

<b>Report to:</b>	Overview and Scrutiny Committee (Adult Social Care and Health)	<b>Date of Meeting:</b>	21 February 2023
<b>Subject:</b>	Adult Social Care Performance Update		
<b>Report of:</b>	Assistant Director of Adult Social Care	<b>Wards Affected:</b>	All Wards
<b>Portfolio:</b>	Adult Social Care		
<b>Is this a Key Decision:</b>	No	<b>Included in Forward Plan:</b>	No
<b>Exempt / Confidential Report:</b>	No		

**Summary:**

This report is presented to the Committee to provide an update on progress within Adult Social Care against key performance metrics.

**Recommendation(s):**

(1) The Committee are asked to note the contents of the report and be assured on the actions being taken in any area requiring increased focus.

**Reasons for the Recommendation(s):**

To ensure transparency, oversight, and challenge in relation to Adult Social Care Performance.

**Alternative Options Considered and Rejected:** (including any Risk Implications)

None

**What will it cost and how will it be financed?**

**(A) Revenue Costs**

There are no revenue costs as a direct result of this report

**(B) Capital Costs**

There are no capital costs as a direct result of this report

### Implications of the Proposals:

<b>Resource Implications (Financial, IT, Staffing and Assets):</b> There are no direct resource implications as a result of this report	
<b>Legal Implications:</b> Ensures compliance to requirements detailed within the Care Act 2014	
<b>Equality Implications:</b> There are no equality implications.	
<b>Climate Emergency Implications:</b>  The recommendations within this report will	
Have a positive impact	No
Have a neutral impact	Yes
Have a negative impact	No
The Author has undertaken the Climate Emergency training for report authors	No

### Contribution to the Council's Core Purpose:

Protect the most vulnerable: Ensuring effective discharge of statutory duties under the Care Act 2014, utilising national and local metrics to assess performance:
Facilitate confident and resilient communities: promoting independence and supporting people to delay the need for formal support and live at home for longer:
Commission, broker and provide core services:
Place – leadership and influencer:
Drivers of change and reform:
Facilitate sustainable economic prosperity:
Greater income for social investment:
Cleaner Greener:

## **What consultations have taken place on the proposals and when?**

### **(A) Internal Consultations**

The Executive Director of Corporate Resources and Customer Services (FD.7133/23) and the Chief Legal and Democratic Officer (LD.5333/23) have been consulted and any comments have been incorporated into the report.

### **(B) External Consultations**

None

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### **Appendices:**

There are no appendices to this report

### **Background Papers:**

There are no background papers available for inspection.

## **1. Introduction/Background**

Social Care assesses performance against a number of national and local measures. Monitoring of performance is undertaken at strategic and operational levels. There is a well established Strategic Performance and Business meeting in place and a new Quality, Performance and Finance Board has been established to provide further oversight on all areas of performance. This includes Finance, Performance, Professional Practice, Transformation and Commissioning. There are now dedicated business meetings in place for all these key areas. Key aspects of the data reviewed, is detailed within this paper and further work is in progress to further enhance oversight of quality to ensure alignment to the new national assurance framework.

Overview reports are shared directly with the Executive Director and Cabinet Member. Mitigation plans are put in place for any performance areas required specific focus, with progress reported to the specific business meeting and up to the Performance Board for assurance and further scrutiny. Risk oversight is a standard agenda item on all governance meetings. Further training on risk management and risk registers has taken place with some staff and will continue throughout Q4 with support from the Corporate Risk & Resilience team. Identifying items for risk and escalation are now standard agenda items on all key meetings. Performance is driven by statutory requirements, best practice and benchmarking.

## 2. Key Performance Updates

### 2.1 Contacts and Activity

During this financial year Adult Social Care has provided long term support services to four thousand, one hundred individuals and carers. Carer numbers have been increasing steadily over the past twelve months. During this period, the service has received over twenty-two thousand contacts. Activity is detailed below in Fig.1 and 2.

Fig 1

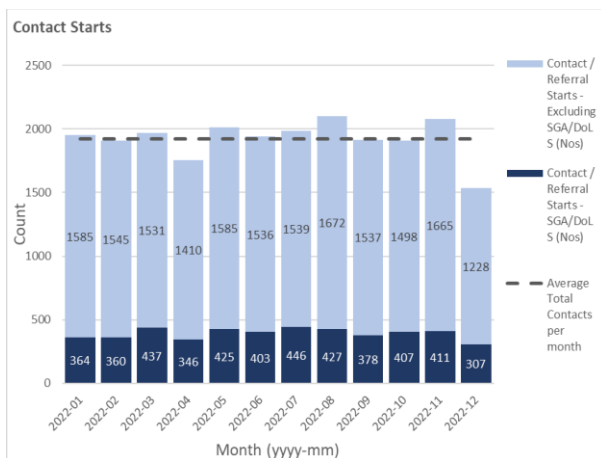


Fig 2



During Quarter 3, over three thousand, six hundred contacts were received, this represents a reduction of 8% on the previous quarter and this is a pattern replicated most years as a result of a decline in the number of contacts received over the Christmas period. In previous years, contact numbers in Quarter 4 rise back up to normal levels.

Of the total contact received during Quarter 3, 17% of people were provided with advice and information which includes support to access community and voluntary sector support. We are expecting to see this number increase as we continue to enhance our front door offer. Of the contacts that resulted in new referrals, 27% went on to have a full Care Act assessment (Fig 3). A snapshot of key activity during the last twelve months is shown in Fig 4, however this does not include specialist assessments undertaken nor unplanned reviews, both of which also represent a substantial amount of activity.

Fig 3

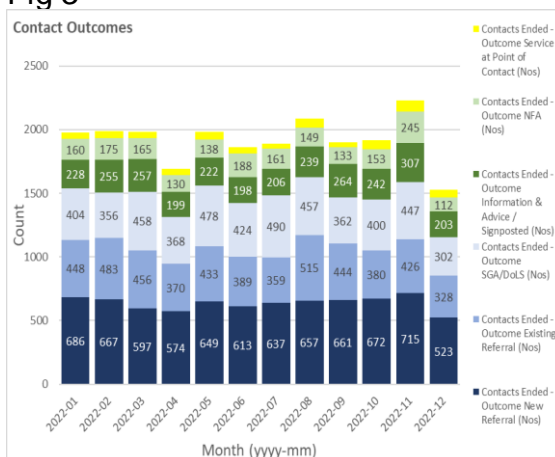
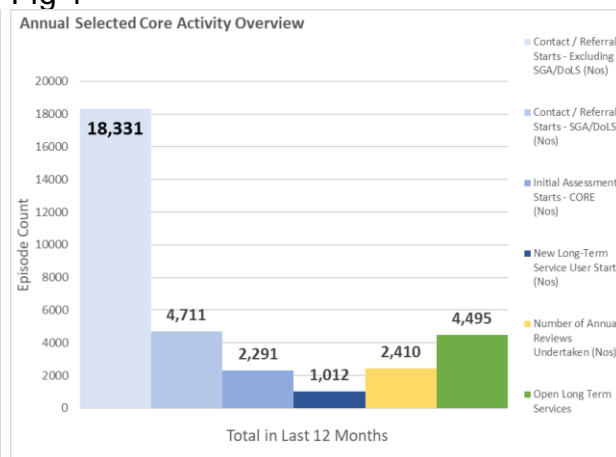


Fig 4



## 2.2 Assessments and Reviews

Whilst Adult Social Care has continued to undertake a large number of assessments, there remain challenges in respect of increased demand and workforce pressures. Sefton, like all other local authorities continues to face recruitment difficulties for key posts such as Social Workers, Occupational Therapists and Approved Mental Health Practitioners. The current vacancy rate within Adult Social Care is 9.3% across all roles and for social work and occupational therapy, specifically, the vacancy rate is 12.1% and 12.5% respectively. Agency staff are utilised to fill vacant posts, wherever possible, and this has supported the mitigation of immediate risk, however, recruiting agency staff is also difficult.

The capacity of Senior Leadership team is in the process of being strengthening which was a key recommendation of the Adult Social Care Local Government Association (LGA) Peer Review which has held in 2022. Interviews have recently been held and additional posts recruited to. Strengthening front-line provision remains a key focus and there is now a rolling recruitment programme in place. Adult Social Care is also working with corporate Human Resource Colleagues to undertake a market evaluation in relation to the recruitment and retention of key adult social care posts.

