

29 June 2015**Agenda Item: 9****REPORT OF THE CORPORATE DIRECTOR, ADULT SOCIAL CARE, HEALTH
AND PUBLIC PROTECTION****PERFORMANCE UPDATE FOR ADULT SOCIAL CARE AND HEALTH****Purpose of the Report**

1. To provide an update on performance for the period 1 January to 31 March 2015.

Information and Advice

2. The report provides the Committee with an overview of performance in Quarter 4 (January to March 2015) against the department's key performance and operational priorities, linked to the measures and actions within the Council's Annual Delivery Plan.

Performance in Quarter 4, 2014-15 Key Measures

3. The performance measures that are reported quarterly to Committee reflect statutory returns and the Council's priorities following the adoption of the Strategic Plan 2014-18.
4. A summary of these performance measures, including the target and performance data up to and including 31 March 2015, is set out at **Appendix A**.

Assessments

5. The first two measures in **Appendix A** relate to assessments. A health and social care assessment is undertaken to help determine a person's specific care and support needs. Measuring assessment timescales is useful to track the volume of demand and the efficiency of our processes.
6. Overall assessment timescales for Quarter 4 remained below target and consistent with previously reported quarterly results. The majority of cases over timescale during the year were those waiting for an occupational therapy (OT) assessment. The employment of an OT agency has successfully reduced the number of people waiting for an OT assessment from 373 in January to 36 in May 2015.
7. Further new initiatives are being piloted to help maintain performance in this area, including the introduction of local clinics and increasing use of mobile technologies to increase productivity. We are also in the process of reviewing the target for assessment timescales given the increasing focus on reablement, which can take some time to complete.

8. Performance in relation to carers' assessments is positive, with an increasing number of carers being identified and assessed. Performance for Quarter 4 shows that 36% of carers have received an assessment or review, against an annual target of 38%. This measure is important as it helps to monitor the number of carers who are receiving an assessment / review in relation to their own care needs, separate from the assessment for the person they look after.

Reablement

9. The Reablement process enables people to safely return to live in the community, following a stay in hospital. It assists service users to regain their skills and confidence through a period (up to a maximum of six weeks) of intensive support in their own home. An important measure of the success of the Reablement process is whether, following this specific intervention by the County Council, service users can live independently and require no further ongoing formal support. Performance for Quarter 4 shows that 64% of people required no ongoing package of support following the Reablement process. We have consistently performed at this level during the financial year.

Delayed transfers from hospital

10. Information on all delays in transfer from hospitals is reported by health services to the Department of Health and this data is then used to calculate the length of the delay and the source. Considerable effort has been put in to improving performance in this area and this has improved significantly from 2013-14 levels through continued liaison and cooperation with the NHS Trusts in Nottinghamshire and is better than the annual target.

Admissions

11. Reducing or delaying the need for long-term residential or nursing care for older adults (65 years and above) and younger adults (from 18 to 64 years) is a national priority. The two main tools for managing performance are through providing appropriate alternatives to long term care and through the careful and consistent management of admissions to residential or nursing care.
12. For younger adults, the final count of new admissions into long term residential or nursing care is 84 against our target of 75. This is an increase on 2013-14 (81), and misses our internal target. Work has been carried out and will continue to ensure appropriate alternatives to long term care are found, particularly supported living.
13. For older adults, the final count of new admissions into long term care has also missed the target (1,115 against 900). Whilst this shows significant increase in numbers compared to the previous year (973), this does include some adjustments as a result of new national guidance in the way the measure is calculated. The count reflects the intention for a new long term placement, even if ultimately the service user becomes a self-funder. This has increased the total count in the year by 194.

Personalisation

14. Previous strong performance in relation to the personalisation of care as measured through the promotion of self-directed support and direct payments has continued during Quarter 4.

Better Care Fund

15. The next four measures form part of the Better Care Fund suite of performance indicators. The Better Care Fund is intended to transform local health and social care services so that they work together to provide better joined up care and support. It is a Government initiative, which combines resources from the NHS and local authorities into a single pooled budget. As these measures are new for 2014-15, we have no reported historic data to enable comparison with previous years.
16. This integration is a complex process and to help monitor progress nationally a number of performance indicators have been prescribed to measure the impact from a service user's perspective. The four measures reported in **Appendix A** form part of the national Better Care Fund suite of measures.
17. The measures relating to admissions to care homes and reablement are the responsibility of the County Council, and the measure for non-elective admissions to hospital is the responsibility of Health. Quarter 4 performance has remained consistent with previously reported data and has met their respective annual targets.

Adult Social Care and Carers Surveys

18. The remaining four measures are based on the Adult Social Care Survey, which is a national survey conducted annually for social care service users. The survey asks service users questions about quality of life and the impact that the services they receive have on their quality of life. It also collects information about self-reported general health and well-being.
19. Information from the survey is also used for several measures in the Adult Social Care Outcomes Framework (ASCOF). Information from the survey can be used to inform policy and decision-making at both the local and national level, and to improve care, services and outcomes for local people.
20. Provisional results for the 2014-15 survey are available in **Appendix A**. Overall the majority of measures have seen positive improvement on the previous year with the exception of overall satisfaction which saw a minor reduction.
21. Final results will be available later in the year once submissions from all authorities have been checked and validated by the Health and Social Care Information Centre (HSCIC).

Statutory and Policy Implications

22. This report has been compiled after consideration of implications in respect of finance, the public sector equality duty, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service 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

23. There are no financial implications arising from this report.

RECOMMENDATION/S

- 1). That the Committee notes the performance update for the period 1 January to 31 March 2015.

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Constitutional Comments

24. There are no constitutional comments as this report is for noting purposes.

Financial Comments (KAS 16/06/15)

25. The financial implications are contained within paragraph 23 of the report.

Background Papers and Published Documents

None.

Electoral Division(s) and Member(s) Affected

All.