

Open Report on behalf of Glen Garrod, Executive Director
Adult Care and Community Wellbeing

Report to: Adults and Community Wellbeing Scrutiny Committee

Date: 28 June 2023

Subject: Subject: Service Level Performance against the Corporate Performance

Framework 2022-23 Quarter 4

#### **Summary:**

This report summarises the Service Level Performance against the Success Framework 2022-23 for quarter 4. All performance that can be reported in quarter 4 is included in this report.

Appendix A details the proposed key performance indicators to be reported to Adults and Community Wellbeing Scrutiny Committee for 2023-24.

Full service level reporting to all scrutiny committees can be found here: Corporate plan

— Performance data - Lincolnshire County Council

#### Recommendation(s):

- 1. To consider and comment on the Adult Care and Community Wellbeing Service Level Performance for 2022- 23 Quarter 4.
- 2. To review and agree the 2023-24 Performance Indicators for Adults and Community Wellbeing as shown in Appendix A.

#### 1. Background

This report details the Service Level Performance measures for the Adults and Community Wellbeing Scrutiny Committee that can reported in Quarter 4.

- 1 measure that exceeded their target 💢
- 14 measures that achieved their target ✓
- 3 measures did not meet their target 🗴
- 1 survey measure not reported in 2022/23

## 1.1 Adult Frailty and Long-term Conditions

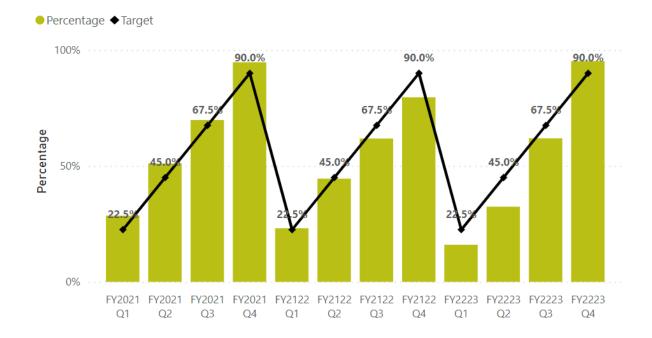
#### 1.1.1 Measures that exceeded their target

PI 65 People in receipt of long term support who have been reviewed 💢



**Actual: 95.2** Target: 90

All teams across Specialist Adults Services and Adult Frailty & Long Term conditions teams have exceeded the target. As well as ensuring that planned reviews are completed our monitoring of quality practice standards also tells us that our assessment and care management practice is of good quality.



Benchmarking data has been removed as LCC uses a different cohort definition which does not match the national definition. However, the LCC definition will change in 2023-24 to match the national definition and benchmarking information will be available in future reports.

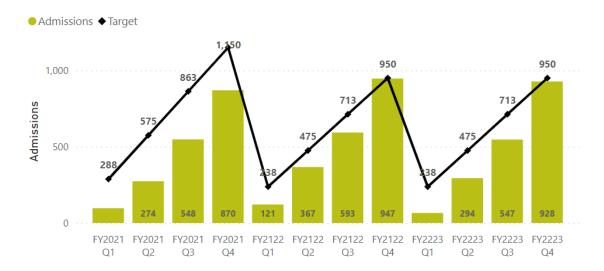
#### 1.1.2 Measures that achieved their target

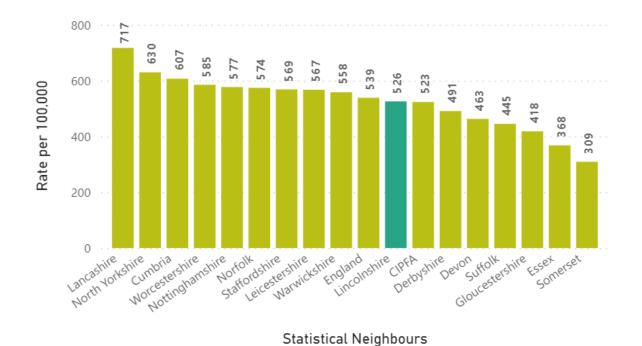
#### PI 60 Permanent admissions to residential and nursing care homes aged 65+



Actual: 928 Target: 950

The number of admissions is lower than predicted but has increased from the end of quarter 3 from 547. Quarter 4 usually see a large increase in the number of admissions due to delays inputting and updating our case management system.

