NEATH PORT TALBOT COUNTY BOROUGH COUNCIL

Social Care, Health & Wellbeing Cabinet Board 5th July 2018

REPORT OF THE HEAD OF COMMISSIONING AND SUPPORT SERVICES – A. Thomas

Matter for Monitoring

Wards Affected: ALL

Report Title

Quarterly Performance Management Data 2017/18 - Quarter 4 Performance (1st April 2017 – 31st March 2018) – (Adults)

Purpose of the Report

To report performance management data for Quarter 4 (1st April 2017 to 31st March 2018) for Social Services, Health & Housing Directorate. This will enable the Social Care, Health and Wellbeing Cabinet Board and Scrutiny Members to discharge their functions in relation to performance management.

Background

Failure to produce a compliant report within the timescales can lead to noncompliance with our Constitution. Also failure to have robust performance monitoring arrangements could result in poor performance going undetected.

Financial Impact

No financial impact.

Equality Impact Assessment

This report is not subject to an Equality Impact Assessment.

Workforce Impacts

No workforce impact.

Legal Impacts

This Report is prepared under Section 15(3) of the Local Government (Wales) Measure 2009 and discharges the Council's duties under sections 2(1), 3(2), 8(7) and 13(1).

This progress report is prepared under:

The Local Government (Wales) Measure 2009 and discharges the Council's duties to "make arrangements to secure continuous improvement in the exercise of its functions".

The Neath Port Talbot County Borough Council Constitution requires each cabinet committee to monitor quarterly budgets and performance in securing continuous improvement of all the functions within its purview.

Risk Management

Failure to produce this report could result in undetected poor performance throughout Adult Social Care, Health and Housing.

Consultation

No requirement to consult.

Recommendations

Members monitor performance contained within this report.

Reasons for Proposed Decision

Matter for monitoring. No decision required.

Implementation of Decision

No decision required.

Appendices

Appendix 1 - Quarterly Performance Management Data 2017/18 Quarter 4 Performance (1st April 2017 – 31st March 2018).

Officer Contact

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Appendix 1



Quarterly Performance Management Data 2017/18 – Quarter 4 Performance (1st April 2017– 31st March 2018)

Report Contents:

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Section 5: Direct Payments End to End Times

Section 1: Key Points

Adults Services:

There has been an improvement in performance in relation to the number of assessment and care plans undertaken which have fallen, this can be attributed to an increase in the number of referrals that are diverted to third sector organisations. There has also been improvement in delayed transfers of care and we are currently putting action plans in place to deal with the volume of care plan reviews needed and expect this area of performance to improve over the next few months.

Homelessness:

The percentage of households for which homelessness was successfully relieved and the overall percentage of successful outcomes for assisted households have both seen a decrease in performance. This is attributed to RSL (Registered Social Landlords) accommodation becoming harder to access due to availability and criteria of the individual, and accessing the private rented sector is getting increasingly difficult due to landlords wanting working guarantors for anyone on benefits, particularly on universal credit. However, due to a budget underspend during Quarter 4 (2017/18), the volume of services users relieved or assisted is higher than that of the previous year.

There has been improvement in the percentage of households successfully prevented from becoming homeless and the percentage of households for which a final duty was successfully discharged.

Section 2: Quarterly Performance Management Data and Performance Key

<u>2017/18 – Adult Services & Complaints</u> <u>Quarter 4</u> <u>Performance (1st April 2017 – 31st March 2018)</u>

	Performance Key
	Maximum Performance
\uparrow	Performance has improved
\leftrightarrow	Performance has been maintained
V	Performance is within 5% of previous years performance
\downarrow	Performance has declined by 5% or more on previous year's performance - Where performance has declined by 5% or more for the period in comparison to the previous year, an explanation is provided directly below the relevant performance indicator
_	No comparable data (data not suitable for comparison / no data available for comparison)
	No All Wales data available for comparison

