

**From:** Dan Watkins, Cabinet Member for Adult Social Care and Public Health  
Richard Smith, Corporate Director Adult Social Care and Health

**To:** Adult Social Care Cabinet Committee – 13  
September 2023

**Subject:** **ADULT SOCIAL CARE AND HEALTH  
PERFORMANCE Q1 2023/2024**

**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 update on adult social care activity and performance during Quarter 1 for 2023/2024.

Adult social care continues to experience high level of demand across all areas of its work and with the people we support. There remain high numbers of people making contact, increased incoming Care Needs Assessments (by 5%), more people with an active Care and Support Plan, more people with mental health needs accessing services and more Deprivation of Liberty Safeguards applications received.

The Key Performance Indicator looking at Care Needs Assessments delivered within 28 days remains below target and RAG Rated Red, even with a 1% increase in Quarter 4. Adult social care continues to prioritise delivery of Care Needs Assessments within the Performance Assurance Framework. Four Key Performance Indicators are RAG Rated Amber and only one has a significant downward direction of travel and this was for those in a Care Quality Commission rated residential or nursing care home rated Good or Outstanding. One Key Performance Indicator remained RAG Rated Green having met the target which was those not re-contacting adult social care having had a previous contact resolved.

Whilst dealing with high levels of demand adult social care continues to face challenges on availability within both its own workforce and in the social care market, as experienced nationally, and are taking steps to increase recruitment and retention as well as finding new ways to innovate to help manage changing demands and the need for new solutions to support people. The new Community Teams and County Services are working to prioritise, and risk manage these demands to ensure they can meet their statutory duties and keep people safe and independent, optimising the resources they have available to them.

**Recommendation:** The Adult Social Care Cabinet Committee is asked to **NOTE** the performance of adult social care services in Quarter 1 2023/24.

## **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 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 Adult social care continues to have over 20,000 people contact them each quarter. In Quarter 1 over 22,425 people made contact, and this continues the ongoing trend of increasing activity with this quarter, with a 3% increase on the same quarter last year. In addition to the new tools made available on Kent.gov which help people understand their adult social care needs, provide advice and information and help estimate how much they may need to pay towards their care and support., adult social care is working on transforming the contact and referral pathways to ensure they work for Kent residents and the people we support, working further with partners. The KPI on the percentage of people who re-contacted adult social care, having had a previous contact resolved with advice and information, continues to achieve the target of 9% (RAG rated Green) decreasing further to 5% in Quarter 1.
- 2.2 Quarter 1 also saw another increase in the number of Care Needs Assessments (CNA) to be undertaken, with an increase of 5%, which was on top of the 15% increase experienced the previous quarter. 5,573 CNAs were initiated in Quarter 1. Adult social care completed 4,878 CNAs this quarter, less than in previous quarters, which led to more people needing their CNA to be completed on the last day of the quarter, over 3,000, the highest since 2019.
- 2.3 Of the incoming new CNAs for Quarter 1, 71% were completed by adult social care within 28 days, an increase of 1% on the previous quarter, and continues to be below the floor target of 80% (RAG Rated Red). The time taken to complete a CNA is dependent on the person and their needs, however most CNAs can be, and are, completed within 28 days (Care Act Guidance states that they should be timely). Adult social care continues to prioritise completing CNAs as part of its Performance Assurance Framework and is looking at new ways of working to help balance all the activities worked on by practitioners in the new Community Teams.
- 2.4 1,085 Carers' Assessments were completed by adult social care and the Carers' organisations in Quarter 1. The Carer Strategy Group has been running for three months, co-chaired by an Assistant Director and a carer (with lived experience). The group will deliver against the Kent Carers' Strategy 2022 – 2027 and has plans to also roll out localised Carer Forums in each of the four locality areas. Work within the Health and Care Partnerships and with the Community Mental Health Framework is highlighting the needs of carers with

partner organisations. The carers week, which was held in June 2023, included several opportunities to highlight the needs of carers and included further awareness raising with adult social care.

