

8 February 2016

Agenda Item: 7

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 the Committee with an update on performance for Adult Social Care and Health for the period from 1 April to 30 September 2015.
2. To provide the Committee with an update on the Adult Social Care and Health Portfolio within Redefining Your Council for the period 1 October to 24 December 2015.

Information and Advice

3. This report provides the Committee with an overview of performance up to Quarter 2 against the department's key performance and operational priorities. The performance measures that are reported quarterly to the Committee reflect statutory returns provided to Government and the Council's priorities following the adoption of the Strategic Plan 2014-18.
4. A summary of these performance measures is set out below with a performance dashboard including the target and performance data up to and including 30 September 2015 (Quarter 2), set out at **Appendix A**.
5. This report also provides an overview of progress on the Adult Social Care and Health Portfolio within Redefining Your Council. The programmes include:
 - Adult Social Care Strategy and market development: preventing and reducing care and support needs by promoting independence
 - Integration with health: implementing joined up initiatives with health
 - Public Health Outcomes: working with key stakeholders on how to allocate the current budget
 - Care Act implementation: embedding the changes from Part 1 of the Care Act and a watching brief on Part 2 of the Care Act, which is postponed until 2020
 - Direct Service Provision: developing different ways of delivering services.

Assessments

6. A health and social care assessment is undertaken to help determine a person's specific care and support needs and their eligibility for support as determined by national eligibility criteria. Measuring assessment timescales is useful to track the volume of demand and the efficiency of the Council's processes.

7. Overall assessment timescales up to Quarter 2 are below target, but show better performance than for the equivalent period during 2014-15, particularly for Occupational Therapy (OT) assessments. Up to Quarter 2 of 2015-16, 54% of OT assessments were in timescale, compared to just 34% during 2014-15; this relative improvement in performance is coupled with an increase in the numbers of people assessed during 2015-16.
8. The introduction of Part 1 of the Care Act in April 2015 and other legislative changes around the safeguarding of adults has increased the demand for OT as well as other assessments. A number of new ways of working are being introduced to improve efficiency including the piloting of OT clinics and the increased use of mobile working and auto-scheduling technology to help speed up the time taken to pass work onto operational teams. A working group has been established to identify options to further improve the completion of assessments and reviews in Adult Social Care.

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 short period of intensive support. There are two main formats for reablement: START reablement takes place in the person's own home and Intermediate Care reablement can take place either in the person's home or in a residential setting.
10. An important measure of the success of the Reablement service is whether, following this specific intervention, service users can live independently and require no further ongoing formal support. Performance for Quarter 2 shows that 67% of people required no ongoing package of support following the START Reablement service. This is an improvement on 2014-15 and matches the annual target.
11. A further measure of both START and Intermediate Care reablement is the proportion of older adults who are still at home 91 days after being discharged from hospital into one of these services. At Quarter 2, 92% of older adults having received one of these services were still living independently 91 days after they were discharged from hospital. This measure is a national measure and is part of the Council's Better Care Fund submission. The Council's performance nationally is good and is currently above target.

Delayed Transfers of Care

12. A delayed transfer of care is when someone is ready for discharge from hospital, but requires a further service or support to be in place, such as care provision at home, before they can physically leave hospital. A delay may be caused by Health, by Social Services or by a combination of both. The Council's performance on delayed transfers of care is positive and within target. Practice around this is being reviewed following guidance recently released by the Association of Directors of Adults Services (ADASS).
13. A series of workshops are currently being held to focus on improving practice around the hospital discharge process and a report to outline these changes and progress against requirements was considered by Members at the meeting of the Committee on 11 January 2016.

Admissions

14. 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) remains 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.

15. For younger adults, performance is within target for Quarter 2 (36 against a full year target of 75). Admissions into long-term care are being actively managed through the use of alternative placement types such as supported living where appropriate.
16. For older adults, the number of new admissions into long-term care is just on target to date (475 against an annual target of 948). The target set for this year represents an annual 15% reduction in admissions. This challenging target aims to move Nottinghamshire's position closer to its peer group average for this measure. Admissions into long-term care are being actively managed through scrutiny of all cases at accommodation panels and the provision of more alternatives within the community such as Extra Care and short-term assessment beds for those older people leaving hospital.
17. Admissions into long-term care direct from hospital have reduced since the introduction of short-term assessment beds for people being discharged from QMC hospital. This service is based in Leivers Court and enables people being discharged from hospital to receive reablement support and a more thorough assessment to see if they are able to return home.
18. As this service expands and is able to accept more people the number of admissions into long term residential or nursing care direct from hospital should reduce further.

Personalisation

19. 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 2. Nottinghamshire's performance nationally is good.

Better Care Fund

20. 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.
21. 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 which commenced in 2014-15 and continues within the current year.
22. 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 2 performance shows an improvement on the previous year.

Adult Social Care and Carers Surveys

23. 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.

24. Final 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.

Adult Social Care and Health Portfolio update

25. An update on key achievements for the five programmes that comprise the Portfolio, as listed in paragraph 5, is contained in **Appendix B**.
26. The Portfolio is reporting good progress in achieving key outcomes and benefits required from the programme. The update also provides a forward view for the next three months. It is intended to include these key achievements and milestones in the next Council-wide Performance and Redefining Your Council Progress Update to Policy Committee.
27. The next report to Policy Committee also considers performance reports on savings projects within Redefining Your Council and this is subject to a more detailed quarterly report on progress with savings projects to Adult Social Care and Health Committee on 7th March 2016.

Other Options Considered

28. The report is for noting only.

Reason/s for Recommendation/s

29. The report is for noting only.

Statutory and Policy Implications

30. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working 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

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

RECOMMENDATION

That the Committee:

- 1) notes the performance update for Adult Social Care and Health for the period 1 April to 30 September 2015.
- 2) notes the update on the Adult Social Care and Health Portfolio within Redefining Your Council for the period 1 October to 24 December 2015.

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Constitutional Comments

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

Financial Comments (KAS 15/01/16)

33. The financial implications are contained within paragraph 31 of the 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.

Overview of Delayed Transfers of Care and 7 Day Working – report to Adult Social Care and Health Committee on 11 January 2016

Electoral Division(s) and Member(s) Affected

All.

ASCH369