

Summary Sheet

Council Report

Health Select Commission, 1st December 2016

Title

Adult Social Care – Final published Year End Performance Report for 2015/16

Is this a Key Decision and has it been included on the Forward Plan?

No

Strategic Director Approving Submission of the Report

Anne Marie Lubanski, Strategic Director of Adult Care and Housing

Report Author(s)

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Ward(s) Affected

All

Executive Summary

This report updates the previously reported provisional year end 2015/16 Key Performance Indicator (KPI) results for the Adult Social Care (ASC) elements of the Directorate, following release of national benchmarking data.

This update completes the final requested action from the meeting of the Health Select Commission on 16th June 2016 where it was resolved:

(2) That a further report be submitted showing final submitted results and benchmark comparisons against regional and national data.

The Council has seen continued improvements across the range of twenty two national Adult Social Care Outcomes Framework (ASCOF) measures reported in 2015/16. 19 out of 22 comparable measures are recording an improvement since 2014/15. This positive set of national indicator results is encouraging. The direction of travel is beginning to evidence that implementation of new service delivery models (moving away from traditional services), lead to better outcomes for people and increasing satisfaction levels, sustained over the year.

A key highlight is that satisfaction levels recorded from the annual Adult Social Care User Survey results, have reported a 100% improvement across seven of the national indicators.

However, it should be recognised that some of the areas of improvement when compared to the now published national data, shows that the Council has either not always in this transitional year, kept pace with other councils' performance or the improvement has been from a low baseline. Possible reasons identified that may have contributed to the negative shifts seen in some rankings are detailed in section 3 of the full report.

Recommendations

That members of Health Select Commission:

Note the content of final published year end performance results.

List of Appendices Included

Appendix 1 - Table 1 Rotherham MBC - Final ASCOF year-end table

Background Papers

Health Select Commission 16th June 2016

Adult Social Care – Provisional Year End Performance Report for 2015/16

Health Select Commission 28th July 2016

Adult Social Care – Provisional Year End Performance Report for 2015/16 – follow up response to the outstanding issues raised at the 16th June 2016 meeting.

National benchmarking analysis referenced from published files.

<http://www.content.digital.nhs.uk/catalogue/PUB21900>

Consideration by any other Council Committee, Scrutiny or Advisory Panel

No

Council Approval Required

No

Exempt from the Press and Public

No

Title: Adult Social Care – Final published Year End Performance Report for 2015/16

1. Recommendations

That Members of Health Select Commission:

1.1 Note the content of final published year end performance results.

2. Background

- 2.1 Each Council with Adult Social Services Responsibility (CASSR) have to submit relevant national statutory returns to the Health and Social Care Information Centre (HSCIC) throughout the reporting year. Most but not all 'returns', reflect the activity for the financial year end and are submitted during the May/June period.
- 2.2 From the Council's submitted data, the HSCIC are able to identify and publish a range of Adult Social Care Outcomes Framework (ASCOF) measures. Some ASCOF's have a joint responsibility element so may be included in either Public Health Outcome Frameworks or NHS Outcome Frameworks. Where applicable, final outturn data has been submitted through partner processing submissions rather than the Council's.
- 2.3 2015/16 has been a transitional year where the Directorate has been seeking to change existing customer journey and business processes, in order to improve the customer experience and deliver better personalised outcomes. The results over the performance areas included in the report to date have been positive, showing improvements in many indicator areas.
- 2.4 2015/16 is the second year of the new national Short and Long Term (SALT) reporting annual return, and the Council's final year-end figures provide a useful insight to Adult Social Care performance, which can now be considered and benchmarked against regional and national data.
- 2.5 The Adult Social Care 2015/16 KPI suite of indicators had a mixture of continuous improvement or maintenance targets. These reflected the anticipated impact of new service delivery models and structures, as part of the Adult Social Care development programme.
- 2.6 Contained within the report (see Appendix 1) is a refreshed final table, of year end performance, which also shows Direction of Travel and relative benchmarking positions against comparative councils in Yorkshire and Humber (Y&H) region and national rankings.
- 2.7 Analysis of the Direction of Travel data (see Appendix 1) shows that from the 22 ASCOF measures outcomes: 19 improved and 3 declined. Whilst this is positive the regional and national picture shows that whilst areas have improved this sometimes has not been at the same pace as other councils. This resulted in:

13 measures improved their Y&H and national rankings.

