

# Adult Social Care Scrutiny Commission

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## ASC Integrated Performance Report Quarter 4 (provisional year-end) - 2018/19

Date: 16<sup>th</sup> July 2019

Lead Director: Steven Forbes

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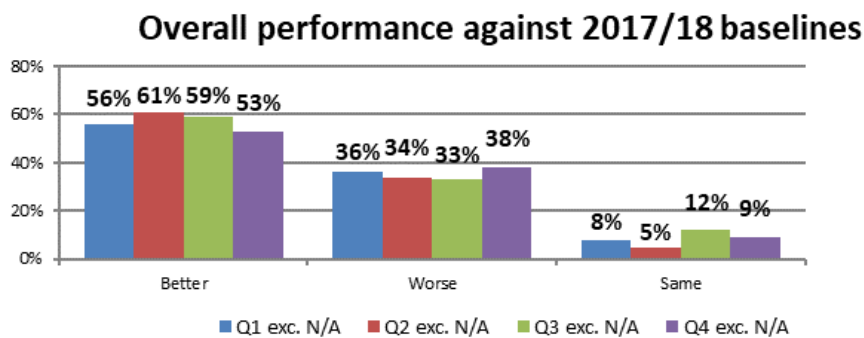


### Useful information

- Ward(s) affected: All
- Report author: Adam Archer
- Author contact details: 454 4133
- Report version: 1

# 1. Summary

- 1.1 This report is presented in the format used throughout 2018/19. This provides continuity in reporting and allows for a comparable assessment of performance across the year. However, we are always keen to improve our reports and would welcome any comments on the content and format of this report to inform future developments (see recommendation 2.2 below).
- 1.2 This report brings together information on various dimensions of adult social care (ASC) performance for the final quarter of 2018/19 and can be considered as a provisional year-end report. The intention of this approach to reporting is to enable our performance to be seen ‘in the round’, providing a holistic view of our business. Our model draws on best practice, for example, incorporating features of a Balanced Scorecard.
- 1.2 The report contains information on our *inputs* (e.g. Finance and Workforce), the efficiency and effectiveness of our *business processes*, the volume and quality of our *outputs*, and not least, the *outcomes* we deliver for our service users and the wider community of Leicester.
- 1.3 The overall position at year-end remains broadly positive, although the rate of improvement has slowed over the course of the year. This is not unexpected given the impressive rate of improvement over recent years at the same time as we have seen resources reduced. For those measures where data is available, 53% are showing improvement from the baseline position (2017/18 outturn); 38% of measures are not performing as well as the baseline position; and 9% of measures are unchanged. It is not possible to make a judgement on 14% of measures as they are either new measures without a baseline position or (in most cases) they provide management information rather than a reflection of departmental performance. Overall performance for the year is subject to change dependent on confirmation of workforce performance (see para 3.4) and the outcome of validation processes for our national survey results.



## 2. Recommendation

The Scrutiny Commission is requested to:

- 2.1 Note the areas of positive achievement and areas for improvement as highlighted in this report.
- 2.2 Comment on the content and format of this report to inform the development of reporting for 2019/20 to meet the Commission’s requirements.

### 3. Report

#### 3.1 Delivering ASC Strategic Priorities for 2018/19

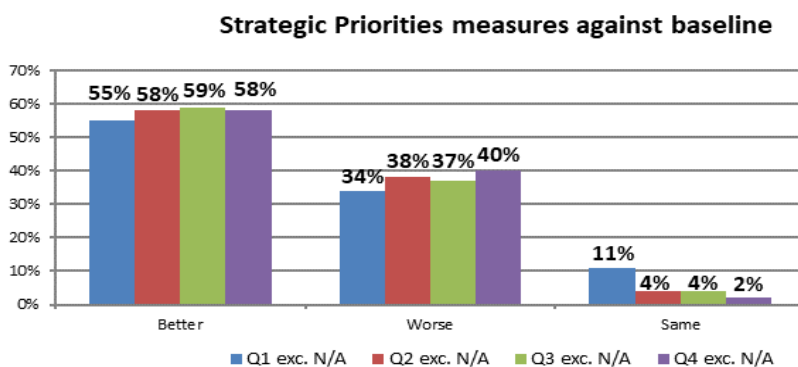
3.1.1 Our strategic Priorities for 2018/19 are unchanged from 2017/18, they are:

SP1.	We will work with partners to protect adults who need care and support from harm and abuse.
SP2.	We will embed a strength-based, preventative model of support, to promote wellbeing, self-care and independence.
SP3.	We will improve the opportunities for those of working age to live independently in a home of their own and continue to reduce our reliance on the use of residential care.
SP4.	We will improve our offer to older people, supporting more of them to remain at home and to continue to reduce our reliance on the use of residential care.
SP5.	We will continue the work with children’s social care, education (SEN) and health partners to improve our support for young people and their families in transition into adulthood.
SP6.	We will improve the customer experience by increasing our understanding of the impact and benefit of what we do. We will use this knowledge to innovate and improve the way we work and commission services.

3.1.2 As in previous years, we have set out what we need to do to deliver on these priorities in our Annual Operating Plan and made some revisions to the KPIs designed to measure whether we have been effective in doing so.

#### 3.1.3 Summary:

Overall performance against those KPIs aligned to the department’s strategic priorities suggest that progress on our priorities continues to be made, and that having a small number of clear and visible priorities has been effective. Overall, 26 of our measures have shown improvement from our 2017/18 baseline, with 18 showing deterioration. This is a slight deterioration on position to that reported at the end of Q3, and slightly poorer than our 2017/18 out-turn. Performance is strong across priorities four, five and six, mixed for priority one, and weak, but improving for priorities two and three.



#### 3.1.4 Achievements:

All indicators relating to our priority of improving our offer to older people are showing a positive direction of travel. There is also strong performance at the other end of the age spectrum relating to our priority around improving the transition from childrens’ services to adulthood. User satisfaction levels, particularly those derived from our local survey (at assessment) and questions asked in the supported self-assessment (at re-assessment) remain positive. Critically here, over 78% of service users said that their quality of life had improved very much or completely as a result of our support and services. This is backed up by the fourth consecutive year of improvement in our ASCOF ‘quality of life’ score (provisional data for 2018/19).

### 3.1.5 Concerns:

For the first time since reporting on our strategic priorities we have seen the overall performance against SP2 drop. The changes over the year are relatively small, but we should monitor performance over the coming year. Performance against SP3 continues to show some improvement but the overall balance remains negative. The provisional results from the statutory user survey have had a negative impact on performance against SP6, however overall performance against this priority remains positive.

## 3.2 Keeping People Safe

3.2.1 The Care Act 2014 sets out our statutory duties and responsibilities for safeguarding, including the requirement to undertake Enquiries under section 42 of the Act in order to safeguard people.

3.2.2 During Q4 2018/19, 125 individuals were involved in a safeguarding enquiry started in that period. Of these, 53 were aged 18 to 64, with 72 aged 65 years or over. 76 of those involved were female and 49 were male. 95 were 'White', 19 'Asian' and 4 were 'Black.'

3.2.3 66 individuals who were involved in an enquiry have a recorded Primary Support Reason. 48.5% of these individuals (32 people out of 66) have 'physical support' as their Primary Support Reason, with 'learning disabilities' and 'mental health support' the next most common.

3.2.4 Using figures for all completed enquiries in Quarter 4, the most commonly recorded category of abuse for concluded enquiries was "neglect" (63), followed by "physical abuse" (51), and then "emotional abuse" (26). The most common location of risk was in care homes, with a total of 64, of these, 52 were residential homes and 12 in nursing homes. The next most common abuse location recorded was the person's own home, 38 instances.

3.2.5 Quarter 4 performance:

Measure	Q4 2018/19
Percentage of cases where action to make safe took place within 24 hours following the decision that the threshold has been met	63.3% of enquiries begun within 24 hours of threshold decision being made
Number of alerts progressing to a Safeguarding enquiry	600 Alerts received in the quarter
Completion of safeguarding enquiries within 28 days target	Threshold met in 204 cases, of which 117 progressed to an enquiry
Percentage of people who had their safeguarding outcomes partially or fully met.	50.6% of safeguarding enquiries were completed within 28 days.

## 3.3 Managing our Resources: Budget

3.3.1 The department spent £104m as per the budget after transferring an in year under-spend of £5.8m to the ear-marked reserve set up last year for future demographic cost pressures. Whilst the level of under-spend compared to the budget is significant, it is essentially one off in nature and should not detract from the very significant underlying year on year increase in actual care package gross costs of £10m, a combination of increasing need and inflationary fee increases. The demographic cost pressures reserve will be used to offset the costs of adults and children's social care in future budgets.

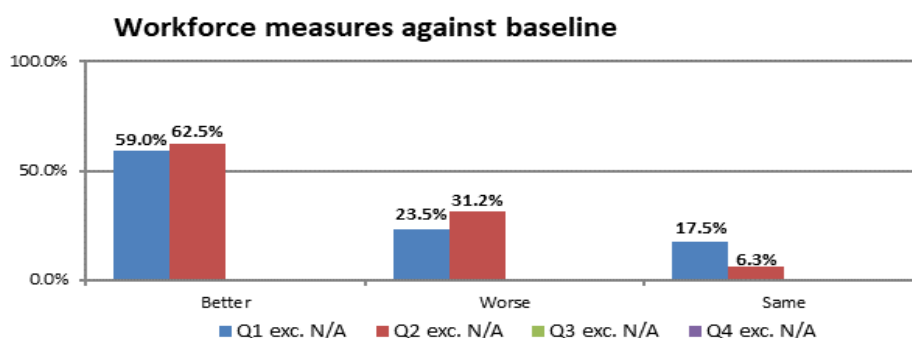
### 3.3.2 The £5.8m consists of the following items:

- i) £2.8m net package cost under-spend (3% of the total £89.4m budgeted cost).
- ii) £0.8m of savings targets achieved ahead of schedule
- iii) £1.3m of lower spend in preventative services (reablement, enablement, crisis response teams, equipment service) either through difficulties in recruitment or lower than expected demand.
- iv) £0.3m net in-year staffing vacancies in care management, contracting and commissioning and administration.
- v) £0.6m of various items with the main ones being no increase to the service user bad debt provision (£0.26m) and £0.14m savings in pension costs (we agreed to make payments to providers who bought our care homes. Our costs are falling over time).

