ADULT SERVICES SUMMARY MANAGEMENT INFORMATION REPORT DATA FOR JULY / AUGUST 2017

HEADLINE REPORT



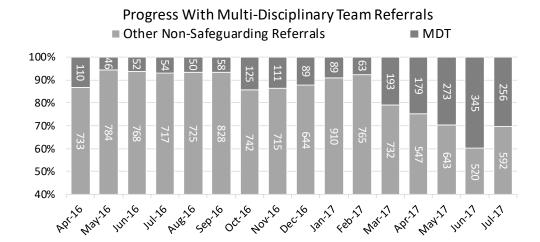
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Common Access Point

The service has been piloting various ways of delivering an effective Multi-Disciplinary Team (MDT) approach, in line with the Western Bay 'optimal model'. In April 2016, 13% of enquiries came in via the Common Access Point. By June 2017, this proportion had increased to 40%.



Carers Identified and Whether Wanted Carer Assessment

Month	May-17	Jun-17	Jul-17	Month Trend	Direction of Travel
Identified Carers	50	37	47	Ŷ	High
Offered Assessment	43	34	40	Ŷ	High
% offered assessment	86.0%	91.9%	85.1%	•	High
Declined Assessment	23	20	24	•	Low
% declined assessment	53.5%	58.8%	60.0%	•	Low
Wanted Assessment	18	10	14	1	High
% wanted assessment	41.9%	29.4%	35.0%	1	High
Received Carers Assessment / Review	60	55	47	•	High

The number of carers identified has been broadly lower since April 2016. Nonetheless, the proportion who do not wish to receive a separate carer assessment has remained steady and represents a small majority of carers.

Whether Carer Wanted Assessment



Long-Term Domiciliary Care

The most significant area of concern is that we appear to have be rapidly-nearing an operational ceiling in terms of the availability of care hours across the whole industry.

Month	May-17	Jun-17	Jul-17	Month	Direction
New starters	71	55	59	Trend	of Travel Low
Of which				•	
In-house	18	29	21	介	Low
External	53	26	38	4	Low
% internal	25.4%	52.7%	35.6%	Ŷ	Low
Receiving Care at Month End	1,295	1,319	1,325	•	Low
Of which:					
In-house	160	173	170	1	Low
External	1,135	1,146	1,155	•	Low
% internal	12.4%	13.1%	12.8%	1	Low
Hours Delivered in Month	67,502	69,507	68,556	^	Low
Of which:				_	
In-house	7,810	7,697	7,923	•	Low
External	59,692	61,810	60,633	Ŷ	Low
% internal	11.6%	11.1%	11.6%	•	Low
Average Weekly Hours	12.9	10.9	12.4	•	Low
Of which:				-	
In-house	9.8	10.8	10.5	Ŷ	Low
External	13.4	10.9	12.7	4	Low
% internal	75.9%	98.7%	84.7%	1	Low

The average number of hours provided by the independent sector each month during 2014/15 was 58,000. We now see 64-68,000 as the norm. In the same year, in-house home care averaged 5,400 hrs/month. Since April 2016, this now averages 8,000 hrs/month.

Residential Care for Older People

The numbers being admitted to residential care are relatively higher than was anticipated by the Western Bay intermediate care modelling work. For sustainable operation, admissions need to be under [30] each month.

Permanent Residential Care for People Aged 65+	May-17	Jun-17	Jul-17	Month Trend	Direction of Travel
Admissions	48	25	28	•	Low
Discharges	40	36	28		High
In a care home at					
month end	912	903	907	•	Low
Of which:					
LA Residential	132	132	128	4	Low
Private Residential	492	484	491	•	Low
Nursing	286	285	286	•	Low

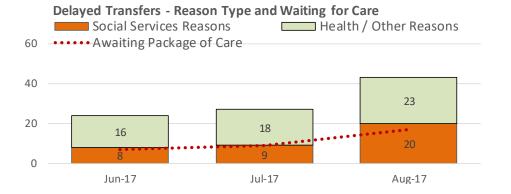
People in Place in Residential / Nursing Care



Delayed Transfers of Care (DToCs)

The impact of the domiciliary care service ceiling being approached is that it is harder to set care up for people. This has an impact on people waiting in hospital and is evidenced by recent DToCs data.

Delayed Transfers	Jun-17	Jul-17	Aug-17	Month Trend	Direction of Travel
Total Delays	24	27	43	•	Low
Of which					
Health / Other Reasons	16	18	23	•	Low
Social Services Reasons	8	9	20	•	Low
% social services	33.3%	33.3%	46.5%	-	Low
Awaiting Package of Care	7	9	17	-	Low
% of Social Services	97.5%	100.0%	85.0%		Low
Reasons	07.5%	100.0%	00.0%	Ţ	LOW



Reviews of Allocated Clients

Routine reviewing and re-assessing of clients receiving a package of care is a significant requirement placed on social services department. We have identified that the Learning Disability service needs to make rapid progress in reviewing its clients, and we will be setting targets for improvement. We will also consider how to improve performance within CHQT particularly.

