

# HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

17 DECEMBER 2015

## COUNCIL PLAN Q2 2015/16 PERFORMANCE MONITORING REPORT

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Business Support Department

### Summary

Medway's four priorities are set out in the Council Plan 2015/16. This report summarises how we have performed in Quarter 2 2015/16 against the priority for this committee: Adults maintain their independence and live healthy lives. There are 15 Key Measures of Success and 5 Key Projects for this priority; however 7 of these are either data only, or data is not expected until after this report is published.

### Performance highlights

For the 8 Key Measures of Success where performance data is available this quarter:

- 62.5% Key Measures of Success were on target
- 62.5% Key Measures of Success have improved compared with the average of the previous 4 quarters

## 1. Budget and Policy Framework

- 1.1. This report summarises the performance of the Council's Key Measures of Success for 2015/16 as set out in The Council Plan 2015/16.

## 2. Background

- 2.1 This report sets out the performance summary against the Council priority relevant for this committee: Adults maintain their independence and live healthy lives.
- 2.2 It focuses on where we have achieved or exceeded our targets, and how we are tackling underperformance.

2.3 Detailed background information supporting this report can be found at:

Appendix 1: Health and Adult Social Care Overview and Scrutiny Committee Detailed Report.

### **3. Key priority 2: Adults maintain their independence and live healthy lives**

#### **3.1 Key Measures of Success: Summary**

Details of the 15 Key Measures of Success for this Council priority are included in Appendix 1; however 7 of these are either data only, or data is not expected until after this report is published.

- 5 out of 8 Key Measures of Success were on target
- 5 out of 8 Measures have improved compared with last quarter
- 5 out of 8 Measures have improved compared with average of the previous 4 quarters

#### **3.2 Service Comments**

##### **Adult Social Care**

##### **3.2.1 Key project: Care Act 2014 Implementation**

Overall, confidence in our ability to deliver the Care Act reforms in 2015/16 remains high, but like other councils, we are identifying areas of further development like financial modelling, calculating the fair cost of care and streamlining business processes. In a new phase of implementation in Medway we are integrating aspects of the Care Act and the Better Care Fund work strands. We launched the Council's new information portal in October after a short period of further user testing. Work continues to improve assessment, care planning and review processes for long term service users in particular, and we are exploring the use of nationally accredited FACE tools (a Care Act compliant assessment framework), as well as putting in place more training and better reporting. Only five assessments of people in prison have been undertaken, none leading to a service, which confirms expectations that the impact for Medway of this part of the Care Act would be low.

To date, we have delivered over 200 hours of Care Act advocacy to more than 50 people and offered over 17 Deferred Payments. The number of carers requesting an assessment since 1st April is now over 500 and set to exceed the thousand mark by April next year on current projections. Currently we are undertaking demand modelling to assess whether the implementation grant will continue to be sufficient to meet our obligations.

##### **3.2.2 Key Project: Making safeguarding personal**

The Making Safeguarding Personal (MSP) programme, led by the Association of Directors of Adult Social Services (ADASS) and the Local Government Association (LGA), with funding from the Department of Health, is a national initiative to improve the quality of practise in adult safeguarding. It follows the principle of 'no decision about me without me' and means that the adult, their families and carers are working together with agencies to find the right solutions to keep people safe and support

them in making informed choices. Medway Council signed up to the programme in 2014 and it is being led by the Principal Officer for Safeguarding Adults.

The Care Act 2014 placed the safeguarding of vulnerable adults on a statutory footing. The Kent and Medway Safeguarding Adult Board is currently approving a 3-year strategy (2015-2018). Revised multiagency policy, protocols and guidance were published in April 2015 to give staff clear guidelines on Section 42 enquiries. The Board has also revised and published their associated multiagency policies: Self Neglect Policy and the Joint Police, Social Services and Health Protocol for dealing with cases of domestic abuse where adults at risk are involved.

During 2014/15, Medway had 604 adult safeguarding concerns/alerts which led to 244 safeguarding referrals/enquiries. In the first six months of 2015/16 there were 362 concerns raised which led to 123 enquiries, projecting a healthy increase in concerns, but no significant increase in referrals by the end of March 2016. There have been no serious case reviews in any of the last four years of formal reporting.

### 3.2.3 Key Project: Better Care Fund programme

The Council Plan currently monitors a local measure of delayed transfers of care and admissions to residential care. In order to better align monitoring arrangements, it is recommended that future quarterly monitoring will be based on quarterly days of delay, in line with the national Better Care Fund metric, and will include those attributable to Adult Social Care alone.

