

ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
1 SEPTEMBER 2015

QUARTER 1 2015/16 PERFORMANCE REPORT

JOINT REPORT OF THE CHIEF EXECUTIVE AND
DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of Report

1. The purpose of this report is to present the members of the Adults and Communities Overview and Scrutiny Committee with an update of Adults and Communities Department performance at the end of quarter one of 2015/16.

Policy Framework and Previous Decisions

2. The Adults and Communities Department's performance is reported on a quarterly basis to the Adults and Communities Overview and Scrutiny Committee in accordance with the Council's corporate performance management arrangements.

Background

3. The report (attached as Appendix 1) is based on the key performance measures of the Adults and Communities Department for 2015/16. These are reviewed annually through the annual business planning process to reflect the key priorities of the department and the Council. The appendix is structured in line with the County Council's Strategic Plan 2014-18, and its supporting indicators and targets.
4. The Adult Social Care indicators are a mixture of national and local measures. At a national level performance is monitored via the Adult Social Care Outcomes Framework (ASCOF).
5. The Communities and Wellbeing service area do not have such a formal structure for performance monitoring at a national level. The measures included in this report have been determined as local priorities.
6. The national performance on the ASCOF has been published in July during previous years. For 2014/15, however, the data will not be published until October 2015 and as such it is not currently possible to provide information on how Leicestershire compares with other authorities.
7. Progress against targets is highlighted using a Red/Amber/Green (RAG) system and Appendix 2 sets out the description of each category.

Performance Update

Integrating Health and Social Care – Better Care Fund

8. Avoiding permanent placements in residential care homes is a good indication of delaying dependency. Research suggests where possible people prefer to stay in their own home rather than move into residential care. During the period April to June 2015, there were 12 permanent admissions to either residential or nursing care of people aged 18-64. Based on this, the forecast for the year, shown as a rate per 100,000 of the population is 12.0, which is lower than in 2014/15. For people aged 65 or over there were 163 permanent admissions to either residential or nursing care during the same period. Again, the forecast for the full year is expected to demonstrate a lower number of admissions than in 2014/15. The measure is currently on track to meet the Better Care Fund (BCF) target.
9. A key measure in the BCF is the ASCOF metric that measures the proportion of people discharged from hospital via reablement services, and are still living at home 91 days later. For those people discharged between January and March, this proportion was 83%, above the BCF target of 82%.
10. Included in the BCF is a metric relating to the number of *days* people are delayed in hospital awaiting discharge, commonly known as delayed transfers of care (DToCs). In the period April to May (data is produced nationally and is one month in arrears), the number of delayed days was lower than the average in the previous year, and on track to meet the BCF target for the first quarter of the year.
11. DToCs attributable to adult social care are calculated by taking an average of the number of delays on the last Thursday of each month and presenting the figure as a rate per 100,000 of the local population. There has been significant improvement over recent months particularly compared to a peak last summer. As such performance in the first two months of the year is meeting the target.

Better Adult Social Care

12. The Council remains committed that everyone eligible for long-term, community-based care should be provided with a personal budget, preferably as a direct payment. By 31 March 2015, 91% of service users were in receipt of a personal budget, over a third of which was a direct payment. The position was similar at the end of June 2015. Challenging targets for the year have been set based on the latest performance of the top 25% of authorities.
13. Under the Care Act, from April 2015 carers have the same rights as the person they care for. They are entitled to a carer's assessment and support, if they meet the new national eligibility criteria. The ASCOF measure relating to personal budgets (ASCOF 1C) has been extended to reflect carers new rights set out in the Care Act. In 2014/15, 98% of carers receiving services did so via a personal budget, and 95% took this as a direct payment. As with service users, challenging targets have been set for the forthcoming year. These are currently not being met, but it should be noted that the personal budgets for carers tend to be one-off payments and as such performance is expected to build up through the year as carers are assessed.