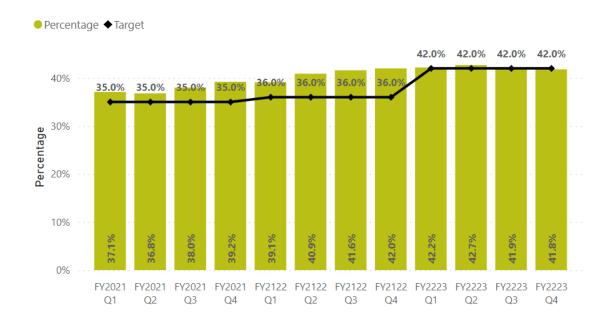


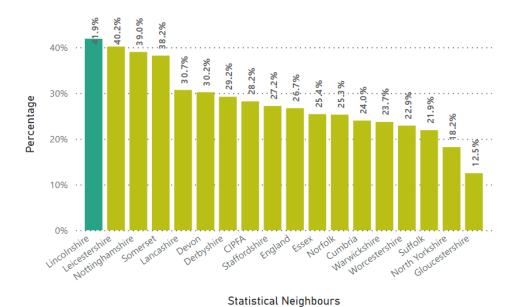


# PI 63 Adults who receive a direct payment ✓

Actual: 41.8 Target: 42

We continue to provide a consistent number of clients with a direct payment which enables them to have more control over how their own care and support is provided, and gives more freedom of choice over the care they need. For quarter 4 (as at 31 March) this was 2,026 clients which is a slight drop from the previous quarter which was 2,068. Performance against this measure is usually well-above the national average.

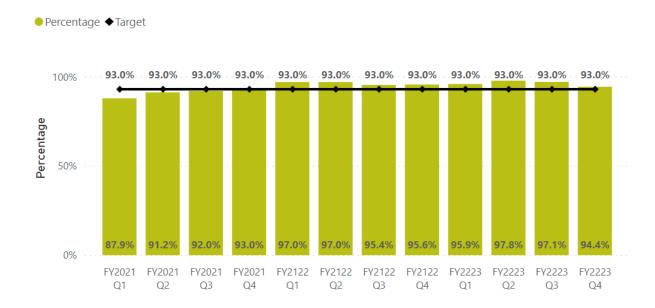




# PI 122 Requests for support for new clients, where the outcome was no support or support of a lower level $\checkmark$

Actual: 94.4 Target: 93

We continue to perform above the target. This measure reflects the proportion of those new clients who received short-term services during the year, where no further request was made for ongoing support. Since short-term services aim to reable people and promote their independence, this measure provides evidence of a good outcome in delaying dependency or supporting recovery – short-term support that results in no further need for service. We usually perform well above national and the region.



This PI is a local measure for the 65+ age group, so benchmarking data is not available. Benchmarking information is available for the 18+ age group.

# PI 123 People who report that services help them have control over their daily life $\checkmark$



Actual: 80.8 Target: 80

This result comes from the annual Adult Social Care Survey and show that Lincolnshire performs well compared to the national average.



Statistical Neighbours

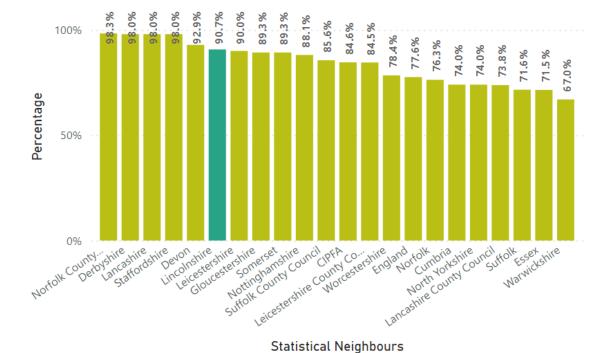
# PI 124 Completed episodes of Reablement, where the outcome was no support or support of a lower $\checkmark$

Actual: 90.7 Target: 95

The reablement service Libertas continues to provide care and support that allows clients up to a maximum of 6 weeks reablement care in their own home. Due to the care and support these clients are receiving 90.7% of all episodes of reablement have resulted in clients not going on to receiving a long term adult care service.







