

Adult Social Care Scrutiny Commission

ASC Integrated Performance Report 2016/17 - Quarter 4 / provisional year-end

Date: 5th September 2017

Lead Director: Steven Forbes



Useful information

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

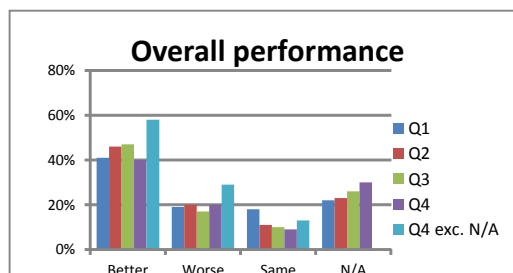
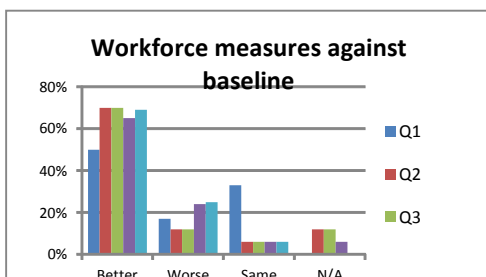
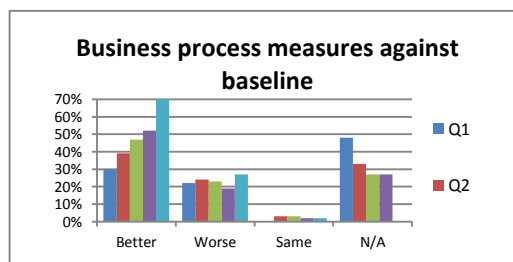
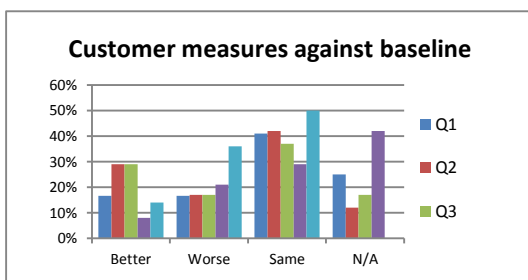
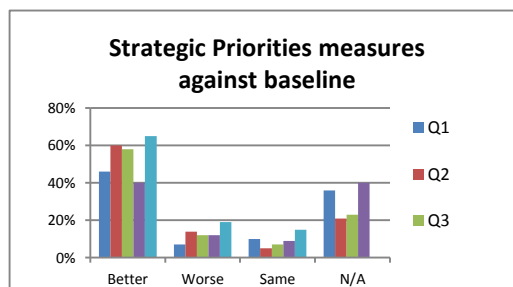
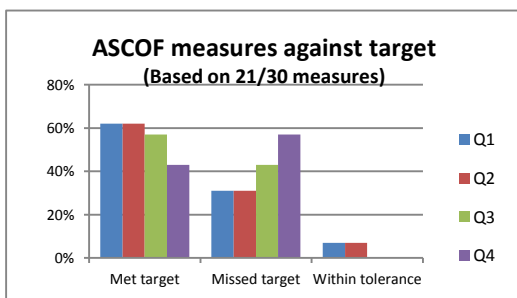
1. Summary

1.1 This report brings together information on various dimensions of adult social care (ASC) performance in the final quarter of 2016/17 and can be treated as a provisional year-end report. A final year-end report will be produced in late autumn when ASCOF data, including benchmarking information, is published.

1.2 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. 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
- the outcomes we deliver for our service users and the wider community of Leicester

1.3 A summary of data based performance over 2016/17 is presented below:



2. Recommendations

- 2.1 The Scrutiny Commission is requested to note the areas of positive achievement and areas for improvement as highlighted in this report.

3. Report

3.1 Delivering ASC Strategic Priorities for 2016/17

- 3.1.1 Our six strategic Priorities for 2016/17 have been agreed and were reported to Scrutiny on 3rd May 2016. We have also set out what we need to do to deliver on these priorities and developed Key Performance Indicators to measure whether we have been effective in doing so. Our priorities for the year are:

SP1. Improve the experience for our customers of both our own interventions and the services we commission to support them

SP2. Implement a preventative and enablement model of support, to promote wellbeing, self-care and independence and recovery into an 'ordinary life'

SP3. Improve the opportunities for those of working age to live independently in a home of their own and reduce our reliance on the use of residential care, particularly for people with learning disabilities or mental health support needs

SP4. 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. Improve the work with children's social care, education (SEN) and health partner to continue to improve our support for young people with care and support needs and their families in transition into adulthood

SP6. Continue to develop our understanding of the benefit to our customers of what we do, and to learn from this information so as to improve and innovate

3.1.2 Summary:

Overall performance against those KPIs aligned to the department's strategic priorities suggest that significant progress on our priorities has been made, and that having a small number of clear and visible priorities (as advocated through our peer challenges) has been effective. Overall, 17 of our measures have shown improvement from our 2015/16 baseline, with just 5 showing deterioration. Performance is consistently strong across all priorities except priority five (see below). The inclusion of aggregated data from other sets of KPIs to reflect performance against priorities one and six also provides evidence of strong overall performance across ASC this year.

3.1.3 Achievements:

User satisfaction levels derived from our local survey (at assessment) and questions asked in the supported self-assessment (at re-assessment) have been consistently high throughout the year. Critically here, 97.7% of service users said that their quality of life had improved as a consequence of our support and services, with 67% saying it had improved very much or completely. Generally, there has been encouraging progress made in taking forward our preventative and enablement model of support. Notwithstanding poor Q4 performance for admissions to residential and nursing care, overall performance in promoting independence for both working-age adults and people over 65 has been positive.

3.1.4 Concerns:

Measures are still to be developed in support of our priority to improve young peoples' transition to adulthood (priority five).

3.2 Keeping People Safe

3.2.1 The Care Act 2014 put adult safeguarding on a statutory footing for the first time. The Act set out our statutory duties and responsibilities including the requirement to undertake Enquiries under section 42 of the Act in order to safeguard people.

3.2.2 During 2016/17 609 individuals were involved in a safeguarding enquiry started in the year. Of these 262 were aged 18 to 64, with 347 aged 65 years or over. 362 of those involved were female and 239 were male. 423 were 'White', 106 'Asian' and 28 'Black.'

3.2.3 310 individuals who were involved in an enquiry have a recorded Primary Support Reason. 38% of these individuals have 'physical support' as their Primary Support Reason, with 'mental health' and 'learning disabilities' the next most common reasons.

3.2.4 Using figures for all completed enquiries, the most commonly recorded category of abuse for concluded enquiries was "physical abuse" (308), followed by "neglect" (304), and then "psychological/emotional abuse" (203). The most common location of risk was the individuals own home (243), followed by care homes 238, of which 161 were residential homes and 77 nursing homes.

3.2.5 Year end performance:

Measure	Year end 2016/17
Percentage of cases where action to make safe took place within 24 hours following the decision that the threshold has been met	53% of enquiries begun within 24 hours of threshold decision being made
Number of alerts progressing to a Safeguarding enquiry	Alerts received in the year = 2672 Threshold met – progressed to an enquiry = 690
Completion of safeguarding enquiries – within 28 days target	51.6% of safeguarding enquiries were completed within 28 days.
Percentage of people who had their safeguarding outcomes partially or fully met.	88.8% of individual who were asked for and gave desired safeguarding outcomes had these outcome fully or partially met in, fully met 52.4% and partially met 36.4%

3.3 Managing our Resources: Budget

3.3.1 The department spent £100.8m, £1.6m less than the budget of £102.4m.

3.3.2 The underspend is one off in nature and arises as a result of staffing savings where vacant posts have not been filled pending staffing reviews (in Care Management) or post review (in Enablement, Contracts and Commissioning) where recruitment to the new structure has not been completed.

3.3.3 Of the £102.4m budget the most significant item is the £94.9m expenditure on independent sector service user care package costs. The level of net growth in long term service users in the year was 1.2% (62 service users from a base of 5,300). This compares to 2.6% (137) in 2015/16. The level of growth in older service users and those with Learning Disabilities were both less than 1%. However growth in those service users with mental health conditions increased by 5.2% (although still only 34 service users).

- 3.3.4 The most significant area of cost increase was from net increases in package costs of our existing service users. This occurs when the condition of the user deteriorates, for example through increasing frailty and additional support is required on a short- or longer-term basis. The level of increase this year is higher than last. Increases in individual service user costs continue to be tracked by social work teams to be clear of the reasons why and the appropriateness of the new package being provided.
- 3.3.5 The overall impact of the growth in service users and changes in package costs results in an overall growth of 3.7% or £3.4m for the year, compared with 2.9% (£2.4m) in 15/16.
- 3.3.6 Reviews of service users are ongoing to ensure that the most appropriate care packages are in place. These reviews have yielded cost savings of £1.3m this year.
- 3.3.7 We are awaiting the outcome of the consultation on the funding which will be made available for local authorities to pay for the accommodation costs in excess of the local housing allowance for tenants of sheltered and supported housing schemes, including Extra Care Housing schemes. These provide self-contained flats with onsite support to enable vulnerable adults to live independently in the community rather than using traditional residential care. Not only is this better for the service user but it is also more cost effective for the Council. The details of the grant allocations will not be known until the autumn of 2017. There is a risk that the fixed grant will be insufficient, and therefore continue to jeopardise the financial viability of both existing and new schemes. From a financial viewpoint this could frustrate one of our means of reducing care package costs and delivering a key policy agenda in providing independent living opportunities.
- 3.3.8 There is significant demand for this kind of accommodation across the city and two new schemes which could provide 157 flats have been put on hold by the development consortium and the Council. There has also been interest from existing residential providers to convert their properties to provide supported living instead.
- 3.3.9 Approval is requested for the transfer of £1.5m to an ear marked reserve which will be used to provide a grant pot which can be used by the voluntary sector for preventative non statutory support in the community of £250k per annum for a three year period, with an option to extend for a further three years.

3.4 Managing Our Resources: Our Workforce

- 3.4.1 Adult Social Care consists of two divisions: Social Care and Safeguarding and Social Care and Commissioning. The department has undergone significant change over the last 2 years including an organisational review and restructuring of the department leading to the creation of a new Learning Disability service and a new Enablement service, clear focus on hospital discharge and a re-focused Contact and Response function (our “front door”), as well as delivering the final phase of closure of in-house residential care homes (EPHs). See **appendix 2** for a snapshot of workforce performance.
- 3.4.2 Summary:
Overall, performance is generally positive, with 11 out of 17 measures showing improvement and just four deteriorating.

3.4.3 Achievements:

The number of cases and days lost to long-term sickness (over 30 days) is lower than in Q1. Significant reductions in spend on overtime, agency and casual staff continue to be made, contributing to a reduction in the total staff cost of £2.95m since the year-end position for 2015/16.

3.4.4 Concerns:

Although there are some areas of improvement as noted above, sickness levels continue to be the single greatest area of concern, impacting significantly on the department's resource capacity. Both divisions recorded over 17 days per FTE against a target of 11 days.

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 compliments the national NHS and Public Health outcome frameworks. The following analysis excludes ASCOF measures derived from the carers and user survey as full results are not yet available. See **appendix 3** for ASCOF performance.

3.5.2 Summary:

Overall performance on the ASCOF measures for 2016/17 is somewhat disappointing. Having said that, this needs to be seen in the context of a particularly strong baseline due to very positive performance in 2015/16 (best on record), and the level of ambition in the targets set for 2016/17 (in part informed by the strong performance in 2015/16). It should also be noted that a performance on number of measures had been strong in the early part of the year and were forecast to meet target at the end of Q3. Further analysis as to the reasons for the dip in Q4 performance, particularly around residential and nursing care admissions and delayed transfers of care will be undertaken.

3.5.3 Achievements:

The number of older people still at home 91 days after completing reablement following a hospital discharge (2Bi) maintained last year's strong performance and met target (one of the BCF national indicators). Performance against measures in the first ASCOF domain; "Enhancing quality of life for people with care and support needs" remains strong.

3.5.4 Concerns:

As referred to in the summary there are a number of areas for concern. Our positive performance in meeting all three BCF measures last year has not been sustained. However, for delayed discharges from care (2Cii) this is at least in part due to delays being incorrectly attributed to ASC. 50% of delays from acute hospitals in December have been re-coded as NHS delays. The incorrect data will continue to be published it has not been possible to incorporate the changes on the NHS's Unify system.

The measures for both mental health and learning disability service users in employment (1E and 1F) failed to meet their target and showed a dip in performance from last year. The percentage of mental health service users living independently (1H) has improved through the year, but remains off-target and below the 2015/16 baseline. The outcomes following reablement (2D) have also improved, with performance better than the 2015/16 baseline, but still failing to meet our target.

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. For many of these indicators we don't have historic data so we can't make a judgement as to whether performance has improved. In other cases the indicators are still under development. See **appendix 4** for a snapshot of business process performance, with commentary provided by Heads of Service.

3.6.2 Summary:

Overall performance is very encouraging, with more than 70% of measures showing improvement, more than twice as many as showing deterioration.

3.6.3 Achievements:

There is increasing evidence emerging that we are getting better at managing demand. While the total number of contacts has increased, more are being deflected or provided with low level or short-term support. Fewer people were assessed as being eligible for services and fewer entered long-term support compared to last year. We have also made progress in addressing areas of previous poor performance such as the completion of re-assessments.

3.6.4 Concerns:

Despite a larger number of leavers in Q4, the number of people leaving residential and nursing care was lower than in 2015/16. The number of 'working-age' leavers fell from 52 in 2015/16 to 38 in 2016/17. Although the number of re-assessments outstanding for more than two years has reduced by 64% since the end of March 2016, the number outstanding for between one and two years has only reduced slightly. The number of cases allocated to a worker for over 100 and 250 days has not changed significantly since these measures were first reported in Q2.

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. See **appendix 5** for a snapshot of customer performance.

3.7.2 Summary:

Performance on two of our customer measures is showing improvement from our 2015/16 baseline, with five showing a decline. Seven measures are showing no significant change from the baseline. This overall position is somewhat misleading however as explained below.

3.7.3 Achievements:

The seven measures showing no significant change are from our local survey of service users' experience of the assessment process, with satisfaction levels stable at between 97 and 99%. There is clearly little scope for improvement here. The number of staff commendations has increased almost 60% compared to 2015/16.

The new assessment form, introduced in November 2016, includes two questions to be asked during all reviews / re-assessments. These enable 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. Early results are extremely

positive with 97.7% of service users saying that their needs were at least partially met and 97% said that their quality of life had improved as a consequence.

3.7.4 Concerns:

Although the overall number of complaints received is the same as last year, the number of complaints relating to practice decisions, delays to services and staff attitudes / behaviour increased.

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.

Mark Jeffcote, Environment Team (x372251)

4.4 Equalities Implications

From an equalities perspective, the most important information is that related to the outcomes delivered for service users and the wider community. This is in keeping with our Public Sector Equality Duty, the second aim of which is to promote equality of opportunity. The outcomes demonstrate that ASC does enhance individual quality of life that addresses health and also socio-economic inequalities that many adults in the city experience. 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 inequalities (as set out in the adults JSNA).

Irene Kszyk, Corporate Equalities Lead, ext 374147.

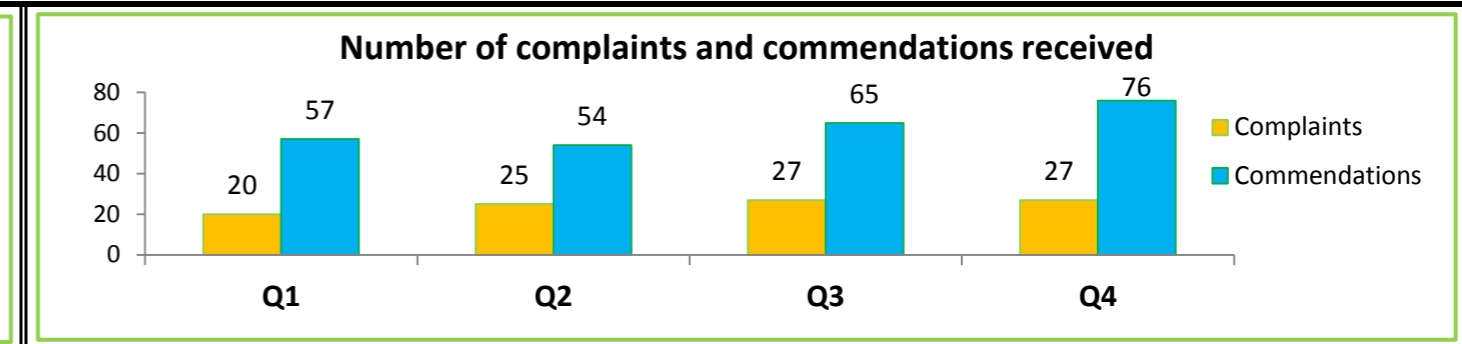
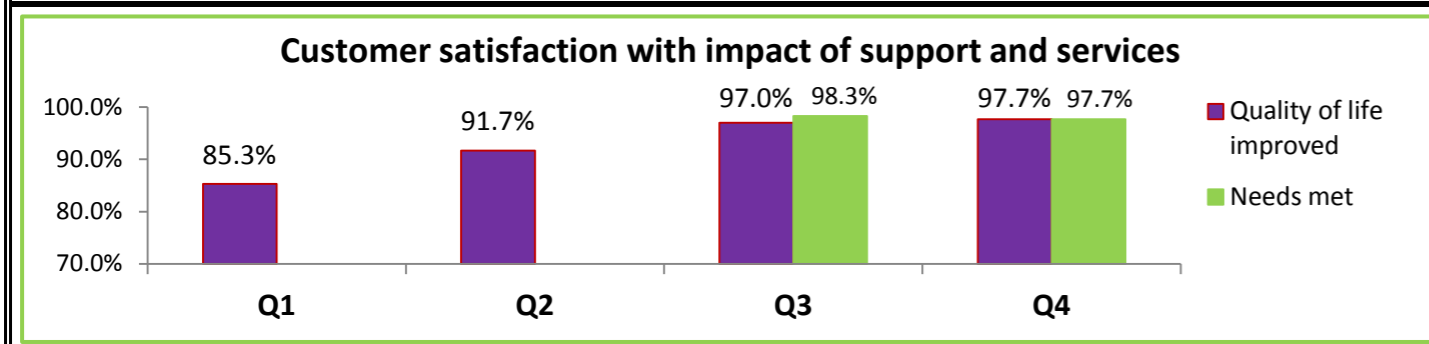
4.5 Other Implications (You will need to have considered other implications in preparing this report. Please indicate which ones apply?)