1.	Social C	are – Adult Services						
No	PI Reference	PI Description	NPT Actual 2015/16	NPT Actual 2016/17	All Wales 2016/17	NPT Quarter 4 2016/17	NPT Quarter 4 2017/18	Direction of Improvement
1	PAM/024	Percentage of adults satisfied with their care and support				N/a New		
This	measure will	be taken from the Adult and Carer's citizen survey for 2017-18 which w	vill not be pu	ublished by	/ Welsh Go	overnment un	til Autumn 20	18.
2	PAM/025	The rate of people kept in hospital while waiting for social care per 1,000 population aged 75+	4.36	3.88	2.80	3.88 (49 of 12,639)	3.08 (39 of 12,665)	1
3	PAM/026	Percentage of carers that feel supported	N/a New					
This	measure will	be taken from the Adult and Carer's citizen survey for 2017-18 which w	vill not be pu	ublished by	/ Welsh Go	overnment un	til Autumn 20	18.
4	PI/1	No. of adults who received advice or assistance from the information, advice and assistance service during the year	N/a New	2,342		2,342	2,593	1
5	PI/2	No. of assessments of need for care and support undertaken during the year;	N/a New	1,548		1,548	868	1
6	PI/2(i)	Of which, the number of assessments that led to a care and support plan	N/a New	1,206		1,206	729	1
7	PI/3	No. of assessments of need for support for carers undertaken during the year;	N/a New	355		355	282	↓

8	PI/3(i)	Of which; the number of assess	ments that led to a support plan	N/a New	16		16	10	\downarrow		
9	PI/4	No. of carer assessments that wyear	vere refused by carers during the	N/a New	73		73	131	\downarrow		
to w	PI/3, 3(i), PI/4; It is difficult to gauge performance on carer's assessments; each carer identified is offered an assessment however it is the individuals choice as o whether they accept the offer. In all cases carer's are provided with information on the various avenues of support available to therm. The focus of the Carers Service is to provide information, advice and assistance therefore not many carers assessments lead to a service.										
10	PI/5	No, of assessments of need for undertaken during the year while		N/a New	0		0	0	_		
11	PI/5(i)	Of which; the number of assess plan	ments that led to a care and support	N/a New	0		0	0	_		
12	PI/6	No. of requests for re- assessment of need for care and support and need for support made by and adult during the year	a) In the secure estate	N/a New	0		0	0	\leftrightarrow		
12	FI/O		b) All other adults and carers		0		0	0	\leftrightarrow		
13	PI/6(i)	Of which, the number of re-	a) In the secure estate	- N/a New -	0		0	0	\leftrightarrow		
13	F1/0(1)	assessment undertaken on;	b) All other adults and carers		0		0	0	\leftrightarrow		
14	PI/6(ii)	Of which; the number of re- assessments that led to a care and support plan or a support plan on;	a) In the secure estate	N/a New	0		0	0	\leftrightarrow		
			b) All other adults and carers		0		0	0	\leftrightarrow		
15	PI/7	No. of care and support plans a	nd support plans that were reviewed	N/a New	2,004		2,004	1,356	\downarrow		

		during the year.										
16	PI/7(i)	Of which; the number of plans that were reviewed within timescale	N/a New	1,050		1,050	788	Ļ				
	Action plans are being put in place to increase review performance during the year and targets are in the process of being set within teams which will be monitored closely.											
16	PI/8	No. of requests for review of care and support plans and support plans for carers before agreed timescales made by an adult during the year	N/a New	9		9	0	Ť				
17	PI/8 (i)	Of which, the number of reviews undertaken	N/a New	9		9	0	1				
18	PI/9	No. of adults who received a service provided through a social enterprise, co-operative user led or third sector organisation during the year	N/a New	0		0	0	_				
19	PI/10	No. of adults who received care and support who were in employment during the year	N/a New	16		16	5					
20	PI/11	No. of adults with a care and support plan who received adult social care during the year e.g. Homecare, Day Care, Respite, Reablement, Adaptations, Direct Payments, Adult Care Homes, Telecare etc.	N/a New	2,567		2,567	2,529	Ţ				
21	PI/12	No. of adults who paid the maximum weekly charge towards the cost of care and support or support for carers during the year	N/a New	46		46	40					
22	PI/13	No. of adults who paid a flat rate charge for care and support or support for carers during the year	N/a New	2,033		2,033	2,215	1				

