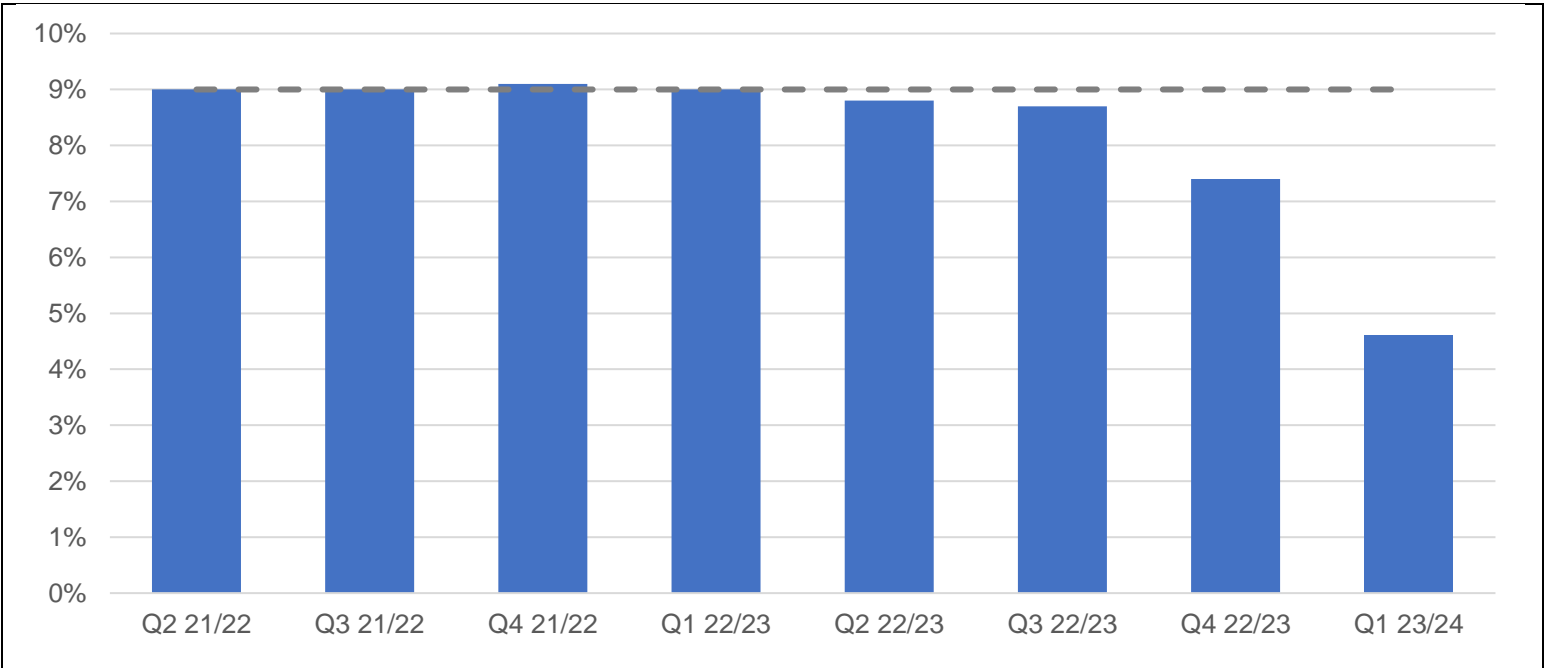


Appendix 1: Adult Social Care and Health Key Performance Indicators and Activity Performance 2023/2024

ASCH1: The percentage of people who have their contact resolved by 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.

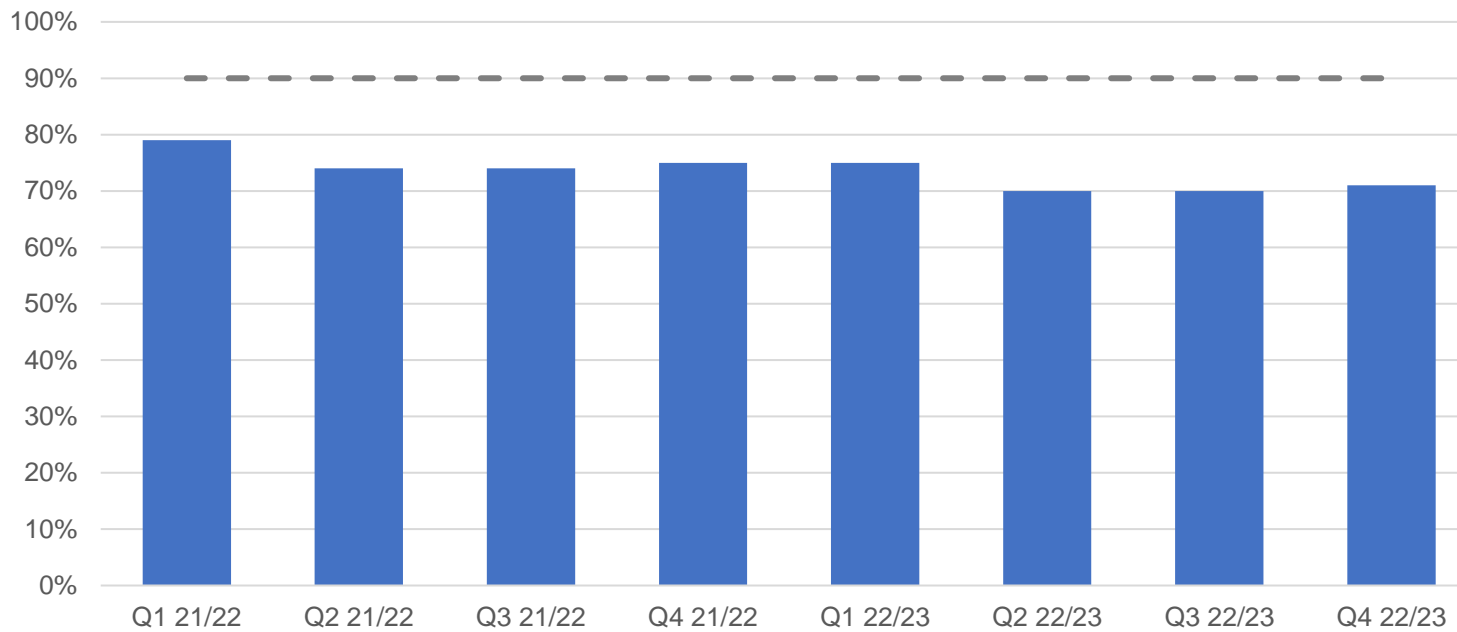
Please note axis does not end at 100%

Commentary: Delivery on this Key Performance Indicator (KPI) continues to perform at target with just 5% of those having their original contact resolved with no further action needed by adult social care coming back to us within three months.

The Area Referral Service within the new locality model, which manages incoming new contacts, now includes practitioners, who provide additional assurance by using their knowledge and skills in decision making, providing the right intervention at the right time. There is ongoing work to analyse the themes from any recurring contacts, and support for partners to signpost people to the appropriate support.

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

RED
↑



Technical Notes:

Target set at 90% (dotted line) Floor Threshold of 80% for 22/23 and 23/24

Please note this measure runs a quarter in arrears to account for the 28 days.

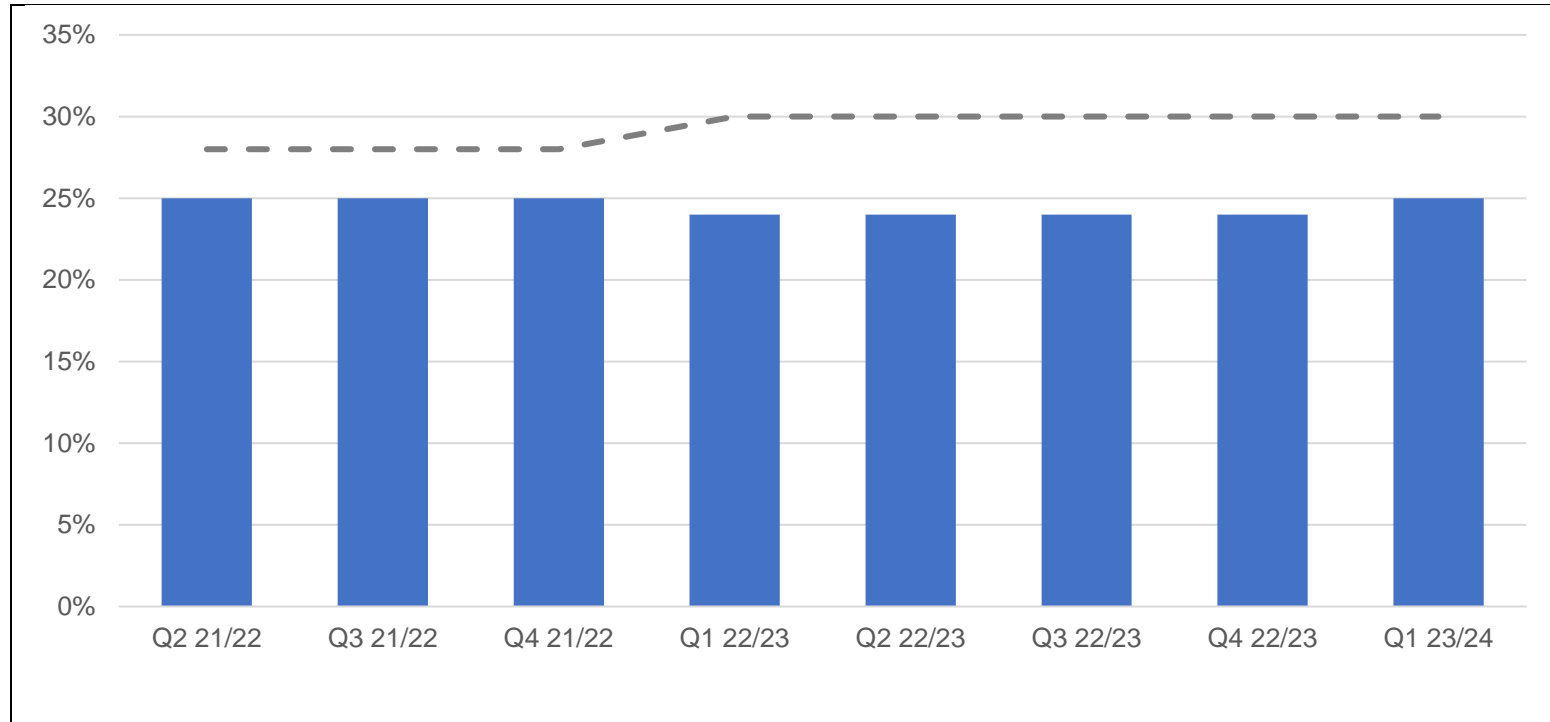
The Direction of Travel is significant.

