



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

Report to:	<b>Adult Care and Community Wellbeing Scrutiny Committee</b>
Date:	<b>06 July 2022</b>
Subject:	<b>2021/22 Quarter 4 Performance</b>

**Summary:**

The report provides an update on service level performance for Adult Care and Community Wellbeing. This report provides an overview of the year focussing on the successes and areas for development with measures above and below the target range for Quarter 4, 2021/22.

**Actions Required:**

The Adults Scrutiny Committee is requested to consider and comment on the report, and the Adult Care and Community Wellbeing service level performance summary for 2021/22 Q4 in Appendix A.

## **1. Background**

Adult Care and Community Wellbeing is organised into five functional areas, with key outcome measures included in the service level performance plan for each area;

- Adult Frailty and Long-term Conditions
- Informal Carers
- Safeguarding Adults
- Specialist Adult Services
- Public Health and wider preventative services (Community Wellbeing)

Public Protection has also just become part of Adult Care and Community Wellbeing. Performance is currently monitored in the Public Protection Scrutiny Committee and is therefore currently out of scope of this Scrutiny report.

There are a total of 20 measures reported in quarter 4, including two outcome measures only reported in quarter 4, which are sourced from the recently completed annual social care surveys.

Performance in Adult Care and Community Wellbeing is summarised below;

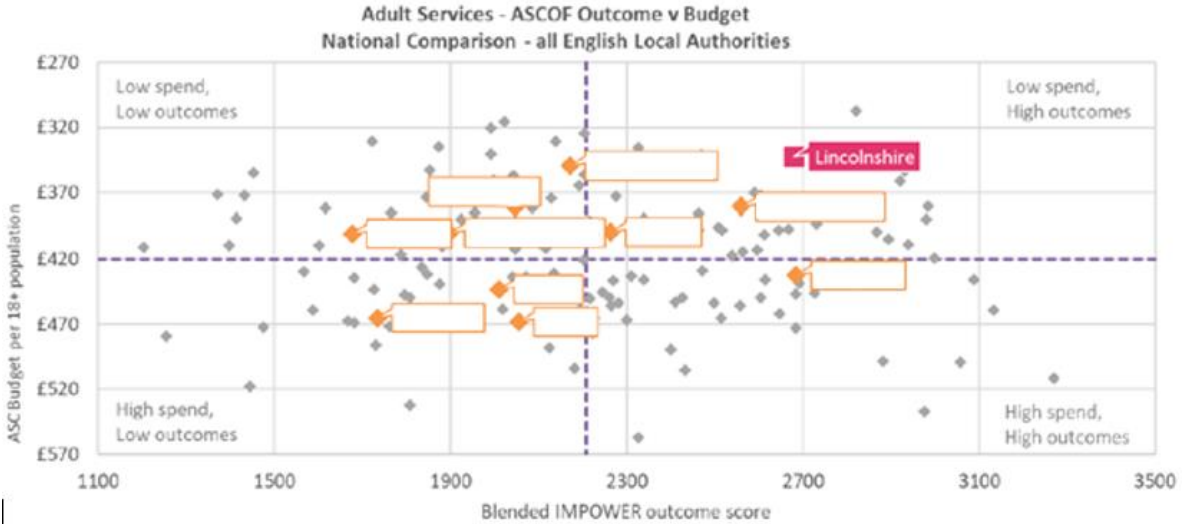
- 6 measures have exceeded the target (above the target tolerance)
- 9 measures have achieved the target (within the target tolerance)
- 6 measures did not achieve their target (below the target tolerance)

Overall, this means that 75% of measures (15 out of 20 measures) have been achieved or exceeded, which is encouraging given the continued impact of COVID-19 and the enduring challenges the health and care sector have faced.

The table below shows the details of each measure. Since this report is by exception, the narrative in the next section will include where we have done particularly well and where we need to improve with some added context.

Measure	Description	Numerator	Denominator	Value	Target	Performance
63	Adults who receive a direct payment	2,118	5,046	42%	36%	✓ Exceeds
122	Requests for support for new clients, where the outcome was no support or support of a lower level	24,003	25,096	96%	93%	✓ Exceeds
130	Adult Safeguarding concerns that lead to a safeguarding enquiry	4,038	4,046	100%	50%	✓ Exceeds
33	Percentage of people aged 40 to 74 offered and received an NHS health check	73,273	121,000	61%	55%	✓ Exceeds
112	People supported to maintain their accommodation via Housing Related Support Service (HRSS)	183	184	99%	90%	✓ Exceeds
113	Emergency and urgent deliveries and collections of equipment completed on time	9,917	9,989	99%	98%	✓ Exceeds
60	Permanent admissions to residential and nursing care homes aged 65+	947	-	947	950	✓ Achieved
123	People who report that services help them have control over their daily life	418	509	82%	80%	✓ Achieved
124	Completed episodes of reablement	2363	2555	92%	95%	✓ Achieved
120	Carers who said they had as much social contact as they would like	86	279	31%	35%	✓ Achieved
28	Safeguarding cases supported by an advocate	363	363	100%	100%	✓ Achieved
116	Concluded safeguarding enquiries where the desired outcomes were achieved	100	107	93%	95%	✓ Achieved
117	Adults aged 18-64 living independently	78	104	75%	75%	✓ Achieved
158	People who remain at home 91 days after discharge	1388	1550	90%	85%	✓ Achieved
110	Percentage of people supported to improve their outcomes following a Wellbeing intervention	1748	1762	99%	95%	✓ Achieved
65	People in receipt of long term support who have been reviewed	4,331	5,438	80%	90%	✗ Not achieved
59	Carers supported in the last 12 months (per 100,000)	12,255	8	1,613	1,730	✗ Not achieved
121	Carers who have received a review of their needs	676	891	76%	85%	✗ Not achieved
31	Percentage of alcohol users that left specialist treatment successfully	255	864	30%	35%	✗ Not achieved
111	People supported to successfully quit smoking	1,742	-	1,742	2,400	✗ Not achieved

