

OPEN

ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS

1	Meeting:	Cabinet Member for Adult Social Care
2	Date:	23rd July, 2012
3	Title:	Adult Social Care Year End Performance Report for 2011/12 and revised 2012/13 performance reporting requirements All Wards Affected
4	Programme Area:	Neighbourhoods and Adult Services

5 Summary

This report outlines the 2011/12 Key Performance Indicator (KPI) results for the Adult Social Care elements of the Directorate.

Despite over £6m reduction in funding in 2011/12 we managed to achieve improvement in 100% of Health and Wellbeing Indicators compared to 2010/11. This represents our best ever outturn performance for Adult Social Care.

6 Recommendations

- **That Cabinet Member is asked to note the year end performance results and the 2012/13 performance requirements.**

7 Proposals and Details

At the beginning of 2011 we carried out an end to end review of adult social care looking at the customer experience from accessing the service to receiving a package of care. We reviewed and streamlined all processes, reduced bureaucracies in the system and put in place a new structure for assessment and care management to focus on delivering what matters for customers. This has resulted in significant improvements in performance in the following areas:-

- We have reviewed almost 7,500 (93%) customers, 400 more than last year and most on a face to face basis, improving the percentage of people reviewed by almost 6%. This included almost everyone possible who was living in 24 hour residential type care services at the time and the majority were undertaken by staff from the new end to end residential team that was in place from September 2011.
- Of people receiving services from us last year, almost 5,750 (77%), were able to do so having had the opportunity to access services of their choice via a personal budget. This is over 1,600 more people than the previous year.
- During the twelve months leading up to 31 March 2012, we assessed over 5,000 new people who required care and support, increasing the number assessed from across all services, using new procedures. We assessed more of these people within our target of 28 days (83%). Most services are achieving above 95%. Plans have been put in place to improve standards in two areas - Mental Health Service and the Occupational Therapists Service.
- We have improved by 362, the number of people (up 3% to 97.5%) that received their care services within 28 days following assessment. By assessing and putting packages of care in place early, we are able to better support customers to delay or reduce the need for longer term care and support. Revised end to end practices assisted this improvement and the achievement was possible even though the number of people we saw, also increased by over 300 people during the year.
- The new enabling service formed as part of the end to end review proposals has also demonstrated early achievements in its first year. Intensive support over a four week period has enabled people to regain their independence fully and helped them remain in the community, reducing the need for long term care. We have supported over 600 people to do this and through customer feedback have improved the way we review people on this service to ensure everyone is seen in the first 4 weeks.
- The Council has seen a marked 10% improvement over the last year in the support provided to meet the needs of carers, which includes providing them with information, advice or services. The Council have

supported over 500 more carers (2,829 in total) this year. Rotherham is one of the top performing local authorities in the country this year.

- The Council improved performance in acting quickly to reported safeguarding concerns, 98.5% of alerts have been assessed within 24 hours, compared to 84% last year.
- The raising of safeguarding awareness in 2011/12 has had a major impact, with the number of reported alerts increasing by approximately 14% (1213), 170 more than last years total. Our campaigns on raising awareness of financial abuse has increased alerts by 36%. There was 55% reduction of repeat referrals of abuse into the safeguarding team.
- Our Home from Home scheme which assesses the quality and standards of residential homes in Rotherham, in conjunction with Age UK, has contributed to a reduction of 7% of abuse in these settings.

The following performance measures have achieved improvement from last year.

2011/12 is the first year of publication for activity indicators in the new Adult Social Care Outcomes Framework. Results are shown below and these indicators are all prefixed 'ASCOF'.

ASCOF 1Ci Proportion of people using social care who receive self-directed support, and those receiving direct payments (77.1%) - This has **improved** on last year's score of **50.45%** and is the **best score** in our comparator group

- All customers are routinely given a personal budget in relation to the cost of their care package and in 2011/12, 5,726 were in receipt of a personal budget compared to 4,061 the year before.
- Any customers who did not receive a personal budget in 2011/12 were either admitted into residential care, ceased service, or died in year.

ASCOF 1Cii Proportion of people using social care who receive direct payments (10.3%) - This has **improved** on last year's score of **8.7%** and is rated **upper middle quartile**.

- Direct payments are offered to all customers at the point of assessment. During 2011/12, an additional 57 customers received a direct payment.
- This figure is set to increase dramatically for 2012/13 as more customers take the option to purchase their personal care services via direct payments with an additional 93 customers being given a direct payment this year so far.

ASCOF 1G Proportion of adults with learning disabilities who live in their own home or with family (76.44%) – This has achieved its year end target of 75%. It has **improved** on last year's score of **72.46%** and is rated **lower middle quartile**. We are rated upper middle quartile nationally.

