

CASSC Q4 2015-16 Additional Information

1. PPDR

Children's 86%

Adults 94%

Overall 90%

2. Sickness

Improved result for 2015-16 of 14.36 days compared to 15.87 days in 2014-15. Annual target of 13 days was not met.

To improve sickness during the year, the following actions have been taken - sickness is a standing agenda item on Adult Services Senior Management Team weekly agenda. A Senior Service Delivery Advisor Manager attends these meetings to offer support, advice and best practice to Operational Managers. During Q3, dedicated sessions with team managers to offer support, advice and best practice took place. These sessions have ensured a more consistent application of the policy across Adult Services whilst raising the confidence of Managers to tackle sickness issues amongst their teams.

Short term sickness days (FTE)	2813.95
Long term sickness days (FTE)	5664.44
Total Days (FTE)	8478.39

Snapshot of sickness absence by reason

Long Term – open as at 30th April 2016

Reason	Total Number	Total Days
Chest-Respiratory	7	993
Heart-Blood-Circul	2	188
Infection	1	26
Musculo-skeletal	5	223
Other	6	423
Stomach-Liver-Kidney	1	38
Stress	7	628
Total	29	2519

Short Term – open between 1st April – 30th April 2016

Reason	Total Number	Total Days
Back Problems	3	23
Chest-Respiratory	7	40
Eye-Ear-Nose-Mouth	9	48
Heart-Blood-Circul	1	1
Infection	11	56
Musculo-skeletal	4	15
Neurological	2	2
Other	4	15
Stomach-Liver-Kidney	12	41
Stress	1	2
Total	54	243

3. Delayed Transfers of Care

Totals by reason from pre validated figures for January to March 2016 (WG no longer provide post validation figures breakdown by reason code) excl MH.

Code	Description	January	February	March	Total
1.01	Awaiting completion of assessment	4	1	0	5
2.01	Housing related issues	3	8	3	14
2.02	Home adapt / equip issues	4	1	4	9
2.03	Home care related issues	2	7	8	17
2.04	Care home placement arrangements	2	12	4	18
2.05	Capacity restrictions	1	2	2	5
2.06	Funding related issues	0	0	0	0
		16	31	21	68

The number for January 2016 saw a 56% decrease compared to January 2015. The 'spike' in February can be attributed to influenza and the Noro virus resulting in unprecedented admissions across Wales. The position has improved significantly again in April. Integrated Health & Social Care Partnership Delayed Transfers of Care Data Analysis April 2016 reports the number for April for Cardiff LA (15) decreased by 12 in comparison to the previous month.

4. **SCA002a** – This indicator measures the people aged 65+ in receipt of traditional community based services as at the last day of the year. The target of 47 was at the beginning of 2015, as part of the corporate planning process and set to for the term of the plan.

At the time when the target was set it was anticipated the numbers would increase as any eligible needs would be met through traditional commissioned care and services.

It is no longer appropriate to monitor progress against this (high) target as it doesn't take into account the council's approach to signpost people to local community based options.

5. SCA007 Reviews

Annual review overdue – 18 days over the planned annual review.

This year has seen the highest result for 10 years (when the indicator was introduced).

Total % and reviews undertaken during the year:

Year	No. Completed	% Completed	Total of Reviews Due
2015-16	3468	88%	3930
2014-15	3162	81%	3903

6. SCAL23 Short Term Intervention (reablement)

Total number of people accessing short term intervention

	Aim Achieved	Total number	% Aim Achieved
2014-15	469	601	78.04
2015-16	488	672	72.62