



**Open Report on behalf of Martin Samuels,
Executive Director - Adult Care and Community Wellbeing**

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| Report to: | Adults and Community Wellbeing Scrutiny Committee |
| Date: | 29 November 2023 |
| Subject: | Service Level Performance against the Corporate Performance Framework 2023-24 Quarter 2 |

Summary:

This report summarises the Service Level Performance against the Success Framework 2023-24 for Quarter 2. All performance that can be reported in Quarter 2 is included in this report.




Full service level reporting to all scrutiny committees can be found here: [Corporate plan – Performance data - Lincolnshire County Council](#)

Actions Required:

To consider and comment on the Adult Care and Community Wellbeing Service Level Performance for 2023- 24 Quarter 2.

1. Background

This report details the Service Level Performance measures for the Adults and Community Wellbeing Scrutiny Committee that can be reported in Quarter 2.

- 4 measures that exceeded their target 
- 13 measures that achieved their target 
- 1 measures did not meet their target 
- 1 measure that does not have a target (contextual)

1.1 Adult Care

1.1.1 Measures that exceeded their target

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

April 2023- September 2023

Actual: 394

Target: 475

There have been 394 permanent admissions to residential care up to the end of Quarter 2. It should be noted that the actual number will be slightly higher as there is a known delay in entering information into the system. This is a positive picture given the demographic of Lincolnshire means there is an increasing number of people aged 65+ in the county. 84% of the new admissions have a physical support need as their primary need. 25% are aged 90+. Clients living in south Lincolnshire have seen the largest increase of admissions to residential (128).



Statistical Neighbours

Benchmarking period April 2021 – March 2022

1.1.2 Measures that achieved their target

PI 63 Adults who receive a direct payment ✓

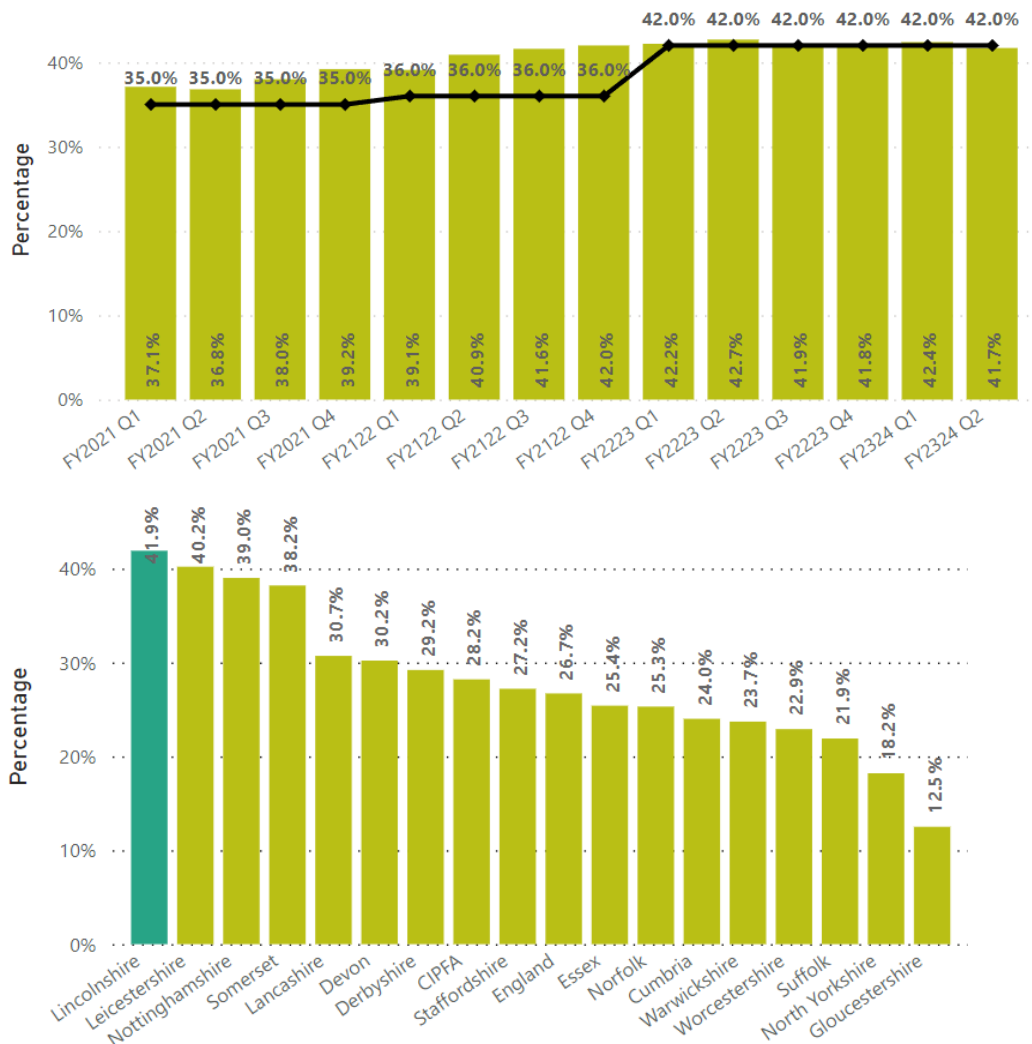
As at September 2023

Actual: 41.7

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. End of Quarter 2 performance (41.7%) is slightly lower than at the end of Quarter 1 and is within target tolerance. This is due to a slight increase in the overall Adult Frailty & Long Term Conditions (AFLTC) 65+ year old cohort number at the end of Quarter 2. However, performance against this measure is usually well above the national average.

● Percentage ◆ Target



Statistical Neighbours

Benchmarking as at March 2022

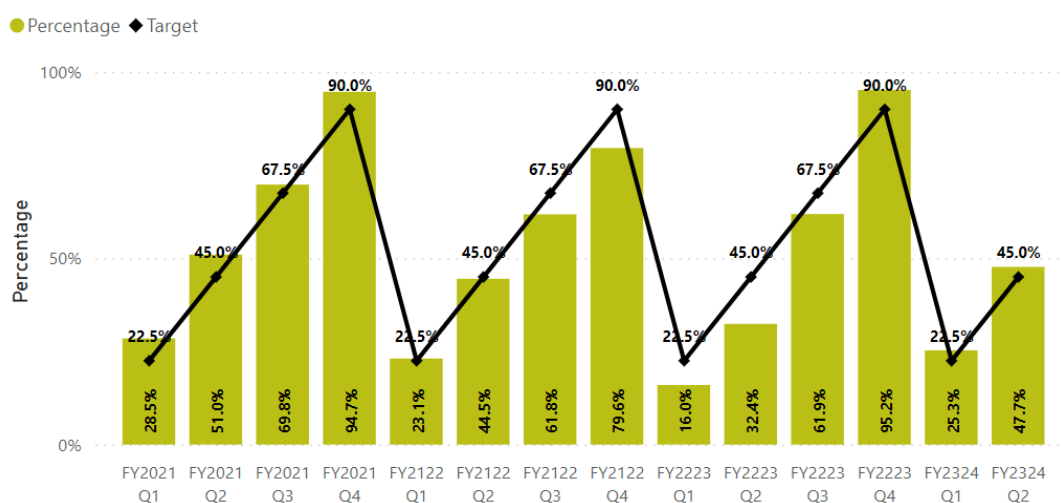
PI 65 People in receipt of long term support who have been reviewed ✓

April 2023 – September 2023

Actual: 47.7

Target: 45

All teams across Specialist Adults Services and Adult Frailty & Long Term Conditions (AFLTC) teams have achieved the target for Quarter 2 and are on-track to achieve the annual 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. During the autumn and winter period there is a focus from the AFLTC teams on review completion, and progress is monitored every 2 weeks.



