

HERTFORDSHIRE COUNTY COUNCIL
ADULT CARE & HEALTH CABINET PANEL
THURSDAY 6 MARCH 2018 AT 10:00AM

ADULT SOCIAL CARE PERFORMANCE MONITOR – QUARTER 3 - 2017/18

Report of the Director of Adult Care Services

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Executive Member: Colette Wyatt-Lowe – Adult Care and Health

1. Purpose of the report

1.1. To enable the Panel to review the performance of adult social care for the third quarter of the 2017/18 financial year (October 2017 – December 2017).

2. Background

2.1 Each year the Council are required to submit data on adult social care activity to NHS Digital. This data is used to calculate a number of Adult Social Care Outcome Framework indicators which allows the benchmarking of local authorities' performance. This report provides the latest performance on a selection of these key indicators.

2.2 At a recent Adult Care and Health Panel meeting, members asked for a further breakdown of Delayed Transfers Of Care (DTC) performance. This report now includes an additional delayed transfer of care indicator. It now includes Hertfordshire's overall performance covering delays attributable to the NHS, Social Care and jointly to both bodies. This breakdown better replicates the 2018-19 Adult Social Care outcomes framework and along with the existing social care only indicator, provides a full overview of Hertfordshire's DTC performance. A detailed additional breakdown of performance has also been attached to support analysis of these indicators.

2.3 Following the public release of the national datasets by NHS digital. This report now includes (where applicable) 2016-17 benchmarking data versus England and Hertfordshire's Chartered Institute of Public Finance and Accountancy (CIPFA) comparative authorities. See Appendix 1 for a list of these authorities.

3. Recommendations

- 3.1. Panel is invited to note the report and comment on the performance of the Adult Care Services Directorate for Quarter 3 2017/18 as outlined below.

4. Financial Implications

- 4.1 This report is for noting and commenting purposes only and does not require a recommendation that will have any financial implications.

5. Equalities Impact Assessment

- 5.1 When considering proposals placed before Members it is important that they are fully aware of, and have themselves rigorously considered the equalities implications of the decision that they are taking.
- 5.2 Rigorous consideration will ensure that proper appreciation of any potential impact of that decision on the County Council's statutory obligations under the Public Sector Equality Duty. As a minimum this requires decision makers to read and carefully consider the content of any Equalities Impact Assessment (EqIA) produced by officers.
- 5.3 The Equality Act 2010 requires the Council when exercising its functions to have due regard to the need to (a) eliminate discrimination, harassment, victimisation and other conduct prohibited under the Act; (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it. The protected characteristics under the Equality Act 2010 are age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief, sex and sexual orientation.
- 5.4 No Equalities Impact Assessment was undertaken in relation to this matter. This report is for noting and commenting purposes only and does not require a recommendation which would have any equality implications.

Indicator	2016/17 End of year performance	2017/18 Target	Quarter 1 Performance	Quarter 2 Performance	Quarter 3 Performance	Quarter 4 Performance	2016/17 National average	2016/17 CIPFA comparator group average
Percentage of people receiving direct payments	28.4%	27.0%	27.5%	27.3%	27.9%		28.3%	31.8%
<u>Commentary</u>								
Of the 7,997 clients receiving a long term service, 2,228 are in receipt of a direct payment. Adult social care teams implemented an initiative to review long term clients during Quarter 3 to ensure they were receiving the most suitable form of support. This, together with continued promotion of direct payments, has seen an improvement in performance. Currently achieving target.								
Percentage of carers receiving direct payments	78.2%	70.0%	70.5%	70.9%	70.4%		74.3%	79.3%
<u>Commentary</u>								
Of the 1,851 carers receiving a service this year, 1,304 have received a direct payment. Quarter 3 saw a slight drop in performance compared to Quarter 3. Clear guidance continues to be promoted amongst front line teams to ensure that direct payments continue to be used where appropriate Carers continue to be assessed and reviewed to ensure they are receiving the most suitable form of support available and it is anticipated that this, along with the promotion of direct payment pre-paid cards, will continue to improve performance.								
Permanent Admissions to Care Homes (18-64) (rate per 100,000 population)	13.0	15.0	11.8	11.5	Quarter in Arrears		12.8	11.4
<u>Commentary</u>								
Please note- This indicator is reported a quarter in arrears in order to allow for the time lag in reporting. Performance is then extrapolated to year end in order to represent expected performance. There have been 41 new admissions in 2017-18 (up to Quarter 2) giving the rate of 5.79 per 100,000 population. Based on current performance Hertfordshire is on target to achieve an annual rate of 11.5 admissions per 100,000 by year end. Continued management oversight of all								