Like other Local Authorities Adult Social Care is experiencing high numbers of individuals requesting assessments (Fig 5) and reviews (Fig 6). This has been exacerbated by the impact of Covid. Ensuring robust oversight and effective communication with individuals and carers is essential. To ensure effect risk management, the following measures are in place across Adult Social Care:

- All new referrals are triaged daily, with urgent referrals being assessed within forty-eight hours. Qualified social work practitioners and managers oversee this.
- In situations where an individual requires an assessment, but the situation is not deemed 'urgent' these cases are passed to the relevant community teams. Both teams have systems in place in to determine priority in terms of allocation to social workers. All individuals awaiting an assessment are contacted on a regular basis to ensure cases are re-prioritised, where needed, as well as ensuring regular oversight of wait times. All waiting times are scrutinised at the Adult Social Care Strategic Performance Meeting.
- Whilst the number of people on Occupational Therapy caseloads remains high and the volume of referrals continues to exceed capacity, there has been improvement. All referrals undergo an initial screening and prioritisation with urgent cases being actioned as soon as possible. Additional Occupational therapists are being recruited, where possible, and succession planning is being maximised through the implementation of an OT apprenticeship scheme.
- Reviews remain a key area of focus and whilst the number of reviews being completed has been increasing (Fig 5), Quarter 3 did see a reduction due to the impact of the Christmas period. In the past four years, review numbers in Q3 have seen decreases ranging from 8% to 22%. In three of the past four years, review numbers have picked up again in the following quarter. A key focus remains increasing the numbers of scheduled reviews (Fig 6) and a dedicated work programme is in place.

- A dedicated Covid Recovery Programme has now been launched to provide further focus on assessments and reviews which will include the utilisation of a dedicated weekend taskforce to target cases waiting for further assessment and intervention.

Fig 5

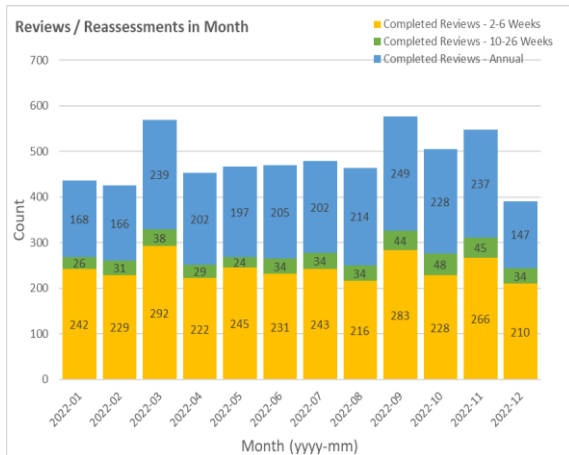
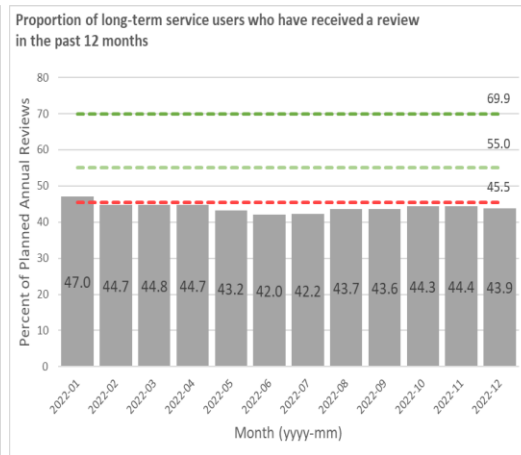


Fig 6



## 2.3 Support Services

Adult Social Care continues to support increasing numbers individuals at home with domiciliary care and reablement services with over four thousand people being supported during 2021/22 (Fig 7). This is aligned to our key strategic aim of supporting as many people as possible to remain living at home for a long as possible. Capacity within the market does remain a challenge due to a number of factors including financial sustainability, workforce pressures, increased acuity, and demand, however recent procurement of block booking arrangements and a continued focus on supporting the market has seen an increase in the numbers of people accessing domiciliary care (and a reduction in those awaiting packages). The number of domiciliary care hours being procured have been rising steadily and is now just under nineteen thousand per week.

The recent discharges monies have also been utilised to further support the market and a new procurement for domiciliary care to ensure longer term sustainability is due to commence in the autumn.