Commentary: There was a 1% increase in the proportion on new Care Needs Assessments (CNA) completed within 28 days in Quarter 1. Completing CNAs in a timely manner remains a priority for adult social care within the Performance Assurance Framework.

Overall adult social care completed 4,878 CNAs in Quarter 1, with over 1,780 in June alone. Within the locality model CNAs are allocated to the most appropriate worker, with practitioners having come together from the previous disciplines they have a wealth of experience between them. It is to be noted that the same practitioners are balancing safeguarding, assessment, reviews and other activities (for example Coroner Court, Court of Protection, Social Supervision).

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.

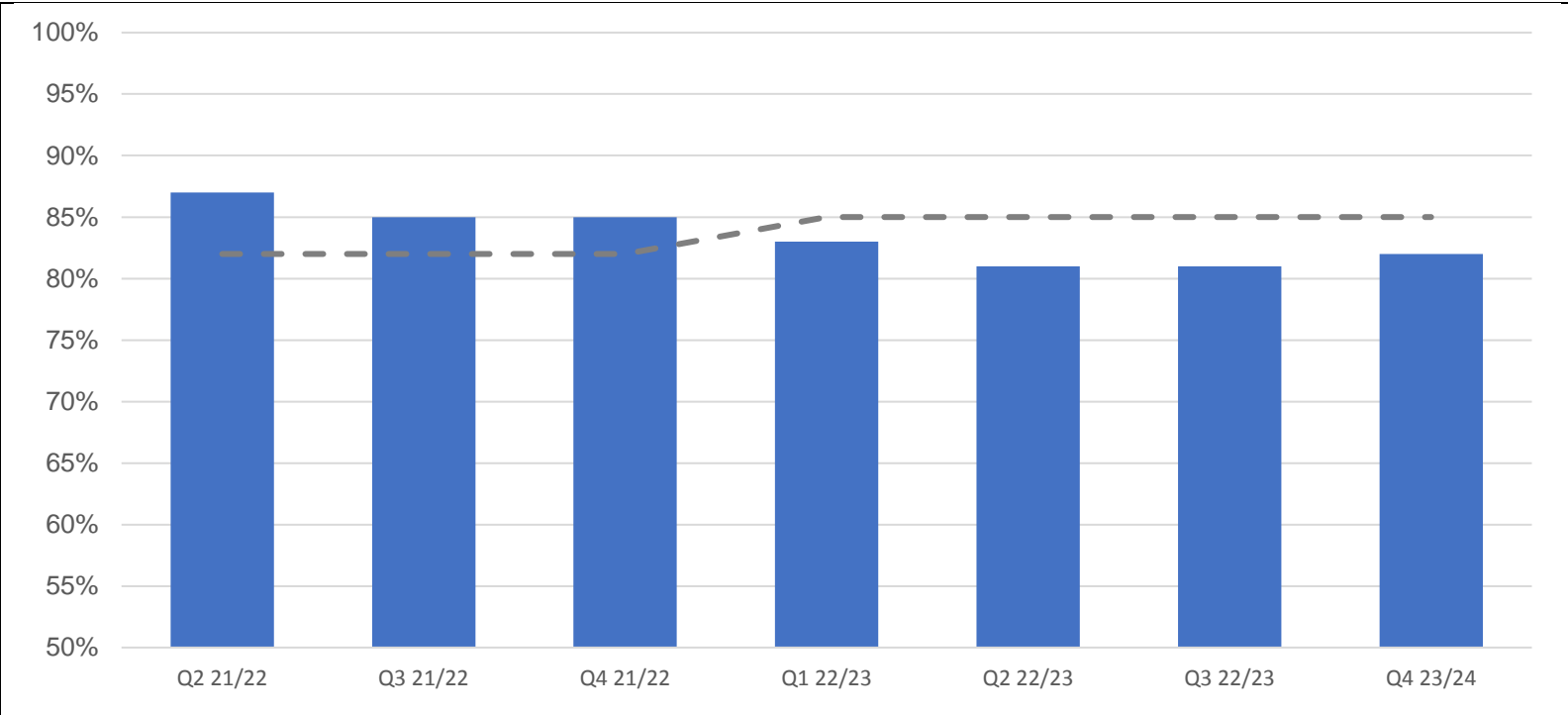
Please note axis does not end at 100.

Commentary: Adult social care saw an increase in 1% of those with a Direct Payment in Quarter 1; there were increases in the numbers receiving a direct payment, for Carers, people with learning disabilities, mental health and sensory needs.

Work is ongoing to raise the profile of direct payments with practitioners and people who draw upon care and support.

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 significant.

Please note axis does not start at 0.

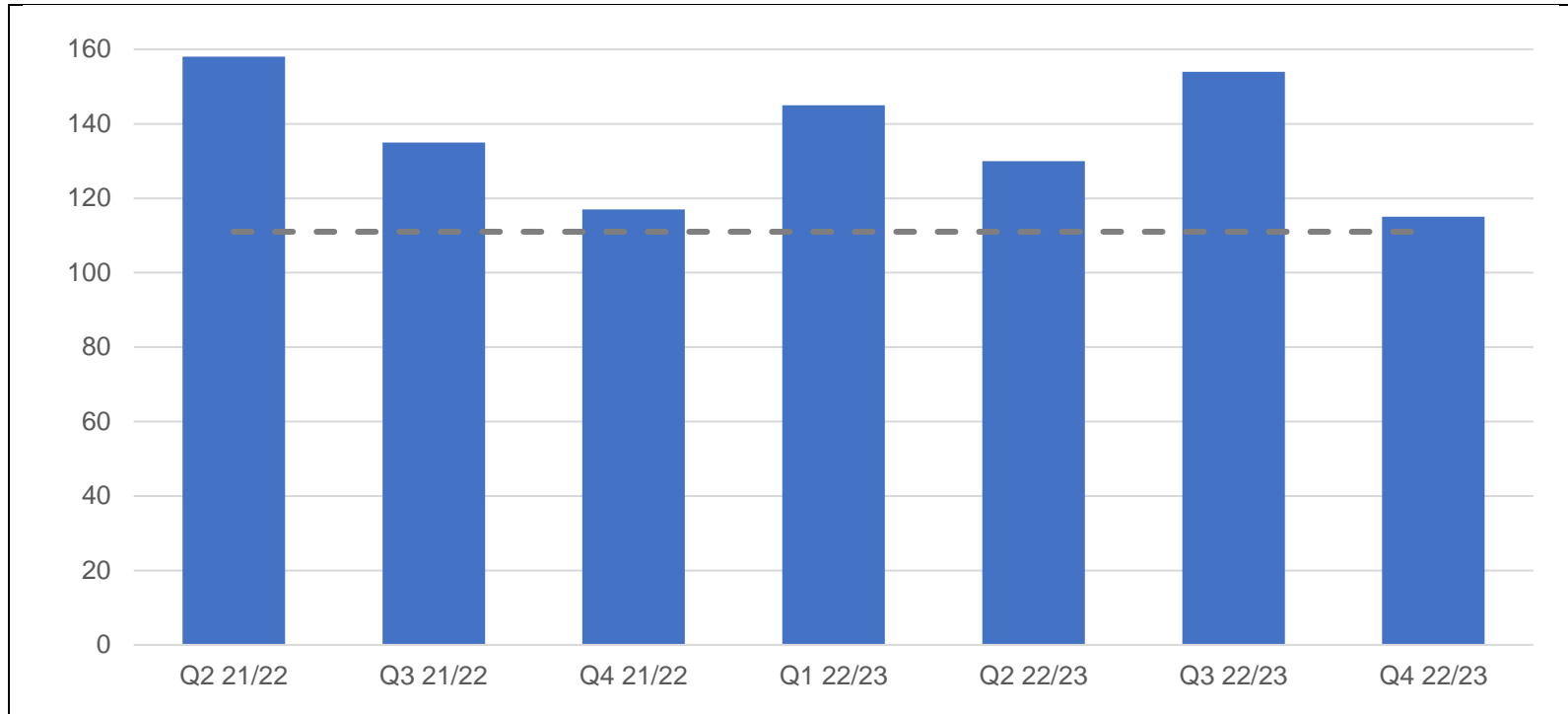
Better Care Fund Measure

Commentary: There is still a high percentage of people still at home 91 days after discharge, even though this is below the target of 85%, indicating that people are being identified for the right care at the right time and all the services involved especially the Short-Term Pathways Team and Occupational Therapy Services are supporting people to maintain their independence at home.

