

ADULT SOCIAL CARE AND HEALTH PERFORMANCE REPORT QUARTER 3 2023-24



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1. Our Borough Strategy 2021-30 Priorities

Performance Management in St Helens Borough Council is focused around achieving the 6 strategic priorities outlined in Our Borough Strategy 2021-30.



Priority 1 - Ensure children and young people have a positive start in life

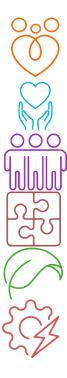
Priority 2 - Promote good health, independence, and care across our communities

Priority 3 - Create safe and strong communities and neighbourhoods for all

Priority 4 - Support a strong, thriving, inclusive, and well-connected local economy

Priority 5 - Create green and vibrant places that reflect our heritage and culture

Priority 6 - Be a responsible council



2. Borough Strategy Priorities and the UN Sustainable Development Goals

The Sustainable Development Goals (SDGs) are a collection of 17 interlinked global goals designed to be a "blueprint to achieve a better and more sustainable future for all". The SDGs were set up in 2015 by the United Nations General Assembly and are intended to be achieved by the year 2030. Making progress towards the global goals by 2030 depends on local action. SDGs fit with Our Borough Strategy Vision and the Council's approach to Reset and Recovery. All 17 Sustainable Development Goals have been mapped against the 'Our Borough Strategy' priorities and outcomes.



3. Purpose of the Report

The purpose of the report is to inform and update Elected Members on performance against the 6 priorities of the Our Borough Strategy 2021-30 and respective outcomes as set out above. The report covers the period Quarter 3 2023-24 providing the performance position reported over the course of the period. The reporting format splits the report into 2 distinct parts:

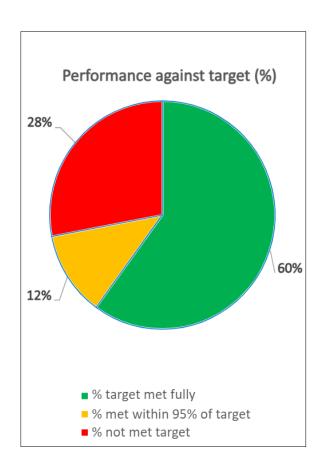
Part 1 of the report is a statistical analysis of the performance position at Quarter 3 2023-24.

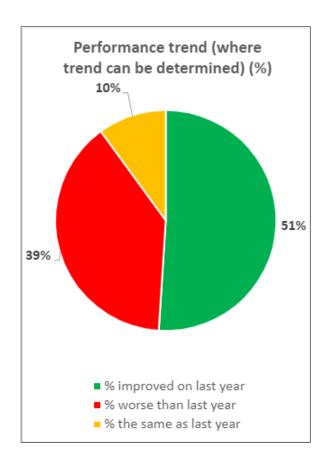
Part 2 of the report is a commentary on performance against delivery of the 6 strategic priorities and their respective outcomes summarising current performance within the quarter and action being taken to improve performance where required.

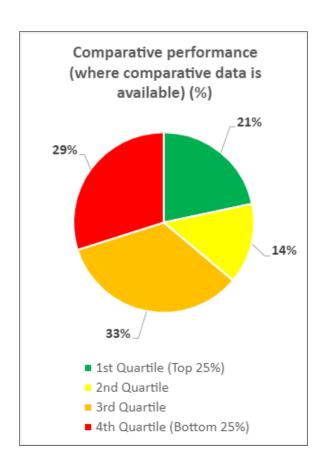
3. Executive Summary

The charts below provide an overview position of all performance measures across all 6 Borough Strategy priorities as at Quarter 3 2023-24, examining:

- · Performance against target.
- Trend whether performance has improved / worsened since the position 12 months ago.
- Inter Authority performance how St Helens' performance compares to that of a family group of authorities similar to St Helens.







4. Part 1 - Statistical analysis

To measure performance at Quarter 3 2023-24, the Council is reporting against a total of 86 performance indicators, where targets were set. The indicators reported are split between Tier 1 and Tier 2:

Tier 1 – A set of high-level strategic indicators and targets that constitute the Outcomes Framework of the Borough Strategy 2021-2030.