## 3.4 Managing Our Resources: Our Workforce

### 3.4.1 Summary:

Workforce data for Q3 and Q4 was not available by the deadline for submission of this report due to a combination of staffing and systems issues.



## 3.5 National Comparators - ASCOF

3.5.1 The national performance framework for ASC focusses on user and carer outcomes (sometimes using proxy measures). Submission of data for the ASCOF is mandatory and allows for both benchmarking and local trend analysis. ASCOF complements the national NHS and Public Health outcome frameworks. The following analysis includes ASCOF measures derived from the user survey as full results were not previously available. Details of our ASCOF performance including 2017/18 national benchmarking can be seen in Appendix 2 of this report.

### 3.5.2 Summary:

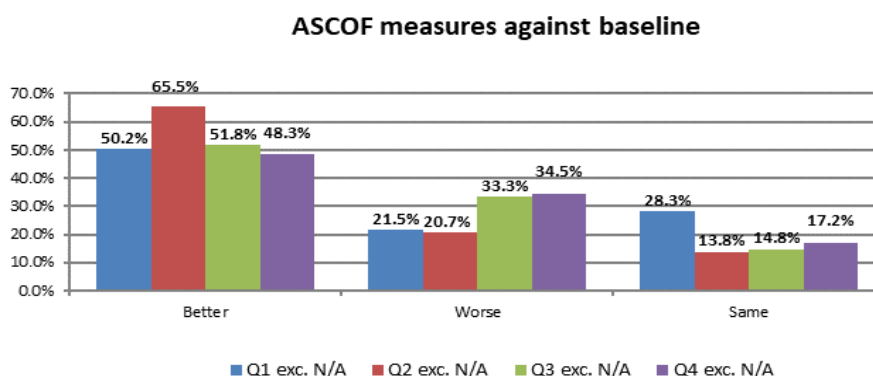
In this report we are able to include provisional ASCOF scores from the 2018/19 statutory carers survey (Survey of Carers in England) and user survey (Adult Social care Survey). These scores are calculated on the basis of our data submission to NHS digital and are subject to change.

It should also be noted that we had a very poor response rate to this year's carer's survey and as such there is a high margin of error. Notwithstanding the issue of reliability, the data suggests a downturn from the very positive results from the 2016/17 survey. Four of the five ASCOF scores are likely to be lower than 2016/17. Of these two are lower than the scores from 2014/15 and two higher.

Similarly, the provisional results from the 2018/19 national ASC user survey are less positive than the excellent results from the previous year's survey. Of the eight ASCOF measures derived from this survey four showed improvement and four showed a decline. Although, six of the eight measures sustained improvement from the 2016/17 survey.

This year, we continue to have some data quality issues outside of our control: the proportion of older people provided with reablement following discharge from hospital (2Bii) is still calculated using 2015 live discharge data following the national decision that current NHS (Hospital Episodes Statistics) data cannot be shared with local authorities; and the measures based on the new Mental Health dataset (1F and 1H) continue to raise concerns over the quality of data reported by our secondary mental health providers.

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### 3.5.3 Achievements:

From the data for Q4 of 2018/19 there are some areas of strong performance. Performance against measures relating to self-directed support (1Cia, 1Cib, 1Ciia and 1Ciib) remains strong. The outcomes of short-term services, reablement and enablement (2D) continue to improve, have exceeded the 2017/18 benchmark and are now over 10 percentage points higher than at the end of 2016/17. Linked to this, the proportion of older people at home 91 days after hospital discharge (2Bi) has improved for the fourth consecutive quarter. The three measures for Delayed Transfers of Care (2Ci, 2Cii and 2Ciii) are all showing further improvement. The number of admissions to residential and nursing care for those aged 65 and over reduced by 12.4% from 2017/18.

Provisional results from the 2018/19 user survey show some areas of continued improvement, not least the overall quality of life score, calculated by aggregating responses to 9 questions in the user survey, which climbed from 18.7 to 18.8, our highest score since the introduction of the survey (the national range in 2017/18 was 17.3 to 20.1 with the England average being 19.1). Similarly, the adjusted score for this measure, which is designed to show the impact of ASC services on the quality of life of service users, also improved. We also see an increase in the percentage of service users who have as much social contact as they would like and those who feel safe.

### 3.5.4 Concerns:

The overall downturn in performance in Q4 can be attributed to the provisional results from both the carers and users surveys not matching the high benchmark set by the last round of surveys. Of the 13 ASCOF measures derived from both surveys, eight are likely to show a drop in performance.

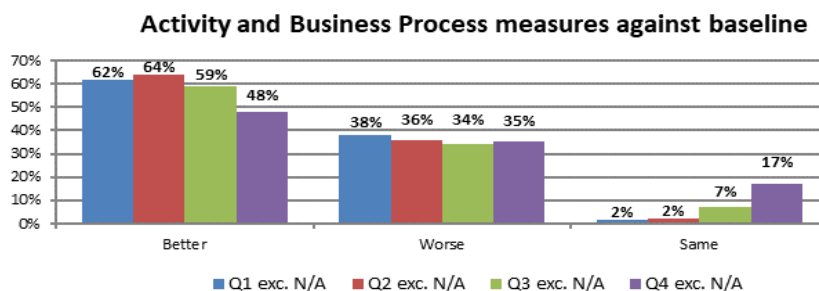
Notwithstanding the data issues referred to in the summary, only two non-survey derived measures showed a dip in performance over 2018/19: Despite rigorous controls being in place, permanent admissions to residential care for those aged 18-64 (2Ai) were eight higher than last year; and the percentage of service users receiving direct payments has dipped slightly.

### 3.6 Activity and Business Processes

3.6.1 We have identified almost 60 indicators to help us understand the level of activity undertaken in the department and the effectiveness and efficiency of the business processes we use to manage that activity. The use of these indicators will also support the overall approach to managing workflow and workloads within services and teams.

#### 3.6.2 Summary:

Overall performance remains reasonably positive, with 48% of measures where a judgement can be made showing improvement from our 2017/18 baseline. However, this rate of improvement is lower than throughout the rest of the year. Having said that, the number of measures where performance is below the baseline has remained relatively stable. In essence, we are looking at a picture of improving but relatively stable performance, typified by 17% of measures showing no significant change from the baseline.



#### 3.6.3 Achievements:

We can continue to be confident that we are managing demand through the provision of information, advice and guidance (including signposting to universal services) and one-off or short-term interventions. While the total number of contacts at the 'front door' continued to increase throughout 2018/19 (an overall increase of 14.4% since 2015/16), fewer new contacts are progressing to a new case and fewer assessments are being undertaken with a reduction in those with assessed as having eligible needs. Fewer new contacts are moving into long-term support (726 compared to 988 in 2016/17) with more people having their needs met through provision of information and advice or through provision of low-level support.

#### 3.6.4 Concerns:

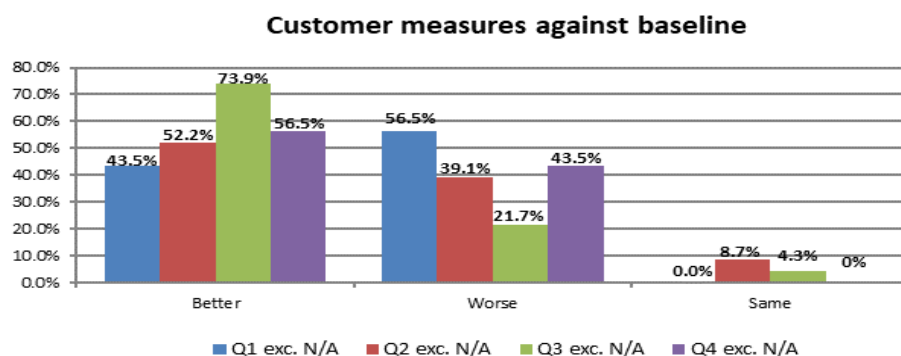
While the year-end position as reported above was very positive, some of the measures referred to show a slight dip in performance in the final quarter of the year (e.g. those assessed as having eligible needs, number of cases allocated to teams and those entering long-term support). Similarly, some of our process measures showed a similar dip (e.g. overdue reviews and cases open for more than 100/250 days). The timeliness of responses to safeguarding cases needs to be monitored as two of the three measures performed below last year's baseline, and the one which did improve did so on the basis of strong Q1 performance, declining each quarter thereafter.

### 3.7 Customer Service

3.7.1 We have identified 25 indicators to help us understand our customers' experience of dealing with us and the extent to which they are satisfied with our support and services. The following analysis includes ASCOF measures derived from the user survey based on the provisional data submitted to NHS digital in May 2019.

#### 3.7.2 Summary:

Performance on 13 of our customer measures is showing improvement from our 2017/18 baseline, with 10 showing a decline. This is an improvement from Q1, when for the first time in over two years the number of measures showing a decline in performance outnumbered those showing improvement in any of our baskets of indicators. However, the level of improvement seen in Q2 and Q3 has not been sustained largely due to some disappointing (provisional) results from the annual survey of service users.



