

10th June 2019

Agenda Item: 6

REPORT OF THE CORPORATE DIRECTOR, ADULT SOCIAL CARE AND HEALTH

ADULT SOCIAL CARE AND PUBLIC HEALTH PERFORMANCE AND PROGRESS UPDATE FOR QUARTER 4

Purpose of the Report

1. To provide the Committee with a summary of performance for Adult Social Care and Health for quarter 4 (1 April 2018 to 31 March 2019) and seek comments on any actions required (Part One of this report).
2. To provide the Committee with an update against the Adult Social Care and Public Health Departmental Strategy at the end of quarter 4 (1 April 2018 to 31 March 2019) and seek comments on any actions required (Part Two of this report).

Information

3. The Council's Planning and Performance Framework establishes the approach that the Council takes to planning and managing its performance to deliver effective and responsive services to service users and their carers.
4. The Council has agreed that the key measures of its performance will be defined through a number of core data sets which are detailed in its Council Plan and each of its Departmental Strategies.
5. The refreshed Adult Social Care and Public Health Departmental Strategy was approved by Policy Committee in May 2019 and this is therefore the final update on progress against the original document.
6. Performance against these core data sets is reported to Committee every three months (quarterly) to support the performance management of the delivery of services.
7. This report provides a summary of the provisional quarter 4 position for the Adult Social Care and Health Core Data Set performance measures that fall within the responsibility of the Adult Social Care and Public Health Committee. The full Core Data Set is attached as **Appendix A**.

8. The complete update of actions and indicators contained within the Departmental Strategy is attached at **Appendix B**.
9. Indicator results contained in this report and in **Appendices A and B** are provisional and are subject to change until year-end statutory returns have been submitted and finalised.

Part One - Department Core Data Set

Adult Social Care and Health Performance for Quarter 4

National Key Performance Indicators

Long term residential and nursing care (younger adults aged 18 – 64 years)

10. The Council monitors admissions as a **rate** per 100,000 population, as defined by the national Adult Social Care Outcomes Framework (ASCOF) definition. This allows for effective comparison (benchmarking) with other councils. The Council maintained the ambitious annual target rate of 12.3 per 100,000 popn for 2018/19 and at the end of quarter 4 the admissions rate was above this at 20.7 per 100,000, meaning that the target was not achieved.
11. The **rate** of admissions of younger adults increased both regionally and nationally in 2017/18 and although the figure for Nottinghamshire (17.1) is roughly in line with the regional average (17.4), they are both above the national average (14.0).
12. In **numbers** there were 100 new admissions of younger adults into long term residential or nursing care. Positively however, the overall number of younger adults being supported by the Council in long-term residential or nursing care placements was on target at 635 at the end of the reporting year.
13. This indicates that although admissions are over target, discharges are being used effectively to move people into more suitable settings and to maintain the overall number of people supported.
14. Each new admission to long-term care continues to be scrutinised and an admission to long-term care is only made where there are no suitable alternative services or accommodation available to meet the person's needs.

Long term residential and nursing care (older adults aged 65 years and over)

15. Admissions for older adults are also monitored as a **rate** per 100,000 population in line with the ASCOF definition. At the end of quarter 4 the admissions **rate** for older adults was 586 per 100,000 popn, just above the annual target of 576 per 100,000 popn.
16. The rate of admissions of older adults increased regionally in 2017/18, however nationally a reduction was seen. Nottinghamshire is performing slightly worse than the national average but better than the regional average.
17. Locally the **number** of new admissions is monitored against a monthly target of 79 per month. Admissions into long-term care are avoided where possible through scrutiny of all

requests for placements by Team Managers/Group Managers to ensure that all alternative options to promote the person's independence have been explored.

18. The **number** of new admissions was just over target at 964 new admissions of older adults into long-term residential or nursing care against an annual target of 948. This is an average of 80 new admissions per month.
19. The number of older adults supported by the Council in long-term residential or nursing care placements was 2,349 at the end of the reporting year, over the annual target of 2,275. This figure has however continued to reduce over the last 24 months, which is positive news given pressures such as increased demand and more critical needs.
20. A Strategic Commissioning Programme is underway to develop alternative services that have an evidence base for reducing the use of residential care. This includes Housing with Care, Short Term Assessment and Reablement Apartments and Assistive Technology.

Delayed Transfers of Care

21. A Delayed Transfer of Care (DToC) from an acute or non-acute hospital setting occurs when "a patient is ready to depart from such care and is still occupying a bed". Any patients falling within this definition are classified as a reportable delay and the information collected includes patients in acute and non-acute NHS settings.
22. As part of measuring DToC, the total number of days delayed per month per 100,000 population is monitored and this is a key national indicator. Nottinghamshire was ranked the top performing council nationally (out of 151) for delays attributed to social care in February 2019 (having zero days delays for social care).
23. As part of the improved Better Care Fund, a rate of DToC bed days is now being monitored on a monthly basis. Delays attributed to social care are showing consistently good performance and continue to be better than target. Latest data available for February 2019 shows delays due to social care at a rate of nil compared to a target of 0.7.