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

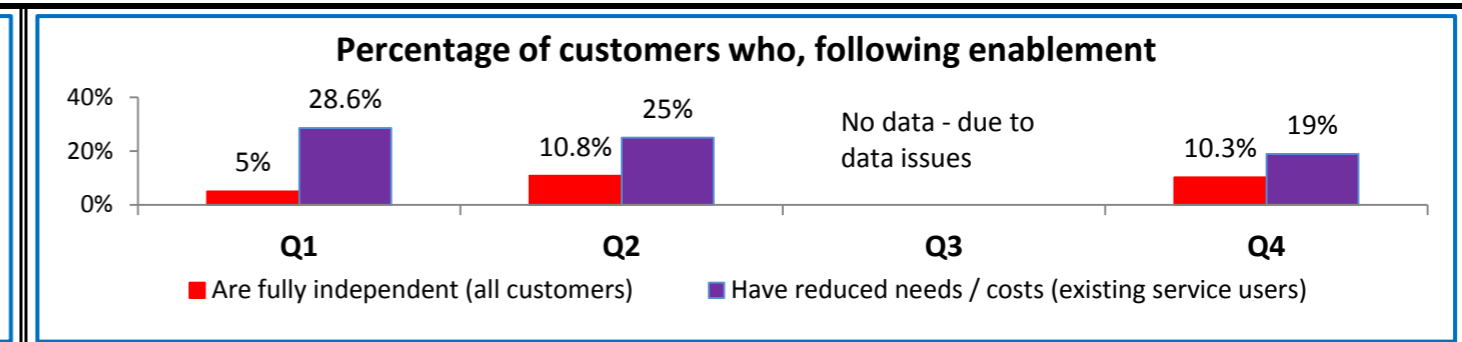
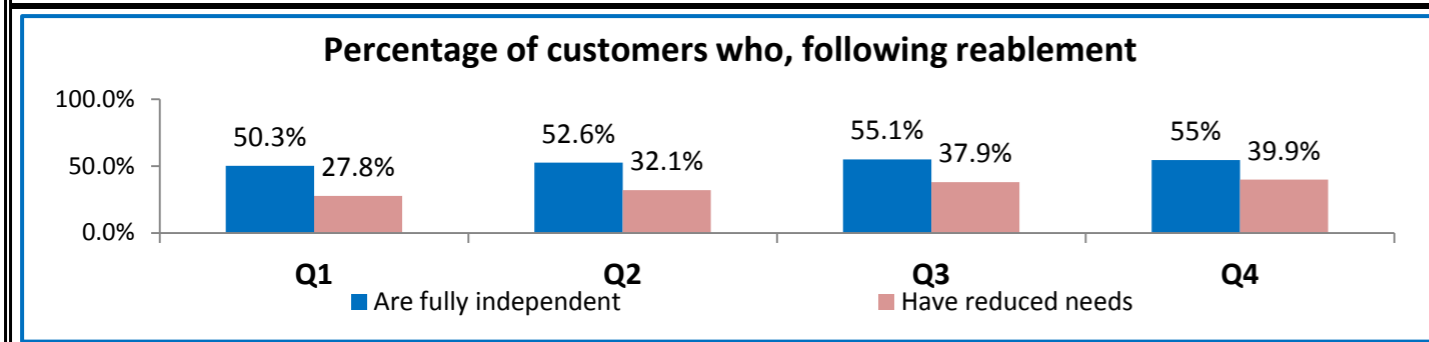
6. Summary of appendices:

- Appendix 1: Strategic Priorities
- Appendix 2: Workforce
- Appendix 3: ASCOF
- Appendix 4: Business Processes
- Appendix 5: Customer Service

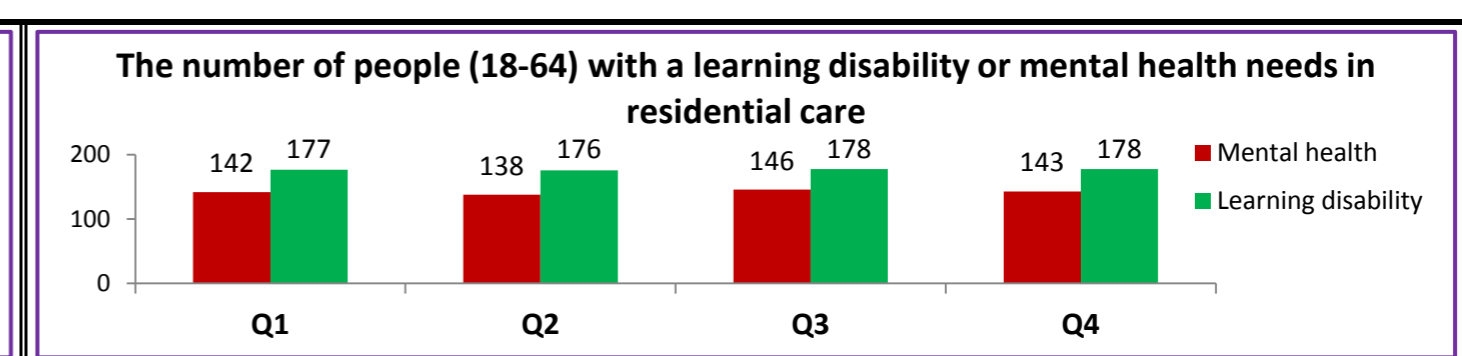
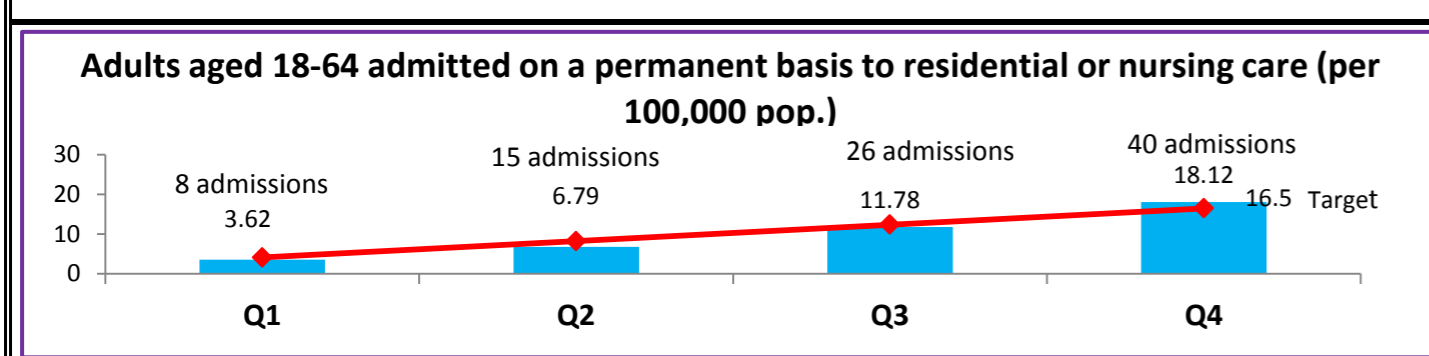
1) Improve the experience for our customers of both our own interventions and the services we commission to support them



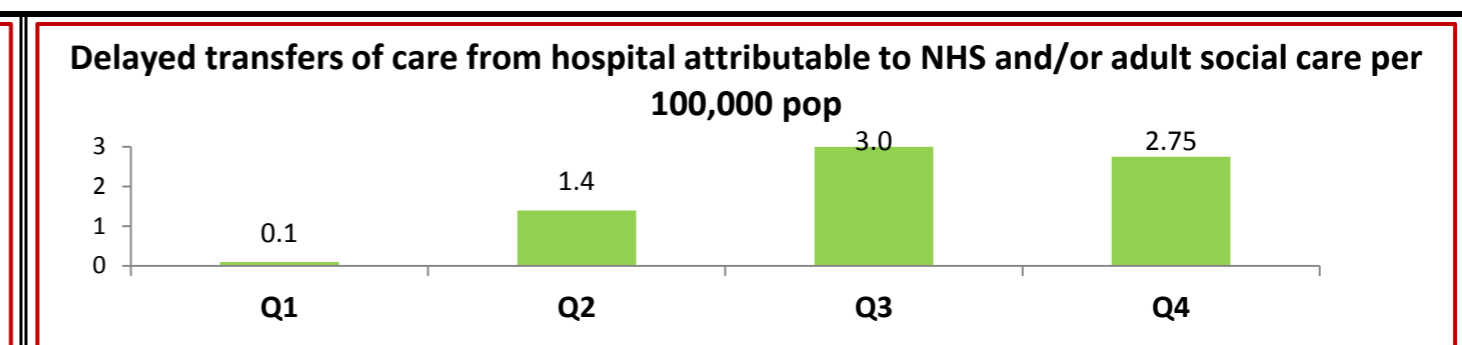
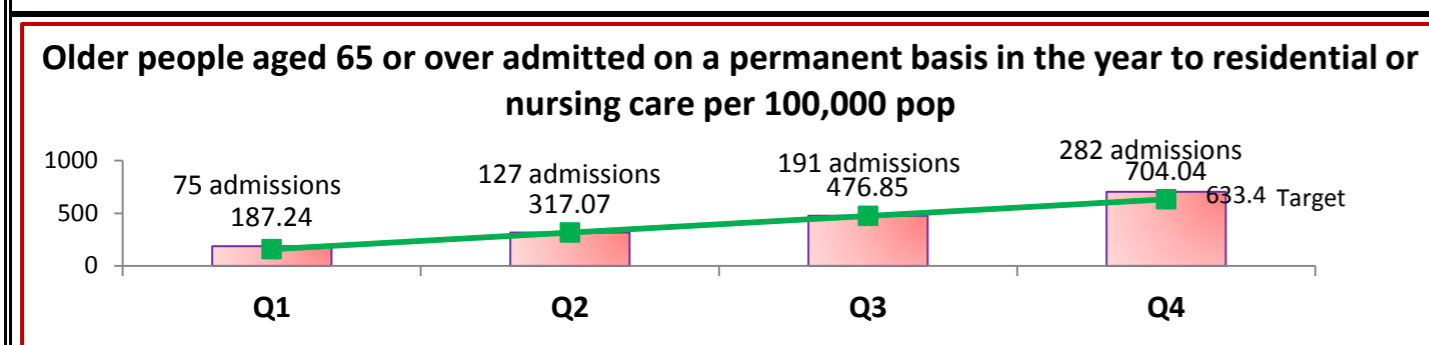
2) Implement a preventative and enablement model of support, to promote wellbeing, self-care and independence and recovery into an 'ordinary life'



3) Improve the opportunities for those of working age to live independently in a home of their own and reduce our reliance on the use of residential care, particularly for people with learning disabilities or mental health support needs