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

PI 113 Emergency and urgent deliveries and collections completed on time ✓

As at September 2023

Actual: 97.5

Target: 98

The figures that comprise the numerator and denominator, for this performance indicator, are lines of activity. Therefore, if one delivery or collection has 8 items in it then it would count as 8 as opposed to 1. This means larger packages of equipment being delivered have a disproportionate effect on the overall percentage but reporting it by line as opposed to activity holds the provider to a higher standard. This reporting method also prevents the provider favouring smaller activities over larger ones as the larger more complex suites of equipment that these activities represent are for the service user with the most serious conditions.

One of the urgent service levels is a 4-hour delivery, if the delivery is completed even one minute later than the original 4-hour window from the order being placed by a clinician,

then the order is deemed to have failed. All of the 4-hour urgent deliveries were completed within 5 hours during the last Quarter. However, as they were completed slightly later than the initial window, they bring the completion percentage down.

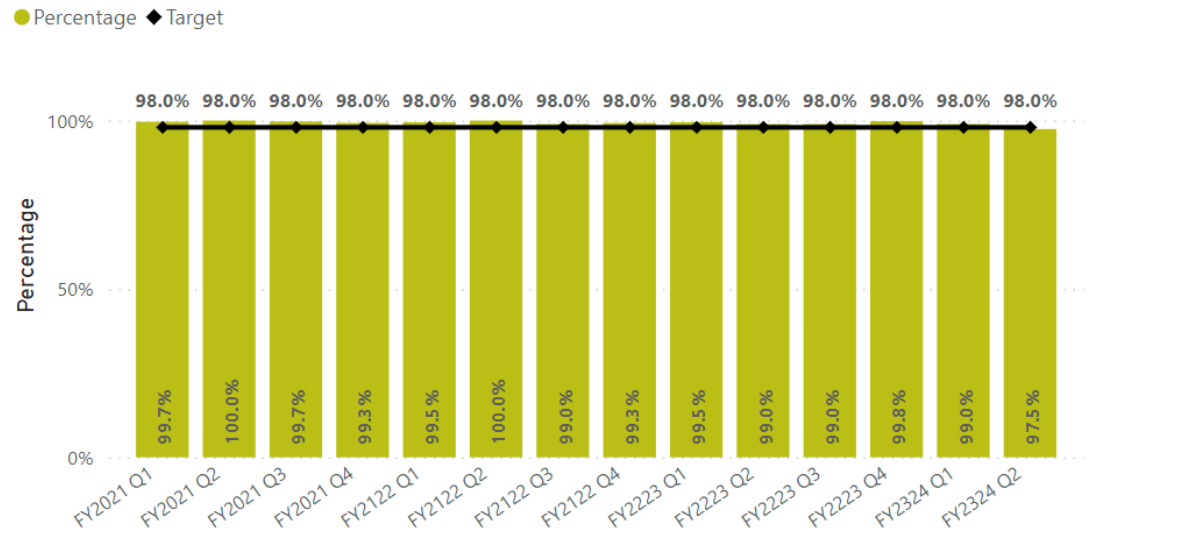
Urgent activities can be for any number and combination of 300+ pieces of equipment which prevent the provider from holding a store of equipment on each of their vehicles as they complete their routes through the county.

The greatest strain on the provider is the increased number of deliveries that need more than one technician to attend, in order to safely move and assemble some pieces of equipment. This equipment is chiefly bariatric (the branch of medicine that deals with the causes, prevention, and treatment of obesity) and with the changing demographics in Lincolnshire the demand for bariatric equipment continues to increase as does the urgency of its demand.

Due to the geographic nature of Lincolnshire, and the distribution of its population, the urgent deliveries for bariatric equipment absorb a lot of the available resource for the provider. A sudden spike in 4-hour bariatric activities can lead to the failure of other urgent activities. The east coast is the primary area for bariatric equipment. Considering its population density it is disproportionately represented in this type of activity. The long transit time for the east coast also limits the available resources for other urgent activities which further compounds the issue.

This performance indicator has been achieved, although it did not achieve the 98% target (by 0.52%) this Quarter, it was within tolerance. The slight reduction was caused by a singular month during the Quarter where a combination of the above factors, employee sickness, and changes in personnel, affected the success rate of the urgent activities.

The provider is actively working to mitigate this impact going forward, and to ensure that this performance indicator continues to achieve its target.



This performance indicator is a local measure so benchmarking data is not available.

PI 122 Requests for support for new clients aged 65+, where the outcome was no support or support of a lower level ✓

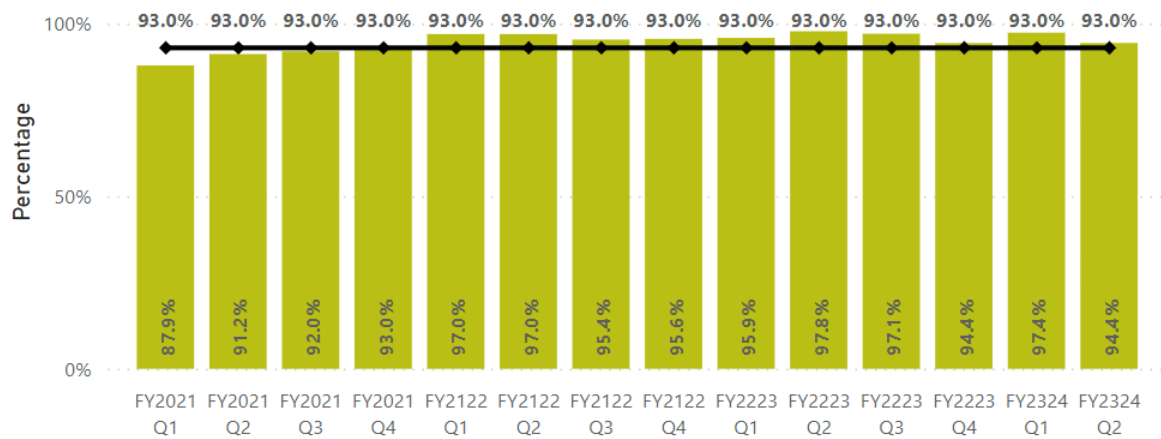
April 2023 – September 2023

Actual: 94.4

Target: 93

This performance indicator has achieved its target. This measure reflects the proportion of those new clients who received short-term services during the Quarter, 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 and short-term support that results in no further need for service. We usually perform well above national and the region.

● Percentage ◆ Target



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 124 Completed episodes of Reablement, where the outcome was no support or support of a lower level ✓

