

**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 – 15 May 2024

**Subject:** **ADULT SOCIAL CARE AND HEALTH PERFORMANCE Q4 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 4 for 2023/2024 and outlines the changes being made to the suite of measures for 2024/2025.

Quarter 4 again saw increases in demand and pressures on adult social care, there was an increase in people making contact, increases in Care Needs Assessments to be undertaken, increased delivery of Carers Assessments, ongoing increases in people needing support with mental health needs, a substantial increase in Deprivation of Liberty Safeguards applications received and an increase in safeguarding concerns.

Whilst continuing to manage these increases, adult social care has continued to keep the numbers of people in a short term residential or nursing bed decreasing, delivered as many Deprivation of Liberty Safeguards assessments as those being received, kept our contacts being provided with Information, advice and guidance meaningful (ASCH1), increased the percentage of Care Needs Assessments delivered within 28 days (ASCH2), increased the number of people with a Direct Payment (ASCH3) and maintained the percentage of people at home after 91 days (ASCH4) and those supported in a care home Care Quality Commission rated as good or outstanding.

The suite of Key Performance Indicators and activity measures will essentially stay the same for 2024/2025 to allow for continuity, however the main change will be the inclusion of performance data for those accessing the Children, Young People and Education (CYPE) 18-25 year old division, who are supported by CYPE on behalf of the Corporate Director Adult Social Care and Health.

**Recommendation:** The Adult Social Care Cabinet Committee is asked to **NOTE** the performance of adult social care services in Quarter 4 2023/2024 and changes to the suite of measures for 2024/2025.

## **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 Annually the suite of measures is reviewed and changes made where necessary to reflect changes in practice and local or national policy; these are outlined in section 3.
- 1.3 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 had 21,671 people contact them in Quarter 4; for the whole of 2023/2024 it was 53,626 unique individuals, with a total volume of 178,193 contacts. The KPI on the percentage of people who re-contacted adult social care, having had a previous contact resolved with advice and information, moved to 5% re-contacting us remaining below the threshold of 9% and continues to be RAG rated Green. Each quarter in 2023/2024 has either been 5% or 4%.
- 2.2 The aim of the Area Referral Service is to provide advice and support which prevents, reduces or delays the onset and development of need in line with the Care and Support Statutory Guidance of the Care Act 2014. The service provides robust information for people to help them find and access the right support without drawing them into adult social care. Staff in the referral service aim to provide advice with sustainable outcomes to keep people as independent as possible for as long as possible. The implementation of the Locality Operating Model in April 2023 changed the delivery model of our "front door" and moved to having the Area Referral Services based on a more local footprint, widening the team to include social workers and social care practitioners. This has improved the local knowledge and professional support offered at first contact with adult social care.
- 2.3 In addition to providing telephone advice there is also a suite of online Self-Assessment tools, providing an opportunity for people, or those who support them, to help them understand their needs and the services available as well as the financial side to accessing social care support. The online self-assessment tool on needs provides a 'prescription' of advice including the option for a digital solution alongside the traditional options.
- 2.4 Quarter 4 saw adult social care complete 4,382 Care Needs Assessments (CNA), and for the whole of 2023/2024 there were 18,105 CNAs completed, with an incoming volume of 18,787. Delivering CNAs, both in a timely manner and to a high quality is a key driver and priority for adult social care, and is included in all targeted work and action plans across adult social care. All Area

Operational Managers are now in post in the four areas adding capacity for managing performance. It is important to note though that each CNA is delivered with the person, for the person, and is worked through with their agreement and this can take time.

- 2.5 For the KPI of the percentage of CNAs completed within 28 days (ASCH 2) of the incoming CNAs for Quarter 3, 73% were completed within 28 days which although is another increase on the previous quarter since the 66% seen in Quarter 1, it is still below the floor standard of 80% and is RAG Rated Red. Initial figures for Quarter 4 also show 73%, however these remain under review and are subject to updates.
- 2.6 881 Carers' Assessments were completed in Quarter 4 by adult social care and the Carers' organisations. This was above the number that were proposed at 851. Adult social care is ensuring that the new practice assurance panel process implemented in March 2024 will increase the identification of Carers' and the offer of a Carers Assessment.
- 2.7 Where eligible for support, people receive a Care and Support Plan (C&SP) which details with the person they can be supported and the services they may receive. Adult social care had 16,350 people with an active C&SP at the end of Quarter 4. 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 3 it was 2,395 and in Quarter 4 it was 2,069, however both of these figures will change as the client recording system is updated. The average weekly cost of new support packages were £620 and £603, which are also subject to change.
- 2.8 Adult social care completed 2,306 annual reviews of the C&SP in Quarter 4, with 9,278 for the whole of 2023/2024. This volume of completions is below the number of ongoing reviews becoming due but the completions in Quarter 3 and Quarter 4 have led to a stabilisation of the number of people requiring an annual review on the last day of the quarter at 6,000. Operational Teams are prioritising delivery of reviews, both the first review at 6-8 weeks and the annual reviews, delivery of which are part of the Performance Assurance Framework.
- 2.9 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. Quarter 4 saw a decrease on the previous quarter in the number of people actively receiving this support to 1,656. Although there were decreases in Quarter 3 and Quarter 4, overall 2023/2024 had 5% more people accessing KEaH when compared to the previous year.
- 2.10 The KEaH Service continues to work with referrals from multiple sources, including from acute and community hospitals, and reaches out to adult social care teams to help maximise the opportunities for people to receive enablement. The KEaH team has spent this time helping those who are ready to leave but are unable to do so (for example they need further support but a provider has not been located) and were able to make substantial progress with helping those move to new provider, and also used their capacity for updates to training, additional training and practice reviews.

- 2.11 There will be people who require residential or nursing care on a temporary basis (either while their longer-term needs or circumstances are assessed, or to provide respite) via the hospital discharge pathways or from community settings, and adult social care has been working to reduce the use of Short-Term Beds (STB) 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 into Quarter 4 of 9% on the previous quarter, with just 1,071 people in a STB. This is the lowest number for Quarter 4 we have seen for two years.
- 2.12 Ensuring people only spend the time they need to in a STB and the work by the enablement services, such as KEaH and Occupational Therapists meant that adult social care maintained 84% of people aged 65 and over at home 91 days after discharge from hospital having had reablement services (ASCH 4). Winter pressures started in Quarter 3 and continued to Quarter 4 and work continued with partners in the integrated Transfer of Care Hubs, with cross-working by the Short Term Pathways Teams and Health colleagues.
- 2.13 Direct Payments are nationally recognised as an effective way to enable people to remain independent and in their own homes with clear personal choice and control of their support. In Quarter 4 there was an increase to 26% of people in community services with a Direct Payment and is the highest we have seen for over two years. This measure does however remain RAG Rated Amber (ASCH 3). There continue to be increases in the numbers of carers, people with learning disabilities, and mental health needs receiving a Direct Payment.
- 2.14 Adult social care does continue to see people aged over 65 years old going into long term residential and nursing care. In the 12 months to the end of Quarter 3, the admission rate was 626 per 100,000 of the population and the KPI remains RAG Rated Red. It is expected that the more recent quarters will increase as the information on the client recording system is updated.
- 2.15 Although the aim is for people to leave a STB and go back to the community, there have been some increases this year in the move from a STB to a long-term bed. Adult social care has seen more people needing to start a long-term placement in a care home in general, either from hospital discharge pathways or following increased needs. The introduction of practice assurance panels in March 2024 will ensure all opportunities for support in the community are considered and exhausted before people enter long term support in care homes.
- 2.16 The percentage of KCC supported people in a care home with a Care Quality Commission (CQC) rating of Good or Outstanding was maintained at 75% for Quarter 4 and continues to be RAG Rated Amber. There has been no increase in the proportion of those in an Inadequate home this quarter remaining at 1% (ASCH 6).
- 2.17 There are currently eight care homes (two older person care homes and six learning disability, physical disability, and mental health care homes) who have contract suspensions in place to prevent further placements. 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.

