

**HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE -  
07 DECEMBER 2023  
Quarter 2 2023/24**

**Strategic risks relevant to this committee**

Live or Managed risk	Risk Ref	Risk	Inherent Risk Score	Q2 22/23 Current Risk Score	Q3 22/23 Current Risk Score	Q4 22/23 Current Risk Score	Q1 23/24 Current Risk Score	Q2 23/24 Current Risk Score	Move ment	Definition (Current score) (L-likelihood) (I-impact)	Owner	Portfolio	Link to Council Plan
L	SR09A	Meeting the needs of Older People and Working Age Adults	AI	BII	BII	BII	BII	BII	→	L – likely I – major	Director of People – Children and Adults Services and Deputy Chief Executive	Deputy Leader	People

Full details of strategic risks relevant to this committee can be found in Appendix 2.

## Performance by outcome

Key

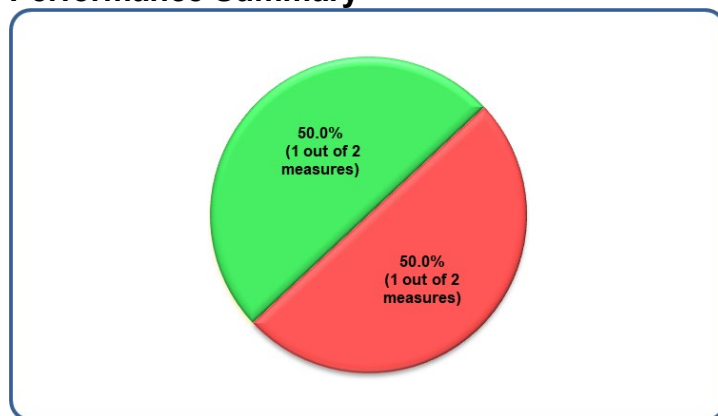
<b>Red</b>	Significantly below target (>5%)	<b>Amber</b>	Slightly below target (<5%)	<b>Green</b>	Met or exceeded target
<b>DET</b>	Deteriorating	<b>STATIC</b>	Static	<b>IMP</b>	Improving
<b>Short term</b>	since last quarter	<b>Long term</b>	average last 4 quarters	<b>Goldilocks</b>	Optimum performance is in a target range

## Council Priority: PEOPLE Supporting residents to realise their potential.

**Outcome: Healthy and active communities**

**Programme: Improving everyone's health and reducing inequalities**

### Performance Summary



The total number of measures is 3.

1 measure is not available this quarter [PH34]

1 measure met its target [PH13]

1 measure was significantly below target [PH23]

The green measure is deteriorating long term [PH13]

The red measure is deteriorating long term [PH23]

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
PH13	Rate per 100,000 of self-reported 4-week smoking quitters aged 16 or over (cumulative) (Q1 23/24)	Maximise	63	59	Green	DET	DET

**Comments:**

- This performance measure is measured a quarter in arrears.
- To the end of Q1 23/24, across the whole service, there have been 246 quit attempts providing a 57% success rate.
- In total, 73% of all quits in Q1 have come from the core stop smoking team. The core team's success rate is 59% and the lost to service rate is low at 16%. The service is looking into improving ways of obtaining qualitative feedback from service users.
- General Practitioner (GP) and pharmacy settings continue to see lower activity for smoking cessation. Some engagement work has taken place with key barriers being described as capacity, and the loss of stop smoking medication Champix. The service continues to work and engage with these settings to explore new ways of working which could increase activity.
- The service is working with local acute and maternity settings as well as the local NHS to implement the NHS Long Term Plan (LTP). The NHS LTP is fundamental in making England a smoke-free society by supporting people in contact with NHS services to quit based on a proven model implemented in Canada and Manchester. By the end of 23/24, all people admitted to hospital who smoke will be offered NHS funded tobacco treatment services.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
PH23	Number of new settings which are dementia friendly (cumulative).	Maximise	0	2	Red	STATIC	DET

