

<u>SUMMARY</u>

Performance reporting is an important activity within Adult Social Care as it highlights key areas within the service. It involves collecting and disseminating performance and finance information, communicating progress, utilization of resources and supports the key decision-making processes made by Senior Management and ASC Teams.

Performance is monitored both nationally and locally in a variety of ways. This is to make sure we give high quality services to adults who require services from us. Also, that services are given in a way that lets you stay in control of your life

Each month within Adult Social Care there is a wide range of performance reporting produced across the service, this report highlights performance in key areas as at December-18.

BACKGROUND

Most data items relating to performance presented with our monthly reporting structure are taken from either the ASC case management system (Paris) or from our Commissioning system (Adam).

These systems used in conjunction with one another and alongside our financial reporting allow us to build a picture of the quality and impact of work undertaken and of the services we provide to our population. This allows us to:

- Monitor performance and spend against the targets/budgets we set
- Benchmark performance locally and nationally
- Learn and enhance the services we provide

Key Performance Items at Dec-18

Admissions to Residential/Nursing Care

Avoiding permanent placements in residential and nursing care homes is a good measure of delaying dependency, this measure supports local health and social care services to work together to reduce avoidable admissions.

Following the release of the ASCOF figures in 16/17, the Care Close to Home strategy was implemented in ASC – and one of its targets was to reduce permanent admissions into care homes in line with national averages. 2017/18 saw performance across both measures improved significantly, albeit further improvements were still needed.

Provisional figures for 18/19 indicate further improvements against both targets which would place the IOW below the national and regional scores and subsequently see a big improvement in our national ranking across both measures

See below previous years and forecasted performance at Dec-18 per 100k population.

No. of new	1	6/17	1	7/18	Provisional
Admissions	IOW	England	IOW	England	Dec-18
Aged 18 to 64	44.3	12.8	20.7	14.0	9.04
Aged 65+	951.9	610.7	599.5	858.6	454.16

Below is a 12-month breakdown of Res/Nurs placements made by age group

	Jan- 18	Feb- 18	Mar- 18	Apr- 18	May- 18	Jun- 18	Jul- 18	Aug- 18	Sep- 18	Oct- 18	Nov- 18	Dec- 18
18 to 64 Sub Total	2	1	0	1	0	1	1	0	0	1	0	0
65+ Sub Total	17	17	12	12	17	14	18	19	14	16	13	6
Grand Total	19	18	12	13	17	15	19	19	14	17	13	6

Provision of Reablement vs 91-day performance.

Performance for the proportion of older people (aged 65+) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services is a national performance measure within the Adult Social Care Outcomes Framework (ASCOF). The measure is based on performance in quarter 3 of the financial year. Performance dropped significantly in 17/18 compared to 16/17 reducing from 91.1% to 75%, ranking the IOW 133rd nationally.

We have invested heavily into our reablement services as part of Care Close to Home and so we have taken a particularly close look at this performance indicator. We are able to identify precisely how many people "failed" this performance indicator because they very quickly were readmitted into hospital or died – suggesting that they probably should not have gone into our reablement service in the first place as it does not provide nursing care. As a consequence, we are currently working to create a fully integrated health and social care "reablement and recovery" service with the IoW NHS Trust and this will enable people to benefit from a single service whereby nursing care can also be offered to people when in reablement.

Due to the nature of this measure, data will always be 91 days in arrears. Early indications based on quarters 1 and 2 in 18/19 see the IOW averaging 71.7%. Quarter 3 does see an increase in those in receipt of reablement at 128 compared to 118 and 109 for quarters 1 & 2 respectively.

Quarterly - at home 91 days from discharge (ASCOF 2B Part 1)

Qtr 3 18/19 Target = 84%

	QTR 3 (17/18)	QTR 4 (17/18)	QTR 1 (18/19)	QTR 2 (18/19)	QTR 3 (18/19)
No. of older people (65+) discharged from hospital to reablement service	96	113	118	109	128
Of those No. of older people (65+) at home 91 days from discharge	72	77	88	75	
% per Quarter	75.0%	68.1%	74.6%	68.8%	0.0%

Safeguarding – Timeliness and Conversion rates

Safeguarding meeting held within 7 working days of receiving the referral: during the 2018 calendar year good performance has been maintain despite the high number of concerns raised. The monthly target of 95% has regularly been met throughout the year

No. of Safeg	uarding n	neetings									19 Monthly In Time 95%	
	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18
<= 7 days	165	175	176	161	141	117	118	97	121	144	119	193
> 7 days	17	7	11	4	10	4	8	7	3	6	5	4
% In Time	90.7%	96.2%	94.1%	97.6%	93.4%	96.7%	93.7%	93.3%	97.6%	96.0%	96.0%	98.0%
Total	182	182	187	165	151	121	126	104	124	150	124	197



