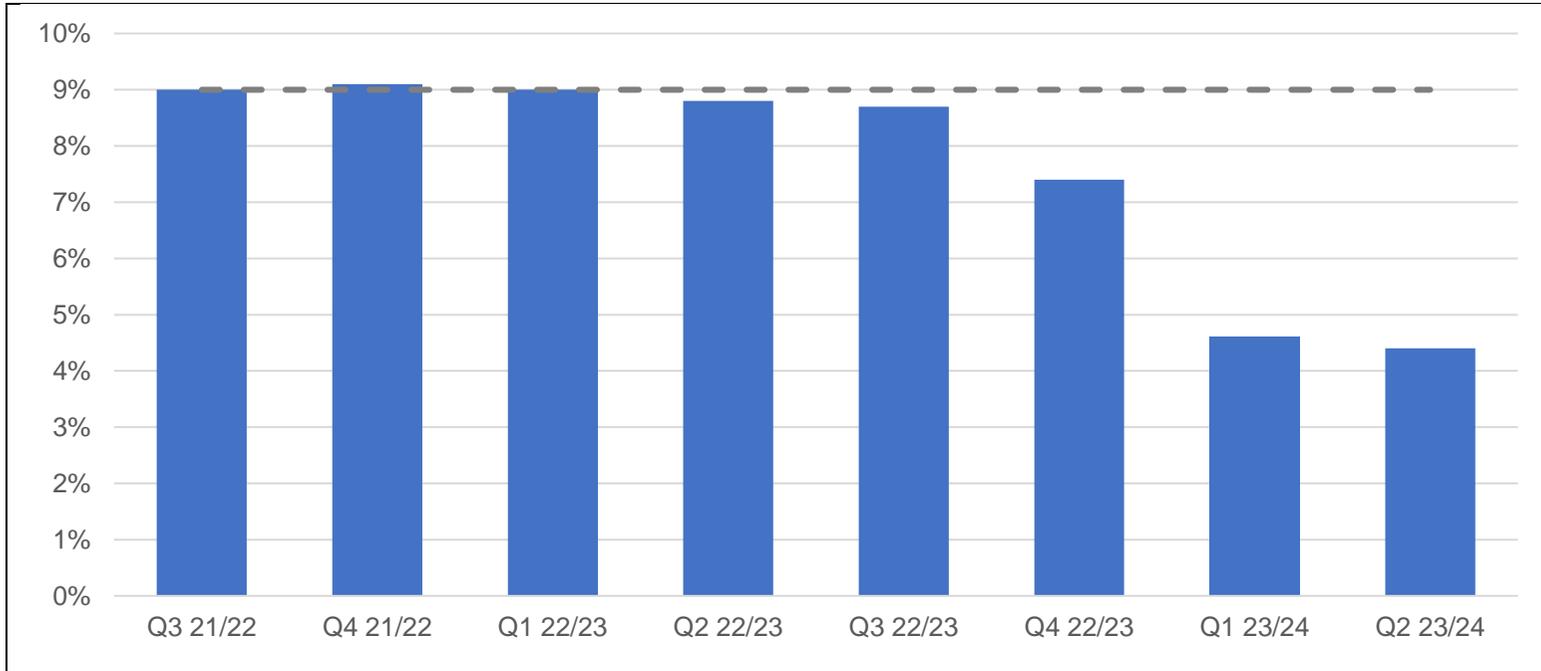Appendix 1: Adult Social Care and Health Key Performance Indicators and Activity Performance 2023/2024

ASCH1: The percentage of people who have their contact resolved by Adult Social Care and Health (ASCH) but then make contact again within 3 months.	GREEN ⇧

Technical Notes:

Target set at 9% (dotted line) with an upper threshold of 13%

The Direction of Travel is significant.

Please note axis does not end at 100%

Commentary: Delivery on this Key Performance Indicator (KPI) continues to perform at target with just 4% of those having their original contact resolved with no further action needed by adult social care coming back to us within three months.

Where there are recurring contacts, there is ongoing work to analyse the themes, and guidance provided for partners to signpost people to more appropriate support if necessary.

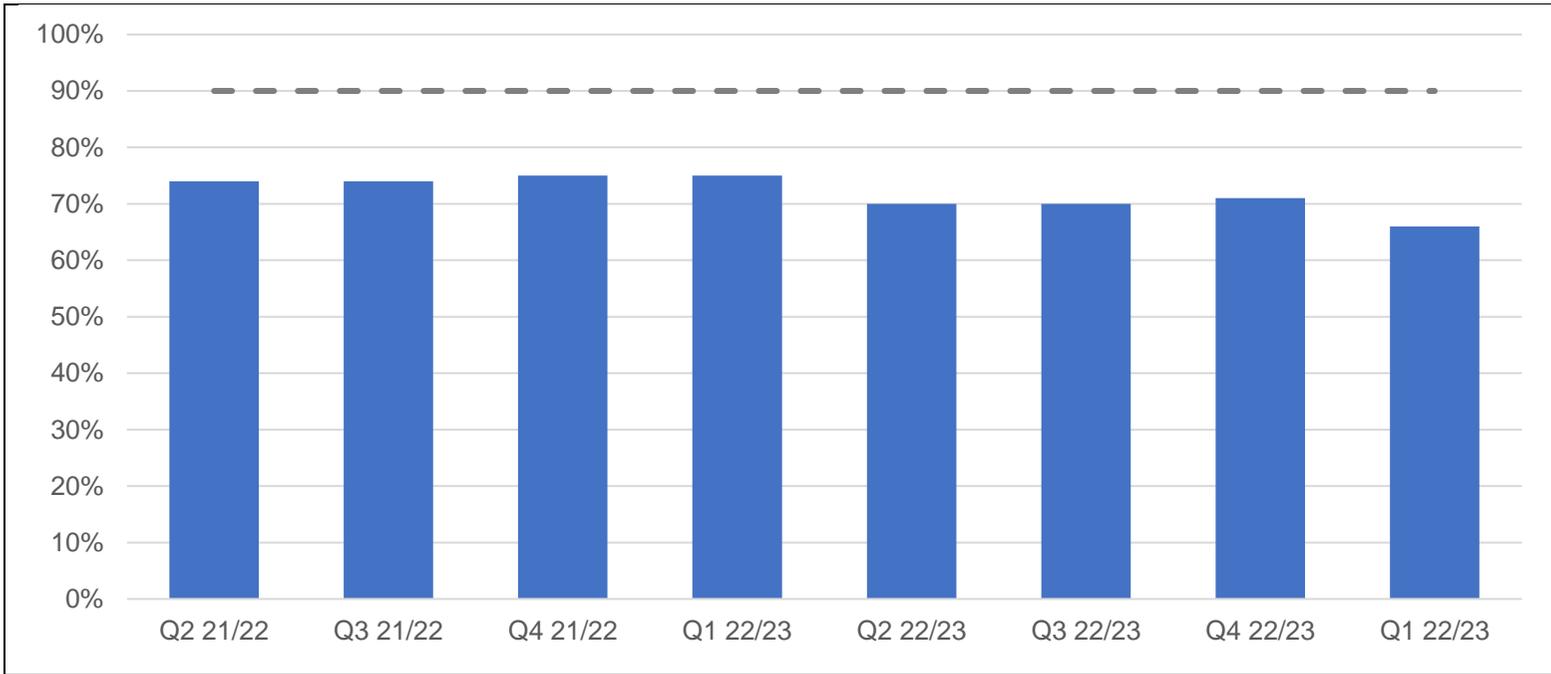| ASCH2: The proportion of new Care Needs Assessments delivered within 28 days. | RED ⇩ |

Commentary: 66% of incoming Care Needs Assessments (CNAs) were completed within 28 days in Quarter 1; this is the time when the new Locality Model went live, and the new teams were adjusting to a new way of working. There continues to be a focus within adult social care on ensuring people do receive their CNA in a timely manner, with regular meetings to discuss the actions taken and need to address the demand in delivering CNAs.

There was an increase in the number of CNAs initiated in Quarter 1, at 5,573 this was the highest volume seen since this reporting began. Overall, 4,880 CNAs were completed in Quarter 1, which includes those started in previous quarters, and is an increase on the number completed in the previous Quarter 1 the year before (2022/23).

