

Indicator Initiation Form (December 2014)

Basic Information

Indicator Name i.e. the name that you would use for the indicator when it is shown in reports	Percentage of Older Adult Population (65+) who are In receipt of long term social care support
Polarity – what is good performance: either a high result is good or a low result is good	Low
Data Frequency - how frequently will the result be reported, i.e. every month/3 months/6-months/annually/every 2 years etc	Quarterly, with annual benchmarking
Precision – how precisely do we need to report the result; either as a whole number, or to one or two decimal places	Percentage to 1 decimal place
Reporting period - If annual or less frequent will the result be over a financial year, school year or calendar year	Snapshots at end of each quarter
Reporting delay – How quickly can the result be provided after the end of the reporting period?	2 weeks
Unit of measure - the unit the result is measured in, i.e. a %, number or £	%
Result type - Whether the result will be cumulative, an average or a snapshot at a point in time	Snapshot at point in time

Comparative information

Comparative data – what benchmark data will available for the indicator (all England /Regional /Family Group - also known as statistical neighbours / West Yorkshire)	We can gather data to benchmark from all other councils by analyzing data submissions as part of the Adults Health and Social Care SALT return.
Family Group – if benchmark data from a family group is available, what is the name of the family group (CIPFA /iQuanta /DfE /etc)	Will compare to CIPFA group, Yorkshire and Humber and the Best Borough In the North Councils
Data source - what is the data source for benchmark data? (e.g. DCLG, LG Inform)	The number of clients in receipt of long term social care (have a finalized support or care plan with open services on) on the last day of the reporting period. Population data from ONS

Indicator information

Rationale – why are we measuring this aspect of performance, i.e. the rationale for the indicator	To measure the success of preventative service across health and social care. An increase in prevention and access to universal and community services should ensure that people keep their independence for longer and are less reliant on long terms social care support.
Definition – goes into more detail about how the indicator will be measured and what is being measured. It also includes the precise meaning of any specific terms. It includes information that is essential to the calculation included in the definition.	Number of older people (65+)in receipt of long term social care support at the end of each quarter. As per the Adults Health and Social Care Client Information System. Latest 65+ Population projection from the Office of National Statistics https://dataworks.calderdale.gov.uk/dataset/population-forecast

<p>Calculation –what are the component parts of the indicator and the calculation that creates the result. Provide an example if that is helpful.</p>	<p>Element A Number of older people (65+)in receipt of long term social care support at the end of each quarter. As per the Adults Health and Social Care Client Information System.</p> <p>Element B 65+ population Calculation A / B</p>
<p>Source of result – what are the data sources for the component parts of result (collection systems/other sources? Are the collection systems/sources internal or external to the council?</p>	<p>Client in receipt of services from Adults Health and Social Care Client Information System</p> <p>Population projection from Office OF National Statistics</p>

Indicator Responsibilities

<p>Responsible Officer –the person who has responsibility for the indicator including the indicator definition, setting targets, providing forecasts and performance comments, and for data quality</p>	<p>Iain Baines</p>
<p>Data Collection Officer –the person who is responsible for calculating the indicator result and/or reporting the indicator result in the Making a Difference system</p>	<p>Paul Swallow</p>