

14 September 2020**Agenda Item: 7****REPORT OF THE CORPORATE DIRECTOR, ADULT SOCIAL CARE AND
HEALTH****ADULT SOCIAL CARE PERFORMANCE AND FINANCIAL POSITION UPDATE
FOR QUARTER 4 2019/20 AND QUARTER 1 2020/21****Purpose of the Report**

1. To provide an update on the current financial position of Adult Social Care.
2. To provide year end validation for the Improving Lives Portfolio and an update on Adult Social Care savings for 2020/21.
3. To provide an update on the performance reporting framework.
4. To provide Committee with a summary of performance for Adult Social Care and Health for quarter 4 (1st January 2020 to 31st March 2020) and quarter 1 (1st April 2020 to 30th June 2020).

Information**Current Financial Position**

5. As at the end of June 2020, the Adult Social Care & Public Health Department is forecasting an in-year overspend of £15.56m before reserves and £15.8m after accounting for reserve movements.
6. This forecast is especially challenging due to the unprecedented situation within the department caused by the Covid-19 crisis and was based on the following assumptions:
 - Any non-ringfenced government grant money remains centrally and is not factored into the departmental forecast
 - Paying 100% commissioned care packages continues until 5th July 2020, except for Day Services which is until 2nd August 2020
 - That current Covid care package commitments continue all year
 - That Health stop funding the discharge and admission avoidance packages at the end of July

- That the provision of PPE and Provider claims will continue until 31st March 2021 as no further price inflation is currently included
- The staffing forecast assumes that the workforce review is effective from 1st September 2020.

7. Public Health is forecasting an underspend of £0.237m before reserves; this is primarily due to underspends on sexual health and Health Check programmes as a result of the pandemic. Any net underspend will put into reserves at the year end.

Department	Annual Budget £ 000	Actual to Period 03 £ 000	Year-End Forecast £ 000	Latest Forecast Variance £ 000	COVID 19 additional costs £ 000	Non covid variance £ 000
ASCH Committee						
COVID COSTS	-	-		-	-	-
Strategic Commissioning and Integration	(34,667)	(36,789)	(21,798)	12,869	12,882	(13)
Living Well and Direct Services	124,531	39,007	128,438	3,907	1,486	2,421
Ageing Well and Maximising Independence	119,022	38,461	118,045	(977)	4,387	(5,364)
Public Health	2,711	977	2,474	(237)	-	(237)
Forecast prior to use of reserves	211,597	41,655	227,159	15,562	18,755	(3,193)
Transfer to / (from) reserves (SCI)	(135)	170	(135)	-	-	-
Transfer to / (from) reserves (Living Well)	-	-	-	-	-	-
Transfer to / (from) reserves (Ageing Well)	-	-	-	-	-	-
Transfer to / (from) reserves (Public Health)	(2,711)	-	(2,474)	237	-	237
Subtotal	(2,846)	170	(2,609)	237	-	237
Net Department Total	208,751	41,825	224,550	15,799	18,755	(2,956)

8. The current forecast net impact of Covid-19 on the department is an additional cost of £18.76m. The majority £12.2m is due to PPE and provider claims for additional net costs as a result of Covid-19. In addition there is a forecast loss of transport income of £0.7m and net additional care package commitments of £5.9m.
9. Excluding the impact of Covid-19, the department would have been reporting a net underspend of £2.96m due to combined over and early delivery of savings last year and increased deaths in Adults aged 65+ from the end of last year offsetting an overspend in living well commitments due to increases in residential/nursing placements at the end of last year.
10. The forecast includes a net use of reserves of £2.61m which is £0.24m less than budget. This comprises the anticipated net use of £2.47m of Public Health reserves and £0.31m in Section 256 reserves and a contribution to reserves from Integrated Community Equipment Loans Service (ICELS) of £0.17m.

Year-end validation of Improving Lives Portfolio

11. In 2019/20 the department had agreed savings of £12.47m to deliver and delivered £15.7m. The extra savings delivered were a combination of £1.9m of additional savings on projects that ended March 2020 and £1.2m of early delivery for savings projects continuing into 2020/21.