#### 1.1.3 Measures that did not meet their target

None in Quarter 4

# 1.2 Specialist Adult Services

#### 1.2.1 Measures that exceeded their target

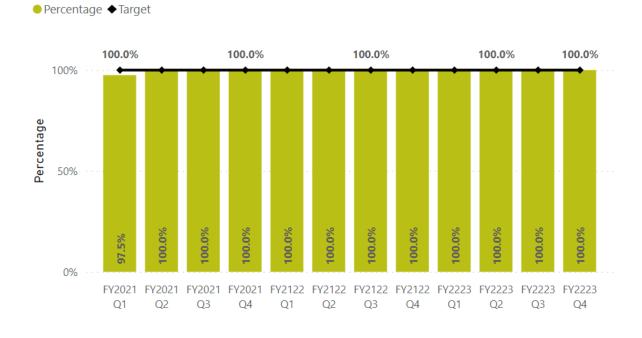
None in Quarter 4

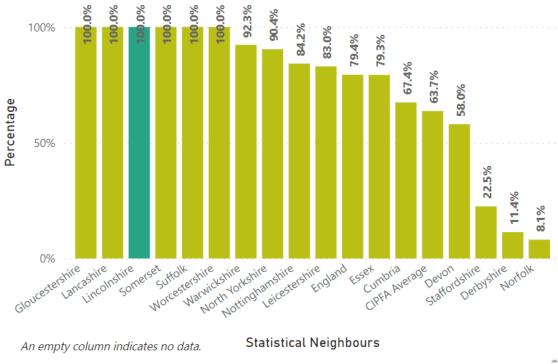
#### 1.2.2 Measures that achieved their target

PI 28 Safeguarding cases supported by an advocate (where appropriate)  $\checkmark$ 

Actual: 100 Target: 100

'Making Safeguarding Personal' is the cornerstone of all safeguarding activity. It ensures that enquiries are led by the individual and focused on achieving their outcomes. This measure is consistently met and demonstrates that individuals are supported to share their views and wishes.





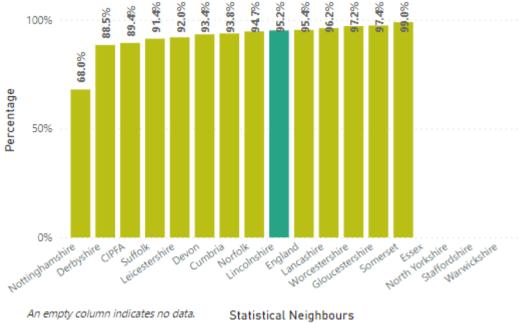
#### PI 116 Concluded safeguarding enquiries where the desired outcomes were achieved ✓

Actual: 96.4 Target: 95

This target has been achieved and remains consistent. We continue to ensure that the persons views and wishes are central to the process and work with them to achieve their desired outcomes.

● Percentage ◆ Target



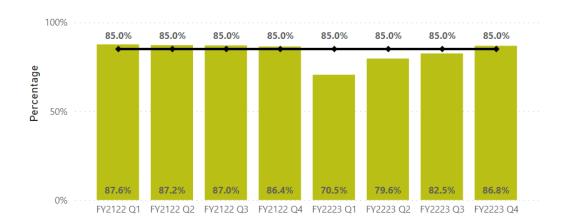


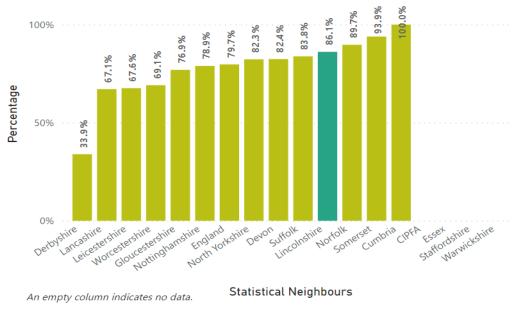
# PI 163 Percentage of people who were asked what outcomes they wanted to achieve during an Adult Safeguarding enquiry ✓

