

From: Diane Morton, Cabinet Member for Adult Social Care and Public Health
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To: Adult Social Care and Public Health Cabinet Committee – 10 September 2025

Subject: **ADULT SOCIAL CARE AND HEALTH PERFORMANCE Q1 2025/2026**

Classification: Unrestricted

Previous Pathway of Paper: None

Future Pathway of Paper: None

Electoral Division: All

Summary:

This paper provides the Adult Social Care and Public Health Cabinet Committee with an update on adult social care activity and performance during Quarter 1 (April to June) for the financial year 2025/2026.

Adult social care saw a continuation in demand in contacts to Adult Social Care Connect and a quarterly high number of Safeguarding Concerns were received. The number of people supported with a mental health need continues to increase quarter on quarter.

Despite the pressure on services, adult social care delivered an increased number of Care Needs Assessments and Care and Support Plan reviews, fewer people were awaiting their review or assessment at the end of the quarter. A larger number of people were supported by the enablement teams, and safeguarding closures increased.

Of the seven Key Performance Indicators, three were RAG Rated Green (contacts resolved and not returned within three months, long term support met by residential or nursing care for adults or older people), and four were RAG Rated Amber (Care Needs Assessments delivered within 28 days, percentage with a Direct Payment, older people at home 91 days after hospital discharge and people in residential or nursing care with a Care Quality Commission rating of Outstanding or Good)

Recommendation: The Adult Social Care and Public Health Cabinet Committee is asked to **NOTE** the performance of adult social care services in Quarter 1 2025/2026

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 (KPIs) for Kent County Council's (KCC) adult social care services. It includes the KPIs presented to Cabinet via the KCC Quarterly Performance Report (QPR).

2. Overview of Performance

- 2.1 Adult Social Care Connect received contacts from 7,529 people during Quarter 1. On receiving a contact, adult social care will look to resolve any issues which arise, this may take the form of offering information and advice, signposting to external agencies or partners who can assist or, where appropriate, by exploring options along a Care and Support pathway. Through actions at first contact, adult social care's aim is to avoid 'repeat' contacts; where a person makes contact again following an unsuccessful resolution to their initial query. In Quarter 1, 3% of the contacts received were from people who had had a previous contact 'resolved' in the past three months (ASCH 1). This matches the previous quarter's proportion and ensures the measure continues to be RAG Rated Green.
- 2.2 The transition towards a more prevention-focused approach, implemented by community teams and through early intervention at the initial point of contact, demonstrates that people are increasingly having their needs addressed promptly or are being appropriately directed to relevant community resources.
- 2.3 Care Needs Assessments (CNA) are delivered in order to ascertain a person's eligible care needs under the Care Act (2014). 4,353 requests for a CNA were received by adult social care in Quarter 1 and 4,799 were completed (a 6% increase). The number of people awaiting assessment at the end of the quarter continued to decrease, with a 16% decrease in those waiting for an assessment to be completed when compared to the previous quarter (5th consecutive quarter of more CNAs being delivered than were requested).
- 2.4 Adult social care aim to have 85% of CNAs completed within 28 days from when they were first requested (ASCH 2). In Quarter 1, 75% of assessments were delivered with 28 days which was an improvement of 2% compared to the previous quarter. The measure is now RAG Rated AMBER as it now meets the floor threshold.
- 2.5 KCC commissions Carers Organisations in Kent to help support carers. In Quarter 3 2024/25, new techniques were added to the client recording system enabling the capture of carer referrals and the offering of information and advice as an outcome. In Quarter 1, 712 referrals were made for support, an 8% increase on the previous quarter. 911 carers were supported with either information and advice or a carers' assessment in Quarter 1 (ASCH 10).
- 2.6 Following a persons' CNA being completed they may be eligible for care and support. If this is the case then they will receive a Care and Support Plan

detailing how their needs are going to be met. At the end of Quarter 1, 16,777 people had an active Care and Support Plan, maintaining a similar level of activity as previous quarters.

- 2.7 One way a person's needs can be met is through a package of care. This may be delivered in a residential setting or within the persons' own home. Quarter 1 saw 2,585 new packages arranged, with 36% for residential care, 12% for nursing care, 24% homecare and 25% for all other community services. There was an average weekly cost of £821; in the first quarter of a new financial year a larger increase in average weekly cost can be observed due the 'uplifts' that are applied to ensure that service cost reflects movement in inflation.
- 2.8 A first review (at 6-8 weeks) is carried out once a Care and Support Plan is put in place and a service is started, with an annual review scheduled thereafter. Overall, the number of reviews requiring completion decreased in Quarter 1 to 6,071 which is an 11% decrease from the previous quarter. Within this figure, first reviews awaiting completion had decreased by 27% alone, following focused review work by adult social care teams. 5,561 reviews were completed in total in Quarter 1, the largest volume of completions for a quarter and a 22% increase on Quarter 4 2024/25.
- 2.9 KCC provide enablement services to people in the community through its Kent Enablement at Home (KEaH) service and the Kent Enablement Service (KES). Through these services, work is done with a person to set and achieve goals that enable the person to stay independent at home, with no further support needed. Quarter 1 saw 3,556 people engage with these services, an 8% increase on the previous quarter. The KES team saw the number of people supported exceed 1,000 and KEaH saw their involvement increase once more, with its 5th consecutive quarter of growth in activity. 488 people started with the KES teams in Quarter 1, with 2,193 starting with KEaH.
- 2.10 A provision of short term support in a residential or nursing setting may be provided to meet a person's needs. This allows for a further period of assessment and enablement for a person whilst long-term provision is being assessed, with the aim of only needing to stay in this bed for 6-8 weeks. This is often utilised for people on a hospital pathway. The number of people in a short term bed increased by 8% in Quarter 1 to 1,576.
- 2.11 A person who has been in hospital and on discharge needs adult social care involvement will be worked with to ensure they remain as independent as possible on their return home. This is to minimise the risk of them being readmitted to hospital. In Quarter 4, 83% of people over the age of 65 who were discharged from hospital were still at home 91 days later (ASCH 4. This measure is reported a quarter arrears to account for the 91 day time frame). This is a decrease of 3% when compared to the previous quarter. The measure is now RAG Rated AMBER, being below the target of 85% but above the floor threshold of 80%
- 2.12 Direct Payments are a flexible form of support that can be offered to a person to help meet their care and support needs, maintaining their independence and giving them full control over the care that they receive. The percentage of