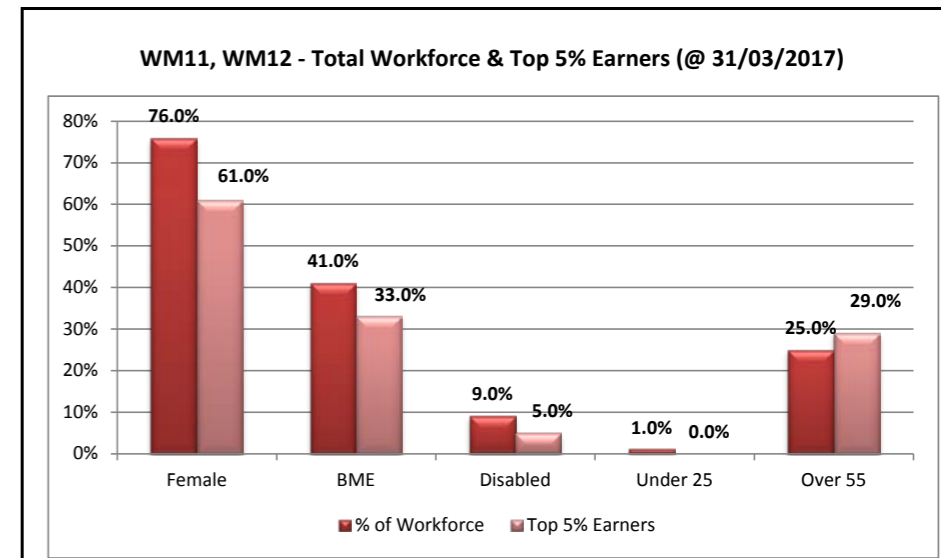
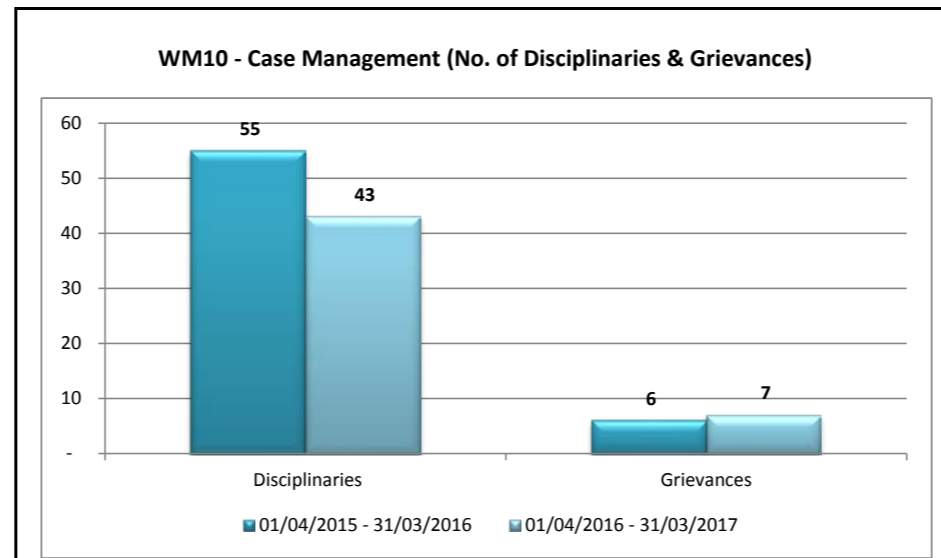
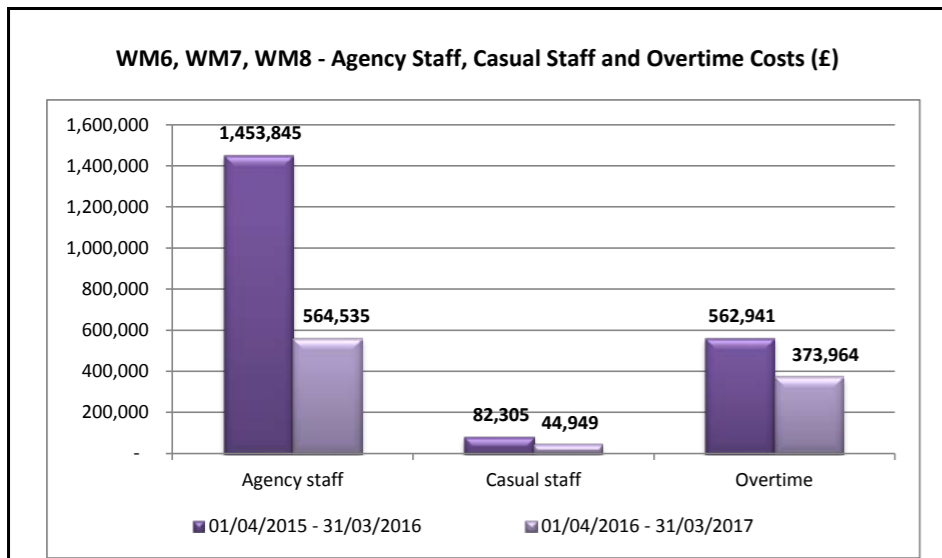
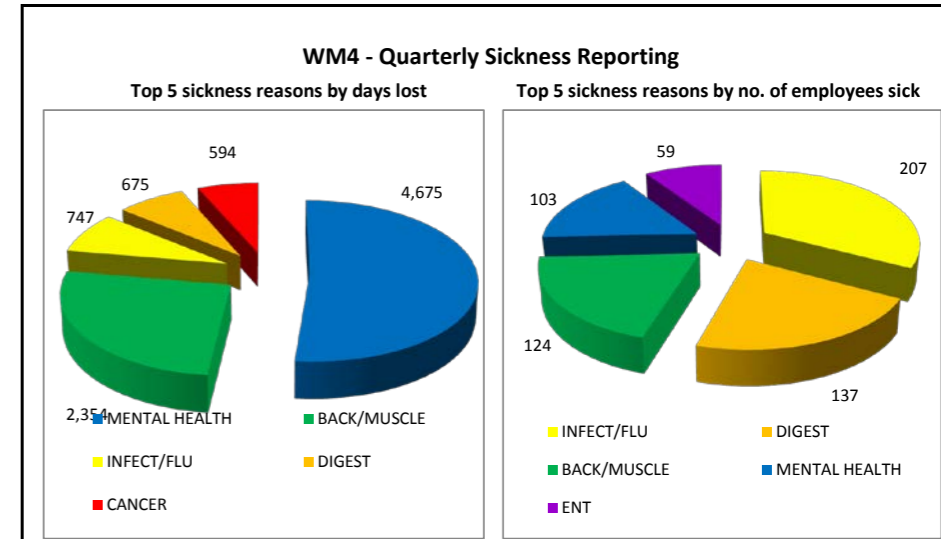
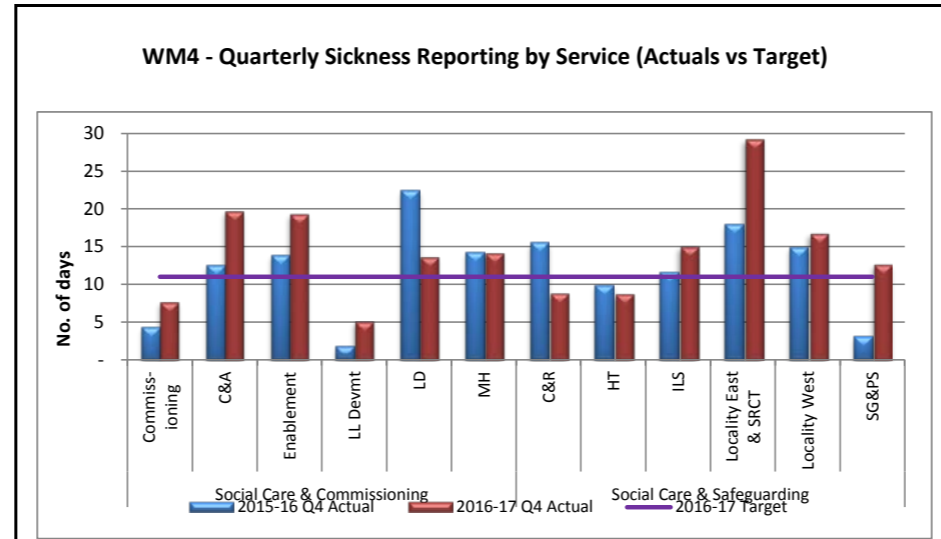
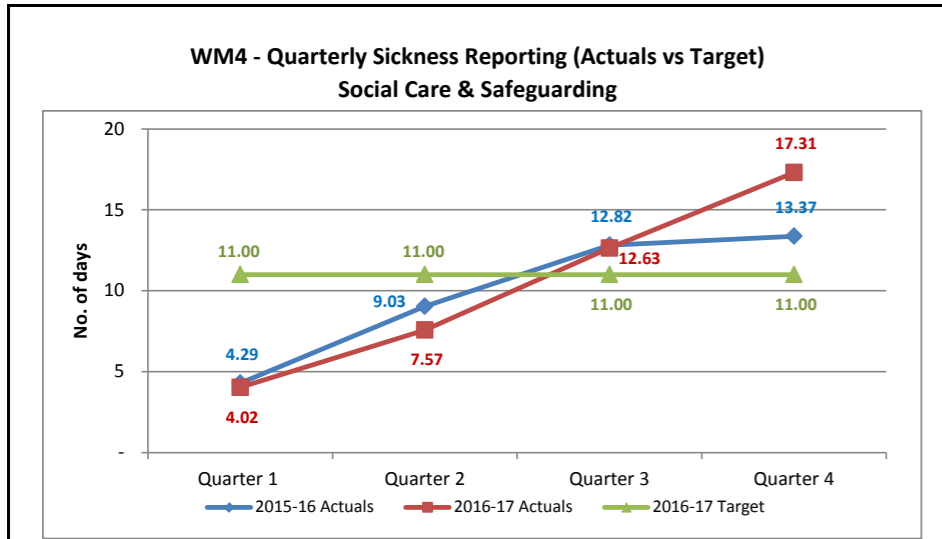
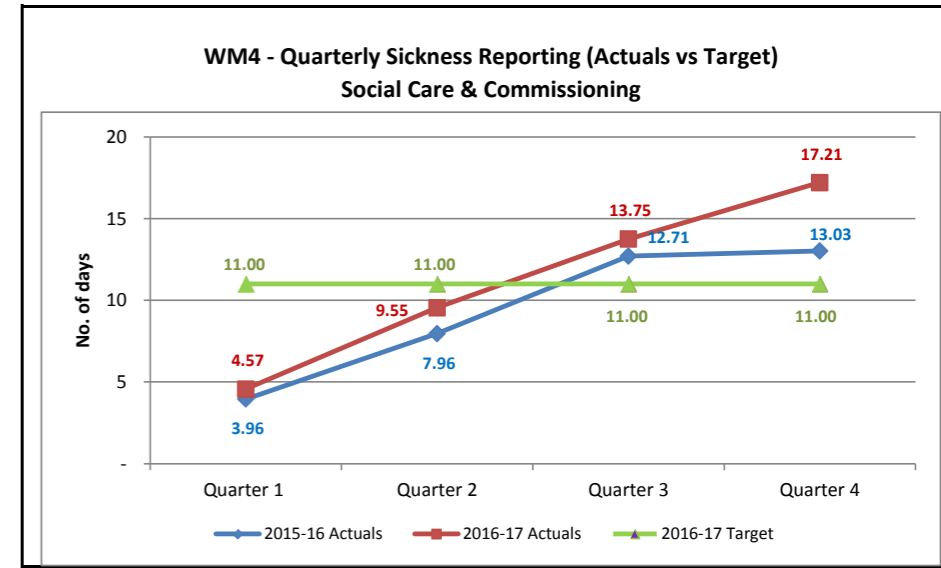
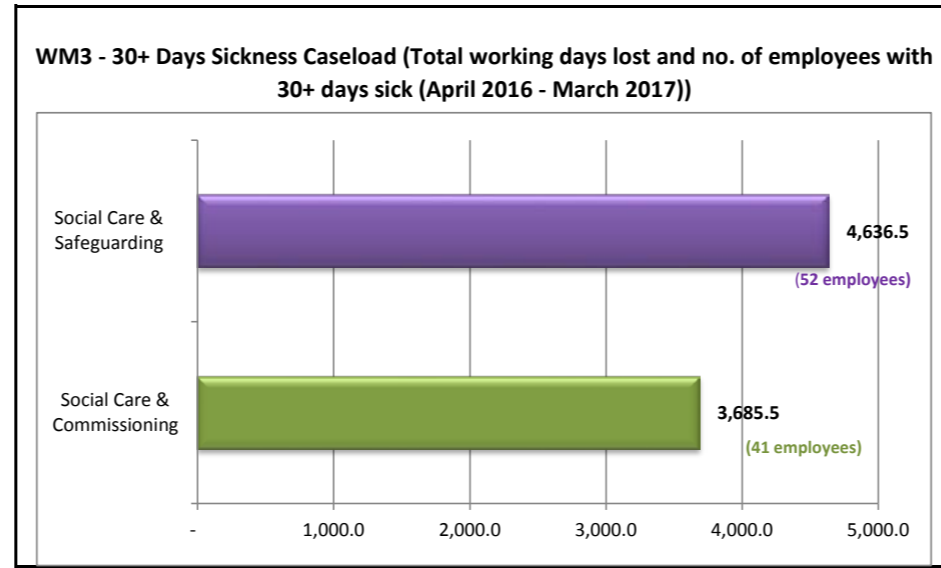
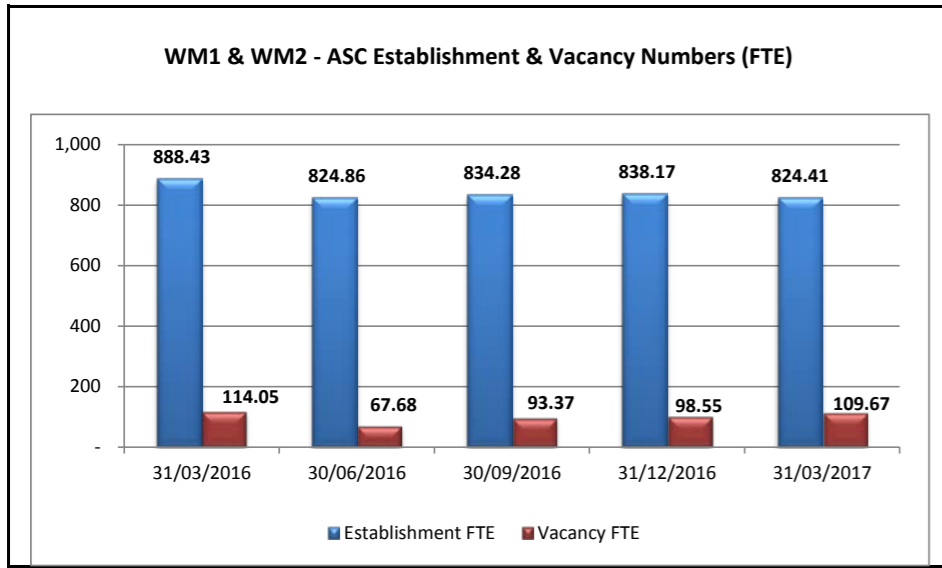


4) Improve our offer to older people supporting more of them to remain at home and to continue to reduce our reliance on the use of residential care



ASC Workforce Measures 2016/17 Quarter 4

Appendix 2



Adult Social Care Performance: 2016/17 – Quarter 4

Appendix 3

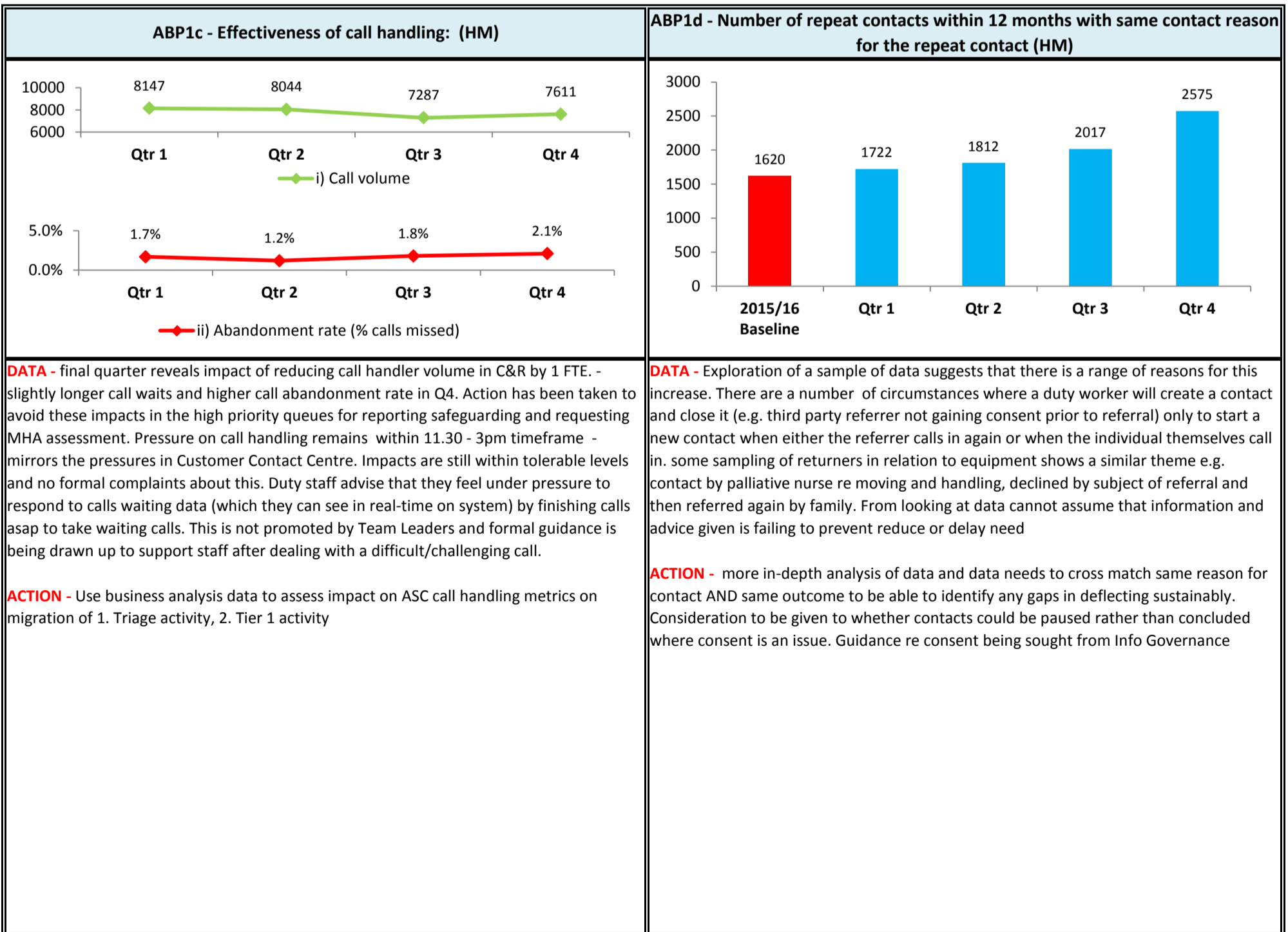
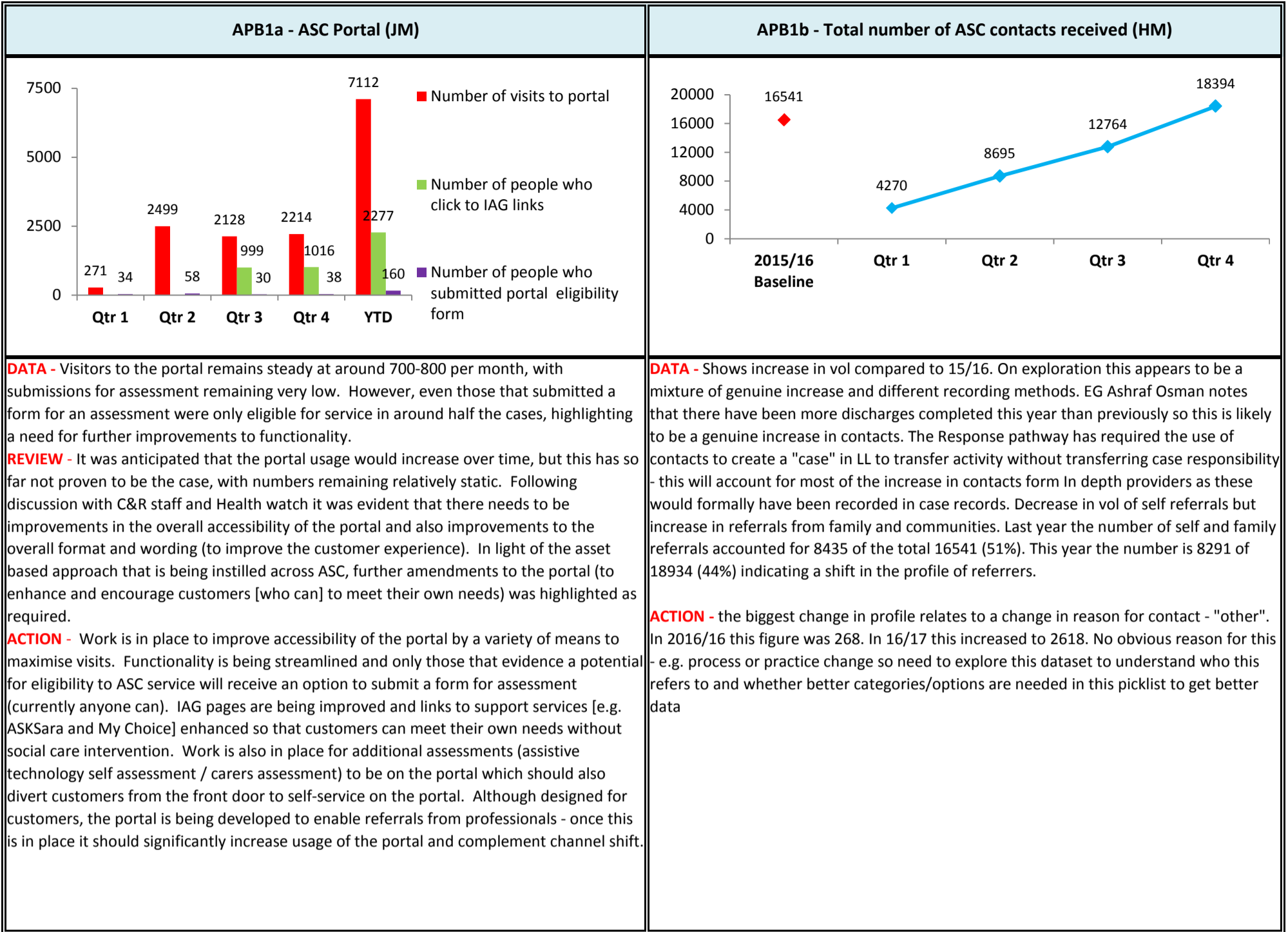
Adult Social Care Outcome Framework

