

# ADULT SERVICES

## PERFORMANCE REPORT

Quarter 3 2018-19



## Executive Summary

### What is working well?

- New model of Day Opportunities including the opening of Grand Avenue. Positive reports from Community Health Council received.
- Dementia friendly Cardiff relaunch.
- Adult Services reported a budget underspend of £976k at 31<sup>st</sup> December 2018, through the impact of prevention.
- Good examples of people's involvement in the commissioning process to drive up quality in provision, e.g. supported living tender.
- Increased the number of adults and children in need of care and support using Direct Payments during the year, 898 compared to 869 in 2017-18.
- Continued to increase in the number of carers assessments completed (220 in Quarter 3 compared to 187 in 2017-18).
- Improved result for the percentage of carers (of adults) aged 18 or over known to social services who were offered an assessment or review of their needs in their own rights during the year (73.4% in Quarter 3 compared to 66.3% last year).
- Expansion of Ty Canna due to pressure bid - 4 x new workers to undertake transition work with younger people. Recovery star / outcome focused work and the success of volunteering at Ty Canna is working very well.
- Weekly leadership group driving new ways of working through the Community Resource Team (CRT).
- Acknowledgement from Health Inspectorate Wales / Care Inspectorate Wales inspections that we have dedicated / committed staff who feel supported by their managers (Links Community Mental Health Team (CMHT) inspection).

### What are we worried about?

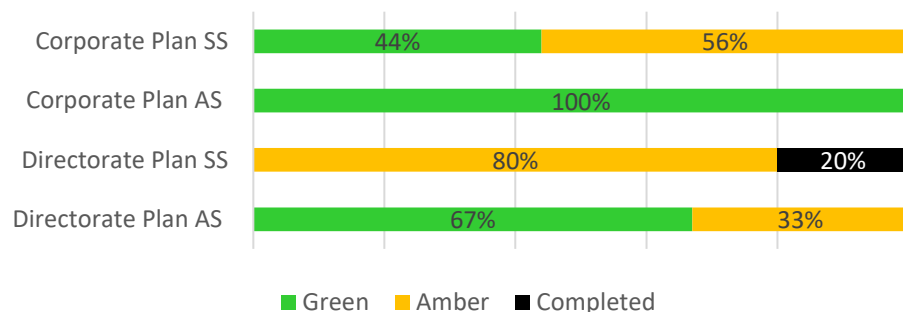
- Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA) which requires all domiciliary care workers to be registered by 2020.
- Adult Safeguarding – timeliness of response to 7 day enquiries.
- Recruitment and retention of Approved Mental Health Practitioners (AMHPs).
- Poor condition of University Health Board (UHB) buildings where staff are based.
- Timeliness of Deprivation of Liberty Safeguards (DoLS) assessments.
- Delay in fee setting for domiciliary care and care home provision and risk of legal challenge.

## What do we need to do?

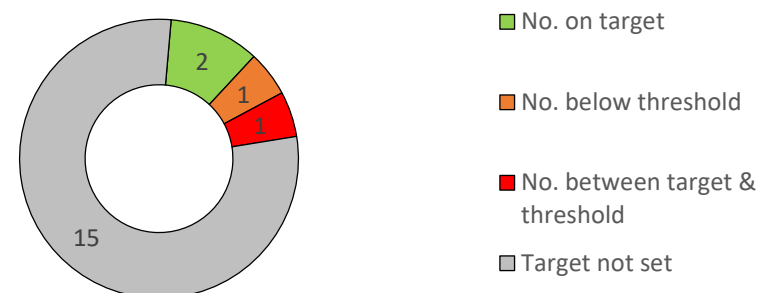
- Implement the requirements of the Regulation and Inspection of Social Care (Wales) Act (RISCA) 2016 and ensure that all relevant professionals are appropriately qualified and registered by 2020.
- Continue to closely monitor timeliness of Adult Safeguarding enquiries and implement a new operating model for adult safeguarding.
- Implement Association of Directors of Adult Social Services (ADASS) recommendations relating to the recruitment and retention of AMHPs.
- Work closely with Health & Safety staff and University Health Board estates to identify alternative accommodation for the CRT and CMHT's.
- Action plan to improve timeliness of DoLS Assessments.
- Explore a new way of delivering domiciliary care in the longer term that takes into account the full spectrum of local and community provision and the implementation of the Older Persons Accommodation Strategy.
- Cost of care exercise for care homes to understand the true cost of service provision and inform future fee setting exercises.
- Implement new finance system.
- Work with Health colleagues to put a Strategy and / or Action Plan in place to progress the Community Services Review of adult mental health services.

## Quarterly Performance – Q3 2018-19

### Progress against Corporate Plan & Directorate Delivery Plan Actions



### Performance Indicator Overview



### What is working well?

**Improve engagement with communities re: safeguarding** - the Safeguarding team have been working in partnership with local churches, mosques, partners across the council and the Vale of Glamorgan Council to advise on safeguarding policies with regard to Community Sponsorship schemes for refugees. The re-settlement programmes for Syrian refugees and their families in Cardiff and the Vale of Glamorgan provides an opportunity for Community sponsors including local charities, community businesses and faith groups to help build a home and stable life in the UK.

**New model of Day Opportunities** - Grand Avenue Day Service has opened and has had a positive impact on people and carers. An award was received for the design of the service and initial inspection of the Community Health Council has been very positive.

The Directorate has been working closely with Health partners to develop a new way of working to facilitate safe and timely hospital discharge, returning individuals to their homes where possible. As a result the **First Point of Contact (FPoC) Hospitals 'Get Me Home' scheme** piloted from 26<sup>th</sup> November on two wards for Older People at the University Hospital Wales (UHW). 'Get Me Home' Contact Officers are now attending daily board rounds to help facilitate a more timely discharge back into the community for people who do not need social care support. The pilot is due to run until the end of March 2019 where the learning will be aligned with further learning from the Community Resource Team review and will support the development of new pathways.

Welsh Government (WG) approved the Cardiff and Vale Regional Partnership Board transformation proposals **'Me My Home, My Community'**, securing a £6 million investment into well-being, social care and health services in one region to deliver seamless services in line with 'Healthier Wales' (WG's health and social care plan). A second transformational proposal has been developed which includes additional proposals around children, young people and workforce. The regional partnership is on track to deliver the transformational change.

## What are we worried about?

**Adult Safeguarding - timeliness of 7 day enquiries:** A review of adult safeguarding has taken place following concerns regarding timeliness of decision making and has resulted in strengthened management. Performance is currently being closely monitored by the Operational Manager via weekly reports, performance has improved in Quarter 3.

**Community Services Review:** The success of the Community Mental Health Services locality model pilot in the Vale of Glamorgan was reviewed by the Community & Adult Services Scrutiny Committee (CASSC) on 7<sup>th</sup> November 2018. Whilst Members commend the work done to date, the lack of a strategic, planned approach to rolling out the programme in Cardiff and making vital links to communities and other agencies was noted as a concern. In light of this, Members wrote to the Director of Operations for the Mental Health Clinical Board Cardiff & Vale University Health Board. The Committee recommended that a strategy and/or action be developed and implemented to give focus to the programme and widen critical links that need to be made to ensure the long-term sustainable success of the programme.

**Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA).** There are risks associated with the requirements placed on the social care providers and workforce in relation to the implementation of the new RISCA requirements requiring qualifications and registration by 2020. This is compounded by the potential restrictions on the free movement of labour arising from the UK leaving the European Union. The risk is a decrease in the social care workforce, despite best efforts to promote social care as a positive career choice.

**Fee setting process:** Needs to be based on a clear understanding of the cost of care and until this happens the Council is vulnerable to legal challenge.

## What do we need to do?

**Adult Safeguarding - timeliness of 7 day enquiries:** Continue to closely monitor timeliness of Adult Safeguarding enquiries and implement a new operating model.

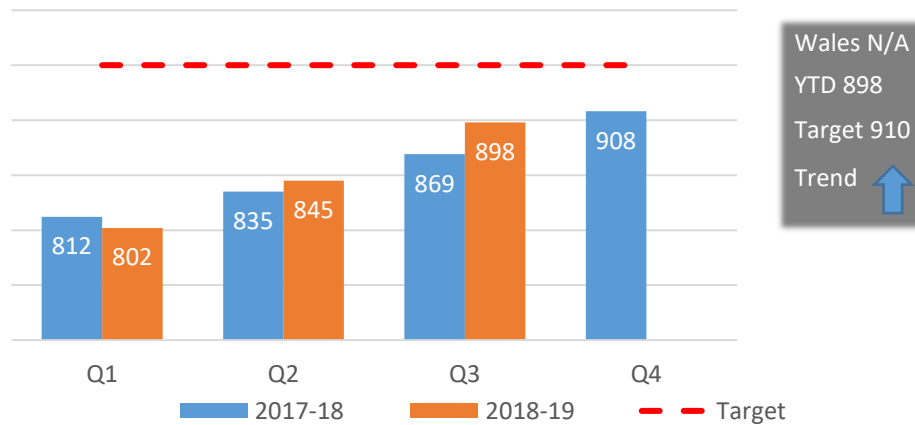
**Community Services Review:** Work with Health colleagues to develop a Strategy for adult mental health services.

**RISCA:** Implement the requirements of the RISCA and ensure that all relevant professionals are appropriately qualified and registered by 2020. A detailed programme of work supported by the Cardiff and Vale Workforce Development Partnership is underway.