Tier 2 – A further set of performance indicators and targets to address key priority areas of performance within Directorates / Departments.

In the supporting scorecards for each priority area, this distinction is maintained and both tiers are shown as they are all relevant to an understanding of overall performance.

The Quarter 3 report statistical analysis looks at performance under 3 areas:

- 1. Performance against targets
- 2. Trend over 12-months
- 3. Inter-authority comparison

4.1 Performance Against Target

This measure sets out:

- The percentage of indicators by priority where targets have been fully met or exceeded.
- The percentage of indicators by priority that have not fully met target but are within 95% of target.
- The percentage of indicators by priority that have failed to meet the target by more than 5%.

In the supporting scorecards for each priority area, green, amber, and red colours are used to depict indicators in each of the above three bullet point situations.

Priority	Number of Indicators with data	% target fully met	% target met within 95%	% target not met
1. Ensure children and young people have a positive start	21	52% (11)	24% (5)	24% (5)
2. Health, independence, and care	21	57% (12)	14% (3)	29% (6)
3. Safe and strong communities and neighbourhoods	14	64% (9)	0% (0)	36% (5)
4. Strong, thriving, inclusive and well-connected economy	8	63% (5)	0% (0)	37% (3)
5. Green and vibrant places reflecting our heritage and culture	9	67% (6)	0% (0)	33% (3)
6. Responsible Council	13	70% (9)	15% (2)	15% (2)
Total	86**	60% (52)	12% (10)	28% (24)

^{**} Some new indicators do not have targets set for the year as baseline data is being collected in 2023-24. See individual priorities for details.

A listing of indicators, which have met or exceeded target, have met within 95% of target, or have failed to meet target by more than 5% are shown within each of the 6 priority scorecards.

4.2 The Performance Trend

This measure compares performance at Quarter 3 2023-24 with performance at Quarter 3 2022-23 by setting out:

- The percentage of indicators where performance compared to last year has improved.
- The percentage of indicators where performance compared to last year has declined.
- The percentage of indicators where performance compared to last year is the same.

In the supporting scorecards for each priority a black arrow pointing up, downwards or sideways is used to depict indicators in each of the above 3 scenarios.

NB. There are a small number of indicators for 2023-24, where performance data in 2022-23 is not available and therefore it is not possible to show a performance trend. Where this is the case N/A appears.

Priority	Number of Indicators with data	% improved on last year	% worse than last year	% the same as last year
1. Ensure children and young people have a positive start	22	45% (10)	41% (9)	14% (3)
2. Health, independence, and care	19	42% (8)	42% (8)	16% (3)
3. Safe and strong communities and neighbourhoods	11	45% (5)	55% (6)	0% (0)
4. Strong, thriving, inclusive and well-connected economy	5	60% (3)	40% (2)	0% (0)
5. Green and vibrant places reflecting our heritage and culture	8	63% (5)	37% (3)	0% (0)
6. Responsible Council	13	70% (9)	15% (2)	15% (2)
Total	78	51% (40)	39% (30)	10% (8)

4.3 Inter Authority Comparison

This measure shows how performance in St Helens compares to the performance of a family group of authorities similar to St Helens. It does this by ranking each authority's performance by quartile. The top performing 25 % are in the first quartile and the bottom 25% in the fourth quartile. Authorities in between are placed in either the 2nd or 3rd quartiles. Comparative national data is only available to be used for 43 indicators.

In the supporting scorecards for each priority, where this measure is used, green indicates that St Helens is in the top best performing quartile, red that it is in the bottom quartile or yellow/amber that St Helens is in either the 2nd or 3rd quartile). The England average figure (Eng, Av) is also now presented, as is the statistical neighbour group average (LA Av.) to provide additional context to comparative performance.

