
Adult Social Care Performance Report Quarter 2 – 2021/22

Adult Social Care Scrutiny Commission

Date of meeting: **3rd March 2022**

Lead director/officer: **Ruth Lake**

Useful information

- Ward(s) affected: All
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- Report version number: V.1

1. Summary

This report presents the performance position for Adult Social Care at the end of the second quarter of 2021/22 (30th September 2021).

The report contains information on the level of demand for our support and services, the efficiency and effectiveness of our business processes, the volume and quality of our outputs, and not least, the outcomes we deliver for people drawing on our support and services and the wider community of Leicester.

The key points to note are:

- The level of demand for our services is now similar to the pre-pandemic position: the total number of new requests for support shows a 16.6% increase between the first 6 months of 2020/21 and the same period in 2021/22.
- The number of assessments completed during the first half of 2020/21 (1,715) was more than double the number completed during the same period in 2020/21 (809), reaching levels not seen since June 2017. As a result of these assessments 876 people were found to have eligible needs at the end of Q2 in 2021/22 compared to 466 in the same period last year.
- Based on data at the end of Q2, we forecast that the number of new people going directly into long-term support following a request for support at the end of the year will reach 1,126. This compares to 970 in 2020/21 and 767 the year before that.
- The number of new permanent admissions to residential care has increased from the unprecedented low levels seen in the Spring of 2020, but still remains below pre-pandemic levels. However, the significant increase in the numbers leaving residential and nursing care last year appears to be reversing, with levels at the end of Q2 over 55% less than the same period last year.
- The number of people who have not had a review for 24 months or more since their last review has been increasing since April 2020, peaking at 691 this September, the highest figure recorded since January 2017.

2. Recommended actions/decision

Members are asked to note the report

3. Scrutiny / stakeholder engagement

N/A

4. Background and options with supporting evidence

N/A

5. Detailed report

5.1 Managing Demand

5.1.1 During the first six months of 2021/22 9,620 contacts were created. This does not reflect all calls or other forms of referral into Adult Social Care, but does capture requests for support, safeguarding and Deprivation of Liberty Safeguards (DoLS) referrals and Blue Badge renewals. If the total number of 'contacts' created so far this year continues at these levels, we forecast a year-end outturn of 19,240, this is over 2,000 higher than last year, just below the total for 2019/20, but higher than the 4 years prior to that.

5.1.2 We also record 'requests for support' from people who have no ongoing involvement with Adult Social Care, reflecting new demand on our support and services. As with contacts created, these requests have increased steadily since a significant fall at the beginning of the Covid pandemic in March 2020. We are forecasting a year-end figure of 11,778 requests for support, an increase of over 12% on the previous year, but still below levels in pre-pandemic years.

5.1.3 Of these requests for support, 62% were resolved at the point of contact (e.g. provided with information advice and guidance (IAG)), 24% went on to receive one-off or short-term support (e.g., aids and adaptations or reablement), with the remaining 9% going on to receive a long-term package of care (domiciliary care or a care home placement). This split is broadly in line with previous performance.

5.2 Outcomes of IAG, one-off and short-term support

5.2.1 To measure the effectiveness of our IAG support we look at the percentage of people who have received IAG that re-present to us within the following twelve months with a similar request. Performance here has improved over the first six months of 2021/22, with an average of just 7.9% of people re-presenting over the second quarter.

5.2.2 In the first half of 2021/22 over 400 people have been enabled to live independently having been provided with technology enabled care (assistive technology).

5.2.3 In the first quarter of 2021/22 we recorded our best ever performance (72.6%) for reablement / enablement in terms of the percentage of people receiving such support and not then needing any ongoing support. This dropped slightly to 71% in the second quarter. In the second quarter we did perform very strongly in terms of supporting people over 65 following a hospital discharge, with 93.6% still at home 91 days after receiving reablement.

5.3 Assessments and Reviews

- 5.3.1 The number of people receiving a Care Act Assessment has risen sharply over the last year. If this trend continues, we are forecasting that 3,430 assessments will be completed over 2021/21 compared to 2,427 last year and just 1,769 the year before.
- 5.3.2 We have also seen that the proportion of those assessed that meet the national eligibility criteria has also increased. In the first six months of 2021/22 876 people were judged to have eligible needs compared to just 466 in the same period the year before.
- 5.3.3 The number of people having their package of care reviewed has fallen over the first half of the year. As a consequence, the number of overdue reviews has increased. Review performance remains a key pressure. It is activity that is at risk from increased demand from new people or for crisis management. Options to address this are being explored (e.g. there is the intention to work with providers to look at provider-led reviews as a pilot and to explore self / family led reviews in appropriate situations).