23	PI/14	No. of adults who were charged for care and support or support for carers during the year	N/a New	2,262		2,262	2,279	ſ
24	Measure 18	The percentage of adult protection enquiries completed within 7 days	N/a New	N/a		Systems were being developed to capture this data	86.3%	—
25	Measure 19	The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over	4.36	3.88	2.80	3.88 (49 of 12,639)	3.08 (39 of 12,665)	Ť
26	Measure 20a	The percentage of adults who completed a period of Reablement and have a reduced package of care and support 6 months later	N/a New		28%	Systems were being developed to capture this data	14.6%	
27	Measure 20b	The percentage of adults who completed a period of Reablement and have no package of support 6 months later	N/a New	N/a	72.3%	Systems were being developed to capture this data	24.4%	_
28	Measure 21	The average length of time in calendar days, adults (aged 65 or over) are supported in residential care homes	N/a New	819	800.8	819 (477 of 390,757)	766 (494 of 378,247)	Ť
29	Measure 22	Average age of adults entering residential care home	N/a New	83	82.8	83 (184 of 15,290)	83 (211 of 17,432)	\leftrightarrow

30	Measure 23	The percentage of adults who have received advice and assistance from the information, advice and assistance service and have not contacted the service for 6 months	N/a New	Systems being developed to capture this data	67.7%	Systems being developed to capture this data	
	• ·	ment of the IAA service to be able to report this measure. (Alternative is character and the capacity to undertake).	s a manual e	exercise wh	ich would	involve counting 1,000's c	of records

No	PI Reference	PI Description	NPT Actual 2015/16	NPT Actual 2016/17	All Wales 2016/17	NPT Quarter 4 2016/17	NPT Quarter 4 2017/18	Direction of Improvemen
	PAM/012 (PAM)	Percentage of households successfully prevented from becoming homeless	52.2%	61.8% (55 of 89)		61.8%	74.7% (59 of 79)	1
	HOS/003 (Local)	The percentage of households for which homelessness was successfully relieved	45.7%	56.3% (40 of 71)	41%	56.3%	45.8% (93 of 203)	\downarrow
	HOS/004 (Local)	The percentage of those households for which a final duty was successfully discharged	54.5%	69.2% (54 of 78)	81%	69.2%	100% (19 of 19)	1
	HOS/005 (Local)	The overall percentage of successful outcomes for assisted households	45.8%	62.6% (149 of 238)	54%	62.6%	56.8% (171 of 301)	\downarrow

Section 3: Quarterly Compliments/Complaints Data and Performance Key

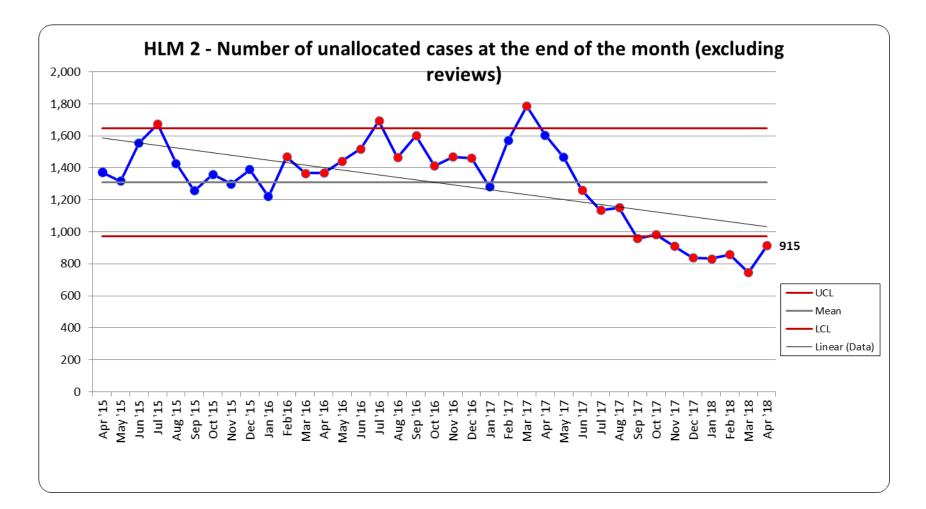
ADULT & BUSINESS SUPPORT SERVICES ONLY 2017/2018 – Quarter 4 (1st April 2017 – 31st March 2018) – Cumulative data

