SOCIAL SERVICES, HEALTH & HOUSING SCRUTINY COMMITTEE

REPORT OF HEAD OF COMMUNITY CARE – C. MARCHANT

8th October 2015

SECTION B – FOR INFORMATION

WARDS AFFECTED: ALL

Managed Care, Safeguarding and Quality– Performance Report

1. Purpose of Report

The purpose of this report is to inform and report to Members on the balance score card, performance monitoring of Managed Care, Safeguarding and Quality which will include the Disability Team, The Community Mental Health Teams, Safeguarding which includes Deprivation of Liberty and Protecting Vulnerable Adults and the Quality Team which is responsible for revieiwing residential Care Homes.

2. Introduction and Background

Adult Services has experienced significant changes over the period of this report. A complete restructuring of all aspects of Adult Services has led to improved services and outcomes for people who receive services and this report will cover the period where teams have changed and new systems are in place. The changes required were delivered as part of the Transforming Adult Social Care Programme (TASC) which is one of the Council key priorities called Improving Outcome, Improving Lives.

In terms of the changes, we now have a Disability Team following the merger of the old Learning Disability, Physical Disability Team and other people supported in other teams who are best supported by the new team. This team focuses on complex needs and works closely with our Health colleagues in Abertawe Bro Morgannwg Health Board. The Safeguarding and Quality Team includes the Protecting Vulnerable Adults team, The Deprivation of Liberty Team and the Quality Team which used to be the review and monitoring team which is responsible for reviewing packages of care. It was important to bring this team together to ensure that there was an integrated system of monitoring and supporting people who are in circumstances that may require protection, reviewing and are not deprived of their liberty illegally circa the Cheshire West ruling.

A more detailed report on this area will be presented separately to Cabinet Board.

In addition to this, we have ensured that he new structure and systems have aligned themselves with the new Social Services and Wellbeing Act 2014 where the emphasis in on identifying people's ambitions and aspirations and maximising naturally available resources within their own family and community networks.

In order to monitor the quality of the services, a new performance management framework has been put in place which cascades the corporate objectives of the Council, to Directorate objectives which are translated into the Head of Service's business plan and operational service plans.

These were presented to Cabinet in June where the question was asked by members as to how would the service be monitored and it was agreed that the Corporate Balanced Score Card would be adopted and regular reports would be presented to Cabinet to scrutinise. The attached report (Please see appendix 1) is the first of these reports for Members.

In order to produce meaningful information, we have developed a dashboard which identifies activity and productivity over a specified period of time. This is still work in progress and more detailed information will be provided over the ensuing months on each area.

This information is used to report into the Performance Management Operational Group (PMOG), which is chaired by the Head of Service. Issues, risks and improvements required are agreed and monitored by this group on a monthly basis.

3. <u>Recommendations</u>

The members acknowledge

- Work and measures put in place to ensure high quality services are maintained and effectively managed.
- 4. <u>List of Background Papers</u> None
- 5. <u>Wards Affected</u> All
- 6. <u>Officer Contact</u> Steve Garland, Principal Officer for Managed Care, Safeguarding and Quality Email: <u>s.garland@npt.gov.uk</u> Tel: 01639 687447

7. <u>Appendices</u>

Appendix 1 – Managed Care, Safeguarding and Quality Balance Score Care Appendix 2 – KPI Rep Managed Care, Safeguarding and Quality

Managed Care, Safeguarding and Quality Care REPORT CARD – September 2015

Brief Description of the Service

The Council provides a wide range of support services to vulnerable people in the community. These include people with disabilities, people with mental ill health, substance misuse problems and older people.

This service area focuses on the needs of individuals who have complex needs, mental health difficulties, who are vulnerable and may be subject to abuse, who may be deprived of their liberty illegally and who live in a residential care home and require reviews of their packages.

The Disability Team is made up of a Team Manager, Deputy, Consultant, qualified Social Workers, Community Well Being Officer and Housing Options officer((who works across Adult Services).This team supports people with complex needs and aims to support the person to identify positive outcomes and provide options in the community to achieve these outcomes.

The Safeguarding and Quality Team is made up of a Team Manager, Deputy, qualified Social Workers, Quality and Review Officers, Best Interest Assessors, POVA Coordinator. This team ensures that Adult Protection processes are in place and vulnerable individuals are protected, that individuals who are highly supported environments are not deprived of their liberty illegally and that people living in care homes are receiving appropriate services and their quality of life is at the maximum.