Older people at home 91 days after discharge from hospital into reablement type services

24. Reablement services support people to regain their independent living skills and confidence following a period of ill-health, which often has required a stay in hospital. This is good for people's health and wellbeing and in turn reduces the need for health and social care and support services. The indicator captures the joint work of social services and health staff, as well as adult social care reablement. This is a two part indicator and monitors the effectiveness (part one) and the availability (part two) of the services delivered.
25. Included in this indicator are reablement type services such as:
 - START – short term assessment and reablement service provided in a person's own home, for example to help them regain their independence following a stay in hospital
 - Home First Response Service - a short-term, rapid-response service which can support people to remain at home in a crisis or return home from hospital as quickly as possible
 - intermediate care – may be provided in a person's own home or in a residential setting and can be used either as a short term intensive service to avoid a hospital admission,

for example where a service user is suffering from a temporary illness, or can also be used to help someone regain their independence following a stay in hospital

- social care assessment and re-ablement beds – assessment and reablement service delivered in an accommodation based setting following a stay in hospital.

26. This indicator is produced on a rolling three-month snapshot basis. Results to date include people discharged from hospital into reablement services in October, November and December and checks if these people were still at home during the months to March. Reasons for people not remaining at home include being admitted to long-term residential or nursing care or being re-admitted to hospital or having deceased.
27. Performance against both parts (availability and effectiveness) of this indicator is positive and very close to the targets for the year.
28. At quarter 4 part one of this indicator was almost on target at 79.7% against a target of 80%. In this period out of the 507 older adults who received a reablement service on discharge from hospital, 404 people were still at home 91 days after.
29. Part two of this indicator measures how many people were offered reablement services over the number of hospital discharges (hospital discharges data provided by the NHS). Again, it is almost on target at 1.9% against a target of 2%.

Adults with a Learning Disability in paid employment and settled accommodation

30. These measures are intended to improve the quality of life for adults with a Learning Disability, reducing the risk of social exclusion. There is a strong link between employment and enhanced quality of life and the nature of accommodation for people with a Learning Disability has a strong impact on their safety and overall quality of life.
31. At quarter 4 performance for service users in paid employment was 2.7% against the ambitious annual target of 3.3% for 2018/19. There is currently a working group developing plans to bring performance on this indicator closer to the national average of 6%.
32. The figure for service users in settled accommodation positively remains consistent at 75.4% against a target of 76%. This performance is in line with the national average.

Service users and carers receiving a Direct Payment

33. Research has indicated that personal budgets provided to service users impact positively on wellbeing, increasing choice and control, reducing cost implications and improving outcomes. Studies have shown that Direct Payments increase satisfaction with services.
34. The percentage of service users receiving a Direct Payment finished the year at 43% against a target of 46%. Performance for this indicator remains consistently below target, however benchmarking shows that the Council remains a high performer in this area, the latest national average being 29%. The Council currently supports 2,753 service users with a Direct Payment.
35. Carers are provided with a range of support, including respite and information, advice and support services. Some carers are assessed as eligible for Local Authority support, and

are offered a Direct Payment to support their wellbeing, usually a small payment of £150 or £200. This equates to 100% of carers receiving a Direct Payment which has remained consistent in recent years.

Adults where the outcome of a safeguarding assessment is that the risk is reduced or removed

- 36. This is a measure of the effectiveness of the safeguarding process and could help to prevent repeat enquiries for individuals.
- 37. The percentage of completed safeguarding assessments where the risk was reduced or removed was just below target at 68% against a target of 70%. These results are in line with the national average.
- 38. As part of Making Safeguarding Personal, staff are supporting people to manage existing risks where this is in line with people's 'desired outcomes'. Therefore, this indicator is expected to fluctuate as people are supported to take risks.

Local Key Performance Indicators

Reviews of Long Term Services completed in year

- 39. It is important that people who receive support are reviewed in a timely manner. This maximises people's independence and ensures people only receive the services and support they need.
- 40. During the year, 69% of service users received a review and plans are currently being developed to make more use of alternative methods of carrying out a review (for example by phone or using clinics) to ensure that the percentage increases and is closer to target in the new year.

Percentage of older adults admissions direct from hospital

- 41. This indicator measures the number of admissions to long term residential or nursing care direct from a hospital setting where the service user did not have access to any reablement type activity beforehand.
- 42. Extremely positive progress has been made on this indicator. This is in line with increasing numbers of people being discharged from hospital prior to having an assessment and needing to make decisions about their future longer-term care and support needs (known as Discharge to Assess models).
- 43. For 2018/19 the target has been maintained at a challenging 18% and the result for the year is that the indicator is performing better than target at 14% which is extremely positive.