Priority	Number of Indicators with data	% in 1st quartile	% in 2nd quartile	% in 3rd quartile	% in 4th quartile
1. Ensure children and young people have a positive start	22	23% (5)	14% (3)	23% (5)	40% (9)

Priority	Number of Indicators with data	% in 1st quartile	% in 2nd quartile	% in 3rd quartile	% in 4th quartile
2. Health, independence, and care	11	18% (2)	9% (1)	46% (5)	27% (3)
3. Safe and strong communities and neighbourhoods	0	0% (0)	0% (0)	0% (0)	0% (0)
4. Strong, thriving, inclusive and well-connected economy	6	33% (2)	17% (1)	50% (3)	0% (0)
5. Green and vibrant places reflecting our heritage and culture	2	0% (0)	50% (1)	0% (0)	50% (1)
6. Responsible Council	2	0% (0)	0% (0)	50% (1)	50% (1)
Total	43	21%* (9)	14% (6)	33%* (14)	33%* (14)

NB – Percentages rounded to nearest whole number

The latest available picture of inter authority performance largely relates to the 2021-22 financial year. Therefore, St Helens position vis-a-vis its quartile position is based on St Helens performance in that particular year relative to its statistical neighbours. Future reports will be updated to reflect the 2022-23 comparative performance position as and when verified data is published.

4.4 Summary and conclusion of statistical analysis

- 72% of indicator targets have been either exceeded, met fully, or met within 95% of target. This compares to 73% of indicators in Quarter 3 2022-23.
- 28% of indicator targets were not met, compared to 27% in Quarter 3 2022-23.
- The trend measure indicates over the course of the last 12 months 51% of indicators showed improvement, 10% of indicators maintained the same performance and 39% of indicators showed a downward trajectory. The position in Quarter 3 2022-23 was that 52% of indicators showed improvement, 7% of indicators maintained the same performance and 41% of indicators showed a downward trajectory.
- **21%** of all indicators where comparison is possible are in the top quartile, compared to 24% at Quarter 3 2021-22, whilst **33%** are in the bottom quartile, compared to 27% at Quarter 3 2022-23. 14% and 33% of indicators are in the 2nd and 3rd quartile respectively, compared to 20% and 29% in Quarter 3 2022-23 (NB percentages rounded to nearest whole number).
- Annual targets were set where possible within the context of national, Northwest, and local authority
 comparator group data. Equally targets aspire to be challenging but achievable within the context of
 the available resources. The targets also take account of performance during the last 3 years which
 has been an unprecedented period due to the onset and impact of the Covid-19 pandemic, a cost-ofliving crisis, increasing demand for services and severe financial constraints.
- Performance should therefore be viewed within the context of what has continued to be a challenging
 operational period for the Council. The legacy impact of the pandemic, the cost-of-living crisis, rising
 demand for services and the requirement to deliver significant budget savings has impacted the
 Council's ability to meet targets and demonstrate improvements in performance trends. Equally in
 many areas the impact of the pandemic on performance is yet to be fully realised and understood.
 However, given the effect of the pandemic on St Helens to date there is the strong likelihood that

existing inequalities may be widened. This presents risks for future performance, but particularly in areas such as public health, education and schools and children's services where comparative performance is already challenging

5. Part 2 - Commentary on performance against priority and outcome

Priority 2 – Promote good health, independence, and care across our communities.

Outcomes

- People live well independently
- People have a positive experience of health and social care services
- People's physical and mental wellbeing improves

• Overview of priority performance

The tables below show provide an overview of performance at Quarter 3 2023-24 for the indicators reported.

