

FINANCE & PERFORMANCE REPORT

Housing & Community Living 3rd Quarter report October - December 2007

Reporting Period:

Headline News

Director: Penny Furness-Smith

Date to SMT : 20th May 2008

Portfolio Holder: Cllr(s) Hussain, Shaw, Ashraf
Performance and Business Support Manager Maria Silver 01582-546440

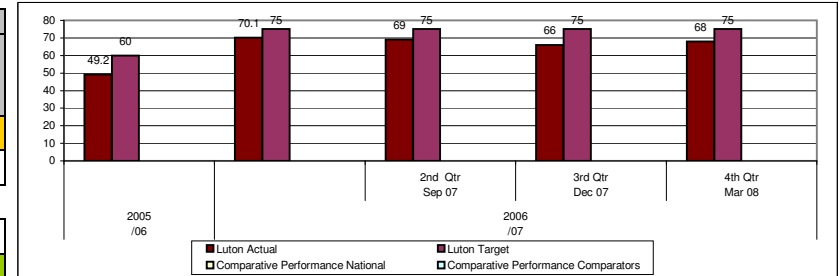
KEY TO HOW WE ARE DOING:

Green	Performance is good.
Amber	Performance is satisfactory but could be improved
Red	Performance needs to improve

SECTION 2: PERFORMANCE INDICATORS

1. Adults and Older Clients Receiving a review (as a % of those receiving a service) [PAF D40]

		2005 /06	2006 /07	2 nd Qtr Sep 07	3 rd Qtr Dec 07	4th Qtr Mar 08
Luton	Actual	49.2	70.1	69	66	68
	Target	60	75	75	75	75
Progress on last period?			↑	↑	↓	↑
Comparative Performance	National		3 blobs	3 blobs	3 blobs	3 blobs
		+ 90<=100 3 blobs	+ 90<=100 3 blobs	2 blobs 0<60 + 90<=100	2 blobs 0<60 + 90<=100	3 blobs 0<60 + 90<=100
	Comparators	60<90	60<90	3 blobs 60<90	3 blobs 60<90	3 blobs 60<90



Explanatory Notes (set the scene / explanation of why P.I is below target)

The indicator is below the best performance nationally, and the target of 75% of reviews completed. Performance on this PI will never be 100% as reviews are not scheduled to take place until half way through the period when the care packages are put in place. A target of 75% of reviews completed is a fair number and would attract top performance.

Actions For Improvement

Significant resources have been deployed to clear the back-log of reviews and the Older Persons outstanding reviews have been halved since the beginning of the year. This will continue until year end.

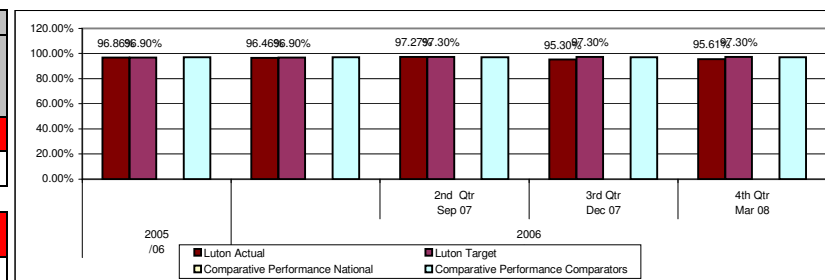
Predicted Scale of Improvement (with Timescale for each action)

With the currently level of resourcing it is anticipated that the year end target will be achieved.

Milestones
4th Quarter report will document improvement in this indicator
Which actions were to have been achieved by the end of quarter 3. The dedicated review team for reviewing older persons packages of care, has now been extended to include adult services
Were they achieved?
Reason for non-achievement:

2. Rent collected as a proportion of rent owed (HRA BVPI 66a)

		2005 /06	2006 /07	2 nd Qtr Sep 07	3 rd Qtr Dec 07	4th Qtr Mar 08
Luton	Actual	96.86%	96.46%	97.27%	95.30%	95.61%
	Target	96.90%	96.90%	97.30%	97.30%	97.30%
Progress on last period?				↑	↓	
Comparative Performance	National	Median	Median	Median	Bottom	Bottom
	Comparators	97.00%	97.00%	97%	97.07%	97.07%



Explanatory Notes (set the scene / explanation of why P.I is below target) Housing Landlord Services restructure is complete and staff have commenced their new roles. The restructure has allowed a focus on the main issues that affect residents-income is one of these. The new income team has brought together staff from the four areas. The section has had to bed down and is going through a large training scheme. Historically, end of year denominators have been used to calculate the result, however, closer working with Finance and MIS means monthly reporting is more accurate.