#### 3.7.3 Achievements:

The provisional results from the 2018/19 national ASC user survey are less positive than the excellent results from the previous year's survey. There were however areas of continued improvement, not least the overall 'quality of life score' which climbed from 18.7 to 18.8, our highest score since the introduction of the survey. Similarly, the adjusted score for this measure, which is designed to show the impact of ASC services on the quality of life of services, also improved. We also see an increase in the percentage of service users who have as much social contact as they would like and who feel safe.

The local survey conducted following all reviews enables us to measure whether services have met the needs identified in the initial assessment and whether the service user's quality of life has improved as a result of their care package. Results in the fourth quarter of 2018/19 continue to be higher than at the end of 2016/17 and 2017/18. Results for all responses to our survey of people having received an assessment have shown significant improvement from the beginning of the year. The results from Q1 were themselves a modest improvement from Q4 in 2017/18 when results unexpectedly plummeted. Six out of eight of these measures have now exceeded our 2017/18 full-year baseline.

#### 3.7.4 Concerns:

Results for six measures from the annual survey of service users (including four ASCOF measures) were poorer than from the previous year's survey. Having said that, results for all but one of these measures are higher than in 2016/17. In Q4 we have also seen an unexpected drop in the percentage of service users who strongly agreed their experience of the process matched what they were told to expect by the worker and those who strongly agreed they were treated with respect and dignity by their worker (from our survey following assessment). This bucks the improvement trend for these measures earlier in the year.



## **4. Financial, legal and other implications**

### 4.1 Financial implications

The financial implications of this report are covered specifically in section 3.3 of the report.

Martin Judson, Head of Finance, Ext 37 4101

### 4.2 Legal implications

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

Pretty Patel, Head of Law, Social Care & Safeguarding, Tel 0116 454 1457.

### 4.3 Climate Change and Carbon Reduction implications

There are no direct climate change implications associated with this report.

Aidan Davis, Sustainability Officer, Ext: 37 2284

### 4.4 Equalities Implications

From an equalities perspective, the six strategic priorities are in keeping with our Public Sector Equality Duty, the second aim of which is to promote equality of opportunity, and the information related to the outcomes delivered for service users and the wider community. The outcomes demonstrate that ASC does enhance individual quality of life that addresses health and socio-economic inequalities, experienced by many adults across the city. In terms of the PSED's first aim, elimination of discrimination, it would be useful for outcomes to be considered by protected characteristics as well, given the diversity of the city and how this translates into equalities (as set out in the adults JSNA).

Sukhi Biring, Equalities Officer (Ext. 374175)

### 4.5 Other Implications: None

## **5. Background information and other papers: None**

## **6. Summary of appendices:**

Appendix 1: 2018/19 Key Data

Appendix 2: 2018/19 ASCOF

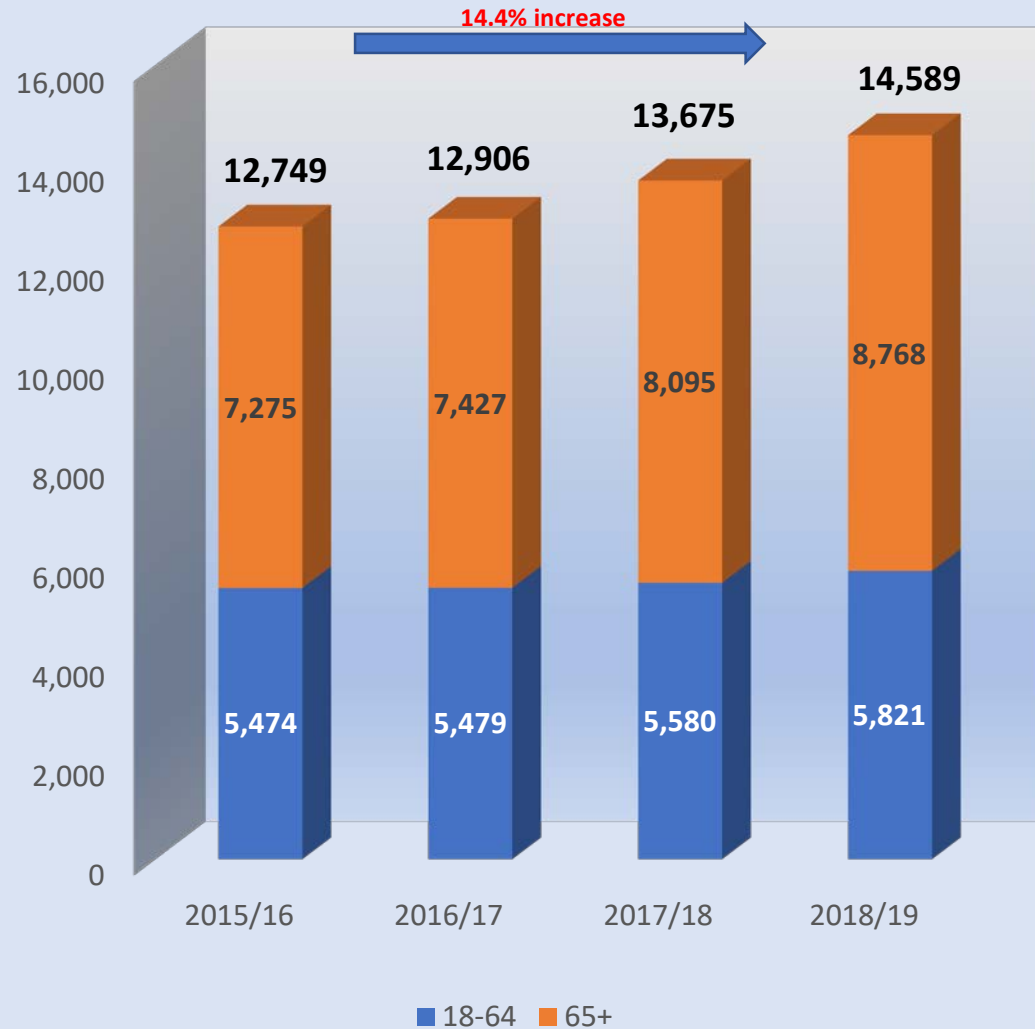
# Adult Social Care

## Key Data

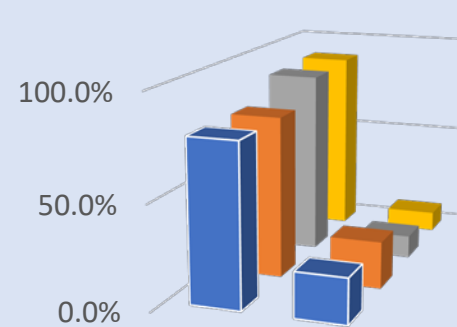
2018/19

# Understanding demand

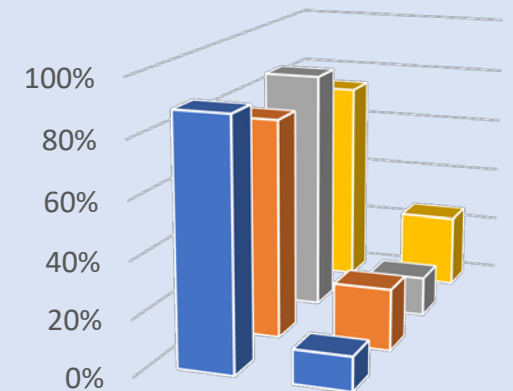
## Requests for support



## ... for those leading to formal assessments



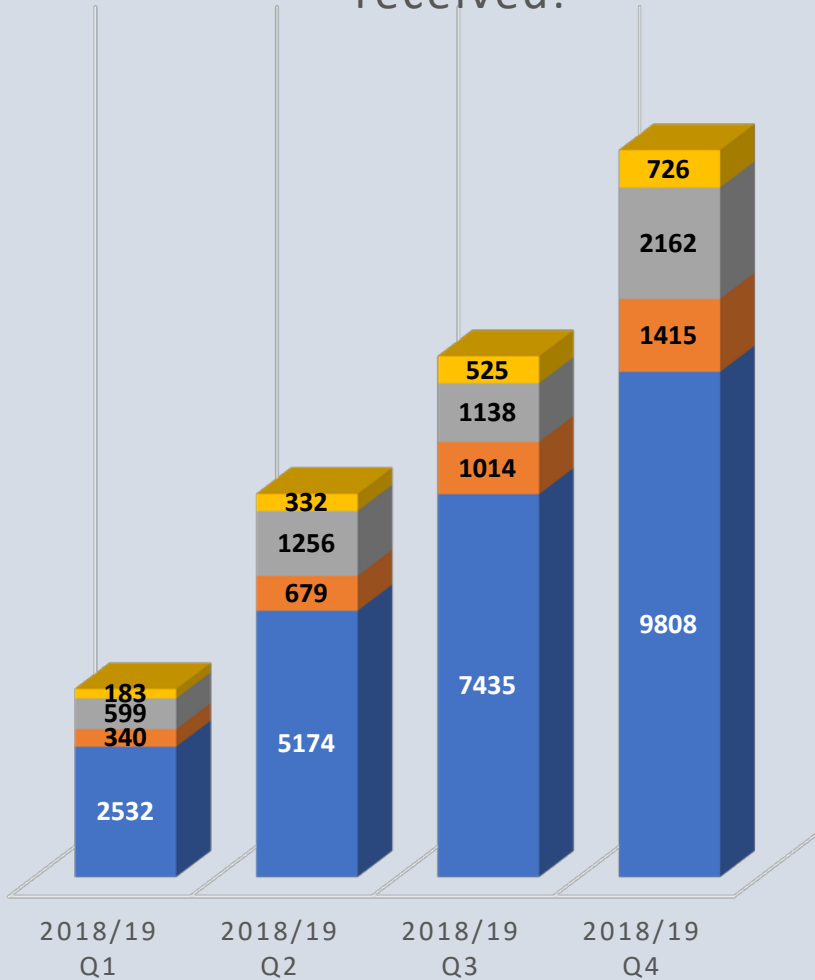
	Completed within 28 days	Not completed within 28 days
2015/16	78.2%	21.8%
2016/17	78.3%	22.7%
2017/18	89.1%	10.9%
2018/19	90.4%	9.6%