April 2023 - September 2023

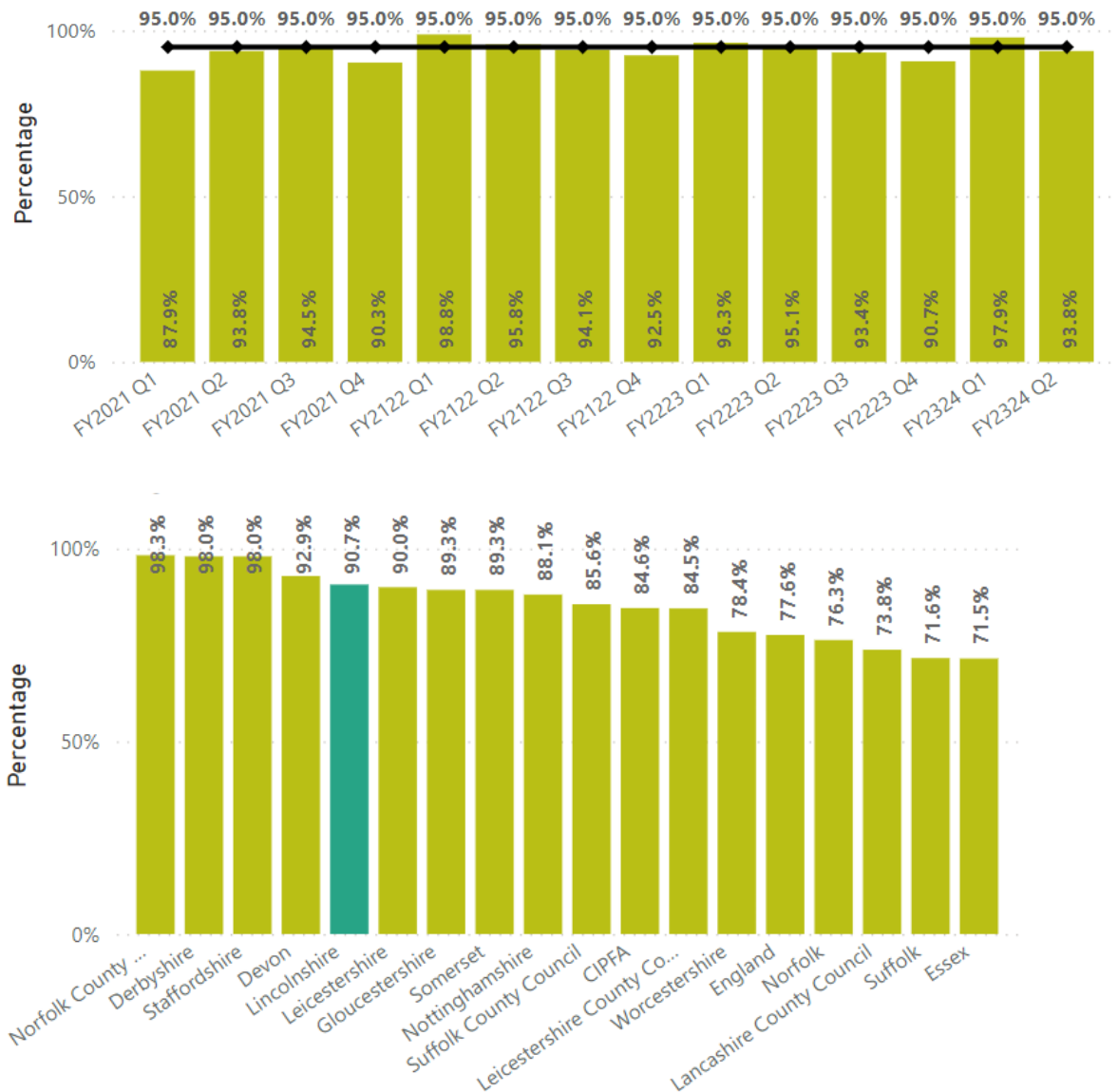
Actual: 93.8

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 93.8% (1372 out of 1463) of all episodes of reablement have resulted in clients not going on to receiving a long-term adult care service, which is within target tolerance but is slightly below the Quarter 1 figure. The reason for the slight decrease compared to at the end of Quarter 1 is due to the number of people discharged from hospital into reablement who then went into long-term support, 68 people in Quarter 2 compared to 12 in Quarter 1. All but 1 of the 68 people are accessing support

within a community setting due to a range of needs and it's the most appropriate care for them. The 93.8% figure should be viewed within the context of the 2021/22 regional performance of 84.5% and England performance of 77.6%.

● Percentage ◆ Target



Benchmarking period April 2021 – March 2022

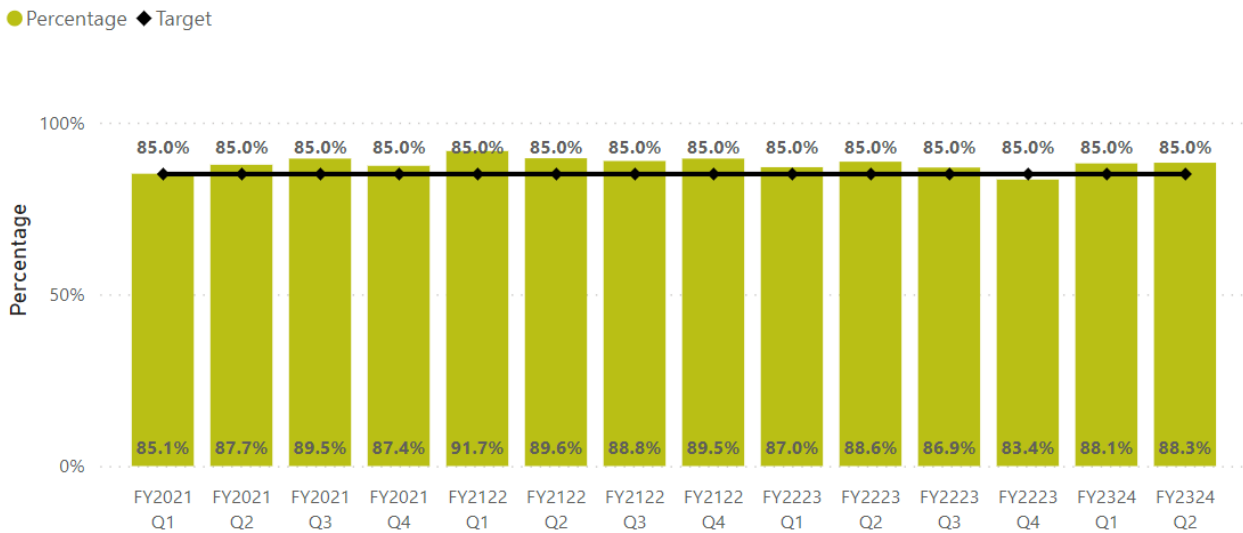
PI 158 For adults discharged from hospital, the percentage who remain at home 91 days after discharge ✓

As at September 2023

Actual: 88.3

Target: 85

The target has been 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 1,469 discharges that are at home after 91 days, 304 of these are at home receiving a long-term support service (e.g. home care). Of the 195 clients not at home on the 91st day, 114 of these are now in Long Term residential care.



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

1.1.3 Measures that did not meet their target

None in Quarter 2

1.2 Specialist Adult Services

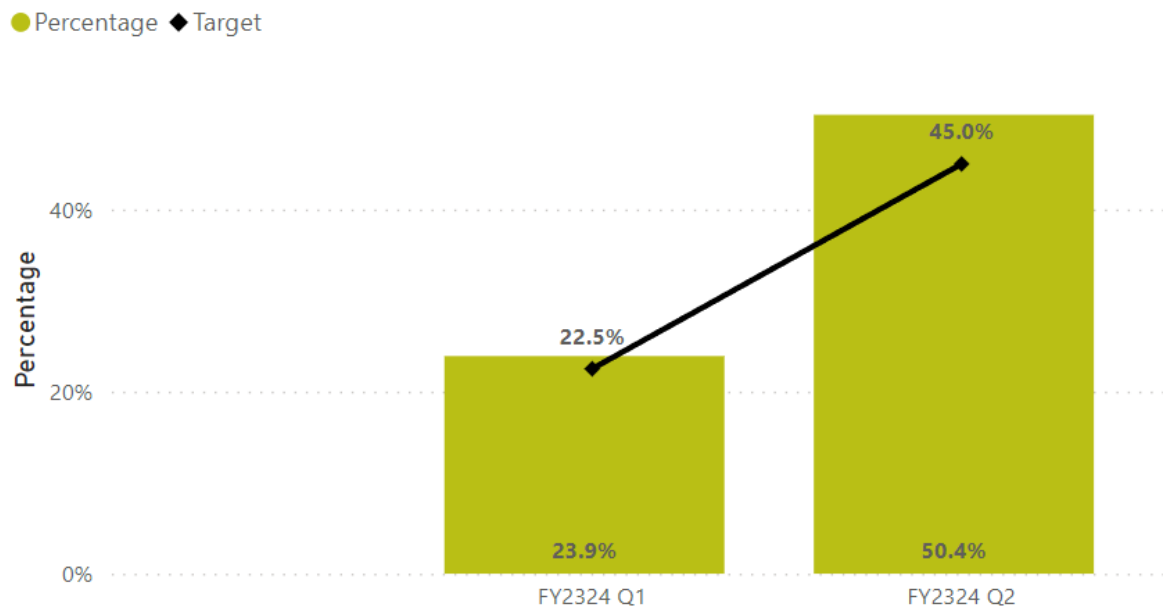
1.2.1 Measures that exceeded their target

PI 174 Proportion of adults with a learning disability or a mental health need in receipt of long-term support who have been reviewed ★
 April 2023- September 2023

Actual: 50.4
Target: 45

Specialist Adults Services review performance covering adults with a mental health need or a learning disability is above the Quarter 2 target and on-track to achieve the end-of-year target of 90%. 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. No benchmarking information is made available by National Health

System (NHS) England to allow comparisons with other Councils for Mental Health and Learning Disability Teams.