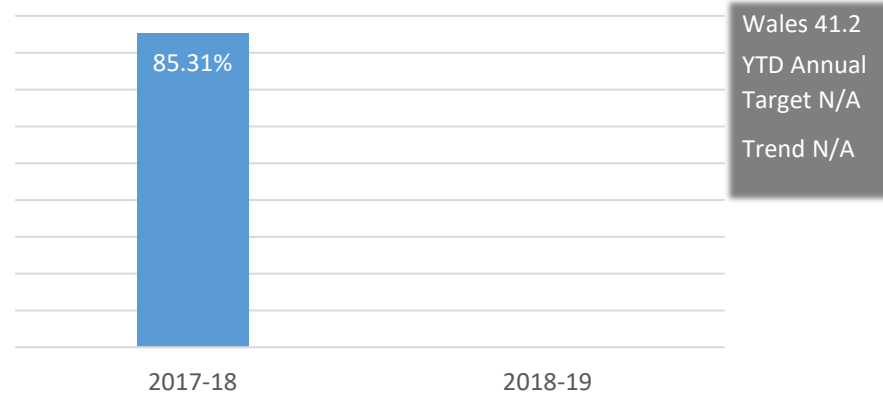
Explore a new way of delivering domiciliary care in the longer term that takes into account the full spectrum of local and community provision and the implementation of the Older Persons Accommodation Strategy (due for consideration by Cabinet in March 2019). Cabinet approval to develop a new model of domiciliary care was provided in September 2018 – scoping and planning for the new model has begun. Detailed work will need to be undertaken with people with care and support needs, their carers, and the domiciliary care sector in general, to ensure future commissioning arrangements reflect what matters to them. The new model will be implemented in November 2020.

## Key Performance Indicators – Corporate Plan

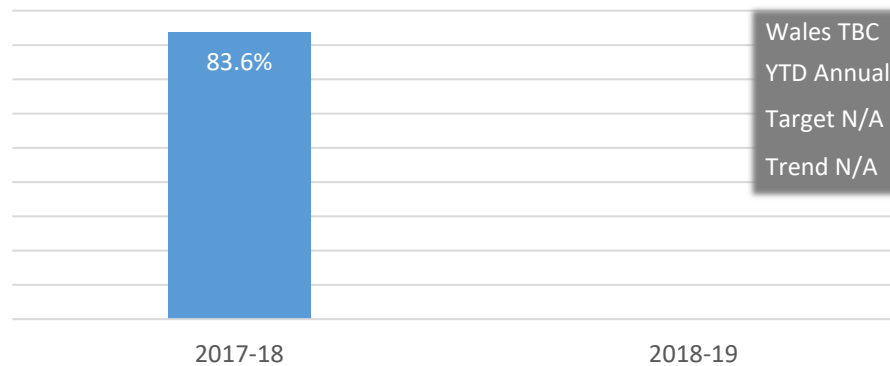
SCAL25a Total number of children and adults in need of care and support using the Direct Payments Scheme



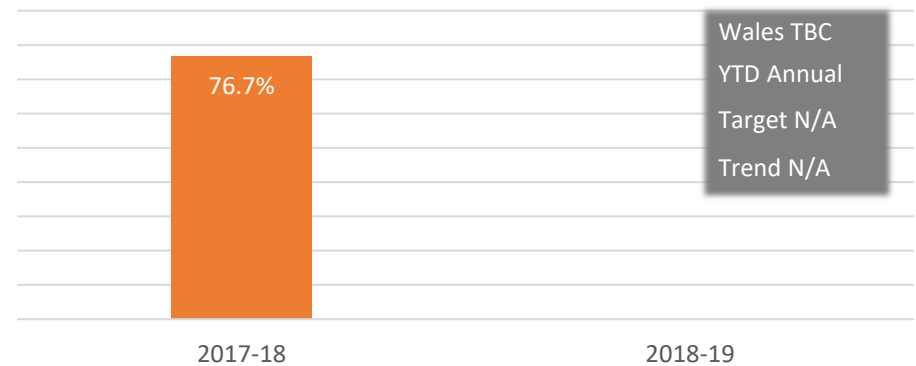
SSWB20a Percentage of adults who completed a period of reablement (a) and have a reduced package of care and support 6 months later



PAM024 Adult who are satisfied with the care and support they receive



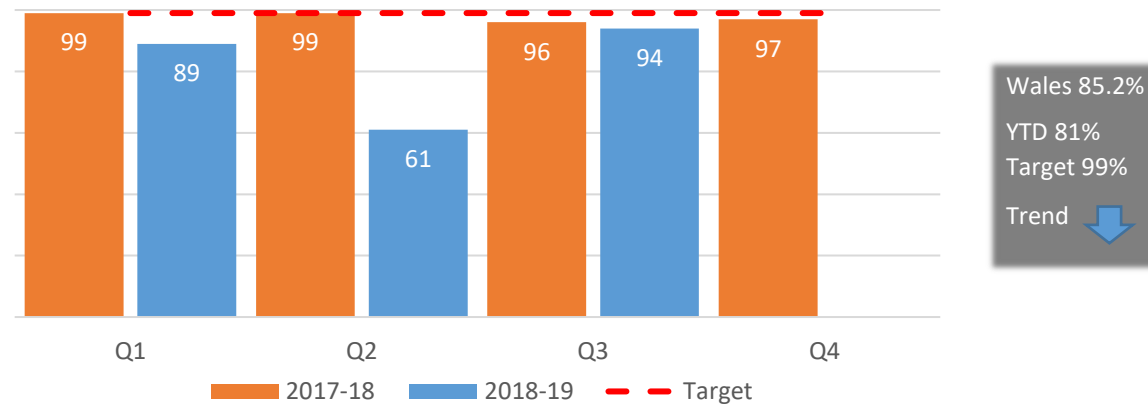
TBC Adults reporting that they felt involved in any decisions made about their care and support



## Key Performance Indicators - Directorate Delivery Plan

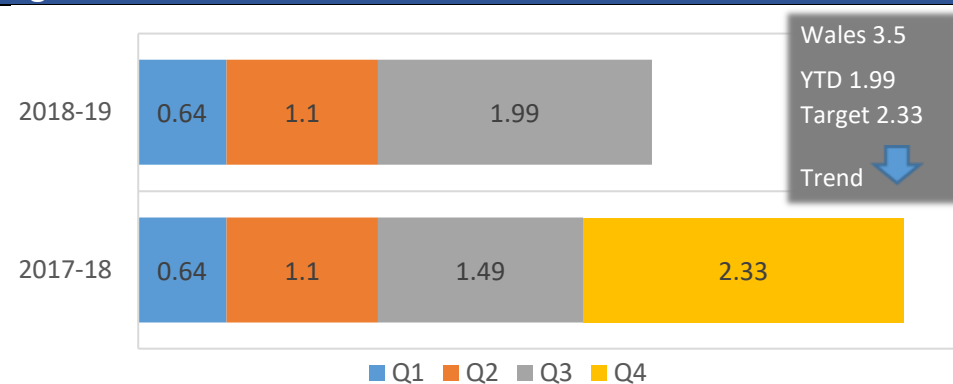
### Strategic Directorate Priority 1 - Safeguarding

#### SSWB18 Percentage of adult protection enquiries completed within 7 days

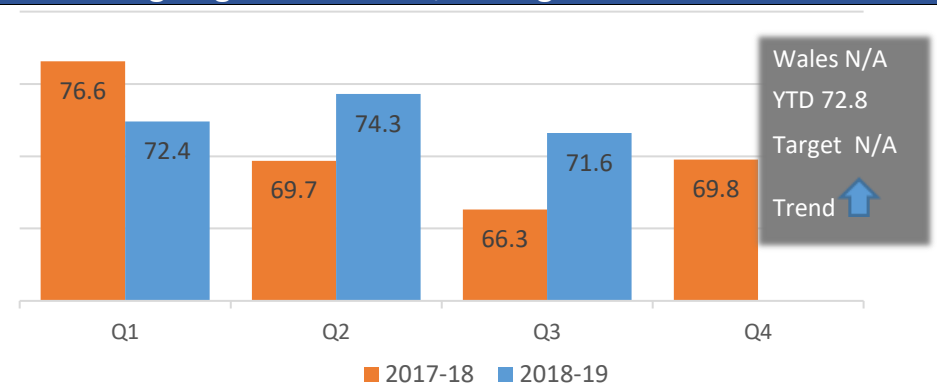


### Strategic Directorate Priority 2 - Prevention & Independence

#### SSWB19 Rate of delayed transfers of care for social care reasons aged 75+



#### SCAL23 Percentage of people helped back to independence without ongoing care services, through short term intervention