4 measures retained their Y&H rankings.

4 measures Y&H rankings declined and 8 measures national rankings declined.

1 measure was not able to be ranked in 2014/15, so no comparison was applicable.

Current 2016/17 performance update on the 8 declined national ranking measures are shown in Appendix 1 but mainly have improved since year end or an additional comment has been added.

2.8 Overall the Council's year end performance and benchmarking analysis needs to be considered against the context of:

During this transitional performance year the Council has undertaken major pieces of work in order to begin to make the necessary changes to how the business operates as it looks to move from traditional service delivery models to more modern and flexible approaches that are more sustainable as part of the ASC Development Programme implementation. These include:

- Implementing requirements of the Care Act 2014.
- Develop the prevention and early intervention agenda e.g. identify and increase community assets.
- Introduce new ways of working and shaping the market e.g. appointment of Community Link Workers and Community Catalyst contract award.
- Promote and roll-out different Social Work Team support planning models – this requires changing organisational culture and staff behaviours, in order to deliver better customer outcomes and value for money care support packages.

2.9 The role of Performance and Quality will be key in supporting the transformation of Adult Care.

In order to drive through continuous improvement requires a re-focussed towards Business Intelligence activity. This will provide improved and more detailed cohort data and analysis in addition to live tracking information as we look to effectively manage our available budget and implement transformational change. We need to:

- Move from traditional models to prevention and improved demand management models.
- Include increased use of effective signposting.
- Provision of good information and advice.
- Accessibility to a wider range of community assets.

2.10 These changes will produce better outcomes for customers and increased value for money for every £1 spent.

2.11 Demand for services is increasing and we must implement savings within the context of Rotherham's ageing population:

- Demographic pressures show a 16% increase in the number of people aged over 65 (2001 Census – 2011 Census) contrasting with a 4.5% decrease in the number of children. The latter trend is at odds with the national increase of 1.5% in the number of children. Older people (65+) increased by 16% but those aged over 85 increased at over twice this rate (+34.6%). The rate of increase for 85+ was well above the national average of 23.9%.
- Dementia prevalence rate is estimated to be 73.3% which is higher than the regional or national average, with Rotherham rated 8th highest in the region and 51st highest in England (out of 209 Clinical Commissioning Groups (CCG) for diagnostic rates).
- The Council also have identified upwards of 93 additional potential transition customers that may come into service (through its Learning Disability cohort analysis) over the next 2 years.

3. Key Issues

3.1 Performance Highlights 2015/16

3.1.1 From the 22 national final ASCOF year-end performance measures published data.

- **86%** (19 of 22) ASCOF measures are showing improvement – this includes 100% (7 of 7) User Survey measure results.
- **50%** (11 of 22) 2015/16 targets being met - including User Survey 71% (5 of 7).

It is worth noting the continued positive direction of travel for user views from the national user survey results. The Council sent out over 1000 user surveys to customers and had over 400 returned. This is a positive response rate (over 40%), which demonstrates that the Council is improving engagement with its customers. The 2016/17 national user survey will be issued in January 2017.

These user survey results rankings also were positive in the main, as regionally 5 improved, 1 retained and 1 declined. Nationally 6 improved and 1 declined.