| ASCH3: The percentage of people in receipt of a Direct payment with Adult Social Care and Health | AMBER ⇔ |
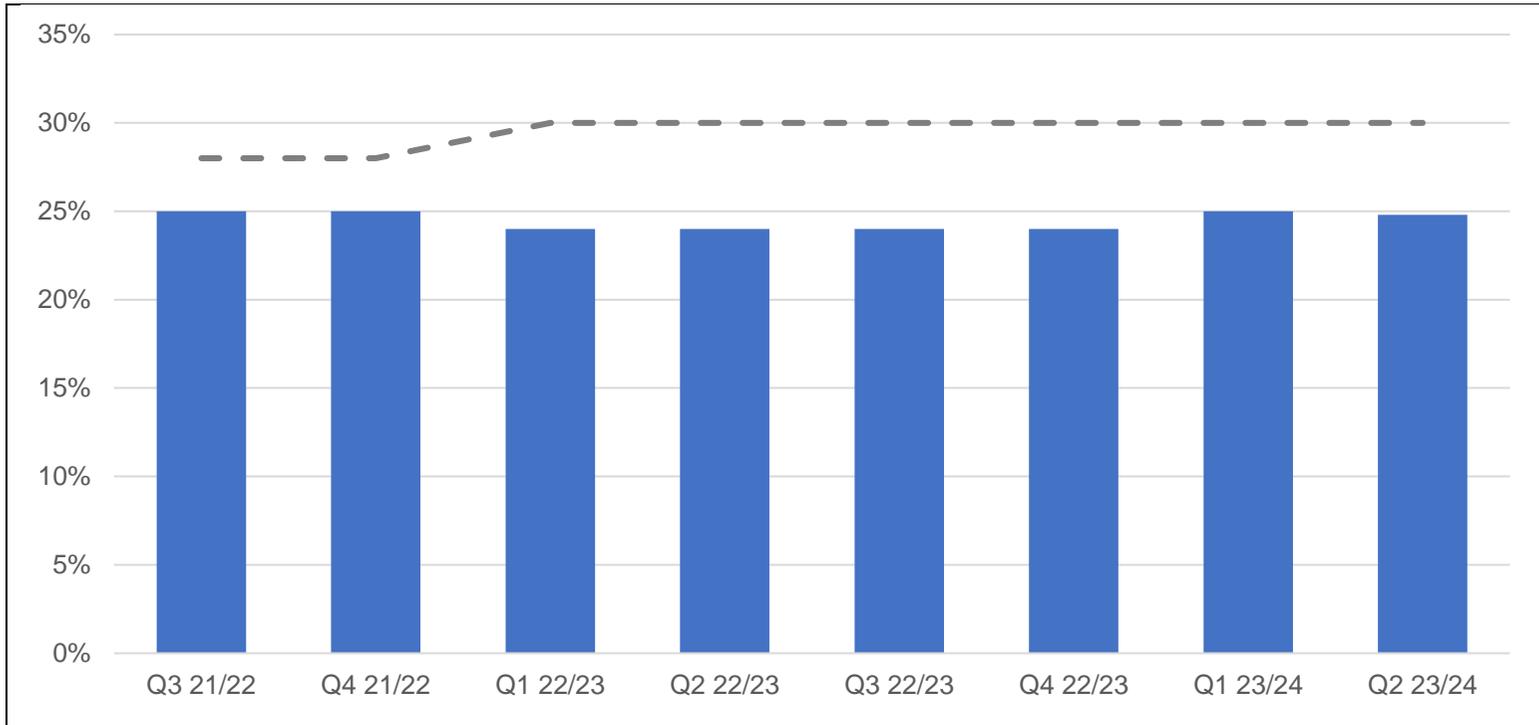
Technical Notes:

Target set at 30% (dotted line) The floor threshold is 24%

Does not include people with Learning Disabilities aged 18-25 with Children Young People and Education (CYPE).
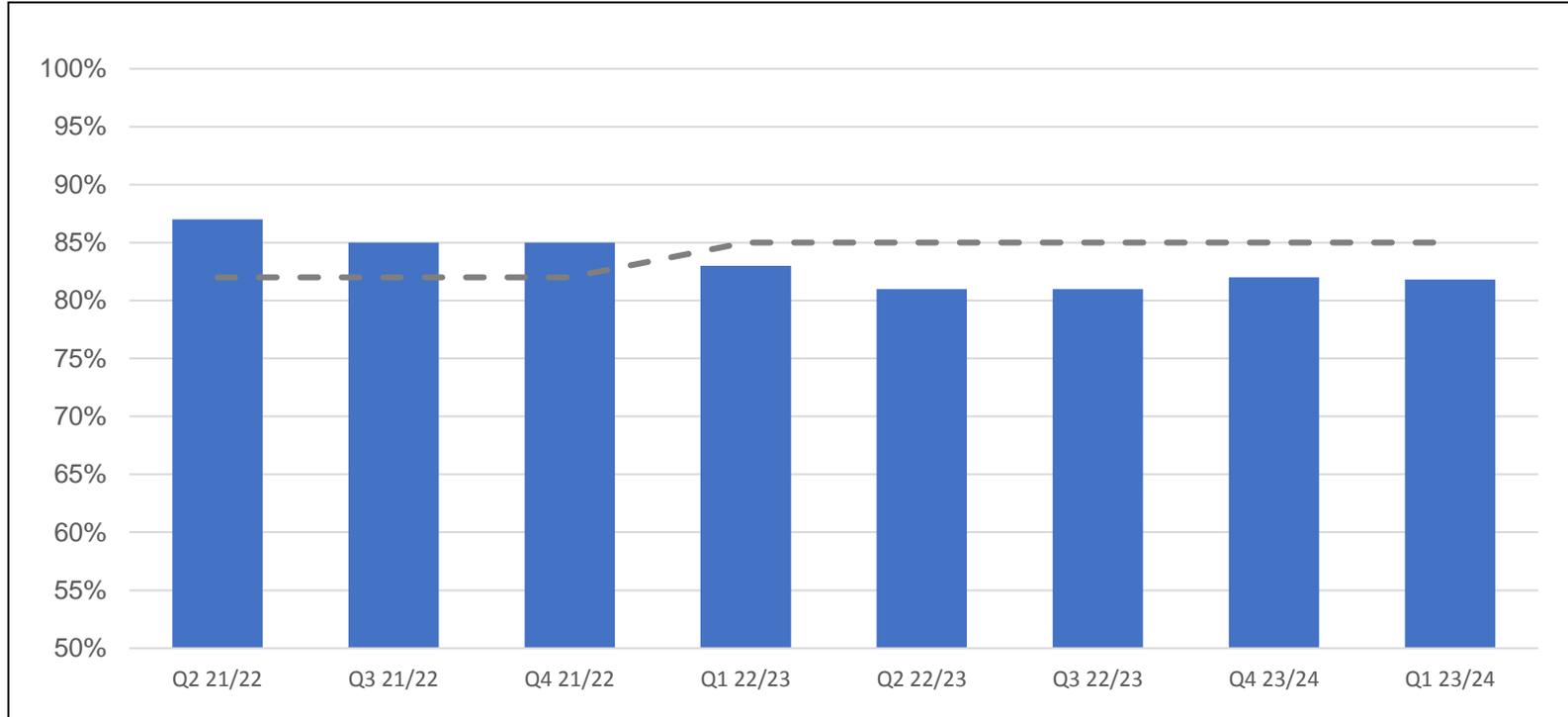
The Direction of Travel is not significant.

Please note axis does not end at 100.

Commentary: Adult social care continued to have 25% with a Direct Payment in Quarter 2; there was an increase in the number of people with a Direct Payment during the quarter at nearly 3,000.

ASCH4: Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	AMBER ⇔

Technical Notes:

Target set at 85% (dotted line) with a floor threshold of 80% for 23/24

KPI runs a quarter in arrears to account for the 91-day time frame.

The overall Direction of Travel is not significant.
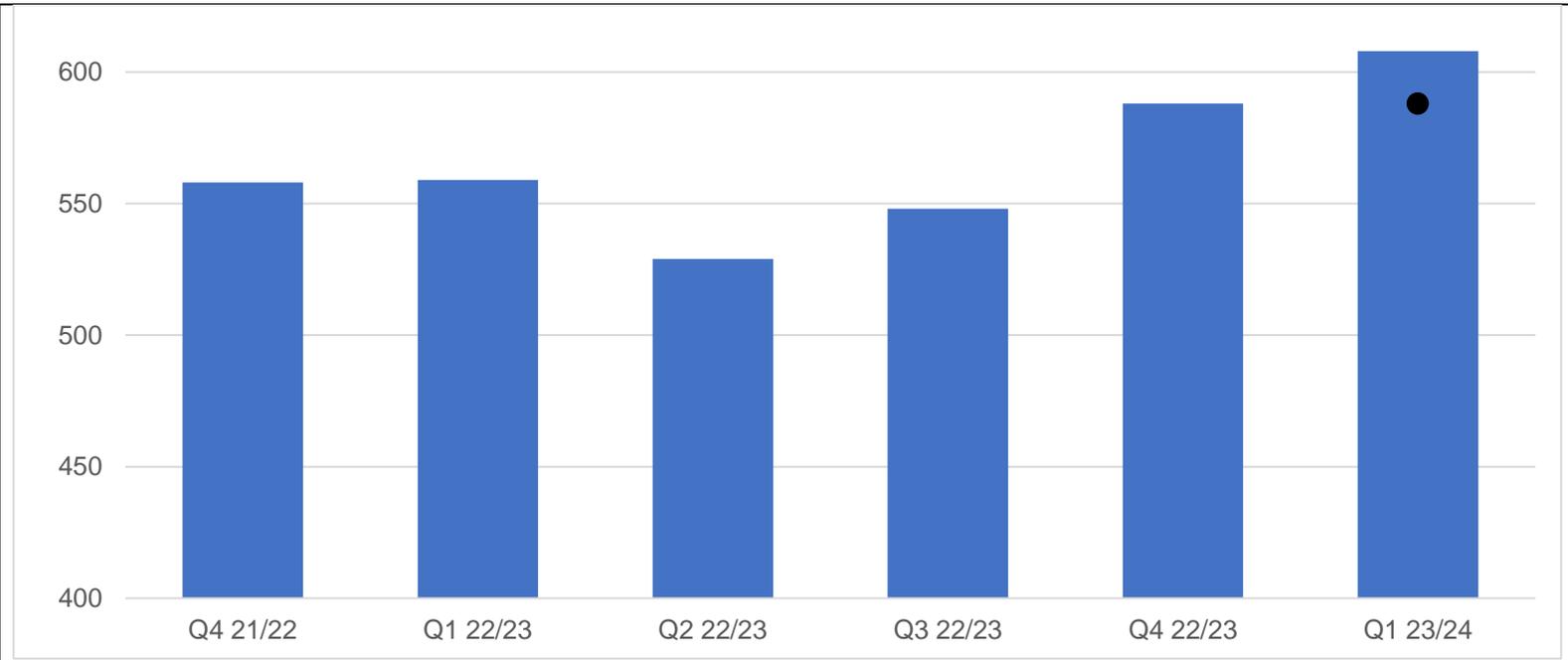
Please note axis does not start at 0.