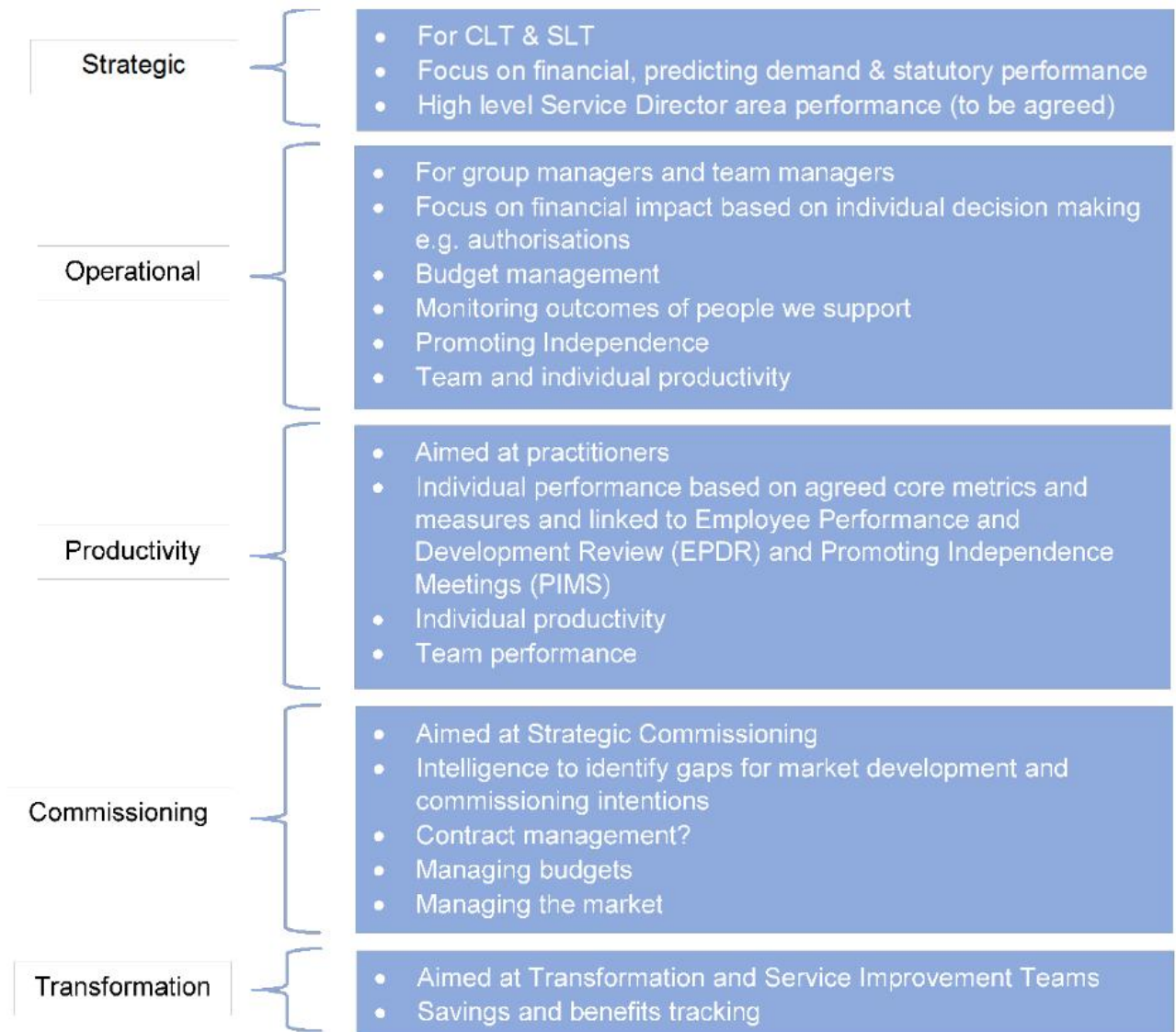
Transformation and Service Improvement

12. In the current financial year, the department has agreed savings of £4.948m.
13. The Covid-19 Emergency has meant that projects have been put on hold, so the in-year savings forecast is an under-delivery of £0.79m, with £0.5m of savings still expected to be delivered in this financial year and these are included within the current forecast.
14. However, the department delivered savings early up to the end of last year, so there is still a cumulative over-delivery forecast to be delivered by the end of this financial year of £0.43m.
15. As it is not known when projects will resume again, there is an increased risk that the 2021/22 target may not be met.

