of dependency and people becoming ill due to their alcohol consumption. The authority commissions treatment services however demand has increased significantly. The public health team continues to work with a range of partners and stakeholders in multiagency action to respond and mitigate the impact of alcohol in our communities.

### **Performance Summary**

40. 13 indicators have Quarter 4 (Year End) information for 2023/24. When taking into consideration what is best performance for each indicator:

a) 7 of the 13 indicators show performance better than from when last reported.

b) 6 of the 13 indicators show performance not as good as when last reported.

41. 17 indicators have Quarter 4 (Year End) information for 2022/23. When taking into consideration what is best performance for each indicator:

a) 7 of the 17 indicators show performance better than from when last reported.

b) 9 of the 17 indicators show performance not as good as when last reported.

c) 1 of the 17 indicators shows performance has not changed.

42. Five indicators have Quarter 4 (Year End) information for 2021/22. When taking into consideration what is best performance for each indicator:

a) 2 of the 5 indicators show performance better than from when last reported.

b) 3 of the 4 indicators show performance not as good as when last reported.

43. One indicator has Quarter 4 (Year End) information for 2020/21. When taking into consideration what is best performance for this indicator it was better than last reported.

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

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

### **Recommendation**

46. 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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Director of Public Health

## Background Papers

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

Council Plan	This report contributes to the Council Plan by involving Members in the scrutiny of performance relating to the delivery of key outcomes with regards to Health and Housing.
Addressing inequalities	This involves members in the scrutiny of the level to which Health and Housing contributes to ensuring that opportunities are accessible to everyone, with a focus on ensuring a good job, home and/or social connections for all.
Tackling Climate Change	This report does not identify any issues relating to climate change.
Efficient and effective use of resources	This report allows for the scrutiny of performance which is integral to optimising outcomes and ensuring efficient use of resources.
Health and Wellbeing	This report supports performance improvement relating to improving the health and wellbeing of residents.
S17 Crime and Disorder	This report supports the Councils Crime and Disorder responsibilities.
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.
Impact on Looked After Children and Care Leavers	This report has no impact on Looked After Children or Care Leavers.