

# Performance for Adult Social Care Commissioning

## Adults Care, Adults Health and Housing

### Overview & Scrutiny Committee

27<sup>th</sup> September 2016

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Author: Director of Adult Social Services

Wards: All

Locality Affected: All

Parishes Affected: All

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#### 1. Purpose and Reasons

- 1.1 This report provides the Adults Care, Adults Health and Housing Overview and Scrutiny Committee with an update of performance and key issues relating to Adult Social Care commissioning and performance.
- 1.2 A key purpose of the Adults Care, Adults Health and Housing Overview and Scrutiny Committee is to hold Commissioners and providers of Health and Social Care Services to account.
- 1.3 Any Commissioner or provider of Health and Social Care Services in Swindon is required to provide information on the planning and provision of health and social care services within the Borough and consult with the Committee on any planned substantial changes or developments to service provision.

#### 2. Recommendations

The Committee is recommended to:

- 2.1 Note the report
- 2.2 Identify any areas of concern or interest that require further investigation.

#### 3. Detail

- 3.1 Update
  - 3.1.1 This report informs Scrutiny Committee Members on the progress we are making in delivering the priorities and pledges set out in Swindon's vision for 2016-2020 around supporting vulnerable adults to live as independently as possible and enjoy safe and fulfilling lives (priority 4). The three pledges we are committed to in delivering this priority include:

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Further information on the subject of this report can be obtained from Sue Wald, Direct Dial Telephone Number: 01793 465713, [swald@swindon.gov.uk](mailto:swald@swindon.gov.uk)

# **Performance for Adult Social Care Commissioning**

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### **Overview & Scrutiny Committee**

**27<sup>th</sup> September 2016**

---

Working with the Clinical Commissioning Group (CCG) and GP surgeries to help people with long term health and social care needs to manage their health effectively with support from community groups and multidisciplinary teams (Pledge 26)

Ensuring that more people and their carers are supported to live as independently as possible and reducing the length of time people need to spend in residential care. (Pledge 27)

Reducing smoking prevalence to less than England average (Pledge 30)

- 3.1.2 This is an interim performance report which will be followed up by a more comprehensive analysis of performance at Adults Care, Adults Health and Housing Overview and Scrutiny Committee in December 2016. Background details on current activity and performance are provided in the appendix 1 which indicates that overall we are making good progress in achieving the ambitious agenda we set ourselves for the year.
- 3.1.3 We continue to work collaboratively with local health and care organisations from Wiltshire, Bath and North East Somerset (BANES) to shape our joint Sustainability and Transformation Plan (STP). This plan is required by NHS England. The increasing demand placed on local health and care services from population growth and people living longer, and often with long term conditions, has led to significant financial pressures. Health inequalities are also widening, and we know some areas benefit from better quality health services than others. The STP sets out how health and care services across our organisations will change in the future to improve people's health and wellbeing and support the delivery of quality services which are financially sustainable. Our aim is to introduce more preventative care, find new ways to meet people's needs; and identify ways that existing services and organisations can work together to do things differently. Our first STP submission was well received by NHS England in June, the next stage is to engage with key stakeholders and the local community to get their views on our emerging plans. The final submission is planned for 21<sup>st</sup> October 2016.
- 3.1.4 We have recently extended our Community Navigators programme to June 2017. This is a joint project with the Clinical Commissioning Group which focuses on supporting residents to manage their own long-term health conditions. It has both improved people's quality of life and reduced unnecessary visits to GPs and

# Performance for Adult Social Care Commissioning

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27<sup>th</sup> September 2016

---

Great Western Hospital. The Community Navigator have worked with 497 individuals in the last 12 months, 117 were 75 years or older.

#### 3.2 What are the challenges that your organisation is facing?

##### 3.2.1 Managing demand

Managing demand continues to be a challenge as more clients become eligible for support and many have more complex needs requiring specialist or expensive care packages or placements. Increasing demand is impacting on our ability to deliver effective and responsive services within budget. The additional funding from the precept has been offset by increased cost pressures due to National Living Wage and Inflation. The forecast outturn position across Adults Social Care and Health Commissioning as at the end of July 2016 is a budget pressure of £1.155m. The budget pressures on the Social Care budgets are £1.128m and budget pressures on Health budgets are £0.027m. Hospital discharges and high demand for temporary nursing care continues to present financial challenges to adult social care

##### 3.2.2 Delayed transfers of care

We continue to work with Swindon CCG, Great Western Hospital, SEQOL and Wiltshire Council to tackle the blockages leading to patients having their discharge from hospital delayed. Delayed discharge is a challenge nationally and regionally. Our programme board supports the ongoing monitoring and changes required to ensure sustainable long term reduction of delays for people being discharged from hospital. We have commissioned additional bridging services including nursing pilot beds, and increased the number of domiciliary hours being provided. In June 2016, we provided 8,308 domiciliary care hours per week, 450 additional hours (5.7% increase) compared to June last year (7,858 hours provided per week). Additional commissioned provision combined with improved staff awareness is supporting our ongoing programme.

The performance measure for delayed discharge is the average of the monthly snapshot figure per 100k population. For June, our result for delays attributable to social care is 4.78 per 100k population against the target of 3.9 (low is good). This is an increase on the previous month indicating there is more work to do to retain a sustainable reduction in delays. However, despite this slight increase,

# **Performance for Adult Social Care Commissioning**

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**27<sup>th</sup> September 2016**

---

we continue to perform better than the South West average of 7.95 per 100k population and the England average of 5.6 per 100k population. The actual number of days lost for Swindon reduced from 1,600 days in Quarter 1 2015/16 to 1,000 days in Quarter 1 2016/17.