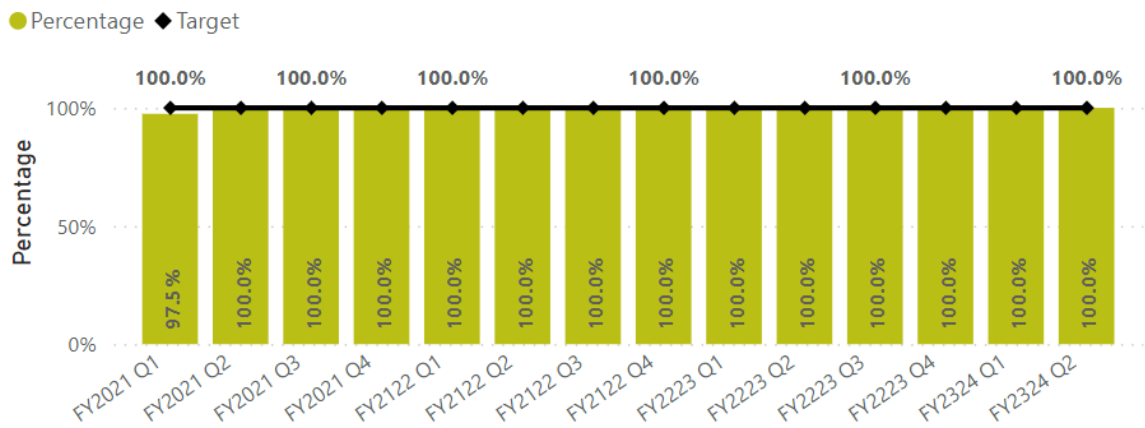
No benchmarking information is made available by NHS England to allow comparisons with other Councils.

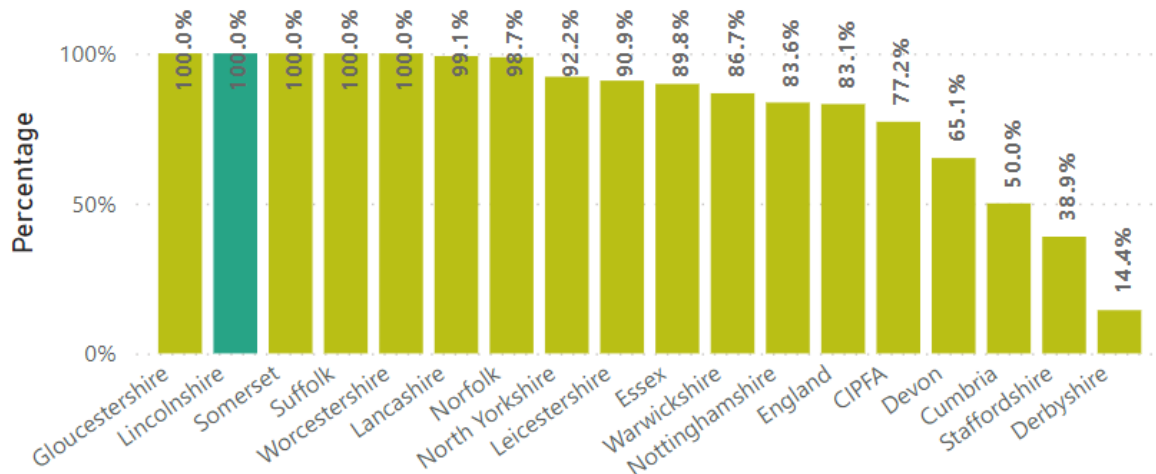
1.2.2 Measures that achieved their target

PI 28 Safeguarding cases supported by an advocate (where appropriate) ✓
April 2023 – September 2023

Actual: 100
Target: 100

This measure is consistently met and demonstrates that individuals are provided with the necessary support to share their views and wishes.