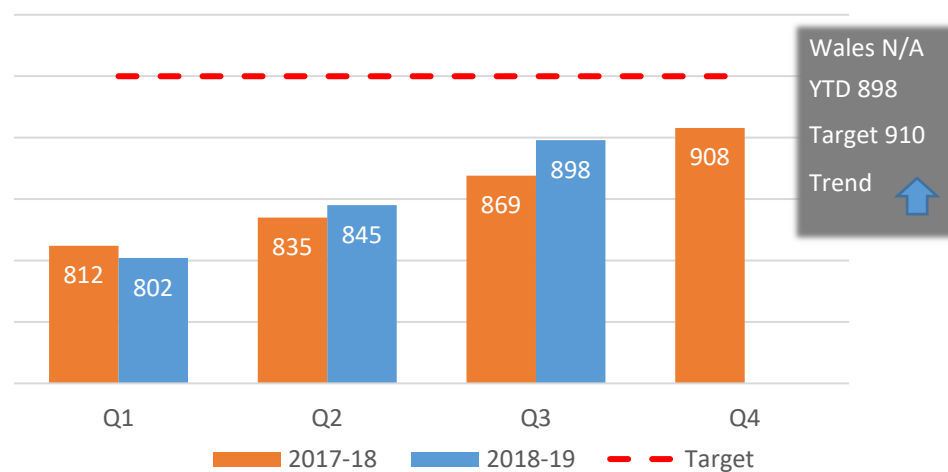
### SSWB20a Percentage of adults who completed a period of reablement and have a reduced package of care and support 6 months later



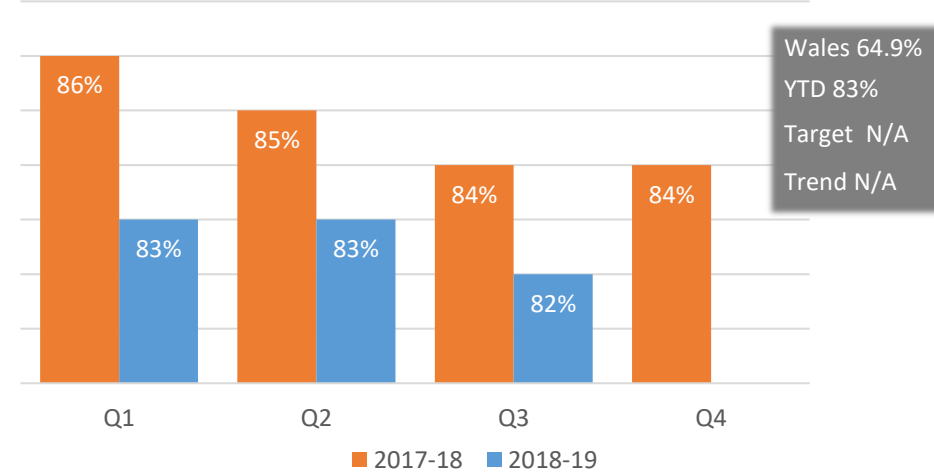
### SSWB20b Percentage of adults who completed a period of reablement have no package of care and support 6 months later



### SCAL25a Total number of children and adults in need of care and support using the Direct Payments Scheme

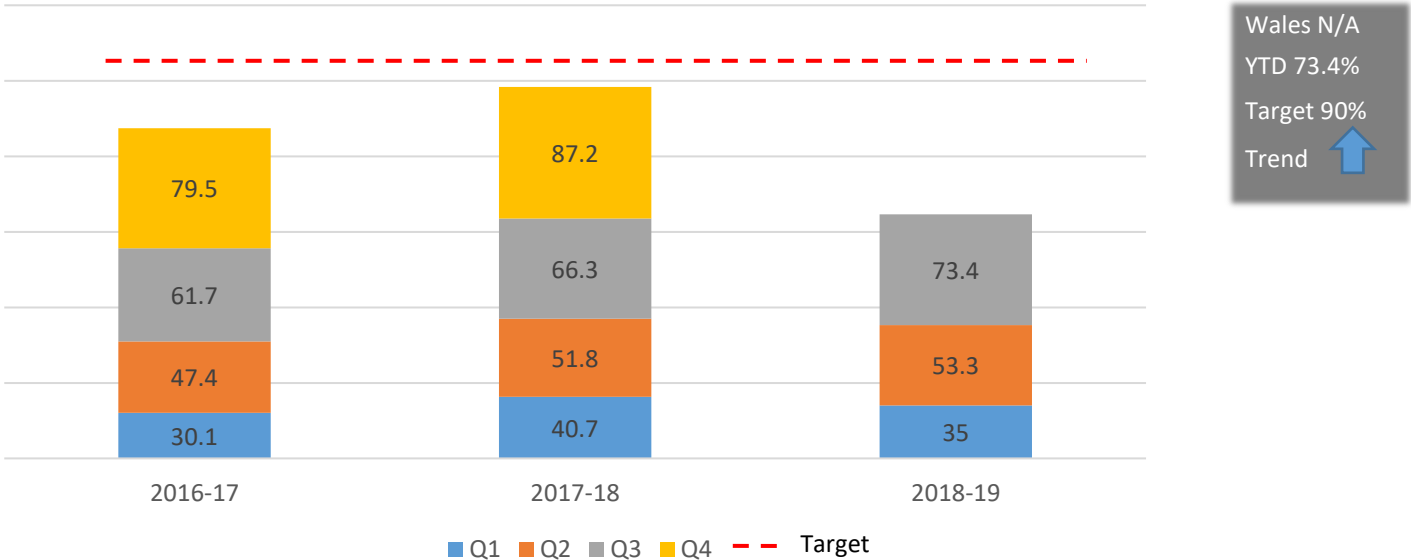


### SSWB 23 Percentage of adults who have received advice and assistance from the information, advice and assistance service and have not contacted the service for 6 months



Strategic Directorate Priority 3 - Care & Support (including transitions)

SCA018a Percentage of carers (of adults) aged 18 or over known to social services who were offered an assessment or review of their needs in their own right during the year



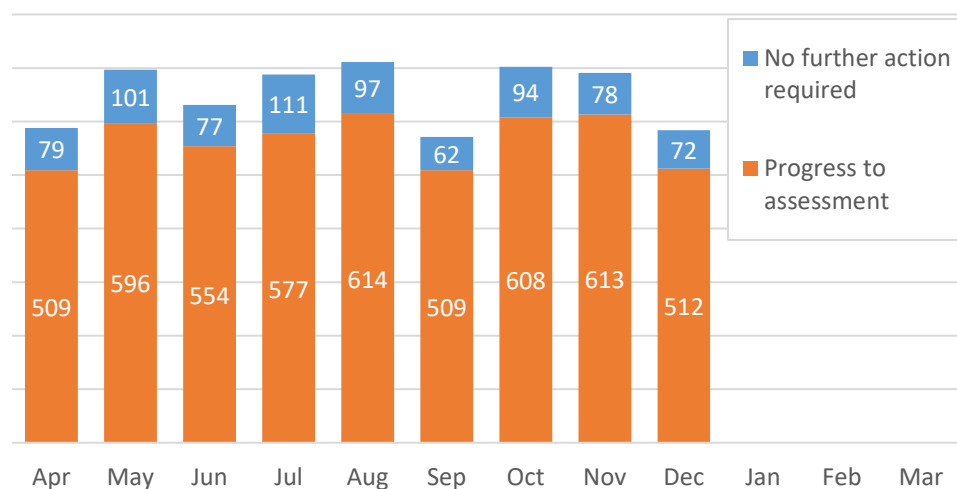
## Prevention and Well-Being

What is working well?	What are we worried about?	What do we need to do?
<ul style="list-style-type: none"> <li>• Positive progress of Dementia Friendly Cardiff.</li> <li>• Services offered ensure that 62% of people with Learning Disabilities that we support are able to remain living in their communities with their families.</li> <li>• Focus on use of mainstream and inclusive services to meet occupation outcomes leads to improved skills, networks and community status for people with Learning Disabilities that we support; this also leads to a reduction in funded services.</li> <li>• Expansion of Ty Canna to support more people with mental health problems in the community.</li> <li>• Provision of timely support to service users / carers in the management of complex situations to prevent admission to care home / carer breakdown.</li> </ul>	<ul style="list-style-type: none"> <li>• Increase in court of protection work.</li> <li>• Design of services to change - proactively seek to keep people well rather than respond in a crisis.</li> </ul>	<ul style="list-style-type: none"> <li>• Commission training for key staff in undertaking court work, including report writing and recording.</li> <li>• Crisis Team and Primary Mental Health Support Service need to be based together with the Community Mental Health Teams for a collaborative approach.</li> </ul>

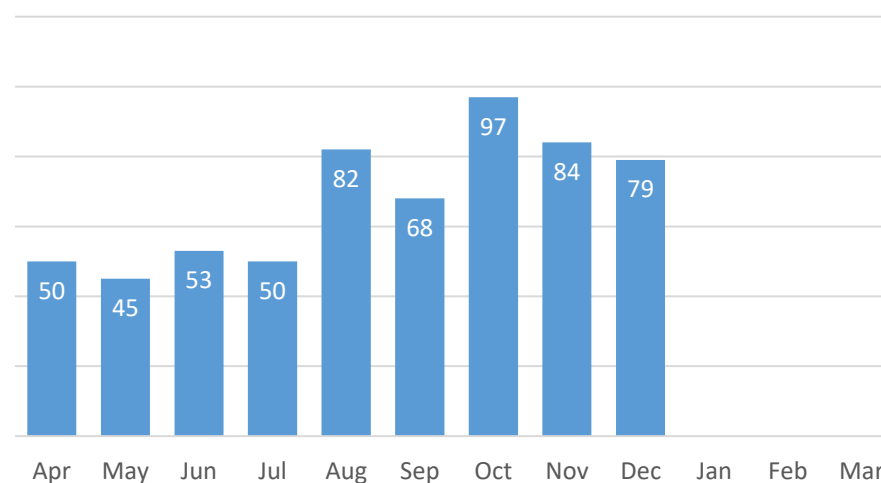
## Key Statistics

- Number of Well-being Referrals:  
Mental Health Services for Older People: year to date 145 (December: 12)  
Learning Disabilities: year to date 31 (December: 5)  
Community Alcohol & Drug Team and City Centre Team: year to date 74 (December: 3)  
Hospital UHW & UHL: year to date 500 (December: 52) – of which, 17 were taken by UHW Contact Team (Get Me Home team commenced December 2018)
- Well-being Referrals pending as at 31<sup>st</sup> December 2018: 13 Well-being Referrals outcome progress to safeguarding: year to date: 2
- Referrals into Adult Assessment: year to date 599 (December: 57)
- Referrals into Adult Assessment Team relating to capital limit threshold for care home placements (dropped funds in self-funding care home placements): year to date 56 (December: 1)
- Referrals into Adult Assessment Team relating to visual impairment: year to date 44 (December: 7)
- Referrals into Adult Assessment Team relating to hearing impairment: year to date 13 (December: 3)

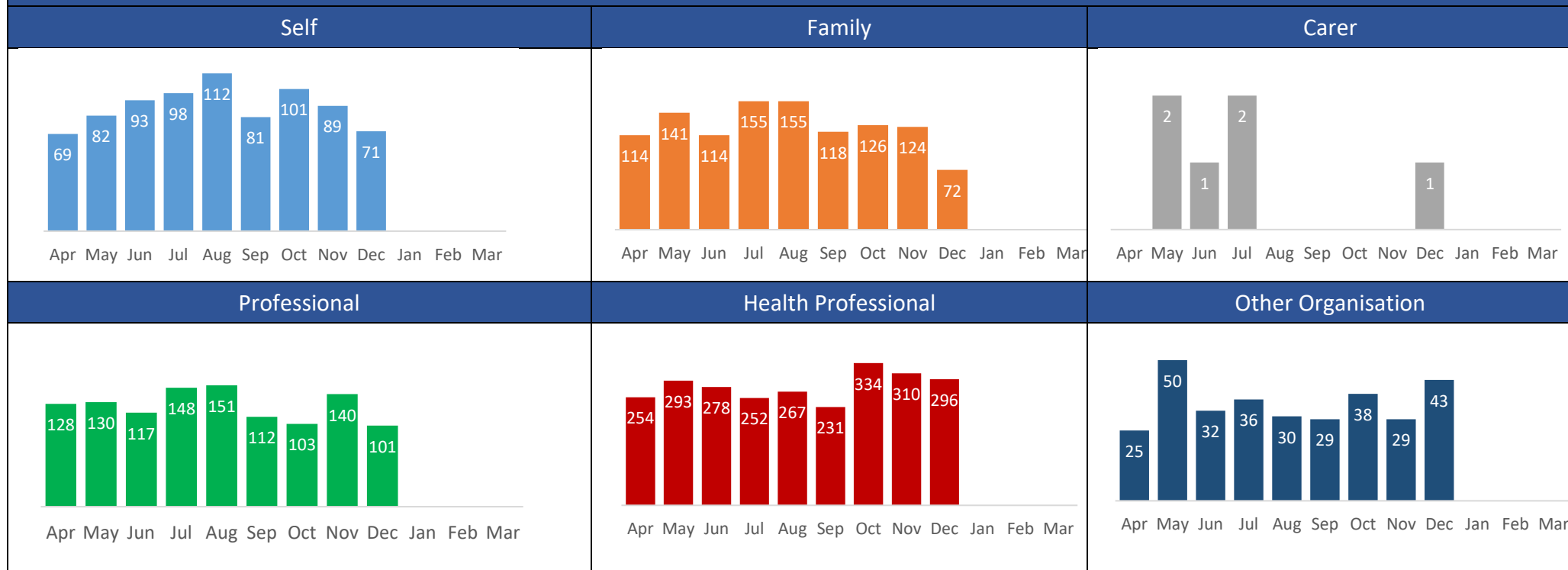
### 1. Well-being Referrals received by outcome



### 2. Well-being Referrals marked immediate assessment from First Point of Contact to Adult Social Services

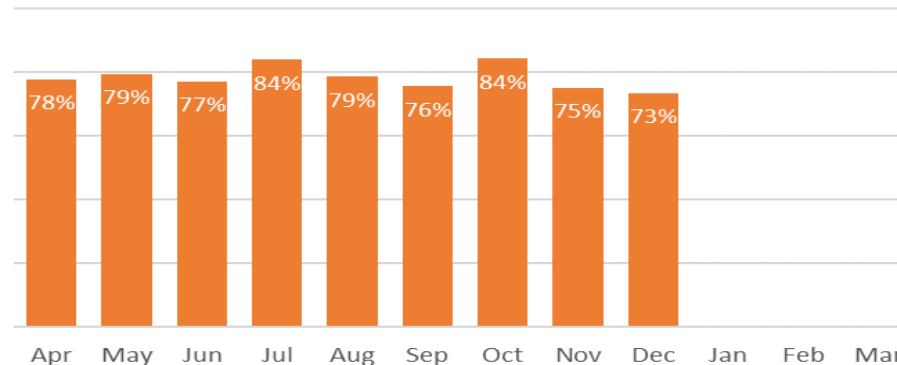
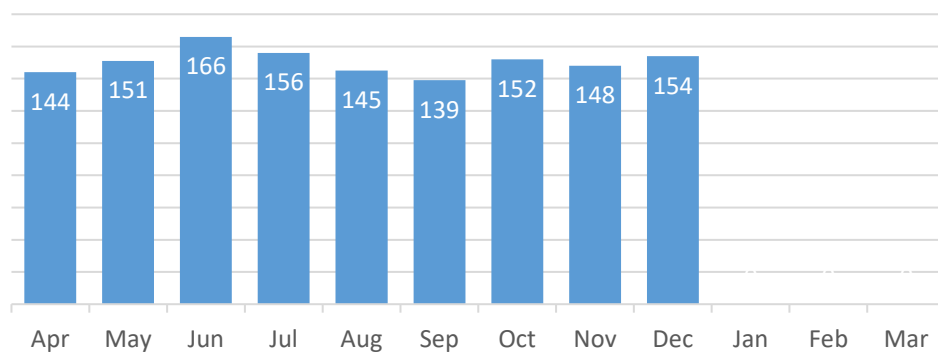


### 3. Source of referral

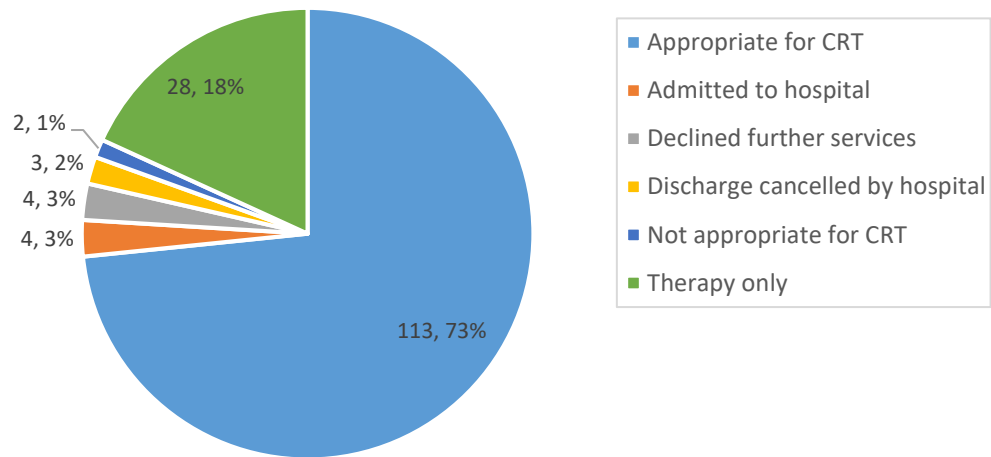


### 4. Number of Community Resource Team (CRT) assessments undertaken following a referral

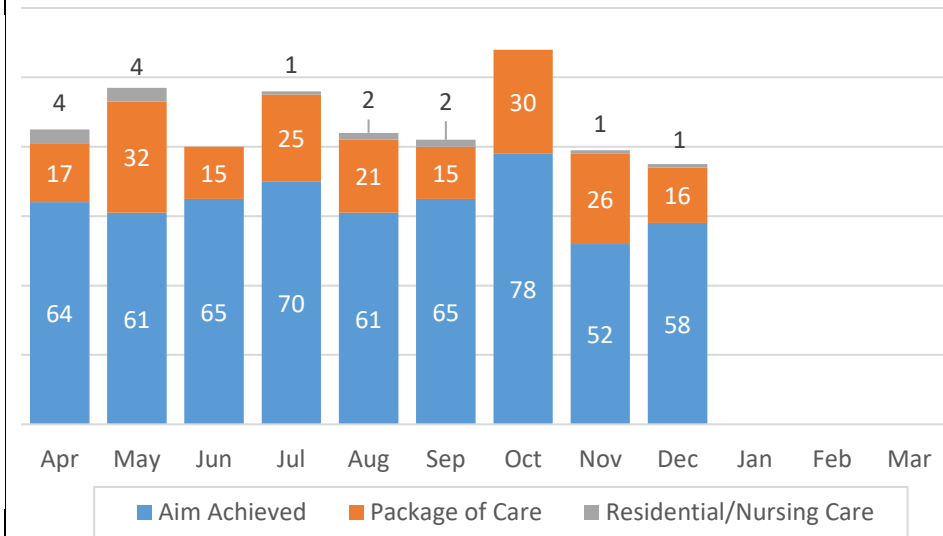
### 5. Percentage of CRT Home Care Assessments where outcome is Appropriate for CRT



## 6. Outcome of CRT assessments undertaken following a referral December 2018



## 7. CRT packages ended by outcome



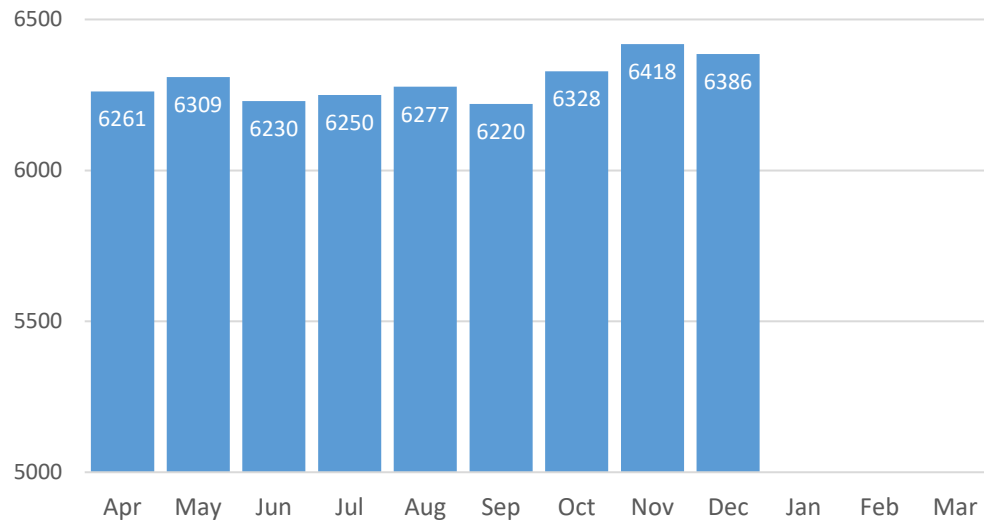
## Assessment and Outcome Focussed Care Planning

What is working well?	What are we worried about?	What do we need to do?
<ul style="list-style-type: none"> <li>Provision of timely support to service users / carers in the management of complex situations to prevent admission to care home / carer breakdown.</li> </ul>	<ul style="list-style-type: none"> <li>Level of collaboration between agencies.</li> </ul>	<ul style="list-style-type: none"> <li>Work on processes to ensure improved feedback links regarding work on outcomes between agencies.</li> </ul>

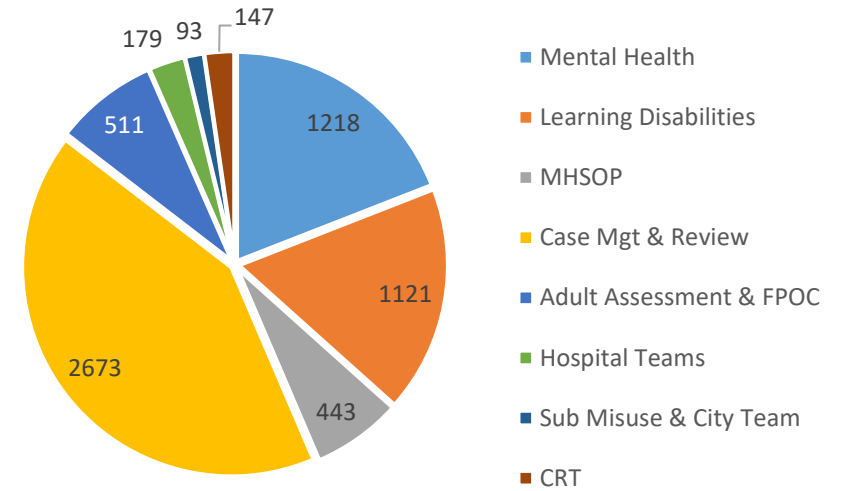
### Key Statistics

- Number of completed Well-being Assessments in secure estate: year to date is 4 (1 in July, August, November & December)
- Number of people who had review: year to date 2,719, number of reviews completed 3,293
- Advocacy Offer - Number of people who reported they were not able to participate fully in the assessment at the latest Well-being Referral or Well-being Assessment: 20% (1,186 / 5,906). Of those, 90% (1,068 / 1,186) reported they had an appropriate person to assist them, 3% (36 / 1,186) reported they did not have an appropriate person to assist them and 7% (82 / 1,186) the answer was not recorded.
- Number of Care & Support Plans outcome No Longer Required: year to date 43 (December: 2)

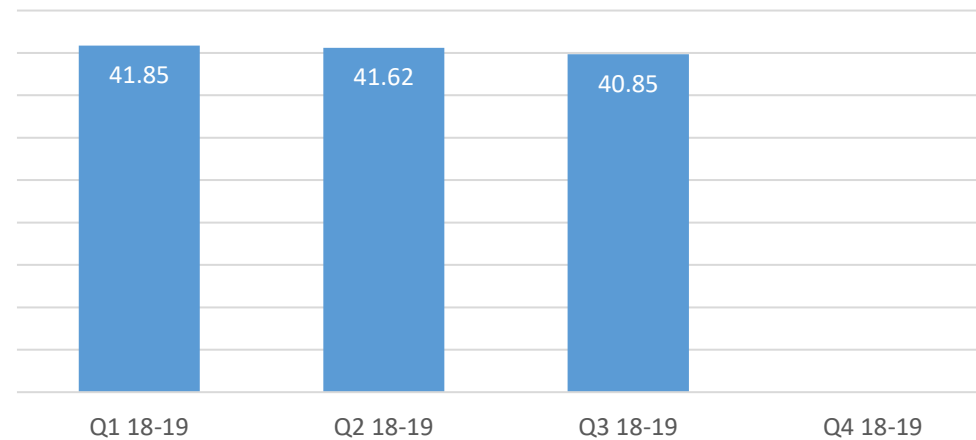
### 1. Number of open cases



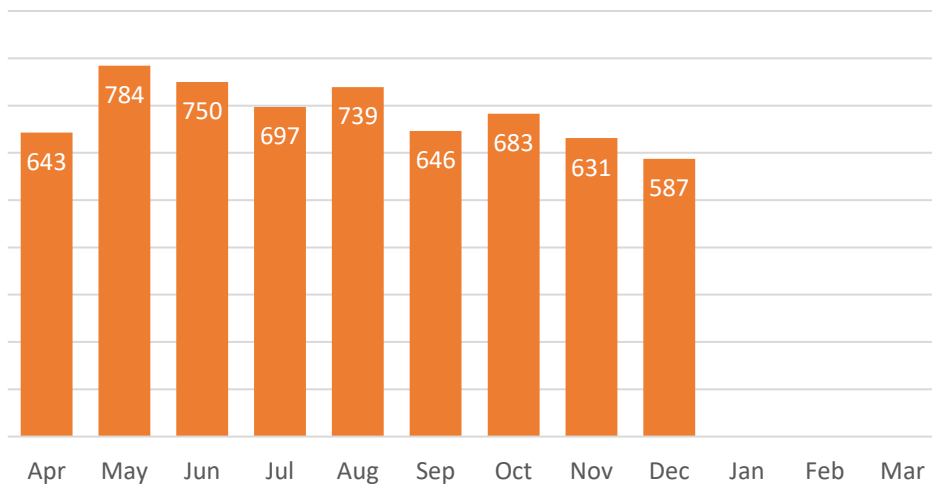
### 2. Number of open cases per team December 2018



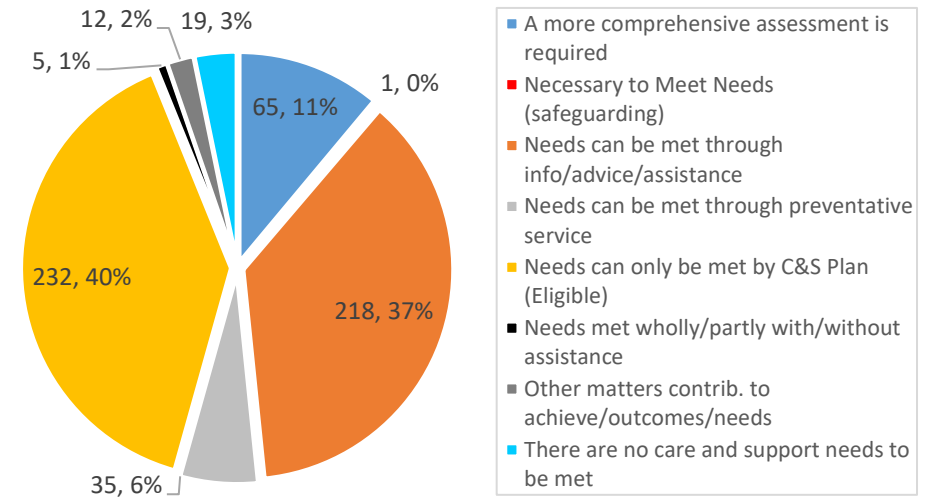
### 3. Average caseload (FTE)



