

By: Oliver Mills, Managing Director, Kent Adult Social Services

To: Adult Social Services Policy Overview Committee –
23 September 2008

Subject: **UPDATE ON END OF YEAR PERFORMANCE 2007-08**

Classification: Unrestricted

Summary: This report updates Members on Kent Adult Social Services' performance and the latest information about the assessment process in place for 2008-9.

Introduction

1. (1) The Adult Social Services Directorate has a statutory duty to provide performance information to the Department of Health on an annual basis. A wealth of information is provided via a number of statutory data returns, which currently produce 25 performance indicators. In addition, the Self-Assessment Statement provides information about all aspects of our approach to strategic management, policy, service management, planning and customer care across all client groups. Regular meetings with our Commission for Social Care Inspection (CSCI) colleagues also provide the opportunity for discussion about the issues the Directorate faces and our plans to improve performance.

(2) The 25 performance indicators are an important part of the Performance Assessment Framework, although not the whole story as explained above. They are assessed by CSCI and form part of the annual assessment cycle, which culminates in the Annual Review Meeting with the CSCI Business Relationship Manager and the Regional Director. This process is finalised with the publication of the star rating for each Local Authority in late November/ early December.

(3) Although for 2008-9 the 25 Performance Assessment Framework indicators are being replaced by fewer National Indicators, as explained at the presentation to the Adult Social Services Policy Overview Committee (ASSPOC) in April 2008, in practice the Directorate will continue to provide almost all the information currently required, plus some additional information, and will also be developing new indicators. More information on this is set out later in the paper.

Performance update for 2007/08 for Key indicators

2. (1) Despite the Directorate facing some difficult challenges, good performance for key indicators has been maintained during 2007-8.

Current Performance Bandings

(2) The results for the 25 performance indicators are each given a rating or a "banding". CSCI sets out the banding framework for each performance indicator as follows:

- Band 5 – OPTIMUM Performance
- Band 4 – GOOD performance
- Band 3 – ACCEPTABLE performance
- Band 2 – Ask Questions about performance
- Band 1 – Investigate urgently

Kent's performance results for 2007-08 compared to 2006-07

(3) Kent Adult Services Directorate continues to demonstrate its excellent performance culture. CSCI have frequently acknowledged that Kent's priority is not to just increase performance indicator results, but to ensure that the focus is on improved outcomes for people. The Directorate's approach to performance management is well embedded and is managed through accountable staff. CSCI have also acknowledged that where there *appears* to be poorer performance for some indicators (details below), there are credible reasons or explanations as to why this is. This shows that in these areas, it's the performance indicator itself that is at fault, and not the way in which we support the people of Kent.

(4) At present we have 21 indicators for 2007-08 that are directly comparable with 2006-07. We are still awaiting some information from CSCI for one indicator and we have not yet finalised the unit cost indicators. Of the information that we do have, the results are as follows:

	2006/07	2007/08
BAND 1	0	0
BAND 2	1	1
BAND 3	5	4
BAND 4	7	7
BAND 5	8	9
TOTAL	21	21

(5) Full results for 2007-08 can be found at appendix A. Over three-quarters of our performance indicators were rated as good or optimum. This included maintaining excellent performance including:

- Increases the number of people helped to live at home.
- Significant increases in the take up of Direct Payments
- Continuing to providing a very high level of services within four weeks of assessment to all service users
- Continued good support to carers

The Band 2 indicator

(6) Although Band 2 indicators indicate that we need to 'ask questions about performance', the definition for Kent's Band 2 indicator is flawed and does not indicate poor performance, and our CSCI inspectors are in agreement with us about this.

Older People helped to live at home

(7) Within Kent, over 20,000 older people are helped to live at home, whether through a direct payment, homecare, or support from a *voluntary organisation* such as Age Concern. Wherever possible, people are enabled to retain their independence by accessing either one or a combination of these services. Within Kent, a large amount of funding is given to the voluntary sector to provide this type of preventative service, which is a critical part of 'Promoting Independence'.

(8) The definition for this performance indicator, as provided by the Department of health, is very out of date, and does not allow us to count anybody supported through the voluntary sector without going via a care manager. Because of this, we cannot count all of the people we support to live independently within this indicator, and so it is not a fair reflection of our performance.

Future Performance Management

3. (1) The way in which Government is monitoring local government is undergoing a change. The Performance Assessment Framework indicators will no longer be reported after 2007-08 but will be replaced by the National Indicator set with fewer social care indicators within it. The consultation process on the National Indicator Set has been completed and a final set of indicators announced.

(2) The set of new performance indicators are aiming to move towards a more outcome based performance framework, although there is still work to do on this. Some of the indicators are based on the same data sets as before whilst there are also some brand new ones. A list of the new indicators can be found at Appendix 2.

(3) Monitoring of this new performance framework is still very much in progress, but much work is being done to embed them within our existing performance culture and to ensure staff are engaged. An update of the latest performance against these new definitions will be brought to the next ASSPOC.