	Performance Key
↑	Improvement : Reduction in Complaints / Increase in Compliments
\leftrightarrow	No change in the number of Complaints / Compliments
v	Increase in Complaints but within 5% / Reduction in Compliments but within 5% of previous year
\downarrow	Increase in Complaints by 5% or more / Reduction in Compliments by 5% or more of previous year

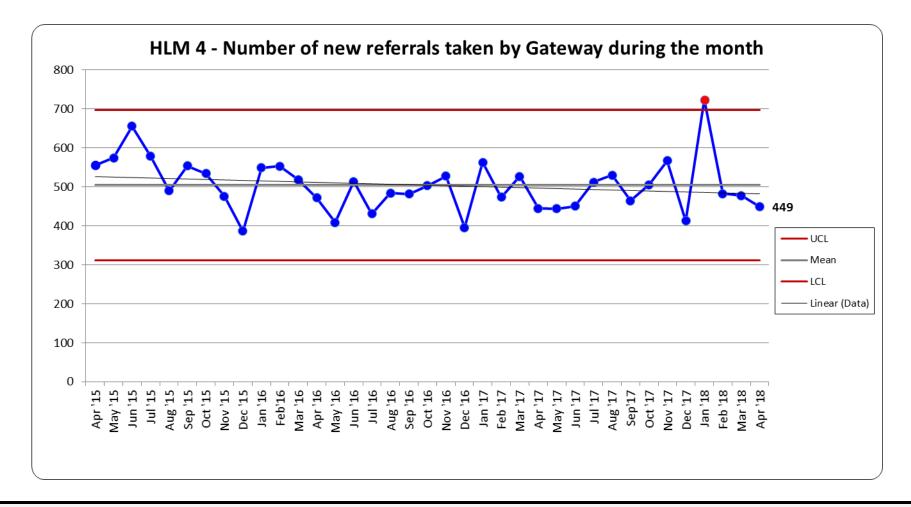
No	PI Description	Full Year 2016/17	Quarter 4 2016/17	Quarter 4 2017/18	Direction of Improvement
	<u>Total Complaints - Stage 1</u>	37	37	16	1
	a - Complaints - Stage 1 upheld	14	14	5	
1	b - Complaints - Stage 1 not upheld	10	10	4	
	c - Complaints - Stage 1 partially upheld	2	2	2	
	d - Complaints - Stage 1 other (incl. neither upheld/not upheld; withdrawn; passed to other agency; on-going)	11	11	5	

No	PI Description	Full Year 2016/17	Quarter 4 2016/17	Quarter 4 2017/18	Direction of Improvement
	Total Complaints - Stage 2	2	2	2*	\leftrightarrow
2	a - Complaints - Stage 2 upheld	1	1	0	
	b - Complaints - Stage 2 not upheld	0	0	0	
	c- Complaints - Stage 2 partially upheld	1	1	1	
	Total - Ombudsman investigations	0	0	0	\leftrightarrow
3	a - Complaints - Ombudsman investigations upheld	-	-	-	
	b - Complaints - Ombudsman investigations not upheld	-	-	-	
4	Number of Compliments	25	9	60	↑
Narrative	 Stage 1 – There has been a significant decrease in the number of complaints received during the service continues to strive to resolve complaints on an informal basis, which may account will continue to monitor future quarters to ascertain any trends. Stage 2 – Activity remains consistent with the previous year; these are extremely low levels of a speedier resolution at 'informal' and 'stage 1' levels. *one stage 2 investigation current Compliments – The number of compliments has significantly increased; this can be attributed praise and thanks. The Complaints Team will continue to raise the profile for the need to report 	int for the dec activity and ai to an improve	rease in the r e in keeping ment in repo	with the stror	e complaints team