Better Care Fund Measure

Commentary: Adult social care continue to see 82% of older people being at home 91 days following discharge from hospital having had reablement services – this includes Short Term Beds and Kent Enablement at Home. As part of Performance Assurance and Sustainability Plans there is focus on ensuring people who are discharged from hospital and needs ASC support are seen and assessed quickly and receive the services they need so they can return home.

Kent Enablement at Home is working with both adult social care Short Term Pathways Teams and the provider Hilton to provide services to those who need ongoing care where there is currently no community support available to them.

ASCH5: Long Term support needs of older people (65 and over) met by admission to residential and nursing care homes	AMBER ⇧

**Commentary:** Adult social care has changed the calculation behind this measure from showing quarterly figures to 12 month rolling, this removed the quarterly volatility of the figures and aligns more appropriately with both the national Adult Social Care outcomes Framework and the Better Care Fund reporting allowing for benchmarking against National, South East Region and other Local Authorities.

The target has been set at 588 per 100,000 of the population with the intention to maintain and improve on the 2022/23 position, with a 5% upper threshold of 617 where the RAG Rating would be Red if this is exceeded.

ASCH6: The % of Kent Count Council (KCC) supported people in residential or nursing care where the Care Quality Commission rating is Good or Outstanding

AMBER ⇧
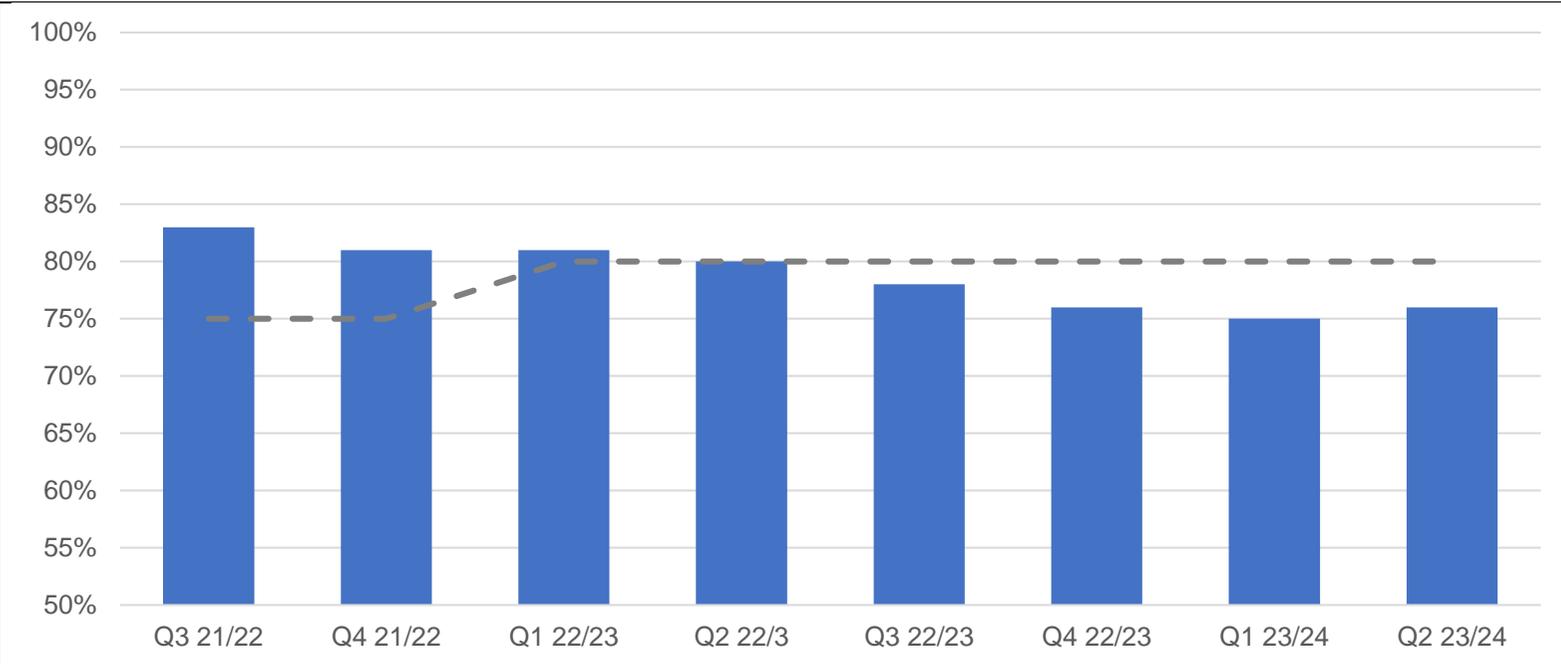
Technical Notes:

Target set at 80% (dotted line) with a floor threshold of 75%

The Direction of Travel is significant.

Please note axis does not start at 0.

Corporate Risk Register: CRR0015

Commentary: Adult social care saw a 1% increase in those we support in residential or nursing care being in a care home rated Good or Outstanding by the Care Quality Commission (CQC). Only 2% were in Inadequate care homes this quarter, the same as in Quarter 1.

At present, thirteen care homes (five older person care homes and eight learning disability, physical disability, and mental health care homes) have contract suspensions in place to prevent further placements. Three of the Learning Disability/Physical Disability/Mental Health (LDPDMH) homes have suspensions in place due to either refurbishment of the service, pending closure or the service being dormant with CQC. This is slightly higher than the previous quarter, mainly due to one LDPDMH service spanning across three separate registrations so requiring three separate sanctions. A collaborative approach between KCC, Health colleagues and external agencies is taken to support providers to deliver on comprehensive multi agency action plans to improve CQC ratings.