- During 2011/12 we reduced the number of people with a learning disability supported in permanent residential/nursing care by 14.

ASCOF 2B Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services (85.51%) – This has achieved its year end target of 85%. It has **improved** on last year's score of **85%** and is rated **upper middle quartile**.

- For 2011/12 the definition of this indicator was changed to include all customers who received enablement service following hospital discharge as well as intermediate care customers.
- Performance on intermediate care alone achieved 87.76%. This improvement has been achieved as a result of improved discharge arrangements from hospital into intermediate care and increased capacity as a result of improved discharge arrangements from the intermediate care service. The average length of stay in an intermediate care bed over the last four years has reduced from 38 to 16 days.
- We are planning to enhance the performance of the enabling service during 2012/13 through the development of a local performance indicator suite aimed at measuring outcomes for our customers.

ASCOF 2Cii Delayed transfers of care from hospital per 100,000 population (4.77) - This has achieved its year end target of 10. It has **improved** on last year's score of **4.8** and is rated **top quartile**.

ASCOF 2Cii Delayed transfers of care from hospitals which are attributable to adult social care per 100,000 population (1.22) - This has **remained the same** as last year's score and is rated **top quartile**.

- The transfer of customers from the hospital to community has been enhanced this year through the 24 hour discharge scheme to the enabling service.

ASCOF 1E Proportion of adults with learning disabilities in paid employment (4.77%) - This has achieved its year end target of 4.5%. It has **improved** on last year's score of **4.1%** and is rated **lower middle quartile**.

- As at the end of March 34 people were supported in employment compared to 29 the previous year. The additional people were supported into employment this year through our in-house Adpro and Project 400 services.

NAS1 Percentage of clients receiving a review (93.07%) - This has **improved** on last year's baseline of 87.31%, it is our **best ever** score and is rated **top quartile** coming in at 3rd position nationally and 1st position in our comparator group.

- The end-to-end review carried out in 2011/12 led to older people teams being reconfigured with specific teams being created to undertake planned reviews in the community and in residential care.
- The Performance & Quality team worked closely with managers in all reviewing teams throughout the year to ensure this indicator hit target. Monthly control targets were set and discussed at SMT meetings and regular performance clinics were held throughout the year to manage individual worker performance against these targets.
- As a result of this, the majority of people who received services last year received a review of their care with the only exceptions being people who died during the year.

NI135 Carers receiving needs assessment or review and a specific carer service, or advice and information (41.51%) - This has **improved** on last year's baseline of 31.69% and is rated **top quartile**.

- 2,829 carer assessments were completed in 2011/2 compared to 2,302 in the previous year. The majority of these were carried out as joint assessments by the social work teams at the same time as assessing the customer.

NI 132 Social care assessments completed within 28 days from receipt of contact year end (83.21%) - This has **improved** on last year's baseline of 81.55% and is rated **upper middle quartile**.

- The Performance & Quality Team worked closely with RFT to reduce the backlog of assessments in the Community Occupational Therapy service. As a result the backlog was **cleared** by end of December and OT performance on waiting times has since operated at **99%**.

NI133 Acceptable waiting times for care packages year end (97.5%) - This has **improved** on last year's baseline of 94.51%, it is our **best ever** score and is rated **top quartile**.

- Timely care packages were put in place by the brokerage team to ensure performance targets were met. This indicator has been managed throughout the year with exception reports being produced by Performance and Quality team and taken to health and wellbeing SMT on a weekly basis.

The following performance measures are new and therefore were not monitored during the year as part of the NAS suite of key performance measures however we have been asked to supply data to the Department of Health. Both of these indicators have been looked at in Performance Clinics

within the Directorate and plans are in place to improve performance during 2012/13;

ASCOF 2Ai Permanent admissions to residential and nursing care homes, per 100,000 population of people aged 18-64 (25.69) – Looking at national benchmarking data this would place us in the **bottom quartile**

ASCOF 2Aii Permanent admissions to residential and nursing care homes, per 100,000 population of people aged 65 and over (953.54) - This has **deteriorated** against last year's score of **854.5** and is rated **bottom quartile**

- Although admissions are significantly higher, the number of people resident at 31st March is down by 40 compared to the same time last year. This means that people admitted in 11/12 are not staying in care for as long.
- Reasons for the increase in admissions are as follows:-
 - Increase in demographics (accounts for approx. 10 admissions)
 - Increase in LD due to transitions from CYPS (number of 18 to 64 year olds went up from 29 to 40)
 - 40% increase in admissions to Nursing Care – 26 more people – this is most likely to be affected by CHC and could be because we haven't challenged assessments as robustly.
 - Change in policy to allow people to choose rescare (this was a budget setting target to save £1m over 3 years)

Adult Social Care User Survey

The Adult Social Care User Survey asks service users about their quality of life and their experiences of the services they received. This is the second year this survey has been completed.