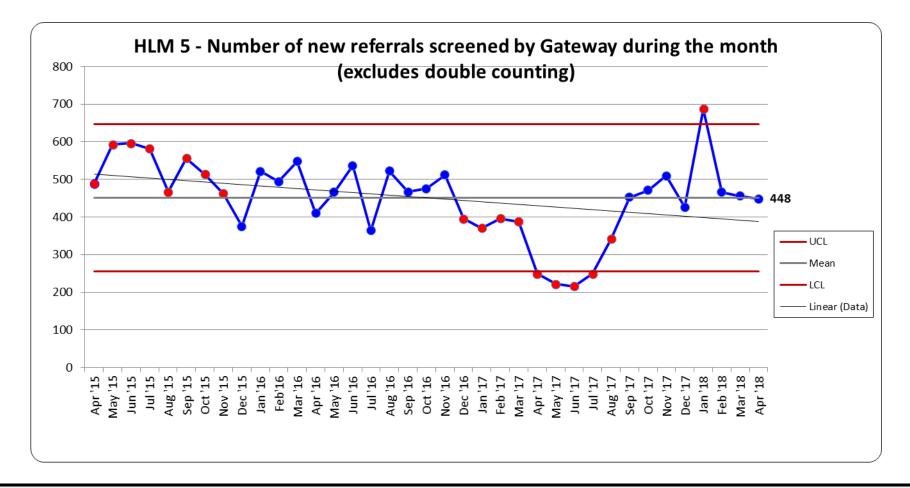




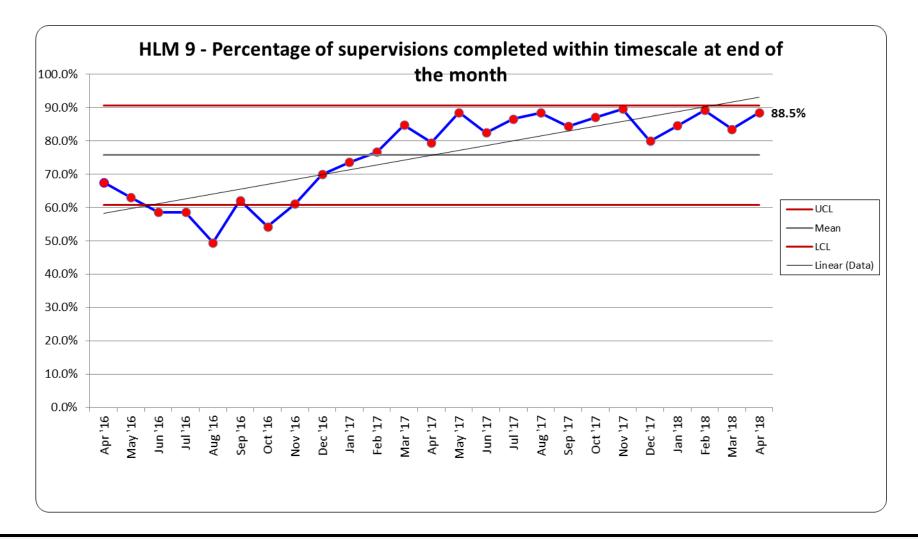
HLM 2 – Numbers on waiting lists/unallocated for all teams at the end of each month excluding reviews. Please note that clients can be showing as unallocated for more than one team. Of the 915 unallocated cases for April 2018, 297 of these are currently receiving social work support/open to a team.



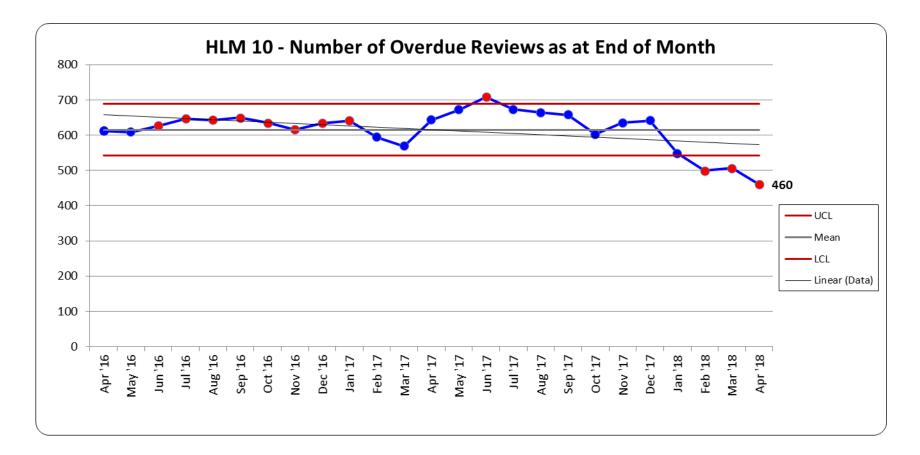
HLM 4 – New referrals taken by Gateway during the month. These are clients which are not open to us at the time of referral.