**Actual: 86.8** Target: 85

This target has been met and there has been continued improvement. In order to maintain progress, we continue to work with the Lincolnshire Safeguarding Adults Board (LSAB) to embed the principles of 'Making Safeguarding Personal' within practice across all partner agencies. This will ensure that conversations are held with the person and that their desired outcomes are captured at the earliest opportunity.







# PI 158 For adults discharged from hospital, the percentage who remain at home 91 days after discharge $\checkmark$

Actual: 83.4 Target: 85

The target is being achieved which is positive evidencing that people have received an appropriate assessment of their needs to ensure they remain at home following discharge from hospital. Of the 1,250 discharges that are at home after 91 days 253 of these are at home receiving a long term support service (e.g. home care). Of the 249 clients not at home on the 91st day, 139 of these are now in residential care.



Benchmarking data is not available as LCC uses a local definition (which is different to the national comparator).

#### 1.2.3 Measures that did not meet their target

None in Quarter 4

### 1.3 Public Health and Community Wellbeing

#### 1.3.1 Measures that exceeded their target

None in Quarter 4

#### 1.3.2 Measures that achieved their target

PI 33 Percentage of people aged 40 to 74 offered and received an NHS health check ✓

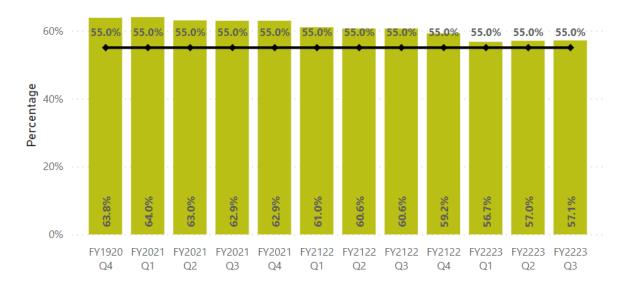
Actual: 57.1 Target: 55

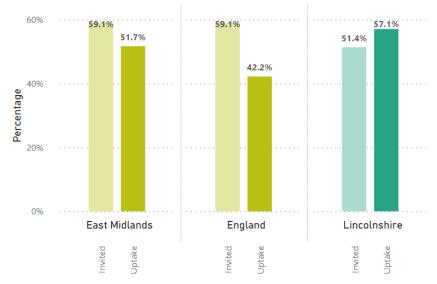
This performance indicator is over a 5-year period, with the latest data, published by the Office for Health Improvement and Disparities (OHID) being Q1 2018/19 –Q3 2022/23. In Lincolnshire during this period 116,294 people have been invited for an NHS Health Check and 66,442 have taken up the invite. The overall percentage of people taking up an NHS Health Check invite was 57.1% (compared to 42.2% in England and 51.7% in East Midlands). Lincolnshire has the highest percentage amongst its 'CIPFA nearest neighbours'.

The Office for Health Improvement and Disparities (OHID) provides the estimated eligible population for the NHS Health Check programme. This is 226,407 for Lincolnshire for 2022-23. People are invited every five years and therefore this means approximately 45,000 are eligible to be invited in 2022/23. Each general practice has been provided with their individual eligible population.

The NHS Health Check Programme supports the delivery of the Lincolnshire Health Inequalities and Prevention programme, specifically the priorities in relation to cardiovascular disease prevention. The programme is also identified as an important programme in the Interim Lincolnshire Integrated Care Partnership Strategy (January 2023) as part of Priority Enabler 1 – Population Health and Prevention (Theme 3 – working age).