#### **3.2.3 Learning disability Services**

Work is ongoing to reduce spend on Learning Disability services. Spend per service user in Swindon remains high compared to other authorities. We are working with housing colleges to commission a greater variety of supported living accommodation to reduce the need for care home provision.

The percentage of people with learning disabilities in employment in Swindon is low compared to other authorities. Our performance for this measure has remained static over the past two years with our year- end result at 3.65% (21 adults in paid employment), against a 14/15 national average of 6%. The June position is 3.4% (19 adults in paid employment). We have established a Transitions programme to drive improvement and the Board met on 7<sup>th</sup> September 2016 to agree the Project Initiation Document (PID) and map the work plan. Work is underway to support a number of young people aged 16-25 years with Education Health and Care Plan to participate in supported internships. The aspiration is for the young people to complete these courses and for them to be skilled to enter employment.

#### **3.2.4 Delivering New Models of Care**

Great Western Hospital has been awarded the contract for community health and some social care services from February 2017. SEQOL informed commissioners of the financial challenges that this would bring to the organisation as well as potential instability of services. We have therefore been working with SEQOL to plan for the smooth handover of services earlier than planned. Staff from SEQOL will TUPE across to the Council for social care services apart from day services for older people which will transfer to First City. The TUPE process will be completed on 1<sup>st</sup> October 2016

#### **3.2.5 Reducing smoking prevalence**

The data source for this indicator has changed from the Integrated Household Survey (IHS) to the Annual Population Survey. The survey methodologies are

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## Adults Care, Adults Health and Housing

### Overview & Scrutiny Committee

27<sup>th</sup> September 2016

slightly different and as a result the new data source along with new data for 2015 has seen Swindon slip from better than England to worse than England. The new figures for 2015 show Swindon's prevalence is 18.7% and England's average is 16.9% (previously reported for 2014 was Swindon 17.8% and England average 18%). Smoking prevalence in adults in routine and manual occupations for 2015 is 25.3% and England average is 26.5% (previous reporting 2014 was Swindon 24.3% and England average 28%). The Swindon Smokefree Alliance (SSFA) partnership oversees the integrated tobacco control programme for reducing smoking prevalence. Activities to support improvement include: redrafting the Tobacco Control Strategy; bus station going smokefree from October; championing the national Stoptober campaign at a local level; ongoing awareness raising amongst young people and schools to prevent the uptake of smoking; and continuing to encourage smokers to quit.

### 3.3 What have you done well?

#### 3.3.1 Prevention and Early Intervention

Prevention and early intervention are key to managing demand and future cost pressures. Latest data indicates we are making good progress in meeting the national requirement set out in the Adult Social Care outcomes Framework (ASCOF) to delay and reduce the need for care and support. During quarter one (April to June), 91 adults received an episode of domiciliary re-ablement (compared to 44 last year) and 39 adults received residential re-ablement (compared to 24 last year). Reablement helps people regain the ability to look after themselves following illness or injury and aims to keep people as independent as possible for as long as possible.

We are undertaking more timely assessments with 94.9% (1337) assessments starting within 5 days. This is above the 85% target and a significant improvement on the same period last year (71.8%).

#### 3.3.2 Choice and control

We continue to make good progress in providing service users with increased choice and control through the provision of personal budgets and direct payments. We have more service users with personal budgets and direct payments compared to last year and we are ahead of target. Latest performance is 91.5% (1312 clients), a significant improvement on our performance last quarter (82.56%, 1184 clients). However we remain below the target of 100%

# Performance for Adult Social Care Commissioning

## Adults Care, Adults Health and Housing

### Overview & Scrutiny Committee

27<sup>th</sup> September 2016

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which we will strive to achieve over the coming months. We recognise further improvements are required to deliver this level of service for carers where we are a low performer nationally. Current performance is 21.7% (91 carers) against a target for the month of 25.4%. We are working with the Swindon Carers Centre to address the shortfall in personal budgets over the coming months.

Our improvements in delivering timely reviews have provided the opportunity to introduce personal budgets and offer direct payments. In June, 1299 service users had received an annual review of need (23.42%), which puts us on track for achieving the year- end target of 76%.

We recognise carers provide regular and substantial support for service users and it is encouraging that significantly more carers have been offered an assessment and review of their needs compared to last year. To date, 30.49% (509) carers have received an assessment or review which is above the target for this month (17.5%) and puts us on track to achieve the year- end target of 70%. This is an improvement against the same period last year of where 453 carers assessments/ reviews had been completed.

#### 3.3.3 Permanent admissions to Residential Care and Nursing Homes

Admissions to residential and nursing care are being effectively managed and remain below target. During quarter one (April to June), 28 older people have been admitted to permanent care: 13 to a nursing home placement and 15 to residential care. Three people were admitted with mental health needs and 25 people with personal care/physical support needs. This is a 46% reduction on the same period last year where 52 older people had been permanently placed. The target for the year is to admit no more than 223 older people (a rate of 691 per 100k population). Current performance is comfortably within the monthly target and puts us on track to achieve our year-end target

#### 3.4 Supporting Information

None

### 4. **Alternative Options**

4.1 None

# Performance for Adult Social Care Commissioning

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### Overview & Scrutiny Committee

27<sup>th</sup> September 2016

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#### 5. Implications, Diversity Impact Assessment and Risk Management

##### Financial and Procurement Implications

- 5.1 There are no direct financial implications arising from this report. Any financial pressures resulting from changes in demand for social care services will be identified and included within the Council's Medium Term Resourcing Plan.

##### Legal and Human Rights Implications

- 5.2 None

##### All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

- 5.3 None

##### Diversity Impact Assessment

- 5.4 None

##### Risk Management

- 5.5 None

#### 6. Consultees

- 6.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

#### 7. Background Papers

- 7.1 None

#### 8. Appendices

- 8.1 Appendix 1 – Activity and Performance Data