Annual performance data is now available for four of the Better Care Fund metrics against targets established in 2014:

Indicator	2014/15 Target	2014/15 Actual
Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population	587.4	719.8
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	92.5%	85.3%
Proportion of people feeling supported to manage their condition	62%	47%
Delayed transfers of care (delayed days) from hospital per 100,000 population (aged 18+).	505.3	875.6
Injuries due to falls in people aged 65 and over (Local Measure - now being replaced with one on Length of Stay in Hospital)	N/A	N/A

Care home admissions are now being calculated using a new methodology based on what is expected to happen to a person, rather than what actually happened. The latest Q2 data shows a continued drop in admissions, but this is still well above target.

The increase in the use of reablement has affected the number still at home 91 days after discharge. The number still at home in 2015 (139) were more than the total number receiving reablement in 2014 (120). Quarterly data is not available for this measure.

The proportion of people feeling supported to manage their long term condition is based on the GP survey results. The target was ambitious and has not been achieved; but there has been no statistically significant change in either the local or national results for this indicator. Again, quarterly data is not available.

Reducing 'bed blocking' in hospital, where people are medically fit to be discharged but have no placement, is a key priority for all partners in the Medway health and social care economy and a measure of success of Better Care Fund activity. Medway residents being discharged from hospital may need care that would be supported by health agencies, by Medway Council, or support that is organised by families themselves. The average number of people who have a delayed transfer from hospital due to waiting for support or placement by Medway Council remains very low – an average of six per month over quarters one and two. The numbers across the health and social care economy as a whole that are not attributable to the council has increased, though remains at national average rates. The increase is in part due to more accurate reporting by Medway Foundation Trust. The Medway health and social care economy is one of 28 across the country receiving intensive support through the Department of Health (DOH) Emergency Care Improvement Programme (ECIP) so in this context it is proposed that the Health and Well Being Board continue to focus on system wide performance, and council plan monitoring focuses on the council's direct contribution. The measures included in appendix 1 have been recalculated to align with the national methodology now used by DOH to count delayed transfers of care which uses a monthly snapshot count and includes Medway residents in Medway and other local hospitals.

## **Public Health**

### **3.2.4 Key Project: Social isolation**

Following approval of the Medway social isolation strategy by Cabinet an implementation plan has been produced in consultation with partners. An implementation group has been established to oversee delivery of the plan and provide a forum for partnership working to maximise effectiveness.

The following actions have been undertaken:

- An information resource for older people with respect to activities to reduce social isolation in Medway is being developed and a first draft has been produced.
- A social isolation summit will be held on 9 December and the resource will be launched at this event.
- Social isolation chapter of the Joint Strategic Needs Assessment has been completed.
- Partnership working with the Kent Fire and Rescue Service is being developed to support identification and signposting of socially isolated and vulnerable older people to appropriate services.

### **3.2.5 Key Project: Supporting healthy weight programme**

During quarter 2, Medway Council hosted its annual obesity summit, which brought together a wide range of public, private, voluntary and academic partners. The Portfolio Holder for Adult Services welcomed over 25 partner organisations to the event, with the 80 delegates hearing the progress that has been made since the first event in 2014. Successes of the previous year include a healthy eating project within nurseries and pre-schools, Medway's role as a

demonstrator site to prevent diabetes, enhancing the existing walk to school initiatives, the hot food takeaway guidance note and the ongoing collaboration between Public Health and Planning. The event also featured updates on projects from wider partners such as Tesco's Farm to Fork Project in Strood, highlighting the importance of external partners' role in promoting healthy eating and physical activity to residents. The afternoon was focused on what more can be done, to maintain the progress the partnership has been making. Moving forwards, the network will continue to evolve and is on track to develop a formal framework of action by the end of the year.

#### **4. Risk management**

Risk management helps to deliver performance improvement and is at the core of decision-making, business planning, managing change and innovation. It is practised at both management and service delivery level, enabling the effective use of resources, and securing the assets of the organisation and its continued financial and organisational well-being.

The purpose of the Council Plan performance monitoring reports during the year is to enable managers and Members to manage the key risks identified in delivering priorities.

#### **5. Financial and legal implications**

There are no financial or legal implications arising from this report.

#### **6. Recommendations**

It is recommended that Members:

- Consider and note the Q2 2015/16 performance against the Key Measures of Success used to monitor progress against the Council Plan 2015/16.