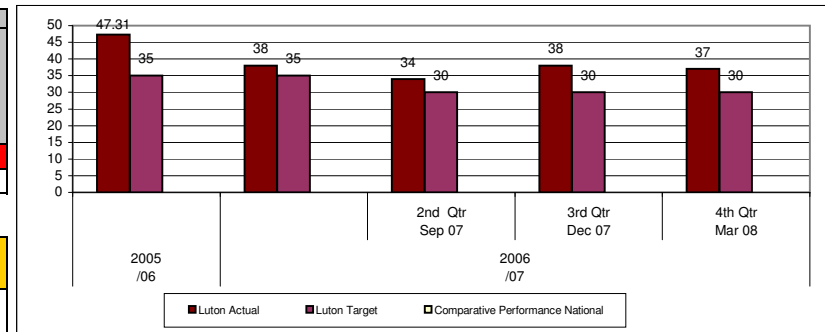
Actions For Improvement The new team will allow a greater focus on income management. There will be a higher concentration on prevention and working with our partners e.g., HB, CAB, Luton Rights to ensure the service catches arrears early. Two examples are reviewing the function provided by CAB we can refer refer tenants earlier and working with HB on a joint protocol. The new housing management IT system will allow much better management and performance monitoring of cases. A more robust performance framework that looks at actions, quality and arrears levels has been introduced and continues to be developed to allow management to focus resources. The new sign up process for new tenants is geared towards promoting regular payment and claiming benefits. This links into the prevention agenda, and is used to refer to other agencies.

Predicted Scale of Improvement (with Timescale for each action) Rent arrears are cyclical with two peaks, during the summer and at christmas when tenants have pressure on their finances. Rent free weeks during christmas and at the end of the financial year have a large affect on arrears and provide a time for tenants to catch up with their payments.

Milestones
Which actions were to have been achieved by the end of quarter 3? None
Were they achieved? Not applicable
Reason for non-achievement: There has been a delay in the implementation of IBS and the training and bedding down of the new system has taken longer than anticipated.

3. Average re-let time times of Local Authority Housing (days) (BV212)

		2005 /06	2006 /07	2 nd Qtr Sep 07	3 rd Qtr Dec 07	4th Qtr Mar 08
Luton	Actual	47.31	38	34	38	37
	Target	35	35	30	30	30
Progress on last period?				↑	↓	
Comparative Performance	National	Median	Median	Median	Median	Median
	Comparators	37	37	37	35	35



Explanatory Notes (set the scene / explanation of why P.I. is below target) The target for re-let was altered to a more challenging 30 days for the year 2007/08 as it was perceived that the changes in process and structure would enable such a target to be met. The repairs and voids manager, a key new post within the restructure, remains vacant. The drive for improvement will be lead by Alan Keers and Liam Dawson giving senior coverage across service areas that influence relet times. A new process has recently been agreed which is being implemented across the applicable service areas.

Actions For Improvement Work is ongoing to finalise a full voids procedure following the action planning process and training is now taking place in March to coincide with the completion of this document. Monthly void performance meetings have been scheduled. The requirement for tenants to provide 4 weeks notice when terminating their tenancies will also be reinforced.

Predicted Scale of Improvement (with Timescale for each action) The requirement to provide 4 weeks notice in advance of termination will impact positively on void turnaround times.

Milestones

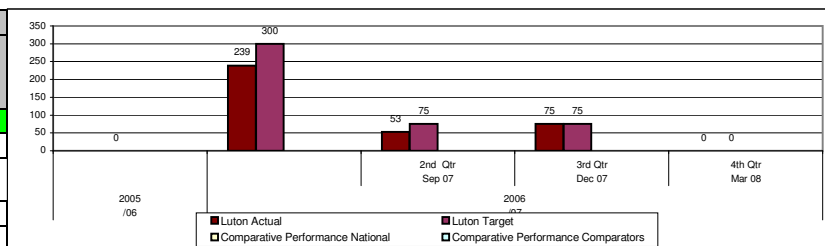
Which actions were to have been achieved by the end of quarter 3? To decrease turnaround time and reach target, carry out training with all key staff on new processes.