Statistical Neighbours

Benchmarking period April 2022 – March 2023

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

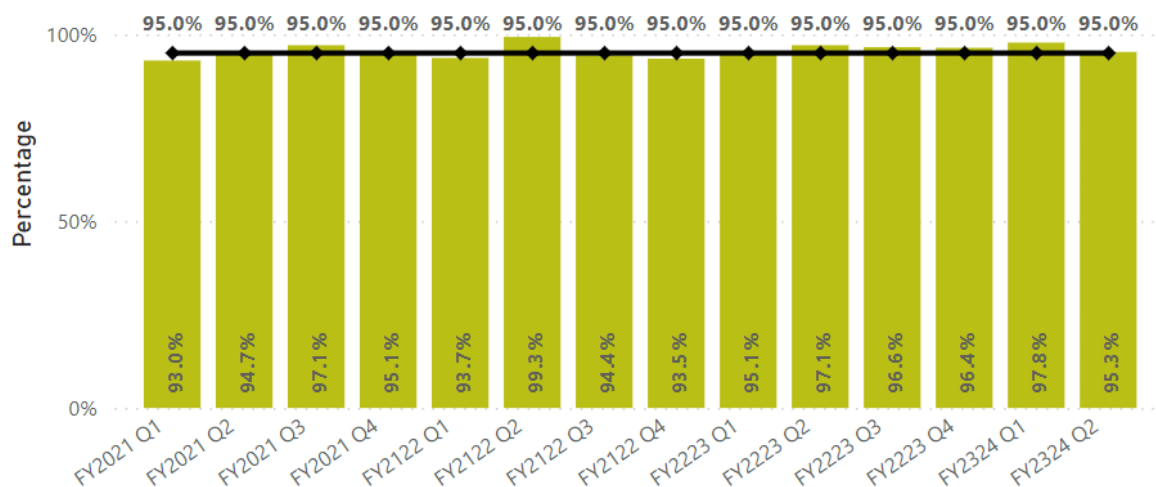
April 2023 – September 2023

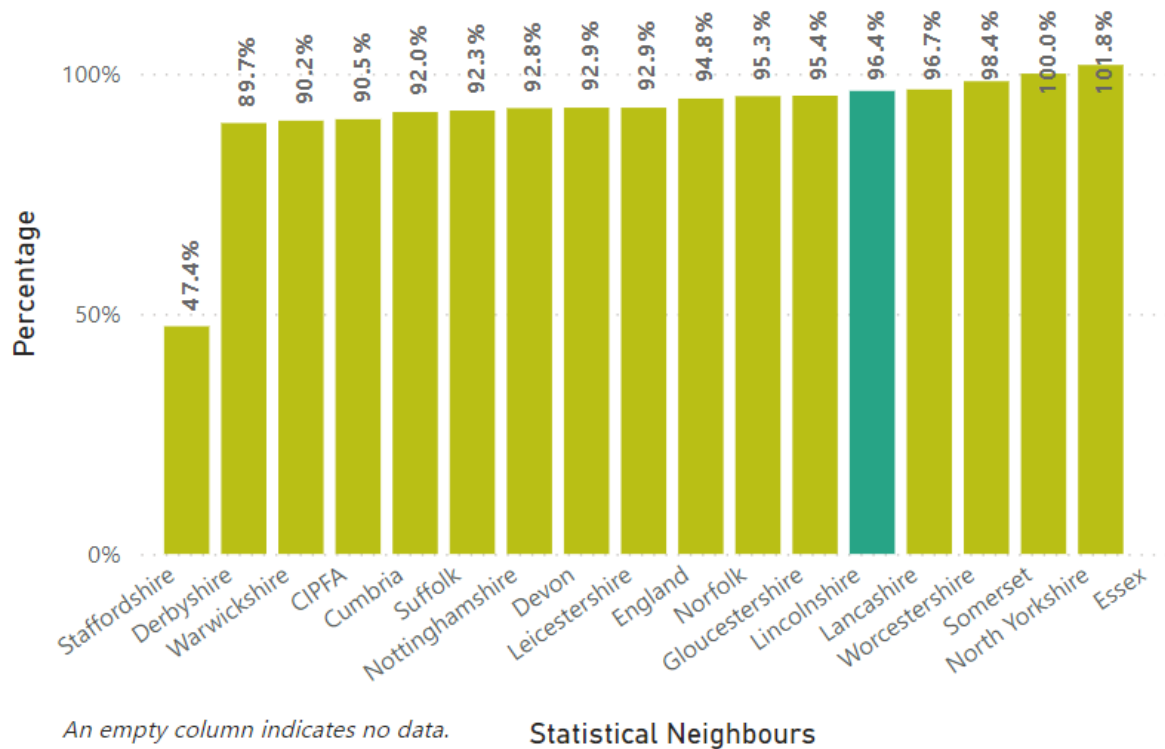
Actual: 95.3

Target: 95

This target provides continued assurance that the adult concerned is always at the centre of adult safeguarding, that their wishes and views are sought and that a person-centred and outcome focused approach is taken.

● Percentage ◆ Target





Benchmarking period April 2022 – March 2023

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

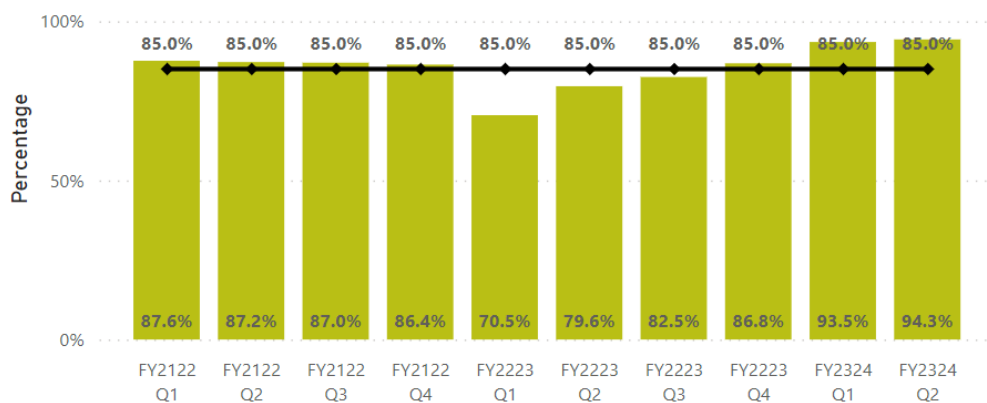
April 2023 – September 2023

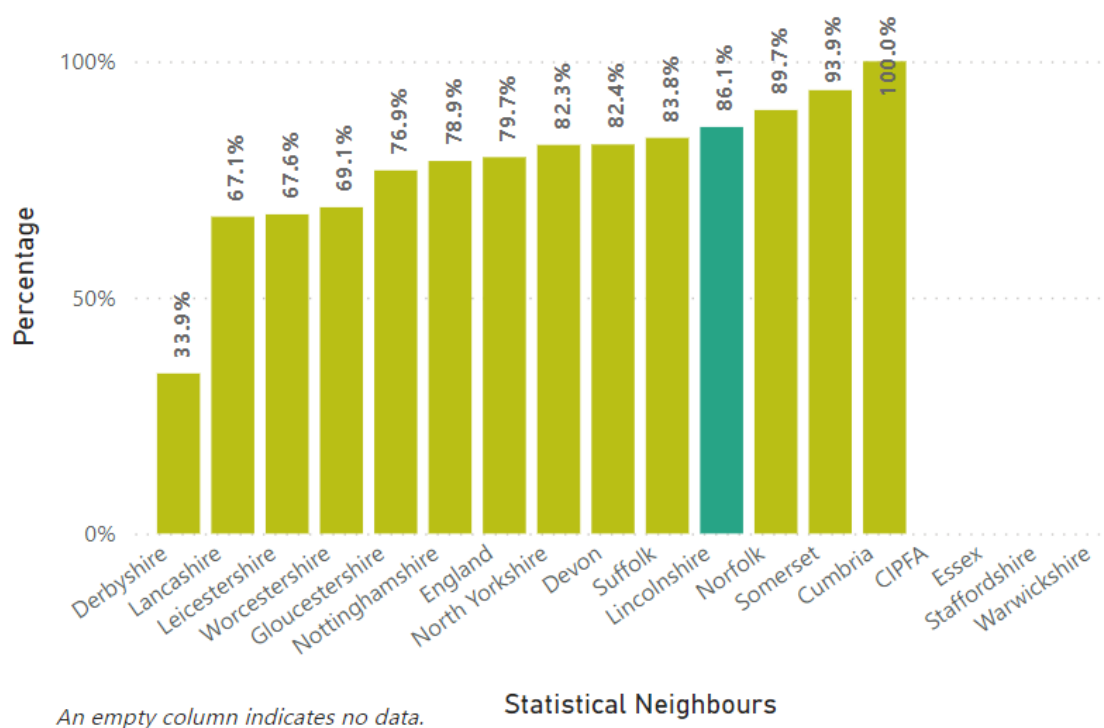
Actual: 94.3

Target: 85

Making Safeguarding Personal is a key priority for the Lincolnshire Safeguarding Adults Board (LSAB) Prevention strategy 2023-2026. Work is on-going across the partnership to ensure that the adult concerned is spoken to at the earliest opportunity and is supported to express what outcomes they would like to achieve. Continuous improvement against this measure shows the positive impact of this activity.

● Percentage ◆ Target





Benchmarking period April 2021 – March 2022

1.2.3 Measures that did not meet their target

None in Quarter 2

1.2.4 Measure that does not have a target (contextual)

PI 173 Proportion of adults with a learning disability who live in their own home or with their family