Safeguarding conversion rates: during the 2018 calendar year the conversion rate from concern to enquiry has fluctuated between 24% and 63%, averaging at 39%. Of course, due diligence has to be given to every safeguarding alert received by the safeguarding team based in ASC – and whilst we should always expect some safeguarding alerts not to reach the threshold for a formal safeguarding enquiry to be made under the multi-agency arrangements of the Safeguarding Adults Board, a conversion rate of 39% is evidence that far too many incidents and issues are being regarded as "safeguarding" by agencies (e.g., the ambulance service, care homes, police, fire etc). As a consequence, we have developed a "adult safeguarding Adults Board and this has been accompanied by an extensive programme of training for all agencies. In particular, we know that too many falls and medication errors are being submitted as safeguarding alerts and so we are especially working with the CCG's Medicines Management Team and Falls Coordinator in order to ensure that a more appropriate response is given.

Concerns

	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18
No. of Concerns	185	187	187	168	152	122	125	104	126	152	121	194

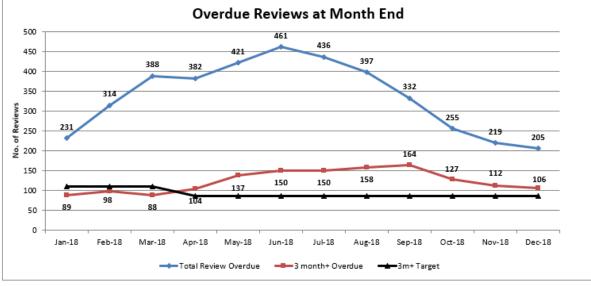
Enquiries

	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18
Discriminatory	0	0	0	0	0	0	0	0	0	0	1	1
Domestic Abuse	2	1	1	2	3	4	4	4	2	4	3	3
Financial & Material Abuse	4	6	7	8	14	5	9	12	15	10	9	11
Modern Slavery	0	0	0	0	0	0	1	0	0	0	0	0
Neglect & Acts of Omission	0	34	29	30	33	25	19	19	32	23	14	32
Organisational	30	0	1	6	0	1	1	1	0	4	0	1
Physical Abuse	3	5	2	7	3	3	5	2	15	19	14	24
Psychological / Emotional	5	3	10	3	6	5	7	5	10	8	6	7
Self-Neglect	1	1	0	1	1	4	3	1	0	1	2	0
Sexual Abuse	0	1	2	3	2	1	4	1	4	0	2	1
Sexual Exploitation	0	0	0	0	1	1	0	0	1	0	0	0
(Missing Data)	0	0	0	0	0	0	0	0	0	0	0	0
Grand Total	45	51	52	60	63	49	53	45	79	69	51	80
Conversion Rate	24%	27%	28%	36%	41%	40%	42%	43%	63%	45%	42%	41%

Overdue Reviews

The number of reviews completed per week since April-18 has averaged at 56 compared to 61 in the 17/18 financial year. Good work across ASC teams completing reviews alongside data quality work to ASC systems has seen the overall figure for overdue reviews reduce to its lowest in a 12-month period at the end of Dec-18 to 205, with only 106 of these being overdue for more than 3 months.

Overdue reviews at month			Year	End						2018/19 Monthly 3m overdue target 85.8			
	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	
<3 months	142	216	300	278	284	311	286	239	168	128	107	99	
3 to 4 months	26	13	7	27	52	39	29	35	32	20	11	10	
4 to 5 months	8	22	9	6	22	32	27	18	22	17	14	8	
5 months to 1 year	53	56	63	62	56	65	76	82	83	70	74	75	
1 to 2 years	2	7	9	9	7	14	18	23	27	20	13	13	
Over 2 years	0	0	0	0	0	0	0	0	0	0	0	0	
Over 3 months	89	98	88	104	137	150	150	158	164	127	112	106	
Target	110	110	110	85.8	85.8	85.8	85.8	85.8	85.8	85.8	85.8	85.8	
Total Overdue	231	314	388	382	421	461	436	397	332	255	219	205	



Direct Payments

At December 2018 the Direct Payment Team had achieved savings totalling £1.1m. The monitoring and suspension of payments for individuals with high balances is ongoing and a new audit process is currently being trialled.

Work was undertaken within the service at the start of the 17/18 transitioning historic brokerage cases to an IWC managed account. This work saw a shift in cases previously classified as a Direct Payment to a managed account. This work had a direct impact to the ASCOF measure (1C part 2A) bringing the IOW nearer national (28.5) and regional (28.8) figures, see table below.