3.1.2 The SALT tables highlights include some demand management activity and percentage 'swing' differences between the Council and other councils regional and national experience:

- **Short Term** shows a 14% increase in request for service, over 5650 requests were made – almost 700 more than 2014/15 from **new** clients aged 18-64. Y&H (**4% decrease**) National (**3% decrease**). **Max 18% swing**.
- **Short Term** shows a 5.9% increase in request for service, over 9000 requests were made – almost 500 more than 2014/15

- from **new** clients aged over 65. Y&H **(5% increase)** National **(1% decrease)**. **Max 7% swing**.
- **Short Term** requests for care to maximise independence (mainly enabling and intermediate care type services) remained broadly similar. Y&H **(10% increase in requests)** National **(2% increase in requests)**. **Max 10% swing**.
- **Long Term** shows an upward trend across the data with percentage increases ranging from 1% for over 65's accessing long term support during the year and almost 10% of service users receiving long term support at year end. Y&H **(1% decrease in over 65's and 0.6% decrease of all service users receiving long term support at year end)** National **(2% decrease in over 65's [Max 2% swing] and 1% decrease of all service users receiving long term support at year end [Max 10% swing])**.

Conclusion of SALT table benchmarking

- Benchmarking would seem to indicate that other councils have more mature service models in place, that are more effectively benefitting from improved demand management of front door requests plus where councils are providing services, they are investing in increased short term responses (e.g. enabling). This where successful, in turn may be reducing the long term demand for more traditional services (24 hour care residential placements or long term commissioned services (Home Care)) in favour of more flexible Self Directed Support packages, including more use of Direct Payments.
- Further analysis is intended by the Performance team of cohort data and care package expenditure profiles. It is anticipated that, as demand management of front door requests improves, this would reduce the impact on the total cost of packages and narrow the swing referenced above.

3.1.3 Appendix 1 below shows the final outturns and Direction of Travel (DoT) relevant to each measure comparing the 2014/15 and 2015/16 results and their respective regional and national ranking comparisons.

3.1.4 The following colour coded key has been applied to the table for each measure, to provide an overall Yorkshire and Humber (Y&H) and national ranking quartile summary rating, plus a commentary as to the scale of the 'gap' between high and low ranking measures using the national average as a consistent comparison point.

We have also added the current 2016/17 target and latest current score to provide additional context:

| Quartile Banding | Y&H Ranking [count] | National Ranking [count] |
|------------------|---------------------|--------------------------|
| Top (green (g)) | 1-4 [6] | 1-38 [5] |

| | | |
|------------------------|------------|-------------|
| Next best (yellow (y)) | 5-7 [2] | 39-76 [5] |
| Next bottom (amber(a)) | 8-11 [4] | 77-114 [4] |
| Bottom (red (r)) | 12-15 [10] | 115-152 [8] |

3.1.5 There is from the colour coded quartile bandings and direction of travel a high degree of correlation. However the following measures (good performance cell highlighted blue) did have some differences and possible reasons are added to the commentary below.

Paragraphs 3.1.6 to 3.1.9 provide original analysis reported to Health Select Commission (HSC) on the 16th June 2016 and included to provide overall picture of analysis completed to date.

3.1.6 Improved ASCOF measures that met target

- #4 Proportion of Carer's in receipt of carer specific services via Self Directed Support (SDS). First year that services for carers now being provided rather than provided for the cared for person.
- #6 Proportion of Carer's on service receiving Direct Payments. First year provision as above.
- #15 Permanent Admissions 65+ – 401 admissions (68 fewer than last year) and equates to a rate of 808 approx. per 100,000 population – note. This is also a Better Care fund (BCF) measure.
- #18 Average delayed transfer of care (DToC) all delays.
- #19 Average delayed transfer of care (DToC) delays that were NHS or ASC responsible or both.
- #20 The outcome of short-term support: sequel to services.

User Survey: Improved ASCOF measures that met target

- #1 Social Care Quality Of Life.
- #12 Service users have as much social contact as they would like.
- #21 Overall satisfaction of people whom use services with their care and support.
- #24 People who use services who find it easy to find information and support.
- #27 proportion of people who use services who say that those services have made them feel safe and secure.