Number of Allocated Social Work / Review Cases & Time Since Latest Assessment of Need	Last Assessm Ye	nent Within a ar	Last Assessment Over a Year		
Team	Number of Clients	% of Clients	Number of Clients	% of Clients	
Central Hub	553	68.5%	254	31.5%	
North Hub	899	75.1%	298	24.9%	
West Hub	616 78.6%		168	21.4%	
Older People's MH Team	106	106 81.5%		18.5%	
Care Homes Quality Team	321	321 57.5%		42.5%	
Hospital Social Work	118	89.4%	14	10.6%	
Learning Disability	276	40.4%	408	59.6%	
Mental Health	563	88.1%	76	11.9%	
All Teams	3,316	69.2%	1,475	30.8%	

Allocated Clients Latest Assessment



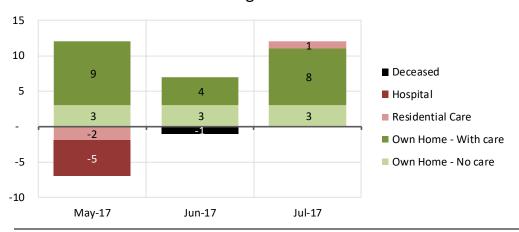
Effectiveness of Reablement

Residential Reablement

The residential reablement service continues to provide effective reablement and the majority of people go home rather than into institutional care. The increase in the length of stay should be noted as it may also reflect issues within the domiciliary care market, which a good proportion of clients require to move on.

Leaving Residential Reablement	May-17	Jun-17	Jul-17	Month Trend	Direction of Travel
Left Residential Reablement	19	8	12	1	High
Of which					
Own Home - No care	3	3	3		High
Own Home - With care	9	4	8	1	High
Residential Care	- 2		1	-	Low
Hospital	- 5				Low
Deceased		- 1		•	Low
% went home	63.2%	87.5%	91.7%	1	High
Average Length of Stay (Days)	35.3	40.6	32.2	^	Low

Destination On Leaving Residential Reablement

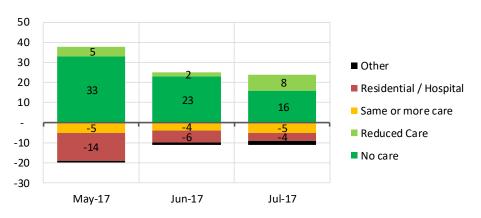


Community Reablement

The data on community reablement is unfortunately not as robust as data relating to residential reablement and we will be taking action to improve the data quality, coverage and completeness.

As with residential reablement, the increase in average length of service is also likely to be indicative of issues within the wider domiciliary care market.

Leaving Community Reablement	May-17	Jun-17	Jul-17	Month Trend	Direction of Travel
Left Community Reablement	58	36	35	•	High
Of which					
No care	33	23	16	•	High
Reduced Care	5	2	8	1	High
Same or more care	- 5	- 4	- 5	1	Low
Residential / Hospital	- 14	- 6	- 4	•	Low
Other	- 1	- 1	- 2	•	Low
% reduced / no care	65.5%	69.4%	68.6%	•	High
Average Days in Service	76.0	93.0	86.0	•	Low

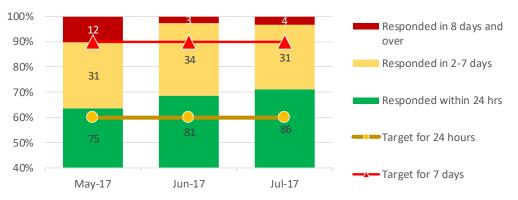


Timeliness of Response to Safeguarding Issues

Improving performance in timely response to safeguarding enquiries is welcome. We continue to seek ways to improve the quality of enquiries so that a larger proportion are thresholded.

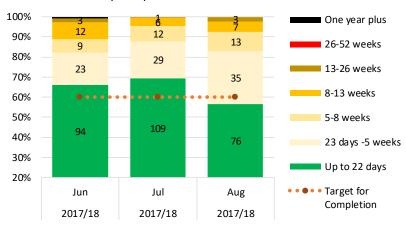
Month	May-17	Jun-17	Jul-17	Month Trend	Direction of Travel
Enquiries Received	122	122	126	•	High
Timeliness of Response					
Responded within 24 hrs	75	81	86	1	High
% responded within 24 hrs	61.5%	66.4%	68.3%	•	High
Responded within 7 days	106	115	117	•	High
% responded within 7 days	86.9%	94.3%	92.9%	-	High
Awaiting response	4	4	5	-	Low
% awaiting response	3.3%	3.3%	4.0%	•	Low
Outcome					
Threshold Met	51	40	52	•	High
% Threshold met	41.8%	32.8%	41.3%	•	High
Threshold Not Met	63	72	63	•	Low
% Threshold met	51.6%	59.0%	50.0%	1	Low

Timeliness of response to Safeguarding Enquiry



Timeliness of Deprivation of Liberty Assessments

Timely Completion of BIA & Doctor Assessments



While the overall completion rate for DoLS assessments has mostly met the target, this masks that there is an issue with timeliness for the majority of BIA assessments.

Timely Completion of BIA Assessments