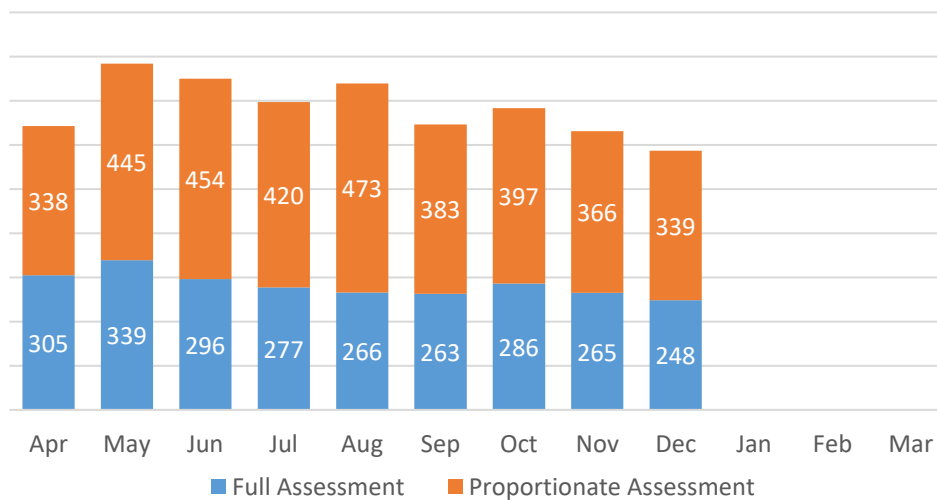
#### 4. Number Well-being Assessments completed by month



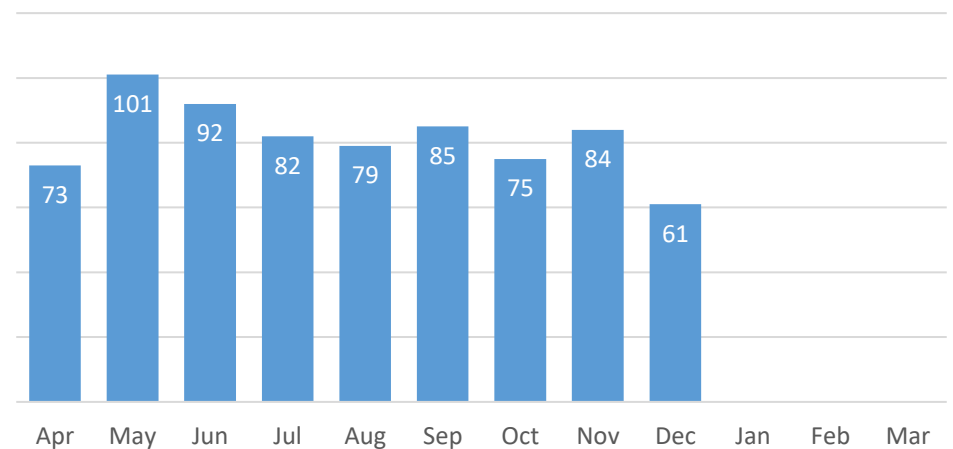
#### 5. Number of Well-being Assessments completed by outcome December 2018



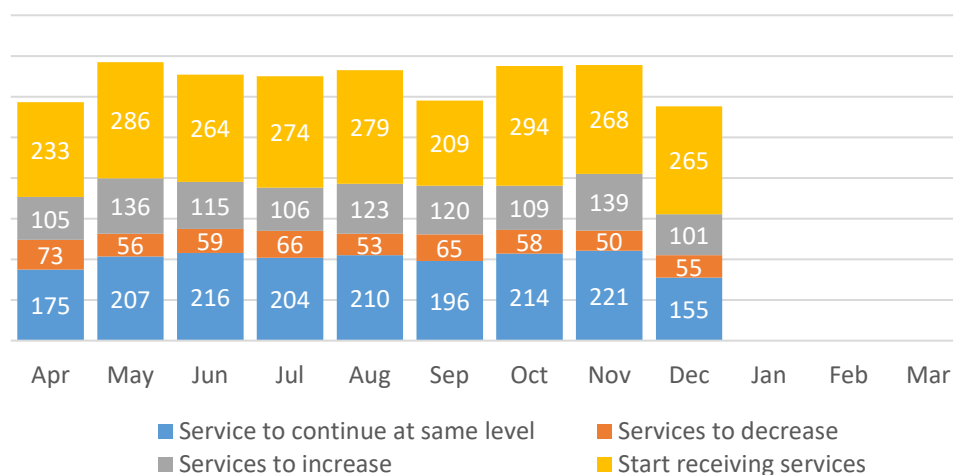
#### 6. Number of Well-being Assessments - Proportionate and Full Assessments completed by month



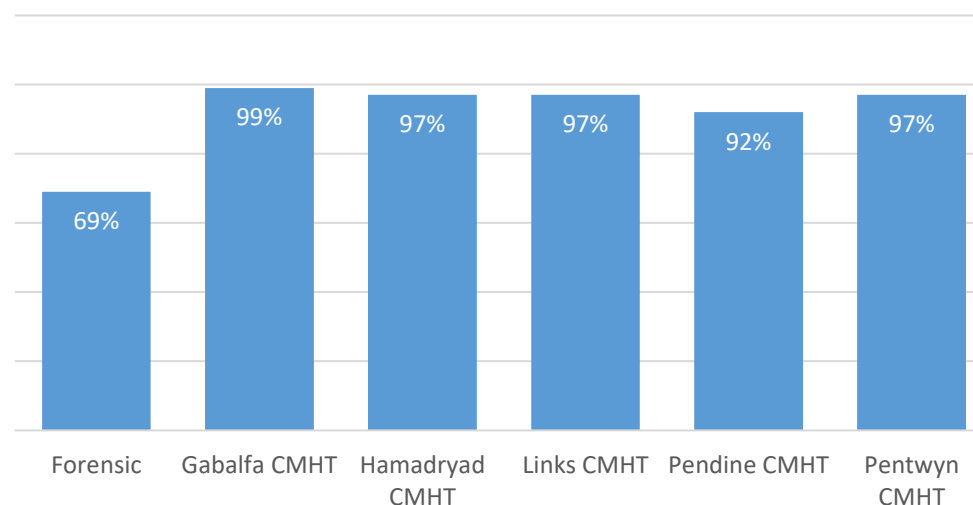
#### 7. Number of Well-being Carers Assessments completed by month



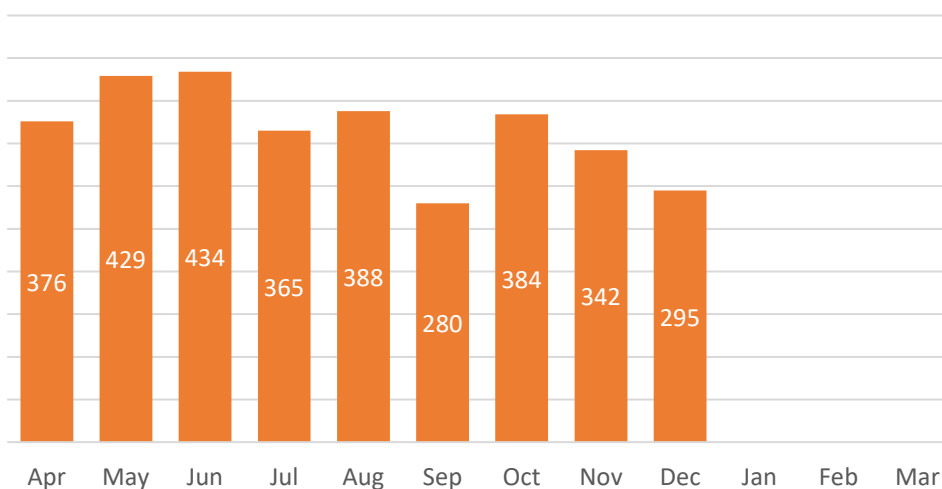
## 8. Number of Care & Support Plans completed by outcome



## 9. Mental Health – Percentage of people with and Care and Treatment Plan



## 10. Number of Care & Support Plan reviews completed



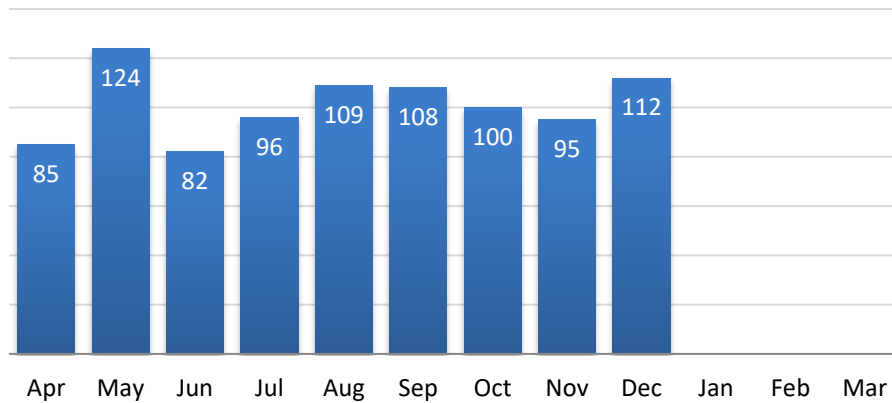
## 11. Number of pending reviews

Team	Total Pending
Adult Assessment	22
Cardiff Alcohol And Drugs Team	2
Case Management Team	16
City Centre Team	0
FPOC - Social Work Team	1
Hospital - UHL	9
Hospital - UHW	6
Learning Disabilities Team East	67
Learning Disabilities Team West	100
MHSOP	38
Review Team	421
<b>Total</b>	<b>682</b>