Performance Framework Update

16. The last report on Adult Social Care performance and progress for quarter 3 2019/20 (see background papers) introduced a set of core metrics that had been developed and focussed on the key outcomes of the department. This report also detailed initiatives and schemes which have since been suspended/delayed as the department responded to the Coronavirus outbreak.
17. In light of the Coronavirus pandemic, in addition to the core metrics development, it has become apparent that there is now a need to review the wider departmental approach to management information, to ensure the departments information is robust and fit for purpose.
18. The department is therefore undertaking a Core Metrics & Management Information Review which is looking at:
 - Continuing the development a set of core metrics to be used to manage performance across all levels of the department; providing a clear focus for all staff supporting them to understand how their role contributes to the broader aims of the department.
 - Reviewing existing suite of reports and the departments business requirements to ensure what is required going forward enables the department to meet its information needs.
19. The core management information has been defined going forward. This will form the basis for gathering detailed requirement, followed by implementation. The table below illustrates how management information has been grouped together, notwithstanding other key considerations such as statutory reporting. The department's key principles for developing management information include:
 - Demand – the department should be able to predict and manage demand for the service to ensure the department is ready to support people at the right time
 - Resources – the department should be able to manage its finances and resources efficiently and effectively based on the performance data, and direct resources where needed and reduce variation

- Commissioning – the department should be able to develop the market and commissioning intentions based on performance data by creating closer links with operational processes
- Improvement & transformation – the department should be able to identify where service improvements are required, and track savings and benefits on programmes of work to ensure its objectives are met
- Statutory Reporting – the department should be able to fulfil its statutory reporting obligation
- Continuous improvement – the department should be able to use management information for continuous improvement.



20. A governance structure has been put in place with the introduction of a Core Metrics & Management Information Steering group, which reports into the Recovery and Transformation Group, with escalation to the Transformation Board where necessary. The group meets on a monthly basis and has buy in from key stakeholders across the department and business partners from finance and performance.

The approach to the review is in three stages:



Stage One:

21. The Core Metrics Framework will provide a thread that runs from ASC departmental themes through to individual staff, day to day work and EPDR. The Core Metrics are outcome focused driven by what is important to people and their carers. The Core Metrics are split into four key themes:
 - Positive Contributions
 - Independence
 - Quality of Life
 - Use of Resources.
22. The Core Metrics are being developed using a co-production approach. This will ensure that the departments definition of success is driven by the people that the department works with and the measures are recognisable to staff and reflect their work. The purpose of the review is to:
 - Reduce variation across Adult Social Care teams
 - Monitor if the department is fulfilling its purpose
 - Encourage individual accountability for performance and improving outcomes for people
 - Show how each person contributes to the success of the department
 - Act on the data that is collected and use it to manage the department
 - Inform market development and commissioning intentions and highlight where there may be service gaps across the County
 - Provide visibility on how the whole department is performing
 - Share good practice and learn from each other.
23. The review and Core Metrics will inform an implementation plan and how it will be rolled out to the rest of the department.

Stage Two:

24. The Management Information Review will consult staff on the new approach, revisions to reports and creating specifications for new reports. Redundant reports will be archived and a guidance and principles document will be developed to support navigation of management information resources and future report development.
25. The revised Core Metrics Framework will be implemented. An online tool, to be developed, will enable the department to understand which measures contribute to which theme and which services contribute to which measures. The same tool will enable the information to be navigated in other ways e.g. by service.

Stage Three:

26. The responsibility for the future review of Core Metrics will be established during stage three, with the ongoing development priorities handed over to the Mosaic and Performance teams.

Summary of Quarter 4 2019/20 & Quarter 1 2020/21 Performance

27. The quarter 4 2019/20 performance information is reduced and not in the normal format due to performance colleagues supporting the department to develop data dashboard in response to the Coronavirus pandemic. **Appendix A** provides an overview of the year end performance.
28. The first quarter performance for 2021 in a format previously provided to Committee is attached at **Appendix B** and a summary of the highlights and areas for improvement is also contained within the body of this report.
29. It is also important to note that the department's 2019/20 Statutory Return validation from the NHS for survey-based measures has been delayed because of the pandemic, therefore these Adult Social Care Outcomes Framework (ASCOF) indicators will be reported in the second quarter update for 2021.