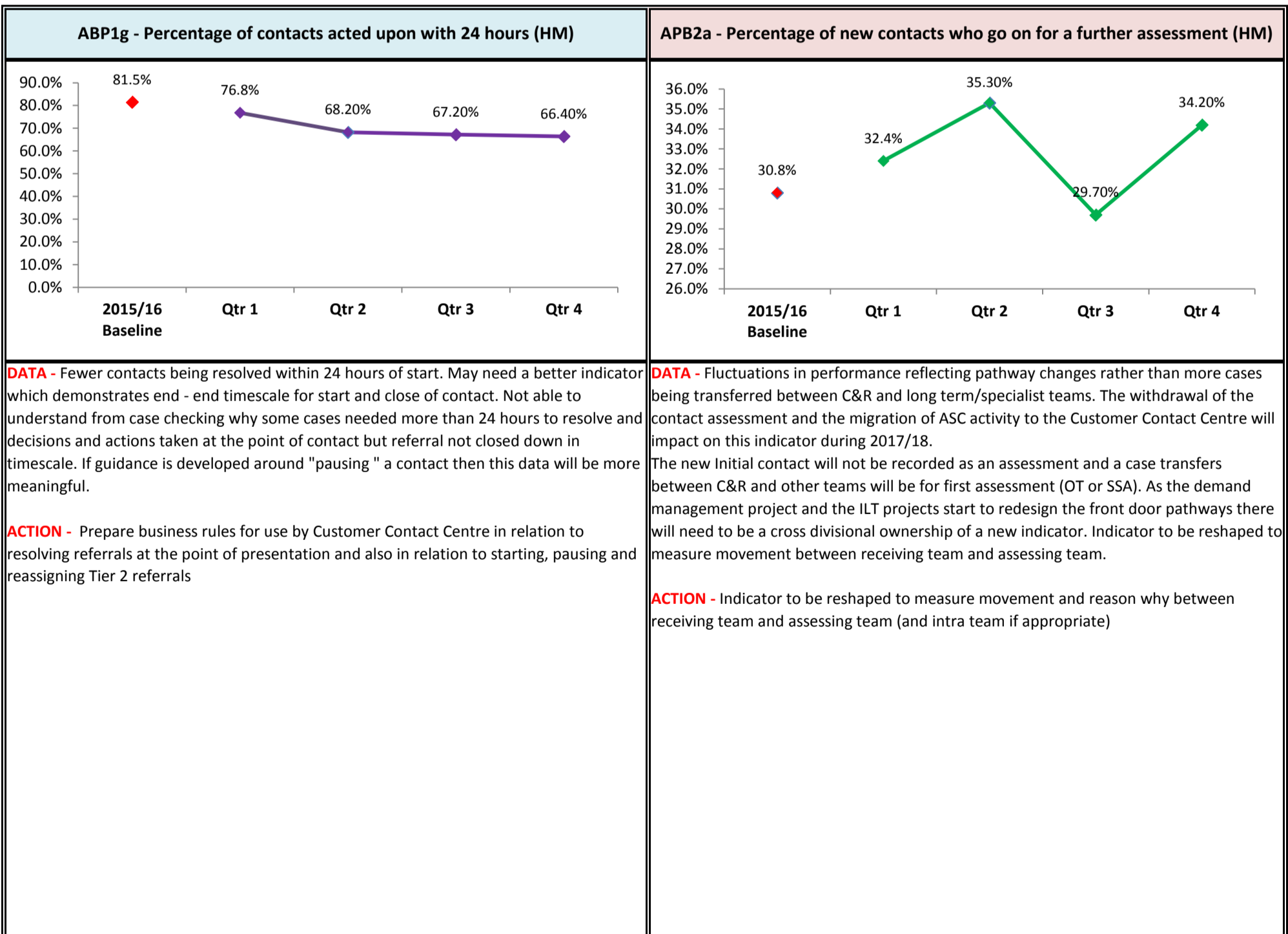
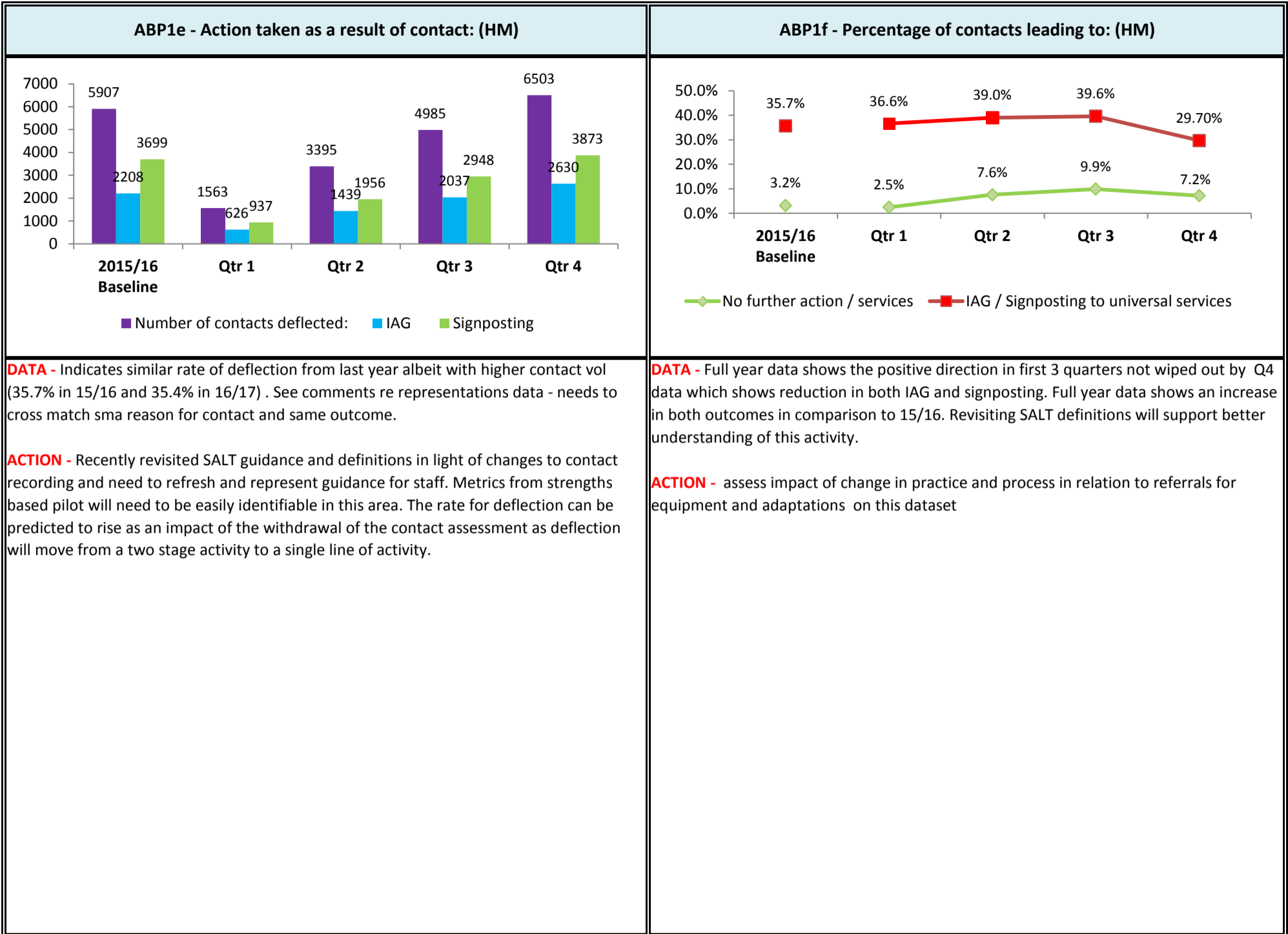
Indicator	2014/15	2015/16	2015/16 Benchmarking			2016/17 Q1	2016/17 Q2	2016/17 Q3	2016/17 Q4	Target	Rating (RAG = target, arrow = DoT)	Comments
			England Average	England Ranking	England Rank DoT							
1A: Social care-related quality of life.	17.9	18.1	19.1	147/150	↑	N/A	N/A	N/A	N/A	18.4		16/17 user's survey results available Autumn '17
1B: Proportion of people who use services who have control over their daily life.	67.1%	70.5%	76.5%	138/150	↑	N/A	N/A	N/A	N/A	72.5%		16/17 user's survey results available Autumn '17
1Cia: Service Users aged 18 or over receiving self-directed support as at snapshot date.	96.2%	98.7% (3763/3812)	86.9%	31/152	↑	99.1% (3,862/3,859)	99.6% (3,828/3,844)	99.6% (3,789/3,805)	99.8% (3,689/3,698)	98.9%	↑	New definition in 2014/15
1Cib: Carers receiving self-directed support in the year.	100%	100% (147/147)	77.7%	=1/152	→	100% (114/114)	100% (131/131)	100% (153/153)	100%	100%	↔	New definition in 2014/15.
1Cia: Service Users aged 18 or over receiving direct payments as at snapshot date.	41.3%	44.4% (1693/3812)	28.1%	8/152	↑	44.2% (1,707/3,859)	45.1% (1,735/3,844)	45.3% (1,724/3,805)	46.9% (1,733/3,698)	45.3%	↑	New definition in 2014/15
1Cib: Carers receiving direct payments for support direct to carer.	100%	100% (147/147)	67.4%	=1/152	→	100% (114/114)	100% (131/131)	100% (153/153)	100%	100%	↔	New definition in 2014/15.

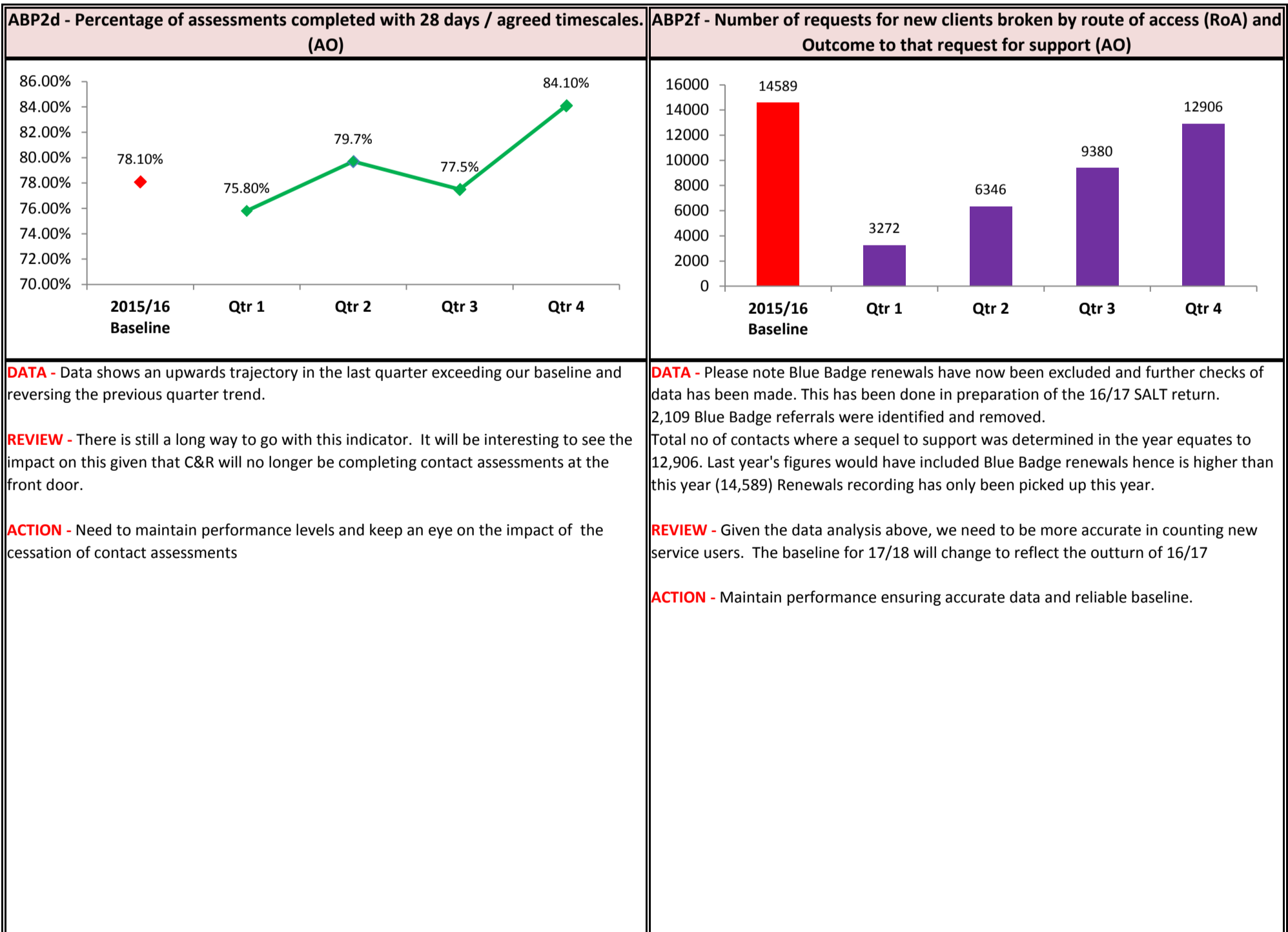
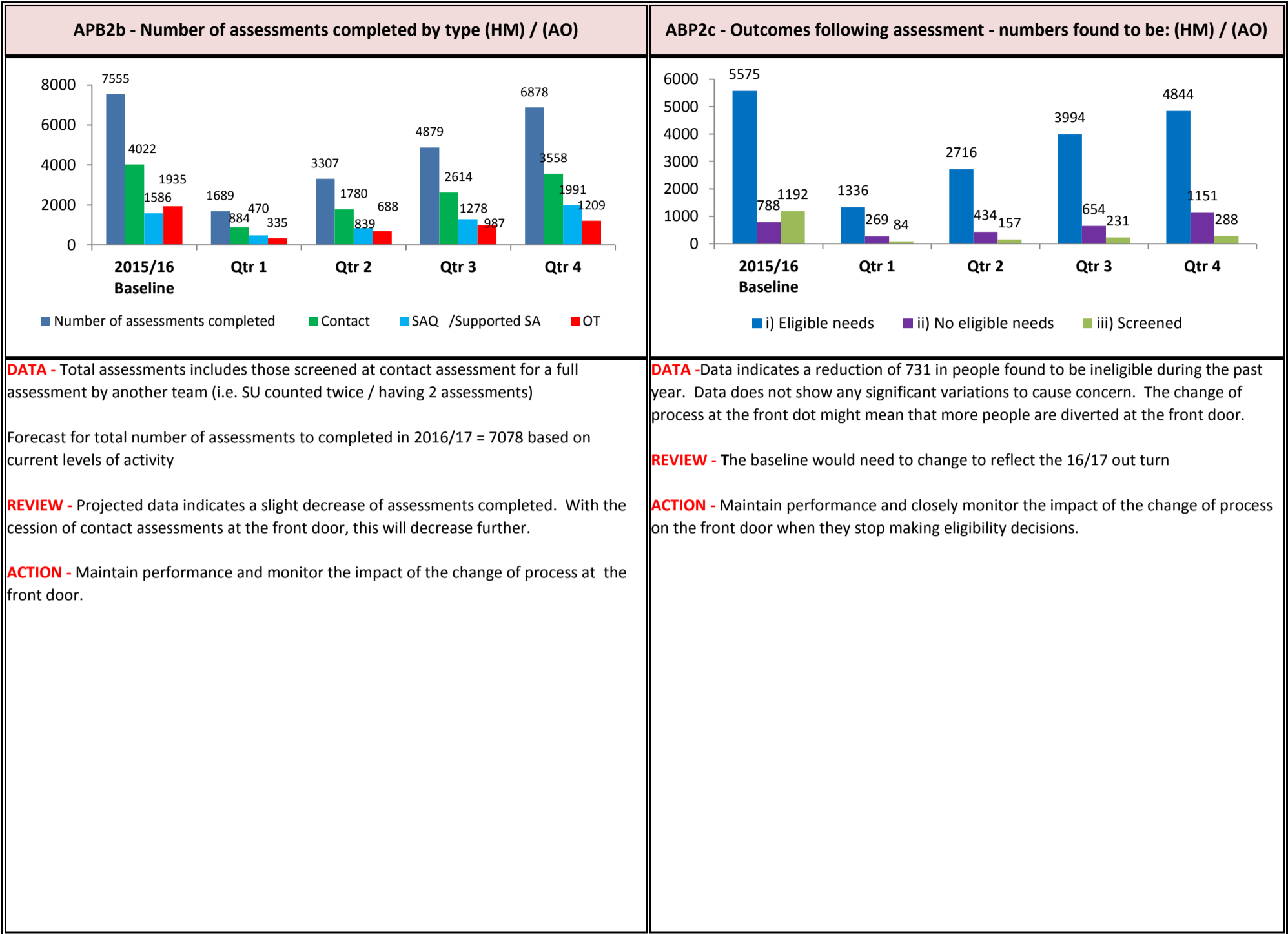
Indicator	2014/15	2015/16	2015/16 Benchmarking			2016/17 Q1	2016/17 Q2	2016/17 Q3	2016/17 Q4 (or year-end)	Target	Rating (RAG = target, arrow = DoT)	Comments	
			England Average	England Ranking	England Rank DoT								
1D: Carer reported quality of life.	7.2	No carers survey	N/A	N/A	N/A	N/A	N/A	N/A	N/A	7.7		16/17 carer's survey results available Autumn '17	
1E: Proportion of adults with a learning disability in paid employment.	6.9%	5.2% (41/793)	5.8%	85/152	↓	5.6% (41/736)	4.8% (37/764)	4.8% (37/769)	4.7% (37/785)	6.0%	↓	New definition in 2014/15	
1F: Proportion of adults in contact with secondary mental health services in paid employment.	1.8%	2.9%	6.7%	141/148	↑	1.5% (13/883)	2.6% (23/878)	2.6% (20/775)	2.4% (19.5/820)	4.0%	↓	Year end (average across year)	
1G: Proportion of adults with a learning disability who live in their own home or with their family.	69.8%	71.8% (569/793)	75.4%	98/152	↓	72.4% (533/736)	72.6% (555/764)	73.6% (566/769)	74.4% (584/785)	72.8%	↑	New definition in 2014/15	
1H: Proportion of adults in contact with secondary mental health services who live independently, with or without support.	35.8%	62.3%	58.6%	90/152	↑	21.7% (192/883)	38.9% (342/878)	42.3% (328/775)	36.6% (300/820)	65%	↓	Year end (average across year)	
1I: Proportion of people who use services and their carers who reported that they had as much social contact as they would like.	Users	35.6%	37.2%	45.4%	142/150	↑	N/A	N/A	N/A	N/A	39.8%		16/17 user's survey results available Autumn '17
	Carers	31.9%	No carers survey	N/A	N/A	N/A	N/A	N/A	N/A	N/A	35.5%		16/17 carer's survey results available Autumn '17
1J: Adjusted Social care-related quality of life – impact of Adult Social Care services.	Category C (0.398)	Category C (0.396)	0.416	121/150	↓	N/A	N/A	N/A	N/A	N/A			New measure for 2016/17 (with retrospective scores). Derived from user survey. User survey data not yet available