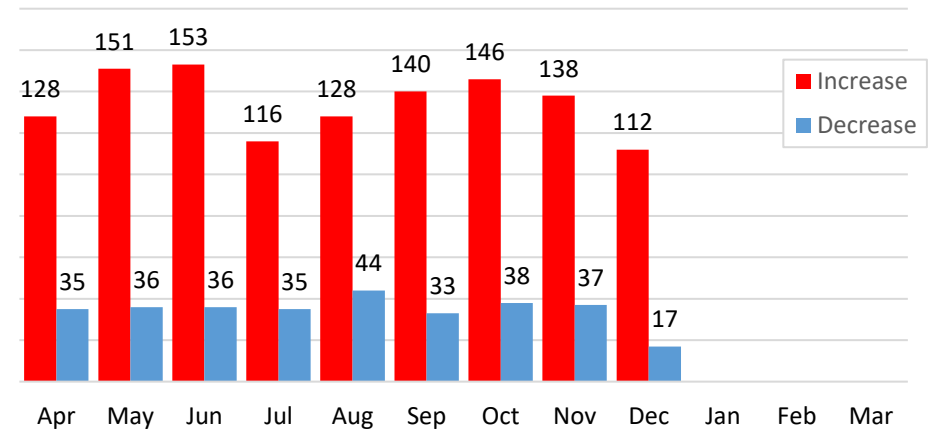
## Commissioning & Service Provision

What is working well?	What are we worried about?	What do we need to do?
<ul style="list-style-type: none"> <li>A number of contracts with Voluntary Organisations have a strong prevention focus; these provide good value for money and achieve good outcomes.</li> <li>We have some good examples of including people in the commissioning process to drive up quality in provision, e.g. supported living tender.</li> <li>We have a commissioning framework and contract management framework that clearly sets out our key commissioning priorities and our approach.</li> <li>Positive examples of regional commissioning activities, e.g. development of joint escalating concerns process, Advocacy Gateway for adults, Learning Disability Strategy.</li> <li>Significant work with Supported Living team to remove £500k overspend over last year. Closure of inappropriate and old stock. Improved management of vacancies.</li> </ul>	<ul style="list-style-type: none"> <li>Delays in the setting of 2018/19 fees for providers and the risk of legal challenge.</li> <li>Number of care homes and domiciliary providers in escalated concerns reduces the opportunity for preventative work to improve quality.</li> </ul>	<ul style="list-style-type: none"> <li>A new approach that focuses on planned visits that prevent the need to instigate the Escalating Concern process is required.</li> <li>Recommissioning of Domiciliary Care will provide an opportunity to introduce an outcome-focused approach to measuring quality.</li> <li>Cost of care exercise to establish openness and transparency in the cost of care home provision</li> <li>Continue to implement new model of day opportunities.</li> </ul>
Key Statistics		
<ul style="list-style-type: none"> <li>Average age of people in entering of residential care is 84 (median age is 82) during Q3 2018-19</li> <li>Average length of time adults (aged 65 or over) are supported in residential care homes is 966 days – Q3 2018-19</li> </ul>		

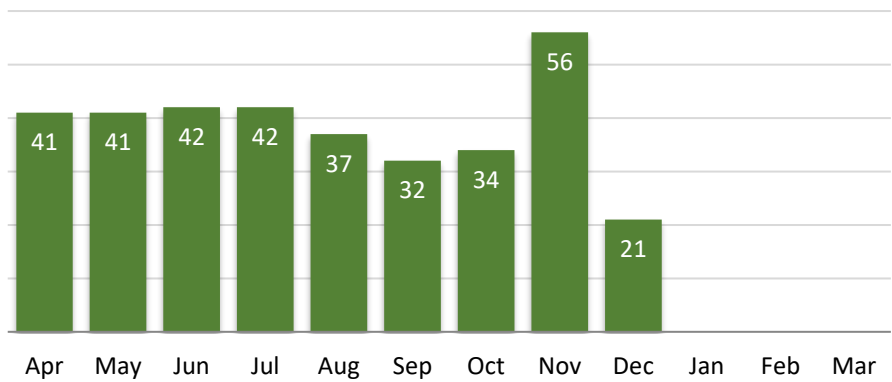
### 1. Domiciliary - New Contracts Agreed



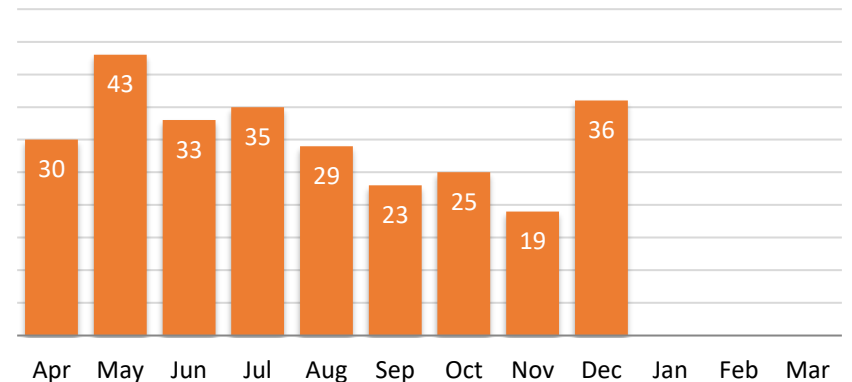
### 2. Domiciliary Care – contract variations



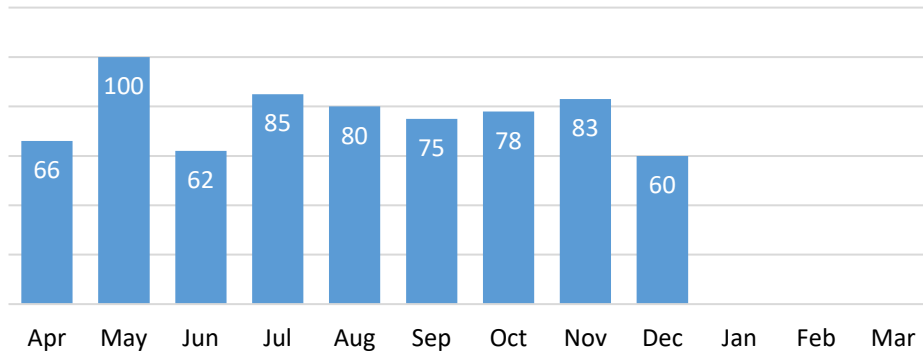
### 3. Residential Care Home - New Contracts Agreed



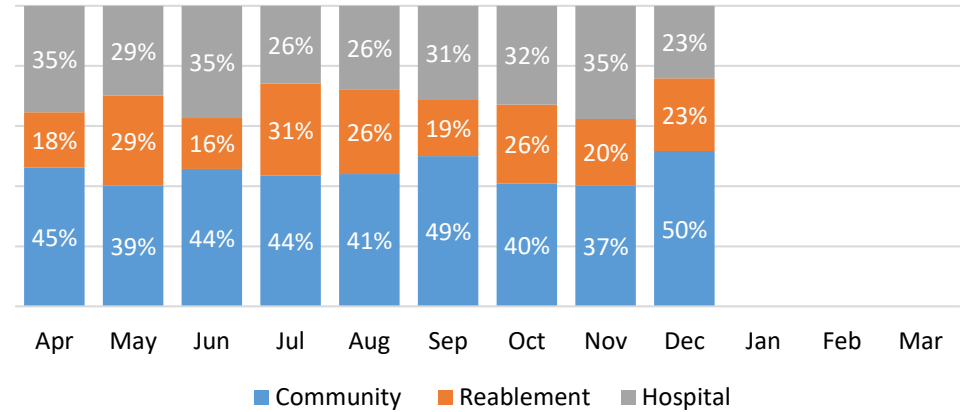
### 4. Nursing Care Home - New Contracts Agreed