Despite the challenges over the past few years, there is evidence to suggest that Lincolnshire continue to perform well in comparison to similar large rural shire counties. Impower consultancy have been working with the Corporate Performance Team and Adult Care over the last two years and demonstrated Lincolnshire’s achievements in 2020/21 with their ‘Adults Performance INDEX’. By using a range of national outcome and finance measures, the INDEX shows that Lincolnshire Adult Care was a **low spend, high outcome** authority, outperforming many similar local authorities with which we benchmark. The comparator local authorities are identified in the chart below in orange, but the names have been suppressed since this analysis is not in the public domain.



Furthermore, it was encouraging to see that CQC ratings for our social care providers in Lincolnshire had not been adversely affected by covid pressures. Four out of five social care providers in Lincolnshire are rated as ‘Good’ or ‘Outstanding’, which has been very stable over the last two years. Overall, this demonstrates that Lincolnshire has a strong commissioning position, where services provide good value for money, achieve good outcomes for people and provide a good standard of care.

The national benchmarking for the service level measures has been updated in Appendix A with the latest published data. This analysis echoes the findings from IMPOWER as Lincolnshire continues to compare favourably to other similar authorities in the CIPFA comparator group.

## Adult Care and Community Wellbeing Overview

2021/22, the second year of the COVID-19 pandemic, has certainly seen a continuation of many of the challenges from the previous year, not least with the unprecedented levels of hospital admissions for patients and resulting demand for social care support, compounded by pressures faced by social care practitioners and providers, with workforce and capacity being squeezed.

As national restrictions eased during the year, demand for social care from adults increased. A total of 35,600 separate requests for support were received this year, compared to 30,400 in the previous year, which is approaching a 20% increase in demand at the front door. Demand in other areas of adult care also increased compared to the previous year, with both Deprivation of Liberty Safeguards and Adults Safeguarding concerns showing sustained increases. With the latter, this translated into 97% of those concerns being investigated by the Adult Safeguarding Service (**Measure 130**). Also, over 12,000 adult carers and young carers were supported during the year, which was a slight increase from 2020/21 but below our ambitious target for the year (**Measure 59**). Support to carers will be taken forward as a priority area for the health and care sector, continuing to reach out to unpaid carers in Lincolnshire identified from the Census who are not already known to health and care.

To a large extent, Adult Care's strengths-based approach to assessing adults using an 'initial conversation' has been highly effective in managing the increased demand and protecting the Social Work and Occupational Therapy teams. Combined with recovering capacity in reablement, a strong wellbeing service and responsive equipment service (**Measure 113**), over 95% of requests were met effectively with lower-level interventions or no support (**Measure 122**).

The number of adults with a funded long-term residential placement or community packages reduced during the year. Sadly, deaths from COVID-19 contributed to this, as did the availability of care. Whilst home care capacity was diminished with fewer packages arranged, this did have a positive impact on **Measure 63** in relation to the uptake of direct payments as a viable alternative to managed services. This measure exceeded the target.

Whilst the department was relatively effective in managing the front door as mentioned above, this prioritisation did come at the cost of available resources to review existing clients with packages of care. The overall target for **measure 65** on reviews was not achieved overall. However, in Specialist Adults, the council's Learning Disability teams and Lincolnshire Partnership NHS Foundation Trust (LPFT) Mental Health teams achieved 95% and 100% respectively. In particular, LPFT have been effective in allocating and completing reviews, and have been proactive in re-scheduling future reviews so they are more evenly spread throughout the year and therefore easier to manage. Adult Frailty Teams were slightly behind the target with their review performance, but they do have more adults to review and had to prioritise their resource to completing unplanned reviews triggered by hospital spells. Overall, almost 80% of existing clients received at least one review in the year. Some work still needs to be done to ensure outstanding annual reviews are completed as a priority.

Equally, the proportion of carers reviewed needs to improve (**measure 121**), where activity is planned in and captured correctly on the case management system. The Carers Service is subject to re-commissioning at the time of writing, with a new service due to mobilise from 1 October 2022.

Activities in Public Health continue to improve the lives of our population, exceeding the target for **measure 33** showing an increase in NHS health checks for people aged 40 to 74 and **measure 122** with people supported to maintain their accommodation via the Housing Related Support Service (HRSS).

Alcohol treatment (**measure 31**) and smoking cessation support services (**measure 111**), continue to target the hardest groups of vulnerable adults in our society, which the providers are commended for however have not achieved their targets. Face-to-face engagement has been difficult with these groups during the pandemic as engagement is often through related services e.g. pharmacies, where access during covid was much more limited. Complex presentations of alcohol dependency are becoming more common, and successful treatment can take time. A significant increase in government funding for substance misuse services is expected shortly, recognising the trend in volume and service user complexity across the country.

Overall, the year has been successful despite the legacy of COVID-19. There is always room for improvement, but there is some good evidence of effective service delivery, resilience, and adaptability of all involved in care provision. This is an excellent foundation to build on as we move into a new era of Local Authority Assurance by the Care Quality Commission which is just over the horizon.

**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**

Non identified

**4. Appendices**

These are listed below and attached at the back of the report	
Appendix A	ACCW Performance Q4 2021-22 v2

## **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 David Boath, who can be contacted via [David.Boath@lincolnshire.gov.uk](mailto:David.Boath@lincolnshire.gov.uk)