Indicator	2016/17 End of year performance	2017/18 Target	Quarter 1 Performance	Quarter 2 Performance	Quarter 3 Performance	Quarter 4 Performance	2016/17 National average	2016/17 CIPFA comparator group average
residential placements and the promotion of alternative forms of care have resulted in the level of residential admissions continuing to reduce in line with this aim.								
Permanent Admissions to Care Homes (65+) (rate per 100,000 population)	543	575	543.6	517.2	Quarter in Arrears		610.7	560.4
<p><u>Commentary</u></p> <p>*Please note- This indicator is reported a quarter in arrears in order to allow for the time lag in reporting. Performance is then extrapolated to year end in order to represent expected performance.</p> <p>There have been 510 admissions up to the end of Quarter 2 giving a rate of 258 admissions per 100,000. Based on current performance Hertfordshire is on target to achieve an annual rate of 517.2 admissions per 100,000 by year end. ACS strategy is to reduce the number of people requiring residential care and promote the use of alternative services in order to promote independence. Continued management oversight of all residential placements and the promotion of alternative forms of care have resulted in the level of residential admissions continuing to reduce in line with this aim.</p>								
Older people at home 91 days after leaving hospital into reablement	86.0%	85.0%	90.0%	87.0%	83.0%		82.5%	81.5%
<p><u>Commentary</u></p> <p>Performance has dropped below target for quarter 3, though is still above Hertfordshire comparative authorities (81.5%) and England averages for 2016-17 (82.5%). The number of clients entering reablement services from hospital continues to increase. 820 Clients aged 65+ were discharged into Social Care between July 2017-September 2017 (497 in the previous three months) with 677 of those clients still at home 91 Days later. The service is experiencing clients with more diverse and severe needs being offered this form of support. Of the 142 service users whom were not at home after 91 days. 34 were readmitted, 8 went into a residential or nursing setting and 100 were deceased. A result of offering reablement services to people with more significant need is an increase in the likeliness that they will not be at home after 91 days from discharge.</p>								

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<p>The service continues to be improved by a number of initiatives. These include; working with providers to increase capacity, development of discharge to assess models in order to help people transfer from hospitals into reablement, recruitment of additional occupational therapists and an increase in the delivery of enablement in settings other than the clients own home.</p>								
Overall Delayed transfers of care from hospital (NHS/Social Care/Joint (rate per 100,000 pop))	17.5	6.5	18.5	16.4	15.3		14.9	17.4
<p><u>Commentary</u></p> <p>Overall delayed Transfers of Care for Hertfordshire have continued to reduce into quarter 3. 67% of Hertfordshire's delays have been attributable to the NHS, 31% Social Care and 2% jointly to NHS and Social Care.</p> <p>Overall the greatest percentage of Hertfordshire's delays has been reported by West Herts Hospital Trust with 28% of all delays occurring at their hospital. Hertfordshire Community Trust (HCT) (20.8%) and Hertfordshire Partnership Foundation Trust (HPFT) (16.8%) report the second and third highest contribution to delays. The main reason recorded for these delays is patients waiting for home care (23.3%), followed by further non acute NHS care (22.4%) and then patient family choice (15.2%).</p> <p>Actions to improve performance include ensuring working closely with each individual trust to ensure delays are recorded and reported accurately (resulting in a reduction of delays reported by HPFT) and continuing to work on a number of initiatives including:</p> <ul style="list-style-type: none"> - Increasing intermediate bed capacity by using Improved Better Care Fund (IBCF) funding - Deployment of impartial assessors to speed up placements in care homes - Work with Hertfordshire Community Trust to develop a Discharge Home to Assess Model similar to service in East and North Herts Trust - Continuation and further roll out of Integrated Discharge Teams across Hertfordshire hospitals. 								