Key Priorities for 2014/15

- To re-model and restructure services to deliver the priorities of the Transforming Adult Social Care Programme and the Corporate priority Improving Outcomes, Improving Lives
- To ensure that Adult Services are aligned to and compliant with the new Social Service and Well Being Act 2014
- To deliver £1.2 million savings while ensuring a quality service is maintained.
- To successfully implement and embed the management of change process required to deliver the new service model which will result in staff new job descriptions and staff suitably appointed to their new roles.
- To support the assessment process and transition of service users into the new service model.
- To embed a progression based model of social care so that outcomes of people are at the heart of our services.
- Ensure that families and carers are supported and have access to effective networks of support

Key Priorities for 2015/16

- To deliver on the £1.2 million FFP savings target
- To embed and implement the new Disability/Complex needs operational model and ensure that resources are appropriately aligned.
- Ensure that families and carers are supported and have access to effective networks of support
- To implement and embed a quality assurance process across

The two Community Mental Health Teams are integrated with ABMU Health Board and are made up of Team Manager, Deputy, Social workers ,Community Well Being Officer as well as Health staff such as Community Psychiatric Nurses, Occupational Therapists, Psychologist and Psychiatrists .They provide multi disciplinary support to people with enduring and complex mental health difficulties and are subject to the Mental Health Measure which is a specific piece of Welsh Government legislation. all teams to measure performance and support improved practice.

- To ensure that effective and stringent budget management processes are in place to prevent increased budget pressures.
- To ensure that the Pathways to Independence project is applied across all services areas so that packages are right sized and priced and outcomes are identified for people.
- To ensure that Safeguarding processes are implemented effectively so that vulnerable people are protected and free from harm.
- To ensure that Deprivation of Liberty legislation is implemented and people are not illegally deprived of their liberty
- To ensure that we implement an effective system of reviewing peoples' care plans in residential care and Shared Lives.
- Ensure that the Shared Lives Scheme is delivered effectively and is outcome based.
- Ensure that Direct Payments is priority option for all new and existing people supported by Adult Services.
- To ensure that people with Mental Health difficulties are supported effectively and their outcomes are met

 To ensure that there is an effective and seamless transition process in place for young people coming through into adult hood and who may require support from Adult Services.
 To ensure that we maximise every opportunity to identify people Health needs and that the Continuing Health care process is applied appropriately.
 Ensure that the programme of cultural change is implanted in co production with People Too.

How Are We Doing

Corporate Measures:

2014

- FFP savings in 2014/15 have been over delivered and approximately ££1.4m has achieved of the original £2.6m target.
- The services were successfully restructured and delivered on 245k savings. All staff started to be transferred to their new teams and operational policies started to be developed including a criteria for Complex Needs. Capacity has been a challenge but resources have been successfully aligned to meet the demand
- New teams, roles, responsibilities and re focusing of services were implemented .
- Effective budget Management measures were in place.
- Pathways to Independence continued to deliver significant improvements to peoples outcomes and FFP saving targets.
- Safeguarding processes were in place and continue to effectively protect vulnerable adults and keep them free from harm
- Integrated Community Mental Health Services continued to effectively deliver the outcomes required as identified under the Mental Health Measure
- Increased cares assessments and carers champions identified in each team to promote the needs of carers.

Outstanding Measure	To be completed
To ensure that Deprivation of Liberty legislation is implemented and people are not illegally deprived of their	April 2015
liberty	May 2015
• To ensure that we implement an effective system of reviewing peoples' care plans in residential care and Shared Lives.	May 2015
• Ensure that the Shared Lives Scheme is delivered effectively and is outcome based	
• Ensure that Direct Payments is priority option for all new and	April 2015-09-23

existing people supported by Adult Services	April 2015-09-23
• To ensure that there is an effective and seamless transition process in place for young people coming through into adult	
hood and who may require support from Adult Services.	October 2015
• To ensure that we maximise every opportunity to identify people Health needs and that the Continuing Health care process is applied appropriately.	

Progress 2015

- To ensure that the FFP target of £2.6 m continues to delivered. -This continues to be on track due to strict budget management measures and the Pathways to Independence project.
- To embed and implement the new Disability/Complex needs operational model and ensure that resources are appropriately aligned.-This continued to be embedded successfully all team and staff in place with some delay over transfer of cases across teams which has been resolved.
- To implement and embed a quality assurance process across all teams to measure performance and support improved practice. Following support from external consultancy, a new quality assurance framework was developed and developed. This has supported the implementation of a more effective system of measuring and managing performance and is now embedded into practice.
- To ensure that Deprivation of Liberty legislation is implemented and people are not illegally deprived of their liberty.-Following the Cheshire West judgement in March 2014, we have developed a robust response in terms of dedicated staff and resources supported by the Corporate centre.

- To ensure that we implement an effective system of reviewing peoples' care plans in residential care and Shared Lives.-This was developed as part of a wider integrated approach to supporting individuals in highly supported settings and has been implemented This is reported in more detail in a separate report.
- Ensure that the Shared Lives Scheme is delivered effectively and is outcome based.-A regional approach was developed with the City and County of Swansea and Bridgend County Borough Council and a plan to outsource the scheme has been implanted and is now in place
- Ensure that Direct Payments is priority option for all new and existing people supported by Adult Services-A robust and detailed plan of promoting and increasing the usage of DP was developed and is on track for full implementation.
- To ensure that there is an effective and seamless transition process in place for young people coming through into adult hood and who may require support from Adult Services.-This was developed and has been fully implemented.
- To ensure that we maximise every opportunity to identify people Health needs and that the Continuing Health care process is applied appropriately.-A specialist post has been identified and appointed to and the work plan is developing

Service Measures – How much did we do / How well we did do it (e.g. efficiency, service delivery, customer satisfaction etc.): April 2015

Service Delivery

PERFORMANCE DATA	FOR DISABILITY & SAFEGUARDING & QUALITY
TEAMS -	APRIL TO AUGUST 2015

Brand New Referrals Screened to Team (<i>Secondary Referrals</i>)	APR	MAY	JUN	JUL	AUG
Disability - Community Network	5 <i>(1)</i>	10 <i>(2)</i>	14 <i>(3)</i>	8 <i>(0</i>)	5 <i>(0)</i>
Safeguarding & Quality - Community					
Network	4 <i>(9)</i>	1 (0)	2 <i>(8)</i>	3 <i>(5)</i>	10 <i>(1)</i>

First Assessments Completed by Team	APR	MAY	JUN	JUL	AUG
Disability - Community Network	7	10	9	6	7
Safeguarding & Quality - Community					
Network	7	22	13	31	23

First Care Plans Completed by Team	APR	MAY	JUN	JUL	AUG
Disability - Community Network	1	2	3	3	2
Safeguarding & Quality - Community					
Network	5	9	8	23	11

Unallocated Cases by Team	APR	MAY	JUN	JUL	AUG
Disability - Community Network	33	21	21	55	26
Safeguarding & Quality - Community					
Network	58	44	14	76	71

Number of Cases Open by Team	APR	MAY	JUN	JUL	AUG
Disability - Community Network	577	601	597	604	551
Safeguarding & Quality - Community Network	325	255	275	624	616
Number of New Cases Allocated by Team	APR	MAY	JUN	JUL	AUG
Disability - Community Network	68	46	87	294	55
Safeguarding & Quality - Community Network	77	73	58	542	31
Number of Cases Closed by Team	APR	MAY	JUN	JUL	AUG
Disability - Community Network	38	39	82	38	28
Safeguarding & Quality - Community Network	65	93	117	60	38
Average Staff Caseloads by Team	Apr	May	Jun	Jul	Aug
Disability - Community Network	28.47	31.7	31.22	42.42	38.36
Safeguarding & Quality - Community Network	22.67	16.93	20.92	51.25	61.7
Direct Payments	Apr	May	Jun	Jul	Aug
Mental Health	6	6	6	6	6
LD	82	82	84	86	86
Vulnerable Adults	Apr	Мау	Jun	Jul	Aug
PoVA referrals received	28	23	23	12	9

