

### Open Report on behalf of Glen Garrod, Executive Director Adult Social Services

Report to:	<b>Adults Scrutiny Committee</b>
Date:	<b>25 May 2016</b>
Subject:	<b>Quarter 4 Performance Report</b>

#### Summary:

This is the Adult Care Performance Report for Quarter 4 of 2015/16. The report provides a summary of the Adult Care performance measures within the four Commissioning Strategies.

#### Actions Required:

The Adults Scrutiny Committee is requested to consider and comment on the report and the performance report in Appendix A.

## 1. Background

Within Adult Care, our key performance indicators have been aligned to the four Commissioning Strategies;

- Adult Frailty and Long Term Conditions
- Adult Specialist Services
- Safeguarding
- Carers

The performance measures have been developed within these strategies to monitor social care outcomes, the effectiveness of service provision and integration of Health and Social Care. The framework includes measures from the national Adult Social Care Outcomes Framework (ASCOF) and some that have been locally defined.

All of the measures have been identified as a priority for the authority and have therefore also been included in the Council Business Plan.

2014/15 saw the introduction of a new statutory return called the Short and Long Term (SALT) return and the Safeguarding Adults Return (SAR), which as a consequence resulted in some new indicators being created and changes to definitions for others. For consistency of reporting, some of the measures reported

in Q1 and Q2 have been updated following improvements in data processing and fine tuning of definitions.

The annual survey-based measures are reported in this quarter from the provisional results of the Adult Social Care Survey (ASCS). Three measures in the Carers Strategy come from the biennial Survey of Adult Carers in England (SACE), and these cannot be reported in 2015/16. The next survey will be completed in February 2017.

### **Adult Frailty and Long Term Conditions**

The purpose of the strategy is to outline the on-going challenges ahead of us with one of the fastest growing older populations in the country. How in the future we will need to commission our services differently, moving away from a 'one size fits all' approach to service delivery when people are looking for a more bespoke service to meet their increasingly complex care needs.

In response to this we will need to support service providers to adapt their business models and service operations away from service specification towards outcomes frameworks. To meet these challenges, we will need to continue to work closely with partners to develop solutions to market needs and secure good quality care and support for people in Lincolnshire.

Adult Care has been working to provide support to people at an early stage to help them to stay independent for as long as possible in their own home by providing preventative services. Better information and advice can help people to find ways to meet their support needs and reduce reliance on funded services. Of the 32,000 requests for support from new clients, two-thirds were dealt with by the provision of information and advice or signposting to other agencies in the community with little or no interaction from Social Work teams. New requests can also be diverted to reablement or wellbeing, both of which are taking more referrals compared to the previous year. The ultimate aim is to manage demand and reduce and/or delay the need for longer term care and support. Less than 4% of requests for new clients have resulted in residential or nursing care or a longer term service in the community such as home care.

Direct Payments have been shown to give people choice and control, improve outcomes and have a positive effect on well-being. At the end of March, there were 1,950 clients with a direct payment, which is a net increase of over 400 clients compared to March 2015. Direct Payments have been shown to give people better outcomes, have a positive effect on well-being, and improve choice and control. With the latter, the ASCS results show an increase in the proportion of people who say they have control over their daily lives.

There were 1,019 permanent admissions into residential care for older people this year, with an expected seasonally influenced increase in the final quarter of the year. The target number of admissions for the year was 982, which was set to monitor the effectiveness of the Better Care Fund. The outturn is 3.7% higher than the target which is within the acceptable tolerance range.

78% of clients received a review of their needs in the year, which is lower than the performance last year. This year, Adult Care teams have had to focus on assessing and arranging care for new clients, given the challenges in finding placements in Reablement and in an unsettled home care market. This was seen as the priority over review activity, as existing clients have a package in place so are safe and stable. To this end, only 5% of clients who were reviewed required a residential placement, 6% required an increase in their existing package, and the remainder showed no change or indeed a reduction in social care needs.

For people who have been in hospital, Adult Care has worked closely with health colleagues to reduce unnecessary delays and get people out of hospital quickly. On average, 30 people were delayed per month in acute and non-acute hospital beds where the delay was attributable to Social Care or jointly with the NHS. This is a rate of 5 per 100,000 population. Rising delays is a national phenomenon, and as a result, it has been given greater focus in the 2016/17 Better Care Fund (BCF). There are already funded BCF schemes operating in hospitals, and improved monitoring of delay reasons by hospital site has been started to better understand why delays are happening and how health and social care can work to improve them.

Adult Care has seen pressures in both homecare and reablement capacity in the year which has led to an increase in hospital delays attributable to Adult Care. Our new reablement provider went live in November, and they have demonstrated a commitment to increasing capacity over the coming year. Also, the situation with the new home care providers appears to have stabilised after a difficult transition period. This should mean care packages will be arranged quicker to prevent delays, but also to reduce the length of stay for people in hospital.

### **Specialist Adult Services**

Specialist Adult Services are often jointly commissioned with Clinical Commissioning Groups (CCGs) and therefore performance indicators monitor progress against strategy areas from either the NHS or Adult Care Outcomes Frameworks. Learning Disability services are commissioned jointly through a pooled budget hosted by LCC. The Learning Disability commissioning strategy is being developed in line with recently published Transforming Care national guidance. The Adult Mental Health commissioning strategy will be developed following the publication of the expected new national strategy early into 2016. The Lincolnshire All Age Autism Strategy, which is a joint strategy with Lincolnshire CCGs and other stakeholders, was launched earlier in 2015.