Indicator	2014/15	2015/16	2015/16 Benchmarking			2016/17 Q1	2016/17 Q2	2016/17 Q3	2016/17 Q4	Target	Rating (RAG = target, arrow = DoT)	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)	13.5 29 admissions	16.3 36 admissions	13.3	111/152	↓	23.62 8 admissions	6.79 15 admissions	11.78 26 admissions	18.12 40 admissions	16.5	↓	Cumulative measure: Previous qtrs. figures refreshed due to late entries on LL	
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).	734.1 287 admissions	644.1 258 admissions	628.2	82/152	↑	187.24 75 admissions	317.07 127 admissions	476.85 191 admissions	704.04 282 admissions	633.4	↓	Cumulative measure: Previous qtrs. figures refreshed due to update on LL	
2Bi: Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services.	Statutory	84.3	91.5%	82.7%	19/152	↑	N/A	N/A	N/A	91.3%	90.0%	↑	Statutory measure counts Oct – Dec discharges
	Local	89.7%	88.2%	N/A	N/A	N/A	94.5%	93.0%	93.0%	92.3%	90.0%		Local measure counts full year
2Bii: Proportion of older people (65 and over) offered reablement services following discharge from hospital.	Statutory	3.7% (235 in reablement)	3.1% (200 in reablement)	2.9%	72/152	↓	N/A	N/A	N/A	2.5%	3.3%	↓	Statutory counts Oct – Dec discharges
	Local	4.2%	3.0% (939 in reablement)	N/A	N/A	N/A	2.8%	2.7%	2.8%	2.7%	3.6%		Local measure counts full year. Baseline adjusted
2Ci: Delayed transfers of care from hospital per 100,000 pop. (Low is good)	13.0	6.0	12.3	34/152	↑	4.5 (35 delays)	5.9 (92 delays)	8.0 (167 delays)	9.0 (282 delays)	Target in BCF plan	Based on previous year ↓		

Indicator	2014/15	2015/16	2015/16 Benchmarking			2016/17 Q1	2016/17 Q2	2016/17 Q3	2016/17 Q4	Target	Rating (RAG = target, arrow = DoT)	Comments	
			England Average	England Ranking	England Rank DoT								
2Cii: Delayed transfers of care from hospital attributable to NHS and/or ASC per 100,000. (Low is good)	4.3	1.7	4.8	37/152	↑	0.1 (1 delay)	1.4 (22 delays)	Published data: 3.0 (70 delays) Local data: 2.55 (60 delays)	Published data: 2.9 (92 delays) Local data: 2.6 (82 delays)	1.5	Data quality issues ↓	Checks have revealed that a number of delays have wrongly been attributed to ASC. To date 10/70 delays have been re-coded,	
2D: The outcomes of short-term services (reablement) – sequel to service	63.0%	60.5%	75.8%	129/152	↓	51.3%	56.9%	60.9%	61.9%	63.5%	↑	New measure for 2014/15.	
3A: Overall satisfaction of people who use services with their care and support.	56.9%	61.7%	64.4%	104/150	↑	N/A	N/A	N/A	N/A	62.5%		16/17 user's survey results available Autumn '17	
3B: Overall satisfaction of carers with social services.	37.7%	No carers survey	N/A	N/A	N/A	N/A	N/A	N/A	N/A	39.2%		16/17 carer's survey results available Autumn '17	
3C: Proportion of carers who report that they have been included or consulted in discussion about the person they care for.	68.5%	No carers survey	N/A	N/A	N/A	N/A	N/A	N/A	N/A	70.5%		16/17 carer's survey results available Autumn '17	
3D: The proportion of service users and carers who find it easy to find information about services.	Users	62.0%	61.7%	73.5%	150/150	↔	N/A	N/A	N/A	N/A	65.0%		16/17 user's survey results available Autumn '17
	Carers	55.5%	No carers survey	N/A	N/A	N/A	N/A	N/A	N/A	N/A	61.0%		16/17 carer's survey results available Autumn '17
4A: The proportion of service users who feel safe.	58.3%	60.8%	69.0%	144/150	↑	N/A	N/A	N/A	N/A	63.0%		16/17 user's survey results available Autumn '17	
4B: The proportion of people who use services who say that those services have made them feel safe and secure.	75.4%	80.7%	85.5%	117/150	↑	N/A	N/A	N/A	N/A	82.5%		16/17 user's survey results available Autumn '17	







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<p>DATA - Please note a new amended criteria report has been used to recalculate the LTS packages information. The previous report was incorrectly working due to the way information is recorded in Liquid Logic. For Residential and Nursing Admissions the permanent Admissions report has been used to report this information. Total no of new LTS packages: 988 Of which: Community: 835 Residential: 103 Nursing: 50</p> <p>REVIEW - If taken at face value data would have indicated a significant deterioration in our performance. However, the performance unit have found a glitch in the report meaning that we would have to revise our baseline for 17/18 along the lines of the 16/17 outturn</p> <p>ACTION - revise the baseline for 16/17 as above.</p>	<p>DATA -This year there has been a greater emphasis of service users acquiring low level and inexpensive AT items for themselves compared to previous years. This has steadily developed during the year and may have an impact on the number of standalone AT referrals in subsequent years.</p> <p>REVIEW - The outturn in numbers of service users in receipt of AT has not significantly increased nor decreased compared to the previous year.</p> <p>ACTION - Continue to progress the OR for the AT Service and work commenced with Commissioning about the branding and awareness of AT.</p>																														

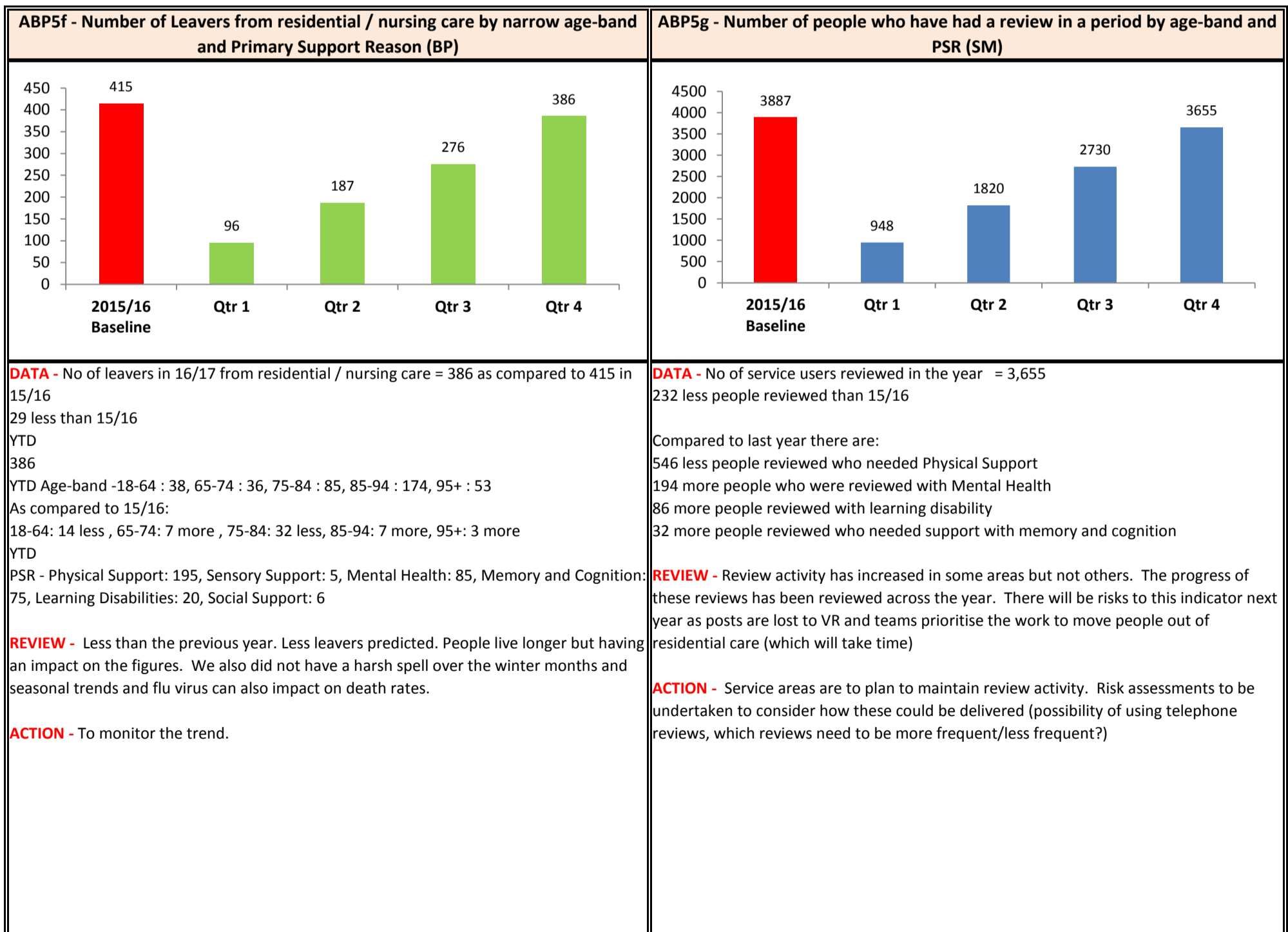
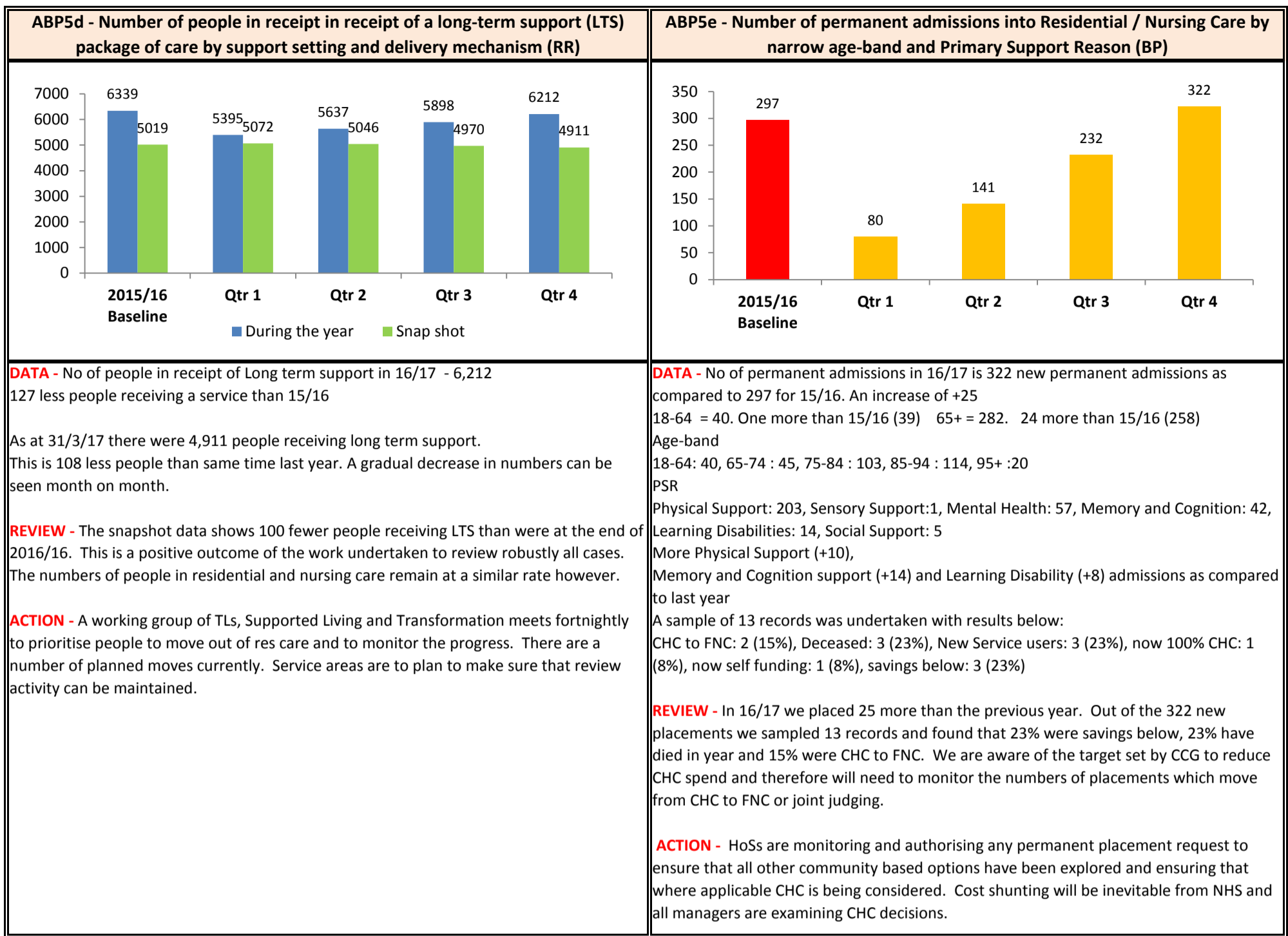
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<p>DATA - 16/17 figures are inclusive of both Rehabilitation and Enablement services whereas 15/16 only included the former.</p> <p>Please note the percentage in Jan 17 has dipped due to the inclusion in the denominator of Blue Badge renewals.</p> <p>REVIEW - Increase in the number of referrals from last years baseline. Increase of nearly 13% number of referrals. Heading in the right direction.</p> <p>ACTION - With its third OR in 3 years coming to an end taking the total number of Reablement staffing cuts to 1.5million its imperative that capacity is fully maximised to ensure that every appropriate referral is taken. Equally critical is ensuring flow is not compromised by any of our key partners.</p>	<p>DATA - Moving in the right direction for those fully independent. A slight decline in Jan 17 and Feb 17 seen. Ongoing needs declining month on month with an increase in March 17</p> <p>REVIEW - Outcomes remain relatively stable even with an increase in referrals. Increased need has gone down slightly from 8.7% to 7.8% when compared to the base line.</p> <p>ACTION - The Reablement Service is taking part in the National Intermediate Care Audit and we await the outcome. However, it will also be useful to continue to compare itself with other similar authorities in terms of its outcomes.</p>																																										