Benchmarking April 2018 - December 2022.

# PI 110 Percentage of people supported to improve their outcomes following Wellbeing intervention $\checkmark$

Actual: 99 Target: 95

Due to the time delay on this measure to account for the up to 12 weeks of support interventions available, this data is for Quarter 3 2022-23. During this period, the service continued to experience high demand, although the known seasonal dip in referrals in December was noted. The service continues to maintain its consistently strong performance in this self-determined outcome measure indicating 99% of individuals made improvements in their overall outcomes following service intervention. The service also continues to

support the Homes for Ukraine initiative, providing advice and guidance to guests and assisting in rematching as required.



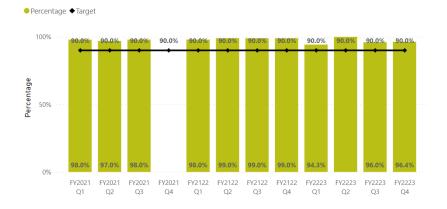
This PI is a local measure so benchmarking data is not available.

PI 112 People supported to maintain their accommodation via Housing Related Support Service (HRSS) 

✓

Actual: 96.4 Target: 90

Framework continue to support their service users to meet their outcomes. During the quarter Framework supported 96.38% of their service users across both accommodation based support and floating support to develop new and improved skills to manage a tenancy/mortgage independently from services.



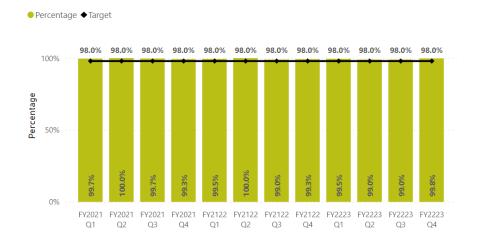
This PI is a local measure so benchmarking data is not available.

# PI 113 Emergency and urgent deliveries and collections completed on time $\checkmark$



**Actual: 99.8** Target: 98

The provider has met the changing need of the sector throughout the tenure of the contract and was successful in their bid for the new contract that started in April. There are different service levels on this contract and that will impact the figures reported going into the new financial year.



This PI is a local measure so benchmarking data is not available.

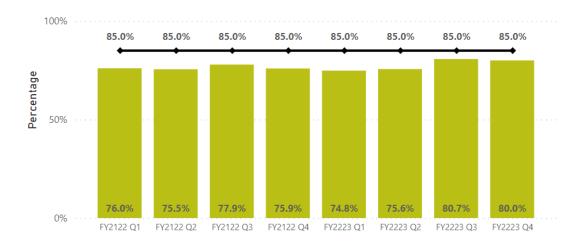
# PI 121 Carers who have received a review of their needs 🗸



Actual: 80 Target: 85

This quarter's outcome of 80.0% (664 out of 830 carers who required a review received one) sits within the tolerance for achieving against our target of 85% and shows a similar picture to the previous quarter.

#### ● Percentage ◆ Target



This PI is a local measure so benchmarking data is not available.

### 1.3.3 Measures that did not meet their target

### PI 31 Percentage of alcohol users that left specialist treatment successfully

Actual: 25.2 Target: 35

This indicator has dropped by 0.2% from 25.4% to 25.2% during this report period. The number of successful discharges has dropped by 2 from 242 to 240 with the denominator remaining constant at 951. An improvement plan has now been put in place which is being formally monitored through the contract monitoring process to drive improvements in performance. Those presenting for treatment remain more challenging and often require medically assisted detoxifications and more complex packages of care to address their alcohol use, these clients are more difficult to discharge successfully so more inpatient provision is being provided utilising supplemental grant funding received from the Office Health Improvements and Disparities. 416 bed days are available to use for drugs and alcohol inpatient detoxification.

Recruitment to vacant posts remains challenging but a new training package is expected from central government during the early part of 2023/24 to help improve recruitment and retention of staff. Additionally the provider has reviewed its offer to front line workers to make posts more attractive which has helped but it takes time to train new recruits before becoming fully operational.