**Comments:**

- No new dementia friendly settings have been added in Q2 23/24. This is while the Dementia Action Alliance assess options for the ongoing support on settings to become dementia friendly following the stepping back of the Alzheimer Society.
- The group will be meeting in early November 2023 to validate the training approach outlined in the Q1 23/24 update whereby dementia friendly training will be delivered with the support of Public Health Workforce Development.
- At this meeting, we will also explore the possibility of transferring the dementia friendly accreditation process to a joint operation with the Kent Dementia Action Alliance, as this aligns with the invitation to co-host an awards event in summer 2024. This event will recognise the strides made by communities across Kent to improve their accessibility to those living with dementia.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
PH34	Proportion of people who self-report high levels of life satisfaction (22/23 annual)	Maximise	NA	80.00%	NA	NA	NA

**Comments:**

- The 2022/23 target is to be based on the England value for 2021/22.
- The Medway value for 2022/23 is not available yet. This will likely be available around October 2023 (based on previous release dates). The specific release date of this data is to be confirmed.

**Project for this outcome:****Supporting Healthy Weight:**

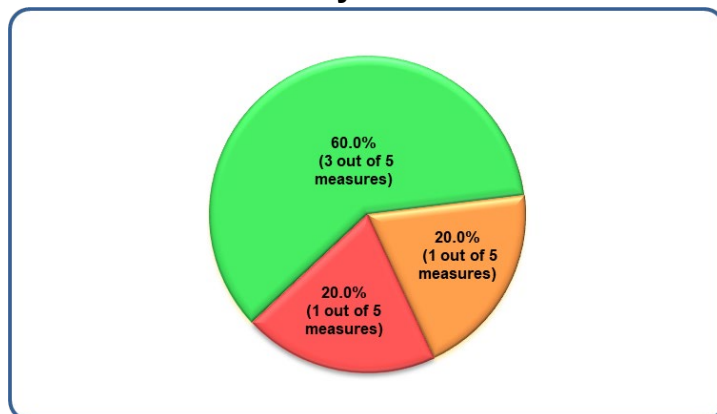
- In September 2023 the Medway Health and Wellbeing Board reviewed the proposed annual priorities for the Medway Healthy Network. These include Medway being awarded Sustainable Food Place status. This award is designed to recognise and celebrate the success of those places taking a joined up, holistic approach to food. Medway has submitted its application for the bronze status. A second priority of the network is to refresh the Infant Feeding Strategy. This document has been co-developed with residents and key stakeholders, using key insights and detailed data analysis. The strategy was formally adopted by Medway Council at the cabinet meeting on 26 September 2023. The final priority of the network is to enhance the reach of the Physical Activity Alliance. The next alliance meeting will be taking place in November 2023 with over 50 people booked to attend from a wide range of partner organisations. These partners share the same passion for supporting adults and children to take part in regular physical activity.
- Food for Life Medway is a three-year programme commissioned by Medway Council's Public Health team, working with schools to champion healthy and sustainable food through the whole school approach. Food for Life is a part of Medway's whole-systems approach to tackle and prevent childhood obesity. To achieve a Food for Life Award, schools submit evidence across four pillars: Food Quality; Food Leadership & Culture; Food Education; and Community & Partnerships. Each completed criteria demonstrates a significant practical change that can be sustained over time. In its first year Food for Life Medway is proud to share that:
  - ❖ 20 schools have enrolled with Food for Life. This includes 16 primary schools, one special educational needs (SEN) school, two secondary schools and one alternative provision.
  - ❖ One Special Educational Needs school achieved a Food for Life Bronze Award.
  - ❖ Nine schools are actively working towards a Food for Life Award.
  - ❖ 104 award criteria have been achieved.

- ❖ Eight criteria submissions have been ranked as evidence of national best practice.
- ❖ 36 school and Medway Council staff have participated in cooking and growing training.
- ❖ 97% of staff felt confident to deliver food and growing activities after training.