The survey was sent to people who were receiving care and support services on **31 December 2011**, these included service users in residential care and the community, learning disability; and mental health service.

A total of **1333** customers received a survey and **611** returned the survey, **45.8%** response rate.

A number of ASCOF indicators are taken from the Adult Social Care User Survey and these are summarised below. The results are a comparison between this year and last year's results. It should be noted however that this year's results are now weighted and also include Mental Health service users which were not included in last year's survey. This has resulted in this year's results being slightly lower than they would have been if calculated the same as last year. Even taking this into account we have still managed to improve on five indicators out of six.

Social care related quality of life (ASCOF Indicator 1A)

- This is an average score of answers to the eight questions below:-
 - Q3a - Which of the following statements best describes how much control you have over your daily life?
 - Q4a - Thinking about your personal care, by which we mean being clean and presentable in appearance, which of the following statements best describes your situation?
 - Q5a - Thinking about the food and drink you get, which of the following statements best describes your situation?
 - Q6a - Which of the following statements best describes how clean and comfortable your home is?
 - Q7a - Which of the following statements best describes how safe you feel?
 - Q8a - Thinking about how much contact you've had with people you like, which of the following statements best describes your social situation?
 - Q9a - Which of the following statements best describes how you spend your time?
 - Q11 - Thinking about the way you are helped and treated and how that makes you think and feel about yourself, which of these statements best describes your situation?
- Calculated score for 11/12 is **19.10**. This has **improved** on last year's score of **19.08** and is rated **top quartile**.

Q3a - Which of the following statements best describes how much control you have over your daily life? (ASCOF Indicator 1B)

- Calculated score for 11/12 is **76.7%**. This has **improved** on last year's score of **76.6%** and is rated **upper middle quartile**.

Q1 - Overall, how satisfied or dissatisfied are you with the care and support services you receive? (ASCOF Indicator 3A)

- Calculated score for 11/12 is **72.4%**. This has **improved** on last year's score of **70.16%** and is the **best score** in our comparator group

Q12 - In the past year, have you found it easy or difficult to find information and advice about support, services or benefits? (ASCOF Indicator 3D)

- Calculated score for 11/12 is **75.8%**. This has **improved** on last year's score of **74.6%** and has improved from bottom quartile to lower middle quartile. We are **upper middle quartile** nationally. Top Quartile is 80.4%.
- A focused piece of work is planned to be carried out on this that will contribute to further improvements being made for 2012/13.

Q7a - Which of the following statements best describes how safe you feel? (ASCOF Indicator 4A)

- 1) I feel as safe as I want
- 2) Generally I feel adequately safe, but not as safe as I would like
- 3) I feel less than adequately safe
- 4) I don't feel at all safe

Calculated score for 11/12 is **60.7%**. Last year's score was **63.1%**, this is a **deterioration** of **2.4%** and is rated **bottom quartile**. The score this year without mental health service users was **66.9%** (top quartile). The direct comparison with last year's results therefore indicates that mental health services users scored lower against this question. There is only 1.9% between top quartile and bottom quartile. Nationally we are rated at lower middle quartile but through benchmarking we know that others are not including their full mental health customer population.

Also, all service users who replied as feeling less than adequately safe were followed up with a telephone call from the safeguarding team. As a result of this it was found that none of the concerns were in relation to adult safeguarding.

Q7b - Do care and support services help you in feeling safe? (ASCOF Indicator 4B)

- Calculated score for 11/12 is **77.8%**. This has **improved** on last year's score of **66.2%** and is rated **lower middle quartile** in our comparator group. We are rated upper middle nationally.

Improvement plans are in place on all questions utilising the feedback given by customers, which will ensure areas of dissatisfaction are addressed and put right. The national survey will run again in the New Year. Local satisfaction testing has been put in place to ensure we track a positive direction of travel on these measures.

Revised 2012/13 performance reporting requirements

For the year 2012/13 the suite of indicators has been revised. Work is currently ongoing with services to fully establish the suite and targets to take into account the recently published ASCOF benchmarking data and changes in definitions. There are currently 21 indicators which make up the NAS Suite. As at the end of May 17 (81%) of indicators are on target.

Future reports will focus on the full suite of ASCOF measures.

Local Account

Rotherham's first local account "Rotherham people calling the shots" was published on the council website from early December 2011 and promoted by Councillor John Doyle, Cabinet Member for Adult Independence, Health and Well Being (Lead Member for Adult Social Care). An executive summary "Snapshot", easy read version and 2012 monthly updates have been added

subsequently. Additionally the snapshot was circulated to all councillors and Rotherham's 3 current MP's.