	Eligible for support	Not eligible for support
2015/16	88%	12%
2016/17	78%	22%
2017/18	86%	14%
2018/19	74%	26%

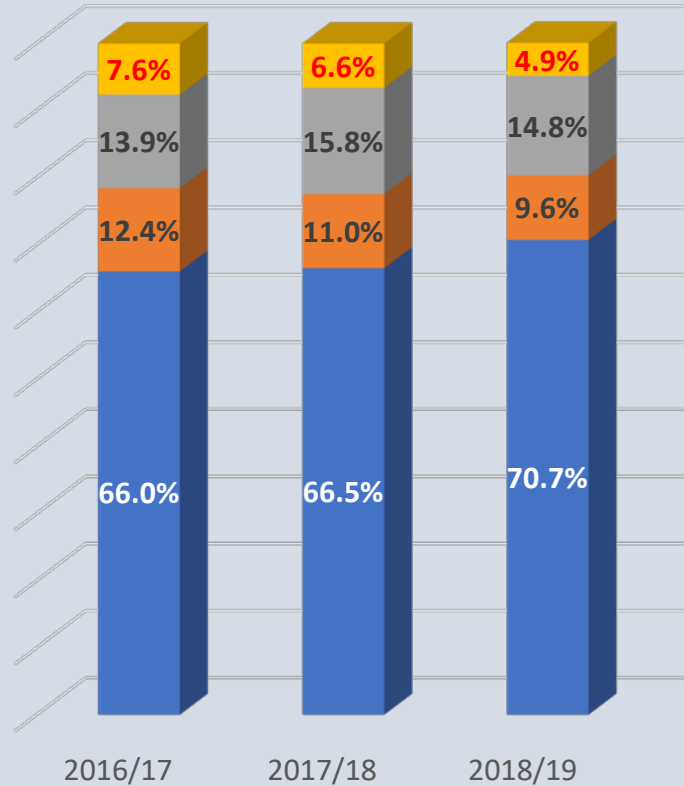
# Meeting needs appropriately

During 2018/19, following a request for support, clients received:



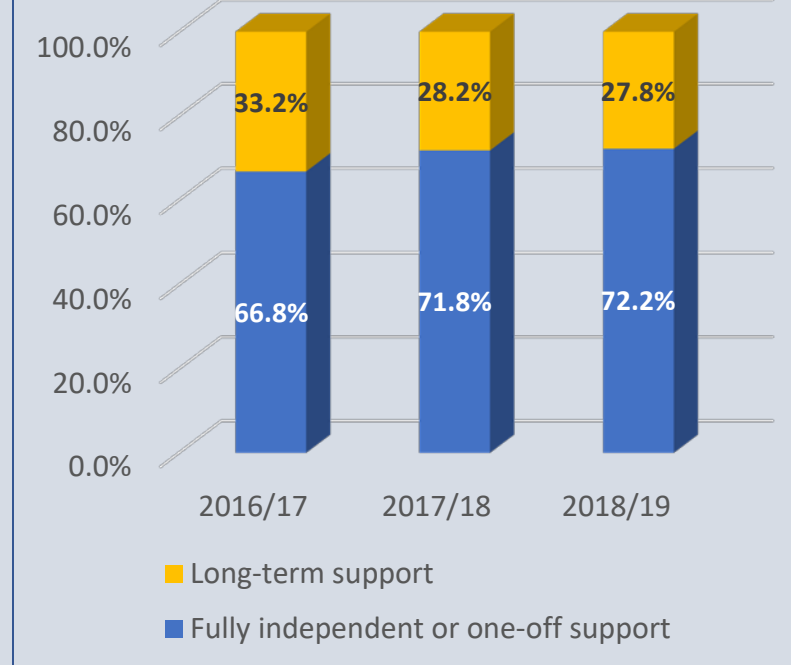
Compared to previous years

LTS – 35.5% decrease



Following short-term support to maximise independence for new clients ...

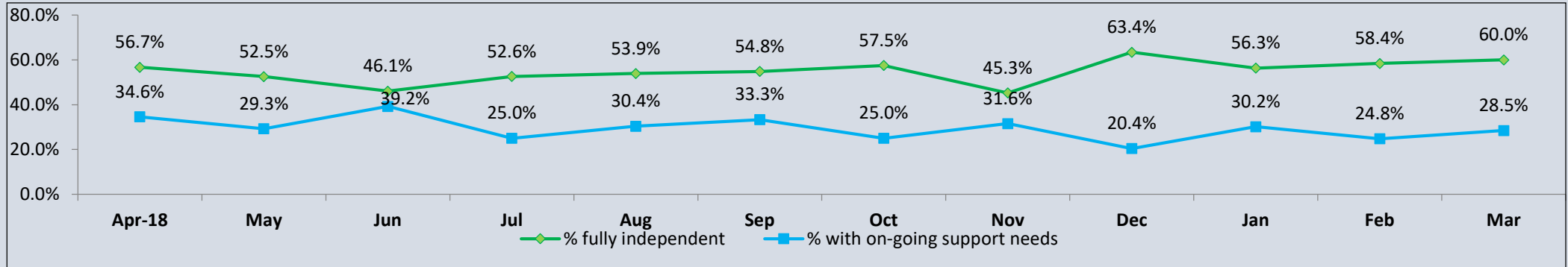
LTS – 16.3% decrease



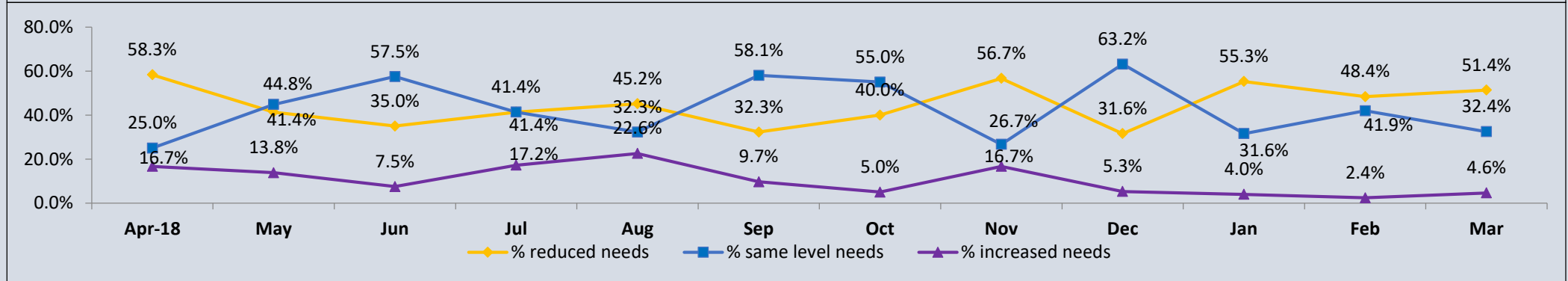
- Long-term support
- Other short-term support
- Short-term services to maximise independence
- No services / information, Advice and Guidance

# Preventative services

Outcomes of preventative services (April '18 – March '19)

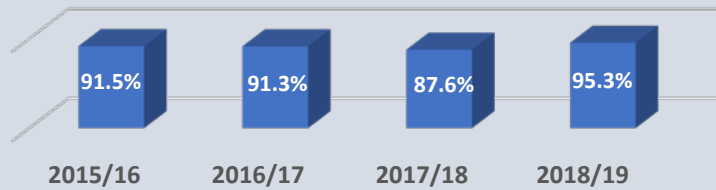


Outcomes for those with on-going support needs (April '18 – March '19)



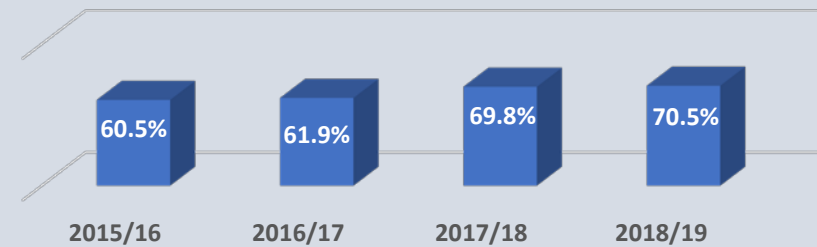
Adult Social Care Outcomes Framework measures:

2B(i) Outcomes for older people receiving reablement following a hospital discharge