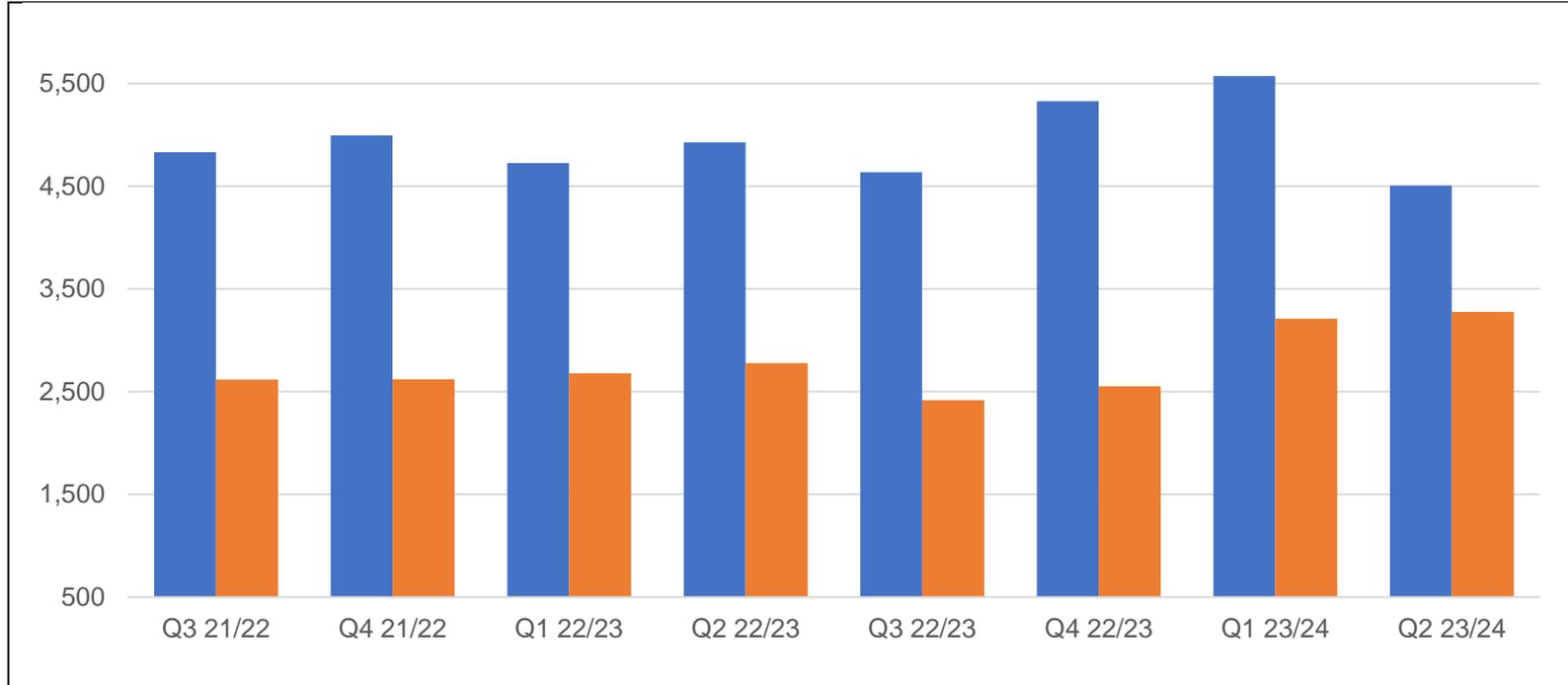**ASCH7: The number of people making contact with Adult Social Care and Health**
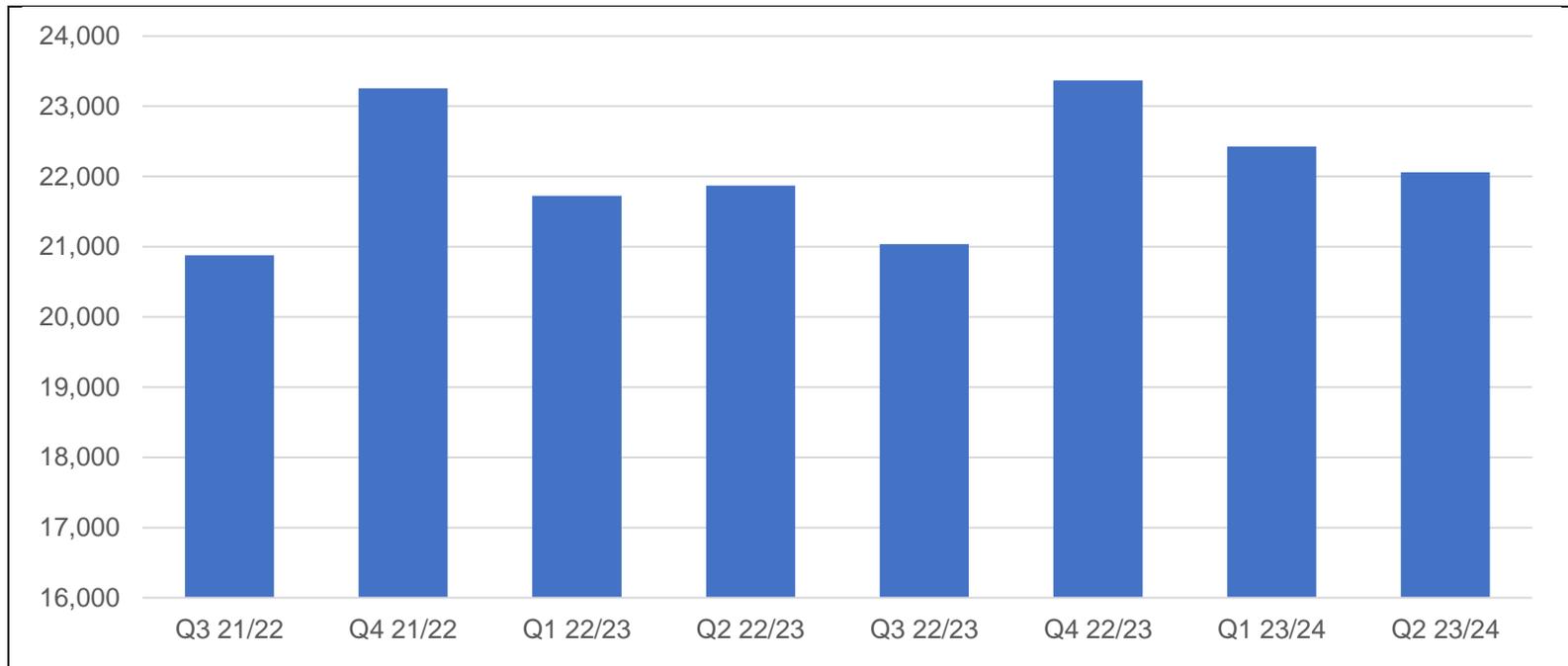
Commentary: Quarter 2 saw a small decrease in the number of contacts coming into adult social care, however we are still handling over 22,000 contacts each quarter this year.

ASCH8: Care Needs Assessments

Commentary: Adult Social Care saw a decrease in the number of incoming CNAs in Quarter 2, the lowest seen since this monitoring began. 1,000 less CNAs were initiated compared to the previous quarter. Adult social care completed 4,491 CNAs in Quarter 2, which was 99% of the incoming CNAs. These completions include CNAs started in an earlier quarter.

The decrease in initiated CNAs and corresponding number of completed CNAs led to a similar number of CNAs to be completed on the last day of Quarter 2 as there was in Quarter 1.

ASCH9: The number of new Carers' Assessments delivered
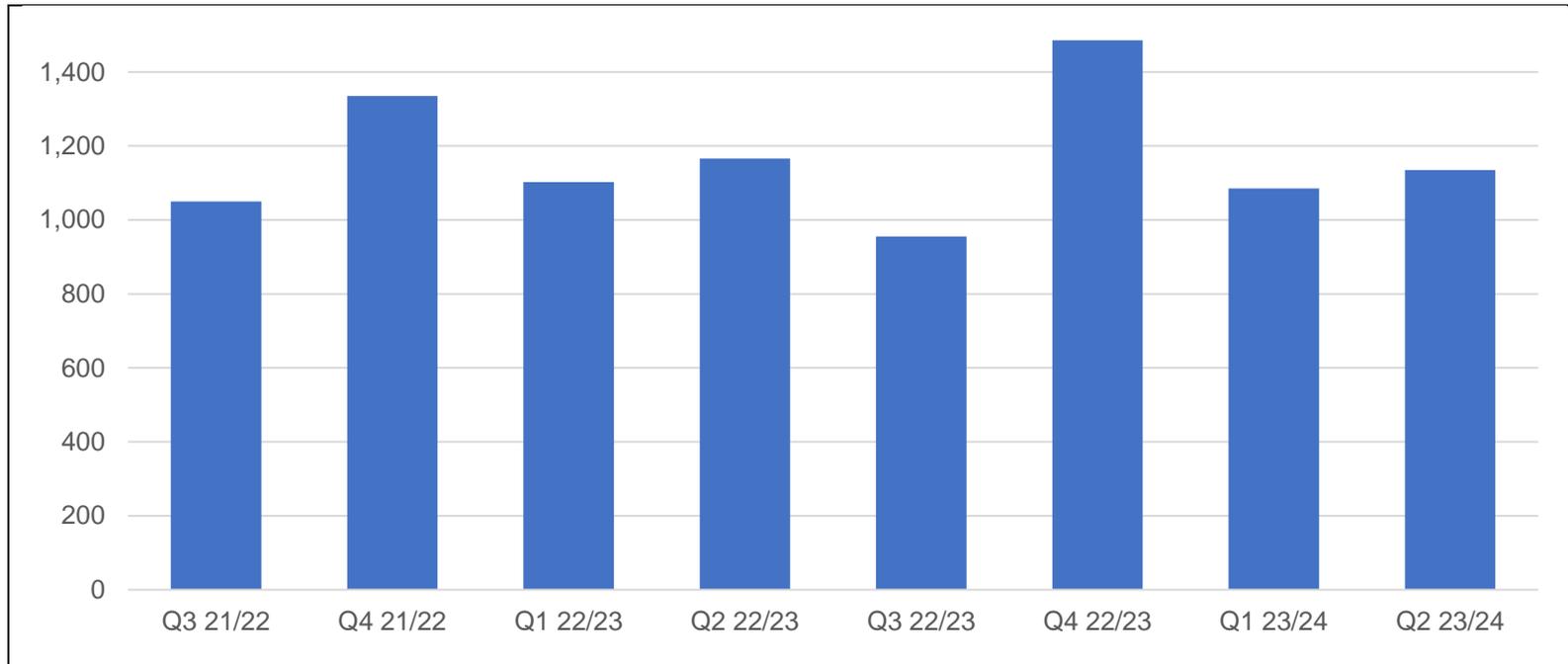
Commentary: Adult social care an increase in the number of Carers' Assessment completed in Quarter 1.

Adult social care has recently reviewed the Governance for Carers to provide assurance and the Strategy Group will report to ASCH Senior Management Team. Carers have expressed a wish for forums alongside the task and finish groups (delivering against the strategy) and we are currently looking at how these will be delivered. A training video has been developed by the Primary Care Learning Team (for Primary Care Networks) in which the Assistant Director responsible for Carers has highlighted the need for GPs to identify carers, this will be delivered jointly with Involve, one of the commissioned carers organisation.