Positive Contributions

A. Keeping family, friends and connections

30. Nottinghamshire continues to perform well on the proportion of adults receiving a Direct Payment with quarter 1 performance at 40% against a national average of 28.3%.
31. However during the emergency response to the pandemic all Direct Payments (DPs) were suspended with the exception of DP's for Personal Assistants (PA). The suspension of agency DP's was to free up homecare capacity where it was most needed predominantly around hospital discharge.
32. This resulted in the use of DP's to employ a PA in April was significantly higher at 37.5% than it was towards the end of last financial year, when the figure was hovering around the 19% mark. Another factor that attributed to the increase in PA's is that the pandemic saw an increase in PA double ups to cover the same individual, as some PA's were unable to work due to having to shield themselves or members of their family were shielding.
33. It is recognised that the PA's have played a major part throughout the emergency phase of Covid-19 as this case study suggests:

Mr x was discharged from hospital but required support from staff with RIG feeds. Support could not be sourced through a managed service. A PA was recruited from the Notts Help Yourself PA directory to start straight away alongside a small micro agency. Health colleagues provided training to enable the PA to meet the needs of Mr x and enabled Mr x to remain living at home.

B. Learn, volunteer and work

34. The year end results for supporting people into or back into employment remained static at 2.4% against a national average of 5.9%. It is also not surprising that at the end of June 2020 the percentage was 2.2% - a decrease from 2.3% at the end of May as many employees were furloughed in response to the emerging pandemic.
35. One of the teams included in the results above is the I-Work team who are actively reviewing the employment status of those individuals they were working with until the service was suspended, as part of the department's response to the pandemic. More robust information will be available for the next report.
36. Since the last report a comprehensive review of developing an inclusive employment strategy and audit of local employment services has taken place as it was identified as an area of improvement.
37. The recommendations of the review fall into the following broad themes:
- Building capacity in services and extended successful approaches
 - Better monitoring, data collection and use of information to shape services and develop service user pathways
 - Strengthening the Council's role as an employer, commissioner, purchaser and anchor organisation
 - Joining up opportunities to work better across departments internally and externally with partners
 - Clarifying and strengthening the overall purpose of the Council's inclusive employment services
 - Exploring how more progression for individuals can be supported, making sure people are in the right service for them.
38. As a result an action plan within Living Well has been developed and is being progressed. A more detailed update will be provided within the next report.

Independence

A. My support, my way

39. At the 2019/20 year end the Council's Short Term Assessment and Reablement Service (START) successfully met all its targets to increase its capacity to re-able more people and maintain positive outcomes of numbers of people being supported to greater independence. This was key contributor to the successful achievement of associated savings and achievement of the overall (national) target regarding the number of people who are still independent in their own homes after 91 days which at year end was 84.8% against a target of 83%, a significant increase of 6.9% on the previous year.
40. During the Covid-19 emergency, additional temporary staff were recruited into START and diverted its resources to focus on supporting hospital discharge and picking up packages from independent sector homecare providers who had reduced staffing levels due to their staff self-isolating, shielding or experiencing Covid-19 related ill-health. So whilst the service aimed to keep a re-ablement ethos wherever possible, ensuring people had calls covered that they needed took priority. The emergency recording and reporting processes

put in place during the height of the emergency has meant that the department are unable to provide figures so far this year.

41. There are now positive recovery plans in place which include implementing the joining up of a number of re-ablement, enablement and prevention services into the Maximising Independence Service from 1st September (original implementation date of 1st April was delayed due to Covid-19). There is confidence that the work and performance will resume on track for the remainder of 2020/21.