people in receipt of a Direct Payment was 25% in Quarter 1 (ASCH 3). The measure continues to be RAG Rated AMBER; sitting below the 30% target but above the 24% floor threshold. 160 started to receive a Direct Payment in Quarter 1 and 3,067 people were in receipt of a Direct Payment during the quarter.

- 2.13 When a person's needs cannot be met in their own home, they may need long term care in a residential or nursing home. A new measure, the long term needs of adults (18-64 years old) met by admission to residential and nursing homes per 100,000, shows 17 per 100,000 met this criteria. This measure is RAG Rated Green.
- 2.14 For older people (65 years and older) in Quarter 1, 546 per 100,000 had their long term support needs met by admission to a residential or nursing care home (ASCH 6) and is RAG Rated Green. This metric, alongside its 18-64 variant, uses the national Client Level Dataset (CLD) methodology to measure the number of individuals who have started a local authority funded long-term residential or nursing care service for the first time within a 12-month period.
- 2.15 Residential and Nursing homes are registered for their care and inspected by the Care Quality Commission (CQC). In Quarter 1, 75% of KCC supported people who were in a care home had a CQC rating of Good or Outstanding (ASCH 7) an improvement of 1% on last quarter. The measure met the floor threshold of 75% and is RAG Rated AMBER.
- 2.16 People who access adult social care provision have a variety of needs, one of which is mental health. The number of people accessing an adult social care provision with a mental health need has increased once more in Quarter 1, up 3% compared to the previous quarter. The number of people accessing services with mental health needs has risen 8% since the same quarter last year.
- 2.17 Overall, the number of people in long term services remained at a similar level to the previous quarter, with 12,759 people in a long term service in the community and 5,569 people in a residential or nursing setting.
- 2.18 There were 2,616 Deprivation of Liberty Safeguards (DoLS) applications received in Quarter 1, a 3% increase on the same quarter last year. 2,250 applications were completed in the quarter.
- 2.19 There is increasing demand for DoLS. This year, focus has been given to workforce planning, which has seen a surge in practitioners being nominated to undertake a Best Interest Assessor (BIA) qualification. This, in turn, will increase the number of practitioners available to undertake DoLS assessments.
- 2.20 Adult social care receive safeguarding concerns if someone is concerned that a person is at risk of abuse or neglect. Quarter 1 saw 6,132 safeguarding concerns received, a 3% increase on the previous quarter and the highest total for a single quarter. This follows an increasing trend that has been seen for incoming concerns.

- 2.21 If the conditions are met, a Section 42 safeguarding enquiry will be carried out. In Quarter 1, 1,430 Section 42 enquiries were initiated and at quarter end, 1,384 safeguarding enquiries were open, which was a 22% decrease on the previous quarter despite the growth in incoming activity. On completion of a safeguarding enquiry, the identified safeguarding risk to the person is assessed. The proportion of those whose risk was removed (30%), risk reduced (58%) or risk remained (11%) has not changed since last quarter.

3. Conclusion

- 3.1 Financial year 2025/26 begins with a continuation of the levels of demand seen through the previous financial year but an increased output in both care needs assessments and reviews, seeing the numbers of people awaiting adult social care action reduce. The number of safeguarding concerns received rose to a quarterly high but there were fewer people awaiting completion of a section 42 enquiry by quarter end. Adult social care continued to see an increase in the number of people supported with a mental health need.
- 3.2 The proportion of people who had their contact resolved and the proportion of people in a nursing or residential placement with a CQC rating of 'Good' or 'Outstanding' both remained at similar levels as last quarter. Adult social care saw negative movement in the percentage of people supported by a direct payment, the proportion of people still at home 91 days after discharge from hospital and people aged 65 or older who had their needs met by admission to residential or nursing homes. However, the proportion of people whose assessment was completed with 28 days improved.

5. Recommendation

5.1 Recommendation: The Adult Social Care and Public Health Cabinet Committee is asked to **NOTE** the performance of services in Quarter 1 2025/2026

6. Background Documents

None

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