- 2.5 Evidence continues to show the positive effect on well-being when carers are supported to receive short breaks from their responsibilities and are also signposted to other support services, supporting their individual aims and goals. Furthermore, the whole system approach to prevention and improving outcomes is underpinned by the Kent Carers' Strategy 2022 -2027 as well as the Kent and Medway Integrated Care System Social Prescribing and Navigation Strategy which will support the long-term shifts and core purposes of an integrated care system.
- 2.6 Following a CNA, where eligible for support, people receive a Care and Support Plan (C&SP) which details how a person will be supported and the services they may receive. Adult social care had 16,294 people with an active C&SP at the end of Quarter 1, which is an increase of 2%. Not everyone will go on to need a support package and adult social care has seen varying numbers of new support packages being arranged each quarter, in Quarter 1 it was 2,501, with the average weekly cost of a new support package being £629. Increased averages costs reflect both increases in the level of need for people we support, for example those with mental health needs, and the increased cost of services.
- 2.7 Adult social care completed 2,475 annual reviews of the C&SP in Quarter 1, which was a decrease on the previous quarter; this decrease alongside people's ongoing review becoming due in Quarter 1 has meant adult social care has seen an increase in the number of people requiring an annual review on the last day of the quarter again, to 5,621.
- 2.8 Where people need short-term enablement services, adult social care has the Kent Enablement at Home Service (KEaH) which aims to keep people independent and in their home. In Quarter 1 there was a decrease in the number of people actively receiving this support to 1,572; changes in activity were due to a decrease in referrals from the Adult Social Care Referral Service, Adult social care has temporarily increased the use of a pause function in the CNA to ensure people have enablement services where appropriate whilst we work on increasing the enablement focus at the referral service. The pause function, which is within the guidance of the Care Act will be stood down following the changes to the referral service.
- 2.9 Some people will require residential or nursing care on a temporary basis (either while their longer-term needs or circumstances are assessed, or to provide respite) and adult social care has been working to reduce the use of Short-Term Beds as well as the amount of time people spend in them, ensuring they maximise the opportunities for people to remain independent in their own homes. There was another decrease from Quarter 4 to Quarter 1, continuing the quarterly decreases in activity since Quarter 2 last year.

- 2.10 Adult social care saw an increase in the percentage of people aged 65 and over at home 91 days after discharge from hospital having had reablement services, at 82% in Quarter 4. Increases in those accessing KEaH in Quarter 4 and the work to reduce the longer-term use of a short-term bed have stopped this KPI from decreasing. There is work with partners to develop the Transfer of Care Hubs, where it is anticipated that decision making on people's care and support will shift to outside of the hospital to a robust Multi-Disciplinary Team, maximising the outcomes for people.
- 2.11 A key priority for adult social care 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 for Quarter 1 this measure is RAG Rated Amber at 25%, a 1% increase on the previous quarter, with increases in the numbers of carers, people with learning disabilities, mental health and sensory needs receiving a Direct Payment.
- 2.12 The number of people aged over 65 years old going into long term residential and nursing care varies each quarter and following an increase in Quarter 3 leading to the KPI being RAG Rated Red, there has now been a decrease in the rate per 100,000 for Quarter 4 at 115 per 100,000 and the KPI is now RAG Rated Amber. For the past three years it is the trend that Quarter 4 has the lowest number of admissions.
- 2.13 The percentage of KCC supported people in residential or nursing care with a Care Quality Commission (CQC) rating of Good or Outstanding decreased for another quarter to 75% and is RAG Rated Amber, remaining below target. There has not been an increase in the proportion of those in an Inadequate home, 2% this quarter compared to 3% last quarter (1% of Care Homes in Kent are rated Inadequate) with the movement happening from Good homes to those with Requires Improvement. This is a trend we have seen since the CQC re-started their inspections following the Covid-19 pandemic.
- 2.14 KCC continues to work closely with the CQC and providers to improve the levels of quality in the care home market. Locality commissioners provide advice and support to ensure that effective action plans are in place which respond to identified concerns and/or CQC findings and monitor these action plans as required. At present, eleven care homes (five older person care homes and six learning disability, physical disability, and mental health care homes) have contract suspensions in place to prevent further placements whilst improvements are being made. This is the same total number as the previous quarter. A collaborative approach between KCC and external agencies is being taken to support providers deliver on comprehensive multi agency action plans to improve CQC ratings.
- 2.15 The number of people accessing support who have a mental health need continues to increase each quarter, there were 1,375 people being supported by adult social care in Quarter 1. Supporting Independence Services/ Supported Living continue to be the most prevalent service provision

2.16 The number of Deprivation of Liberty Safeguards (DoLS) applications received remains high, albeit with a lower volume than previous quarters in Quarter 1, at 2,266. Over 2,000 applications were completed, a similar number to previous quarters except when compared to Quarter 4. The DoLS Team continues to manage risk through strong relationships with partners and look to innovate to get the best outcomes from the available resources.

2.17 Adult social care saw an increase in the number of safeguarding enquiries open on the last day of the quarter, this follows targeting of the safeguarding teams in Quarter 4 on closing those which were ready to be closed in preparation for the new locality operating model beginning in April 2023. Safeguarding remains a high priority for adult social care and work is ongoing to ensure enquiries that can be closed are done so; there was only a 3% increase into Quarter 2 of active enquiries.

### 3. Conclusion

3.1 Adult social care continues to deal with high levels of demand across all the teams; in particular, there are consistently high levels of contacts, incoming CNAs, DoLS applications and increasing numbers of people needing services with a mental health need. Adult social care continues to face challenges both in its own workforce and in the social care market, and is taking steps to increase recruitment and retention, as well as finding new ways to innovate to help manage changing demands and the need for new solutions to support people. Adult social care ensure they prioritise and risk manage these demands so we can meet our statutory duties and keep people safe and independent.

### 4. Recommendation

**Recommendation:** The Adult Social Care Cabinet Committee is asked to **NOTE** the performance of services in Quarter 1 2023/24

### 5. Background Documents

None

### 6. Report Author

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