As at September 2023

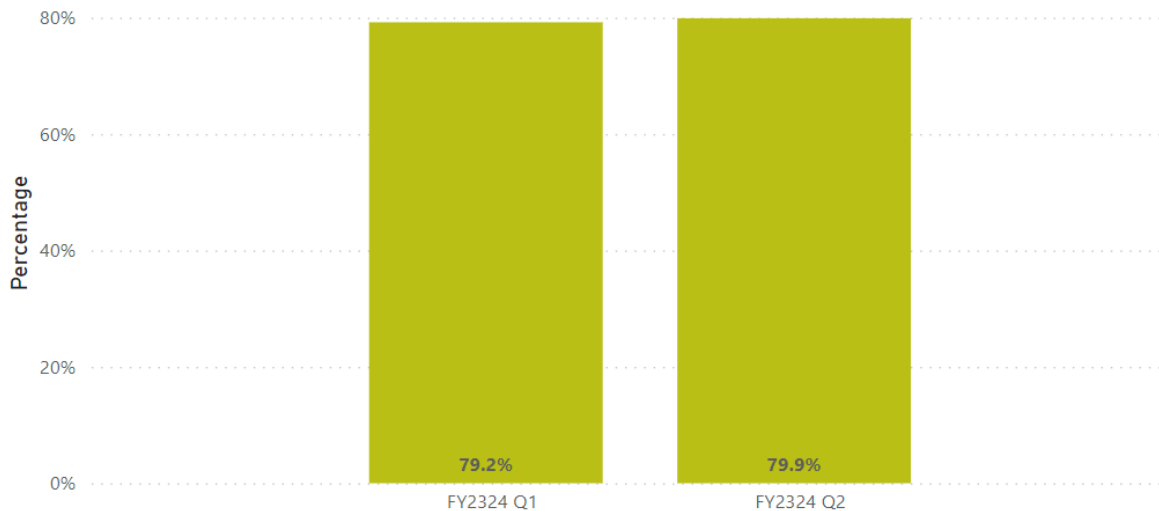
Actual: 79.9

Target: n/a

This measure is intended to improve outcomes for adults with a learning disability by demonstrating the proportion in stable and appropriate accommodation. The nature of accommodation for adults with a learning disability has a strong impact on their wellbeing, safety and overall quality of life including reduced risk of social exclusion.

At the end of Quarter 2, 79.9% live in their own home, with their family or informal carers. This is a slight increase from Quarter 1 and compares to the 2021/22 national figure of 78.8% and the statistical neighbours figure of 75.8%. A lot of work is done by the Learning

Disability Team to support adults with a learning disability to move into their own home, remain living with their family or informal carers.



Benchmarking data will be updated in Quarter 3 and it will then be considered if it is appropriate to set a target for this measure.

1.3 Public Health and Community Wellbeing

1.3.1 Measures that exceeded their target

PI 31 Number of alcohol users that left specialist treatment successfully ★

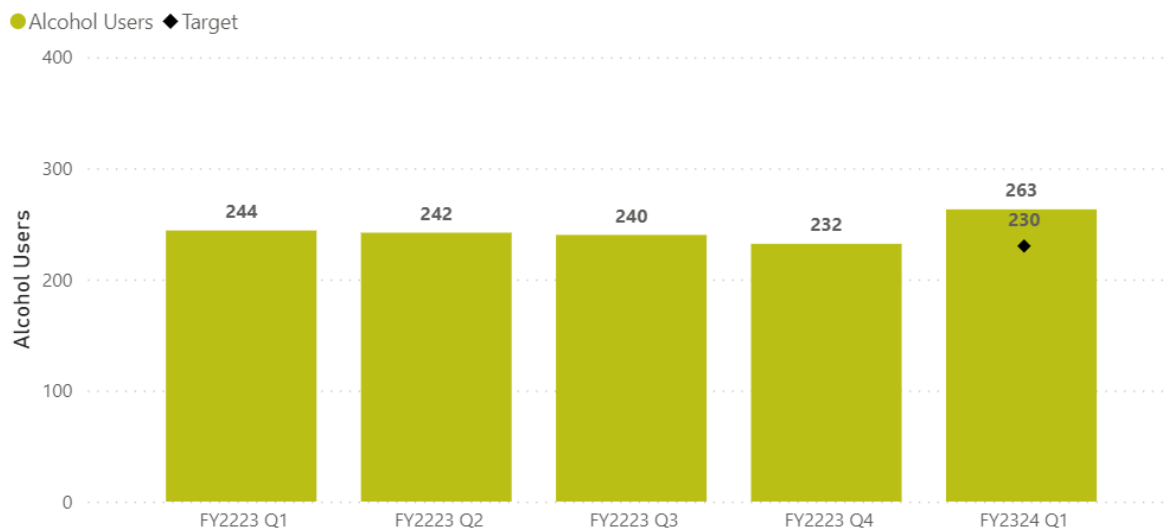
July 22 – June 23

Actual: 263

Target: 230

The definition for this indicator has been revised in Quarter 2 2023/24 to align more closely with service activity and to reflect performance more accurately to the National Drug Treatment Monitoring System (NDTMS). This measure tracks the number of clients in treatment in the latest 12 months who successfully completed treatment. Data is reported with a 3-month (1 Quarter) lag, hence this data reflects performance in Quarter 1 2023/24.

The service has seen improved performance with 263 successful completions compared to 232 in the previous report period which reflects the continued positive work with the provider and the Improvement Plan in place for this indicator. Regular performance monitoring continues with the provider for this indicator with agreed target deliverables and outcomes. The service is currently in a recommissioning phase, and the provider will be supported to minimise any disruption to service delivery during the upcoming transition to new arrangements in April 2024.



This performance indicator is a local measure so benchmarking data is not available.

PI 121 Carers who have received a review of their needs ☆

October 2022 - September 2023

Actual: 96.1

Target: 85

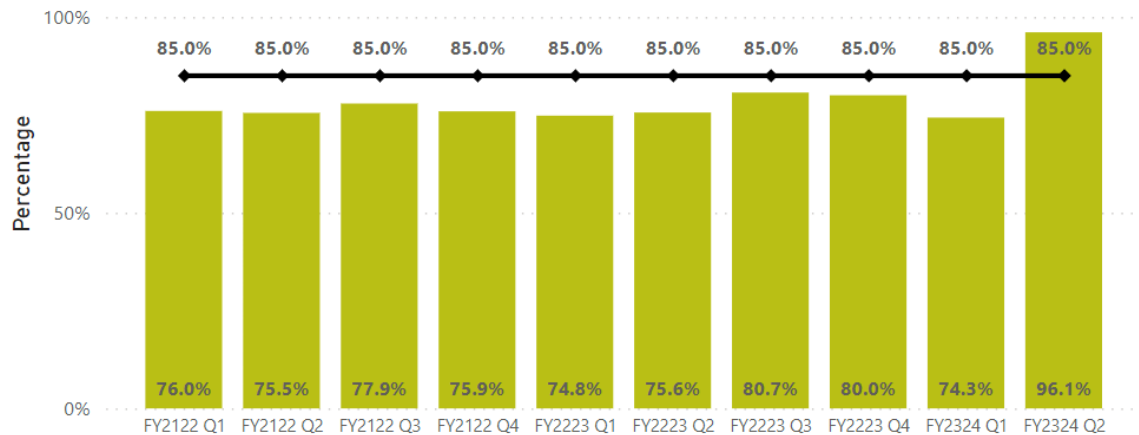
The end of Quarter 2 figure is 96.1% (497 out of 517) which exceeds the target and evidences the effective work of the Carer's Service. It should be noted that the definition for this measure has changed since it was last reported at the end of Quarter 1 to ensure it accurately reflects the performance of the service. The measure takes all unpaid carers who receive a personal budget (a direct payment) and seeks to understand if their personal budget has been reviewed.

The definition used in previous reporting comprised data from 2 groups of carers;

- 1) reviews of carers who receive direct payments and
- 2) reviews of the cared-for person where they receive an ongoing direct payment for respite care.

Reviews undertaken for a cared-for-person are outside the remit and therefore control of the Carer's Service, so this group has now been removed from the measure. The definition for Quarter 2 onwards is now revised to include group one only - carers who receive a direct payment and reflects the performance of the Carer's Service.

