## Adult Social Care and Health Overview & Scrutiny Committee

## 19<sup>th</sup> June 2012

## 2011-12 Performance Report for Adult Social Care

### Recommendation

That the Adult Social Care and Health Overview & Scrutiny Committee:

- Consider both the summary and detail of the performance indicators within the Directorate Report Card for April 2011 to March 2012 (Appendix 1)
- Consider and comment on areas where performance is falling short of target, and where remedial action is being taken.

#### 1. Key issues

- 1.1 This report presents the Adult Social Care & Health Overview & Scrutiny Committee with the full year 2011/12 report on the performance of the Adult Social Care service within the People Group. This is set out in detail in Appendix 1.
- 1.2 The Adult Social Care Report Card is made up of measures from the new national Adult Social Care Outcomes Framework and local measures developed by the Group to measure the effectiveness of both its transformation programme and core service delivery.
- 1.3 This is an exemption report, it does not give information on all indicators but highlights good performance and flags concerns either due to poor performance compared to national or comparator group averages or missing the target. Other indicators on target can be seen on in appendix one and on Performance Plus. Where benchmarking information is available the 2010-11 averages have been used.

### 2. Performance and Key Messages

2.1 The Group's key adults performance indicator for 2011-12 is **ASCOF 1C** (Social Care Clients and Carers receiving self-directed support (DP or PB) as a percentage of all clients and carers receiving a service). We have exceeded the target of 45%, achieving 45.2%. Benchmarking comparison is difficult due to the large increases expected of Councils. In 2010-11 the England average was 30.1% and the comparator average was 27.5%.

The alternative definition for measuring the implementation of self-directed support is the Association of Directors of Adult Social Services personalisation



milestone. This measures people in receipt of on-going funded community services (i.e. excludes reablement, equipment, professional support etc as well as residential care.) on the 31<sup>st</sup> March. Our outturn for 2011-12 is 75%, the target is for all councils to be achieving 100% on 31<sup>st</sup> March 2013 which we are on course to achieve.

Successful and continued progress has been made to establish a personalised approach to Adult Social Care Services delivery and this approach is now a common underpinning theme across practice, service development and strategic commissioning. To support this approach, and to ensure personalisation is fully embedded in practice going forwards, further embedding workshops and cultural awareness sessions are planned for all social care practitioners in 2012/2013 to improve and maintain this key performance indicator

2.2 **ASCOF 1G (The percentage of adults with learning disabilities in settled accommodation)** is 58.3%, an improvement on the 2010-11 outturn of 57.2% but missing the target of 70%. The 2011-12 target was set in 2009/10 when it was a new measure and is proving unrealistic. Benchmarking data shows that we perform close to the level of our comparator group of similar authorities (60.2%) and all England authorities (61%). The target is currently being reviewed; the new target will be stretching but achievable with the aim of being above average compared to all England authorities and our comparator group.

The introduction of Extra Care Housing<sup>1</sup>, 'Key Ring' services<sup>2</sup>, Shared Lives<sup>3</sup> and future deregistration of residential services will result in improvements in this indicator. Warwickshire has some residential care homes which support four or less customers, who are often people being supported in a manner/ethos more akin to supported living (settled accommodation) than residential care. The difficulty is the Care Quality Commission registration of these properties, when classifying this support we are bound by this registration so they are recorded as residential care. Another factor is the number of young adults who through transition are placed within out of county residential colleges prior to reaching adult hood. Often the outcome has been a move into planned residential care linked to these colleges, we are already working across the People Group to address this. The cumulative effect of these projects will be to have 122 more people living in 'settled accommodation' increasing the outturn by 11%.

# 2.3 ASCOF 1E (Percentage of adults with learning disabilities in paid employment) has increased from 6.0% in 2010-11 to 6.3% in 2011-12 but

<sup>&</sup>lt;sup>3</sup> A Shared Lives Scheme (previously called adult placement) helps people with a learning disability to either live with another family in their home or make arrangements to share a house with friends



<sup>&</sup>lt;sup>1</sup> People who live in extra care housing have their own self-contained homes, their own front doors with a legal right to occupy the property and have access to care and support on site 24 hours a day. The idea is to give residents more choice and control than traditional residential care can offer, in a safe and secure environment, free from loneliness or isolation.

<sup>&</sup>lt;sup>2</sup> KeyRing's support is based on people living in their own homes but sharing their skills and talents with each other and with their communities. Each network has a volunteer who sees Members regularly and helps the group work together. The volunteer is like a good neighbour who will help out if difficulties arise. Because the volunteer lives in the community, they know what's going on and are able to help Members make links

missed the target of 11%. The 2011-12 target was set in 2009/10 when it was a new measure and is proving unrealistic. Benchmarking data shows that we perform at a higher level than our comparator group of similar authorities (5.3%). A new target of 8% by 2014-15 has been agreed, this will place us above the national comparator average.

Clearly there is more work to do in delivering an increased pace of change for employment services and this is being addressed positively through our Learning Disability Strategy. A key element to this revised strategic approach is through the "A Fulfilled Life" project which seeks to increase life chances through employment. We are currently developing a service specification to commission a revised support structure for customers with Learning Disability, Physical Disability or Mental Health aimed at improving access opportunities. It will form a key component part of our approach for the future and should result in a significant increase in our performance in supporting customers into work.