#### **7. Lead officer contact**

Anthony Lewis, Corporate Performance and Intelligence Manager ext.2092

#### **8. Background papers**

Council Plan 2015/16

<http://www.medway.gov.uk/thecouncilanddemocracy/thecouncilsplanformedway.aspx>

#### **9. Appendices:**

Appendix 1: Health and Adult Social Care Overview and Scrutiny Committee Detailed Report.














## Appendix 1





### Council Plan Monitoring - Q2 2015/16

### Health and Adult Social Care Overview and Scrutiny Committee Detailed Report.

#### Key

PI Status	Trend* Arrows	Success is
 This PI is significantly below target	 The performance of this PI has improved	 Higher figures are better
 This PI is slightly below target	 The performance of this PI has worsened	 Lower figures are better
 This PI has met or exceeded the target	 The performance of this PI is static	N/A - Desired performance is neither too high nor too low
 This PI is data only. There is no target and is provided for reference only.	N/A – Rating not appropriate / possible, or target is cumulative	
*Short trend compares to last quarter.		
*Long trend compares to average of previous 4 quarters.		

2.1 We will work closely with our NHS and voluntary sector partners

Code	Short Name	Success Is	2013/14	2014/15	Q1 2015/16	Q2 2015/16			Q2 2015/16	2015/16	Note	
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend		Target
ASC07ii	Delayed transfers of care from hospital which are attributable to adult social care		N/A	4	4	6	7				NA	<p>06-Nov-2015 Reducing 'bed blocking' in hospital, where people are medically fit to be discharged but have no placement, is a key priority for all partners in the Medway health and social care economy and a measure of success of Better Care Fund activity. Medway residents being discharged from hospital may need care that would be supported by health agencies, by Medway Council, or support that is organised by families themselves. The average number of people who have a delayed transfer from hospital due to waiting for support or placement by Medway Council remains very low – an average of six per month over quarters one and two. The numbers across the health and social care economy as a whole that are not attributable to the council has increased, though remains at national average rates. The increase is in part due to more accurate reporting by Medway Foundation Trust. The Medway health and social care economy is one of 28 across the country receiving intensive support through the Department of Health (DOH) Emergency Care Improvement Programme (ECIP) so in this context it is proposed that the Health and Well Being Board continue to focus on system wide performance, and council plan monitoring focuses on the council's direct contribution. This measure has been recalculated to align with the national methodology now used by DOH to count delayed transfers of care which uses a monthly snapshot count and includes Medway residents in Medway and other local</p>



Code	Short Name	Success Is	2013/14	2014/15	Q1 2015/16	Q2 2015/16			Q2 2015/16	2015/16	Note	
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend		Target
ASC13	Permanent admissions to residential and nursing care homes, per 100,000 population – 18-64		NA	19.55	3.55	1.18	3.5				14	16-Oct-2015 In Q2 there were 2 admissions. This is 1.18 admissions per 100,000. However due to retrospective systems updates it is expected that additional admissions will occur leading to a revision of this figure. The target has been set in line with the recently published national average.
ASC14	Permanent admissions to residential and nursing care homes, per 100,000 population – 65+		NA	741.94	160.22	150.36	144				576	16-Oct-2015 in Q2 there were 61 admissions which is 150.36 per 100,000 population. This is expected to increase as admissions are updated retrospectively. The target was established as part of the Better Care Fund Programme.
ASCOF 2Bii	The percentage of older people offered reablement services on discharge from hospital		NA	NA	Not measured for Quarters	Not measured for Quarters			Not measured for Quarters	3.3%	This is an annual measure and will be reported at year end	

2.2 We will ensure that people have choice & control in support

Code	Short Name	Success Is	2013/14	2014/15	Q1 2015/16	Q2 2015/16			Q2 2015/16	2015/16	Note	
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend		Target
ASC18	The percentage of clients accessing services through self directed support		NA	NA	80.6%	88.8%	81%				81%	09-Oct-2015 The target for quarter 2 has been exceeded with 88.8% of clients accessing their service via a direct payment or personal budget. Reviews since June are all Care Act compliant which should result in

