



11 June 2018

Agenda Item: 9

**REPORT OF THE DEPUTY CORPORATE DIRECTOR, ADULT SOCIAL CARE
AND HEALTH**

PERFORMANCE UPDATE FOR ADULT SOCIAL CARE AND HEALTH

Purpose of the Report

1. To provide the Committee with a summary of performance for Adult Social Care and Health for Quarter 4 2017/18 (1 April 2017 to 31 March 2018) and seek comments on any actions required.

Information

2. This report provides the Committee with an overview of the Quarter 4 position for the key performance measures for Adult Social Care and Health (ASCH) for 2017-18. The performance measures include information provided to the Department of Health as part of statutory returns.
3. The figures contained within this report are provisional and are subject to change until the above-mentioned statutory returns have been submitted to and verified by the NHS.
4. The measures monitored on a monthly basis by the Senior Leadership Team were reviewed in April/May when targets for 2017/18 were set and this report reflects those changes.
5. A summary of these performance measures is set out below and a performance dashboard, including target and performance data up to and including 31 March 2018 (Quarter 4), is attached as **Appendix A**.

National Key Performance Indicators

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

6. The Council monitors admissions per 100,000 population, as part of a national Adult Social Care Outcomes Framework (ASCOF) definition, which allows for comparison (benchmarking) with other Councils.
7. Admissions of younger adults was over target for the year at 84 against a target of 60. The average number of admissions per month for 2017/18 was 7.

8. Each new admission continues to be scrutinised by Group Managers at the Long Term Care Panel and an admission is only made where there is no suitable alternative accommodation available.
9. The overall number of younger adults being supported by the authority in long-term residential or nursing care placements was 644 on 31st March 2018, just over the annual target of 636 by 8.

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

10. Admissions for older adults are also monitored per 100,000 population.
11. All admissions are being scrutinised by Group Managers and where ever possible people are being supported to live in the community through initiatives including Extra Care, telecare and home care. Where appropriate service users leaving hospital have an assessment in an assessment bed before a decision is made.
12. This year the Council has dealt with extreme winter pressures and seasonal issues such as bad weather conditions and the severe 'flu virus which has undoubtedly affected performance on this indicator. As a result the number of new admissions increased and the total number of admissions was 987 against a target for the year of 948. The average number of admissions per month for 2017/18 was 82.
13. The total number of older adults supported in long-term residential or nursing care placements was 2,307 on 31st March 2018, over the annual target of 2,275 by 32. In comparison to 2016/17 there has been a reduction by 19 of the number of people supported.

Delayed Transfers of Care

14. 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 all NHS settings.
15. 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 11th best performing council nationally (out of 151) for delays attributed to social care in February 2018. Data on DToC is published by NHS England a month and a half in arrears and so data for the full year will not be available until mid-May.

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

16. Reablement type services seek to support people and maximise their level of independence, in order to minimise their need for ongoing support and dependence on public services. It captures the joint work of social services and health staff, as well as adult social care reablement. This indicator monitors the effectiveness of the services delivered.
17. Included in this indicator are reablement type services such as: