

## Adult Social Care Performance Update

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Cabinet Member: David Huxtable, Cabinet Member for Adult Social Care

Division and Local Member: All

### 1. Summary

- 1.1. This report summarises the key progress updates and outcomes from the service’s most recent Performance Improvement Meeting (PIMs), independently chaired by Professor John Bolton on 12<sup>th</sup> October 2018.

### 2. Issues for consideration / Recommendations

- 2.1 Members of the Scrutiny Committee to note and comment on updates in relation to Adults and Health key performance measures captured within cover report and accompanying appendices.

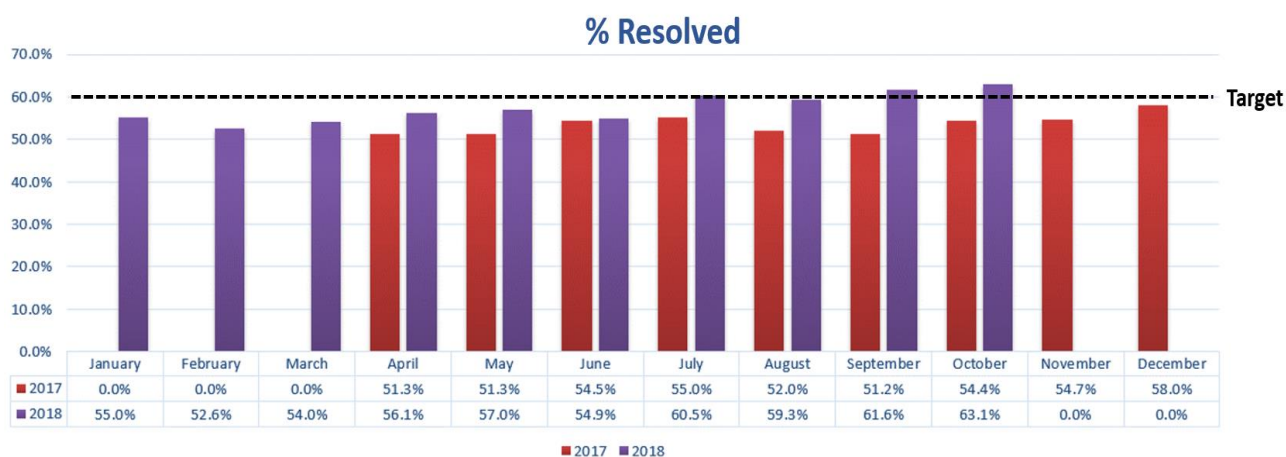
### 3. Performance Improvement Meetings (PIMS)

- 3.1. Professor Bolton has been supporting Somerset’s PIMs meetings for two year by acting as independent chair on a quarterly basis. He offers constructive challenge and expertise to the service in progressing its strategic vision to promote people’s independence and adopt person-centred approaches. At the most recent meeting held on 12<sup>th</sup> October 2018, John Bolton began by praising the service for the significant amount of progress he has seen across all aspects during his tenure with the service which has improved outcomes and in turn helped manage demand. It was noted that Somerset will feature as a case study in a paper he has written which is due to be published in November 2018.

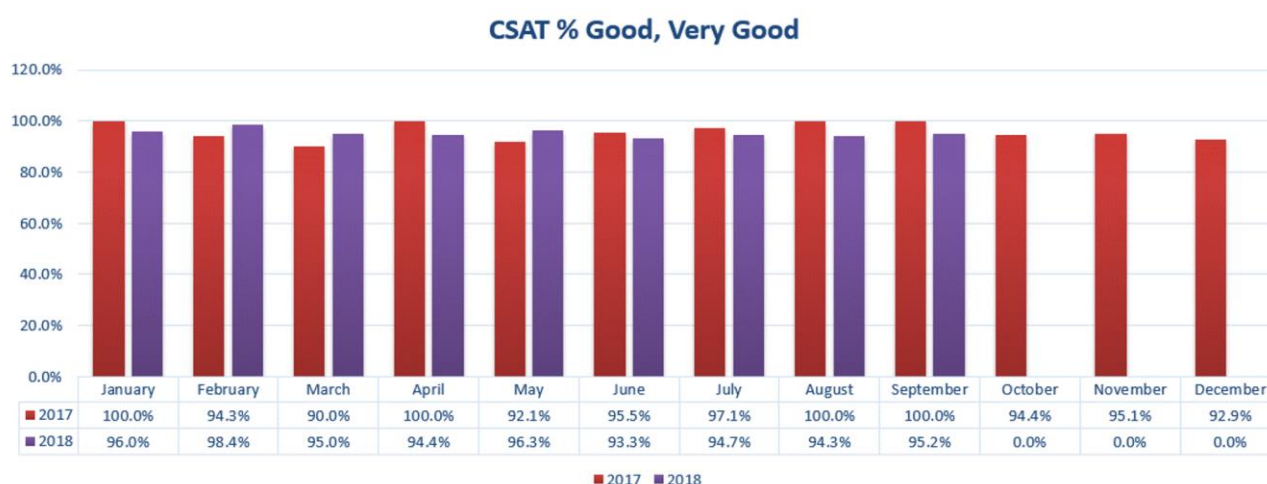
The following paragraphs summarise the key performance updates presented from the service:

#### 3.2. Somerset Direct (the ‘Front Door’/call centre):

- The absolute focus on improving outcomes for people requiring our help within Somerset Direct has enabled the team to consistently meet and maintain the target of 60% of calls being resolved at the first point of contact over recent months.



- The team's understanding of demand has improved and, though still high, the number of contacts has reduced when compared with previous years. The type of contact has also shifted with an increase in online e-referrals from professionals. To avoid these creating additional demand by being progressed straight into adults services, call advisers instead undertake strengths-based conversations with the person themselves, rather than the referrer, to explore what their needs are.
- The average time per call at Somerset Direct has increased significantly to approximately 25 minutes. The focus is now on being able to resolve the caller's issue at the front end, rather than merely getting through as many calls as possible. This is evidenced in the performance against the 60% target above.
- Additionally, customer satisfaction levels remain high. Where people are not satisfied in getting the outcome they may have wanted or expected, this is generally from family members/relatives rather than the person themselves.



### 3.3. Adult Social Care Locality Teams:

- The primary focus over the last few months has been on three key areas: improving allocation time, the time taken to complete assessments, and assessment outcomes. The operational teams have worked to find ways to more clearly report on individual outcomes for service users, and to report on performance at more granular levels (i.e. by individual team and function, such as allocation, assessment, data entry).
- The number of overdue assessments has significantly reduced since the start of the year and now stands at just over 400 across the 4 locality teams, representing a reduction of 57% since April. A lot of energy has been put into practice development and how staff are held to account for the recording of their work. This reflects the importance of understanding what it is we do when we assess and whether the intervention has a positive outcome for those people using our services.
- Since April 2018 the service has been conducting Practice Quality Conversations between frontline staff and senior managers. Latest outcome data for August 2018 revealed that 73% of submitted audits achieved a high (excellent) assurance rating for quality, up from 66% the previous month, and a further 9% achieved a reasonable (good) rating. Common areas of good practice related to the quality of case records and the involvement of the person themselves in expressing their views and wishes and being kept at the centre of the review process. Further work is being taken forward to support staff in setting and achieving clear outcomes for individuals. Feedback from operational staff has revealed that they welcome the audit process and see it as a reflective and protected opportunity to examine their practice and link with a variety of managers across the service.

### **3.4. Health Interface, Sourcing Care and Reablement**

- Somerset's performance on Delayed Transfers of Care (DToC) is better than at this point last year but is not meeting the 2.5% system wide target. There are a variety of factors that have impacted on this activity, which include the availability of packages of home care, the robustness of the social care resource in the east of the county, and system flow challenges through Home First pathways.
- In response to these challenges, our Principal Occupational Therapist is working with Home First Pathway 1 to understand the blocks. She is providing training to Home First workers around the accuracy and adequacy of goals set. She will also be rolling out training to providers to encourage them to be adopt less risk-averse practice that promotes people's independence.
- Our internal Sourcing Care Service has benefitted from the introduction of a new ICT program, developed in partnership, that enables us to input more efficiently and report more accurately on performance and trends. Reports highlighting 'unmet needs' (unsourced home care packages) are shared with providers 3 x weekly, and data shows declining trends for both 'unmet need' and the length of time people are having to wait for domiciliary care. The service has also developed an escalation plan in readiness for annual winter pressures across the health and social care system which helps clarify the triggers and responses required when our ability to provide timely home care support is compromised. We know peak periods and holidays create pressure and strain on the system which can result in people failing to get the care they need when discharged from hospital or requiring additional support. Our key aspiration is to maintain flow through services and meet anticipated demand within available resources the majority of the time.

## **4. Analysis of results – ASCOF 2017/18**

- 4.1.** The 2017/18 Adult Social Care Outcomes Framework (ASCOF) report was published by NHS Digital on 23 October 2018. Some initial benchmarking analysis from this report is included at Appendix A. Further analysis work will be completed over the next few weeks and will be reported at a future scrutiny committee.
- 4.2.** Please refer to Appendix A for the ASCOF update report.