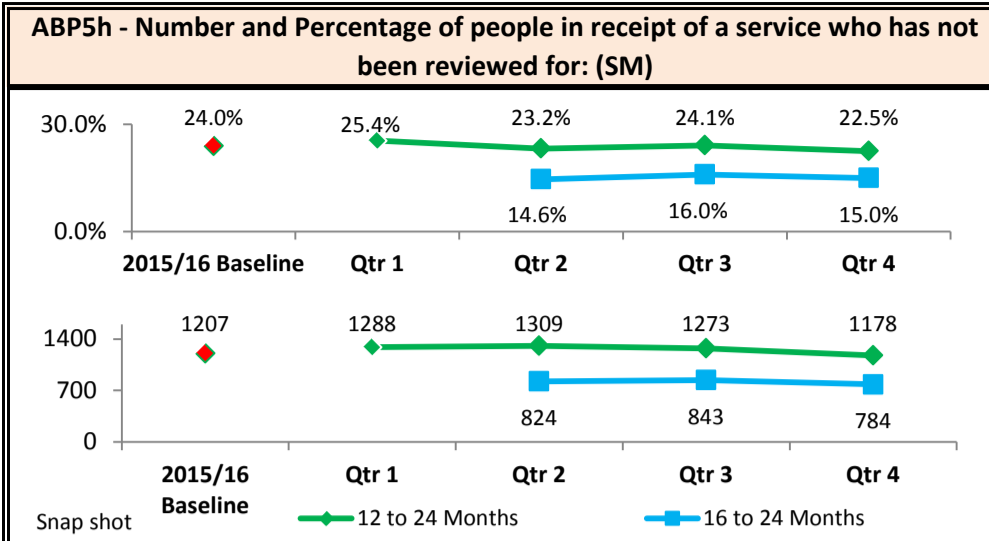
ABP3c - Proportion of people (65+) who are still at home 91 days after discharge from hospital into reablement /rehabilitation services (JS-B)	ABP3d - Proportion of older people (65 and over) offered reablement services following discharge from hospital. (JS-B)																						
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<p>DATA -</p> <ul style="list-style-type: none"> In the period 1/4/16 to 31/3/17 follow-ups, out of 878 people aged 65+, who entered rehab following hospital discharge (Jan to Dec 16), 810 (92.3%) are at home 91 days later. Please note data from Oct 16 has been updated following some discrepancies in the data which have now been corrected. 7.2% (63) people who received Rehab are deceased within three months later. 3 are admitted to residential care and 2 are in hospital unlikely to come home. <p>STATUTORY REPORTING</p> <p>In the period 1/1/17 to 31/3/17 follow-ups, out of 206 people aged 65+, who entered rehab following hospital discharge (Oct to Dec 16), 188 (91.3%) are at home 91 days later.</p> <ul style="list-style-type: none"> 7.8% (16) people who received Rehab are deceased within three months later. 1 are admitted to residential care and 1 are in hospital unlikely to come home. <p>REVIEW - Slight decrease in percentage of persons remaining home after 91 days this quarter. This could be due to uptake of more complex cases with comorbidities. However still an increase on baseline of previous year.</p> <p>ACTION - To better understand the profile of service users coming into the service and what impact this may have on the 91 day check.</p>	<p>DATA - Overall data shows a similar pattern to Q1 and Q2 with only a slight movement in the right direction. Although the percentage does not meet set targets the numbers coming into the service have increased. As we have an ageing population the numbers entering hospitals have increased and so to maintain these targets may not be feasible.</p> <p>REVIEW - We must also not lose sight of the positive work undertaken by Reablement Holding Team which helped facilitate 260 hospital discharges and also the impact of ICRS in supporting people out of hospital.</p> <p>ACTION - Take note of other services attached to Reablement that compliment the home first agenda and help facilitate timely hospital discharges.</p>																						

ABP3e - Percentage of new enablement cases allocated with 48 hrs (MM)	ABP3f - The percentage of those service users effectively enabled (QoL factors improved) (MM)																				
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<p>DATA - Taking the year end performance with the base line of 77%, achieved a 12.8% increase in Q3 with a small 4.1% decrease in the allocation of cases from the Enablement referral Team (ERT) decision process in accepting cases onto enablement.</p> <p>REVIEW - Scrutiny of this measure has proven that, providing the service achieves over the baseline, it is delivering a good service due to it not being a critical response.</p> <p>ACTION - For 17/18, the base line will increase by 8% to 85%</p>	<p>DATA - Taking the year end performance with the base line of 59%, there has been a downward trend, by 9% cumulatively over the 3 quarters. The data is taken from cases that have been referred, however there have been over 50% of cases not completed for a variety of reasons and these cases are not recorded via the QoL at the end.</p> <p>REVIEW - For those that have completed enablement, there is a marked difference in the QoL, which indicates a more robust application is required.</p> <p>ACTION - For 17/18, enablement will be completing the SAQ for NFA cases and the QoL will be more meaningful at this stage of the process.</p>																				

ABP3g - Reablement / intermediate care outcomes; result from intervention: Sequel to ST Max as per SALT (JS-B / MM)	ABP4a - Delayed transfers of care (attributable to ASC) per 100,000 pop. (AO)																								
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<p>DATA - Year-end forecast 1,420. More people completing reablement as compared to last year</p> <p>REVIEW - Going in the right direction as forecast is up on previous year.</p> <p>ACTION - To help better understand this KPI it will be beneficial to separate Reablement from Enablement. Having looked at our internal data set we had 1,382 Reablement cases go through, indicating a slight increase. from the baseline.</p>	<p>DATA - Data relates to April 16 to Feb 17.</p> <p>According to published results from Unify there have been 79 delays to date (19 from Acute Sector and 60 from Non Acute Sector).</p> <p>Please note work to crosscheck the UHL data has been undertaken with the transfers team for those patients delays for Sept to Dec 16. From the 19 patients published for the Acute sector, 10 patients have been identified as NHS only delays. These delays are to be excluded from this part ii measure. This information has been passed back to Arden and GEM to amend Unify. Acute sector data will be verifying each month by the transfer team. Having taken these 10 patients from the measure this revises the no of delays to 69 patients (2.4 per 100,000 population)</p> <p>There is no evidence to support the Non Acute delays.</p> <p>From now on for AMH 18-65 delays Sharif Haider will be signing off the delays. For LD delays, Ranjan Ravat is investigating the current process. A process to sign off these will need to be put into place.</p> <p>REVIEW - Having spoken to the EM leads on DToC, it appears that everyone had a spike in qtr 3 about the same time as Leicester City. We have discussed this with UHL and they have agreed to rectify the data on UNIFY. however, this is dependant on UNIFY agreeing to amend the data.</p> <p>ACTION - We have put a number of action in place to ensure that delays are correctly attributed. This includes scrutinising site reps, early discussions regarding delays via the red and green days initiative and monthly meetings between UHL discharge leads and HT management.</p>																								

ABP4b - Percentage of discharges completed without a discharge notice. (AO)	APB5a - Allocations by team: (I) Number of cases allocated to each team (SD)																												
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Qtr 4	7389	508																											
<p>DATA - Data indicates a pick up following a dip in the last quarter due to UHL being under particular pressures where hospitals started sending discharge notifications</p> <p>REVIEW - The creation of the LLR integrated discharge team will have an impact on this. There are a number of pathways which will be reviewed as a result of the IDT.</p> <p>ACTION - It is crucial to see how integration would affect City discharges specifically.</p>	<p>DATA - Number of cases allocated to ASC is 7389 which is 3% lower than the previous year. Total number of cases in allocation trays awaiting allocation is 508</p> <p>REVIEW- Cases are prioritised in terms of</p> <ul style="list-style-type: none"> • safeguarding concerns • need to establish capacity/Court of Protection work required • level of risk, including health and safety risks, i.e. moving and handling • Service user's situation with informal support network balanced with risk of carer strain • Outstanding debt/contribution or mismanagement of DP/inappropriate use of services • whether adequate services are in place or not, • Whether preventative services will delay the need for statutory involvement, i.e., enablement – establishing baseline/levels of independence/strengths etc. before assessing <p>ACTION - Team Leaders are checking the allocation trays regularly and prioritise the cases.</p>																												

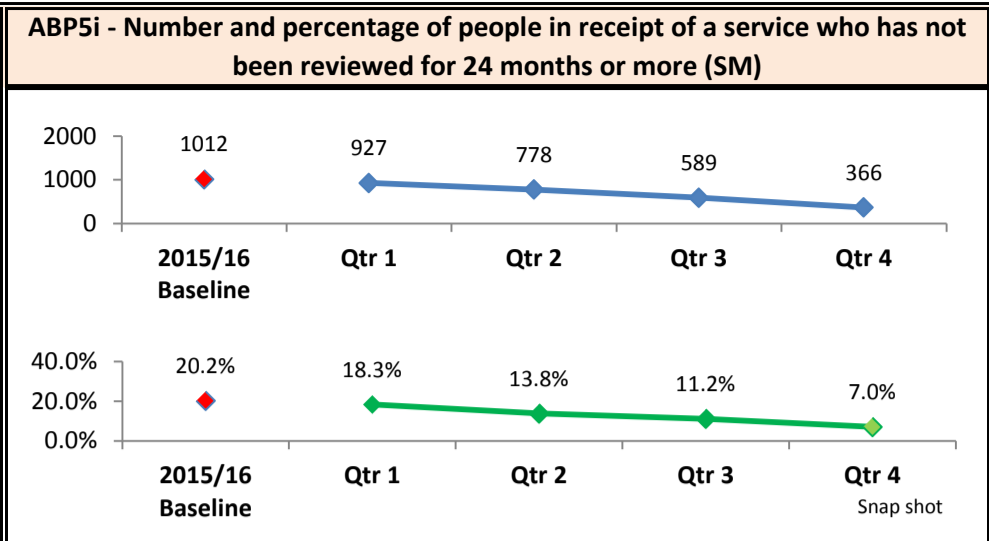




DATA - 12-24m - Numbers progressively decreasing each month. From Aug 16 has seen a decrease of -127 reviews
 16-24m - 42 less people than position as at end of Aug 16

REVIEW - We continue to see a decrease in these numbers. This is due to the planned review activity.

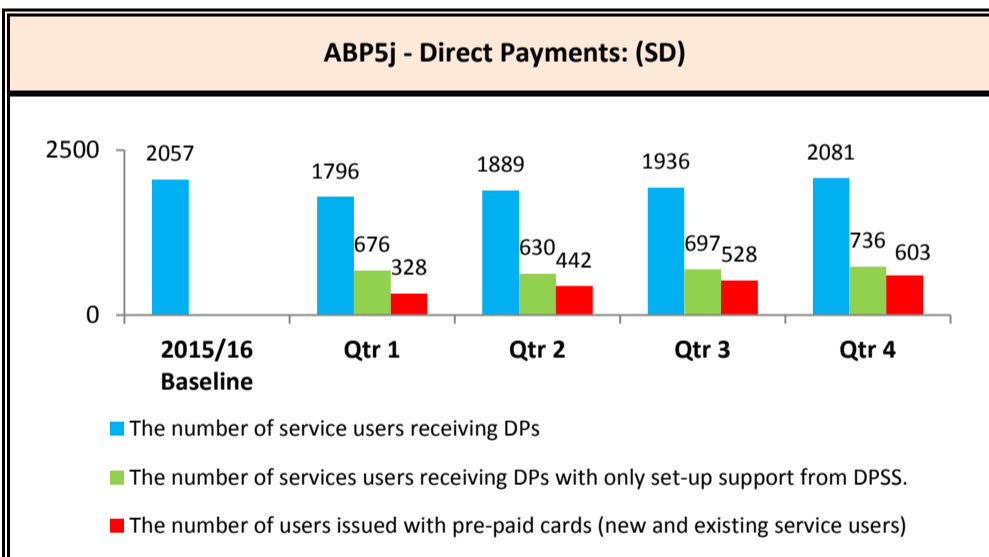
ACTION - Service areas are to plan to maintain review activity. Risk assessments to be undertaken to consider how these could be delivered (possibility of using telephone reviews, which reviews need to be more frequent/less frequent?)



DATA - Positively, each month numbers are declining for those not reviewed for 2 yrs. or more. Compared to baseline numbers have reduced by 64% (646 people reviewed)

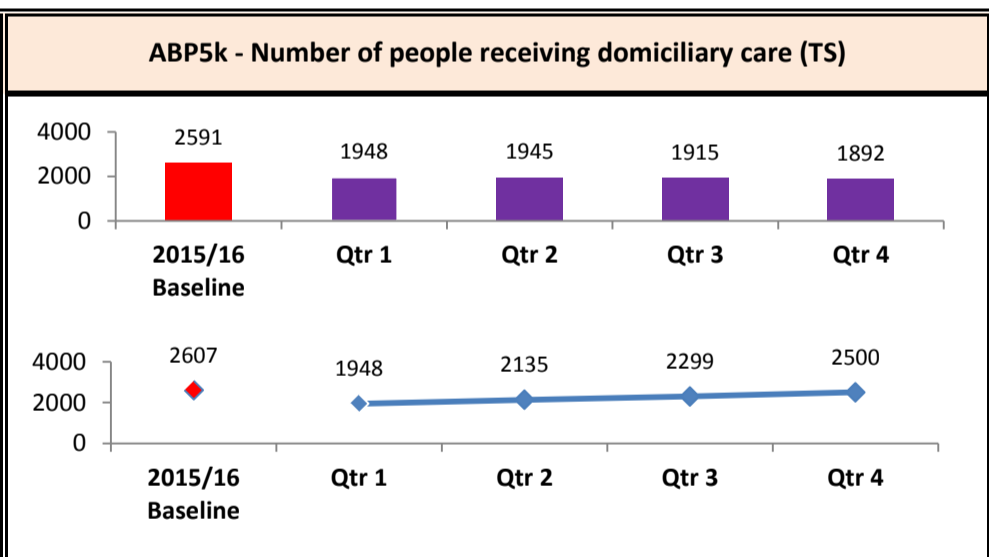
REVIEW - These numbers have decreased across the year as the oldest reviews have been prioritised. These now account for 7% of people rather than the 20% that was the case in April 2016. Services have plans in place to reduce the number to 0.

ACTION - Service areas are to plan to maintain review activity. This should then maintain a position where no one has not had a review within the last 24 months. Risk assessments to be undertaken to consider how these could be delivered (possibility of using telephone reviews, which reviews need to be more frequent/less frequent?)



DATA - Ongoing monitoring and discussions with PPC Team and continuously promote DP hence the number of PPCs are increasing
 i) The number of service users receiving DPs - 2081
 ii) The number of services users receiving DPs with only set-up support from DPSS - 736
 iii) PPC cases - 603

ACTION - Continued monitoring. A programme of audit is in progress by Internal Audit about the PPC and DP process which will further inform performance in this area. PPC CMOs secondment will end in Dec 2017 and the Care Management Teams will need to deal with activating the PPC cards