Performance Against Target

Number of Indicators with data	% target fully met	% target met within 95%	% target not met
21	57% (12)	14% (3)	29% (6)

The Performance Trend

Number of Indicators with data	% improved on last year	% worse than last year	% the same as last year
19	42% (8)	42% (8)	16% (3)

Inter Authority Comparison

Number of Indicators with data	% in 1st quartile	% in 2nd quartile	% in 3rd quartile	% in 4th quartile
11	18% (2)	9% (1)	46% (5)	27% (3)



Priority 2 - Promote good health, independence, and care across our communities

Tier 1

Outcome	Ref	Performance Indicator	Reporting Frequency	Higher / Lower is better?	22/23 Outturn	23/24 Target	Q1 June	Q2 Sept	Q3 Dec	% Variance from Target (Dec)	Trend	Comparative Performance
	PH- 016	Admission episodes for alcohol specific conditions, all ages, per 100,000 population	Quarterly	Lower	1017	1000	1049.8	1056	1045	-4.5%	•	4th Quartile Eng Av. 626.0 LA Av. 813 (2021/22)
People's physical and	PH- 017	Emergency hospital admissions for falls for people aged 65+ per 100,000 population	Quarterly	Lower	2370 (provisional)	2320	2548	2261	3053	-31.59%	•	3rd Quartile Eng Av. 2,100 LA Av. 2,223 (2021/22)
mental wellbeing improves	PH- 018	Mortality rate due to suicide and injury of undetermined intent per 100,000 population	Quarterly	Lower	14	13.6	14.6	16.0	15.8	-16.18%	•	3rd Quartile Eng Av. 10.4 LA Av. 12.8 (2019/21)
	PH- 021	Successful percentage completion of drug treatment - opiate users	Quarterly	Higher	6.2	6.1	6.2	4.8	5.5	-9.84%	•	2nd Quartile Eng Av. 5.0 LA Av. 5.1 (2021)

		Performance	Reporting	Higher / Lower	22/23	23/24	Q1	Q2	Q3	% Variance	_	Comparative
Outcome	Ref	Indicator	Frequency	is better?	Outturn	Target	June	Sept	Dec	from Target (Dec)	Trend	Performance
	PH- 022	Successful percentage completion of drug treatment – non-opiate users	Quarterly	Higher	30.3	33	31.6	29.9	32.5	-1.52%	1	3rd Quartile Eng Av. 34.3 LA Av. 35.0 (2021)
	PH- 023	Under 75 mortality rate from CVD	Quarterly	Lower	106.7	104	101	105.7	118.5	-13.94%	N/A	4th Quartile Eng Av. 76 LA Av. 94.7 (2021)
People live well independently	ASC- 001	Percentage of adults aged 18-69 with learning disabilities known to ASCH, in settled accommodation at the time of their most recent assessment, formal review or other MDT planning meeting.	Quarterly	Higher	94.3%	95%	94.3	96.6	96.4	1.47%	1	1st Quartile Eng Av. 80.5 LA Av. 88.4 (2022/23)
	ASC- 004	The outcome of Short-Term Services	Quarterly	Higher	73%	87%	88.5	94.6	92.5	6.32%	•	4th Quartile Eng Av. 77.5 LA Av. 78.9 (2022/23)

Outcome	Ref	Performance Indicator	Reporting Frequency	Higher / Lower is better?	22/23 Outturn	23/24 Target	Q1 June	Q2 Sept	Q3 Dec	% Variance from Target (Dec)	Trend	Comparative Performance
	ASC- 002	Number of individuals (65+) in a Permanent Nursing placements - per 10,000 Population 65+	Quarterly	Lower	111	105	109.7	72.5	73.3	30.19%	1	N/A
	ASC- 003	Number of individuals (65+) in a Permanent Residential placement - per 10,000 Population 65+	Quarterly	Lower	100	105	98.4	98.6	98.2	6.48%	1	N/A
People have a positive experience of health and care services	ASC- 005A	Percentage of Residential Homes rated outstanding or good	Quarterly	Higher	100%	100%	100	100	100	0%	*	N/A
	ASC- 005B	Percentage of Nursing Homes rated outstanding or good	Quarterly	Higher	68%	80%	83	83	83	3.75%	1	N/A
	ASC- 006	Percentage of people using adult social care who receive direct payments	Quarterly	Higher	24%	26%	23.3	20.6	20.4	-21.54%	•	3rd Quartile Eng Av. 26.2 LA Av. 28.2 (2022/23)

