

From: Clair Bell, Cabinet Member for Adult Social Care and Public Health
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To: Adult Social Care Cabinet Committee - 18 May 2022

Subject: Adult Social Care and Health Performance Q4 2021/22

Classification: Unrestricted

Previous Pathway of Paper: None

Future Pathway of Paper: None

Electoral Division: All

Summary: This paper provides the Adult Social Care Cabinet Committee with an oversight of Adult Social Care activity and performance during Q4 for 2021/22.

Four of Adult Social Care and Health's Key Performance Indicators continue to RAG rate Green having met their targets. These were the proportion of people in receipt of short-term services where the intention is to have no ongoing support or lower levels of support, people with learning disabilities in settled accommodation, people in residential or nursing care rated good or outstanding by the Care Quality Commission and those still at home 91 days after a hospital discharge receiving an enablement service.

The fifth indicator is the proportion of people with a Direct Payment which is RAG rated Amber, having not met target but not fallen below the floor standard. Quarter 4 experienced a slight increase in performance, however it was not statistically significant. Developments in online platforms to improve the information and advice on Direct Payments and self-directed support are underway and new digital solutions are being developed to allow people to self-serve and reduce the time taken to set up a Direct Payment.

During the last two years the pressures on Adult Social Care and Health have increased and as a result, a new suite of Key Performance Indicators have been identified. These are designed to reflect strategic priorities and to increase understanding around pressures and demands. They also encompass the Better Care Fund Measures.

Recommendation: The Adult Social Care Cabinet Committee is asked to **NOTE** the performance of services in Q4 2021/22 and **NOTE** the new suite of Performance Measures for 2022 onwards.

1. Introduction

- 1.1 A core function of the Cabinet Committee is to review the performance of services which fall within its remit. This report provides an overview of the Key Performance Indicators (KPI) for Kent County Council's (KCC) Adult Social Care and Health (ASCH) services. It includes the KPIs presented to Cabinet via the KCC Quarterly Performance Report (QPR).
- 1.2 Appendix 1 contains the full table of KPIs and activity measures with performance over previous quarters and where appropriate against agreed targets.

2. Overview of Performance

- 2.1 Of the five targeted KPIs, the proportion of people with a Direct Payment continues to be RAG rated Amber having not achieved the agreed target but remaining within expected levels. This measure increased to 25% in Quarter 4. The use of Direct Payments is recognised nationally, and forms part of the current Adult Social Care Outcomes Framework and all Local Authorities are required to report annually on its delivery.
- 2.2 ASCH continue to promote the use of Direct Payments, for those currently receiving support, those awaiting a service, and those new to ASCH. Direct Payments are an important delivery mechanism to ensuring people have choice over their support and maintain their independence, key to Making a Difference Everyday.
- 2.3 A new Information and Guidance platform has been developed and will improve the availability of advice and information on Direct Payments and self-directed support for Kent residents. The platform will link to the community catalyst website for micro-enterprises which is where people can find out what is available in their community; and a digital self-service pathway is also being developed which will include the assessments and care and support planning which will allow people to start to set up a Direct Payment as early as possible.
- 2.4 The KCC Kent Enablement at Home Team (KEaH) has developed training with the Direct Payment Team to enhance conversations they have with people whilst they are in this enablement services, and this training has provided a greater understanding of Direct Payments and the benefits to the individuals.
- 2.5 Similar to last quarter, 65% of those who received enablement services either needed no ongoing support or low-level support. However, the number of people who received these enablement services continued to reduce, with 1,085 receiving in Quarter 4 compared with 1,226 in Quarter 3.
- 2.6 There was an increase, in Quarter 3, in the number of older people who were discharged into enablement services from hospital, with over 900 people needing this pathway. This indicator is reported a quarter in arrears and although the number of people entering the service increased, performance decreased to 85%, but remained above the target of 82%.

- 2.7 The indicator related to the proportion of clients in residential or nursing care Care Quality Commission (CQC) rated as Good or Outstanding decreased in Quarter 4 to 81%, from the previous position of 83% in both Quarter 2 and 3. There was an increase of 2%, in homes rated as Requiring Improvement during the quarter.
- 2.8 As reported in the previous Performance report to this Cabinet Committee, KCC Commissioners and the Care Home Support Team continue to improve the quality of these services by working with providers, giving advice and support, and ensuring action plans are in place that respond to CQC findings. Commissioning use a KCC Care Home Risk Matrix, triangulating data and intelligence to ensure resource is focused on supporting those rated, or at risk of, Requiring Improvement or considered at high risk in terms of poor quality.
- 2.9 The proportion of people with learning disabilities who live in their own home or with family continues to remain above the target of 77% at 82%, albeit a 1% decrease on the previous quarter. Across the year this measure has remained above target. The national Adult Social Care Outcomes Framework Measures are collated from all local authorities on an annual basis and in 2020/21 the national average was 78% and for the South East it was 76%.
- 2.10 Quarter 4 saw increases in the number of people making contact with ASCH (the highest number in almost 2 years) an increased number of Care Needs Assessments delivered, an increased number of people identifying themselves as Carers, and of those Carers needing a Service with ASCH having had an assessment or review in the past 12 months. There was also an increase in Deprivation of Liberty Safeguards applications received.
- 2.11 Demand for mental health support has started to plateau following increases experienced prior to and during the Pandemic. ASCH currently support over 1,200 people, and the majority are being supported through Supporting Independence Services and Supported Living.

3. Adult Social Care and Health KPIs & Activity Measures 2022/23

- 3.1 ASCH has been reporting the above indicators and activity measures for two years. However, in light of growing pressures and the development of the Making a difference every day (MADE) programme, these have been reviewed and a new suite of indicators have been identified for reporting next year. These new measures are designed to provide members with oversight on some of the key priority areas for ASCH while also demonstrating some of the pressures and demands services are working under.

3.2 Details of the new activity measures and KPIs are set out in Appendix 2. There are six targeted KPIs covering:

- 1) Percentage of people who have their contact resolved by ASCH but then make contact again within 3 months. **(ASCH 1)**
- 2) The proportion of new Care Needs Assessments delivered within 28 days. **(ASCH 2)**
- 3) The percentage of people in receipt of a Direct payment with Adult Social Care & Health. **(ASCH 3)**
- 4) Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services (Better Care Fund) **(ASCH4)**
- 5) Long Term support needs of older people (65 and over) met by admission to residential and nursing care homes, per 100,000 (Better Care Fund) **(ASCH5)**
- 6) The % of KCC supported people in residential or nursing care where the CQC rating is Good or Outstanding. **(ASCH 6)**

3.3 There are 13 activity measures which will help in providing the context needed to look at demands placed on ASCH and will support the six KPIs. The ASCH Performance Team has also worked with the KCC Corporate Risk Team and have aligned the measures to the Risk Register, these activity measures are identified in Appendix 2.

4. Conclusion

4.1 ASCH saw increases in activity during Quarter 4, predominately in the number of people making contact and people identifying themselves as Carers; there were decreases in the numbers of people receiving enablement services, however the associated KPIs remained above target. Work is continuing to increase the number of people in receipt of a Direct Payment, and with Residential and Nursing homes with a poor or changed CQC rating, both measures have either decreased in delivery or remain below target.

5. Recommendation

5.1 Recommendation: The Adult Social Care Cabinet Committee is asked to **NOTE** the performance of services in Q4 2021/22 and **NOTE** the new suite of Performance Measures for 2022 onwards.

6. Background Documents

None

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