2.4 Warwickshire's performance for **delayed transfers of care (ASCOF 2C)** has improved from 18.8 in 2010-11 to 17.1 in 2011-12 where low is best. Warwickshire's performance is significantly below the national average for 2010-11 of 9.7 and the comparator group average of 11.7. It is important to note that this measures all delayed discharges from hospital regardless of the responsible organisation (i.e. health or social care and including Coventry and Warwickshire partnership Trust) Adult Social Care delays typically make up one third of the total number of delays.

There were some very high pressures in the hospitals in March 2012 and this caused pressure right across the system. If this had not happened, the target would have been met. A number of initiatives have been introduced to support and maintain patient flow, notably the expansion of reablement. Also, recruitment of additional social workers working with each of the hospitals. There has been increased acknowledgement of the need to focus on avoiding hospital admission in the first place, when-ever appropriate. Closer working between Intermediate Care and Reablement Services has improved patient flow thereby ensuring capacity within the Community Emergency Response Team is available for hospital discharge or admissions avoidance. This has only recently commenced at South Warwick Hospital and it is anticipated we will see an impact very shortly. A similar scheme is to be introduced at UHCW. Whilst joint work continues on all the different types of delays, the lead Service Manager for hospital social care teams has initiated the development of a strategic plan to specifically reduce the number of social care delays across all hospital sites, for 2012/13 and the new target will reflect this.

2.5 The proportion of older people who are still at home after 91 days following discharge from hospital into reablement (ASCOF 2B) has decreased from 86.3% in 2010-11 to 81.3% in 2011-12. Warwickshire's outturn is above the 2010-11 comparator group outturn of 81.1% but below the all England average of 83.1%.

Although this may initially appear as a decrease in performance, several factors should be considered to fully understand this indicator. 536 people were discharged from hospital into a reablement or intermediate care service in the period 1st October 2011 to 31st December 2011 (the period the indicator



measures). This is an increase of 179 people (50%) compared to the same period in 2010. Of these, 435 people were living at home 91 days after being discharged from hospital. Therefore, whilst the proportion of reablement and intermediate care customers living at home has reduced from 86.3% in 2010-11 to 81.2% in 2011-12 the overall number of customers who have been successfully rehabilitated to return home has increased by 127 (41%) meaning more people are able to return home to live independently after a period in hospital.

The increased eligibility, means that reablement is now offered to a larger cohort of customers who previously would not have been eligible for this service, therefore it was expected that the proportion of customers still at home 91 days post reablement or intermediate care would lower slightly. This measure should be considered alongside the increased performance in delayed transfers of care, and the increased proportion of customers achieving one or outcomes at completion of reablement.

- 2.6 **The proportion of customers receiving a review** of their needs has reduced from 77% in 2010-11 to 72.4% in 2011-12. Staff capacity across Social Care and Support has presented a challenge in maintaining overall performance against the target. This challenge was further emphasised by the need to utilise the reviewing team capacity to drive improvements to care quality, where there have been care home provider concerns. Additionally capacity has been needed for the additional work involved in the changes to services, due to the Adult Social Care Transformation work. Reviewing the 'Reviewing Model' in the light of resource constraints is in the Adult Social Care Plan for 2012/13.
- 2.7 Two of the Adult Social Care report card indicators come from the Adult Social Care Survey which is set nationally.

There has been a significant increase in the **proportion of customers who** have control over their daily life (ASCOF 1B) (75.3% from 67.8%) this brings Warwickshire in line with the comparator group (76%) and all England (75%) averages for 2010-11 having been in the bottom quartile in 2010-11.

The proportion of people who use services who find it easy to find information about support (ASCOF 3D) has increased from 50.4% to 53.6% this brings Warwickshire closer to the comparator group (54.5%) and all England (55%) averages for 2010-12

- 2.8 74% of customers receiving reablement have at least one outcome that is fully or partially achieved at the completion of reablement. This exceeds this year's target of 70% achieving one or more outcomes, and compares to 60% of customers achieving one or more outcomes in 2010-11. This significant improvement is due to reablement becoming more established as a service, outcomes being clearly identified and evidenced, improvements in the quality of recording and the reablement ethos being firmly embedded and practiced
- 2.9 **The number of carers receiving services provided as the outcome of an assessment or review** has dropped significantly since 2010-11 (1,304 compared to 2,079) and missed the target. Following the introduction of the



New Resource Allocation System, replacement care (previously referred to as respite care) is now taken into account as part of the customer's assessment and is therefore not classified as a carer service. These are the services which have historically been requested by customers. Evidence from the carers pilot in Warwick District has demonstrated that now replacement care is captured in the customers assessment, carers are not asking for additional services, as their need for a break has been met. The new approach emphasises the importance of taking both the individual and their carer / family into account when undertaking a good quality assessment.

As a result of this change the measure is no longer fit for purpose and alternative measures are being developed.