B. Living life how I want, keeping safe and well

Living Well

42. The Living Well admissions into long term care per 100,000 population is up 8.9% on last year at 25.9% and is currently 6% higher than the expected target.
43. Some of this increase can be attributed to the change in definition of “short term care” and reclassification of individuals to “long term care”, which was identified at year end and has been addressed with teams to ensure future classification is consistent and meets the new definition.
44. Work also continues within Living Well and Strategic Commissioning colleagues to identify gaps in housing provision to reduce long term care admissions. However over recent months and in response to the pandemic homeless individuals have been given priority for housing under the “Everyone In” policy which has been challenging for teams moving people from supported living to mainstream accommodation.
45. As the department moves to a placed-based model and builds relationships with district councils and partners the housing opportunities for people will undoubtedly improve.
46. Living Well are also working with their teams and using the Promoting Independence Meetings to try to identify more appropriate pathways to long term care.

Ageing Well

47. At the end of 2019/20 admissions of older people into residential and nursing care per 100,000 population was at a rate of 612.1, slightly higher than the target of 583.5. This equated to a total number of 1,042 new people actually being admitted during the whole year. The total number of people supported in residential care in March 2020 was 2,325.
48. So far in 2020/21 the total of actual new admissions is provisionally reported as being lower, averaging 80 per month. In June 2020 the numbers of people supported in care homes had reduced from March by 203 people to 2,122, against a provisional year-end target of 2,309. It must be noted however that the impact of Covid-19 on these figures is difficult to accurately predict at year end, particularly because decisions about funding eligibility for NHS Continuing Healthcare have been suspended until September 2020, so there are a number of people currently supported who it is yet to be established whether the Local Authority or NHS will be responsible for their placement in the future.

49. The 2020/21 target for the percentage of Ageing Well admissions direct from hospital remains at 11% for 2020/21, however this includes people who were already living in a care home they are returning to. Year to date performance is 11.8%, which is an improvement on the same time last year of 16.5%. Avoiding people making a decision to make a new move into a care home whilst they are in hospital is a fundamental principle that has been taken forward as part of the new Hospital Discharge arrangements with partners.
50. Making a shift to supporting more people in their own homes is a major objective of a programme of work for the Ageing Well Service over the next three years. This will include rolling out a strength based programme to all the teams aiming to reduce variation in numbers of placements. Additionally, work will need to be undertaken with partners in housing and health, seeking their support to adopt a similar policy approach and promote earlier planning and more timely access to appropriate alternatives to the use of both short and long term residential care.

Deprivation of Liberty Safeguards (DoLS)

51. The percentage of DoLS completed increased in 2019/20 by 1.8%. This year, residential and nursing care homes' ability to engage in the work has been affected by Covid-19, also social care staff have not been able to go into hospitals. Many innovative ways have since been found to undertake work virtually, for example, staff in care homes supporting people to use tablets. This has had the added benefits of them being able to keep in contact with their families. The DoLS team is also being prioritised for a move to the new SMART phones which has supported different virtual means of communication. An online portal has also been set up for staff to get easy access to advice on complex practice issues they may be facing during the Covid emergency.
52. As of 3rd June 2020 the number of referrals received this financial year was 814 and 461 (57%) of these pieces of work have already been completed. Staff are now able to visit homes (with appropriate PPE in place) if it is not possible to undertake the work successfully using virtual methods. Further improvement is expected over the remainder of the year.
53. The year-end performance for safeguarding provides room for improvement, as it was identified that in 14% of cases, risk was not eliminated or reduced following a safeguarding intervention. This represented an increase from the previous year (2018/19) which reported this as 13.7%, and a further increase from 2017/18 which reported it as 12.2%.
54. To address this an action plan is in place to support frontline workers with interpretation of recording of the outcome of their work, which has been identified as part of the reason for this high rate. The Principal Social Worker is supporting teams with advice regarding practice, Group and Team managers are setting out improvement plans with teams and, September's regular Safeguarding audit will focus on this area.

Reviews

55. 2019/20 Year End Completion of reviews was positive at 84.9% completed against a target of 80%, a 16.3% improvement on the previous year. It is unclear at this stage to what extent this will be affected by the emergency situation experienced so far in 2020/21

because all the review staff were redeployed for the initial months of the emergency to support hospital and homecare brokerage.

