

Adult Social Care Scrutiny Commission Report

Adult Social Care Performance Monitoring
2022/23 (to Q3)

Lead Member: Cllr Sarah Russell
Lead Strategic Director: Martin Samuels
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Wards Affected: All

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1. Purpose

1.1 To provide the Adult Social Care Scrutiny Commission with an overview of the performance against key metrics.

1.2 This report is supplemented with a data pack at appendix A and therefore the report contains key messages to provide accessible information.

2. Summary of Performance (please refer to Appendix A)

2.1 (Slides 2 and 3) Key messages are:

- There is much positive work undertaken by Adult Social Care in the city. However, pressures are having an impact on our capacity to recover from covid and meet increasingly complex demand.
- Demand (volume of requests for support) fluctuates over the year but is forecast to be slightly below last year.
- Complexity is difficult to 'see' in performance measures but has certainly increased as people face multiple and compounding issues (poor mental / physical health, financial constraints, fuel poverty, reduced support from others)
- During the first half of the year, we saw that a relatively high proportion of people assessed were found to have eligible needs but this has fallen back to 2021/22 levels in Q3
- The % of people supported at point of contact could be greater (above 70%) – but we are confident that people who are given advice / information are not re-presenting to us with the same concerns
- Our short-term service offer is effective and benchmarks well
- We are unable to keep pace with annual reviews due to other priority work – but the growth in overdue reviews has slowed in the last 6 months

- Safeguarding activity is being further explored, as the ratio of alerts to enquiries (meeting the threshold) is different to most other East Midlands councils
- New admissions to care homes have reduced which is in line with our strategic objectives to support people in the community
- Most people being discharged from hospital return to their usual place of residence
- The number of people going straight home rather than into a bed should be increased
- Complaints remain low and commendations steady
- A substantial majority of people tell us that the support they receive helps them to live their life
- Our CQC ratings for Supported living and Home Care are mostly good (87% and 82% respectively), with one supported living provider having an outstanding rating: but comparatively poor CQC ratings for Care Home and Nursing care (72% good or outstanding). Ratings have reduced since the pandemic and we are looking closely at the reasons for this, to make improvements.

3. Recommendations

3.1 The Adult Social Care Scrutiny Commission is recommended to:

- a) Note the report and to provide any comments.

4. Report (please refer to Appendix A)

4.1 Adult Social Care (ASC) is a large, complex function, delivering support to several thousand people and operating in a challenging context. Financial constraint, workforce challenges and the increasing needs of the people we support in Leicester all have impact on the delivery of high-quality services. It is therefore critical that we monitor our performance and the impact that our services are having.

4.2 There are comprehensive operational / business performance reports, with data that speaks to the full range of day to day activities. The national data framework (Adult Social Care Outcomes Framework) is being revised presently but for now enables us to benchmark with other councils against key lines of enquiry. The report shared here focuses on some of those

metrics, together with some locally designed metrics that help us to understand the difference we are making for the people we support.

The key messages are as follows.

- 4.3 (Slide 4) ASC measures the volume of contacts received, as an indicator of demand. Whilst there is a limit to the control we can exercise over presenting demand, it is helpful to understand how this changes over time. Demand has reduced this quarter. Longer time series data does show a degree of fluctuation, but the upper and lower parameters are broadly consistent. Our forecast is for 17,883 contacts in 2022/23 compared to 18,998 in 2021/22. The primary focus for ASC is on the quality of our contact conversations (linked to screening for risk and to safeguarding outcomes) and what happens following the contact.
- 4.4 (Slide 5) Not every contact results in a request for support, as many conversations are able to resolve the individuals needs quickly. A request for support is created where an individual appears to have needs related to ASC. As with contacts, the volume of requests for support varies. We are forecasting 10,860 requests for support during 2022/23 compared to 11,612 requests for support in 2021/22.
- 4.5 (Slide 6) How we meet requests for support is critical to our ability to manage demand in an effective and efficient way, drawing on people's strengths and those available to them in the community. 66.9% of requests for support are resolved at the point of contact – via information, advice and signposting. 24.6% are met by the provision of short-term services in the first instance. 8.5% are met by the provision of long-term support following the request. Based on comparator data, we aim to increase the number of requests resolved at point of contact to +70% and to make more use of short-term services rather than long-term support.
- 4.6 (Slide 7) It is important that we monitor whether the outcomes of requests for support are positive and sustainable. We therefore monitor the proportion of people who re-present to ASC for the same issue within 12 months. This is currently 6.8%, which is low and has reduced over the last 12 months, giving us some assurance that the advice we are giving people is helping them.
- 4.7 (Slide 8) We have two metrics which capture the impact of our short-term, preventative services (Reablement / Enablement). These are generally very positive, with some fluctuation over the course of a year. In Q3, 78.3% of people who received these services did not require any ongoing support, as their independence had been developed. Reablement is separately monitored in relation to the hospital discharges of people over 65 and 92.6% of people were still at home 91 days after the reablement period. This benchmarks very strongly against national data.