ASCH10: The number of people with an active Care and Support Plan at the end of the Quarter
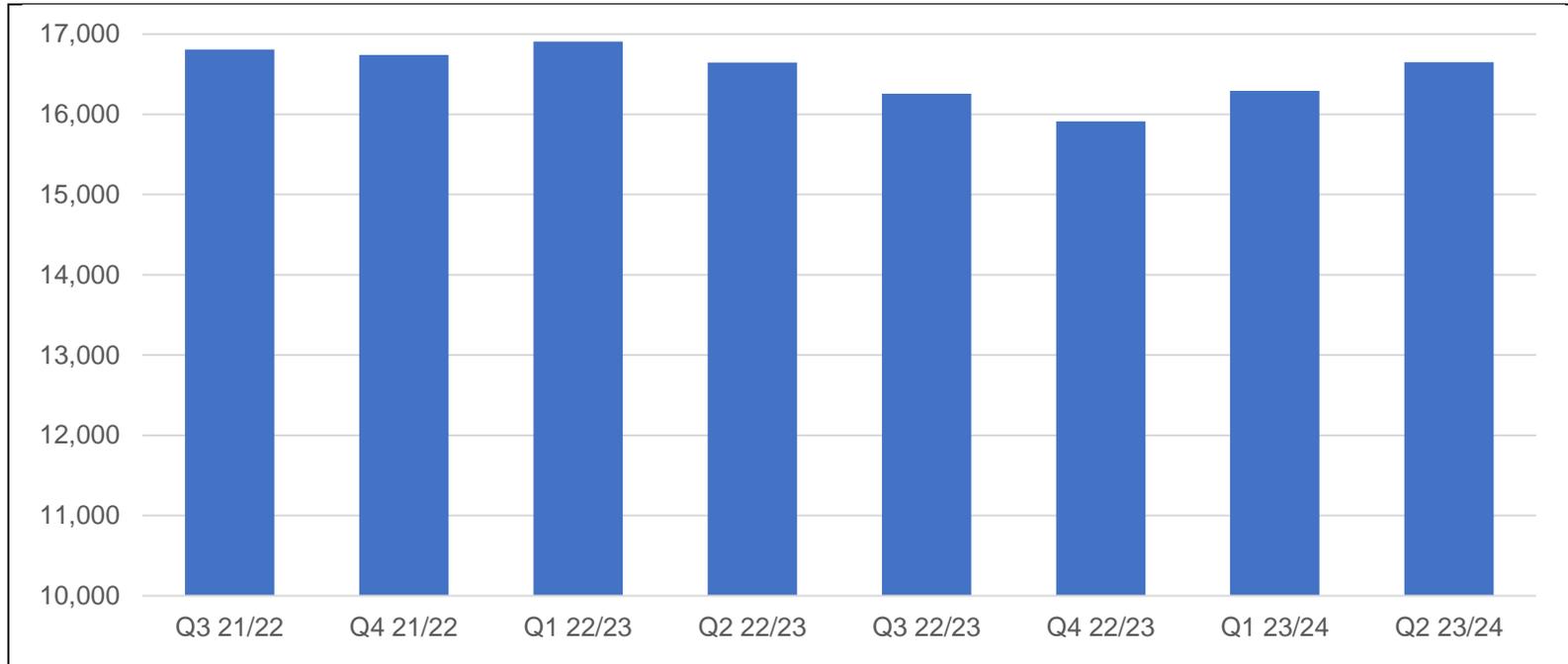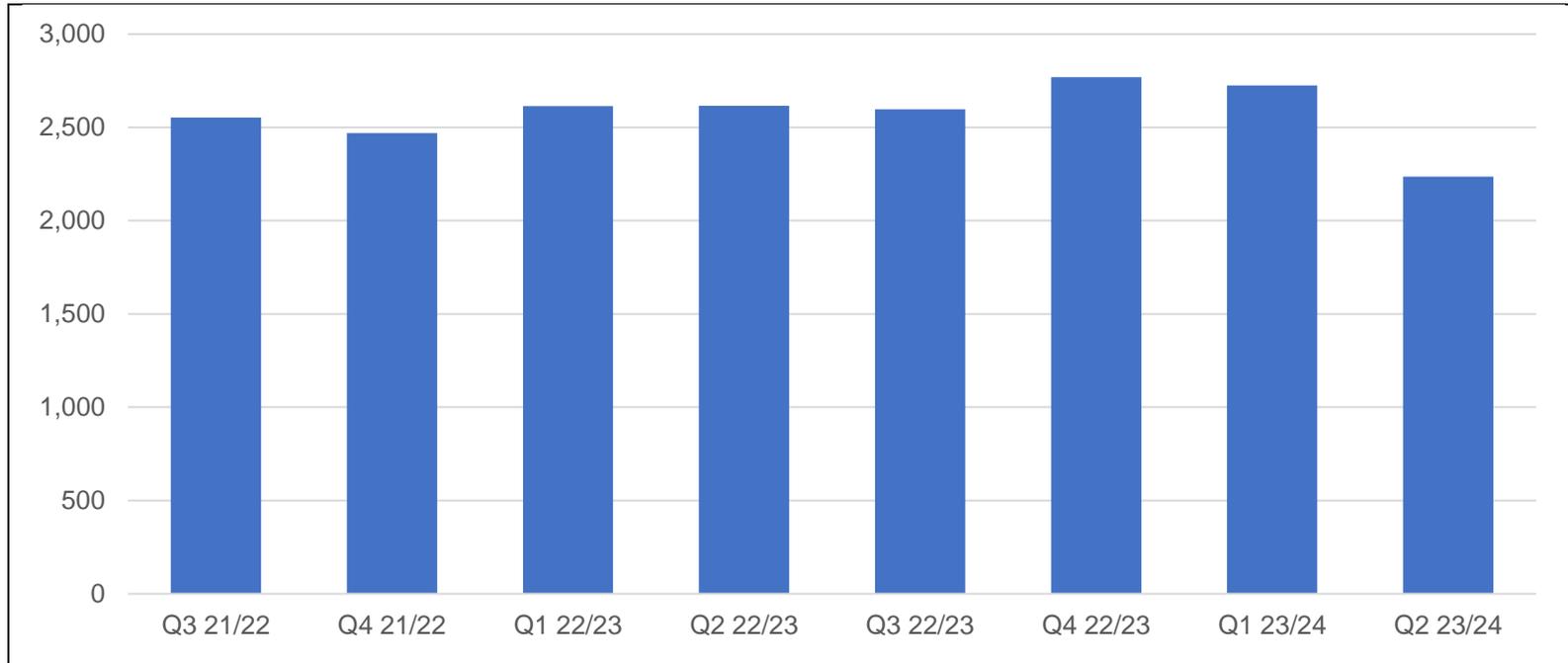

Technical Notes:

Activity measure, no specified target

Please note axis does not start at 0.

Commentary: Care and Support Plans (C&SP) form the basis of the arrangements for meeting a person's social care needs and follow the completion of a CNA where a person is assessed as eligible for care and support with adult social care.

In Quarter 2 there was another increase in the number of people with an active C&SP, and is at a similar level when compared to Quarter 2 in 2022/2023.

ASCH11: The number of new support packages being arranged for people in the quarter

Commentary: Each quarter the figures are updated as new packages are placed onto Mosaic (the Adult Social Care Client Recording System), there can be a time-delay in updating the client recording system. Quarter 1 originally saw 2,501 new packages of support arranged, there are now 2,725. It is expected that Q2 will increase too.

Practitioners will work with people following their assessment and application of eligibility criteria to determine the best way to meet the person's eligible needs and personal outcomes. A traditional package of care is just one way to meet a person's care and support needs and practitioners will explore local community resources within the voluntary and community sector, such as community catalysts and other ways including technology or one-off pieces of equipment to support independence.

ASCH12: The average cost of new support packages arranged for people in the quarter
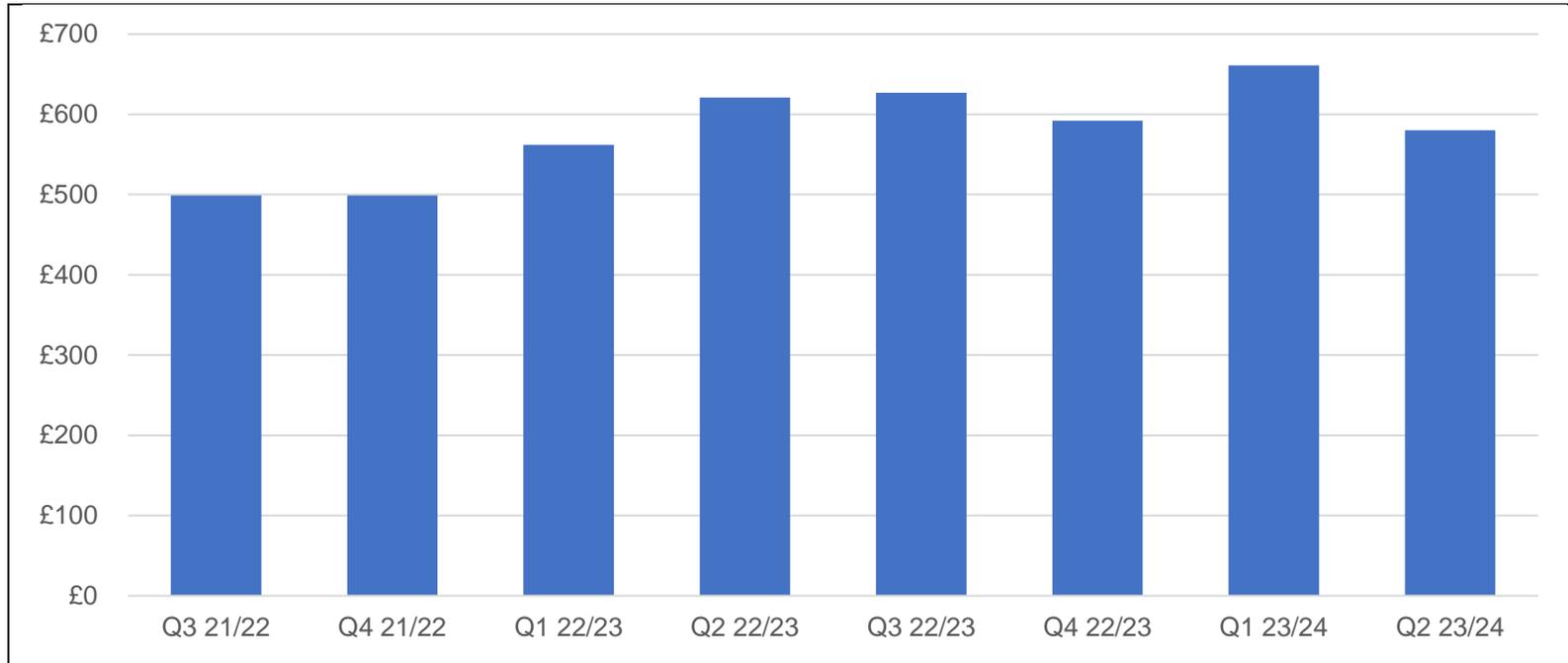