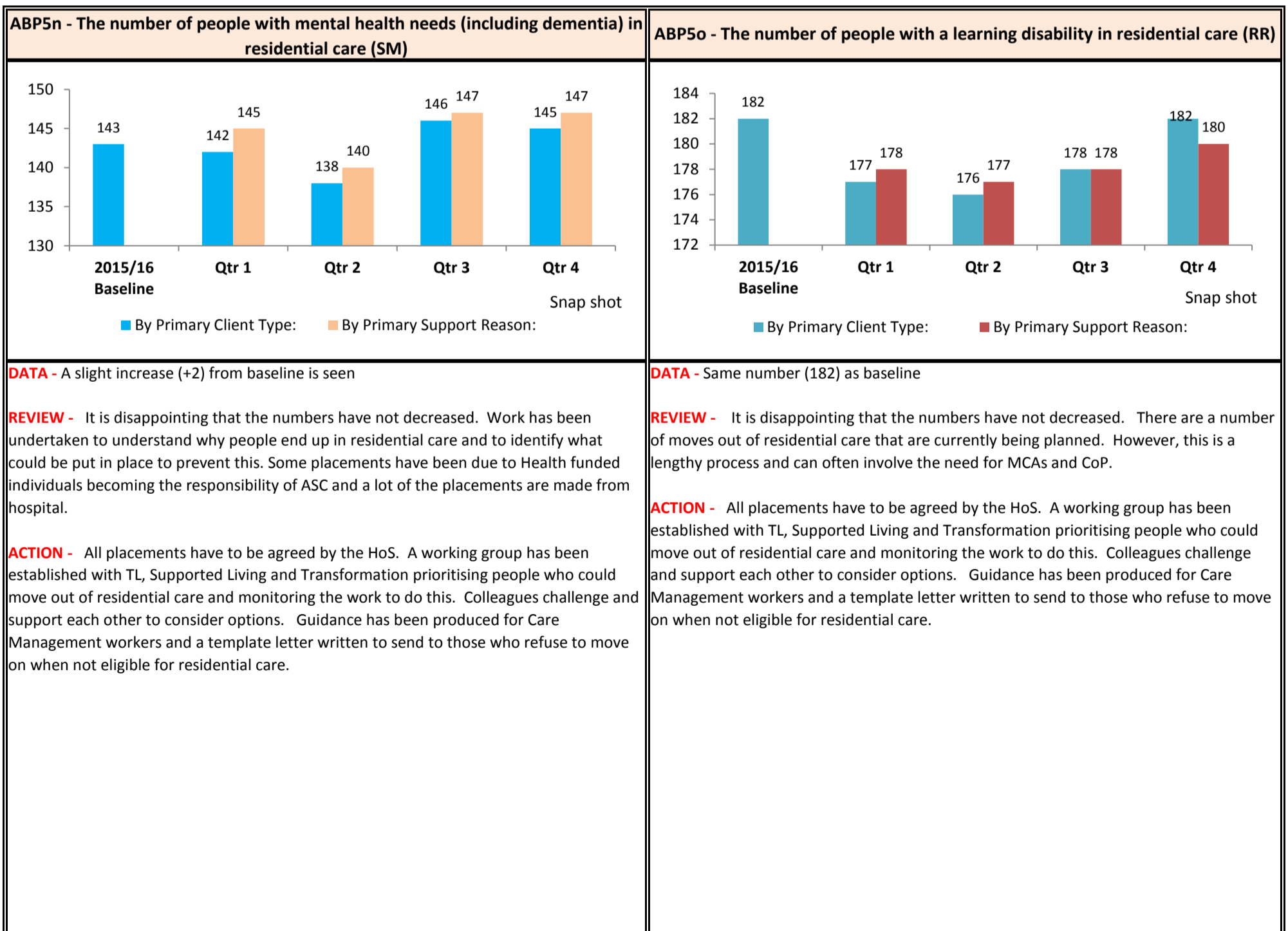
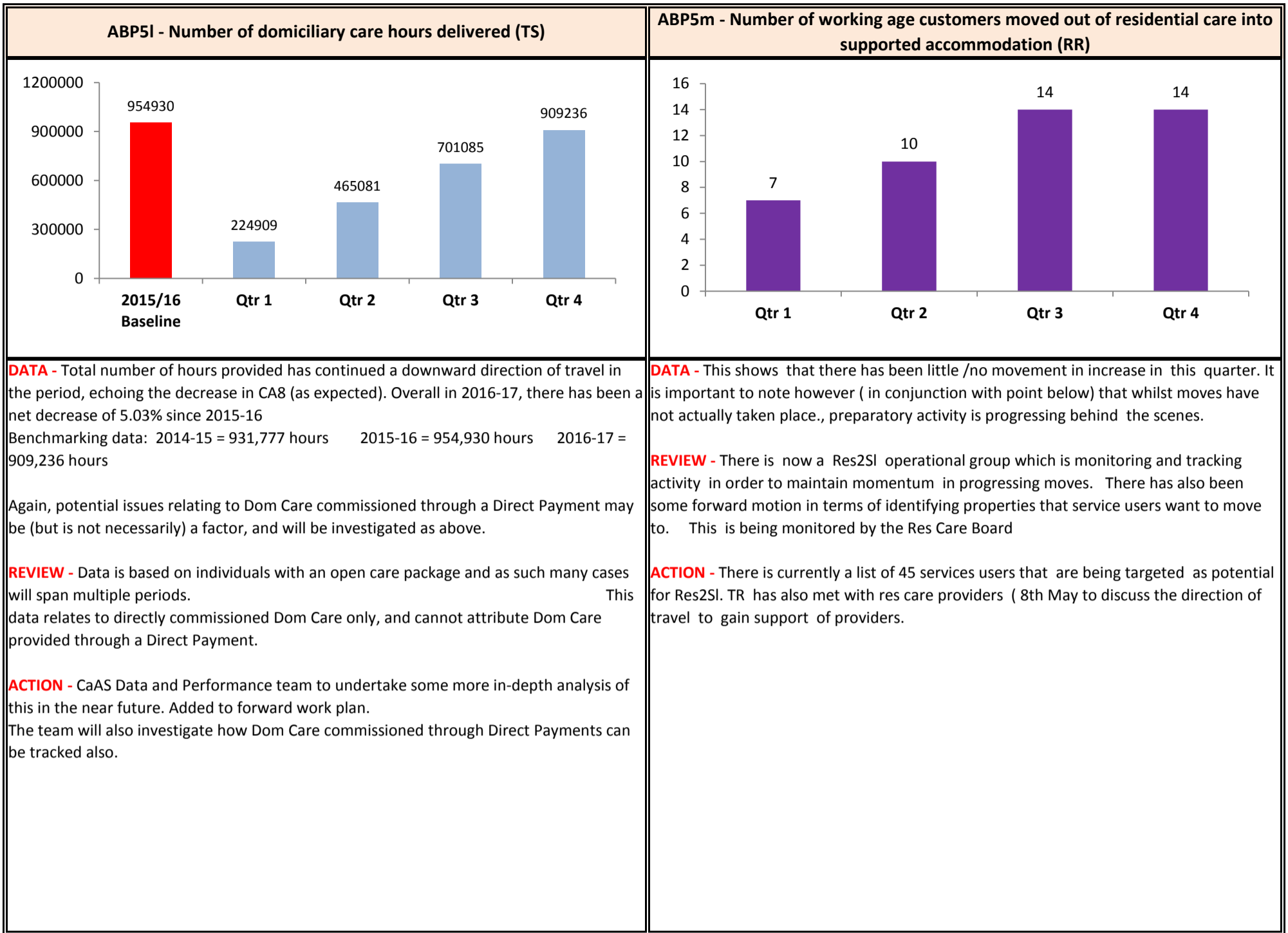


DATA - There has been a consistent decrease across 2016-17 in terms of the number of individuals in receipt of directly commissioned Dom Care, compared to previous years. Whilst this may be representative of actual activity, there are many other factors that could potentially account for this. For example, it may be that a greater number of individuals are receiving Dom Care through a Direct Payment, which would therefore mask net activity as a seeming reduction. This needs to, and will be investigated in the next period (to be reviewed for Q4 2016-17)
 Benchmarking data: 2014-15 = 2745 individuals, 2015-16 = 2591 individuals

2015-16 quarterly breakdown: Q1 15-16 = 1984 , Q2 15-16 = 1997, Q3 15-16 = 1959 , Q4 15-16 = 1955

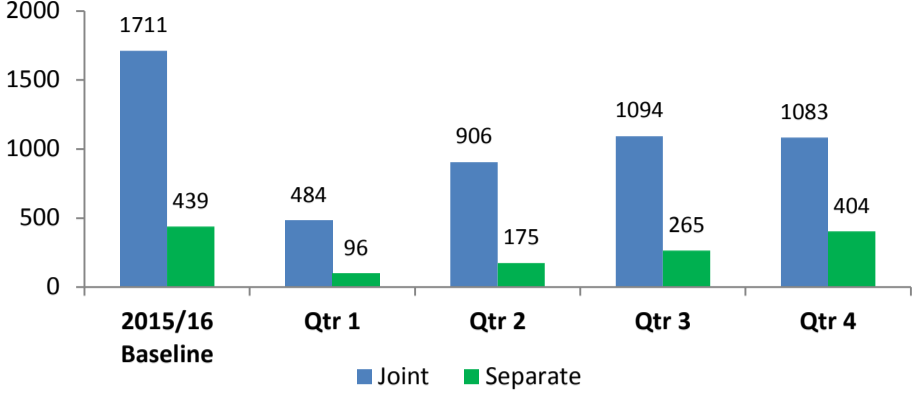
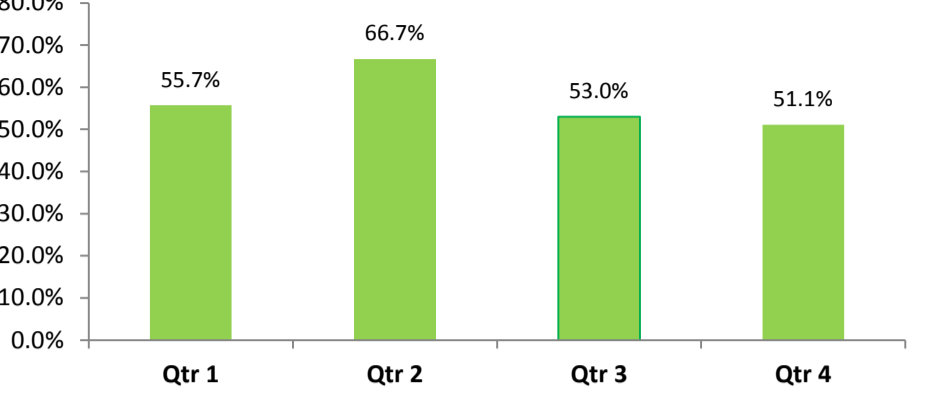
REVIEW - Data is based on individuals with an open care package and as such many cases will span multiple periods. This data relates to directly commissioned Dom Care only, and cannot attribute Dom Care provided through a Direct Payment.

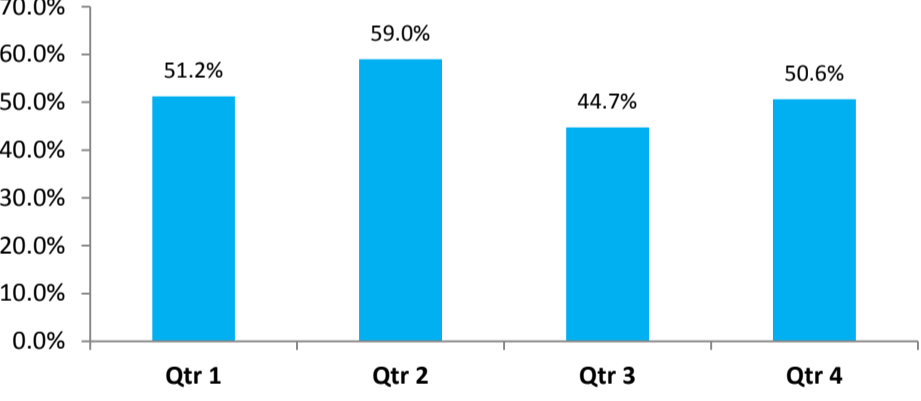
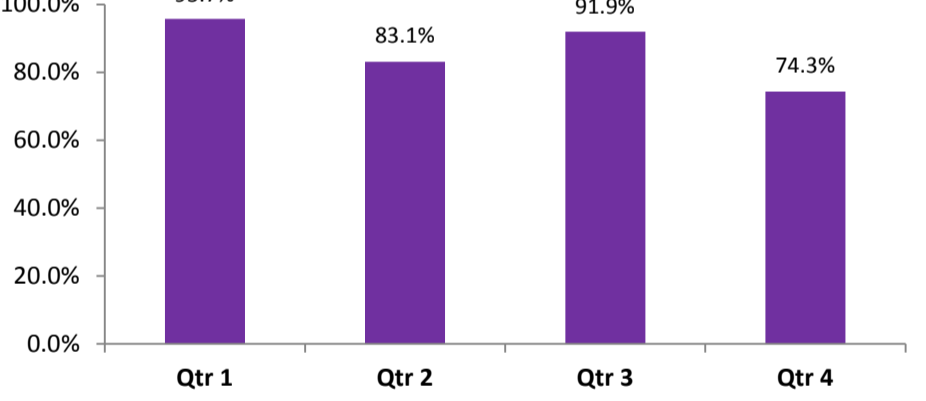
ACTION - CaAS Data and Performance team to undertake some more in-depth analysis of this in the near future. Added to forward work plan. The team will also investigate how Dom Care commissioned through Direct Payments can be tracked also.



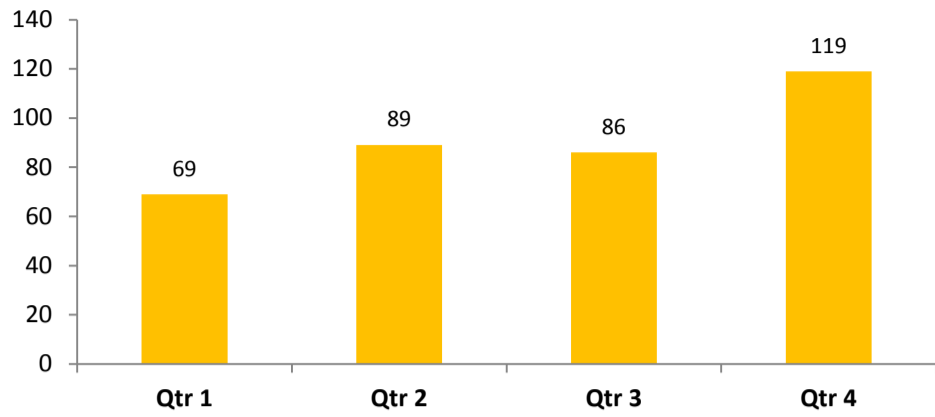
ABP5p - The number of people in interim residential care placements (BP)	ABP5q - Case management – Cases allocated to worker for more than 100 days (BP)																																				
<table border="1"> <caption>ABP5p - Interim residential care placements</caption> <thead> <tr> <th>Quarter</th> <th>Interim</th> <th>Short term</th> <th>Respite</th> </tr> </thead> <tbody> <tr> <td>Qtr 1</td> <td>5</td> <td>37</td> <td>6</td> </tr> <tr> <td>Qtr 2</td> <td>6</td> <td>64</td> <td>9</td> </tr> <tr> <td>Qtr 3</td> <td>8</td> <td>57</td> <td>12</td> </tr> <tr> <td>Qtr 4</td> <td>11</td> <td>53</td> <td>5</td> </tr> </tbody> </table>	Quarter	Interim	Short term	Respite	Qtr 1	5	37	6	Qtr 2	6	64	9	Qtr 3	8	57	12	Qtr 4	11	53	5	<table border="1"> <caption>ABP5q - Case management</caption> <thead> <tr> <th>Quarter</th> <th>Cases open for more than 100 days</th> <th>Of those had an open service</th> <th>Of those having no open service</th> </tr> </thead> <tbody> <tr> <td>Qtr 2</td> <td>738</td> <td>504</td> <td>234</td> </tr> <tr> <td>Qtr 3</td> <td>770</td> <td>555</td> <td>215</td> </tr> <tr> <td>Qtr 4</td> <td>742</td> <td>529</td> <td>213</td> </tr> </tbody> </table>	Quarter	Cases open for more than 100 days	Of those had an open service	Of those having no open service	Qtr 2	738	504	234	Qtr 3	770	555	215	Qtr 4	742	529	213
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<p>DATA - As at 31/3/17 there are 69 people in interim placements. 17 less than last year</p> <p>REVIEW - There has been a reduction in numbers of interim placements. Regular reports are being sent to HOS to check and discuss with their TLs.</p> <p>ACTION - To monitor trend.</p>	<p>DATA - Trend over each quarter remains the same.</p> <p>REVIEW - Janet is sending a list to each HOS for cases allocated over 100 days and HOS are also receiving a list from Adam for cases allocated for over 100 days and not in receipt of services, these reports will be presented to Programme Board and Leadership.</p> <p>ACTION - HOS monitoring both reports with their TLs to ensure cases are not drifting.</p>																																				

ABP5r - Number of Section 117 cases – with and without an open care package (SM)	ABP6a - Number of Carers receiving needs assessment (SD)																																				
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<p>DATA - Numbers have increased since April 2016</p> <p>REVIEW - The increase in numbers is believed to be due to better data recording. There are significant financial risks in this area as Health are reviewing the Health and joint funded packages and it is believed that many of these will become joint funded rather than fully Health funded.</p> <p>ACTION - Work continues with TLs to understand the specifics of S117 and LAs' responsibilities (and the limit of these)</p>	<p>DATA - The number of carers received needs assessment decreased by 35% since 2015/2016. The services provided for carers such as sitting service and respite care or any additional domiciliary care are recorded as part of a joint assessment.</p> <p>REVIEW - Team Leaders check carers data to make sure that information has been correctly entered and that reviews and support plans completed have been accurately counted.</p> <p>ACTION - Further enquiry and analysis needs to be undertake in view of the services provided for carers which are not capturing the commissioning activities for carers.</p>																																				

ABP6b - Number of separate assessments /Joint assessments (SD)	ABP7a -Timeliness: Proportion of enquiries begun within 24 hours following a decision that an enquiry is necessary. (JB)																												
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<p>DATA - Data quality issues - BAS team are currently working on it.</p> <p>REVIEW -</p> <p>ACTION -</p>	<p>DATA - Attempts to resolve the issues with definition interpretation of this measure have not been successful and performance continues to be at mid-range. It is acknowledged that there are data quality and collection issues that are contributing to this level of performance.</p> <p>REVIEW - Analysis has evidenced that changes are required to capture more meaningful and accurate data relating to safeguarding. This work is already in progress and it is anticipated that the new measures will be agreed and in place during Q1 17/18.</p> <p>ACTION - A full review of the SA metrics is to be undertaken, alongside definition guidance to staff. This will be a priority for Q1.</p>																												

ABP7b - Percentage of enquiries completed within 28 days (JB)	ABP7c - Percentage of people who have had their desired safeguarding outcomes met (JB)																				
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<p>DATA - Performance against this measure remains around 50 %, which is a cause for concern. Initial investigation suggests that a significant contributory factor is awaiting police processes to be completed, although Care Management interventions and MSP are also likely to impact.</p> <p>REVIEW - Analysis has evidenced that changes are required to capture more meaningful and accurate data relating to safeguarding. This work is already in progress and it is anticipated that the new measures will be agreed and in place during Q1 17/18.</p> <p>ACTION -A refreshed definition of "completed" is to be suggested, which if accepted , can be introduced during Q1. This should improve performance in this area and provide increased assurance in terms of keeping people safe. This will need to sit alongside continued monitoring by operational managers in terms of timely progression of work, which will be assisted by the dashboards.</p>	<p>DATA - Q1 and Q2 data was obtained retrospectively and due to the data rescue issue, should not be relied upon to inform a definitive view of performance. Whilst there was a steady improvement in Q3, there has been a slight drop in Q4.The reason for this is unclear, but could be due to a number of reasons, including the setting and nature of the safeguarding and associated risks, or the adoption of the regional questions. Further analysis will be required should the dip in performance continue.</p> <p>REVIEW - There have been significant data collection challenges during 16/17 regarding MSP, which are hopefully now largely resolved. There has been a concerted effort to improve on this, with MSP being a theme that will be included in all training and audit activity throughout 17/18</p> <p>ACTION - Continued monitoring to see if downward trend continues in next quarter. It has been agreed that MSP will be a theme in all audits completed by the LLR multi-agency audit group, which will add further business intelligence and organisational comparison.</p>																				

ABP7e - MSP – Number of people where the principles of MSP were adhered to (JB)

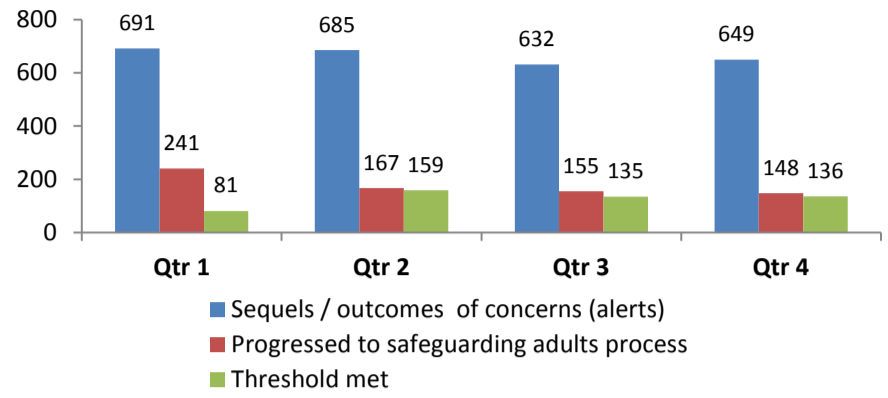


DATA - Performance is steadily improving following clear steer from MSP T&F group, completion of multi-agency audits and changes to LL reporting, which brings LCC in line with regional reporting.