Outcome	Ref	Performance Indicator	Reporting Frequency	Higher / Lower is better?	22/23 Outturn	23/24 Target	Q1 June	Q2 Sept	Q3 Dec	% Variance from Target (Dec)	Trend	Comparative Performance
	ASC- 007	Service user satisfaction with safeguarding outcome	Quarterly	Higher	74%	75%	73.2	69	69	-8%	•	N/A
	ASC- 008	Number of adults receiving self-directed support in the year to 31st March as a percentage of clients accessing long-term community support.	Quarterly	Higher	97.4%	98	97.7	98.6	98.5	0.51%	1	3rd Quartile Eng Av. 93.5 LA Av. 98.7 (2022/23)

Tier 2

Outcome	Ref	Performance Indicator	Reporting Frequency	Higher / Lower is better?	22/23 Outturn	23/24 Target	Q1 June	Q2 Sept	Q3 Dec	% Variance from Target (Dec)	Trend	Comparative Performance
People live well independently	ASC- 009	The number of carers receiving a carers specific service (per 10,000 population)	Quarterly	Higher	163.3	160	182.5	183.3	179	11.88%	1	N/A
	ASC- 010	Number of completed annual reviews in a rolling 12 month period as a percentage of all clients in receipt of a service for 12 months	Quarterly	Higher	97.5	95	96.5	90.8	91.1	-4.11%	•	N/A
	ASC- 011	Percentage of adults aged 18-64 with learning disabilities in employment	Quarterly	Higher	7.1%	6%	7.1	7.4	7.8	30%	1	1st Quartile Eng Av. 4.8 LA Av. 4.6 (2022/23)
	ASC- 015	Number of individuals (18+) who are receiving domiciliary care as a % of the total service user population	Quarterly	Higher	50.8%	50%	45.7	59.4	51.9	3.8%	N/A	N/A

Outcome	Ref	Performance Indicator	Reporting Frequency	Higher / Lower is better?	22/23 Outturn	23/24 Target	Q1 June	Q2 Sept	Q3 Dec	% Variance from Target (Dec)	Trend	Comparative Performance
People have a positive experience of health and care services	ASC- 013	Percentage of initial strategy discussions undertaken within 1 working day of an adult safeguarding alert being made to the contact centre.	Quarterly	Higher	96%	95%	98	95.9	95.2	0.21%	*	N/A
	ASC- 014	Percentage of visits to an adult safeguarding victim undertaken within 2 working days of the initial strategy discussion unless requested otherwise by service user or family	Quarterly	Higher	100%	98%	100	100	100	2.04%	*	N/A

Summary of Performance against outcome and action for improvement

Outcome - People live well independently

Current Performance

- Performance against the outcome, "People live well independently", has remained strong across the majority of areas at Quarter 3 2023-24.
- **ASC-001** There are high numbers of people with a learning disability in settled accommodation. At the end of December 2023, a total of 543 clients (96.4%), with a learning disability, out of 563 were identified as being in settled accommodation, which is above the target of 95% set for the year. St Helens' latest comparative performance is top quartile within its statistical neighbour group.
- **ASC-004** The number of people receiving short-term involvement from St Helens' Adult Social Care services not going on to require long-term support has improved compared to the 2022-23 outturn. Over the course of the first 3 quarters 2023-24, a total of 199 out of 215 people who received

short term involvement from St Helens' Adult Social Care did not go onto to access long term services. This gives a figure of 92.5%, which is currently above the target of 87% set for the year.