#### Percentage ◆ Target



# PI 59 Carers supported in the last 12 months \*

**Actual: 1613 Target: 1730** 

While this measure has not been met, 12,001 carers were supported over the last 12 months. This number breaks down to 9,582 Adult carers of adults and 2,419 Young Carers. Changes to forms identifying carers and tighter definitions on what counts as support have led to a reduction in the total number of carers reported over the last few quarters. We can be confident that the carers that we are reporting are receiving substantive support and we expect the numbers to increase over time. Of the 9,582 adult carers supported; 839 received a Direct Payment, 8,287 were offered Info & Advice and 456 no direct support (respite provided to carer for adult).





This PI is a local measure and no national benchmarking data is available.

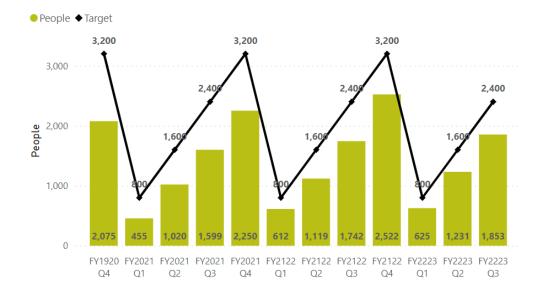
### PI 111 People supported to successfully quit smoking \*

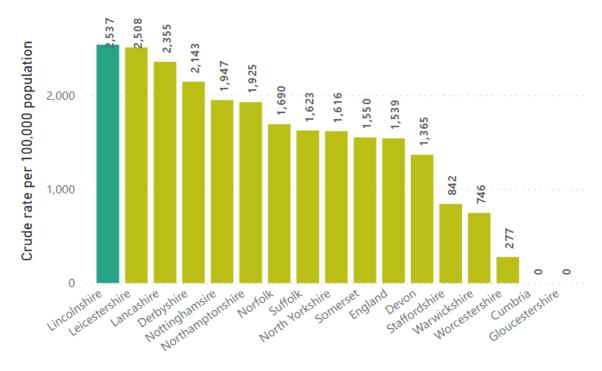
**Actual: 1853 Target: 2400** 

Lincolnshire's stop smoking service is ranked fifth highest performing in the country and continues to deliver good outcomes. Activity in the last quarter has improved when compared with the same period last year however the continued challenges around increasing activity by sub-contractors (GPs and Pharmacies) means that the target has not been achieved. At present only 13% of the quits achieved are coming from sub-contractors, with the balance of 87% coming through the One You Lincolnshire (OYL) core team. The average quit rate remains high at 60%, above the target of 50%. GPs remain under considerable pressure and have not yet been able to return to pre-pandemic levels of delivery. To increase future outcomes, OYL are working with providers to improve the referral route from digital self-referral and triage team routes and are confident that this will provide an increase in the number of smokers accessing support to quit through sub-contractors.

There is a recognition that, although the service is high performing, achieving the targets set pre-pandemic will remain unrealistic, and targets are being reviewed accordingly. OYL continue to focus on returning to face to face delivery and have clinics within some GP surgeries and a community hub. This allows for an increase in CO validation and provides clients more choice for how they would like to receive their support.

OYL continue to work very closely with the NHS LTP tobacco dependency service roll out, and within this quarter the ULHT maternity service was live and supporting pregnant women across some hospital sites, particularly in Boston and Skegness. The OYL team therefore receive less Smoking in Pregnancy referrals but continue to support pregnant women outside of the NHS pilot areas, and work closely with the maternity team for peer support and to provide a consistent service. Delays within the acute setting has meant that the in-house service is yet to start and referrals are still being directed to OYL as before.





Statistical Neighbours

#### 2. Conclusion

The Adults and Community Wellbeing Scrutiny Committee is requested to consider and comment on the report.

#### 3. Consultation

a) Risks and Impact Analysis

n/a

# 4. Appendices

Appendix A	2023-24 Service Level Performance Indicators
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# **5. Background Papers**

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

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