● Percentage ◆ Target



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

1.3.2 Measures that achieved their target

PI 33 Percentage of people aged 40 to 74 offered and received an NHS health check ✓
As at June 2023

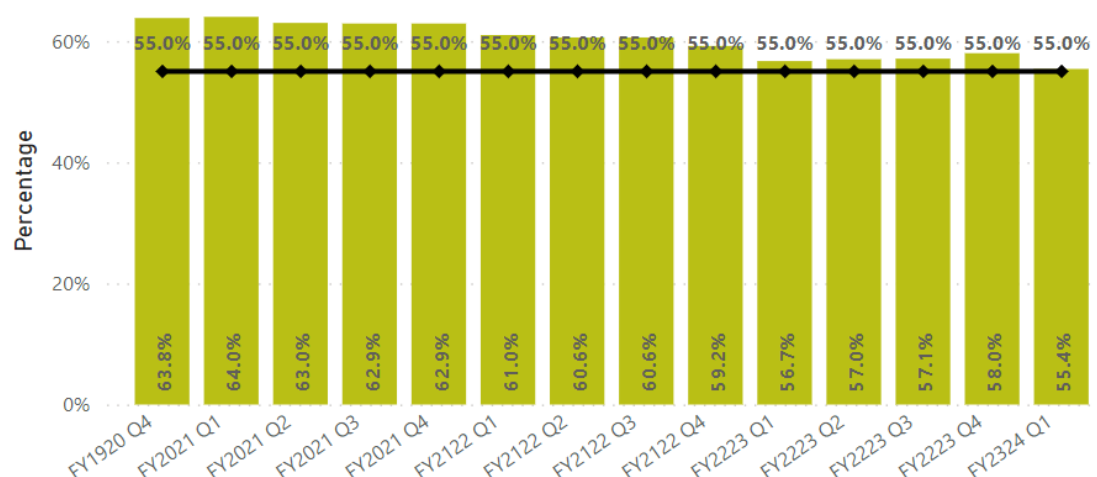
Actual: 55.4

Target: 55

This indicator reflects the latest Office for Health Improvement and Disparities (OHID) published data for the period Quarter 1 2019/20 to Quarter 1 2023/24 and is reported as a rolling five-year measure. During this period in Lincolnshire 94,678 people were invited for a National Health Service (NHS) Health Check and 52,475 people took up the invitation leading to a 55.4% overall uptake. Lincolnshire remains the highest amongst its 'CIPFA nearest neighbours' (Chartered Institute of Public Finance and Accountancy) with the East Midlands overall percentage at 49% and the England average at 40.4% in the same time period.

It should be noted that performance in this indicator will decrease as the rolling average starts to include the period when NHS Health Checks were severely impacted and then halted during the pandemic. The recorded outcomes for the first six months of 2023 post completed NHS Health Checks shows over 2,000 people were identified as having high risk indicators following their check. This includes 480 instances of Hypertension and 97 cases of Diabetes.

● Percentage ◆ Target



Benchmarking period April 2019 – June 2023

PI 110 Percentage of people supported to improve their outcomes following Wellbeing intervention ✓

As at June 2023

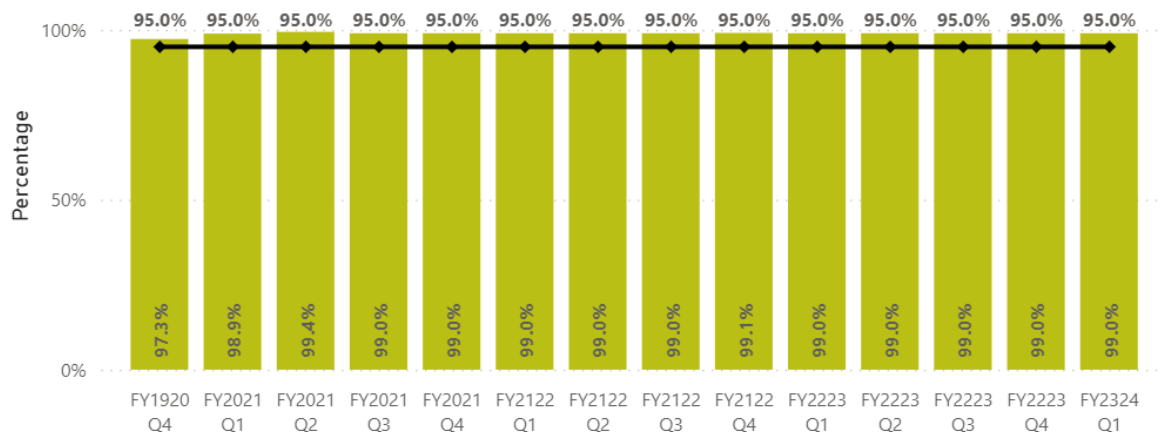
Actual: 99

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 1 2023-24. 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.

Service demand has slowed from the unprecedented peak seen in Quarter 4 2022/23, however the service still completed an average of 720 assessments per month in the reporting period. Support with independence and managing money continued to be the highest outcome areas individuals are seeking service interventions to improve.

● Percentage ◆ Target



This performance indicator is a local measure so benchmarking data is not available.

PI 111 People supported to successfully quit smoking ✓

April 2023 – June 2023

Actual: 696

Target: 669

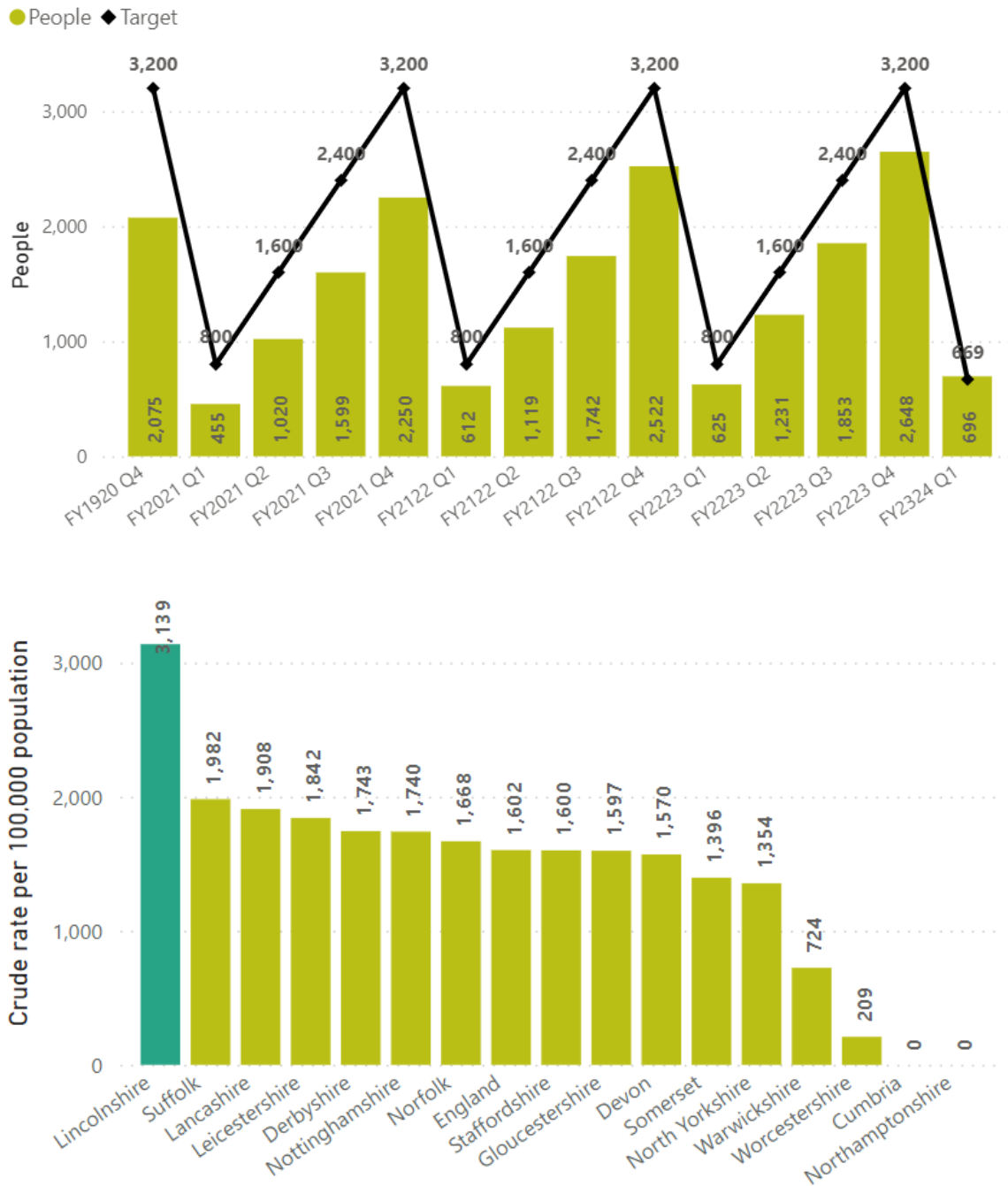
Data for Quarter 2 relates to April to June 2023 due to 12-week data lag. The quit rate for Quarter 2 is 63%, which is above national targets (and higher than the same time last year which was 54%). The effectiveness of e-cigarettes has been outlined in a report to Lincolnshire County Council (LCC), demonstrating that quit rates are equitable to the use of traditional Nicotine Replacement Therapy (NRT) and are a cost-effective option to the service. Client feedback and case studies are also positive.