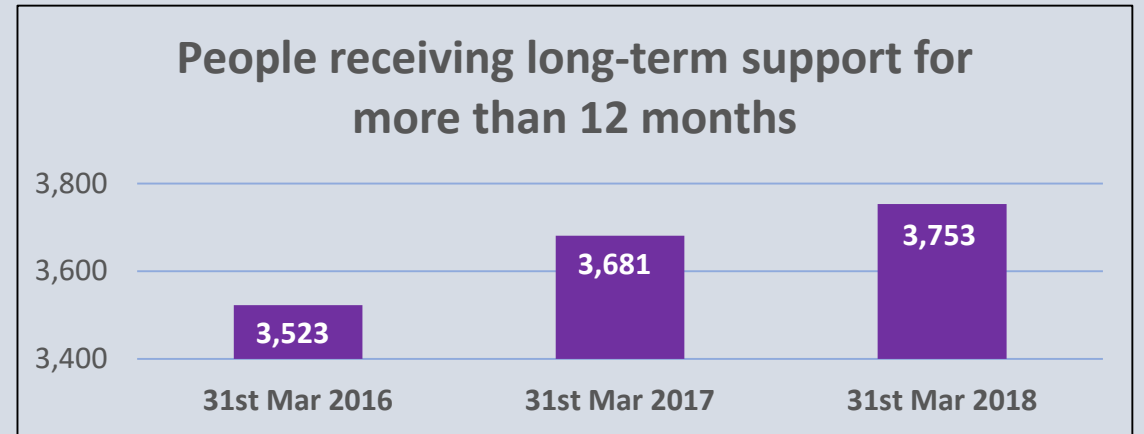
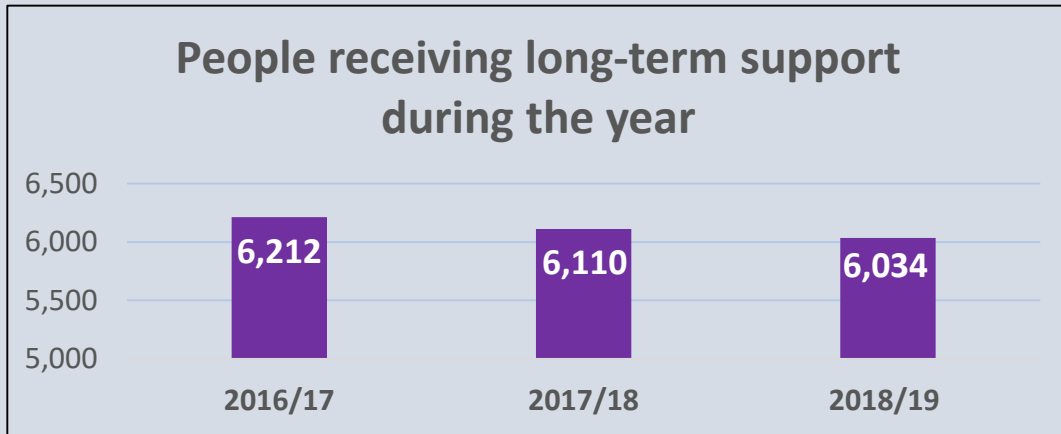
■ Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services.

2D: The outcomes of short-term services

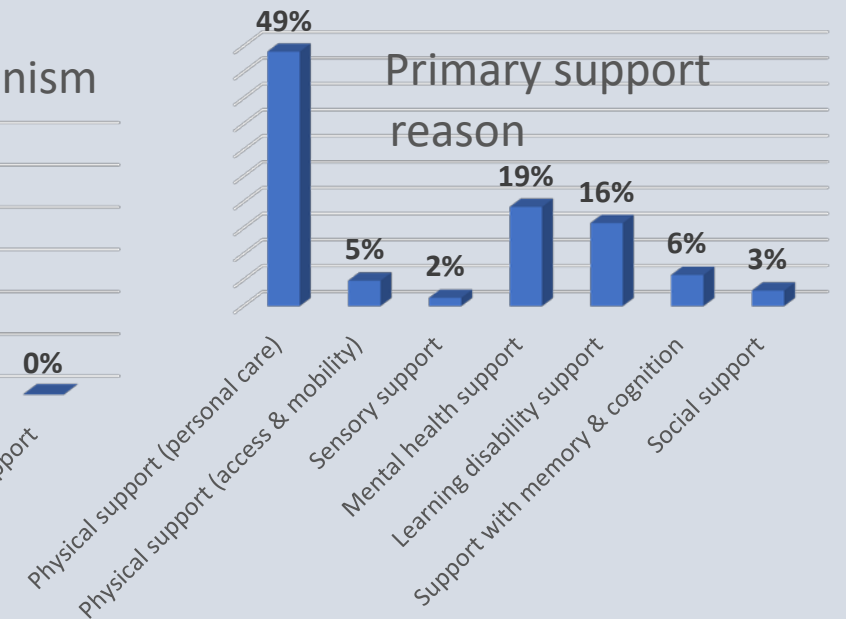
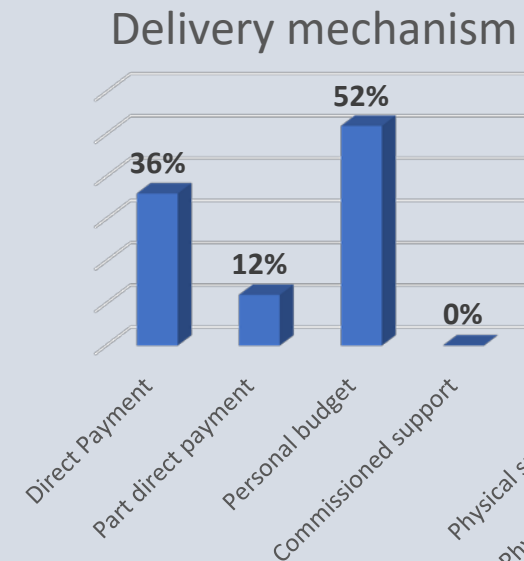
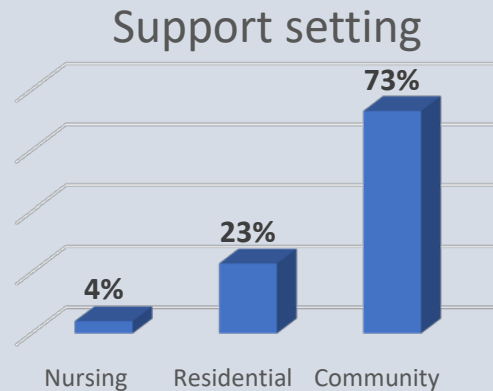
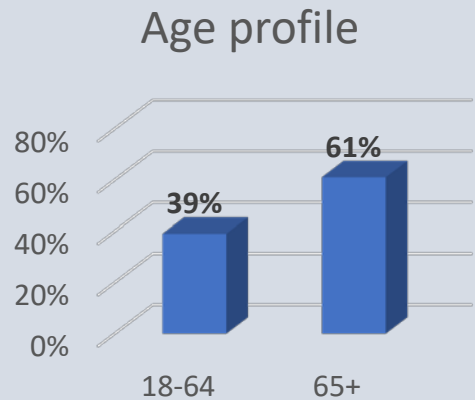


■ Percentage of those that received a short term service during the year where the sequel was either no ongoing support or support of a lower level

# Long-term support

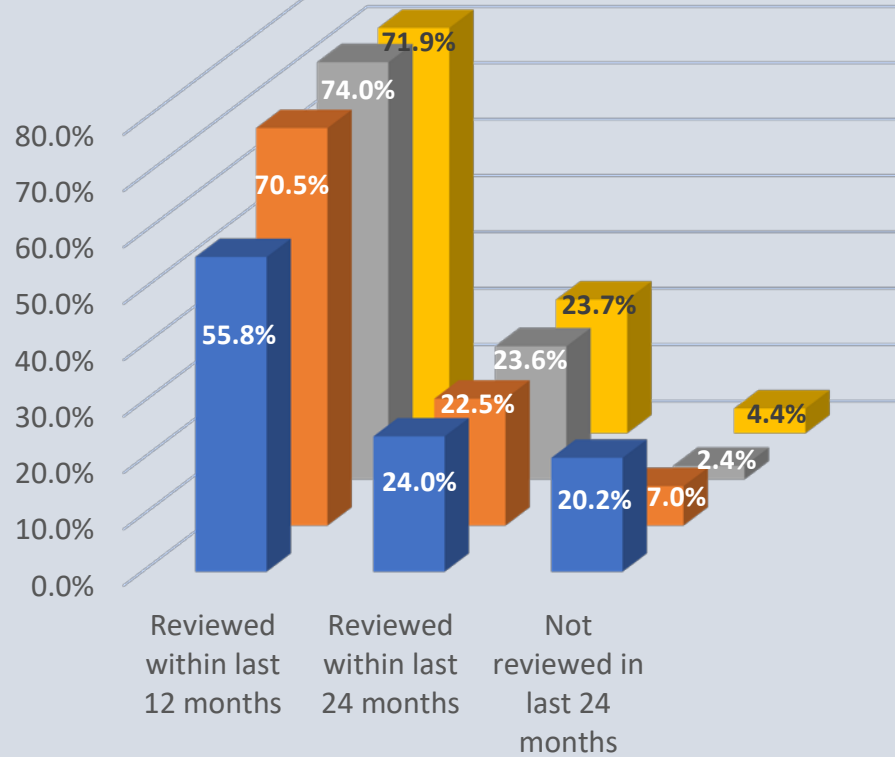


For 2018/19:



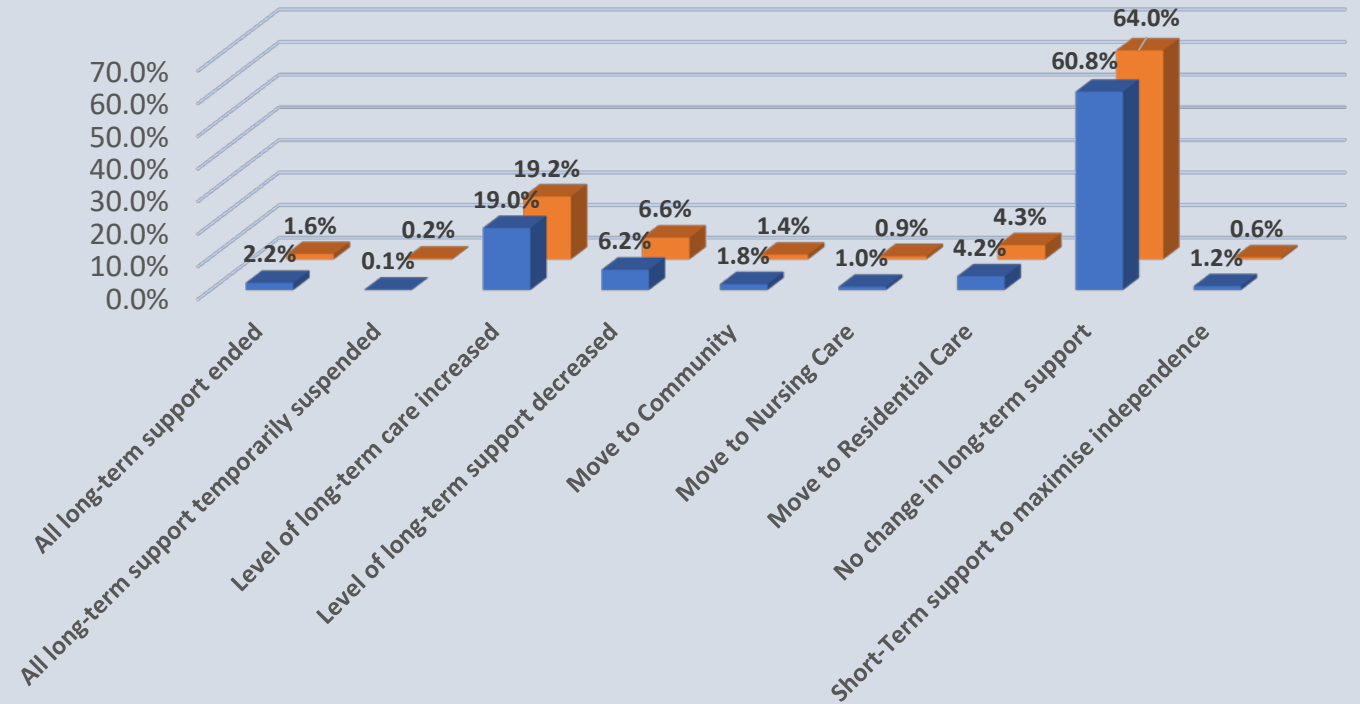
# Reviewing needs

## Timeliness of reviews



■ 2015/16 ■ 2016/17 ■ 2017/18 ■ 2018/19

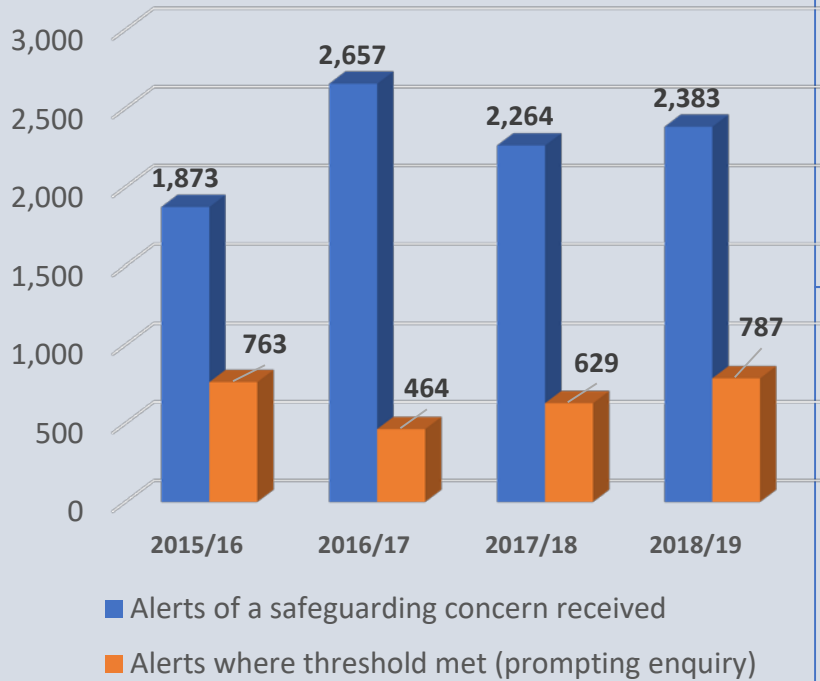
## Outcome of reviews



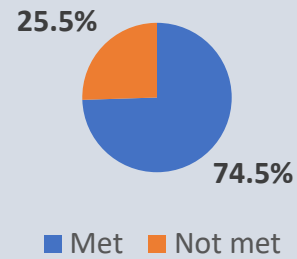
■ 2017/18 ■ 2018/19

# Safeguarding

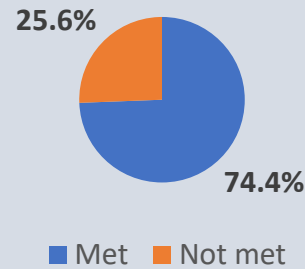
## Alerts and Enquiries



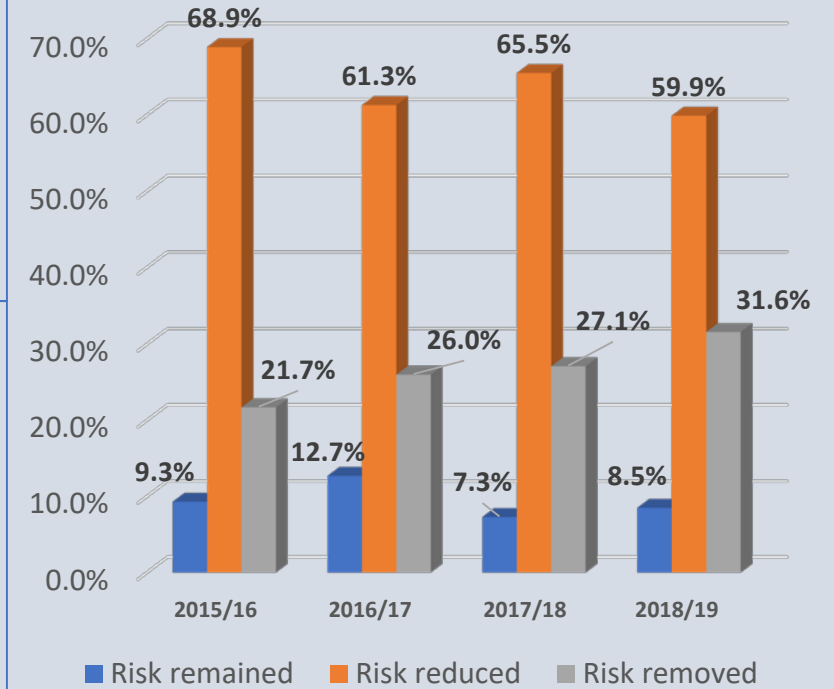
## Threshold decisions made within 7 days of receipt of alert (2018/19)



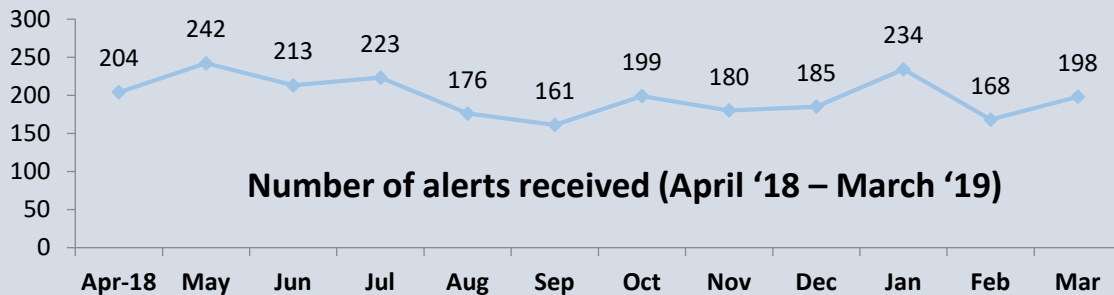
## Action to make safe taken within 24 hours of threshold decision (2018/19)



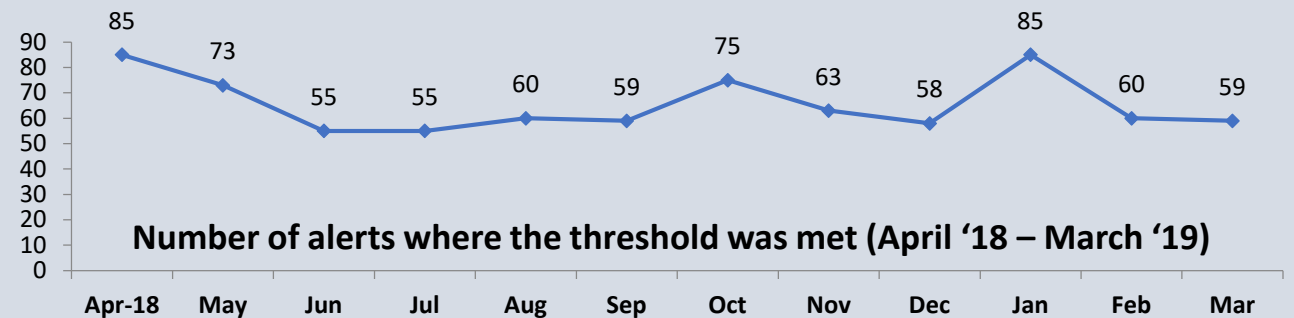
## Outcomes



## Number of alerts received (April '18 – March '19)



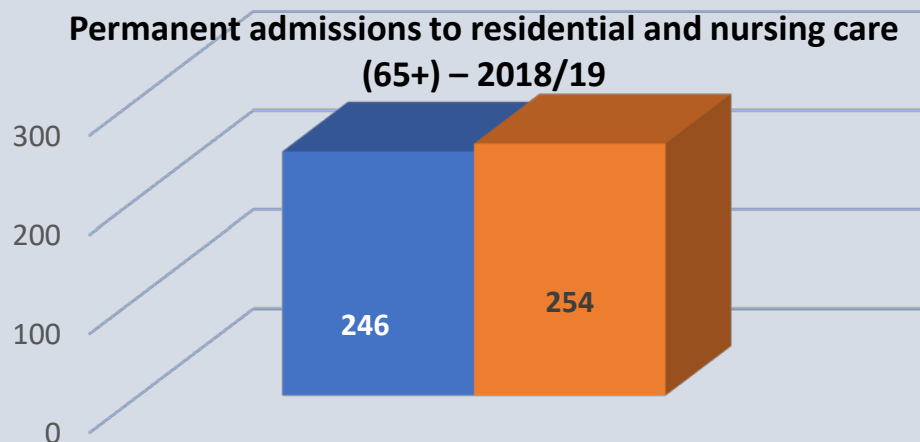
## Number of alerts where the threshold was met (April '18 – March '19)





