

From: Clair Bell, Cabinet Member for Adult Social Care and Public Health
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To: Adult Social Care Cabinet Committee - 28 September 2022

Subject: **ADULT SOCIAL CARE AND HEALTH PERFORMANCE - Q1 2022/2023**

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 Q1 for 2022/2023.

For 2022/2023 there is a new suite of Adult Social Care and Health Key Performance Indicators and activity measures designed to reflect the breadth of Adult Social Care and Health delivery, responsibilities, and strategic priorities. Some 2022/2023 measures were part of the previous indicator set presented to Cabinet Committee.

The numbers of contacts to adult social care, incoming Care Needs Assessments and Deprivation of Liberty Safeguards applications received this quarter remain high. Delivery of Care Needs Assessments and annual Care and Support Plan Reviews remain a priority as part of the adult social care performance assurance process. Adult social care is delivering more Carers Assessments this quarter compared to the previous Quarter 1 (2021/2022) and is providing more Carer respite services via short term bed services.

Admissions to long term residential or nursing services have decreased, and the provision of community support services remains the priority, with actions being implemented to increase the use of Direct Payments.

Of the six KPIs, four were RAG rated Green having met their targets, one is Amber, and one is Red. The KPI RAG rated Red is the measure looking at the percentage of new Care Needs Assessments delivered within 28 days, this has improved on the previous quarter and ASCH are prioritising delivery of Care Needs Assessments as part of its Performance Assurance process.

Recommendation: The Adult Social Care Cabinet Committee is asked to **NOTE** the performance of services in Q1 2022/23.

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 ASCH continue to have over 20,000 people making contact each quarter, with 21,725 people making contact in Quarter 1. In response to this high demand and to improve how adult social care respond to requests for assistance, work is being undertaken to refine and diversify how people can contact us. This includes expanding the use of online tools and self-service options.
- 2.2 The new KPI on the percentage of people who re-contacted ASCH having had a previous contact resolved with advice and information, allows the monitoring of the effectiveness of the service provided at first contact with ASCH, albeit there are factors that will affect this, for example where someone has experienced a change in circumstance or an increased need not related to the original contact. ASCH aim to not have more than 9% of all contacts made up of re-contacts within a 3-month period, achieving this in Quarter 1 (RAG Rated Green).
- 2.3 A Care Needs Assessment (CNA) is where a person's social care needs are identified and eligibility for support is assessed (Care Act 2014). ASCH have on average 4,975 CNAs incoming each month. There were 4,725 new CNAs in Quarter 1 which is down from 4,994 in Quarter 4.
- 2.4 Of the CNAs newly incoming in Quarter 4, 75% were completed within 28 days. This KPI runs a quarter in arrears and looking at 2021/2022, ASCH was delivering below the 2022/23 target of 90% (RAG Rated Red). The time taken to complete a CNA is dependent on the person and their needs, with some people with complex circumstances needing to take months to complete. However, the majority of CNAs can be completed within 28 days (Care Act compliance is that they are timely) and ASCH is prioritising work on completing CNAs as part of its Performance Assurance process. Targets are being set with operational teams to increase the number being completed, whilst those in progress are being risk assessed to ensure those needed to be prioritised are seen quicker.

- 2.5 Alongside delivering CNAs there are also Carer Assessments being delivered and there are more being completed now than in the same quarter a year ago. 1,102 were delivered in Quarter 1. Commissioned Carers Organisations deliver these assessments for ASCH. The Kent Adult Carers' Strategy was co-produced and consulted on and is now available online. Colleagues in Adult Social Care and Health have been visiting community locations (libraries, Gateways and health settings covering Ashford, Canterbury, Maidstone, Gravesend, Dartford, Sevenoaks, Tonbridge and Paddock Wood) to start conversations about carers and social care. The initial roadshow took place during the summer and hard copies of both the Kent Adult Carers' Strategy and wider Adult Social Care Strategy were distributed. Approximately 200 individuals with an interest in social care or with lived experience, have been directly engaged with so far. The aim being to connect face to face with communities, hear people's views and test our engagement approach for the future.
- 2.6 A series of engagement events are planned for the autumn and these will be promoted via social media and through community networks as we continue this work to raise awareness. Further pop-up stands are planned for Sheppey Gateway, the Queen Mother Queen Elizabeth Hospital Margate and Tunbridge Wells Library. These will be advertised via our stakeholder channels including social media, in the coming weeks.
- 2.6 Following the Assessments, and where eligible for support, people receive a Care and Support Plan which details how a person will be supported and the services they may receive. ASCH had 16,932 people with an active Care and Support Plan at the end of Quarter 1, which is the highest number of people since before Q3 2020/2021. Not everyone will go on to need a support package (for example Residential care, Homecare, Supported Living) and ASCH has seen decreasing numbers of new support packages being arranged each quarter. ASCH has seen an increase in the number of people receiving a support package for over 12 months, so although the new support packages are decreasing people are being supported for a longer period of time. Whilst the numbers have decreased, the average weekly cost of the newly arranged support packages has increased in general, indicating a rise in the cost of care or increases in the complexity of care and support needs.
- 2.7 When people have a Care and Support Plan in place and are receiving support from ASCH, they receive an initial 8-week review, and then an annual review 12 months later. The number of people requiring an annual review on the last day of Quarter 1 was 5,044, and the number has been increasing quarter on quarter. In Quarter 1 over 3,300 annual reviews were delivered. Work on completing annual reviews is also prioritised as part of the ASCH Performance Assurance process; targets to increase the number of reviews completed are being set and managed at an operational team level, with a focus on those most overdue, with examples of best practice being shared amongst teams where actions have led to decreases in those awaiting an annual review.
- 2.8 Where people need short-term enablement services, ASCH has the Kent Enablement at Home service (KEaH) which aims to keep people independent

and in their home. In Quarter 1 there were 2,109 people actively receiving this support. In order to address pressures both within the service and the wider social care market, KEaH is re-running a recruitment campaign which successfully increased capacity earlier this year.