56. A plan has been developed to undertake reviews to support recovery and identify people who may be most experiencing difficulties during Covid, for example, people who would normally attend days services and short breaks, people who live alone with family carers etc. These reviews will also inform what different types of services the department may need to provide whilst Covid-19 and reducing infection spread remains a key issue.
57. The number of people with their most recent review carried out in 2020/21 at the end of June was 1,665 compared with a figure of 1,996 during 2019/20. The reduction in the numbers of reviews undertaken is mainly due to fewer reviews of Residential/Nursing service users having been undertaken.

C. Information and Advice

58. Measures for this area are currently being considered and worked up as part of the performance framework development.

Quality of life

A. The people the department works with and support have a good quality of life

59. As detailed in previous performance report to this Committee in March 2020 work is underway to gather more frequent and timely feedback from people, however this development has been delayed as the department has focused its resources on the pandemic.
60. The pandemic has also delayed the validation of ASCOF survey measures which include the quality of life of the people the department support. Updates on the Council's statutory returns will be provided in the next quarterly report.
61. There is however an update on the Local Government & Social Care Ombudsman's (LGSCO) decisions as they recently published their annual review letter and have a report being presented at the Governance and Ethics Committee on 7th September 2020.
62. A total of six LGSCO decisions relating to the actions of Adult Social Care have been made by the Ombudsman from January to July 2020. Following initial enquiries two of the Council's decisions were not investigated further by the LGSCO. The remaining four were investigated and the Ombudsman concluded there to be fault found with the Council's actions in two of them (see background papers for further details).
63. There is room for improvement on how the department improves practice and learning across all complaints received and plans are in place for wider learning and continuous feedback across ASC Complaints, LGSCO decisions and Safeguarding Adult Reviews (SARs). It has also been recognised that the department needs to revisit the complaints training offer to existing and new team managers that encourages a more proactive approach when handling complaints.

64. It is the intention for future reporting to provide Members with a lessons learnt summary across all quality indicators.

B. The Carers staff work with and support have a good quality of life

65. The annual survey measure for carers' quality of life has been delayed because of the pandemic, therefore these ASCOF indicators will be reported in the second quarter update for 2021.

C. Workforce – employees wellbeing is high, and staff enjoy their jobs

66. Since the last report to the Committee the ASC workforce have had to adapt to working remotely and using technology to connect with their team and the people they support. They have also had to be creative and innovative in the way services are delivered. Some have also had the added pressure of childcare and home-schooling responsibilities.
67. They have remained resilient and resolute in adapting to these new ways of working.
68. Work continues to progress workforce measures as part of the performance framework under development.

Use of Resources

69. Specific measures around use of resources and budget management are in development but for now the department can compare the proportions of people receiving different levels of service as shown below.
70. Those receiving long term residential/nursing care are those with a high level of need and can generally be considered high cost.

As at end of June 2020 (Q1)	In Long Term residential/nursing Care	Receiving Long Term community based services (e.g. Homecare, Direct Payments, Daycare)	Receiving Short Term Care or Reablement services
All adults	27%	58%	15%
Living well	17%	77%	6%
Ageing well	34%	46%	21%

Other Options Considered

71. Due to the nature of the report no other options were considered appropriate.

Reason/s for Recommendation/s

72. 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

73. 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

74. The department is currently forecasting an in-year overspend of £15.56m before reserves and £15.8m after accounting for reserve movements as described in **paragraphs 5 to 11**.
75. An update on delivering the department's savings is contained within **paragraphs 12 to 15**.

RECOMMENDATION/S

- 1) That Committee considers whether there are any further actions it requires in relation to the finance and performance information for the period 1st January 2020 to 30th June 2020.

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Constitutional Comments (EP 19/08/20)

76. The Adult Social Care and Public Health Committee is the appropriate body to consider the content of the report, if Committee resolve that actions are required it should ensure that such actions are within its terms of reference.

Financial Comments (KAS 01/09/20)

77. The financial implications are contained throughout the report and summarised in **paragraphs 74 and 75**.

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.

[Local Government and Social Care Ombudsman annual review letter](#)

[ASC Performance and Progress Update for Q3 2019/20](#) - report to Adult Social Care and Public Health Committee on 16th March 2020

Electoral Division(s) and Member(s) Affected

All.

ASCPH720 final