- **ASC-009** Strong support has continued to carers within the borough. As at the end of December 2023, there were 2,649 carers in receipt of a carers specific service. This equates to a rate of 179 per 10,000 population, which exceeds the annual target of 160 set for the year. St Helens had the highest number of carers in the North West in receipt of a carers specific service at the end of Quarter 4 2022-23, and performance has continued to remain strong during 2023-24.
- **ASC-010** St Helens Adult Social Care Department has continued to ensure relatively strong performance in terms of the completion of annual reviews for people accessing long-term support. The number of people accessing long term support for more than 12 months at the end of December 2023 was 2,054 and of these people 1,872 or 91.1% received a completed annual review in a rolling 12-month period. Performance was slightly below the target of 95%, and down on the Quarter 3 performance of 96.8% in 2022-23.
- **ASC-011** Numbers of people with a learning disability in employment remains comparatively high in St Helens. As of the end of December 2023 there were 44 people out of 563 (7.7%) with a learning disability in paid employment. This is above the target of 6% set for the year and St Helens' latest comparative performance for 2022-23 remains top quartile within its statistical neighbour group. In addition, there are 21 people currently actively seeking work. We are exploring a wider outreach offer to support people including volunteering options for individuals that require alternative options of work and experience

Action for Improvement

• ASC 010 – There are plans in place to ensure all outstanding reviews are completed within this financial year.

Outcome - People have a positive experience of health and social care services

Current Performance

- Delivery against this outcome continues to ensure that people have a positive experience of health and social care services within St Helens and performance remaining generally strong.
- **ASC-002** The number of people aged 65 plus in permanent nursing care is now performing better than target. At the end of December 2023 there was a total of 279 people aged 65 plus in permanent nursing care. This equates to a rate of 73.3 per 10,000 of the over 65+ population in the borough, against a target of 105. Performance at the end of December 2023 was better than the same period in the previous year.
- **ASC-003** The number of people in aged 65 plus in permanent residential care has continued to be better than target. .At the end of December 2023 there was a total of 374 people aged 65+ in a Permanent Residential placement. This equates to a rate of 98.2 per 10,000 of the over 65+ population

in the borough, better than the target of 105. Performance at the end of December 2023 was better than the same period in the previous year. St Helens had the 5th lowest levels in the NW of people aged 65+ in Permanent Residential Care at the end of Q4 2022-23.

- **ASC-005A** At the end of December 2023, all 17 residential homes within St Helens continued to be recorded by the Care Quality Commission (CQC) as either 'Good' or 'Outstanding'.
- ASC-005B At the end of December 2023, of the 12 nursing homes in St Helens, 10 or 83% were recorded by the Care Quality Commission (CQC) as either 'Good' or 'Outstanding'. There are 2 nursing homes that require improvement. The homes that require improvement are Grace Court and Elizabeth Court. Both the services are included on the Market Oversight Register which is reviewed as part of the quarterly Market Oversight Meetings.
- **ASC-006** At the end of December 2023 there were 2,634 people in receipt of community services, of which 538 were in receipt of Direct Payments, giving a Quarter 3 of 20.4%. This is below the annual target of 26% and marginally down on the performance position in Quarter 2 2023-24 and for the same period in the previous year.
- **ASC-007** Service user satisfaction with the outcome of safeguarding enquiries is performing marginally below target. A total of 1,526 Safeguarding Enquiries were closed between the start of April and the end of December 2023, with 1,052 having the outcomes identified by the service user as fully achieved. This gives a Quarter 3 figure of 69%, which is below the target of 75%. There were 127 Safeguarding Enquiries with a desired outcome of Partially Achieved. If these were included with the Fully Achieved outcome, the outturn for Quarter 3 2023-24 would be 77%. For the same period in the previous year performance stood at 71%.
- **ASC-008** High numbers of Adult Social Care service users continue to receive self-directed support. Over the course of the first 3 quarters 2023-24, a total of 2,929 clients out of 2,972 in receipt of services had been through the self-directed support process giving an outturn of 98.5%, which is above the target of 98% and higher than the performance of 97.4% for the same period in the previous year.
- **ASC-013** / **ASC-014** The Adult Social Care Department's compliance with timescales for undertaking safeguarding procedures remains strong. At the end of Quarter 3, the initial strategy discussions to a safeguarding alert indicator is performing better than target at 95.2%. A total of 1,099 initial strategy discussions were undertaken within 1 working day out 1,155 enquiries received during the period. The visits to an adult safeguarding victim indicator was at optimum performance of 100%. Out of the 51 safeguarding investigations commenced between the start of April and the end of December 2023, all 51 had a visit occurring within two working days.
- **ASC-015** As of the end of December 2023, the number of individuals (18+) who are receiving domiciliary care (1,556) as a percentage of the total service user population (2,621) is 51.9%, which continues to exceed the target for the year of 50%. A total of 1,367 individuals were receiving domiciliary care out of the 2,634 individuals receiving community based services. At the end of Quarter 4 2022-23, St Helens had the highest percentage of people in the North West in receipt of a community service receiving domiciliary care. This trend has continued in 2023-24.