One of the priorities for the Strategy is to ensure that people with learning disabilities or mental ill-health have appropriate and stable accommodation. The national focus has always been on the security of tenure. Accommodation has a strong impact on the safety and overall quality of life and reduces the risk of social exclusion. 74% of learning disability clients are settled with family or friends. This has shown a steady improvement through the year from 72% which was the position at the end of last year. The other 26% are placed in a residential or nursing care home, so despite not having security of tenure, people are safe and settled in their environment. Although a Quarter 4 position is not available for

mental health clients, there has been a dramatic improvement compared to 2014/15, with 57% of clients reported as settled and living independently at the end of Quarter 3.

Feedback in the ASCS specifically from people with a learning difficulty or Autism shows that 81% are extremely or very satisfied with the care and support services they receive, which is a good improvement from 77% of people sharing the same level of satisfaction in the 2014/15 survey.

In 2016/17, additional measures relating to direct payment provision and review performance will be added to strengthen the suite of measures to better evidence the services offered in this strategy area.

## **Safeguarding**

The Safeguarding Strategy highlights the importance of protecting an adult's right to live in safety, free from abuse and neglect.

Safeguarding is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action.

The ASCS results show that 93% of people who use Adult Care services feel safe, which is a good indication of the level of general safety of the potentially vulnerable adults in our community, and that quality and practice standards are good among social care practitioners and providers.

Where people have had cause to call on the services of the Adult Safeguarding Team, 100% of people who have been assessed as lacking mental capacity have been supported by an advocate so that their views and wishes can be conveyed.

The Safeguarding service has a duty to address issues with providers if they arise. 1 in 20 enquiries received in the year (5%) indicated that a service provider was the source of risk. This is very low, and has reduced from 16% compared to the previous year. This gives an overall indication of the improving quality of the health and care sector in Lincolnshire, privately arranged or commissioned by the authority.

One aspect of measuring the success of a safeguarding intervention is in determining whether the risk of abuse has been reduced or removed. 65% of enquiries resulted in the risk being reduced or removed, excluding cases where the allegation was not substantiated, or where the enquiry ceased at the individual's request. However, this is only part of the picture, as all safeguarding enquiries focus on empowering people to manage their own risk, and to respect their wishes. To complete the picture, and to monitor our commitment to 'Making Safeguarding Personal', a new measure will feature in 2016/17 reporting to show the proportion of people for whom their desired outcomes have been met.

Overall, contacts to adult safeguarding are continuing to increase. 3,800 concerns have been reported to the authority this year, which is approximately 320 concerns per month, compared with 250 per month in the previous year. This is a 25% increase in work coming into the service.

Nearly 40% of concerns raised with the Customer Service Centre that are progressed to Safeguarding, do not require any further enquiries, leaving 60% of concerns for the Lincolnshire Safeguarding Team to investigate.

## **Carers**

The purpose of the Carers Strategy is to help carers build resilience in their caring role and to prevent young carers from taking on inappropriate caring roles, protecting them from harm. Carers should have appropriate access to support which enables them to improve their quality of life and help prevent crisis.

The Carers service contract has just been awarded to a new provider, Carers First so a period of transition will ensue in the coming months. The transition plan is multi-faceted and includes the development of practice standards, a workforce learning and development plan, quality assurance framework, data validation, revised procedures and improved contract management.

During the first year of the Care Act 2014 legislation, the new national threshold for carers has impacted on the number of carers who receive funded support, in particular Direct Payments. Just over 50% of carers met the threshold, compared to 69% pre-Care Act 2014 with a locally defined and more generous eligibility level. 48% of carers who were eligible for funded care have received a direct payment, which relates to just under 2,500 carers. The needs of carers have been met more creatively with better support planning without the need for a direct payment.

Over 7,000 carers have benefitted from some form of support over the last twelve months, which includes information and advice through to respite care for the person they care for. The new threshold has created a definite shift in the pattern of support towards information and advice, with many carers getting the information they need quickly without the need for a full carers assessment.

The Carers Service is predominantly a preventative service to carers to help sustain the independence of the person they care for, and reduce their dependence on funded services. 68% of carers supported are caring for people who are not a client of Adult Care. This has fallen from 75% in 2014/15 because carers who are now no longer eligible for direct support are caring for people who are not currently receiving Adult Care services. Under the new contract, Carers FIRST will provide preventative support for carers caring for adults who do not receive social care support. They will hold a database of all carers and over time develop a greater understanding of carers in Lincolnshire. An initial publicity campaign will raise awareness of the support they have to offer.

## **2. Conclusion**

The Adults Scrutiny Committee is requested to consider and comment on the report and the performance report in Appendix A.

## **3. Consultation**

### **a) Policy Proofing Actions Required**

Not Applicable

## **4. Appendices**

These are listed below and attached at the back of the report	
Appendix A	Adult Care Performance Report 2015/16 - Q4

## **5. Background Papers**

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Dave Boath, who can be contacted on 01522 554003 or david.boath@lincolnshire.gov.uk.