Indicator	2016/17 End of year performance	2017/18 Target	Quarter 1 Performance	Quarter 2 Performance	Quarter 3 Performance	Quarter 4 Performance	2016/17 National average	2016/17 CIPFA comparator group average
Delayed transfers of care attributable to social care (rate per 100,000 pop)								
	5.6	2.6	7.0	5.5	4.8		6.3	7.2
<u>Commentary</u>								
<p>Delayed Transfers of care attributable to social care have continued to reduce into Quarter 3. Hertfordshire's social care delays in December 2017 were the lowest reported since January 2016. Data relating to delays is published by Trust and for the year to date, the greatest percentage of Hertfordshire's delays attributable to social care have been reported by West Herts Hospital Trust with 46.9% of all delays occurring at their hospital. Hertfordshire Community Trust (24.8%) and Hertfordshire Partnership Foundation Trust (8.0%) report the second and third highest contribution to delays. The main reason recorded for social care delays is patients waiting for home care (54.1%), followed by waiting for nursing care (19.3%) and then residential care (17.1%).</p> <p>Actions to improve performance include ensuring working closely with each individual trust to ensure delays are recorded and reported accurately (resulting in a reduction of delays reported by Hertfordshire Partnership Foundation Trust (HPFT)) and continuing to work on a number of initiatives including:</p> <ul style="list-style-type: none"> - Increasing intermediate bed capacity by using IBCF funding - Deployment of impartial assessors to speed up placements in care homes - Work with Hertfordshire Community Trust to develop a Discharge Home to Assess model similar to service in East and North Herts trust - Continuation and further roll out of Integrated Discharge Teams across Hertfordshire hospitals. 								

Indicator	2016/17 End of year performance	2017/18 Target	Quarter 1 Performance	Quarter 2 Performance	Quarter 3 Performance	Quarter 4 Performance	2016/17 National average	2016/17 CIPFA comparator group average
Number of Deprivation of Liberty Safeguard (DoLS) applications received	4,400	N/A	933	1,210	1,125		1416	3433
<u>Commentary</u> Information included for monitoring purposes only – no target set. Data is based on the number of DOLs application received in the quarter. Comparator data is based on year to date performance.								
Number of Safeguarding concerns raised	5,620	N/A	2,136	2,035	2,219		2378	5497
<u>Commentary</u> Information included for monitoring purposes only – no target set. Data is based on the number of Concerns reported in the quarter. Comparator data is based on year to date performance.								

Appendix 1

Hertfordshire's CIPFA Comparator Group	
Local Authority Name	Region
Northamptonshire County Council ⁷	East Midlands
Nottinghamshire County Council	East Midlands
Hertfordshire County Council	East of England
Suffolk County Council	East of England
Essex County Council	East of England
Cambridgeshire County Council	East of England
Oxfordshire County Council	South East
Buckinghamshire County Council	South East
Surrey County Council	South East
West Sussex County Council	South East
Hampshire County Council	South East
Kent County Council	South East
Warwickshire County Council	West Midlands
Staffordshire County Council	West Midlands
Worcestershire County Council	West Midlands