The overall number of long term placements being made has also been falling (Fig 8) and this has been impacted particularly on a reduced number for people over sixty-five being admitted into residential or nursing care. Placements for those aged eighteen to sixty-four has, however, stayed high, and we remained in the bottom quartile regionally. This is a continued area of focus and will be supported by the extra care strategy and new models of care being developed in collaboration with supported living providers.

Fig 7

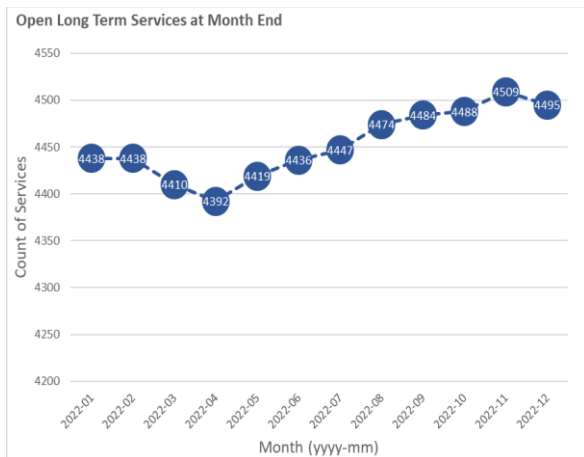
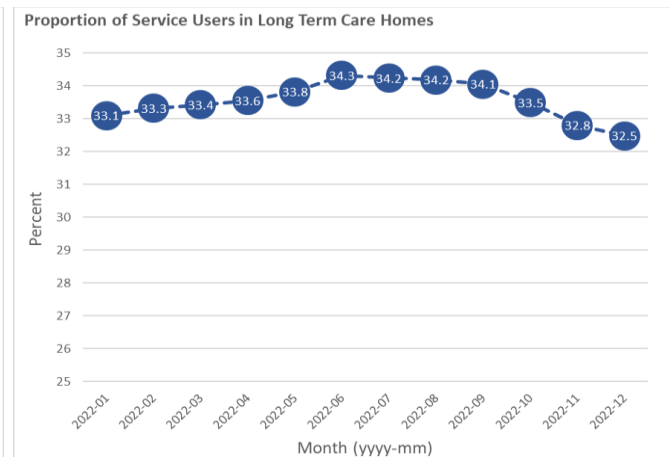


Fig 8



The success of reablement has remained a positive with just over 90% of clients sixty-five plus, discharged from hospital, remaining at home ninety-one days after receiving reablement services. Capacity within reablement has remained a challenge although this has been slowly increasing (Fig 9) and work is currently in progress to facilitate an extension of this service. Where reablement is not available, alternative services are offered to ensure people are kept safe and needs are met. At the present time, there remains a high use of alternatives to reablement services to ensure needs are met (Fig 10).

Fig 9

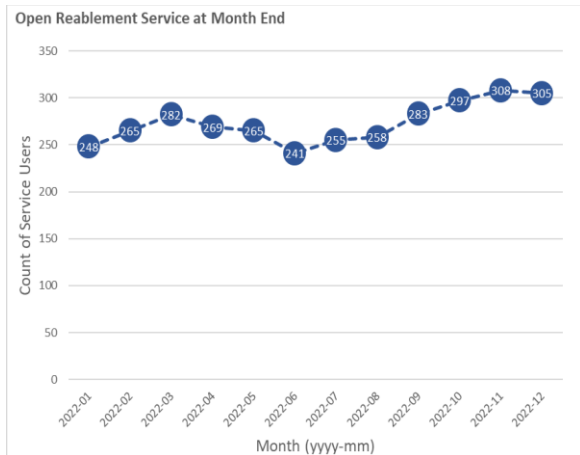
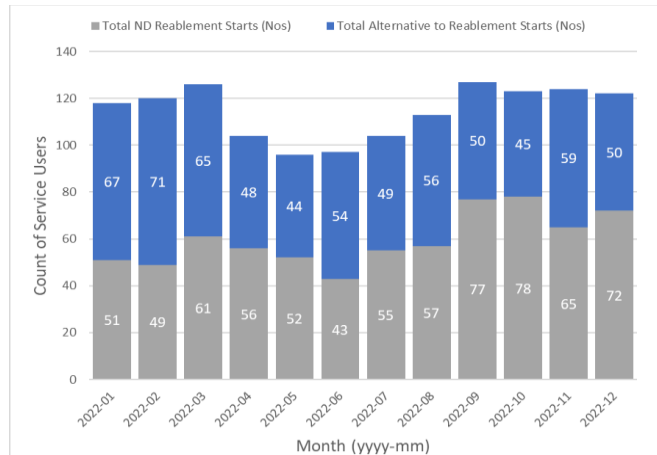


Fig 10



## 2.4 Safeguarding

Undertaking safeguarding investigations remains a critical statutory duty for Adult Social Care, with teams continuing to manage and address key activity within these areas (Fig 11, 12). Many of these investigations are complex and often involving care providers, requiring substantial staff resources and senior management oversight, together with a sustained focus with colleagues from Health, the Police and Advocacy Services.