3.1.7 Other improved ASCOF measures

- #5a proportion of adults on service receiving Direct Payments (note also included as a future challenge measure). Expected that significant improvement will result from planned reviews from quarter 1 of 2016/17.
- #9 Adults with Mental Health (MH) in employment.
- #10 Adults with Learning Disability (LD) on long term service in settled accommodation – below target. Some planned service

transfers from 24 hour care to supported living in 2016/17 will improve this measure next year.

- #11 Adults with Mental Health in independent living (settled accommodation).
- #16 Re-ablement – still home after 91 days (effectiveness) – BCF measure.
- #17 Re-ablement – still home after 91 days (offered the service).

User Survey: Other improved ASCOF measures

- #2 proportion of Service Users who have control over their daily life.
- #26 proportion of people who use services who feel safe.

3.1.8 The 2016/17 challenging measures

- #3a Proportion of adults receiving long term community support who receive services via self-directed support – less than 1% below target.
- #5a proportion of adults on service receiving Direct Payments (see above).
- #8 Adults with Learning Disability on long term service in employment. A total of 40 people were in employment (was 43 in 2014/15); longer term strategy proposals are being explored to address this.
- #14 Permanent Admissions 18-64's – 31 admissions in 2015/16, well above target of 18 (last year had 20 admissions). Review at Qtr. 3 recognised that the impact of at least 6 of the admissions resulted from existing customers losing full cost Continuing Health Care (CHC) funding. In the previous year only 2 of last year's 20 admissions were down to this reason.

3.1.9 The 2016/17 Local Measure analysis

- In addition to statutory measures the Council also has some discretionary ones.
- No formal targets were assigned to a range of local management information indicators for 2015/16. However, outturns show that the impact of the changes made within Adult Care (in this transition year) experienced lower levels of performance for reviews, waiting times for assessment and packages of care, than in previous years. The target setting for 2016/17 took account of how the Directorate intends to demonstrate the recovery and improvement journey for these areas.

The following local measures and targets were agreed:

- LM01 – Reviews 75% minimum/100 maximum
- LM02 - Support plans % Issued 90%

- LM03 – Waiting times assessments 90%
- LM04 – Waiting times care packages 95%
- LM05-07 – Commissioning KLOE's No targets

A range of measures are also reported in the Council's Corporate Plan for 2016/17 and the following specific measures have also been added to the Local Measures scorecard as requested by the Health Select Commission.

- CP2.B3 No. of people provided with information and advice at first point of contact (to prevent service need)
- CP2.B5 No. of carers assessments (only adult carers and not including young carers)
- CP2.B7 No. of admissions to residential rehab beds (intermediate care)
- CP2.B9c % spend on residential and community placements new measure 2016/17

A current refreshed table and report is also to be presented to the 1st December 2016 Health Select Commission meeting.

3.2 How will the Council use the information?

3.2.1 The information is already being used to inform in year Adult Care 2016/17 performance reporting and planning for 2017/18 targets.

3.2.2 Future reporting:

Transfer to new Liquid Logic (LAS) system and new performance reporting arrangements will enable the Directorate to gain a more forward looking, business intelligence led and real-time view of the improvement envisaged, as the new ways of working and delivery of budget related actions continue to embed.

This includes current reporting being reviewed so as to enable a more wide ranging set of data, trends and storyboards to be included, drawing on enhanced business activity and finance intelligence coming on stream following go live of Liquid Logic and availability of additional reporting tools.

Learning from other councils has taken place and being factored into performance team reporting work programme. However, we anticipate like most other councils that there will be an initial 'dip' in reported performance as new systems and business practices become embedded and the reporting functionality is developed to replace existing arrangements. The extent of the anticipated 'dip' is not yet clear but will be established post go-live from mid-December 2016.