Action for Improvement

• ASC 006 - A review of the end-to-end process for accessing Direct Payments has commenced. This will establish whether the department needs to improve; promoting the benefits of direct payments; ensure the process of accessing direct payments is simple; ensure there is appropriate support in place to manage a direct payment or understand why residents choose not to take a direct payment as an alternative to commissioned care and support. Feedback from this review will be utilised to develop a targeted action plan to improve performance.

Outcome - People's physical and mental wellbeing improves

Current Performance

- There is limited data reported for this outcome during Quarter 3 as the majority of measures are reported annually. Performance however remains challenging in areas.
- **PH-016** Hospital admissions for alcohol specific reasons remain very high. The most recent provisional local data for alcohol specific admission episodes for Quarter 2 2022-23 (a 12-month rolling rate) reveals that the rate is 1,045 admissions per 100,000 population. This equates to a total of 1,864 admissions over the 12-month period). This is slightly lower than the previous quarter where the rate was 1,056 per 100,000. The latest verified published data is for the period 2021-22 and St Helens rate of 1,024 admissions per 100,000 in St. Helens is significantly higher than the North West (815) and England (626) averages.
- **PH-017** Hospital admissions for falls have seen an increase since the data was last reported and the indicator is now performing worse than target. The latest provisional data relates to Quarter 2 20223-24 and shows a rate of 3,053 admissions per 100,000 which pertains to 289 admissions during the quarter. The previous quarter's data showed an admission rate of 2,261 admissions per 100,000. The provisional annual data for St Helens outturn in 2022-23 show a slight decrease from the 2021-22 verified published figure of 2,376 per 100,000 in 2021-22 to 2,370. The 2021-22 published verified data gave a St. Helens rate of 2,376, which was higher than both the England and North West averages (2,100 and 2,320 per 100,000 respectively).
- **PH-018** St Helens mortality rate due to suicide remains high. The most recently available data relates to Quarter 3 2023-24 where the provisional 3-year rolling rate of mortality from suicide and injury of undetermined intent is 15.8 suicides per 100,000. This relates to 75 suicides over the 3-year period. It should be noted that there is an amendment to the Quarter 2 figure which changed from 14.3 to 16.0 due to updated deaths data.
- PH-021 / PH-022 The trend of opiate drug users successfully completing treatment in St Helens without re-presenting has increased but is not currently meeting the target of 6.1%. The most recent data which relates to Quarter 2 2023-24 data showed that 5.5% of opiate users successfully completed treatment without readmission within 6 months, an increase on the previous quarter's figure of 4.8%. The latest nationally verified data is for the period 2021 showed 6.6% of opiate users in St Helens successfully completed treatment without re-presenting within 6 months, compared to 5.0% nationally. The trend of non-opiate drug users successfully completing treatment in St Helens without re-presenting has also improved, but

- again is currently not meeting the target of 33%. The most recent data which also relates to Quarter 2 2023-24 data showed that 32.5% of non-opiate users successfully completed treatment without readmission within 6 months, better than the previous quarter figure of 29.9%. The latest nationally verified data is for the period 2021 and shows 31.5% of non-opiate users successfully completed treatment without re-presenting within 6 months, compared to 34.3% nationally.
- **PH-023** St Helens' mortality rates due to CVD remain comparatively high and have increased over the course of the first 3 quarters. Using local death registration data, a provisional quarterly annual rolling rate for Q3 2023-24 gives a rate of 118.5 premature deaths per 100,000 (relating to 203 deaths). This is an increase from the previous quarter when the rate was 105.7 (relating to 182 deaths).