There is work with partners to develop the Transfer of Care Hubs, it is anticipated that these will shift decision making outside of the hospital by a robust Multi-Disciplinary Team.

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

AMBER
↑



Technical Notes:

Target set at 111 (dotted line) with an upper threshold of 138.

Rate per 100,000 of the population

KPI runs a quarter in arrears to account for recent levels of late inputting.

The Direction of Travel is not significant.

Q1 to Q3 2022/23 figures have been updated.

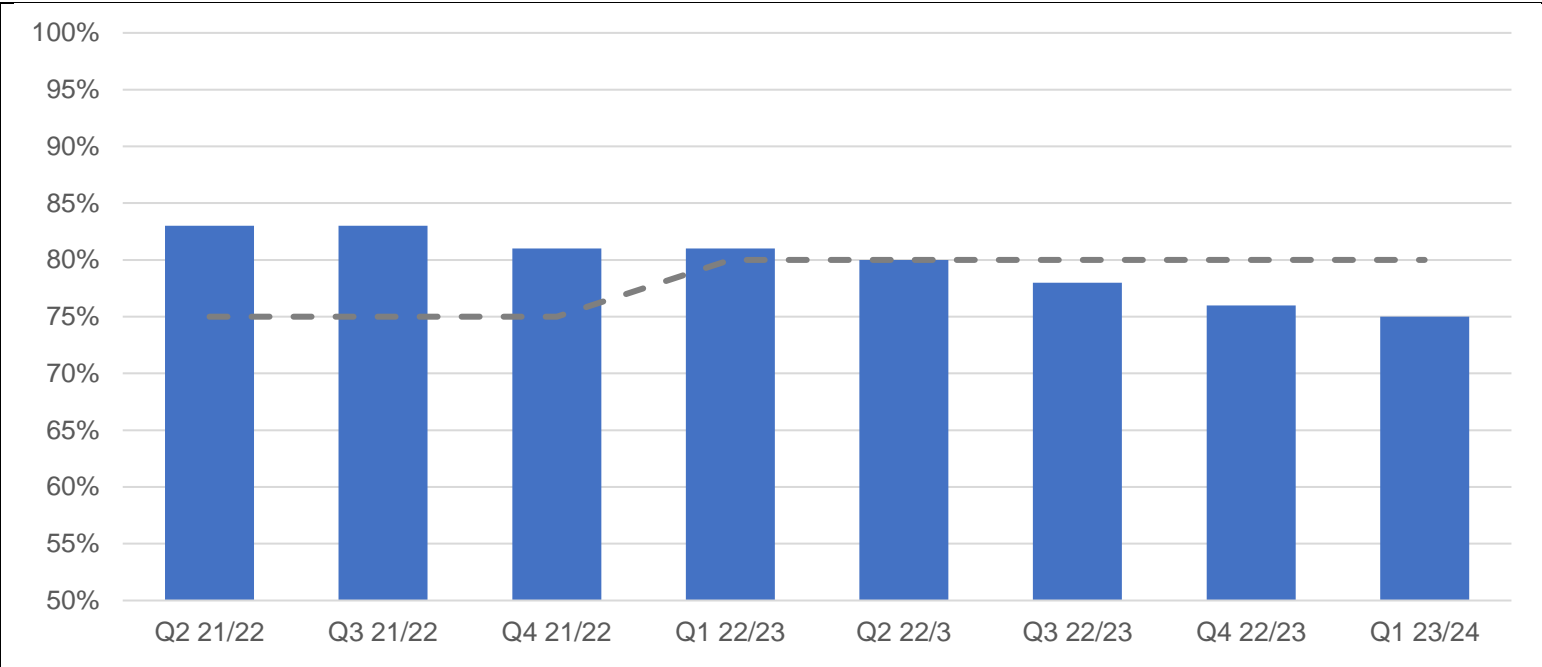
Better Care Fund Measure

Commentary: Each quarter adult social care sees variances in the number and rates of people starting long term support in residential or nursing care homes, and the current trend is for Quarter 4 to be the quarter with the least.

One route into people we support becoming a long term residential or nursing resident is via a short term bed, either placed by KCC or by Health partners; adult social care has prioritised reducing the numbers of people starting a short term bed and working with those who have been in them for longer than six weeks, both actions have reduced the activity in this area, and should lead to less people going into long term care support via this route.

ASCH6: The % of 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.

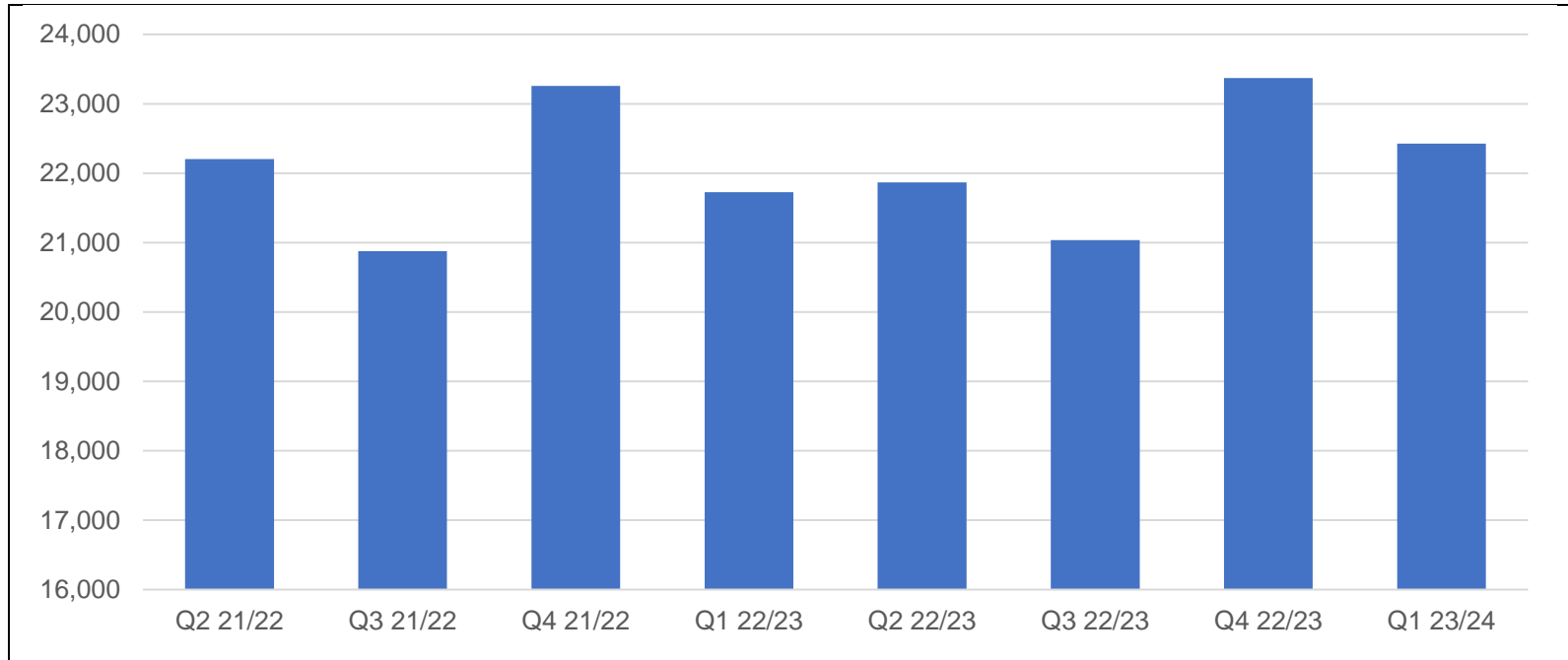
Please note axis does not start at 0.

Corporate Risk Register: CRR0015

Commentary: Adult social care continues to see decreases in the proportion of people 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, which is a decrease of 1% from Quarter 4.

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 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



Technical Notes:

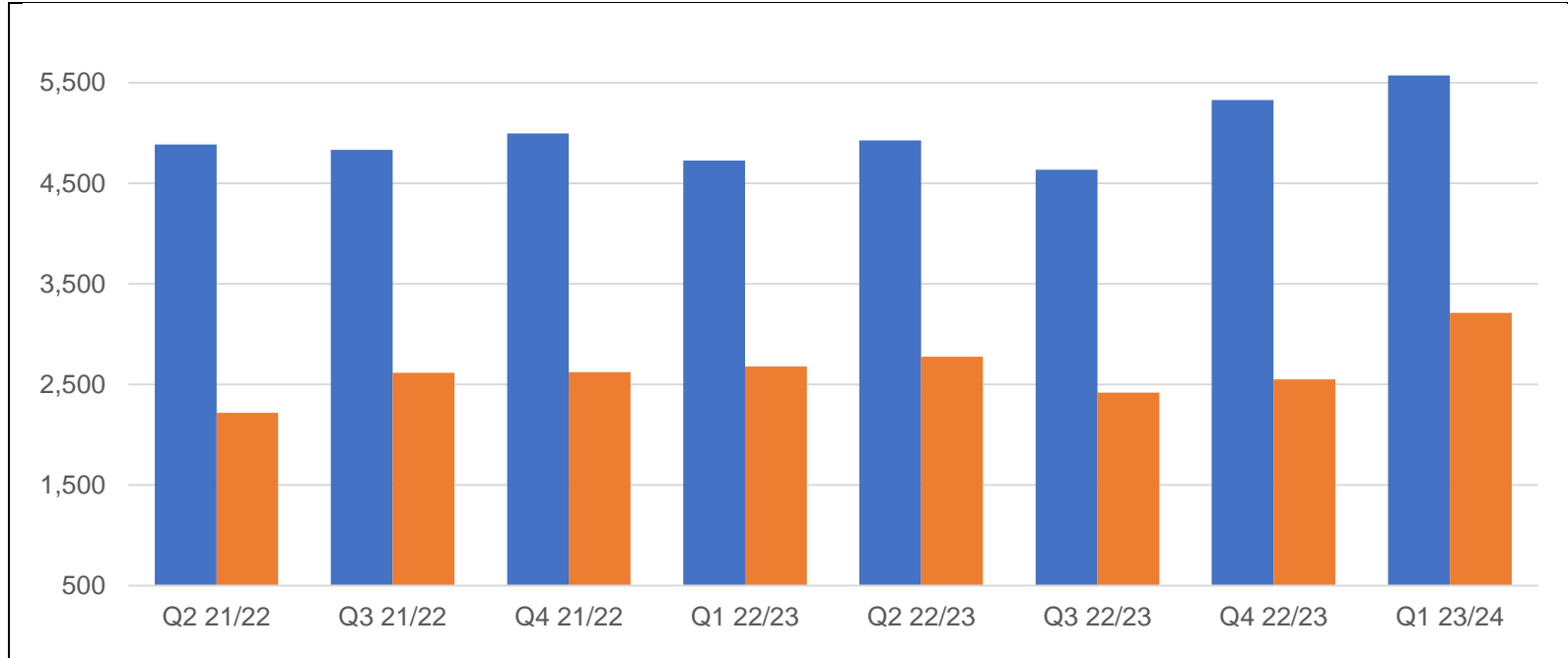
Activity measure, no specified target

Includes all forms of contact.

Please note axis does not start at 0

Commentary: Activity on contacts in Quarter 4 and Quarter 1 follow a pattern, with decreases seen in Quarter 1 in comparison to the higher level of contacts in Quarter 4 which cover the winter period. In general, we are seeing increases in contacts, and this quarter we can see the contribution of the new locality model and the absorption of mental health contacts which were previously routed directly into the teams from Kent and Medway Partnership Trust. The referral process is being managed differently, and a transformation piece of work looking at qualitative and quantitative analysis will inform the future development of this new pathway. Work with our partners is underway to ensure that referrals are redirected or signposted to partners appropriately.

ASCH8: Care Needs Assessments



Technical Notes:

Activity measure, no specified target

Please note axis does not start at 0.

Blue – New assessments to be undertaken.

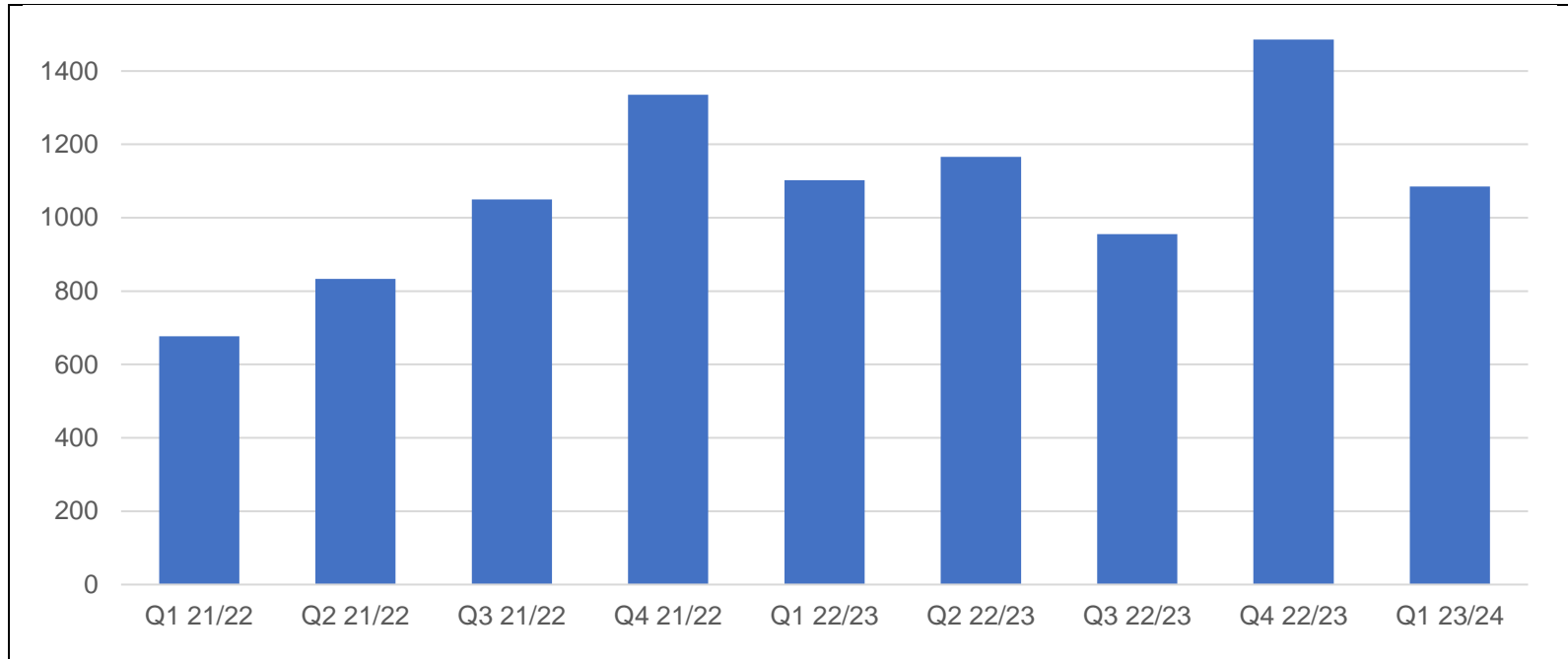
Orange – Assessment needing to be completed.

Corporate Risk Register:
CRR0002

Commentary: Adult social care continues to see increases in the volumes of incoming CNAs, with over 5,500 in Quarter 1, this highest we have seen. This was a 5% increase on the previous quarter. Adult social care completed 4,878 CNAs in Quarter 1, this is lower than previous quarters, but is more than in Quarter 1 in 2022/23.

With this adult social care has also seen an increase of people with their CNA to be completed, this includes people who have the CNA in progress and where we are awaiting agreement from the person we are supporting on the outcomes of the CNA.