4. Options considered and recommended proposal

4.1 None

5. Consultation

5.1 None

6. Timetable and Accountability for Implementing this Decision

6.1 None

7. Financial and Procurement Implications

7.1 None

8. Legal Implications

8.1 None

9. Human Resources Implications

9.1 None

10. Implications for Children and Young People and Vulnerable Adults

10.1 None

11. Equalities and Human Rights Implications

11.1 None

12. Implications for Partners and Other Directorates

12.1 None

13. Risks and Mitigation

13.1 Liquid Logic post go live (December 2016) downturn in actual and reported performance may be greater than currently known. We will look to mitigate by aligning resources from the Liquid Logic project team budget identified for performance reporting, plus prioritise available performance team resources to reduce risk.

14. Accountable Officer(s)

Approvals Obtained from:-

Anne Marie Lubanski, Strategic Director Adult Care and Housing

Nathan Atkinson, Assistant Director Strategic Commissioning

Scott Clayton, Interim Performance and Quality Team Manager

This report is published on the Council's website or can be found at:- **Please add link**

Appendix 1 - Table 1 (section 3) Rotherham MBC - Final ASCOF year-end table

| ASCOF Measure (# score card ref and abbreviated text description name) | Good performance High/Low/ Other | 2015/16 (rounded) | 2014/15 (rounded) | DoT | Y & H Rank 2015/ 16 | Y & H Rank 2014/ 15 | DoT Y&H | National Rank 2015/16 | National Rank 2014/15 | DoT National | 2015/16 National Average & [2016/17 Target] | Performance Gap/Comment |
|--------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|----------------------|----------------------|-----|------------------------------|------------------------------|------------|-----------------------------|-----------------------------|-----------------|---------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| #1 Social Care Quality Of Life (1A) | High | 18.8 | 18.5 | ↑ | 13 (r) | 13 | ↔ | 100 (a) | 118 | ↑ | 19.1 Score [19] | User Survey – results reported year end. |
| #2 proportion of Service Users who have control over their daily life (1B) | High (blue (b)) | 74.1% | 73.9% | ↑ | 10 (a) | 13 | ↑ | 104 (a) | 83 | ↓ | 76.6% [78.4%] | User Survey – results reported year end. |
| #3a Proportion of adults receiving long term community support who receive services via Self- Directed Support (SDS) (1C (1a)) | High | 75.7% | 76.4% | ↓ | 14 (r) | 12 | ↓ | 132 (r) | 105 | ↓ | 86.9% [76%] | Current performance 78.5% Mental Health data impacts overall score adversely as 'professional support' only service is not easily accessible via SDS |
| #4 Proportion of Carer's in receipt of carer specific services via Self Directed Support (SDS) (1C(1b)) | High | 29.2% | 0% | ↑ | 14 (r) | 14 | ↔ | 141 (r) | - | - | 77.7% [46.7%] | Current performance 100% Mental Health data impacts |
| #5a proportion of adults on service receiving Direct Payments (1C(2a)) | High (b) | 17.5% | 17.4% | ↑ | 13 (r) | 12 | ↓ | 132 (r) | 124 | ↓ | 28.1% [20%] | Current performance 18.5% further improvement linked to switch from managed accounts to full Direct Payments post review. |