14. There have been 277 safeguarding enquiries investigated since April, a similar number to the comparable period of last year. There has been an improvement in outcomes in comparison to 2014/15, with 54% either substantiated or partially substantiated enquiries in the first quarter, compared to 47% last year.
15. The nature of accommodation for people with learning disabilities has a strong impact on their safety and overall quality of life and reducing social exclusion. One of the ASCOF measures monitors the proportion of service users aged 18-64 with a learning disability who are in settled accommodation. This figure was 65% in 2014/15, and it has subsequently improved to 75% in quarter one which meets the target.
16. ASCOF 1E measures the proportion of adults with learning disabilities who are receiving long-term services and are in paid employment. There is a strong link between employment and enhanced quality of life, including evidenced benefits for health and wellbeing. Performance in 2014/15 was lower than anticipated. Consequently regular monitoring is taking place through 2015/16 with a higher target set. Despite improving performance, the target is not currently met. It is known that inadequate recording of information is currently hindering reporting, contributing to the misrepresentation of target achievement.

Leicestershire's Cultural Environment

17. Overall visitors to the heritage sites during the first quarter of 2015/16 dropped by 4% compared to the same period last year. Within these figures however, the numbers of visitors to the Bosworth battlefield site rose by 18% in comparison with last year's.
18. Library visits and issues have both shown a reduction from the previous year. This reflects a national downward trend across the majority of library authorities. It should be noted that as a priority the Service is targeting the most vulnerable, although the outcomes from this prioritisation will not necessarily result in a high volume performance. A positive area of growth is the usage of e-lending activity, which was 51% higher in 2014/15 than in the previous year.
19. The Leicestershire Adult Learning Service's (LALS) performance is related to the academic year 2014/15 and measures the proportion of learning aims due to be completed in a period successfully achieved. At the end of June the year-to-date position was 92%, measuring higher than the target of 85%.

Surveys

20. There are two statutory surveys relating to adult social care: an annual survey of people receiving services, and a biennial one of carers. Both surveys were carried out in 2014/15; Appendix 3 sets out the ASCOF performance sourced from them.
21. In relation to the survey of people receiving services most of the metrics showed a similar performance to the previous year. The most notable change was the improvement in overall satisfaction levels, receding towards a similar position from two years ago.
22. ASCOF metrics sourced from the carer's survey were generally in line with the national average in 2012/13. In comparison this year's 2015/16 results show small

reductions across areas such as quality of life, satisfaction, and consultation. The proportion of respondents who find it easy to find information has remained comparable with the data from two years ago.

Conclusion

23. This report provides a position on the Adults and Communities' performance at the end of quarter one of 2015/16. Details will continue to be monitored on a monthly basis with a particular focus on the BCF measures and areas requiring improvement such as carer's direct payments. In addition, the monthly reporting will continue to highlight areas of good performance including permanent admissions and delayed transfers of care.

Recommendations

24. That the report and performance update at quarter one be noted and the Committee highlight any particular issues where it would like any further information or actions to be taken.

Resource Implications

None.

Background papers

[The Adult Social Care Outcomes Framework 2014/15](#)

[Leicestershire County Council Better Care Fund Submission – September 2014](#)

[Leicestershire County Council Strategic Plan 2014-18](#)

Circulation under Local Issues Alert Procedure

None.

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List of Appendices

Appendix 1 - Adults and Communities Department Performance Dashboard for Q1 2015/16;

Appendix 2 – Red/ Amber/Green (RAG) Rating - Explanation of Thresholds;

Appendix 3 – Survey Performance.

Relevant Impact Assessments

Equality and Human Rights Implications

25. The Adults and Communities Department supports vulnerable people from all diverse communities in Leicestershire. However, there are no specific equal opportunities implications to note as part of this performance report. Data relating to equalities implications of service changes are assessed as part of Equality and Human Rights Impacts Assessments.

Environmental Impact

26. Environmental performance is reported to the Environment and Transport Overview and Scrutiny Committee.

Partnership Working and Associated Issues

27. BCF measures and associated actions are overseen and considered by the Integration Executive and Health and Wellbeing Board.