Safeguarding service user outcomes

- 44. The percentage of safeguarding service users asked what outcomes they wanted as a result of a safeguarding assessment was 81.7% for the reporting year, better than the target of 80%. Latest benchmarking shows the regional average as 70% for this indicator.

45. 73% of people were then satisfied that their outcomes were fully achieved. Although this result is under the target of 80% regional benchmarking shows that this performance is good, the average being 63%.

Percentage of completed Deprivation of Liberty Safeguards (DoLS) assessments

46. The number of referrals received in 2018/19 was higher than in 2017/18 and in the year 87% of the referrals received were completed. This is a notable achievement, given the trend of increasing referrals seen over recent years.

Part Two - Your Nottinghamshire, Your Future – Departmental Strategy: Annual Review of Progress (April 2018 – March 2019)

47. Progress has been made against the Adult Social Care and Public Health Departmental Strategy, with the actions contributing across the range of Council Plan Commitments. **Appendix B** provides an overview of performance for the key activities and measures set out at part 3 of the Adult Social Care and Public Health Departmental Strategy. This is focused on the 12 Council Plan commitments and covers period April 2018 – March 2019. Some of the year-end highlights are presented below.

Commitment 4 - Nottinghamshire has a thriving jobs market

Success means: More people are in higher paid and skilled jobs and more apprenticeships available for people of all ages

48. The appendix highlights the lead taken by the Corporate Director for Adult Social Care and Health on a project to improve the Council's performance regarding employment opportunities for people with disabilities and long-term health conditions. The project aims to increase opportunities both within the Council and within organisations that provide services on behalf of the Council. The project will also work with other employers in Nottinghamshire and will have a focus on economic development in order to increase opportunities.

Commitment 5 – Nottinghamshire is a great place to live, work, visit and relax

Success means: People live in communities supported by good housing and infrastructure

49. Progress has been made on the Housing with Support Strategy for working age adults. Following public engagement, the Strategy will be considered for approval at the Council's Policy Committee in June. The strategy describes how the Council will support people to lead as fulfilling and positive lives as possible in a place they can call home by optimising the commissioned services available.
50. Public Health has worked closely with colleagues across the authority and with Health and Wellbeing Board partners to refresh the Nottinghamshire-wide Framework for Action on Air Quality and to develop a system-wide approach to reducing alcohol-related harm which represents an ongoing burden for communities across Nottinghamshire.

Commitment 6 – People are healthier

Success means: healthy life expectancy increases and life expectancy rises fastest in those areas where outcomes have previously been poor

51. Public Health has worked with residents, partners, and potential providers to commission an integrated wellbeing service and an improved all-age substance misuse service. These are on track to be launched in 2020 and will deliver better outcomes and value for money for residents. Improved sexual health outcomes have been secured.

Commitment 7 – People live in vibrant and supportive communities

Success means: Older people are treated with dignity and their independence is respected and our most vulnerable residents will be protected and kept safe from harm

52. The appendix highlights the work of the Safeguarding Adults Strategic Team and progress made in the use of advocates in safeguarding enquiries to support adults who have difficulty engaging in the process to do so and supporting service users to achieve the outcomes they want as a result of a safeguarding enquiry.

Other Options Considered

53. This report is provided as part of the Committee's constitutional requirement to consider performance of all areas within its terms of reference on a quarterly basis. The departmental strategy was agreed on 24 January 2018 and the format and frequency of performance reporting were agreed by Improvement and Change Sub-Committee on 12 March 2018. Due to the nature of the report no other options were considered appropriate.

Reason/s for Recommendation/s

54. This report is provided as part of the Committee's constitutional requirement to consider performance of areas within its terms of reference on a quarterly basis.

Statutory and Policy Implications

55. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

56. There are no financial implications arising from the report.

RECOMMENDATION/S

- 1) That Committee considers whether there are any actions it requires in relation to the performance information for Adult Social Care and Public Health for the period 1st April 2018 to 31st March 2019.

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Constitutional Comments (LW 14/05/19)

57. Adult Social Care and Public Health Committee is the appropriate body to consider the content of the report.

Financial Comments (DG 15/05/19)

58. There are no specific financial implications arising from this report.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

The Adult Social Care Outcomes Framework (ASCOF) Handbook of definitions can be found here: <https://digital.nhs.uk/data-and-information/publications/ci-hub/social-care>

Adult Social Care and Public Health Departmental Strategy

Departmental Strategies: report to Policy Committee on 24th January 2018

Council Plan and Departmental Strategies – process for monitoring information: report to Improvement and Change Sub-Committee on 12th March 2018

Electoral Division(s) and Member(s) Affected

All.

ASCPH655 final