Technical Notes:

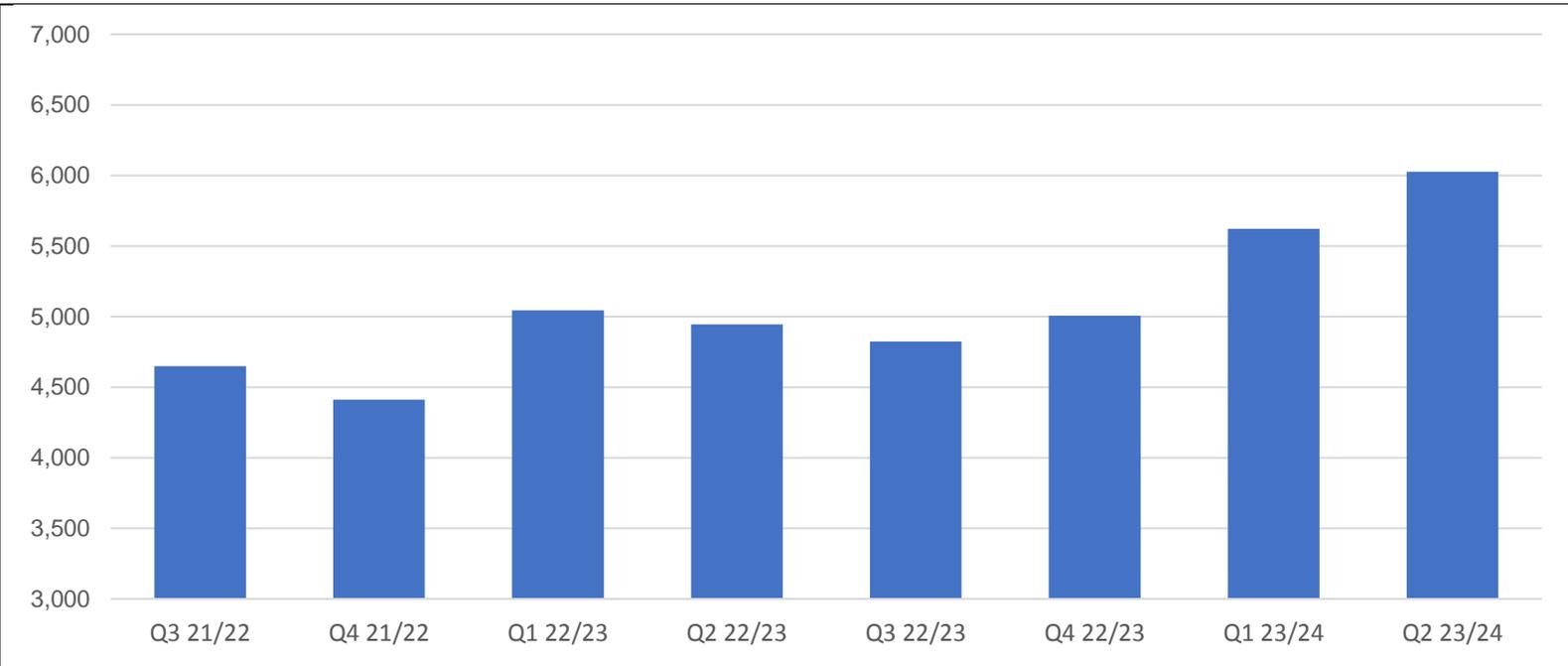Activity measure, no specified target

Average weekly cost at end of quarter

Q1 2023/24 figure has been updated.

Commentary: Quarter 1 saw an increase in the average cost of new support packages being arranged on the previous quarter and is at a higher amount than the quarters before that. It is expected that the average cost shown here for quarter 2 will increase, as ASCH12 will also increase as more support packages are inputted onto Mosaic.

The increase in costs reflects the level of need for people we support, this is particularly seen in Supported Living arrangements for people with mental health need, and in increases to the cost of services.

ASCH13: The number of people requiring an annual review to be completed on the last day of the quarter

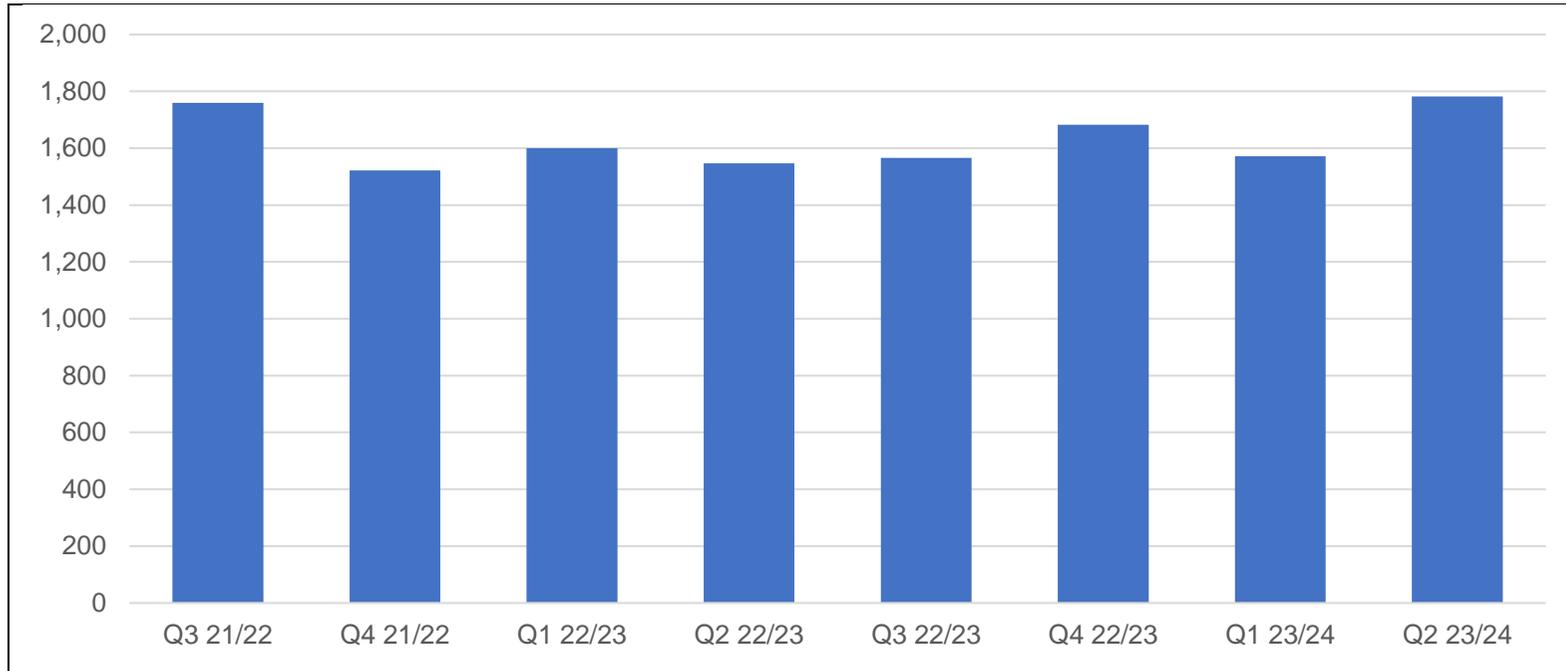Technical Notes:

Activity measure, no specified target

Please note axis does not start at 0.

Corporate Risk Register: CRR0002

Commentary: The number of people requiring their annual review of their C&SP continues to increase as on the last day of Quarter 2; it was a 7% increase on the previous quarter.

In Quarter 2 there was a decrease in the number of completed annual reviews, with 2,140 compared to 2,475 in Quarter 1; however, there was an increase in the number of first reviews (those delivered at 6-8 weeks after support service start) of 20%.