ASCH9: The number of new Carers' Assessments delivered



Technical Notes:

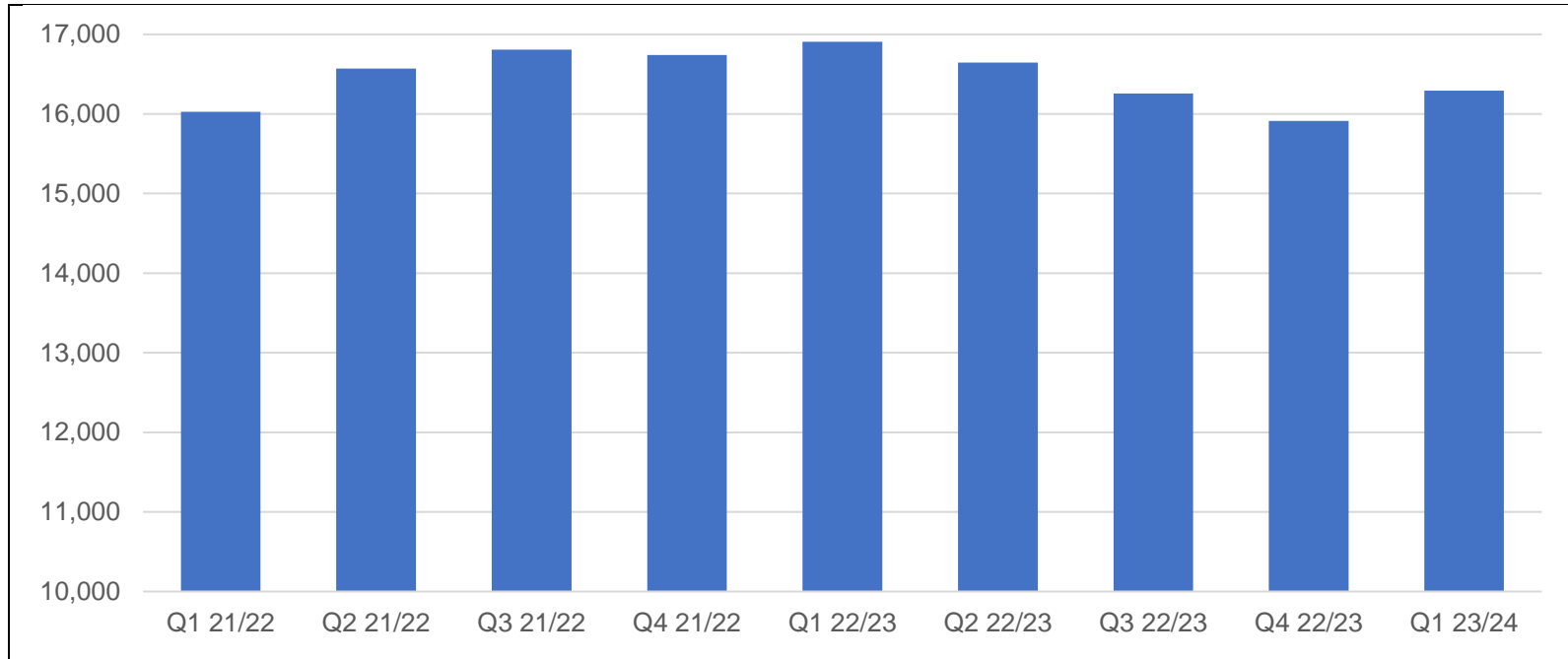
Activity measure,
no specified target

Corporate Risk
Register:
CRR0015

Commentary: 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 recent Carers week held in June 2023 included several opportunities to highlight the needs of carers and included further awareness raising with adult social care.

The number of Carers' Assessments continue to increase overall, despite challenges with recruitment and capacity. Evidence continues to show the positive effect on well-being when carers are supported to receive short breaks from their responsibilities and are signposted to other support services, supporting their individual aims and goals.

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



Technical Notes:

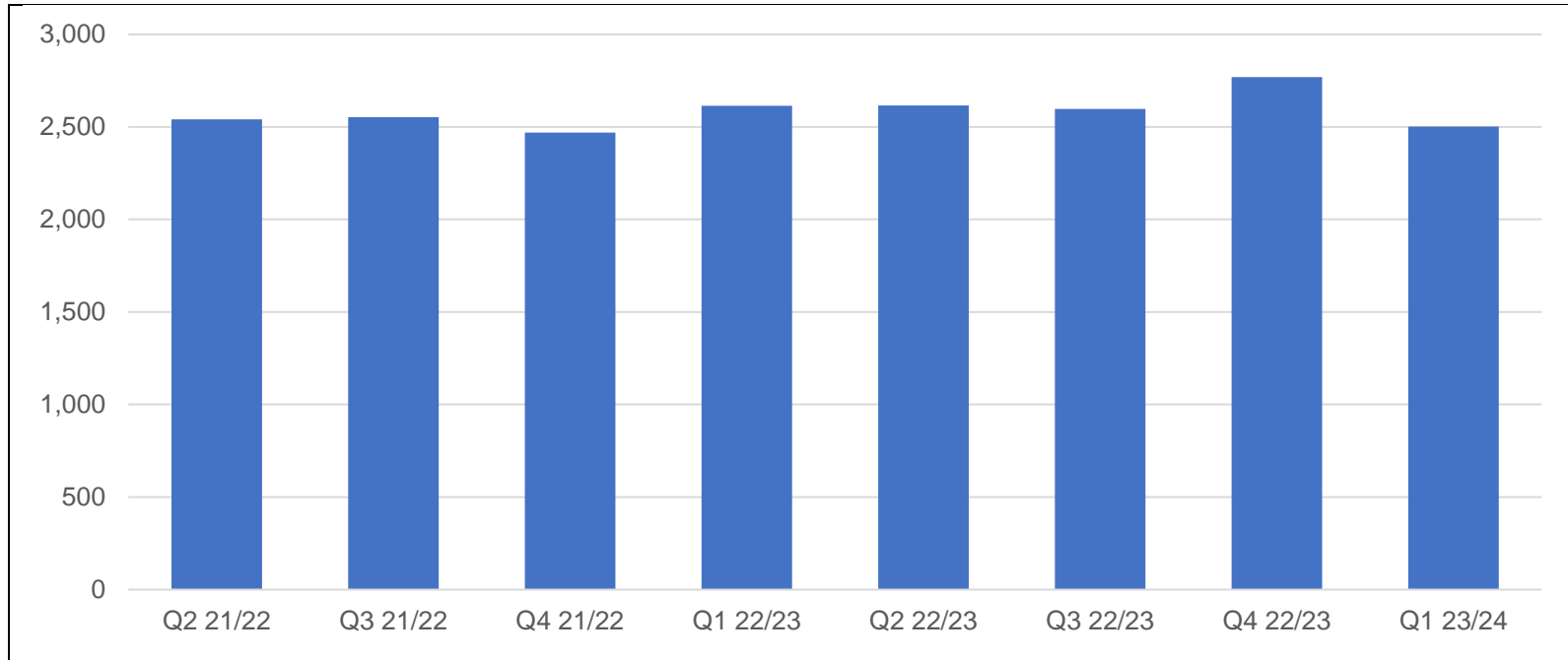
Activity measure, no specified target

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 1 there was an increase in 2% of people with an active C&SP.

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



Technical Notes:

Activity measure, no specified target

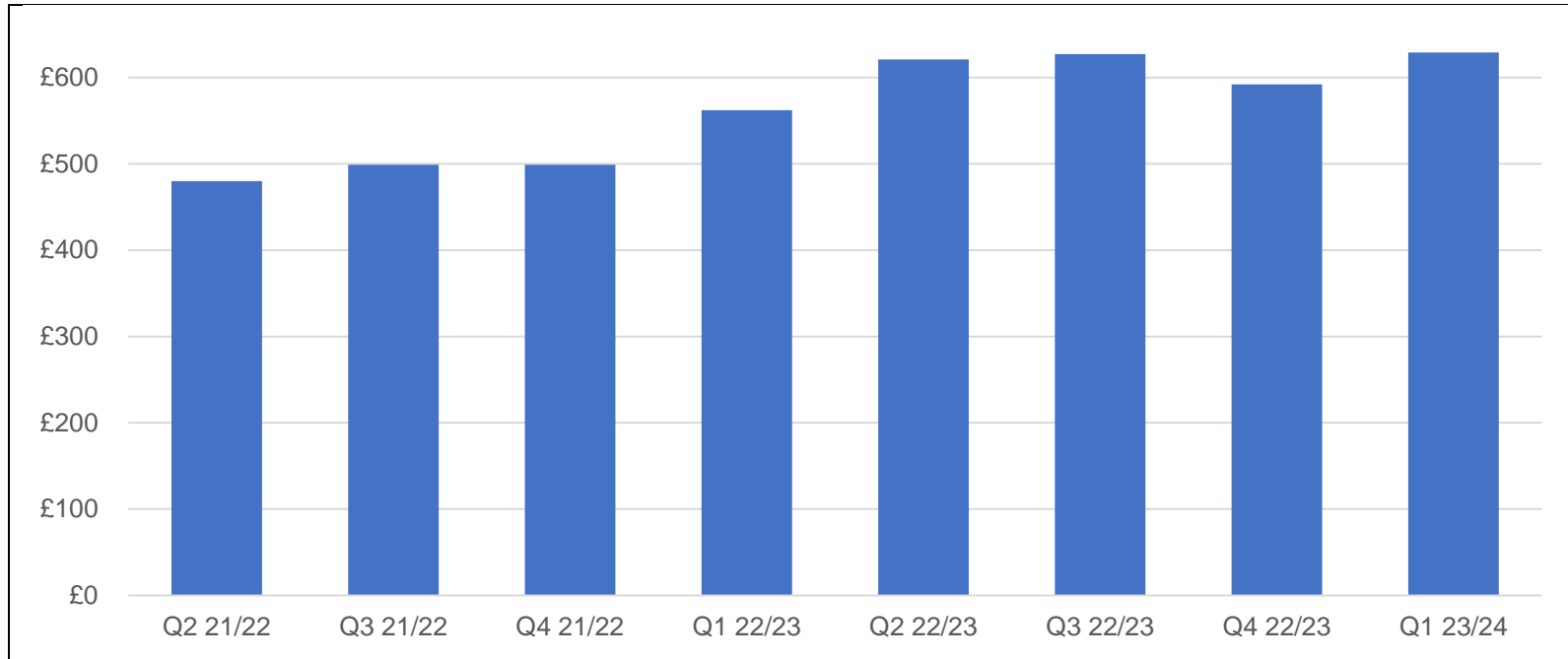
Q1 to Q4 2022/23 figures have been updated.