REVIEW - There have been a number of data challenges for this measure in 16/17, which included a data rescue for Q1 and Q2, although at year end significant improvement can be evidenced for this measure. For 17/18 there needs to be a further embedding of MSP principles and continued monitoring to ensure that data collection systems are appropriately capturing activity.

ACTION - Continue to monitor - ensure that MSP principles are included in all SA training, make further changes to LL, undertake further audits.

ABP7f - Sequels / outcomes of concerns (alerts) (JB)

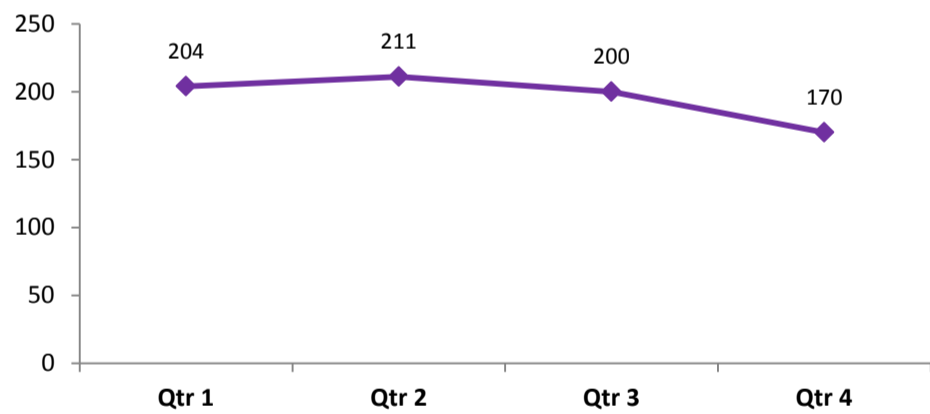


DATA -The numbers of alerts remained broadly the same in Q1 and Q2, with falls noted in Q3 and Q4. The numbers progressing to a full S42 enquiry has fallen each quarter. It has become apparent over the year that there are both data quality issues and ambiguity around the reporting measures. small adjustments have not resolved the issues.

REVIEW - Analysis has evidenced that changes are required to capture more meaningful and accurate data relating to safeguarding. This work is already in progress and it is anticipated that the new measures will be agreed and in place during Q1 17/18.

ACTION - A full review of the SA metrics is to be undertaken, alongside definition guidance to staff. This will be a priority for Q1.

ABP7g - Number of repeat enquiries within the year (JB)

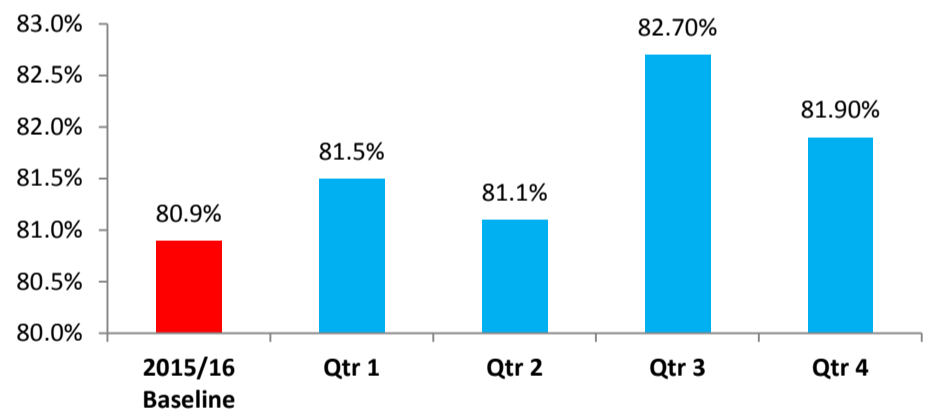


DATA - This measure looks at data over a 12 month rolling period. The number of repeat referrals has remained at broadly the same over Q1,Q2 and Q3, with a significant fall in Q4. It is important to note that as the reporting is over a 12 month rolling period, any changes will only become apparent relatively slowly.

REVIEW - Multi - agency audits evidenced data quality, process and definition issues with this measure. A solution has been identified and if agreed, a redefined measure will be introduced during Q1 17/18

ACTION - A full review of the SA metrics is to be undertaken, alongside definition guidance to staff. This will be a priority for Q1. To consider regional comparison as additional assurance.

ABP8a - Proportion of contracted providers to be compliant at the point of assessment, of those eligible to receive a QAF assessment (TS)



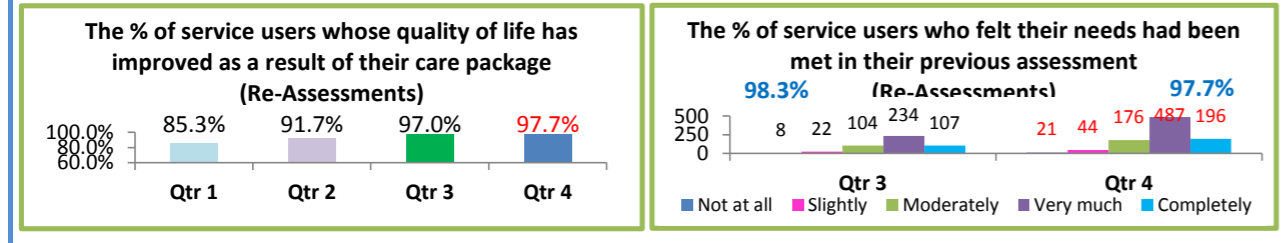
DATA - In Q4 2016-17, we have seen a slight decrease in terms of the total rate of QAF eligible QAF providers to be compliant with the QAF process (80.6% compliance). However, for non-regulated providers the compliancy rate of providers has increased from 71.4% in Q3 to 81.5% in Q4.

ACTION - All providers deemed to be non-compliant with the Quality Assurance Framework (QAF) will be subject to a follow up process by CaAS, which will include action planning and subsequent QAF reviews. It is expected that following this intervention by CaAS, all providers should be compliant within 12 months of their initial QAF assessment.

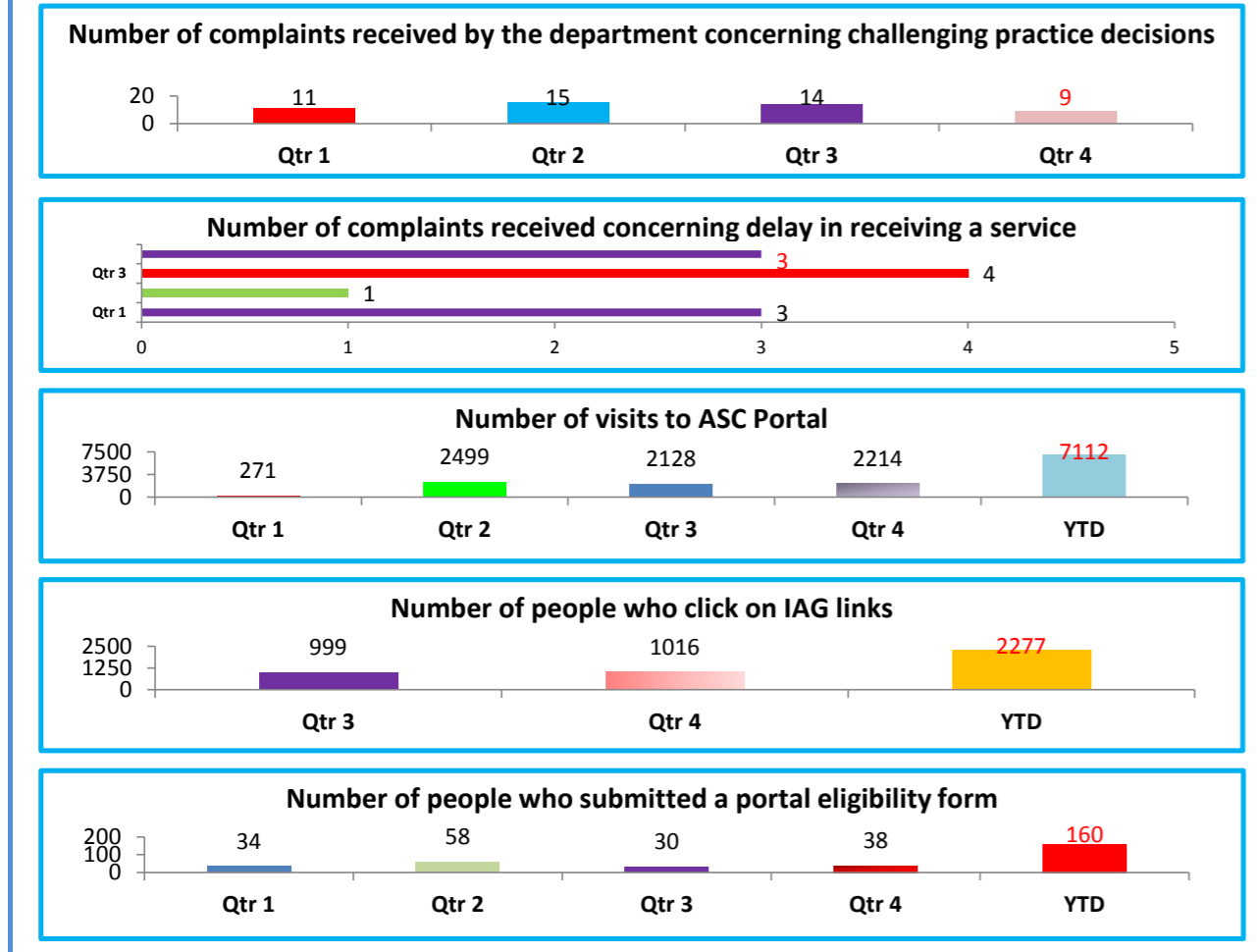
ABP8c - Total number of contract breaches within the period (Notice to Remedy Breach issued) (TS)	ABP8f - The proportion of NOCs directly related to 'Contractual Concerns' to be completed and closed within 28 days (TS)																						
<table border="1"> <caption>Data for ABP8c: Total number of contract breaches</caption> <thead> <tr> <th>Period</th> <th>Number of Breaches</th> </tr> </thead> <tbody> <tr> <td>2015/16 Baseline</td> <td>18</td> </tr> <tr> <td>Qtr 1</td> <td>6</td> </tr> <tr> <td>Qtr 2</td> <td>7</td> </tr> <tr> <td>Qtr 3</td> <td>1</td> </tr> <tr> <td>Qtr 4</td> <td>2</td> </tr> </tbody> </table>	Period	Number of Breaches	2015/16 Baseline	18	Qtr 1	6	Qtr 2	7	Qtr 3	1	Qtr 4	2	<table border="1"> <caption>Data for ABP8f: Proportion of NOCs closed within 28 days</caption> <thead> <tr> <th>Quarter</th> <th>Proportion (%)</th> </tr> </thead> <tbody> <tr> <td>Qtr 1</td> <td>53.9%</td> </tr> <tr> <td>Qtr 2</td> <td>31.7%</td> </tr> <tr> <td>Qtr 3</td> <td>42.2%</td> </tr> <tr> <td>Qtr 4</td> <td>42.9%</td> </tr> </tbody> </table>	Quarter	Proportion (%)	Qtr 1	53.9%	Qtr 2	31.7%	Qtr 3	42.2%	Qtr 4	42.9%
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<p>DATA - There has been a reduction across 2016-17 in the total number of contractual breaches imposed by the C&AS on providers</p> <p>REVIEW - Data amended: Please note that previously, it was reported that seven contract breaches were served in Q3 2016-17. However, following a data cleansing exercise, it was deemed that only one instance actually met the criteria outlined in the guidance notes. This one contract was a residential/nursing care provider</p> <p>ACTION - In Q4 2016-17, a total of two contracts were found to be in breach of contract. Both of these providers were in residential/nursing care homes</p>	<p>DATA - There has been an increase in terms of numbers of cases closed within Q4 2016-17. This is likely due to a continuation of the data clean up exercise that commenced in Q3, and also a transition to a new process. This is highlighted in the additional comments section of this return</p> <p>ACTION - CaAS have recently set up a new NOC dashboard to monitor and track NOC closure activity within the team. This will be used operationally by staff and management to monitor performance.</p>																						

ASC Customer Measures Dashboard 2016/17 Quarter 4

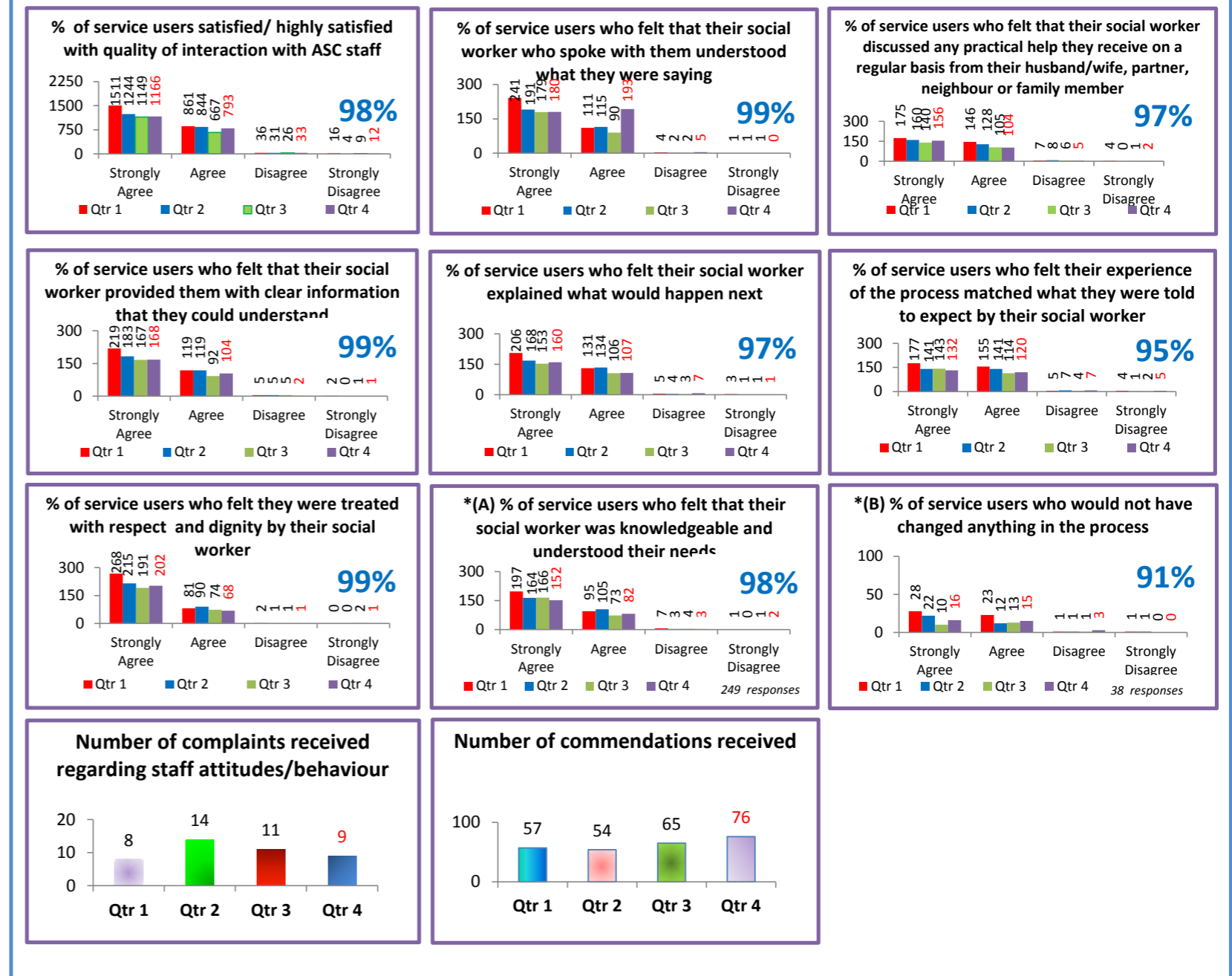
Quality of Life Outcomes



Help and support from ASC Services



Quality of interaction with ASC Services and staff



*(A) User experience of ASC services
*(B) User experience of ASC via contact & response team