Code	Short Name	Success Is	2013/14	2014/15	Q1 2015/16	Q2 2015/16			Q2 2015/16	2015/16	Note	
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend		Target
ASC19	The percentage of clients accessing services through a direct payment		NA	NA	24.7%	25.4%	25%				25%	a continuing increase in personalisation. 26-Oct-2015 The target for quarter 2 has been reached with 25.4% of clients receiving a direct payment. Overall numbers remain broadly static, but a fresh approach to reviewing existing cases is being introduced to promote independence and the use of direct payments in line with Care Act requirements and to reduce care package sizes and costs.
ASC0F 1B	The percentage of service users who report they have control over their daily life		NA	NA	Not measured for Quarters	Not measured for Quarters			Not measured for Quarters	76.7%	This is an annually reported figure. Provisional results are expected to be available towards year end	

2.3 We will support carers in the valuable work they do

Code	Short Name	Success Is	2013/14	2014/15	Q1 2015/16	Q2 2015/16			Q2 2015/16	2015/16	Note	
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend		Target
ASC02	Carer satisfaction with adult social care services		46.70	40.90	Not measured for Quarters	Not measured for Quarters			Not measured for Quarters	46.00	This is an annually reported figure. Provisional results are expected to be available towards year end.	
ASC10	Carers receiving an assessment or review		26.5%	30.9%	6.3%	14.4%	15.0%				30.0%	12-Oct-2015 511 carers assessments have been completed so far this year, which relates to an average of 85 per month. A further 22 assessments would have needed to be completed to have met the target for the end of Q2.
ASC17	The proportion of carers who felt that they had been included or consulted in discussions about the		NA	72.9	Not measured for Quarters	Not measured for Quarters			Not measured for Quarters	75	This is an annually reported figure. Provisional results are expected to be available towards year end.	



Code	Short Name	Success Is	2013/14	2014/15	Q1 2015/16	Q2 2015/16			Q2 2015/16	2015/16	Note
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	
	person they care for										







2.4 We will ensure that disabled adults and older people are safe

Code	Short Name	Success Is	2013/14	2014/15	Q1 2015/16	Q2 2015/16			Q2 2015/16	2015/16	Note	
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend		Target
ASC SVA 01	Number of SVA alerts	N/A	NA	244	217	362	NA		NA	NA	NA	09-Oct-2015 There have been 362 safeguarding alerts raised so far this year, an average of 60 per month.
ASC04	The proportion of people who use services who say that those services have made them feel safe and secure		86.95	84.17	Not measured for Quarters	Not measured for Quarters			Not measured for Quarters	65.00	This is an annually reported figure. Provisional results are expected to be available towards year end.	

2.5 We will promote & encourage healthy lifestyles for adults

Code	Short Name	Success Is	2013/14	2014/15	Q1 2015/16	Q2 2015/16			Q2 2015/16	2015/16	Note	
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend		Target
PH10	Percentage of people completing an adult weight management service who have reduced their cardiovascular risk		NA	76.4%	76.8%	76.7%	70.0%				70.0%	29-Oct-2015 The good level of performance has been sustained. 108 clients attended a new assessment for Tipping the Balance adult weight management programme in quarter 2. Of the 271 exercise referral assessments that took place, 137 (50.6%) completed the 12 week programme. Of all completers for both programmes, 76.7% of them achieved a reduction in their cardiovascular risk(i.e. significant reduction in blood pressure, cholesterol, weight, waist

Code	Short Name	Success Is
PH13	Rate per 100,000 of self-reported 4 week smoking quitters aged 16 or over	
PH9	Number of cardiovascular health checks completed	

2013/14	2014/15	Q1 2015/16	Q2 2015/16				Q2 2015/16	2015/16
Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target
868	665	131	131 Q1	63 Q1				588
NA	7,583	1,399	3,176	3,250				6,500

Note
circumference or increase in basic physical activity)
29-Oct-2015 Q2 data not yet available. In Q1 131 per 100,000 population quit, higher than the target of 63 per 100,000, Medway has seen a decline in the numbers setting a quit date and successful quitters, as has England. However, Medway has consistently achieved rates higher than the England average. Declining quit attempts may be due to factors such as the increased numbers of people using electronic cigarettes (E-cigs), lack of national advertising and access to illicit tobacco. The service is now able to provide behavioural support to those that are using E-cigs. Success rates remain stable at around 47% of those who set a quit date successfully quitting in Medway. The Stop Smoking Team has launched a High Street shop to raise awareness and to provide services in a town centre location.
08-Oct-2015 The health check programme is slightly behind target for the half year point, due to a vacancy which has now been filled. It is not anticipated that this will affect the year end target. A detailed feedback report has been circulated to each practice to encourage better performance and this will continue at regular intervals throughout the year. Furthermore all practices have been encouraged to invite patients earlier to avoid the winter activity surge in appointments which usually starts in November.