IOW provisional figures

	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18
ASCOF 1C part 2A: Percentage of adults aged 18+ receiving a direct payment personal budget	34.1%	30.9%	33.2%	32.7%	32.0%	31.7%	32.2%	30.8%	30.5%

Shared Lives

Shared Lives is a service whereby people are paid to offer a home to a disabled or elderly person. Carers are carefully vetted and provided with support and training. Shared Lives schemes are regulated and inspected by the Care Quality commission. Shared Lives schemes provides an important alternative to residential care. As part of Care Close to

Home, we have introduced Shared Lives to the IoW which is now active and is recruiting. The target is to have 12 people living with Shared Lives carers by 31 March 2019.

As at 31 December 2018 Shared Lives now has 14 registered carers offering:

- 8 long term placements: 5 in placement and 3 vacancies we are currently trying to match
- 1 carer offering day opportunities
- 5 support Shared Lives carers offering respite support to the main Shared Lives carers.

In addition, the scheme currently has:

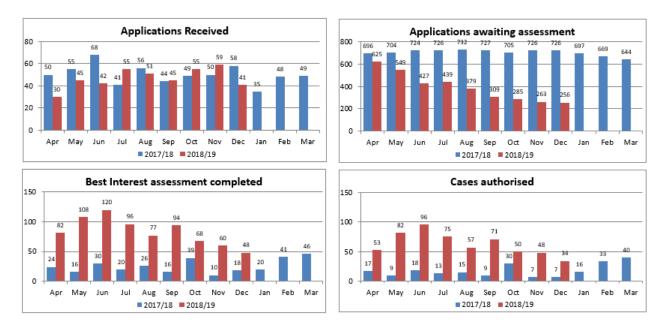
- 5 open enquiries for Shared Lives carers- pending home visits and further assessment
- 4 individuals wishing to be supported in a Shared Lives arrangement on a waitlist pending appropriate matches for long term arrangement, day opportunities and respite.

Deprivation of liberty safeguarding (DOLS)

The number of new applications; month on month for DOLS assessments remained consistent during the year averaging 47. Despite this, a concerted programme of work throughout 2018 resulted in a massive reduction in the number of applications awaiting assessment: from 625 in April to 256 at the end of December.

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Application received in the month	30	45	42	55	51	45	55	59	41
Applications awaiting assessment at month end	625	549	427	439	379	309	285	263	256

2-year comparison of Applications received, awaiting assessment, completed and authorized.



Wightcare: Community Equipment Service (CES)

Jointly funded with the CCG, CES provides equipment in the community to support people to remain independent for longer by providing the equipment to support their needs in their home environment. It also provides equipment to care homes when needed for those people funded by ASC or the CCG.

As part of strengthening the department's performance management arrangements, CES performance is now also reported on monthly.

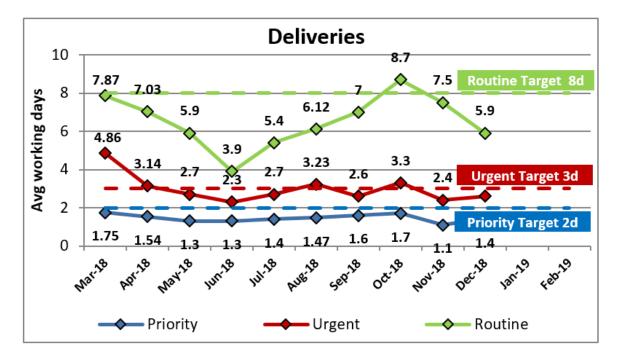
No. of Collections/Deliveries

	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Total
CES Collections	100	105	129	76	92	116	72	159	128	76	1053
OT Collections	38	105	42	64	64	46	62	27	57	37	542
CES Moves	2	5	5	2	7	4	2	5	6	0	38
Deliveries Priority	43	42	55	39	48	46	34	51	60	39	457
Deliveries Urgent	91	79	101	56	72	105	72	151	125	120	972
Deliveries Routine	58	74	74	48	61	87	63	118	76	67	726
Total	332	410	406	285	344	404	305	511	452	339	3788

Average working days to complete action

Performance has been good during 2018 with targets for the average working days for Priority, Urgent and Routine deliveries consistently met, with only a few months below target. We are, however, currently reviewing our targets in this area as we need to ensure that frequently requested equipment is even quicker to access. We are also looking at how we might expand CES so that we begin to offer a commercial service to the public (i.e., outwith of formal referral from professionals based in health and social care).