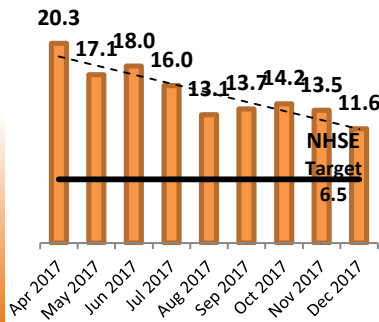
**To provide a means of benchmarking progress other local authorities are identified where they are deemed to have similar characteristics. These designated Local Authorities are known as statistical neighbours or comparable authorities. Comparators provide context to help interpret indicators*

Areas can be combined into comparator areas by analysing datasets to identify groups of similar areas. Each comparator is different, but the common themes that go into their calculations are population, age structure, geographical size, socio-economic characteristics (such as education, deprivation, employment, income, health and care, and so on) and housing, among others

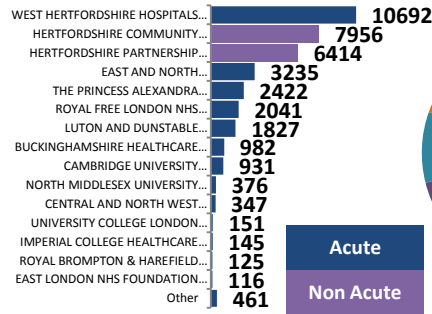
This publication is based on UNIFY published data up to the end of December 2017. This analysis has been produced to support Hertfordshire's quarterly delayed transfers of care performance for 2017-18.

Total Delays

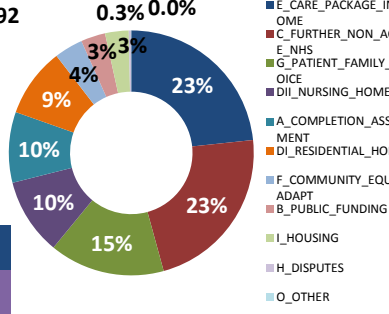
Total Delays Per 100k Monthly Trend Vs NHSE Target



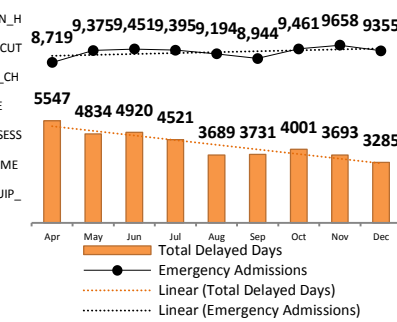
Total Delays Split by Trust (actual delayed days) for the year to date



Total Delays Split By Reason (Actual Delayed Days) for the year to Date



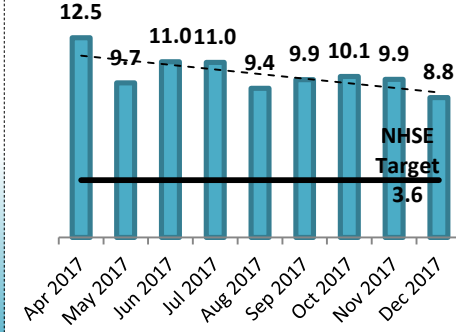
Hertfordshire Emergency Admissions (65+) Vs Delayed Transfers of care



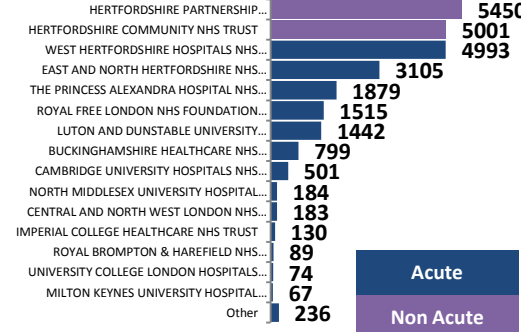
Total Delays	Hertfordshire DTOC Ranking (Change over time)		
	Hertfordshire National Ranking (Out of 151)	Hertfordshire CIPFA Ranking (Out of 15)	Hertfordshire Eastern Ranking (Out of 11)
April	137	11	11
May	129	9	11
June	128	9	11
July	121	7	10
August	95	5	8
September	102	5	8
October	110	7	8
November	109	8	8
December	104	5	8
Rank Year to Date	118	6	10