Rotherham's local account has been identified as the benchmark from review undertaken by Jonathan Phillips for Y& H region / ADASS has also been favourably received by national contacts. Cabinet Member received a report on the local account on 5th December, 2011.

We have also as part of our sector led improvement work, led on the production of local account guidance within Yorkshire and Humber region and are preparing the 2012 local account for publication in September. This data will feature with the local account for 2011/12.

Zero Based Review

The ongoing work on the zero based review of social care information is nearing a conclusion. The original concept of the Zero Based Review, as set out in the Governments Transparency in Outcomes document, was to reduce the burden on local authorities with regards to data collection, it is clear that this has not happened. We are already seeing proposals which have increased the number of data returns and changed the way we need to record and interpret data.

The Zero Based Review has a major impact on the information we report to central government and locally it will mean changes to our social care and financial reporting systems and the performance measures we report in the ASCOF. This is now open to consultation with a deadline of 3rd August. Full details of all changes will be published in September and it is expected that changes will be put into place from April 2013. ADASS are leading on providing a regional and national response to this and we have been involved in the Yorkshire and Humber group work. Our main issues are as follows:-

- The timeframe for the consultation is not long enough.
 - The consultation document is massive with 192 questions included and lots of input needed from a wide range of people and organisations to make an informed response.
 - There is not enough detail included in the consultation documents and some of the changes are of a very technical nature.
- Costs are attached to making proposed changes.
 - Making the proposed changes will incur costs from systems suppliers as systems will need updating to make them work.
 - It will use a significant amount of staff resources at a time when we have reduced resources in line with budget cuts and the government promise to reduce the burden.
- This does not promise to reduce the burden.
 - The number of measures has increased.
 - New ASCOF measures are proposed increasing the burden of performance management.

- Some information is proposed for deletion but is still of value locally and will need to be retained for cabinet member reporting.
- User surveys are proposed to be widened
 - The value of the current survey has been questioned by councils and some of the results are ambiguous.
 - It is implemented differently by different authorities.
 - A lot of effort would be required to make this happen.
- Full implementation of the national requirements by April 2013, will be extremely challenging.
 - Some good ideas are presented but would be difficult to implement, especially in the short term.
 - Changes to financial collection would require significant changes to financial coding and reporting.

8 Finance

As outlined above, the proposals put forward in the zero base review will have implications on the council's finance and social care systems which will be difficult to achieve within the proposed timeframes.

Following the publication of the Health and Social Care Act, the next comprehensive spending review in 2015 will inform the future funding for Adult Social Care. Proposals included the implementation of a universal deferred payments scheme so that nobody is forced to sell their home (Rotherham already have a deferred payments scheme), introduce a national minimum eligibility threshold to help remove variation in access to care depending on where people live, portable care assessments so people can move easily between Councils, improving the rights of carers and capping the cost of care packages at £35,000.

Until the final details behind the proposals are made available it is difficult to identify the full implications to the Council, however, it is clear that if additional resources are not made available by Central Government to fund these proposals in the next Comprehensive Spending Review this will further increase the financial pressures on Adult Services budgets.

9 Risks and Uncertainties

The consultation on zero based review is a huge risk to resources within Performance & Quality and Health & Wellbeing teams as this will have major implications for the ways in which data is collected and reported. Initial feedback from ADASS suggests they will recommend a phased approach to this work. We will know the full scale of this work in October following the publication of the September letter by the NHS Information Centre.

This report includes revised 2012/13 performance reporting requirements which highlight the challenges faced by the Directorate and the Resources Performance & Quality team to effectively support Adult Social Care to improve on performance and meet national collection and reporting demands,

at a time when central Performance and Quality staffing resources have been reduced. The impact of implementing the consultation changes linked to the Zero Based Review will in effect increase costs and the collection burden of the council. Rotherham will be submitting a local authority response to this effect as well as contributing to a Yorkshire and Humber ADASS regional response.

10 Policy and Performance Agenda Implications

The 2012/13 suite of indicators has been revised. New indicators have been included to measure performance in the following areas:-

- Waiting times for completion of unplanned reviews
- Admission rates to permanent residential/nursing care

The Performance & Quality team are currently working with colleagues in Health & Wellbeing to put into place targets and action plans for these. Future reports will include these new indicators.

The zero based review is also making proposals to increase the number of national indicators monitored in the Adult Social Care Outcomes Framework. New indicators have been proposed for in the following areas:-

- Effectiveness of long term services in supporting people to achieve personal outcomes
- Effectiveness of long term services in maintaining and improving independence
- Effectiveness of short term services in preventing the need for long term support
- Effectiveness of short term services in supporting people to achieve personal outcomes
- The quality of safeguarding practice

11. Background Papers and Consultation

The report has been shared with the Director of Health and Wellbeing.

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