Government Consultation on Changes to the Performance Assessment Process

4. (1) The National Indicator Set has been finalised, but Government has not yet published its response to the consultation earlier in the summer on its proposed changes to the performance assessment process. This fits into the new Comprehensive Area Assessment, which replaces CPA, as explained in the presentation to ASSPOC in April. The thrust of the changes, which KCC would support, is to:

- position the work that KASS does within the wider Health and Wellbeing context
- expect KASS to take the initiative in managing performance, and demonstrate to inspectors how it identifies and addresses the needs of the people of Kent, rather than relying so heavily on nationally-prescribed indicators
- use a wider range of information to inform judgements about performance
- reduce the burden of performance monitoring (this is a stated intent, but in practice local authorities strongly deny that this will be the case – indeed the burden currently seems heavier because we are in transition between indicator sets)

(2) The star rating will disappear and be replaced with a numerical rating (Excellent – 4, Promising – 3, Uncertain – 2 and Poor -1). The rating will be applied to the two domains: delivery of outcomes and leadership/commissioning and use of resources. For delivery of outcomes, there will be an overall rating across the seven outcomes: Improved health and wellbeing, improved quality of life, making a positive contribution, increased choice and control, freedom from discrimination and harassment, economic wellbeing, and maintaining personal dignity and respect). The ratings will feed directly into Kent's CAA rating.

(3) Stronger weighting will be given through the performance assessment process to information about the quality of provision (across all sectors, private, voluntary and in-house), including provision to self-funders.

(4) Stronger weighting will also be given to feedback from people receiving support, and Councils are required to develop more approaches to capture evidence from service users. Over time, evidence from LINKs, national surveys, and Care Quality Commission (which replaces CSCI) user surveys will be used to triangulate the results from Councils.

(5) Because standards have risen nationally, it will be harder to get an "excellent" rating as the bar has been raised. The consultation paper provides detailed 'descriptors' which describe what "excellent", "promising", "uncertain" and "poor" would look like against each of the outcomes. Whilst councils agree that the bar should be raised, we do have some concerns about accountabilities. For example with outcome 1 (improved health and wellbeing), the first descriptor (of 9) is "Information and advice on health and wellbeing are readily accessible, promote healthier lifestyles and reduce the incidence of preventable illness and accidents for the local populations". 'Excellent' against this is defined as "Campaigns produce a demonstrable impact in promoting healthier lifestyles. Health and social care staff work closely together towards shared aims in preventing harm. This is demonstrated by consistently low or substantially decreasing rates of falls, preventable illnesses, infections acquired in hospitals and care homes, and suicides." Whilst it is right that the performance assessment of KASS should reflect the Managing Director's wider 'wellbeing' role, it can be seen that elements of KASS's assessment will be reliant upon the performance of our partners, and other external factors.

(6) Service inspections will continue to be commissioned though performance assessment and will supply evidence back into the performance assessment process. Inspections themselves provide evidence of delivery and capacity, as does the progress against action plans councils are required to produce to respond to inspection findings.

(7) We have been notified by CSCI that Kent will be inspected at some point between December 2008 and March 2009. This will be as part of CSCI's Service Inspection Programme looking at Independence, Wellbeing and Choice.

(8) When the results of the consultation are published, a further report will be brought to ASSPOC for information.

Recommendations

5. Members are asked to NOTE
 - (a) KASS's performance indicators for 2007-8
 - (b) The changes to performance assessment taking place this year

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Background documents: None

Appendix 1 2007-08 Performance results

Ref	Performance indicator	2007-08 Outturn	Band
B11	Intensive home care as a percentage of intensive home and residential care	26.0	4
C72	Older people aged 65 or over admitted on a permanent basis in the year to residential or nursing care per 10000 population	72	5
C73	Admissions of supported residents aged 18-64 to residential/nursing care per 10000 population	1.5	4
C28	Intensive home care provided per 1000 population	10.9	3
C29	Adults with physical disabilities helped to live at home per 1000 population	5.6	5
C30	Adults with learning disabilities helped to live at home per 1000 population	3.2	5
C31	Adults with mental health problems helped to live at home per 1000 population	3.8	5
C32	Older people helped to live at home per 1000 population	77	2
C51	Direct payments per 1000 population	148	4
C62	Services for Carers - % Service users who have carers that receive support	27	5
D37	Percentage people allocated single rooms	97	5
D39	Percentage of people receiving a statement of their needs and how they will be met	98	4
D40	Clients receiving a review	86	4
D41	Delayed transfers of care per 1000 population	38	4
D54	Percentage of items of equipment and adaptations delivered within 7 working days	91	5
D55	Percentage assessments completed within 4 weeks	91	5
AO/D56	Percentage Care Packages delivered within 4 weeks	97	5
AO/E47	Ratio of Ethnicity of older people receiving assessment compared to population	1.96	3
AO/E48	Ratio of ethnicity of older people receiving services following an assessment compared to all people being assessed	1.00	3
AO/E82	Assessments of adults and older people leading to provision of service	81	4
AO/D75	Practice learning (adults element) (new definition)	9.8	3

Appendix 2 – New performance indicators

Indicator	Description
NI 119	Self-reported measure of people's overall health and wellbeing
NI 125	Achieving independence for older people through rehabilitation / intermediate care
NI 127	Self reported experience of social care users
NI 130	Social Care clients receiving Self Directed Support (Direct Payments and Individual Budgets)
NI 131	Delayed transfers of care from hospitals
NI 132	Timeliness of social care assessment
NI 133	Timeliness of social care packages
NI 135	Carers receiving needs assessment or review and a specific carer's service, or advice and information
NI 136	People supported to live independently through social services (all ages)
NI 139	People over 65 who say that they receive the information, assistance and support needed to exercise choice and control to live independently
NI 140	Fair treatment by local services
NI 145	Adults with learning disabilities in settled accommodation
NI 146	NI 146 Adults with learning disabilities in employment PSA 16
<i>NI128</i>	<i>User reported measure of respect and dignity in their Treatment</i>
NI 149	Adults in contact with secondary mental health services in settled accommodation PSA 16
NI 150	Adults in contact with secondary mental health services in employment PSA 16