Action for Improvement

- PH-016 Alcohol specific admissions performance continues along a fairly flat and stable trend, but admissions are still high. We are currently looking at the data in more detail to understand more about these attendances and what might be most effective to reduce them. It is likely that these alcohol specific admissions represent people with existing conditions and poor health generally. Conditions will include mental and behavioural disorders due to alcohol, alcoholic liver disease and alcohol poisonings. The drugs and alcohol services have received investment linked to the national drugs strategy to increase capacity to help more people drinking harmfully in a community setting. We now have more people accessing treatment in the community and this is not the case in many other areas. The community service work closely with the acute trust to support people who may frequently attend hospital for alcohol related problems to ensure their needs are met as far as possible in a community setting and thus reduce the need to receive hospital care, as far as possible. However, it is important to recognise that this cohort of people are already experiencing significant ill health as a result of alcohol consumption and that many do already need hospital care. It may take some time before the impact of the preventive work to reduce harm in the community results in numbers falling in the hospital setting.
- PH-017 Injuries from falls can be life changing or even fatal. Whilst the overall trend in falls in the over 65s is a generally downward trajectory since 2011/12, we have seen a recent rise in falls reported. It is important to note however that there a were some changes to the coding methods in 2021/22 and we cannot yet see how this has affected national and regional trends. The Community Falls Prevention Service is still undergoing a tender process and there have been two unsuccessful attempts to secure a suitable provider so far. A market testing exercise was carried out in 2023 to understand if a different model would be more viable than that outlined in the existing specification. The service specification has since been revised again in response to this. The Falls Prevention partnership was re-established in September to review the whole multi agency response to falls prevention. However, due to the ongoing procurement process the partnership has limitations currently.
- PH-018 Suicide Prevention remains one of our top priorities in the council and across the Integrated Care Partnership Board. Local rates have fluctuated over time and the current economic climate means is challenging for people. Although we saw improvement since 2015-17 there is ongoing partnership work to help people access the support that they may need. The local multi agency strategy and action plan, which aligns with the ambitions of a new Cheshire & Merseyside Suicide Prevention strategy was approved by Cabinet in July 2023 and launched in September 2023. The details of the strategy, its action plan and our local partnership have been shared in previous performance reports. The launch included an ongoing 3 point pledge which represents something that we are asking everyone to do to help prevent suicides: 1) Undertake the Zero Suicide Alliance 20 minute training to know how to have a conversation if someone is feeling suicidal, 2) Download the StayAlive app to keep safe anyone experiencing suicidal thoughts and 3) Check in with at least 3 people to see how they are doing, especially if you think they may be having a tough time right now.

- PH-021 Successful completion of treatment for opiate drug addiction is generally very good in St Helens and we have an excellent service in place provided by CGL (Change Grow Live). After a short downward trend in Quarter 1 (caused by a very small number of people re-presenting to service after completing their treatment), the successful completion rate has risen again in Quarter 2. for opiate users, and the service performs consistently better than other services nationally. Our community service are well aware of the recent fluctuation and maintain that they will always work with people who re-present at service after completing their treatment making sure they are stabilised with a view to becoming abstinent at a later date when they are fully ready. Every representation to service is treated as a priority incident.
- **PH-022** Successful completion of treatment for non-opiate users in St Helens is still trending fairly close to national figures and in Quarter 4 2022-23 exceeded the national rate, which is good news. The overall trend is affected by an overall increase in the numbers of people now accessing the services through the additional work and capacity relating to the national drugs strategy. It is important to note that any dip in the rates of successful completions represents a relatively small number of people returning to service within 6 months after their treatment is complete. These people still require support from the service and will always be welcomed back and restabilised with a view to abstinence when they are ready.

For more information about individual performance indicators that support the achievement of these outcomes please see the scorecard.