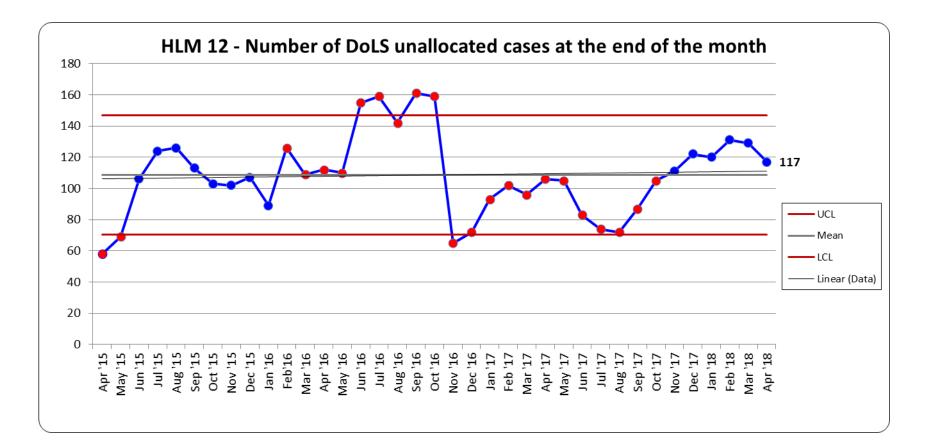
HLM 5 – New referrals screened to Adult Services teams (excluding double counting) by Gateway during the month. These are clients which are not open to us at the time of referral/screening. NB* the decrease between April 2017 and July 2017 can be attributed to an IT fault which cannot be rectified by running retrospective reports.



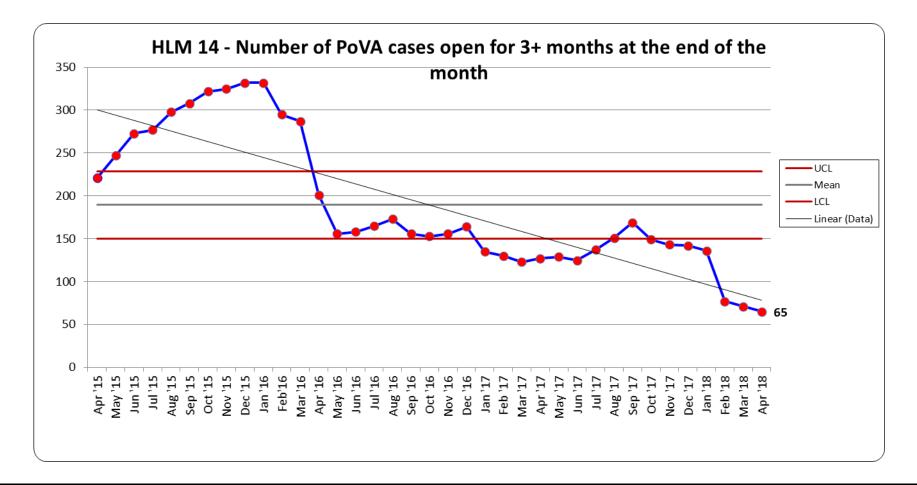
HLM 9 – Percentage of completed supervisions of caseload holding staff within 28 working days at the end of each month.



HLM 10 – All reviews which are overdue / in the red at the end of each month. The data shows all reviews that are overdue as at a date and not just overdue for that particular month. There is a statutory requirement to review service users care plans within a 12 month period.