Corporate Risk Register:
CRR0002 & CRR0015

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 saw 2,501 new packages of support arranged.

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 i.e. 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

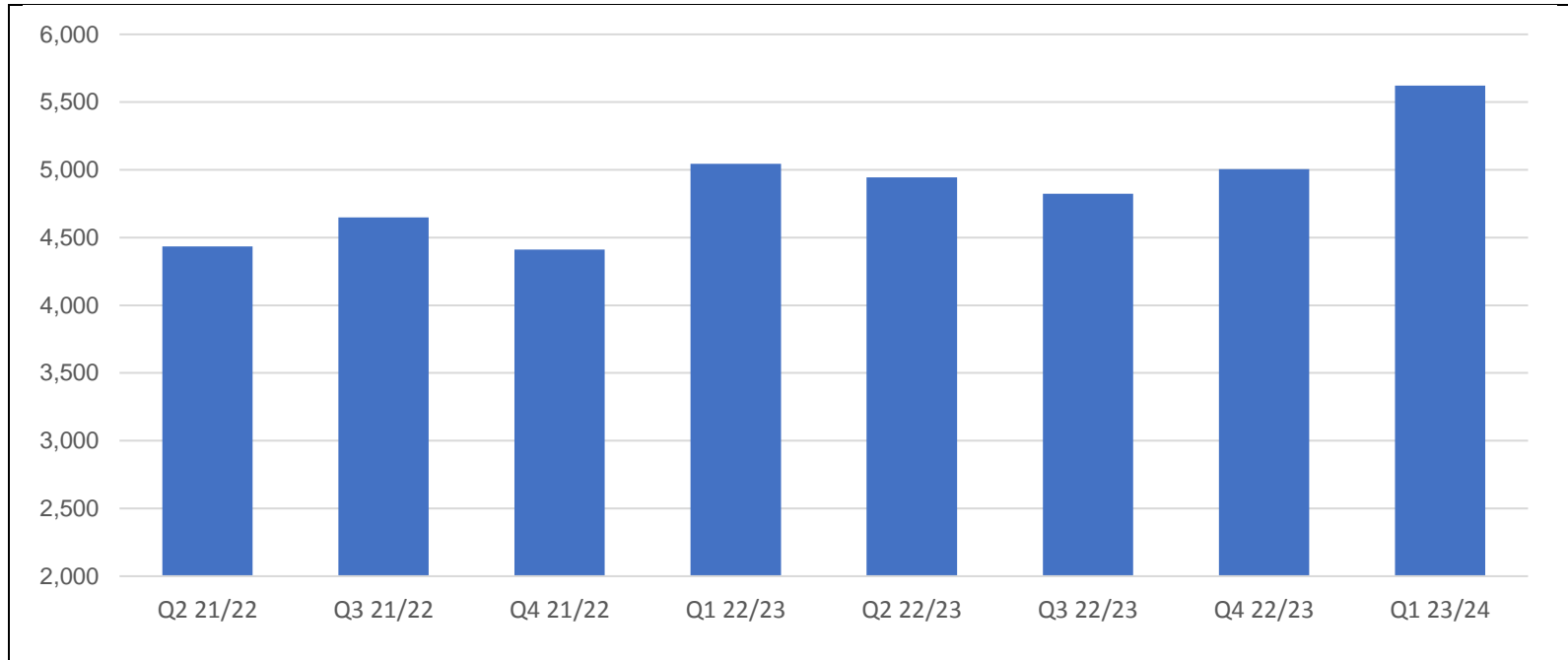
Average weekly cost at end of quarter

Q1 to Q4 2022/23 figures have 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 slightly higher amount than the quarters before that.

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

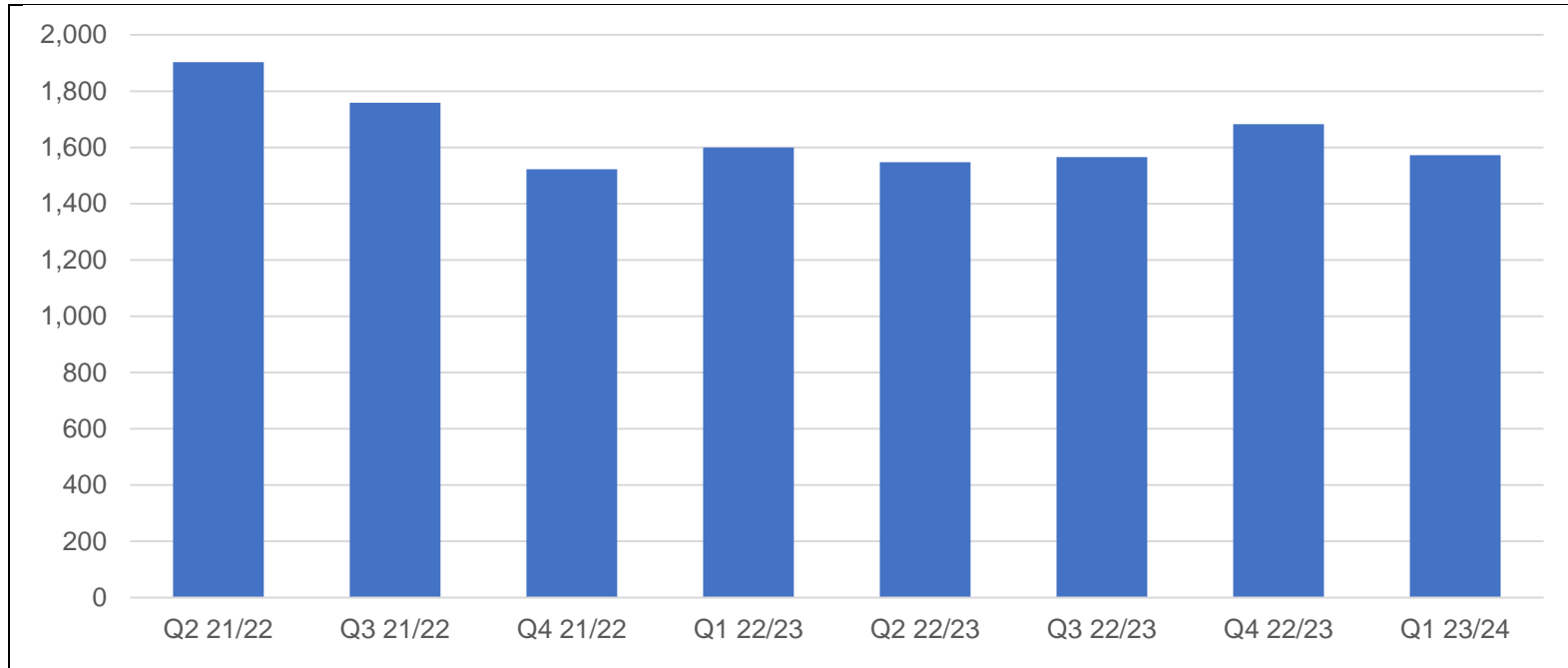
Please note axis does not start at 0.

Corporate Risk Register: CRR0002

Commentary: The number of people requiring their annual review of their C&SP increased as on the last day of Quarter 1; it was a 12% increase on the previous quarter.

In Quarter 1 there was a decrease in the number of completed annual reviews, with 2,475 compared to over 3,200 in Quarter 4.