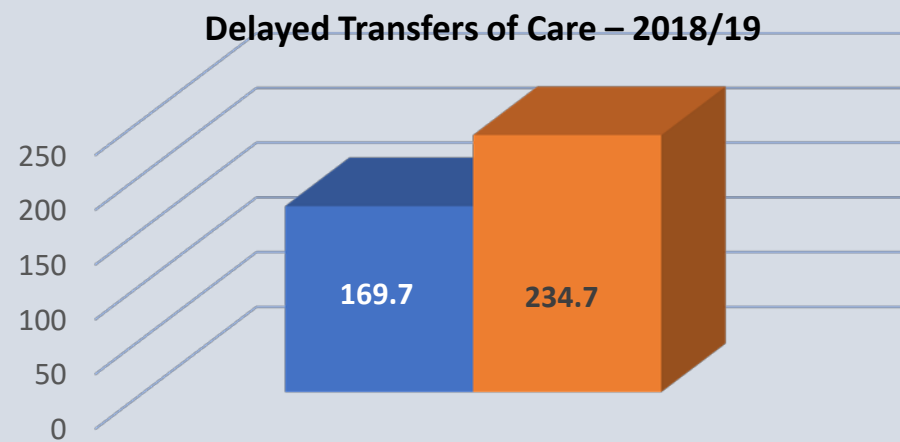
# Better Care Fund (Health and Social Care integration)

Better Care Fund national metrics - see also '91 days' measure on slide 4



Permanent admissions to residential and nursing care (age 65+) **LOW IS GOOD**

■ Actual ■ Target



Delayed transfers of care from hospital (rate per 100,000 pop) **LOW IS GOOD**

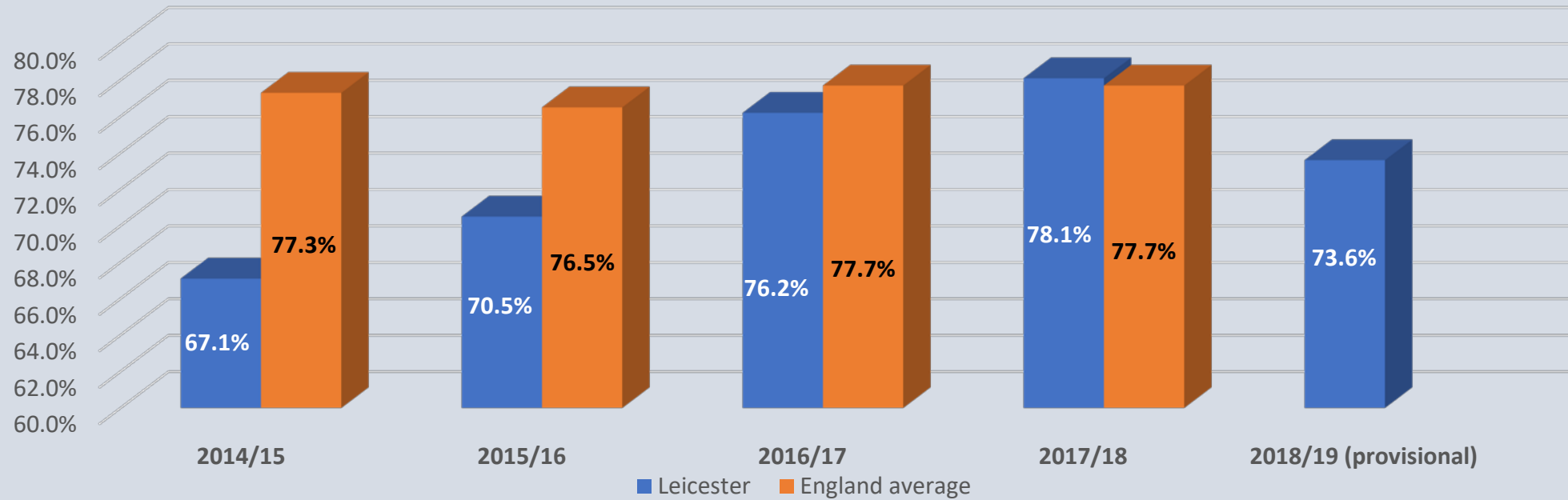
■ Actual ■ Target

Permanent admissions to residential and nursing care (65+)				
2014/5	2015/16	2016/17	2017/18	<b>2018/19</b>
287	258	282	281	<b>246</b>

Delayed Transfers of Care - ASCOF definition				
2014/5	2015/16	2016/17	2017/18	<b>2018/19</b>
13.0	6.0	8.9	8.8	<b>5.5</b>

# Choice and control

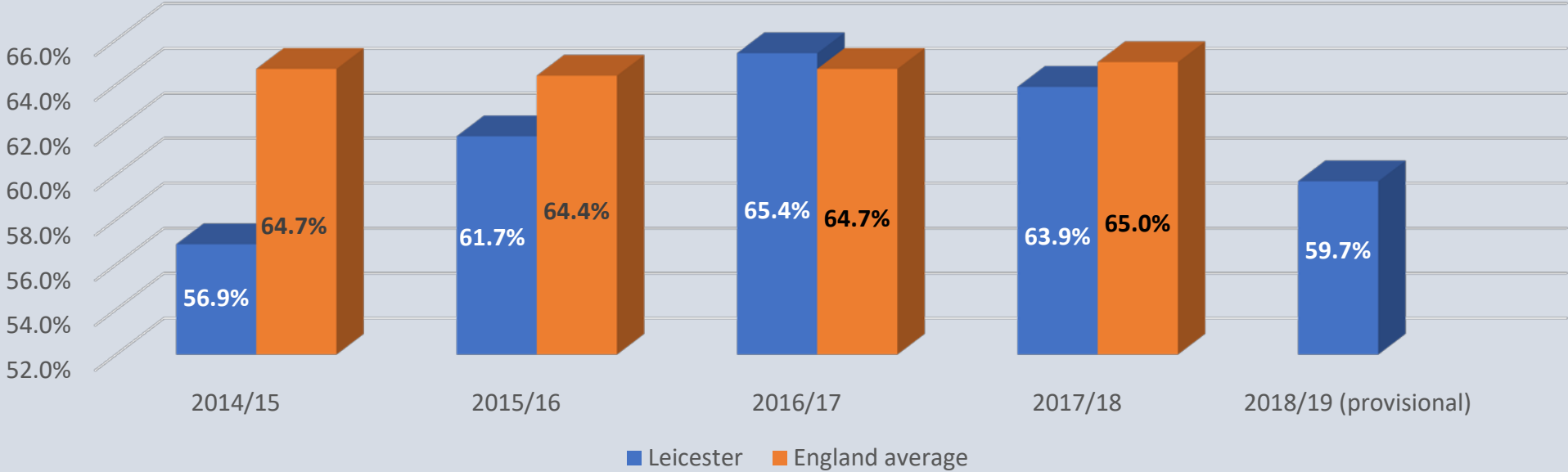
Proportion of people who use services who have control over their daily life  
(ASCOF measure – 1B)



England ranking				
146/150	138/150	100/150	72/150	TBC

# Customer satisfaction

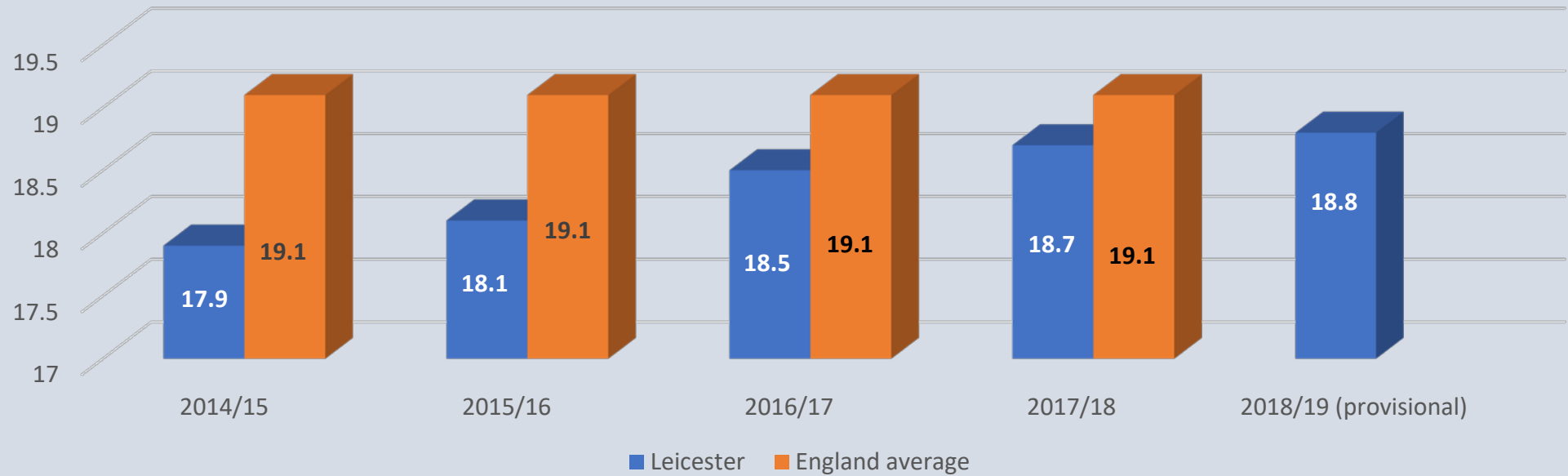
Overall satisfaction of people who use services with their care and support  
(ASCOF measure – 3A)