Were they achieved? No Training is now due to be completed in June 2008

Reason for non-achievement: Introduction of new working practices following the restructure. Whilst many improvements have been made, such as the introduction of accompanied viewings, liason between sections is ongoing to iron out any teething problems with the interim processes that have been employed.

4. Number of homeless acceptances against 25 per month or less (PSA)

		2005 /06	2006 /07	2 nd Qtr Sep 07	3 rd Qtr Dec 07	4th Qtr Mar 08
Luton	Actual		239	53	75	50 (279 cum)
	Target	N/A	300	75	75	75 (300 cum)
Progress on last period?				↑	↓	↑
Comparative Performance	National					
	Comparators	Not available				



Explanatory Notes (set the scene / explanation of why P.I. is below target)

Acceptances are the total number of households for which the council admits a responsibility to rehouse, and provide temporary accommodation.

Actions For Improvement

This is not a controllable figure in that you can never predict the numbers that approach for housing advice. Good prevention work can assist in reducing the numbers that need to go on and make a formal claim for homelessness.

Predicted Scale of Improvement (with Timescale for each action)

We anticipate exceeding the target by year end. Focus remaining on homeless advice and prevention methods

Milestones: PERFORMANCE IS WITHIN TARGET

Which actions were to have been achieved by the end of quarter. Target achieved

Were they achieved? Yes 2007/08 outturn is 279

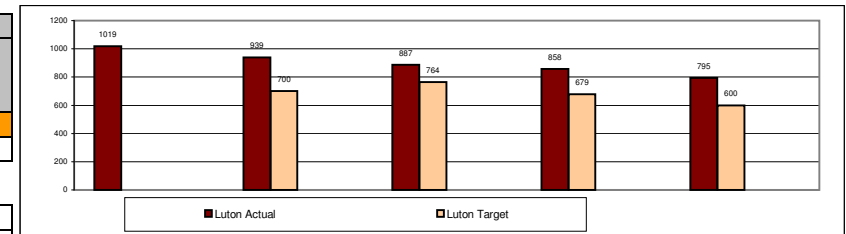
Reason for non-achievement: N/App

5. SOVA (safeguarding of vulnerable adults) medication administration errors and maladministration

			2005 /06	2006 /07				Commentary: 40 referrals were received in the 4th qtr. The majority of referrals related to prescribed medication errors. All cases involving registered care providers have been shared under the SOVA policy with CSCI and Bedfordshire Police Adult Protection Team. One case was investigated by the Police under the Mental Capacity Act but there was insufficient evidence to prosecute. Local hospitals do not report medication errors under SOVA.
					2 nd Qtr Sep 07	3 rd Qtr Dec 07	4th Qtr Mar 08	
		Actual (cum)	Not collected	Not collected	27	26	40	
		Target	0	0	0	0	0	
		National	local PI	local PI	local PI	Local PI	Local PI	Planned Action to improve: Further monitoring and support is currently provided by a Pharmacy Technician to address poor practice in inaccuracy transcribing medicines upon discharge from hospital particularly to rehabilitation and respite care where the majority of errors occurred during the 4th quarter.
Type of accommodation	No							
LBC Care Home	10							
P&V Care Home	21							
Sheltered Housing	3							
Own home	4							
BLPT registered care home	2							
Hospital	0							
Total for third quarter	40							

6. Number of homeless clients in temporary accommodation

		2005 /06	2006 /07	2007		
				2 nd Qtr Sep 07	3 rd Qtr Dec 07	4th Qtr Mar 08
Luton	Actual	1019	939	887	858	795
	Target		700	764	679	600
Progress on last period?				↑	↑	↑
Comparative Performance	National	Not available				
	Comparators					



Explanatory Notes (set the scene / explanation of why P.I is below target)

The reduction of temporary accommodation is dependant upon 2 factors. One is the number of new applicants entering the system, and the second is the number of clients leaving the system by either being rehoused or accepting accommodation in the private sector. There is a shortage of accommodation within Local authority and RSL stock, and with private landlords prepared to accept applicants on housing benefit which impacts on our ability to discharge duty.

<p>Actions for Improvement The prevention team and the work they do to offer options rather than the homeless/temp. accomm. Route to homeless households are controlling new applicants. Encouraging more private sector landlords to accept homeless households.</p>
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Predicted Scale of Improvement (with Timescale for each action)	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
25	26
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59	60
61	62
63	64
65	66
67	68
69	70
71	72
73	74
75	76
77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

The aim was to reach 600 by the end of the 4th quarter.