ASCH14: The number of people in Kent Enablement at Home



Technical Notes:

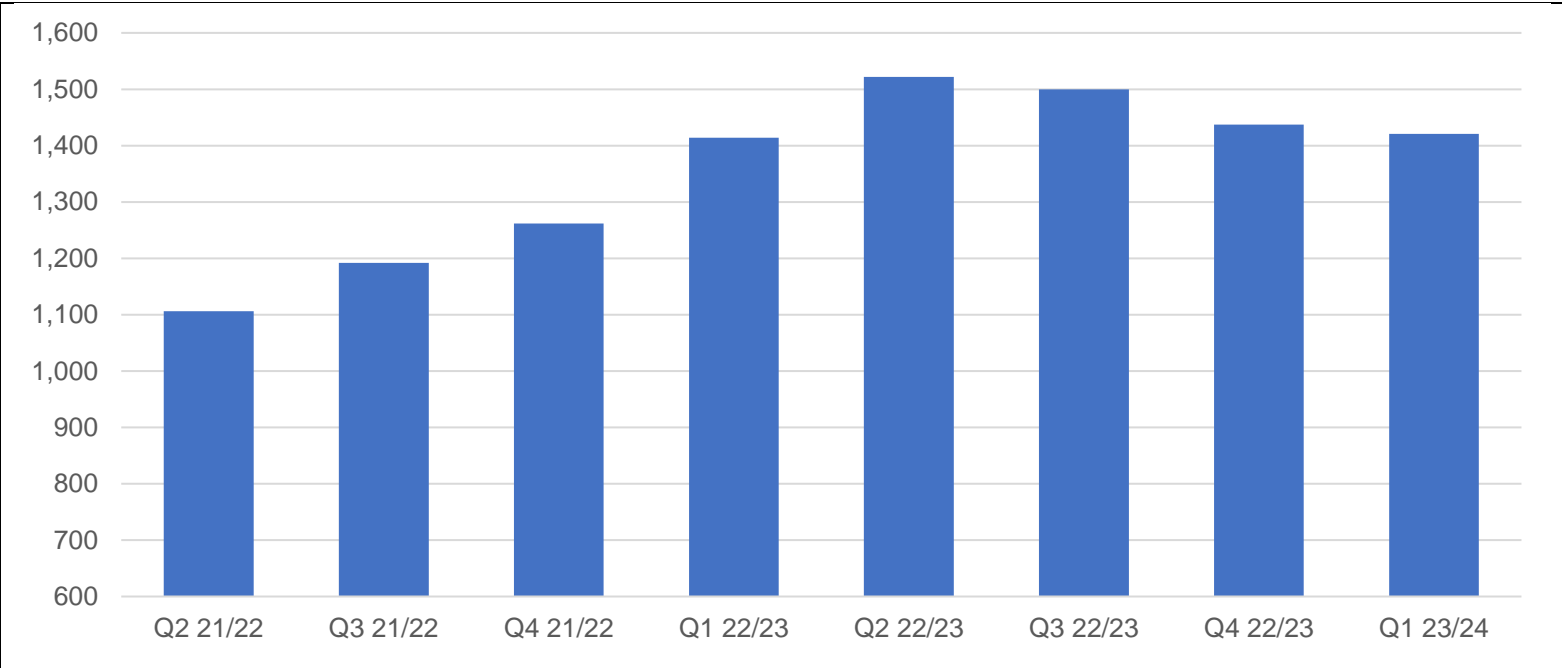
Activity measure, no specified target

People receiving services with Kent Enablement at Home (KEaH)

Please note axis does not start at 0.

Commentary: There was a decrease of 7% in people receiving the Kent Enablement at Home (KEaH) Service in Quarter 1; following the move to the new locality model there was a decrease in referrals into the service, however this has now been addressed and it is expected that there will be increases in activity reflective of Quarter 4.

ASCH15: The number of people in Short Term Beds



Technical Notes:

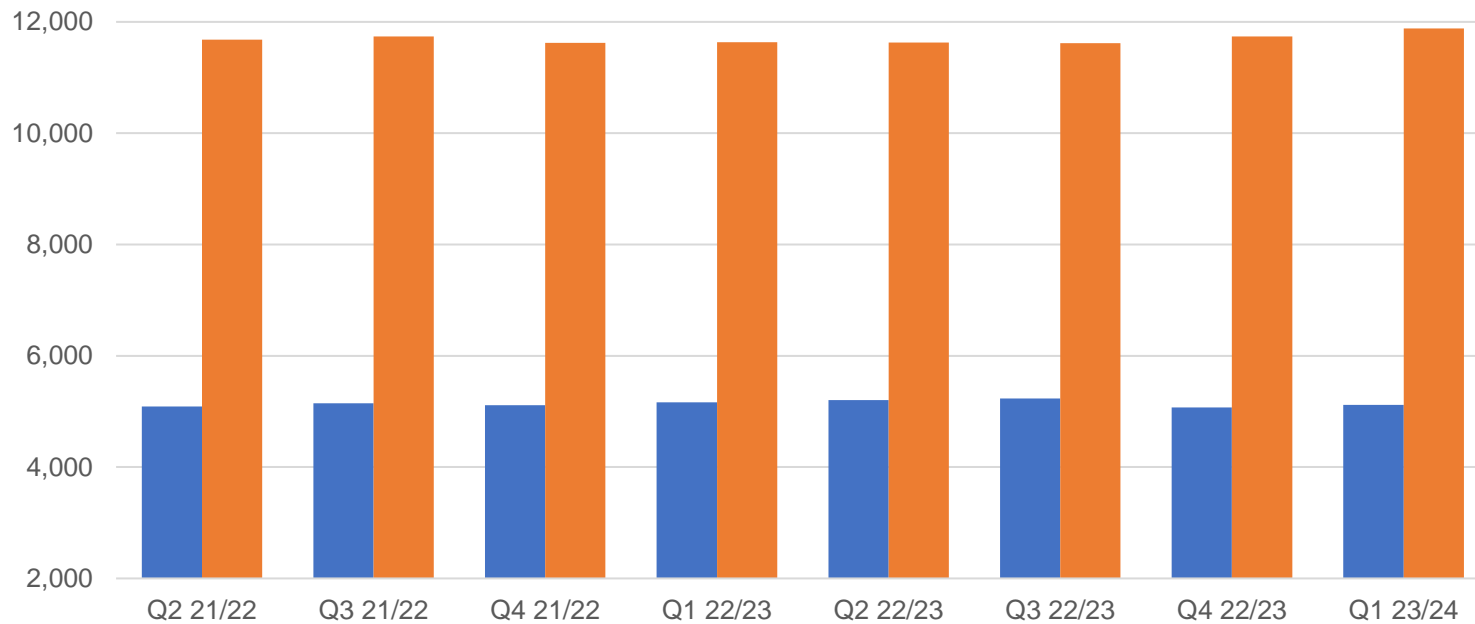
Activity measure, no specified target

Please note axis does not start at 0.

Q1 to Q4 2022/23 figure has been updated.

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



Technical Notes:

Activity measure, no specified target

Please note axis does not start at 0.

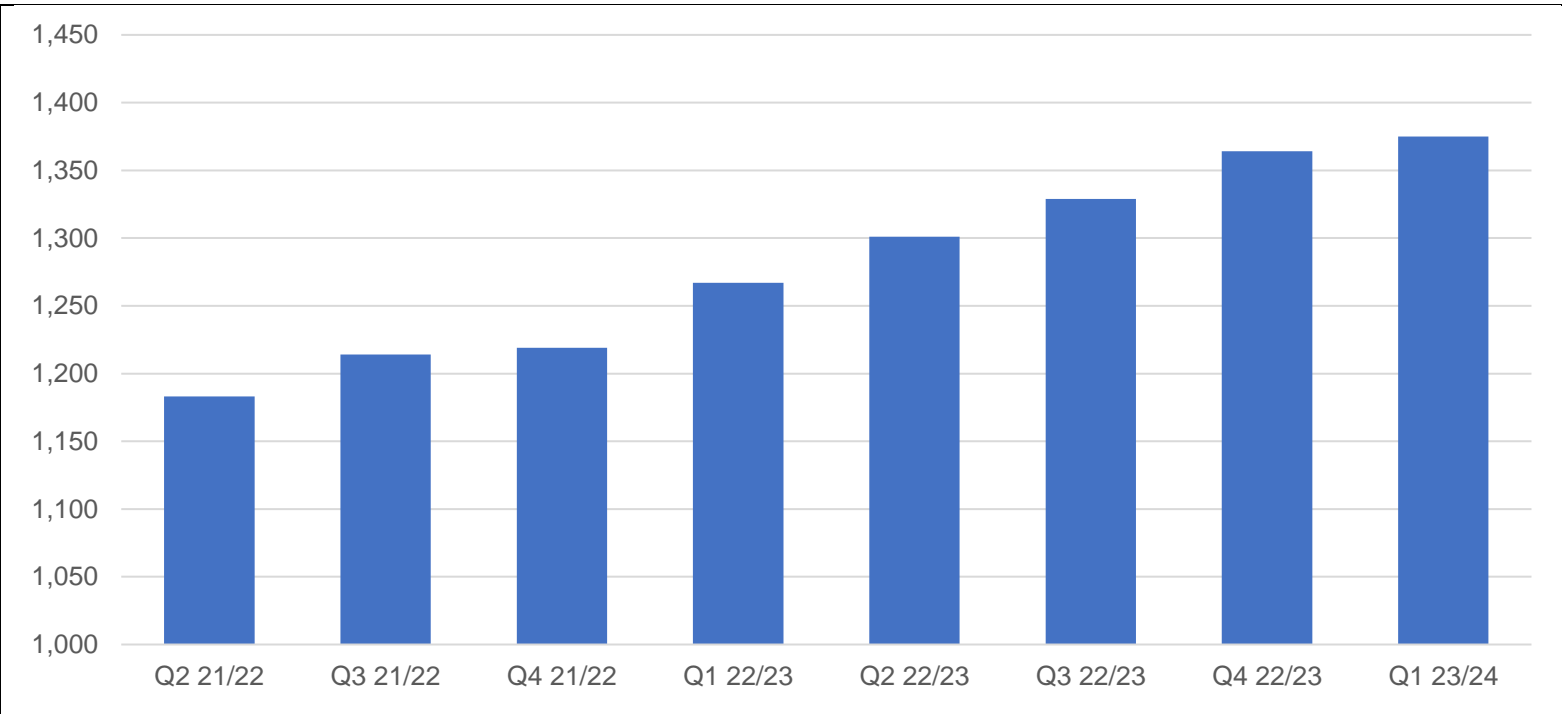
Blue – Residential or Nursing services

Orange – Community Services

Commentary: The number of people accessing community services continues steadily increase and was at over 11,800 in Quarter 1. The number of people in residential and long-term care continues to fluctuate with a slightly increased number in Quarter 1.