| ASCOF Measure (# score card ref and abbreviated text description name) | Good performance High/Low/ Other | 2015/16 (rounded) | 2014/15 (rounded) | DoT | Y & H Rank 2015/ 16 | Y & H Rank 2014/ 15 | DoT Y&H | National Rank 2015/16 | National Rank 2014/15 | DoT National | 2015/16 National Average & [2016/17 Target] | Performance Gap/Comment |
|---------------------------------------------------------------------------------|-------------------------------------------|----------------------|----------------------|-----|------------------------------|------------------------------|------------|-----------------------------|-----------------------------|-----------------|---------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| #6 Proportion of Carer's on service receiving Direct Payments (1C(2b)) | High | 29.2% | 0% | ↑ | 13 (r) | 14 | ↑ | 122 (r) | 131 | ↑ | 67.4% [46.7%] | Current performance 100% Mental Health data impacts |
| #8 Adults with Learning Disability (LD) on long term service in employment (1E) | High (b) | 5.6% | 6.0% | ↓ | 7 (y) | 8 | ↑ | 73 (y) | 61 | ↓ | 5.8% [6.0%] | Current performance 5.6% Difficult market conditions. Long term improvement linked to partner wide job opportunity initiatives. Gap requires 3 more people in employment. |
| #9 Adults with Mental Health (MH) in employment (1F) | High | 5.2% | 4.9% | ↑ | 8 (a) | 14 | ↑ | 99 (a) | 102 | ↑ | 6.7% [5.7%] | Current performance 2.2% Mental Health data impacts – national guidance advises that variance in published figures is not likely to be corrected until after Qtr3. |
| #10 Adults with LD on long term service in settled accommodation(1G) | High (b) | 78.4% | 78.3% | ↑ | 9 (a) | 9 | ↔ | 66 (y) | 55 | ↓ | 75.4% [79%] | Current performance 76.8% Planned improvement may contribute before year end if transfer from some residential placements are made to community packages. |
| #11 Adults with Mental Health in independent living (settled) | High | 74.6% | 73.1% | ↑ | 4 (g) | 5 | ↑ | 40 (y) | 59 | ↑ | 58.6% [77.9%] | Current performance 82.2% Mental Health data impacts national guidance advises that variance in published |

Footnote: The # prefix denotes the indicator reference number detailed in Appendix A of the provisional year-end scorecard reported to HSC 16/6/2016

| ASCOF Measure (# score card ref and abbreviated text description name) | Good performance High/Low/ Other | 2015/16 (rounded) | 2014/15 (rounded) | DoT | Y & H Rank 2015/ 16 | Y & H Rank 2014/ 15 | DoT Y&H | National Rank 2015/16 | National Rank 2014/15 | DoT National | 2015/16 National Average & [2016/17 Target] | Performance Gap/Comment |
|----------------------------------------------------------------------------------|-------------------------------------------|------------------------|----------------------|-----|----------------------------------|----------------------------------|------------|---------------------------------|---------------------------------|-----------------|---------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| accommodation) (1H) | | | | | | | | | | | | figures is not likely to be corrected until after Qtr3. |
| #12 Service users have as much social contact as they would like (1I(i)) | High | 45.50 % | 40.2% | ↑ | 10 (a) | 13 | ↑ | 73 (y) | 125 | ↑ | 45.4% [47.8%] | User Survey – results reported year end. |
| #14 Permanent Admissions 18-64's per 100,000 population (2A(i)) | Low | 20.0 | 12.3 | ↓ | 13 (r) | 10 | ↓ | 133 (r) | 69 | ↓ | 13.3 rate [17.6] | Current performance 4.5 Improved 7 admissions to date v target of 27 |
| #15 Permanent Admissions 65+ per 100,000 population (2A(ii)) | Low (b) | 808.1 = 401 admissions | 933.3 (895.5) | ↑ | 12 (r) | 14 | ↑ | 122 (r) | 115 | ↓ | 628.2 Rate [797.0] | Current performance 292.2 Improved 145 admissions to date v target of 390 |
| #16 Re-ablement – still home after 91 days (effectiveness) – BCF measure (2B(i)) | High | 89.6% | 83.5% | ↑ | 4 (g) | 7 | ↑ | 30 (g) | 70 | ↑ | 82.7% [91.0%] | Data sample captured Oct-Dec and reported at year end. |
| #17 Re-ablement – still home after 91 days (offered the service) (2B(ii)) | High (b) | 1.7% | 1.5% | ↑ | 12 (r) | 11 | ↓ | 127 (r) | 125 | ↓ | 2.9% [2.0%] | Data sample captured Oct-Dec and reported at year end. |
| #18 Average delayed transfer of care (DToC) all delays (2C(i)) | Low | 8.2 | 9.5 | ↑ | 6 (y) | 9 | ↑ | 53 (y) | 76 | ↑ | 12.1 Rate [6.8] | Current performance 9.7 still performing well against national trend and further performance clinic actions may improve towards target |