ASCH14: The number of people in Kent Enablement at Home

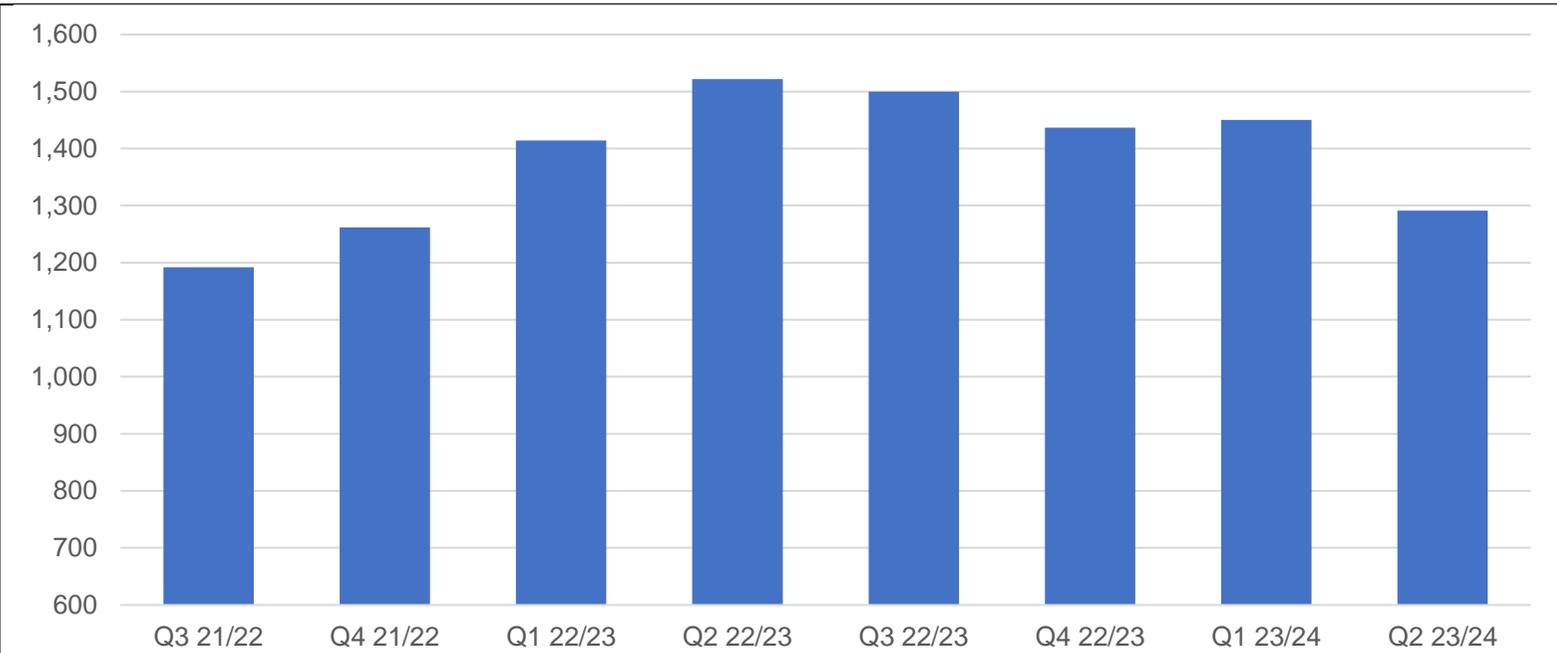Technical Notes:

Activity measure, no specified target

People receiving services with Kent Enablement at Home (KEaH)

Please note axis does not start at 0.

Commentary: There was an increase of 13% in people receiving the Kent Enablement at Home (KEaH) Service in Quarter 2; KEaH managers have worked extensively with the ASCH Referrals Service and Community Teams to increase referrals into their service and have been actively looking at opportunities to increase enablement opportunities with those in the process of receiving a CNA or already receiving services.

The KEaH teams have also been supporting the Occupational Therapist Service and the Kent Enablement Service (KES) where there are many opportunities to do joined up working and share expertise. Next year the intention with KES is to do more joined up working and provide a total wrap around services for those within these services, increasing the outcomes for the people we support in these services.
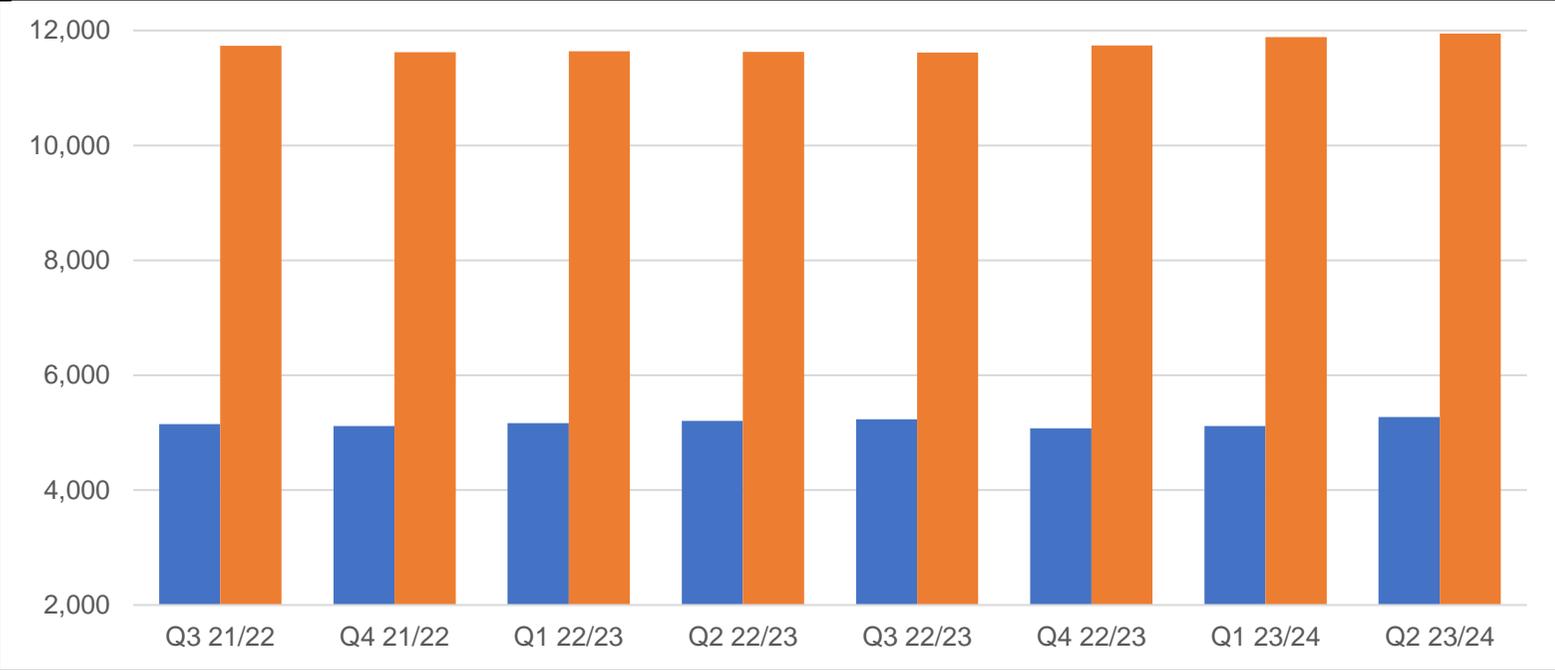
ASCH15: The number of people in Short Term Beds

Commentary: Adult social care continues to see decreases in the number of people in a Short-Term Bed; there continues to be targeted work to ensure that Short-Term Bed use is necessary and appropriate, and that that the people in them are assessed, reviewed, and enabled to go home or on to community services as needed, in a timely manner.

## ASCH16: The numbers of people in Long Term Services

Commentary: The number of people accessing community services continues steadily increase and was at over 11,900 in Quarter 2. The number of people in residential and long-term care continues to fluctuate with a slightly increased number in Quarter 2.

Work around exploring alternative approaches to care and support and community catalyst and strengthening the use of self-directed support and direct payments continues to be the main driver to ensure people will receive the care and support and be able to live in their own home where able to do so.