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



Technical Notes:

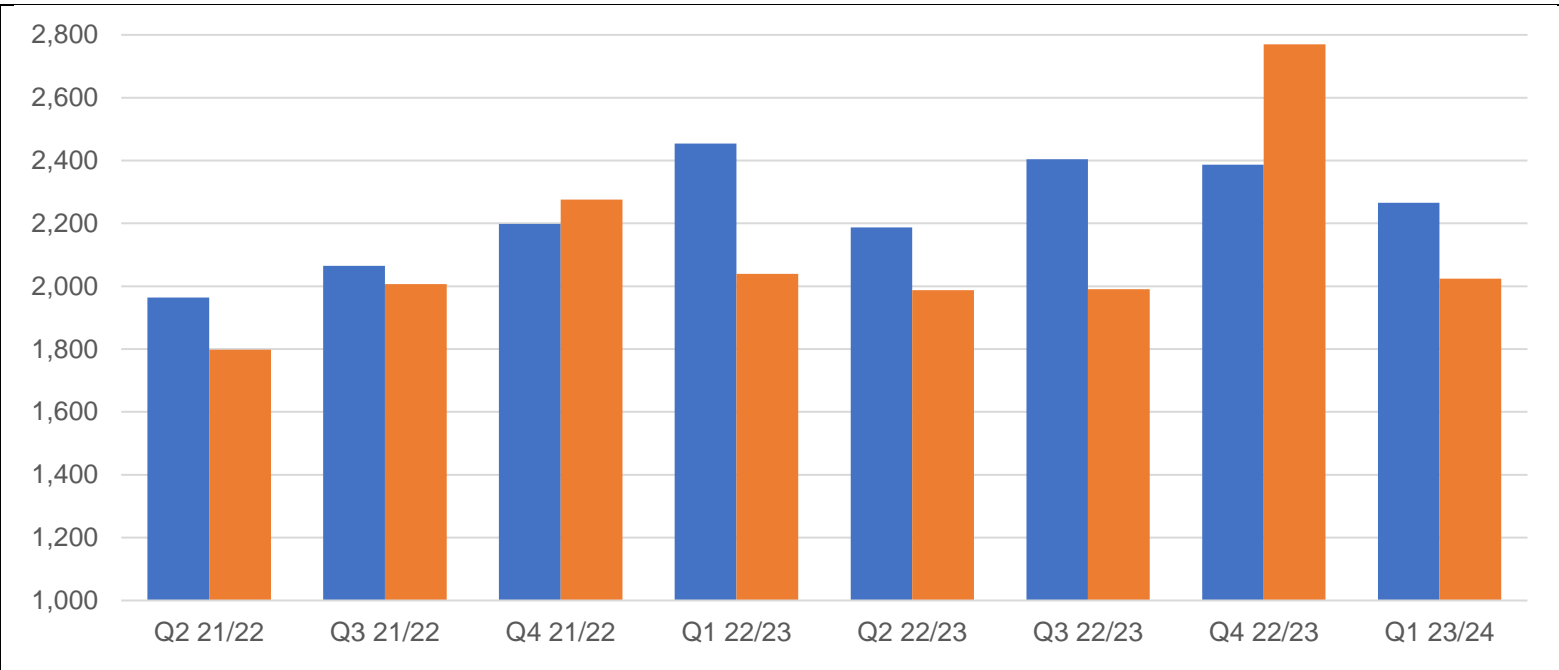
Activity measure, no specified target

Please note axis does not start at 0

Q1 to Q4 2022/23 figures have been updated.

Commentary: The national picture has identified that more people are experiencing mental health needs since the Covid19 pandemic, and this is evident in the increasing trend since 2021/2022. Better recognition of mental health needs across all areas of social work and wider systems pressures relating to the provision of acute mental health care, wider societal pressures related to the cost-of-living crisis and a growing wider and ageing population are resulting on an increased demand on Mental Health Services.

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



Technical Notes:

Activity measure, no specified target

Please note axis does not start at 0.

Corporate Risk Register: CRR0002

Blue – applications received.

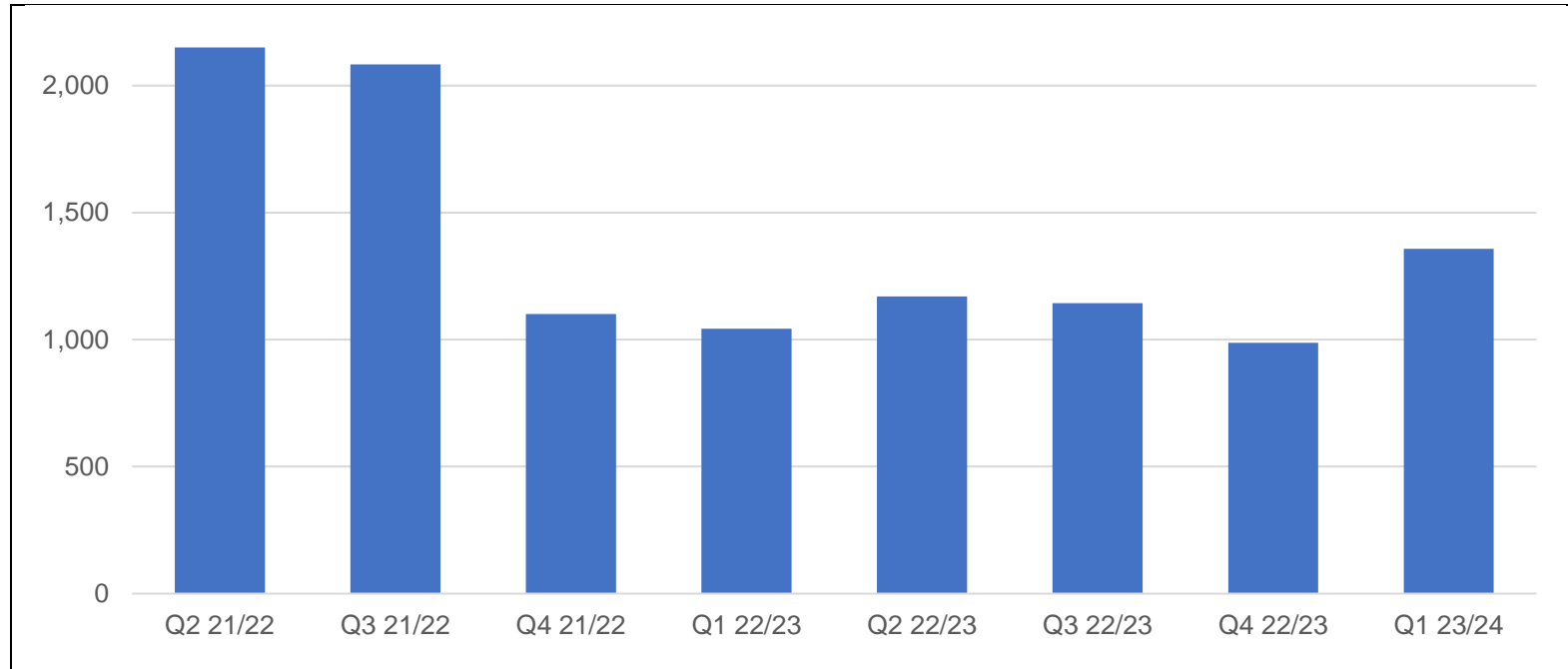
Orange – Applications completed.

Q1 to Q4 2022/23 figures have been updated

Commentary: The numbers of applications for Deprivation of Liberty Safeguards (DoLS) remains high, but adult social care received a lower volume in Quarter 1 compared to previous quarters.

Although the numbers of applications completed has decreased compared to the previous quarter, the function continues to manage the risk through strong relationships with partners which enables the team to be directly contacted should an application have an increased urgency. The team continues to look to innovate to get the best outcomes from the available resources.

ASCH19: The number of safeguarding enquiries open on the last day of the quarter



Technical Notes:

Activity measure,
no specified target

Commentary: In Quarter 4 the Safeguarding Specialist Teams concentrated on closing open safeguarding enquiries prior to the locality operating model beginning in April 2023. For Quarter 1 the management of safeguarding concerns is now integrated within the 24 locality teams. Some operational teams have reached their optimum staffing levels and recruitment has continued to date to ensure that all teams are fully staffed/optimised. Whilst recruitment is ongoing, and the teams are embedding the new ways of working, this has had some impact on the closure of safeguarding enquiries. Work is in progress to identify where processes can be streamlined, and work is ongoing with partners, whom we undertake enquiries on behalf of, to produce a report within the timelines given. This will support a reduction in any potential delay in enquiries being closed.