The Lincolnshire Prescribing and Clinical Effectiveness Forum (PACEF) document has been updated, and the service will support roll-out of e-cigarettes across sub-contracted General Practitioners (GPs) and Pharmacies resulting in an equitable smoking cessation offer across the county. The service is bidding for the Government 'Swap to Stop' scheme, which will result in additional vape starter kits becoming available within Lincolnshire.

Face-to-face appointments continue to increase, with more clinics in community settings, including Centrepont Outreach in Boston and in Washingborough GP surgery. Centrepont is a support centre for homeless people in the Boston area, so a weekly face-to-face clinic can offer stop smoking support in a familiar and accessible setting to the homeless

community. It also removes the need for a permanent address as NRT/e-cigarettes are supplied directly to the client.

Maternity smoking cessation services will fully move to the National Health Service (NHS) in October, which may have a small impact on numbers in the core service (approximately 150 per year). However, the new referral route for mental health inpatients is live which should improve the transition into community support for this cohort.



Statistical Neighbours

Benchmarking period April 2022 – March 2023

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

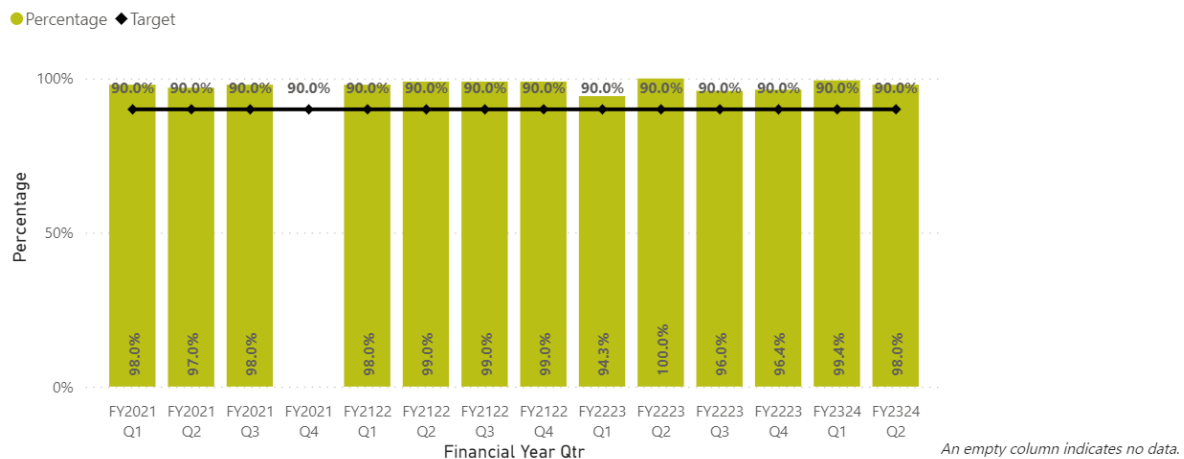
As at September 2023

Actual: 98

Target: 90

The service has achieved the target this Quarter for both accommodation and floating support, evidencing the provider continues to support service users to achieve their outcomes. Areas of focus have been on managing throughput of the service and supporting service users to move on. Partnership working continues with the provider and other partners to ensure a multi-disciplinary approach to successful outcomes.

Please note a correction to the Quarter 1 2023/24 performance to 99.4% (previously reported as 100%) due to an error in the inclusion of all individuals captured in this indicator, this has now been rectified moving forwards.



This performance indicator is a local measure so benchmarking data is not available.

1.3.3 Measures that did not meet their target

PI 59 Carers supported in the last 12 months ✗

October 2022 - September 2023

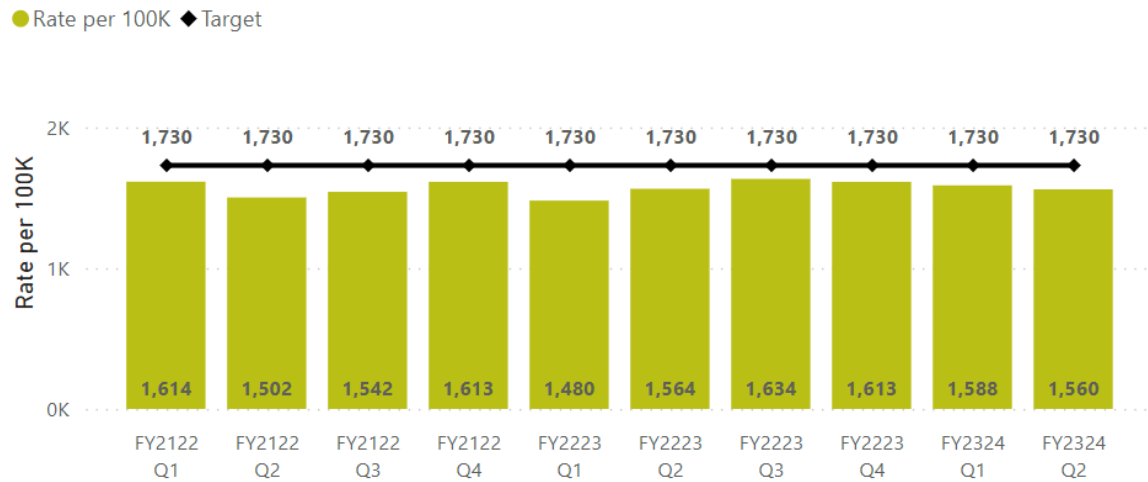
Actual: 1560

Target: 1730

While the target has not been met, 11,859 unpaid carers were supported over the last 12 months, this comprised 9,221 adult carers of adults and 2,638 young carers. Of the 9,221 adult carers supported; 785 received a direct payment and 7,934 were offered information and advice as part of the Carer's Service. Outside of the service, 502 cared for persons received respite, providing indirect support to unpaid carers. The rate for Quarter 2 is lower

than in Quarter 1. This was to be expected based on historical trends during the summer holidays, when there is less activity in this service.

The 1,730 per 100,000 population target for this measure was set several years ago and it is intended that this will be changed in Quarter 3 2023/24 to take into account the new Carer's Service model which went live on 1 October 2022. This would provide a realistic target which reflects the work of the Carer's Service in the context of other council services which support carers and are also included in this indicator.



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

Update regarding **PI 111 People supported to successfully quit smoking** 2023-24 target, which was 'TBC' in Appendix A in 2022-23 Quarter 4 report. 2023-24 target is 2,675 people supported, although due to the 1 quarter lag, this will not be reported until Q1 2024-25.

2. Conclusion

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

3. 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 Caroline Jackson, who can be contacted on Caroline.Jackson@lincolnshire.gov.uk