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PoVA Alerts received	11	21	18	18	20				
PoVA referrals completed	0	4	1	12	1				
PoVA referrals received from Care Home	12	7	7	1	6				
DoLS	Apr	May	Jun	Jul	Aug				
Total Received and Input on database	42	55	99	79	67				
Location									
In Local Authority	37	45	95	74	64				
Other LA Wales	4	9	3	3	1				
Other LA England	0	1	1	1	0				
Type of Request									
Standard	32	28	45	47	29				
Standard Following Urgent	6	12	10	15	19				
SA5	3	15	44	16	17				
Standard Authorisation Issued									
In Progress	7	15	46	49	8				
Yes	23	26	43	23	50				
No	11	14	10	6	6				
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PERFORMANCE DATA FOR	CMHT -	APRIL	ro augi	JST 2015					
Brand New Referrals Screened to	APR	MAY	NUC	JUL	AUG				
Team (Secondary Referrals)	AFK		JUN	JUL	AUG				
CMHT - Forge	26 (22)	23 <i>(16)</i>	14 <i>(10)</i>	21 <i>(10)</i>	19 <i>(13)</i>				
CMHT - Gelligron	11 (5)	14 <i>(4)</i>	36 <i>(18)</i>	38 <i>(10)</i>	28 <i>(5)</i>				

Unallocated Cases by Team	APR	MAY	JUN	JUL	AUG
CMHT - Forge	0	3	0	3	3
CMHT - Gelligron	1	1	1	6	5
Number of Cases Open by Team	APR	MAY	JUN	JUL	AUG
CMHT The Forge	253	266	250	238	240
CMHT Gelligron	346	343	369	373	360
Number of New Cases Allocated by Team	APR	MAY	JUN	JUL	AUG
CMHT The Forge	33	34	21	31	16
CMHT Gelligron	29	28	43	50	36
Number of Cases Closed by Team	APR	MAY	JUN	JUL	AUG
CMHT The Forge	42	35	44	49	24
CMHT The Forge CMHT Gelligron	42 42	35 25	44 44	49 43	24 40
CMHT Gelligron	42	25	44	43	40
CMHT Gelligron Average Staff Caseloads by Team	42 Apr	25 May	44 Jun	43 Jul	40 Aug
CMHT Gelligron Average Staff Caseloads by Team CMHT The Forge	42 Apr 14.06	25 May 16.53	44 Jun 15.89	43 Jul 15.12	40 Aug 16.5
CMHT Gelligron Average Staff Caseloads by Team CMHT The Forge	42 Apr 14.06	25 May 16.53	44 Jun 15.89	43 Jul 15.12	40 Aug 16.5

Sickness Report

To reduce sick to 5% - This was 3.5% in July and this has reduced to 3.2% in August. The service is continuing to manage sick by a zero tolerance in applying the policy and trialling the new Long Term Absence Management Pilot to promote early intervention and get staff back to work sooner. There is a good example of a member of staff who was on sickness absence for six weeks but returned to work a s a result of early intervention and support by Wellbeing Services, support from GP and support from management . Having a dedicated HR Officer to support managers has had a significant impact in addressing some of the long-term sick cases. This will be continued to be closely scrutinised and the sick should continue to reduce towards the 5% target required.

Next Key Actions For 2015/16		
·	Who	By When
Alongside higher overarching Key Actions we as a Team propose to:		
• Ensure that Pathways to Independence continues to deliver the identified FFP savings and improve outcomes for people	SG	Reported on fortnightly basis
• Support and strengthen social work practice through the Culture Change Programme. This is critical to ensure practice is changed to respond to the new Social Services and Well Being Act.	SG/LB/AG	Programme of change is being developed by Peopletoo
Continue to strengthen the budget management and monitoring processes.	SG	In place
• Ensure Direct Payments is a priority for all social work staff and that it is promoted ands supported at all levels.	All	Monitored weekly
• Ensure carers are supported and services provided to prevent breakdown.	SG	In place and to be monitored
• Continue to develop accommodation options and work with high quality providers	SG	In place and monitored through Accommodation Group

•	Work closely with Childrens services and other young persons services to ensure Transition Protocol is delivered as early as possible	SG	In place and monitored through Tracking and Planning Group Monthly basis
•	Ensure that Continuing Health Care is considered where appropriate and that the dedicated worker supports this process	SG/LB	Post appointed to and monitor through CHC group and spreadsheet on monthly basis