	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18
CES Collections	5.94	6.88	3.2	2.9	3.5	5.77	5.8	4.3	3.6	4.9
OT Collections	4.86	2.86	3.6	2.5	2.6	5.65	3.9	10.2	4.7	5.3
CES Moves	2.0	4.2	2.6	2.5	3.1	2.3	4.0	3.2	2.3	0.0
Deliveries Priority (Target 2 days)	1.75	1.54	1.3	1.3	1.4	1.47	1.6	1.7	1.1	1.4
Deliveries Urgent (Target 3 days)	4.86	3.14	2.7	2.3	2.7	3.23	2.6	3.3	2.4	2.6
Deliveries Routine (Target 8 days)	7.87	7.03	5.9	3.9	5.4	6.12	7	8.7	7.5	5.9



<u>Equipment Breakdowns - % attended within required standards (100% by close of next working day).</u>

2018 has seen only June reaching the target of 100% breakdowns attended by close of the next working day. However low numbers (shown in brackets) within this measure have a larger impact on percentages and should be taken into consideration when comparisons are made e.g. 8 of the 9 months reported as below 100% relate to 3 or less breakdowns.

	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18
% Same Day (no. of)	57.5% (23)	67% (10)	64% (23)	86% (38)	71% (43)	69% (29)	80% (39)	70% (40)	77% (43)	66% (33)
% Next Working Day (no. of)	37.5% (15)	13% (2)	22% (8)	14% (6)	26% (16)	24% (10)	16% (8)	28% (16)	18% (10)	28% (14)
% Total Next Working Day	95%	80%	86%	100%	97%	93%	96%	98%	95%	94%
% Over Target (no. of)	5% (2)	20% (3)	14% (5)	0% (0)	3% (2)	7% (3)	4% (2)	2% (1)	5% (3)	6% (3)

Financial Position

The year-end forecast position of adult social care as at December 18 is shown below. This position shows an overspend of £99,000 against a total net budget of £49.3 million (variance of 0.2%). Reporting for January 2019 has been completed which now shows an improved overspend position of £21,000.

	Approved	Forecast	Forecast
Convice Avec	Budget	Outturn	Variance
Service Area	£'000	£'000	£'000
Community Care			
Central Charges & Better Care Fund	(2,189)	(2,189)	-
Nursing Care	3,835	3,468	367
Residential Care	19,417	19,533	(116)
Community: Direct Payment	6,786	6,578	209
Community: Homecare	6,528	6,977	(449)
Community: Supported Accommodation	6	27	(21)
Community: Supported Living	1,755	1,700	56
Community: Other Care	290	351	(61)
Fairer Charging Income	(1,747)	(1,835)	88
Subtotal of Community Care	34,681	34,608	73
Central Charges & Better Care Fund	(2,069)	(2,110)	41
Commissioning & Partnerships	3,910	3,863	47
	0,010	0,000	
Service Delivery	12,780	13,039	(259)
Subtotal of Other Adults	14,620	14,791	(171)
TOTAL - ADULT SOCIAL CARE	49,301	49,399	(99)

There has been a continued downward trend in the number of people accessing nursing care which explains the underspend in this area of £367,000. Residential care services are expected to overspend by £116,000. Ongoing reviews of complex cases are continuing to identify any efficiencies that can be achieved in these packages of care.

Further reviews are continuing in direct payments and homecare, as described in the performance information above which has caused the variance differences in these areas. The total net position of these two areas is a projected overspend of £240,000. This is as expected due to the care close to home strategy and diverting people from bedbased care.

Savings Strategy

Adult social care has approached its savings strategy with a robust approach over the last two years. The Financial management plan (FMP) created a framework which ensures the key saving work streams identified are delivered and constantly evaluated. At the start of each financial year project briefs are identified for each of the work streams which sets out the deliverables and responsible officers for ensuring the project is successfully delivered. To ensure savings are captured a robust set of financial trackers have been developed, which go down to an individual level and enables the service to collect all financial data including savings.

To ensure the correct level of accountability, the FMP deliverables are scrutinised monthly through adult social cares programme and service boards. This provides the opportunity for system leaders to challenge and monitor progress. Risks are identified and mitigated as part of this process and escalated if required.

The FMP has been a wider programme of work which has seen a system wide transformation programme delivered, which has not only delivered financial savings, but has also seen improvements and efficiencies across the service area. The FMP has most importantly delivered improved services and better outcomes for those we serve.

The total target savings requirement for adult social care in 2018/19 is £3.7 million with an amount achieved to date of just over £3 million. Further savings are profiled to be delivered before year-end taking the total achieved to £3.6 million leaving a shortfall of £92,000 (variance of 2.5%).

The main area of underachievement lies in the change programme of our internal learning disability homes. The programme has slipped with the changes of care provision commencing in March 2019 and continuing into 2019/20. The overachievement in reviews of community-based care packages and the change in non-residential charging policy has helped offset the bottom line.

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