- 2.9 Some individuals require residential or nursing care on a temporary basis (either while their longer-term needs or circumstances are assessed, or to provide respite) and ASCH has seen increasing numbers of people in short term beds since the pandemic with 1,322 individuals in Quarter 1. Carer respite includes the use of short-term beds accounting for over 400 people this quarter (a 11% increase on the previous quarter).
- 2.10 Long Term Support is provided either through community or residential/nursing care. ASCH has nearly 12,000 people in long term community services each quarter, which include Direct Payments, Day Care, Supported Living and Homecare. A key priority for ASCH is to enable people to remain independent and in their own homes with clear personal choice of their support. Direct Payments are nationally recognised as an effective way of delivering these aims and ASCH has set itself a challenging target for 2022/2023 at 30% of people in community services having a Direct Payment. For Quarter 1 this measure is Rag Rated Amber with 24%.
- 2.11 With the percentage of people in community services with a Direct Payment remaining around 25% over the last two years, ASCH is addressing this by actively promoting growth in this area, including recruiting a specialist Personal Assistant Development worker, developing a digital platform. ASCH has also been working with both Growth, Environment and Transport and Children, Young People and Education to deliver community catalysts and grow community provision, recognising challenges where people lack agency and support networks to assist them, and an increasing aging population who have frailty needs and are unable to manage a Direct Payment.
- 2.12 ASCH has seen a decreasing number of people with long term residential or nursing care since Quarter 3 2021/2022. As residential and nursing care potentially reduces an individual's choice and independence, these services are considered and discussed with a person and their families/carers when other support options are not suitable, adequate or safe. Where appropriate for the person's needs, there have been recent moves of people with Mental Health needs from residential care into community services Supporting Independence Services (SIS)/Supported Living.
- 2.13 The numbers of people accessing support with ASCH who have a Mental Health need had been increasing prior to the pandemic, during which this increase escalated, however the numbers appear to be plateauing with 1,220 people in Quarter 1. SIS/Supported Living remains the most prevalent service provision.
- 2.14 ASCH has an ongoing KPI which reports on the percentage of people in residential or nursing care with a Care Quality Commission (CQC) rating of Good or Outstanding. For 2022/2023 ASCH increased the target to 80% and met this in Quarter 1 with 81% (Rag Rated Green). Where providers are rated

as Inadequate or Poor, Locality Commissioners provide advice and support to ensure that effective action plans are in place that respond to identified concerns and/or CQC findings and monitor these action plans as required. Where necessary contract suspensions are put in place to prevent further placements whilst improvements are being made.

- 2.15 ASCH report two KPIs that are the National Better Care Fund measures; the Better Care Fund is a programme that supports local systems to successfully deliver and monitor the integration of health and social care, looking for better outcomes for people. For those people aged 65 and over, who are still at home 91 days after discharge from hospital, having received enablement, ASCH remains above the target of 82% for Quarter 4 2021/22 (RAG Rated Green. The measure runs a quarter in arrears). ASCH has increased the target for 2022/2023 to 85%.
- 2.16 The second measure, newly reported to Cabinet Committee, presents the rate per 100,000 of people receiving long term support, aged 65 and over, by admission to residential and nursing care homes. As previously mentioned, it is an ASCH priority to ensure people stay at home, and independent for as long as possible with support from community services. ASCH has seen decreasing numbers of people in and entering residential and nursing care since Quarter 3 2021/2022. This is reflected in Quarter 1 with the rate decreasing to 104 per 100,000, meaning ASCH is below the target of 111 and RAG Rated Green
- 2.17 For 2022/2023, ASCH has expanded the reporting of the Deprivation of Liberty Safeguards (DoLS) to show both the number of applications received each quarter, and those completed. Quarter 1 saw a large increase in the number of DoLS applications received, 2,453, this follows a similar spike in Quarter 1 the previous year, however this was the highest volume experienced and the volume of DoLS applications received is on an overall upward trend. The number of completed applications vary quarter on quarter and is influenced by the capacity of the team and the volumes of urgent applications. On average 42% of applications take under 4 weeks to be signed off.
- 2.18 ASCH had 1,043 Safeguarding Enquiries open on the last day of Quarter 1. The Safeguarding Teams have held the number of open enquires at a more sustainable level following the implementation of a dedicated team, brought in during 2021/2022 who assisted the Safeguarding Teams in balancing the volume of incoming and existing work allowing for the volume of open safeguarding enquiries to be reduced, having exceeded 2,000 in Quarter 2 2021/2022.

3. Conclusion

- 3.1 ASCH is continuing to experience higher levels of activity, specifically compared to previous years, and following the Pandemic. ASCH has prioritised key areas of delivery via the Performance Assurance process, for enablement services, Care Needs Assessments, annual Care and Support Plan Review, Deprivation of Liberty Safeguards and Safeguarding.

4. Recommendation

4.1 Recommendation: The Adult Social Care Cabinet Committee is asked to **NOTE** the performance of services in Q1 2022/23.

5. Background Documents

None

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