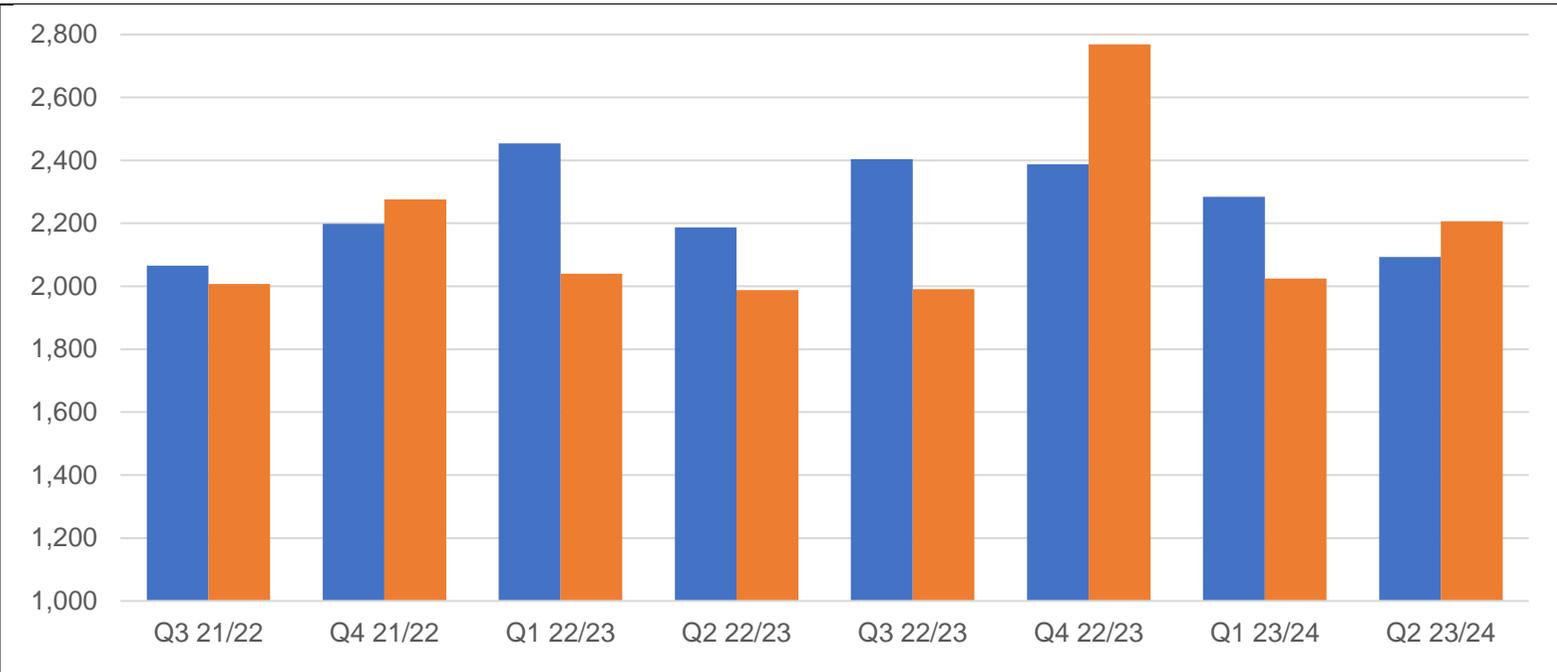**ASCH17: The number of people accessing Adult Social Care and Health Services who have a mental health need**
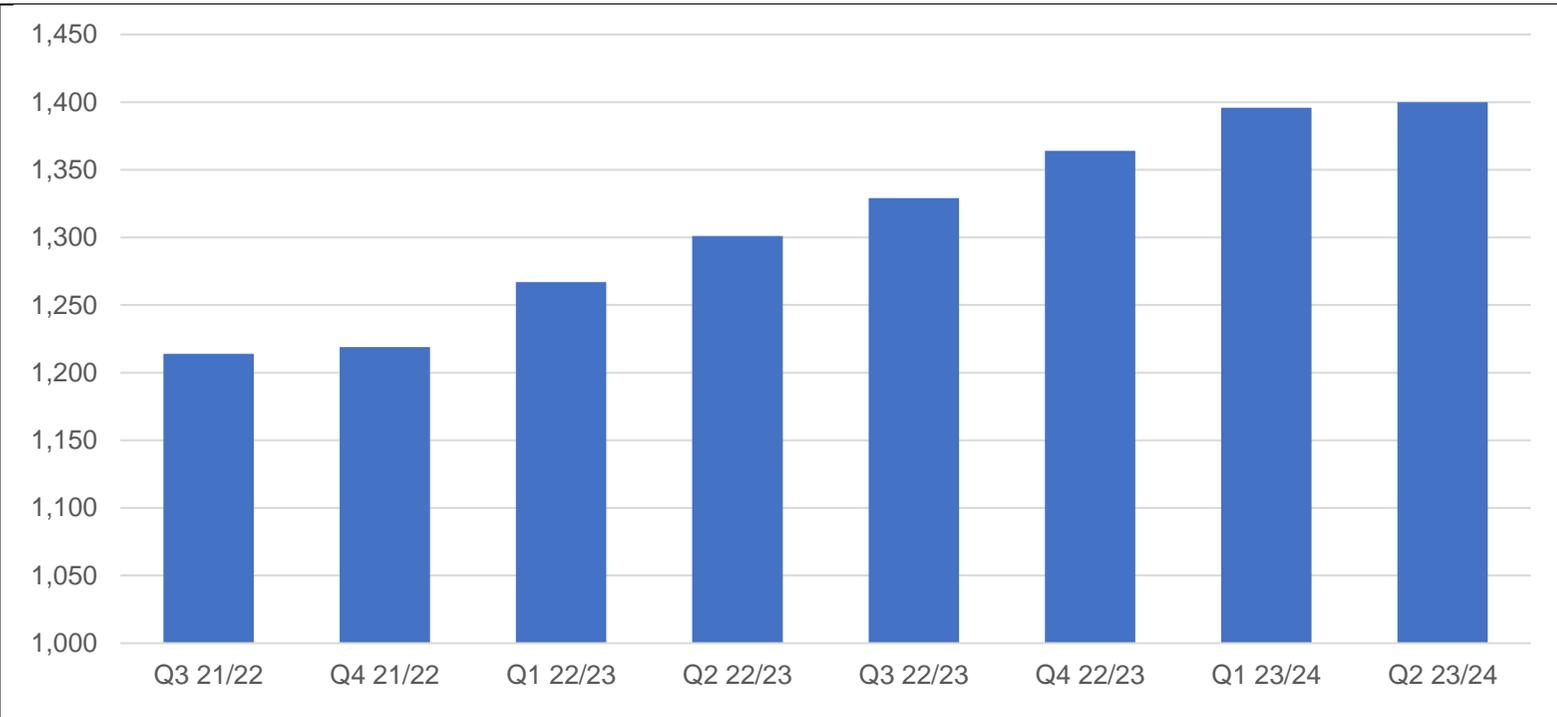
Commentary: Adult social care continues to see increasing numbers of people accessing support services with a mental health need. In the main, these support services are for Supporting Independence Service/Supported Living and long-term Residential care.

ASCH18: Number of Deprivation of Liberty Safeguards applications received and completed

Commentary: The numbers of applications for Deprivation of Liberty Safeguards (DoLS) remains high with 2,093 received in Quarter 2; there were 2,207 assessments completed.

ASCH19: The number of safeguarding enquiries open on the last day of the quarter
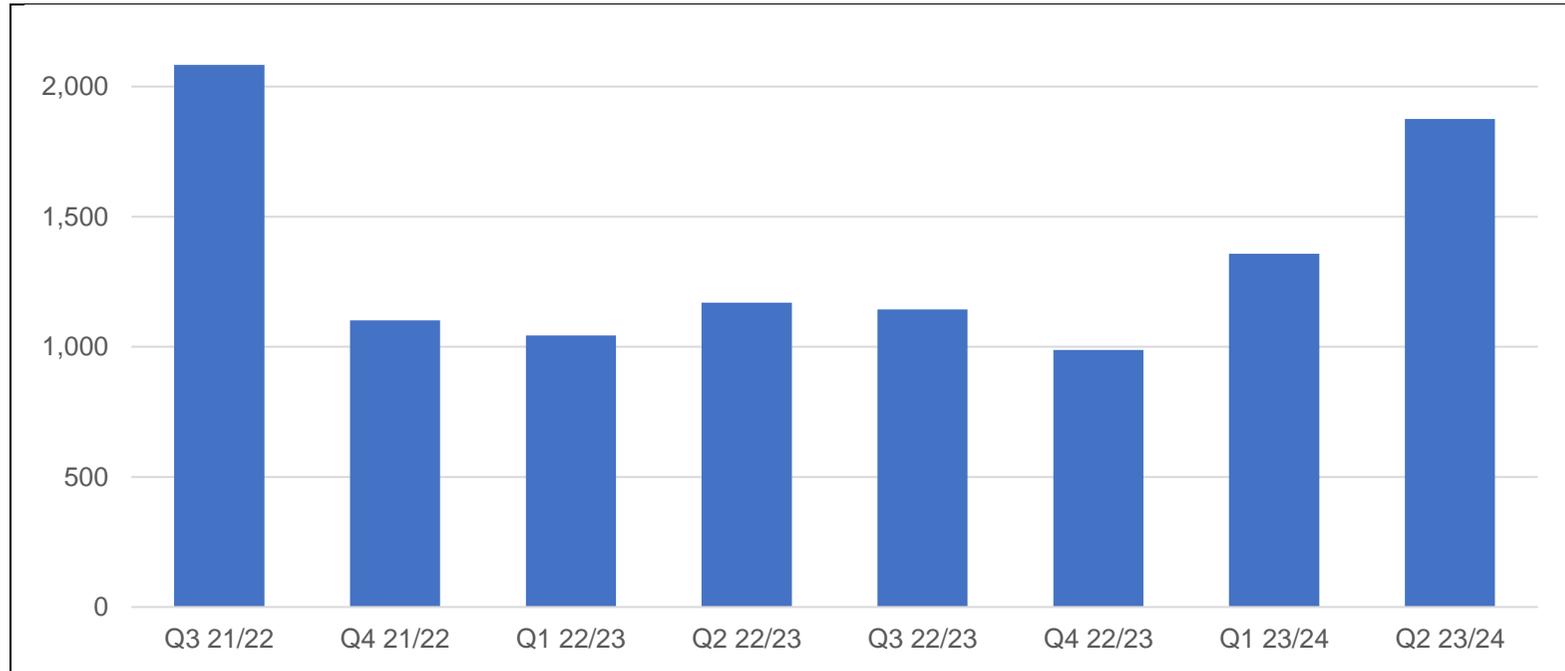
Commentary: The number of safeguarding enquiries open on the last day of the quarter continues to increase, following the move to locality working. The number open has increased in part due to capacity of staffing in teams, but also the need to embed the learning around the speciality of the safeguarding skills across all teams, where previously this was held in a separate team. Whilst this learning is ongoing the areas have all adapted their teams to deal with the level of safeguarding that is coming into the localities. The density of safeguarding enquiries is seen most in teams where there are acute hospitals/trusts, and work is underway with our partners to educate what an appropriate referral is for safeguarding, and closer links are being forged at a local level. Managers in localities are developing strategies to address performance and prioritising risk. The area referral service/safeguarding transformation project is also underway, and extensive research with other local authorities has informed our way forward which will equally have an impact on our safeguarding numbers in the future.