4.8 (Slide 9) We monitor the number of people receiving long-term support, as an indicator of residual need in the city, after preventative options have been explored. We are forecasting to be supporting new 1,003 people in 2022/23 compared to 1,056 in 2021/22. This is higher than in years prior to the Covid-19 pandemic. Total numbers supported, taken as a snapshot, stood at 5,146 in Q3, slightly below Q2's high of 5,199 but well above 4,776 in 2018.

4.9 (Slide 10) We have reported to scrutiny previously, in Covid-19 impact reports, the challenges being faced in keeping pace with planned annual review activity. There are now 1,127 people whose review is at least 12 months overdue (i.e., it has been more than 24 months since the date of their last review). This stood at 517 in April 2021 and has been rising since, although the level of increase has slowed in the last few months as new staff have come into post. This remains a key concern.

4.10 (Slide 11) The number of people being newly admitted into residential and nursing care is monitored, as we have a strategic priority to support more people at home in their community. Placement activity has reduced since the summer and we are forecasting 261 new placements in 2022/23 compared to 274 in 2021/22.

4.11 (Slide 12) Safeguarding activity is closely monitored and ASC Scrutiny Commission has received the Leicester Safeguarding Adults Board Annual Report, which gives a comprehensive picture of safeguarding as a partnership in Leicester. ASC data measures the volume of alerts and of those, which meet the threshold for an enquiry (under s42 of the Care Act 2014). The picture is mixed in 2022/23 with a much-reduced conversion rate, against a year-on-year trend of increasing conversion rates. We are currently exploring what might have changed, resulting in us receiving lots of alerts that do not meet the threshold for enquiry.

4.12 (Slide 13) We aim to support as many people as hospital to return to their usual place of residence, and to go straight home. We are doing well in supporting around 93% of people to return to their usual place of residence. The data shows the proportion of people who go home to a community setting (pathway 1) rather than into a short-term bedded setting (pathway 2) or straight into a new long-term care home setting (pathway 3). We are working to develop solutions such as short-term community-based night care, to reduce the use of short-term placements at the point of discharge. This will be less disruptive for people, who tend to recover best at home.

4.13 (Slide 14) Feedback for people who draw on support and carers, is an important source of performance information. Complaints have reduced, with only 8 complaints in Q3, of which only 1 was upheld. Complaint activity is roughly half that seen in 2018/19/20. Commendations do fluctuate but tend to be in the mid-40s during a quarter.

4.14 (Slide 15) Another source of feedback from people is gathered during assessments and reviews, where we ask if the support helps people to live their lives. This is a locally developed metric, as part of our strengths-based work, and few councils have comparator data as most do not collect this systematically. It is positive to note that 86.1% of people agree or strongly agree that the support makes a positive difference.

4.15 (Slide 16) The quality of the external provider market in Leicester is monitored, as a majority of people receiving support are supported by independent sector organisations. There are concerns that quality is not as high as it should be, with too many inadequate and poor rated services. Regional work and internal work has been commissioned to support improvements in the quality of external services.

Financial Implications

5.1.1 ASC is currently (as at period 9) forecasting a spend of £131m on net package costs (£161m gross with £30m of package related income) as per the budget. However, the delay in completing reviews means there is some uncertainty regarding the impact of potential weekly package cost increases arising from those reviews. The forecast of course does not include any 'catch up' costs from completing these reviews.

5.1.2 In-year increases in weekly package costs have been one of the main drivers of ASC cost increases in recent years and working practices have been adjusted to address this issue. However, until such time as the review numbers are back to their normal levels it will be difficult to assess from a financial viewpoint the impact of these strength based practice changes.

Martin Judson, Head of Finance

5.2 Legal

5.2.1 There are no direct legal implications arising from the contents of this report.

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6. Appendices

Appendix A: Performance Data Pack Q3 2022/23

7. Background Papers

None

8. Is this a Key Decision
No