NHS Delays (67% of all Delays)

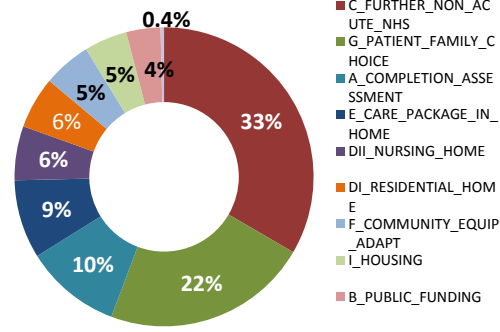
NHS Delays Per 100k Monthly Trend Vs NHSE Target



NHS Delays Split by Trust (actual delayed days) for the year to date



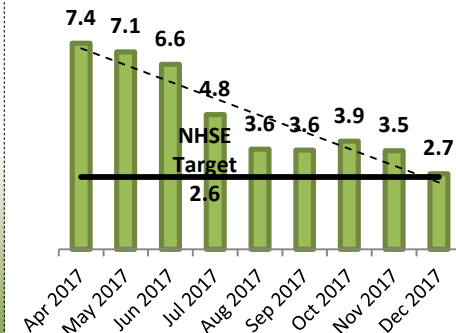
NHS Delays Split By Reason (Actual Delayed Days) for the year to Date



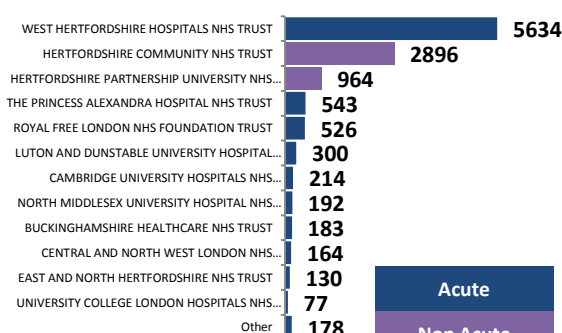
NHS Delays	Hertfordshire DTOC Ranking (Change over time)		
	Hertfordshire National Ranking (Out of 151)	Hertfordshire CIPFA Ranking (Out of 15)	Hertfordshire Eastern Ranking (Out of 11)
April	140	12	10
May	126	11	10
June	129	13	10
July	129	11	10
August	119	10	9
September	122	11	8
October	127	12	10
November	131	10	9
December	127	11	8
Rank Year to Date	126	9	9

Social Care (31% of all Delays)

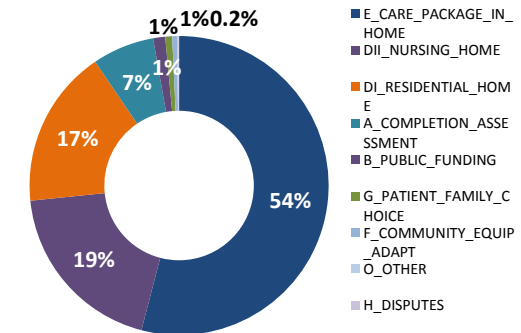
Social Care Delays Per 100k Monthly Trend Vs NHSE Target



Social Care Delays Split by Trust (actual delayed days) for the year to date



Social Care Delays Split By Reason (Actual Delayed Days) for the year to Date



Social Care Delays	Hertfordshire DTOC Ranking (Change over time)		
	Hertfordshire National Ranking (Out of 151)	Hertfordshire CIPFA Ranking (Out of 15)	Hertfordshire Eastern Ranking (Out of 11)
April	122	10	11
May	129	11	11
June	116	9	11
July	99	5	7
August	77	2	7
September	84	3	8
October	94	7	8
November	94	5	7
December	85	6	7
Rank Year to Date	107	7	8