Footnote: The # prefix denotes the indicator reference number detailed in Appendix A of the provisional year-end scorecard reported to HSC 16/6/2016

| ASCOF Measure (# score card ref and abbreviated text description name) | Good performance High/Low/ Other | 2015/16 (rounded) | 2014/15 (rounded) | DoT | Y & H Rank 2015/ 16 | Y & H Rank 2014/ 15 | DoT Y&H | National Rank 2015/16 | National Rank 2014/15 | DoT National | 2015/16 National Average & [2016/17 Target] | Performance Gap/Comment |
|------------------------------------------------------------------------------------------------------|-------------------------------------------|----------------------|----------------------|-----|----------------------------------|----------------------------------|------------|---------------------------------|---------------------------------|-----------------|---------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | | | | | | | | | | | by year end. |
| #19 Average delayed transfer of care (DToC) delays that were NHS or ASC responsible or both (2C(ii)) | Low | 1.6 | 2.3 | ↑ | 4 (g) | 8 | ↑ | 31 (g) | 70 | ↑ | 4.7 [1.5] Rate | Current performance 2.0 still performing well against national trend and further performance clinic actions may improve towards target by year end. |
| #20 The outcomes of short-term support: sequel to service (2D) | High | 86.1% | 85.2% | ↑ | 2 (g) | 2 | ↔ | 27 (g) | 28 | ↑ | 75.8% [74.0%] | Current performance 85% |
| #21 Overall satisfaction of people whom use services with their care and support (3A) | High | 69.80 % | 65% | ↑ | 2 (g) | 9 | ↑ | 13 (g) | 67 | ↑ | 64.4% [72.0%] | User Survey – results reported year end. |
| #24 People who use services who find it easy to find information and support (3D(i)) | High | 78.3% | 76.8% | ↑ | 4 (g) | 6 | ↑ | 27 (g) | 51 | ↑ | 73.5% [80.0%] | User Survey – results reported year end. |
| #26 proportion of people who use services who feel safe (4A) | High | 65.9% | 61.5% | ↑ | 13 (r) | 15 | ↑ | 115 (r) | 137 | ↑ | 69.2% [68.3%] | User Survey – results reported year end. |
| #27 proportion of people who use services who say that | High (b) | 84.50 % | 81.6% | ↑ | 12 (r) | 8 | ↓ | 88 (a) | 106 | ↑ | 85.4% [85.6%] | User Survey – results reported year end. |

Footnote: The # prefix denotes the indicator reference number detailed in Appendix A of the provisional year-end scorecard reported to HSC 16/6/2016

| ASCOF Measure (# score card ref and abbreviated text description name) | Good performance High/Low/ Other | 2015/16 (rounded) | 2014/15 (rounded) | DoT | Y & H Rank 2015/ 16 | Y & H Rank 2014/ 15 | DoT Y&H | National Rank 2015/16 | National Rank 2014/15 | DoT National | 2015/16 National Average & [2016/17 Target] | Performance Gap/Comment |
|---------------------------------------------------------------------------------|-------------------------------------------|----------------------|----------------------|-----|----------------------------------|----------------------------------|------------|---------------------------------|---------------------------------|-----------------|---------------------------------------------------------|-------------------------|
| those services have made them feel safe and secure (4B) | | | | | | | | | | | | |

Footnote: The # prefix denotes the indicator reference number detailed in Appendix A of the provisional year-end scorecard reported to HSC 16/6/2016