## Outcome: Older and disabled people living independently in their homes

Programme: Improve support for vulnerable adults by working with partners and communities

### Performance Summary



The total number of measures is 5.  
 3 measures met their target [ASCGBT001; ASCOF 2A(1); ASCOF 2A(2)]  
 1 measure was slightly below target [ASCOF 1G (n)]  
 1 measure was significantly below target [ASCOF 1C(2i)]

The red measure is deteriorating long term [ASCOF 1C(2i)]

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ASCGBT001	% of long-term packages that are placements	Minimise	29%	30%	Green	IMP	IMP

### Comments:

- The proportion of clients receiving a long-term service that is a placement has reduced.
- There are 880 clients in placements.
- However, whilst this is an improvement it is a product of there being a smaller rise in the number of placements in relation to the rise in the number of clients.
- There are currently 880 clients in residential or nursing placements, which is 1.6% more than last month.
- There are 3,039 long term clients, a rise of 4.6% compared to the 2,904 long term clients at the end of Q1 23/24.

### Benchmarking:

- National data for 21/22, is 29%, a slight decrease from 20/21.

**Actions:**

- A significant number of admissions to care for older people occur on hospital discharge. There has been a marked increase in acuity of need.
- The service continues to monitor the number of placements made, particularly from hospital and to undertake the first reviews in a timely manner as this is critical to ensure placements remain appropriate.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ASCOF 1C(2i)	Percentage of clients receiving a direct payment for their social care service	Maximise	24%	33%	Red	DET	DET

**Comments:**

- There has been a further drop in the percentage of clients receiving a direct payment (DP).
- At the end of July there were 511 clients out of 2,317 receiving an ongoing DP. The Q1 23/24 figure for the performance measure was 25%.
- Compared to last quarter, the number of clients with a DP (numerator) has dropped by 1.1% and the denominator has risen by 4.8%.

**Benchmarking:**

- Nationally 26.7% of clients with an ongoing long-term service receive a direct payment.
- Our statistical neighbours' performance is 29.3%.
- Both comparators have seen a decline in performance compared to their 20/21 results.

**Actions:**

- We continue to receive a disproportionate number of referrals for cases that contribute to the numerator. To date only 9% of the referrals received by the DP team relate to this measure. The remainder is made up of payment to carers and children, neither of which are included in the numerator.
- We have agreed that referral targets will be set for locality teams.
- The actions below continue:
  - ❖ Self-directed support (SDS) Team Manager to attend locality team meetings to improve confidence in making referrals.
  - ❖ SDS Representative to be present at Adult Social Care (ASC) best practice panel.
  - ❖ Reviewing packages with brokerage that could be better managed by the service user and or their representative. These are usually packages where frequent variations are made.
  - ❖ Resource is now focused on referrals that contribute towards the numerator.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ASCOF 1G (n)	Proportion of adults with a primary support reason of learning disability support who live in their own home or with their family	Maximise	62%	65%	Amber	IMP	IMP

**Comments:**

- There has been a 7-percentage point (pp) rise in the proportion of learning disability (LD) clients who live in their own home or with family.
- Of the current 619 LD clients 383 (62%) are in their own home or living with family and have had a review in the last 12 months.
- 98 (16%) are living in their own homes or with family but haven't had a review in the last 12 months. This is an improvement (the figure has reduced) of 5pp on last quarter.
- 78% are in the desired type of accommodation.
- There are 138 clients not living with their families or in their own homes. Just over 81% of these are in residential or nursing homes. Accommodation in a care setting is, in many cases, the most appropriate place to provide the care and support needed and should not be viewed negatively.
- These figures represent a positive outcome in terms of where people are living, and the work done by the teams to complete reviews.

**Benchmarking:**

- The current national outturn is 79% and our statistical neighbours' is 81% (21/22 data).

**Actions:**

- The service is focusing on completing reviews over the next three months; this is being managed in a way that does not affect completion of assessments.
- The service is working with colleagues in both Systems, and Performance and Intelligence, to improve the way in which professionals record accommodation status.
- In addition, communication has gone out to all Locality Social Work Team Managers to ensure teams are recording accommodation status in the correct way to ensure data can be captured.



PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ASCOF 2A(1)	Permanent admissions to care homes per 100,000 pop – 18-64	Minimise	Redacted	4	Green	IMP	IMP

**Comments:**

- Please note the annual target (16) for this performance measure is apportioned across each quarter (4 per quarter).
- There has been between 1 and 5 admissions for this age group in the quarter. As such the figures are redacted in accordance with standard practice.
- However, this level of admissions is an improvement on Q1 and is below target. Although we may see the Q2 figure rise as placements are recorded in the coming weeks.

**Benchmarking:**

- Nationally the benchmark (21/22 data) is 13.9 per 100,000 for the full year – just under 3.5 per 100,000 for each quarter – and for our statistical neighbours the figure is 15.2 per 100,000 for the full year (and 3.8 per 100,000 for each quarter).

**Actions:**

- The new Dynamic Purchasing System for supported living is now in operation, which has increased the types of available alternatives and should support limiting the numbers of individuals of working age admitted to permanent care homes.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ASCOF 2A(2)	Permanent admissions to care homes, per 100,000 pop – 65+	Minimise	114.4	162.5	Green	IMP	IMP

**Comments:**

- Please note the annual target (650) for this performance measure is apportioned across each quarter (162.5 per quarter).
- The Q1 outturn has been increased to reflect recording updates; a further 34 clients have been recorded.
- There have been 53 admissions in Q2 23/24. Whilst this figure and the rate per 100,000 population is lower than the target, retrospective inputting may raise this figure.
- Our target rate allows for 301 admissions in total. Currently 130 older people have been admitted. This means up to 20 clients could be retrospectively recorded and the performance measure would stay below target.

**Benchmarking:**

- The National rate of admissions (21/22 data) is 538.5 for the full year. This equates to 134.6 per quarter.
- Our statistical neighbour's outturn is 585.6 for the full year (or 146.4 per quarter).

**Actions:**

- A significant number of admissions to care for older people occur on hospital discharge. There has been a marked increase in acuity of need.
- The service carries out first reviews in a timely manner to ensure that the placement is the right setting to meet care and support needs.

**Project for this outcome:****Loneliness and Social Isolation:**

- Phase one of the Medway Together Pledge campaign soft launched in September 2023. The campaign aims to raise awareness of, and reduce, loneliness and social isolation, by empowering individuals, groups, organisations, and businesses across Medway to make a pledge to increase connection and reduce loneliness. This could be initiating a conversation with a neighbour, hosting a coffee morning or volunteering in their community. Phase two of the campaign will invite those who have made a pledge to provide some additional characteristics information so we can determine if the campaign is reaching the right demographics. Taking part in this will be optional. Phase two of the campaign will begin once data protection impact assessment (DPIA) sign off is received. The campaign will take place from September 2023 to June 2024, and will culminate in an exhibition of pledges, case studies, and outcomes, which will be showcased as part of Loneliness Awareness Week 2024.
- Four Loneliness and Social Isolation training modules were delivered in Q2 23/24 with 44 delegates attending. The team also represented Public Health at Chatham Carnival, the Lordswood Library re-launch, and Copperfield Fun Day.
- The implementation of a Medway and Swale directory of services has started with the aim to go live in the new year. Medway Voluntary Action has been commissioned to manage the project and we are working in partnership with their new Project Manager to implement the platform. This has been funded by the Health and Care Partnership (HCP) as part of a wider Social Prescribing project to invest in voluntary and community run activities. Two models of investment will be implemented:
  - ❖ 1. Payment for referral – a one-off direct payment will be made to an organisation when a social prescriber refers someone to them, and they accept the referral.
  - ❖ 2. Seed funding – a portion of the overall funding will be allocated to pump priming new initiatives based on specific, identified needs. We will be working closely with social prescribers and voluntary and community sector (VCS) partners to provide access to small-scale funding to fill gaps in service provision.
- Finally, an evaluation partner will be engaged to demonstrate the project's impact with the aim of ensuring continued funding beyond the initial year.
- The South East [Social Prescribing host map](#) went live in September 2023. This project, coordinated by the National Association for Social Prescribing, has developed an interactive map that not only marks the South East's Social Prescribing service locations but also provides details on each service, including eligibility criteria and how to access support. The map allows

residents and professionals to search for their local service. We have been working with the leader's consortium to ensure that all Medway providers are included on the map.