5.4 Long-Term Support

- 5.4.1 Although falling over the second quarter, the number of people receiving a long-term package of care following a request for support remains much higher than in previous years. We are forecasting a total for the full year of 1,126 compared to our best performance of just 726 in 2018/19. However, a higher than usual number of leavers has meant that the total number of people receiving long-term support has remained very stable over the last five years.
- 5.4.2 Wherever possible we try to help people live independently in their own home. In Leicester approximately 75% of people receiving long-term care do so in a community setting as opposed to a residential care or nursing home. This performance compares very well against the average for the East Midlands (66%) and England (69%).
- 5.4.3 Linked to the above, we do whatever we can to minimize admissions to residential and nursing care. As a direct consequence of Covid, in 2020/21 the number of admissions were at an unprecedented low level. We have seen admissions begin to rise over 2021/22, but we are forecasting a full-year total of 252 admissions, over 60 fewer than the average between 2016/17 and 2019/20.

5.5 Safeguarding

- 5.5.1 Over the first half of 2021/22 we have seen a small but steady increase in the number of safeguarding alerts received. Of these a relatively high number are meeting the threshold to prompt a formal enquiry and are forecasting that the year-end the total will be some 14% higher than last year.
- 5.5.2 On a more positive note, just 7 out of 134 people who expressed a 'Making Safeguarding Personal' outcome felt that that outcome they wanted had not been met at the conclusion of the enquiry.

5.6 Quality and Outcomes

- 5.6.1 During the height of the Covid pandemic in 2020/21, the number of formal complaints we received (44) dropped to almost 50% of historic numbers (c. 83). The number of complaints over the first half of 2021/22 have increased from this very low base but are forecast to still be well below the numbers received in previous years. The number of commendations received so far this year are well below the position in previous years.
- 5.6.2 The continuation of national lockdowns over the early part of 2021/22 has continued to impact on our ability to undertake routine monitoring of providers (residential and nursing homes, domiciliary care and supported living) in line with our usual procedures. To gain assurance a revised Quality Assurance framework has been developed and this is in use alongside visits to check on the quality of services and the safety of those supported. CQC continue with a restricted programme of inspections and visits are only undertaken where risks indicate this is required leading to an increase in services rated 'Requires Improvement' since 2020/21.
- 5.6.3 Having adopted a 'strength based' approach to social work practice we have started asking people whose package of care is being reviewed whether the care and support they have been receiving has helped them to "live the life they want". Since the beginning of 2021/22 we have 1,148 responses to this question and the results are very encouraging, with 86.3% telling us they agreed or strongly agreed that this was the case. If we exclude those who did not express a view this rises to 98.4%.

5.7 Workforce

- 5.7.1 Long term sickness has risen sharply, to its highest level (102 cases at the end of September). This is being felt in teams, alongside managing vacancies and with pressures in capacity. Mental health is a particular factor, with a number of absences related to anxiety / bereavement related mental health. There are also people awaiting surgery to resolve health conditions that are preventing them from working. Management actions continue to focus on wellbeing, resilience, and Absence Management Policy actions.

6. Financial, legal, equalities, climate emergency and other implications

6.1 Financial implications

There are no direct financial implications arising from this report but the impact of performance measures such as numbers of people entering and leaving the care system and their type of care are incorporated within the financial forecasts outlined in the Council's quarterly revenue monitoring reports.

Martin Judson, Head of Finance, Ext 37 4101

6.2 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.

6.3 Equalities implications

When making decisions, the Council must comply with the Public Sector Equality Duty (PSED) (Equality Act 2010) by paying due regard, when carrying out their functions, to the need to eliminate unlawful discrimination, harassment, victimisation and any other conduct prohibited by the Act, to advance equality of opportunity and foster good relations between people who share a 'protected characteristic' and those who do not.

In doing so, the council must consider the possible impact on those who are likely to be affected by the recommendation and their protected characteristics.

Protected Characteristics under the Equality Act 2010 are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

From an equalities perspective, the six strategic priorities in the quarter 2 performance report 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). A report looking at the metrics in the Q2 report by ethnicity breakdown is currently in the process of being produced.

Sukhi Biring, Equalities Officer (Ext. 374175)

6.4 Climate Emergency implications

There are no significant climate emergency implications directly associated with this report.

Aidan Davis, Sustainability Officer, Ext 37 2284

6.5 Other implications (You will need to have considered other implications in preparing this report. Please indicate which ones apply?)

None

7. Background information and other papers:

None

8. Summary of appendices:

Appendix 1 – PowerPoint presentation of the report

9. Is this a private report (If so, please indicate the reasons and state why it is not in the public interest to be dealt with publicly)?

No

10. Is this a “key decision”? If so, why?

No