Milestones :	As above.
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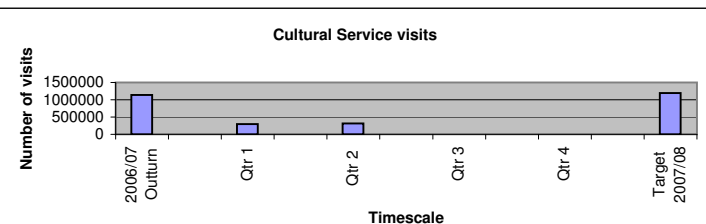
Which actions were to have been achieved by the end of quarter 4? The aim was to reduce the numbers to 600.

Were they achieved? We did not reach the estimated target. Specifically the qualifying offer target was not achieved, however, the allocation quota was, and , good prevention work and housing advice prevented further applications being made. We have assisted 271 clients with rent deposits to prevent them from making a homeless application.

Reason for non-achievement: Delay in rehousing from Aragon Housing Association and overall there were insufficient Local Authority and RSL stock becoming vacant to meet the target.

7. Number of people using Cultural Services

		2005 /06	2006 /07	2 nd Qtr Sep 07	3 rd Qtr cum Dec 07	4th Qtr cum Mar 08	Cum. Total
Luton	Actual	Not collected	1.1 million	316,432	885,397		
	Target increase by 5% 07/08	Not Collected	Not set				1,196,707
Progress on last period?				↑	↑		

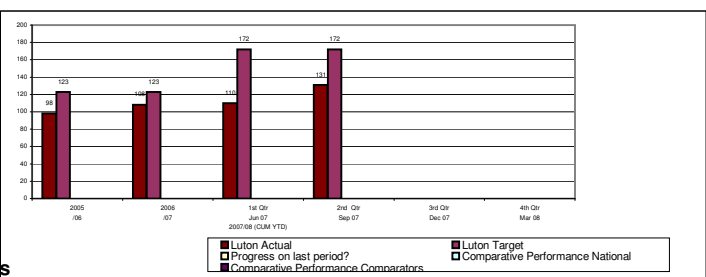


Commentary: The total number of visitors to the Hat Factory, Museum, Library Theatre and Library totalled approx 1.1 Million in 2006/07. The aim is to increase visitor numbers by 5% in 2007/08 to 1,196,707

Planned Action to improve: With the development of a Cultural Trust, there will be quarterly and annual tracking of visitors to gauge whether the establishment of a trust, will result in an increase in number of visitors. The Museum Service will be closed to the public from October through to the end of the year and Stockwood will also be closed for the first 3.5 months of 2008/09 which will impact on the overall visitor figures.

1. Direct Payments (PAF C51/BVPI201) Key Threshold (KT)

		2005 /06	2006 /07	2007/08 (CUM YTD)			
				1 st Qtr Jun 07	2 nd Qtr Sep 07	3 rd Qtr Dec 07	4th Qtr Mar 08
Luton	Actual	98	108	110	131	139	142
	Target	123	123	172	172	172	172
Progress on last period?			↑	↓	↑	↑	
Comparative Performance	National	4blobs	5 blobs	3blobs	4 blobs	4 blobs	4 blobs
	Comparators	90<150	150+ 5 blobs	150+ 5 blobs	150+ 5 blobs	150+ 5 blobs	150+ 5 blobs



Commentary: Direct Payments create more flexibility in the provision of social services by giving money in place of social care services enabling clients to have greater choice, control and therefore, independence over their lives enabling them to make their own decisions about how and when their care is delivered. 2nd Quarter performance has increased slightly on 1st quarter performance due to more intensive promotion of Direct Payments as an option to directly provided services. More work is needed to ensure drop out rates reduce.

Planned Action to improve: The appointment of a dedicated Direct Payments Officer will improve the consistency and support to service users in the management of Direct Payments. The production of a promotional DVD and other material in languages. Working with banking organisations to develop an easy bank account and a visa card to simplify the process for service users

COMPLAINTS ~ TARGET 100% RESPONDED TO WITHIN 10 WORKING DAYS

	1 st QUARTER			2 nd QUARTER			3 rd QUARTER			4 th QUARTER		
	Rcd	response	%	rcd	response	%	rcd	response	%	rcd	response	%
2006/07	78	73	94%	70	63	90%	93	91	98%	72	67	93%
2007/08	86	82	95%	109	83	90%	64	54	84%	92	52	57%