2.10 **The number of carers receiving an assessment in their own right** has missed target and reduced since 2010-11 (819 compared to 929). Evidence from teams where replacement care is now being captured in the customers assessment is that carers are not asking for an assessment in their own right. It is likely that this will become increasingly the norm as teams embed the philosophy of carers support being everyone's business. This in line with carer's expectations that if we get it right at the beginning, then they would not need a separate carer's assessment. However, it is recognised that in some situations there will always be a benefit to a separate assessment, which is still offered when needed.

### 3. Recommendations

3.1 That the Adult Social Care and Health Overview & Scrutiny Committee: Consider both the summary and detail of the performance indicators within the Directorate Report Card for April 2011 to March 2012 (Appendix 1) Consider and comment on areas where performance is falling short of target, and where remedial action is being taken.

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## Appendix One: Adult Social Care Report Card, 2011 - 2012

Theme	Title	Definition	2010/11 Outturn	2011/12 Outturn	2011/12 Target	Performance Against Target	2010/11 Benchmarking
Warwickshire's residents have more choice & control	Warwickshire's residents have more choice & control	The proportion of those using social care who have control over their daily life	67.8%	75.3%	68%	*	Comparitor: 76.0% England:
	Warwickshire's residents have more choice & control	The proportion of people who use services & carers who find it easy to find information about support	50.4%	53.6%	50.4%	*	75.0% 🖈 Comparitor: 54.5% – England: 55.0% –
	Ensuring a safe environment for people with learning disabilities	Proportion of adults in with a learning disability in settled accommodation (high is good)	56%	58.3%	70%		Comparitor: 60.2% England: 61.0%
	Enhancing quality of life for people with learning disabilities	Proportion of adults with a learning disability in employment (high is good)	6.0%	6.3%	11%		Comparitor: 5.3% 🖈 England: 7.2%
	Ensuring a safe environment for people with mental illness	Proportion of adults in contact with secondary mental health services in settled accommodation (high is good)	76.7%	79%	80%		-
	Enhancing quality of life for people with mental illness	Proportion of adults in contact with secondary mental health services in employment (high is good)	19.4%	21.2%	20%		-

Theme	Title	Definition	2010/11 Outturn	2011/12 Outturn	2011/12 Target	Performance Against Target	2010/11 Benchmarking
On-going home care packages are decreasing	Helping older people to recover independence	Proportion of older people (65+) who are still at home after 91 days following discharge from hospital into rehabilitation services (high is good)	86.3%	81.3%	85%		Comparitor: 81.1% 🖈 England: 83.1% 🔶
	Regular reviewing of packages	Proportion of customers receiving a review	77.2%	72.4%	85%		Comparitor: 72% 🖈 England: 73% 🔶
	Customers outcomes are met	Proportion of people whose outcome measures are fully or partially achieved at completion of reablement	60.0%	74.0%	70.0%	*	-
	Reducing home care	Total weekly value of homecare packages	£635,493	£561,882	£600,000	$\star$	-
		Total weekly homecare hours being delivered	55,245	48,654	50,000	*	-
Warwickshire's vulnerable residents are supported at home	Admissions to residential care	Admissions to residential care homes per 100,000 population (low is good)	594.9	595.5	570		Comparitor: 725 🖈 England: 700 🖈
	Promoting personalisation	Proportion of people using social care who receive self-directed support (high is good)	29.3%	45.2%	45%	*	Comparitor: 27.5% 🖈 England: 30.1% 🖈
	Promoting personalisation	Proportion of people using social care who receive self-directed support – Personalisation Milestone Definition	-	75%	100% by March 2013	*	
	Supporting carers	Number of carers receiving an assessment in their own right	929	819	1100		-
	Supporting carers	Number of carers receiving services provided as an outcome of an assessment	2079	1304	2100		-



Theme	Title	Definition	2010/11 Outturn	2011/12 Outturn	2011/12 Target	Performance Against Target	2010/11 Benchmarking
		or review					
	Delivering efficient services which prevent dependency	Proportion of Council spend on residential care (low is good)	51.4%	46.2%	49%	*	-
	Maintaining customer's independence	Proportion of adults receiving on-going social care support who are in residential care	30%	30.2%	28%		-
	Supporting recovery at the most appropriate place	Number of older people entering residential care direct from hospital as a percentage of all admissions to residential care	43%	53.4%	50%		-
	Customers have an alternative to residential care	The number of extra care housing units available for use by customers eligible for Warwickshire County Council Adult Social Care	46	119	107	*	-
	Supporting recovery at the most appropriate place	Delayed transfers of care (low is good)	18.8	17.1	17		Comparitor: 11.7 A England: 9.7 A
Residents of Warwickshire have greater access to specialist residential care	Access to specialist residential care	Admissions to specialist residential care as a proportion of all residential & nursing care	18.5%	18.0%	19%	*	-
		Cost of specialist residential care as a proportion of all residential & nursing care	17.5%	18.4%	18%	*	-

#### Key

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$\bigstar$	Target has been achieved or exceeded
	Performance is behind target but within acceptable limits (10%)
	Performance is significantly behind target and is below acceptable predefined minimum