Fig 11

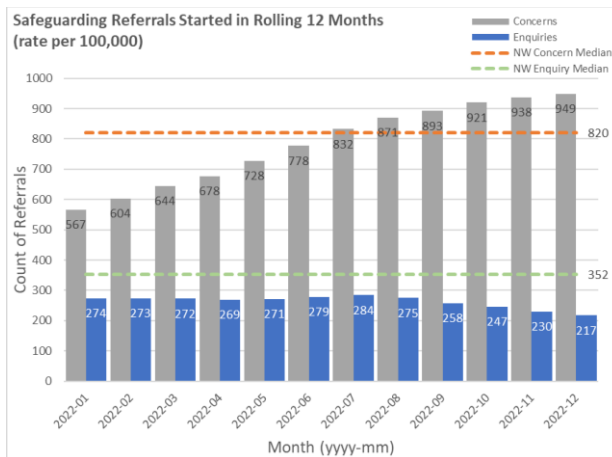
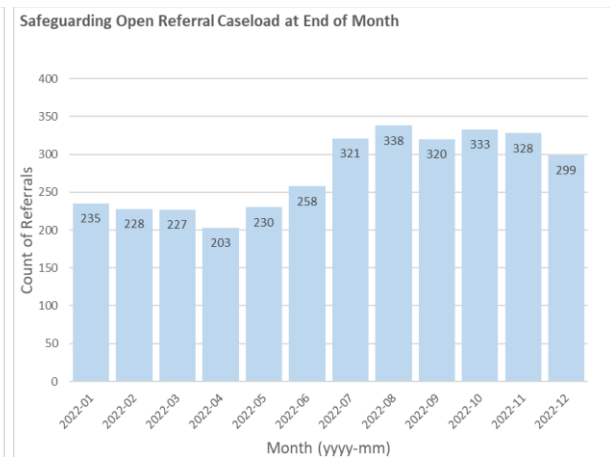


Fig 12



Adult Social Care continued to perform well in the timely handling of safeguarding contacts and referrals with just over 96% of contacts resolved within seven days and 67% of referrals resolved within twenty-eight days.

Sefton also continued to perform well in Making Safeguarding Personal with nearly 98% of those expressing a preferred outcome having that preference either fully, or partially met.

## 2.5 Adult Social Care Outcomes Framework (ASCOF)

The Adult Social Care Outcomes Framework (ASCOF) measures how well care and support services achieve the outcomes that matter most to people as put forward by Central Government. The ASCOF is used both locally and nationally to set priorities for care and support, measure progress, and strengthen transparency and accountability.

Additional key points on Sefton's performance are listed below

### Employment:

Sefton continues to rank in the top quartile for the proportion of adults in contact with secondary mental health services in employment, both in the North West and nationally.

A very small increase was noted in December for the proportion of adults with learning disabilities going into paid employment. Sefton remained just outside of the bottom quartile in the North West but in the bottom quartile, nationally. A multi-agency, dedicated task and finish group chaired by the Cabinet Member is due to launch in February 2023.



## **Housing:**

Sefton compares well to other local authorities on clients in settled accommodation. Just under 90% of clients in contact with secondary mental health are living independently. Over 88% clients with learning disabilities are living in their own home or with their family. This puts us in the top quartile in England for each of these metrics.

## **Self-directed support & direct payments:**

Provision of services to clients by either self-directed support or direct payments has remained relatively consistent over the last twelve months.

The proportion of carers receiving a direct payment continued to increase. December saw a highest figure for this metric in the last twelve months. Work done by the Carers Centre to distribute more direct payments looks to be having a small impact on the measure. Further work needs to be done to reach the top quartile with all carers needing to have received a direct payment to hit this target.