England ranking				
139/150	104/150	64/150	80/150	TBC

# Quality of Life













Social Care related quality of life score  
(ASCOF measure – 1A)


























England ranking				
150/150	147/150	126/150	116/150	TBC

## Adult Social Care Performance: 2018/19

## Adult Social Care Outcome Framework









Indicator	2017/18 (baseline)	2017/18 Benchmarking			2018/19 Q1	2018/19 Q2	2018/19 Q3	2018/19 Q4	2018/19 Target	Rating	Comments
		England Average	England Ranking	England Rank DoT							
1A: Social care-related quality of life.	18.7	19.1	=116/150	 Up from = 126/150	N/A	N/A	N/A	18.8	18.9		<i>Provisional data</i>
1B: Proportion of people who use services who have control over their daily life.	78.1%	77.7%	= 72/150	 Up from 100/150	N/A	N/A	N/A	73.6%	80%		<i>Provisional data</i>
1Cia: Service Users aged 18 or over receiving self-directed support as at snapshot date.	100% (3,533/3,533)	89.7%	=1/152	 Up from = 26/152	100% (3,640/3,640)	100% (3,655/3,655)	100% (3,606/3,606)	100% (3,617/3,617)	100%		
1Cib: Carers receiving self-directed support in the year.	100%	83.4%	=1/152		100% (85/85)	100% (90/90)	100% (94/94)	100%	100%		
1Cia: Service Users aged 18 or over receiving direct payments as at snapshot date.	50.9% (1,800/3,533)	28.5%	5/152	 Up from 7/150	49.3% (1,796/3,640)	49.0% (1,791/3,655)	49.1% (1,769/1,769)	49.8% (1,800/3,617)	50%		
1Ciib: Carers receiving direct payments for support direct to carer.	100%	74.0%	=1/152		100% (85/85)	100% (90/90)	100% (94/94)	100%	100%		

Indicator	2017/18	2017/18 Benchmarking			2018/19 Q1	2018/19 Q2	2018/19 Q3	2018/19 Q4	2018/19 Target	Rating	Comments
		England Average	England Ranking	England Rank DoT							
1D: Carer reported quality of life.	2016/17 7.2	2016/17 7.7	2016/17 130/151	2016/17 	N/A	N/A	6.9	6.9	7.4		<i>Provisional data</i>
1E: Proportion of adults with a learning disability in paid employment.	4.5% (35/774)	6.0%	=81/151	 Up from 85/151	4.4% (33/750)	4.4% (35/775)	4.4% (35/785)	4.4% (35/793)	5%		
1F: Proportion of adults in contact with secondary mental health services in paid employment.	1.0%	7.0%	=146/150	N/A No data published in 2016/17	>1.0%	>1%	>1%	> 1%	TBC		Data only up to February (no rating against target) <b>DATA QUALITY ISSUES</b>
1G: Proportion of adults with a learning disability who live in their own home or with their family.	74.9% (580/774)	77.2	105/151	 Down from 97/152	72.9% (547/750)	73.3% (568/775)	73.9% (580/785)	77.0% (611/793)	75%		
1H: Proportion of adults in contact with secondary mental health services who live independently, with or without support.	30%	57%	137/152	N/A No data published in 2016/17	18%	3%	38%	35%	TBC		Data only up to February (no rating against target) <b>DATA QUALITY ISSUES</b>
1I: Proportion of people who use services and their carers who reported that they had as much social contact as they would like.	Users	43.0%	46.0%	110/150  Up from 148/150	N/A	N/A	N/A	46.0%	44%		<i>Provisional data</i>
		Carers	2016/17 31.0%	2016/17 35.5%	2016/17 105/151 	N/A	N/A	27.6%	27.6%	32%	
1J: Adjusted Social care-related quality of life – impact of Adult Social Care services.	0.404		0.405	84/150  Up from 133/150	N/A	N/A	N/A	0.419	0.407		<i>Provisional data</i>





Indicator	2017/18	2017/18 Benchmarking			2018/19 Q1	2018/19 Q2	2018/19 Q3	2018/19 Q4	2018/19 Target	Rating	Comments
		England Average	England Ranking	England Rank DoT							
2Ai: Adults aged 18-64 whose long-term support needs are met by admission to residential and nursing care homes, per 100,000 pop (Low is good)	14.5 33 admissions	14.0	= 96/152	 Up from =121/150	4.81 11 admissions	9.20 21 admissions	13.4 30 admissions	17.96 41 admissions	35 admissions		Cumulative measure
2Aii: Older people aged 65+ whose long-term support needs are met by admission to residential / nursing care per 100,000 pop (Low is good).	703.0 281 admissions	585.6	110/152	 Down from 99/152	139.63 58 admissions	281.68 117 admissions	462.24 192 admissions	592.25 246 admissions	254 admissions		Cumulative measure (BCF target)
2Bi: Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services.	Statutory	87.6% (162/185)	82.9 = 47/150	 Down from =22/152	N/A	N/A	N/A	95.3% (2014/214)	92%		Statutory measure counts Oct – Dec discharges (BCF Target)
	Local	85.4% (695/814)	N/A	N/A	N/A	86.0% (172/200)	86.5% (346/400)	87.6% (496/566)	90.4% (707/782)	90%	
2Bii: Proportion of older people (65 and over) offered reablement services following discharge from hospital.	Statutory	2.8% (185/6,496)	2.9% = 82/152	 Down from 64/152	N/A	N/A	N/A	3.3% (214/6,496)	3.1%		Statutory counts Oct – Dec discharges
	Local	3.2% (814 in reablement)	N/A	N/A	N/A	3.3% (200 in reablement)	3.3% (400 in reablement)	3.0% (566 in reablement)	3.1% (782 in reablement)	3.5%	
2Ci: Average number of delayed transfers of care (Total) per 100,000 pop. (Low is good)	8.7	12.3	= 62/152	 Down from 46/152	5.0	5.2	5.4	5.5	7.8		

Indicator	2017/18	2017/18 Benchmarking			2018/19 Q1	2018/19 Q2	2018/19 Q3	2018/19 Q4	2018/19 Target	Rating	Comments
		England Average	England Ranking	England Rank DoT							
2Cii: Average number of delayed transfers of care attributable to Social Care per 100,000 pop. (Low is good)	0.6	4.3	=16/152	N/A New measure for 2017/18	0.2	0.2	0.2	0.2	0.4		
2Ciii: Average number of delayed transfers of care jointly attributable to NHS and Social Care per 100,000 pop. (Low is good)	1.9	0.9	142/152	 Down from 47/152	0.9	0.7	0.6	0.6	0.8		
2D: The outcomes of short-term services (reablement) – sequel to service	69.8%	77.8	106/152	 Up from 127/152	68.3%	71.7%	72.4%	70.5%	71.5%		
3A: Overall satisfaction of people who use services with their care and support.	63.9%	65.0%	80/150	 Down from 64/150	N/A	N/A	N/A	59.7%	65.2%		<i>Provisional data</i>
3B: Overall satisfaction of carers with social services.	2016/17 43.5%	2016/17 39%	2016/17 24/151	2016/17 	N/A	N/A	38.2%	38.2%	43.5%		<i>Provisional data</i>
3C: Proportion of carers who report that they have been included or consulted in discussion about the person they care for.	2016/17 70.7%	2016/17 70.6%	2016/17 70/151	2016/17 	N/A	N/A	75.0%	75.0%	72%		<i>Provisional data</i>



Indicator		2017/18	2017/18 Benchmarking			2018/19 Q1	2018/19 Q2	2018/19 Q3	2018/19 Q4	2018/19 Target	Rating	Comments
			England Average	England Ranking	England Rank DoT							
3D: The proportion of service users and carers who find it easy to find information about services.	Users	70.5%	73.2%	= 109/150	 Up from 142/150	N/A	N/A	N/A	67.6%	72%		<i>Provisional data</i>
	Carers	2016/17 57.3%	2016/17 64.2%	2016/17 134/151	2016/17 	N/A	N/A	55.6%	55.6%	59.5%		<i>Provisional data</i>
4A: The proportion of service users who feel safe.		66.1%	69.9%	120/150	 Up from 125/150	N/A	N/A	N/A	67.3%	67%		<i>Provisional data</i>
4B: The proportion of people who use services who say that those services have made them feel safe and secure.		86.7%	86.3%	= 78/150	 Up from 139/150	N/A	N/A	N/A	84.5%	86.5%		<i>Provisional data</i>

Including historic survey-based measures (i.e. last known DoT):

Improvement from baseline - 14 	No significant change from baseline - 5 	Deterioration from baseline - 10 	N/A - No data on which to make a judgement on performance - 2 
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