



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

Report to:	Adult Care and Community Wellbeing Scrutiny Committee
Date:	07 September 2022
Subject:	Adult Care and Community Wellbeing Service Level Performance 2022/23 Quarter 1

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 1, 2022/23.

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 Quarter 1 2022/23.

Also to consider the recommendation for the changes to the Carers' Review Performance Indicator.

1. Background

Introduction to Adult Care and Community Wellbeing

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).

The 'Ambition' work in Adult Care pulls together all priorities for each of the areas to ensure collective responsibility and contribution towards maximising independence, building resilience and helping people stay connected.

Public Protection became part of Adult Care and Community Wellbeing Directorate in April. Performance for this service area is currently monitored in the Public Protection Scrutiny Committee and is therefore currently out of scope of this Scrutiny report.

Adult Care and Community Wellbeing Overview

Performance in Adult Care and Community Wellbeing for Q1 is summarised below;

- 2 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)
- 17 measures reported in total for Q1 2022/23.

Since this report is by exception, the narrative below will focus on where we have done particularly well and where we need to improve with some added context.

A total of 8,600 requests from new clients were received in quarter 1 2022/23, which is 5% more than in quarter 1 from the previous year. Moreover, the increase in demand from older people has increased by 10% over the same period. Therefore, at this stage in the year, there is evidence to suggest demand for support is continuing to increase. This makes it even more important that Adult Care continue to invest in lower-level support (including the digital offer) and in improving the efficiency of the assessment process at the front door. Support to carers will also be key to managing the demand, where the people they care for can be sustained in the community for longer, delaying the provision of more costly funded care and support.

New requests for older people leading to lower level or no support is exceeding the target, with 96% of requests being diverted from long term support packages. Instead, the needs of these older people are being met with reablement, wellbeing services, equipment and information and advice. Just 4% of requests have resulted in funded long term support services including just 66 new admissions to permanent residential or nursing care. There are promising signs that admissions will remain lower than the target trajectory throughout the year.

Assessments of new people are prioritised by the area teams, as are unplanned reviews. For those coming through the Customer Service Centre (CSC), initial conversations are proving effective at re-directing some of the new demand, as 1,400 conversations have occurred, leading to just over 500 cases being transferred to area teams for a follow-up conversation or a full needs assessment. Needs assessments do not exclusively come via the CSC though, so assessments remain high particularly in the Adult Frailty Teams, and therefore takes resource away from planned reviewing activity.

With regard to reviews, Members should be assured that where an adult with an existing care package does require immediate attention owing to a change of circumstances, for example where a carer is unable to sustain the caring role, or the person's health deteriorates following a hospital spell, their needs and support package will be reviewed

and adjusted swiftly with an unplanned review. Whilst the Care Act 2014 states that all adults are entitled to an annual review of their care and support arrangements, local authorities seldom manage to achieve this, and over the last few years there is evidence that Lincolnshire is one of the highest performing councils. The 90% target for reviews is therefore a more realistic target. Specialist Adult teams are on track to hit the year-end target, and plans are in place to free up the dedicated reviewing teams in Adult Frailty to bring reviews back towards the target trajectory.

Despite the measure on carer reviews showing as not achieved (74.8% against a target of 85%), there is evidence to suggest that the carers service is, in fact, reviewing the vast majority of carers who are eligible for the review. It has come to light that 78% of carers who have received a personal budget (as a direct payment) in the last 12 months, are still in receipt of that service at the end of the period and therefore require an annual review. Consequently, the maximum performance is fixed as 78%, so the current target of 85% will never be achieved. The committee are asked to reflect on the options below:

- a) the measure remains the same, but the target is adjusted accordingly, or
- b) the cohort of carers in the denominator is adjusted to only those currently in receipt of a personal budget, and where they have been in receipt of the service for 12 months. This would bring this measure into line with the definition used in the adult reviews measure. **This is the recommended option.**

Demand for carers support continues on an upward trajectory for adults, despite the target not being achieved. Overall, there has been a reduction of approximately 1,000 carers supported in the last 12 months compared to quarter 4 of 2021/22. This is purely a reduction in young carers and improved data capture, since new and improved data is being used from Children's Services. In terms of adult carers, LCC have supported 2,000 newly identified carers in the 12 months to 30 June 2022, with evidence in quarter 1 that a similar level of new demand is expected throughout the year.

A re-commissioning exercise has now completed with the contract being awarded to the existing provider, to commence on 1 October 2022. As a result of feedback from carers and benchmarking information, we are amending the service model to provide a clearer route to information, advice and support, with digital options providing greater flexibility for those in caring roles. Nationally and locally, the expectation is for the number of carers supported to rise, with more emphasis on working with health to identify and support carers earlier in their caring journey. A pilot is planned for later in the year to target and proactively support more carers initially in coastal areas of the county, a specific area of need identified by the Primary Care Network in that area.

Support for Carers is one of the seven priorities in Lincolnshire's Health and Wellbeing Strategy. The Carers Priority Delivery Group brings together stakeholders from across the county to work together to identify more carers, earlier in their caring journey, including through their place of work, providing the information and support required to enable them to care, and to step away from care as appropriate. The membership of and work programme for the group is being reviewed to take account of learning from covid. A

Memorandum of Understanding to underline each organisation's commitment to some specific actions is under development to ensure an aligned and prioritised response.

In Safeguarding, to strengthen the monitoring of Making Safeguarding Personal (MSP), a new measure has been introduced for 2022/23 to report on the proportion of completed safeguarding enquiries where the person or their advocate were asked what outcomes they wanted from the intervention. This ties in with the advocacy measure to ensure people who lack mental capacity also have the opportunity to share their desired outcomes via their advocate, which is consistently at 100%. Both of these measures are integral to MSP.

The target is currently not being achieved, but the Mosaic Team are working to ensure the enquiry form is refined to ensure this question is consistently captured, and all cases which indicate the outcomes were not asked or expressed will be quality checked each month from now on, with performance expected to show an immediate improvement in quarter 2. Where desired outcomes have been asked and expressed directly from the person or their advocate, this allows the service to more effectively evaluate the extent to which those outcomes have been met in the other measure in the third measure in the framework. That is, to increase the denominator for this secondary measure to fully evidence the impact of interventions.

In Public Health, 3 of the 5 measures are being achieved, but as indicated in quarter 4 of 2021/22, challenges remain with the two measures relating to alcohol specialist treatment and smoking cessation, both of which are not achieved, but the latter is showing some signs of improvement.

Overall, performance is strong across Adult Care and Community Wellbeing in the first quarter of 2022/23, with pockets of managed issues owing to ongoing challenges, and from commissioned services in Public Health. Some measures need some reflection and adjustment to data capture or definitions to ensure performance is monitored appropriately. Finally, the new measure for Safeguarding has been introduced specifically to strengthen the monitoring of the MSP agenda, but also because there is room for improvement with positive actions being taken.

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

Not required

4. Appendices

These are listed below and attached at the back of the report	
Appendix A	Adult Care and Community Wellbeing Summary Report - Q1 2022/23
Appendix B	Adult Care and Community Wellbeing Detailed Report - Q1 2022/23

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 david.boath@lincolnshire.gov.uk.

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