- 2.18 The number of people with mental health needs who are contacting services is increasing. The Mental Health Services monthly statistics produced by NHS Digital provides figures for December 2023 show that 1.87 million people were in contact with mental health services. The majority of these (1,206,919) were in contact with adult services. In July 2023 the figures were 1.75m and 1,136,347 respectively.
- 2.19 Adult social care is supporting discharge from Mental Health Hospitals as a priority to ensure people who are in need of inpatient Mental Health Services are supported. We are working closely with Kent and Medway Partnership Trust and partners to implement the transformation of Mental Health Services, which will see the implementation of a new model for Community Mental Health Teams, this started in East Kent and is now being developed across the county with the aim of providing better access to health support.
- 2.20 We support people across a spectrum of need levels from those with co-occurring conditions, people with behaviours that challenge, to people who require lower levels of support to maintain their independence. Some people with Autism are also recorded as having a primary mental health need and require varying support provision. The need for a sound understanding of how to engage with and support people with a mental health need is paramount in many instances as this enables adult social care to support people who may otherwise fall through the net.
- 2.21 In Quarter 4, and specifically in January, adult social care saw the highest number of Deprivation of Liberty Safeguards (DoLS) applications received. 2,731 were received, 1,041 in January alone. Increased demand is expected and forecast for Quarter 4 each year but this was above expectations. For the whole of 2023/2024 over 9,500 applications were received, and was an increase of 1% on the previous year.
- 2.22 The DoLS Team completed 2,733 assessments, addressing increased applications in Quarter 4 and regular work each year during this period is planned in by the DoLS Head of Service and built into their winter planning actions. In total, 8,984 assessments were completed in 2023/2024, a 2% increase on 2022/23.
- 2.23 The number of safeguarding enquiries open on the last day of the quarter continues to increase. Quarter 4 saw a further increase of 5% in safeguarding concerns received and an increase of 8% in active safeguarding enquiries. The new Safeguarding Hubs were implemented at the end of Quarter 4 and their work on the incoming safeguarding concerns is expected to give the community teams working on the enquiries more time to complete them; The teams are already reporting back the positive effect of the hubs on helping to manage safeguarding.

### 3. Key Performance Indicators and Measures for 2024/2025

3.1 Adult social care will be keeping the suite of current KPIs and activity measures the same, with one new measure for Safeguarding, the inclusion of data relating to the 18-25 year old division (delivered by CYPE on behalf of the Corporate Director Adult Social Care and Health) additional information to two measures to allow for further understanding of demand and provide context, and the change of targets for two of the KPIs. The table below provides an outline of the changes to the suite of performance measures for 2024/2025.

<b>The below measures have a target change</b>		
ASCH 1	The percentage of people who have their contact resolved by Adult Social Care and Health but then make contact again within 3 months	Decrease the target to 5% with an upper threshold of 9%
ASCH 2	The proportion of new Care Needs Assessments (CNA) delivered within 28 days.	Decrease the target to 85%, floor to 75%. Include CYPE 18-25 data.
<b>The below measures will now include data from the 18-25 year old team in CYPE</b>		
ASCH 3	The percentage of people in receipt of a Direct Payment with Adult Social Care and Health.	
ASCH 8	The number of new CNAs to be undertaken and the number of people requiring a CNA on the last day of the quarter	
ASCH 10	The number of people with an active Care & Support Plan at the end of the quarter	
ASCH 16	The number of people in Long Term Residential or Nursing Services and the number of people receiving a long-term community services during the quarter.	
ASCH 18	The number of DoLS applications received and the number of DoLS assessments completed	
ASCH 19	The number of safeguarding enquiries open on the last day of the quarter	
<b>The below measures will now include more information</b>		
ASCH 9	The number of new Carers' assessments to be undertaken and the number delivered	Add incoming Carers' assessments
ASCH 13	The number of people requiring a first Review (6-8 weeks) or an annual review to be completed on the last day of the quarter.	Add in first reviews to the chart Include CYPE 18-25 data.
<b>The below measures will be a new Activity Measure</b>		
ASCH 20	Outcome of concluded Section 42 Safeguarding Enquiries where a risk was identified	

#### 4. Conclusion

- 4.1 Quarter 4 continued to see adult social care deal with high levels of demand and pressures across all the teams; there have been improvements in delivery on a number of KPIs this quarter, and continued good performance in priority areas such as the use of short-term beds, and delivery of DoLS assessments. Work is ongoing with Operational Teams on prioritisation and risk management of these demands so we can meet our statutory duties and keep people safe and independent.

#### 5. Recommendation

5.1 Recommendation: The Adult Social Care Cabinet Committee is asked to **NOTE** the performance of adult social care services in Quarter 4 2023/2024 and changes to the suite of measures for 2024/2025.

#### 6. Background Documents

None

#### 7. Report Author

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