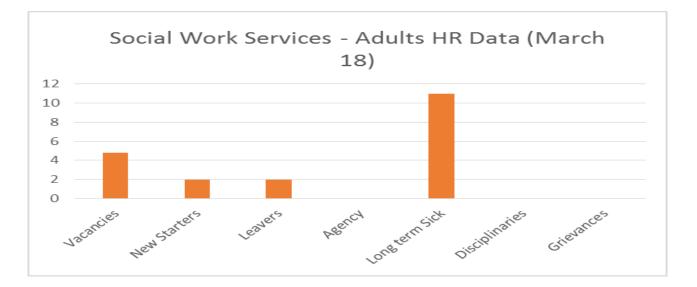


HLM 12 – Deprivation of Liberty Safeguards (DoLS) cases which are showing as unallocated at the end of each month. Even though there is a backlog it is worth noting that cases do not technically breach unless they are not assessed within timescale following allocation according to Welsh Government regulations. All referrals are risk assessed and urgent cases are dealt with as a priority. We are not in a unique position and are managing the unprecedented demand created by the Cheshire West judgement in 2014 as best as we can and are arguably in a better position than most other authorities.



HLM 14 – Number of Protection of Vulnerable Adults (PoVA) cases open for 3+ months at the end of each month. This figure will decrease to zero and cease to be a High Level Measure as a new Adults at Risk process has been in place from 1st September 2017 which replaces and is different to the 'old' PoVA process.

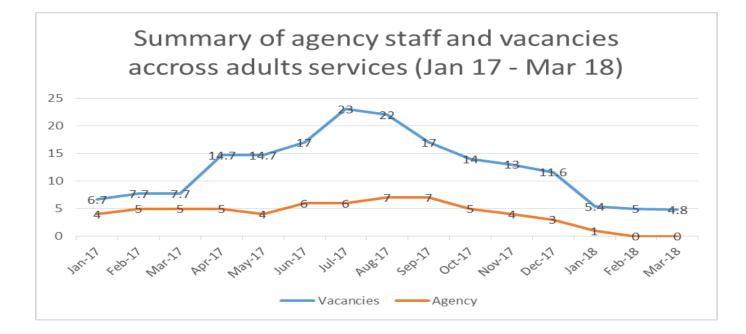
HR1 - Priority Indicator – The Number of Vacancies (including number of starters/leavers/agency staff/long-term sickness), Disciplinaries and Grievances across the Service



	Team Manager	Deputy Team Manager	Consultant Social Worker	Community Social Worker	Community Wellbeing Officer	Safeguarding Coordinator/Best Interest Assessor	Occupational Therapists/OT Assistant	Community Reablement Support Worker	Reablement Coordinators	Local Area Coordinators	Total
Vacancies	0	0	0	2	0	0.8	0	2	0	0	4.8
New Starters	0	0	0	2	0	0	0	0	0	0	2
Leavers	0	0	0	1	0	0	0	1	0	0	2
Agency	0	0	0	0	0	0	0	0	0	0	0
Long term											
Sick	0	0	0	1	2	0	0	8	0	0	11
Disciplinaries	0	0	0	0	0	0	0	0	0	0	0
Grievances	0	0	0	0	0	0	0	0	0	0	0

Sickness levels were high within Reablement service at this time. It is important to mention that there were 3 cancer cases, 1 long term hospitalisation with a serious back injury and 1 serious mental health illness at this time within the service. Levels have since reduced to 3 long term cases.

HR2 - Priority Indicator – Summary of Agency Staff and Vacancies across the service from January 2017 – March 2018



NB. A significant increase in vacancies in 2017 was linked to additional 6x peripatetic Social Workers being created and additional posts following the re-structure of the Safeguarding Team.

The vacancies also include the Reablement Service from Apr 17 onwards and they weren't included in the initial measures.

Section 5: Direct Payments End to End Times

Number of new starters	Timescales (Working days)	SW assessment to DP request	DP request to receipt of DP (DP start date)		
	Shortest	4 days	4 days		
25 (20 Adults/5 Children)	Longest	436 days	231 days		
	Average	87.3 days	54.4 days		

NB* The end to end times for SW Assessment is based on adults figures whereas DP request to DP receipt is for both Adults and Children.

Key:

SW = Social Work DP = Direct Payment