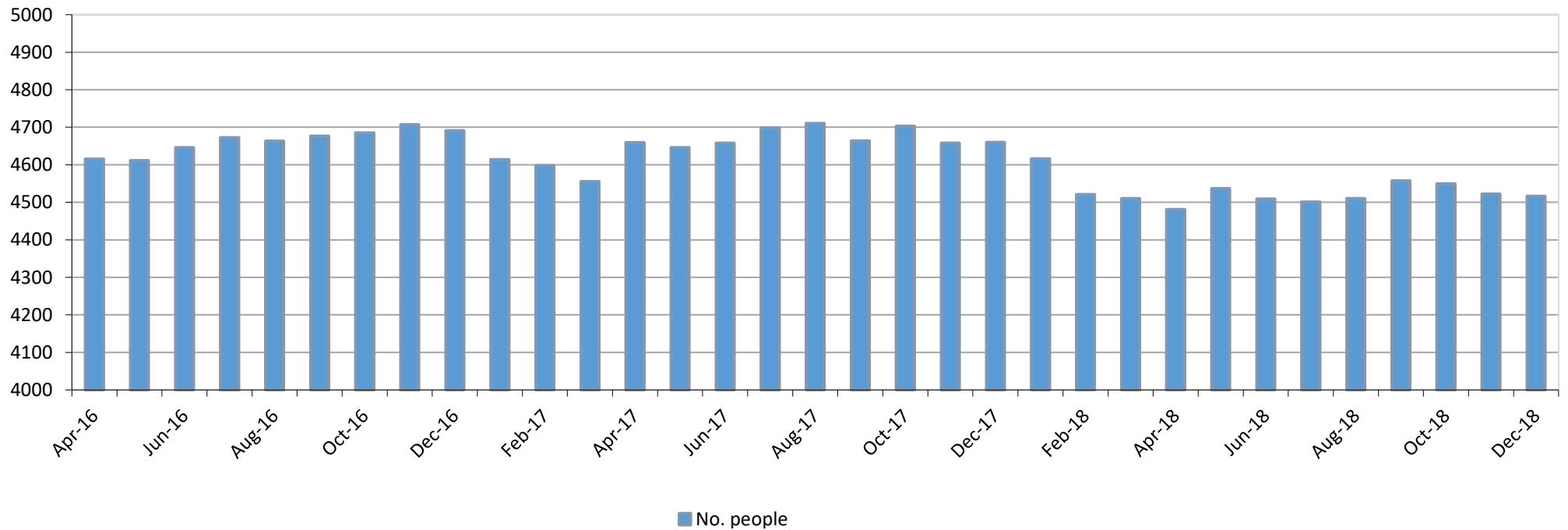
## 5. Number of referrals into Brokerage



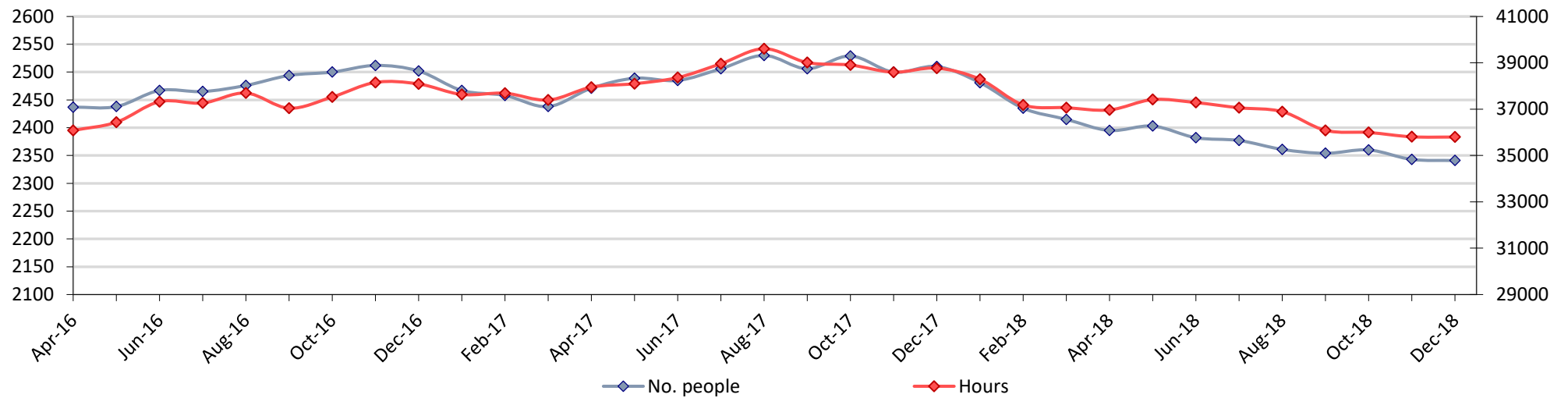
## 6. Referrals into Brokerage by source



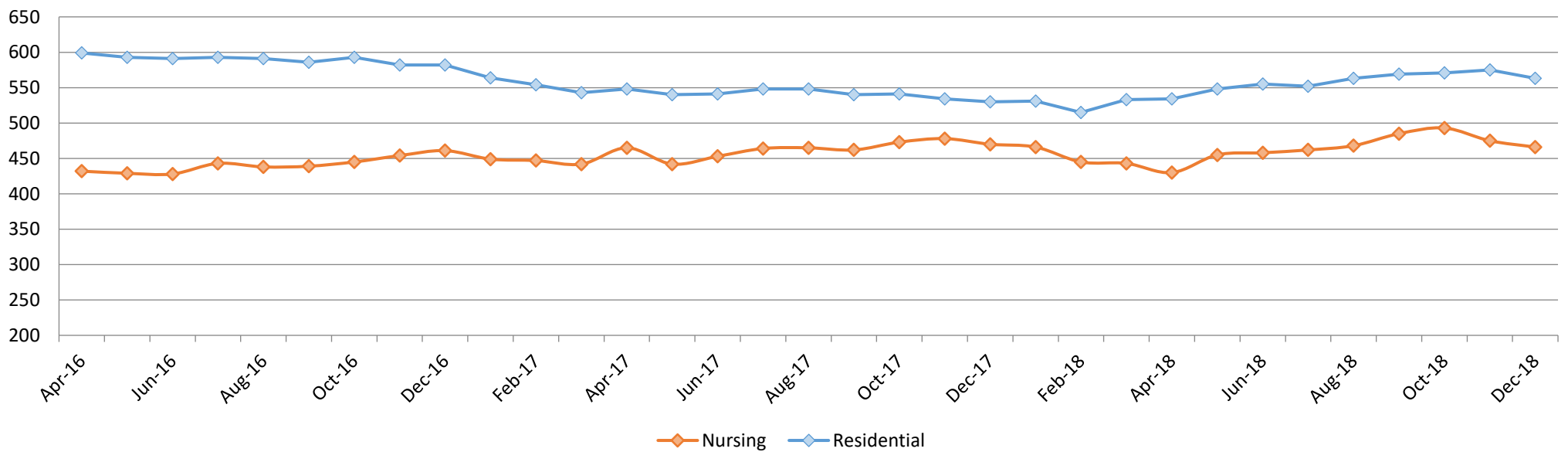
## 7. Number of Care and Support Packages



## 8. Number of people and hours - Domiciliary Care



## 9. Number of people - Residential & Nursing Care



## Safeguarding (Adult)

What is working well?	What are we worried about?	What do we need to do?
<ul style="list-style-type: none"> <li>An action plan has been developed to work on a number of areas ahead of the implementation of the new operating model. Q3 performance against the 7 day enquiry target has improved.</li> </ul>	<ul style="list-style-type: none"> <li>Training around an 'adult at risk' is required.</li> <li>Management of investigations.</li> </ul>	<ul style="list-style-type: none"> <li>Delivery of an 'adult at risk' training.</li> <li>Work with the team and partners to scope out capacity and realign to reduce this.</li> </ul>

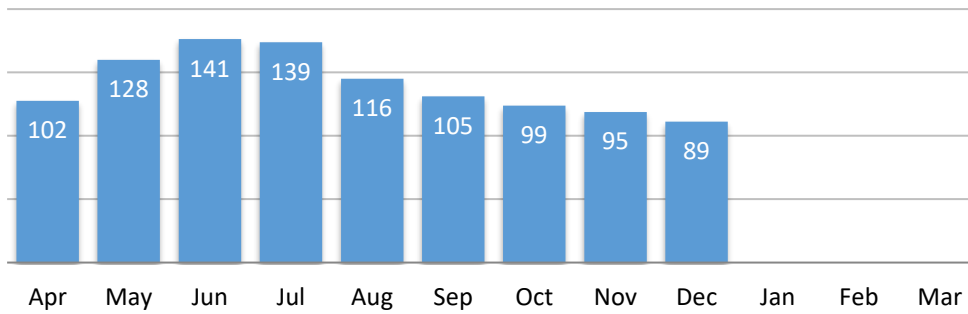
## Key Statistics

- Information & Advice form added to CareFirst in September 2018
- Number of information & advice forms received: year to date 183 (December: 37)

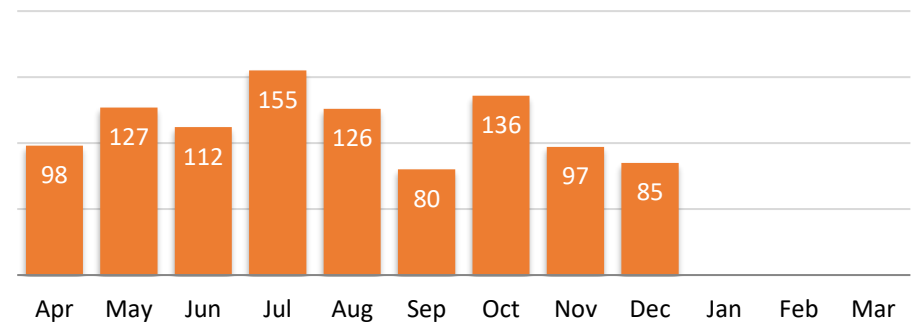
### Contracts & Service Development Team Escalating concerns – December 2018

Domiciliary		Residential/Nursing Care Homes	
Provider Performance Meetings	3	Provider Performance Meeting	3
Joint Interagency Monitoring Panel	0	Joint Interagency Monitoring Panel	2
Closure Procedure (HOSG)	0	Closure Procedure (HOSG)	0
Number of issues reported	28	Number of issues reported	10

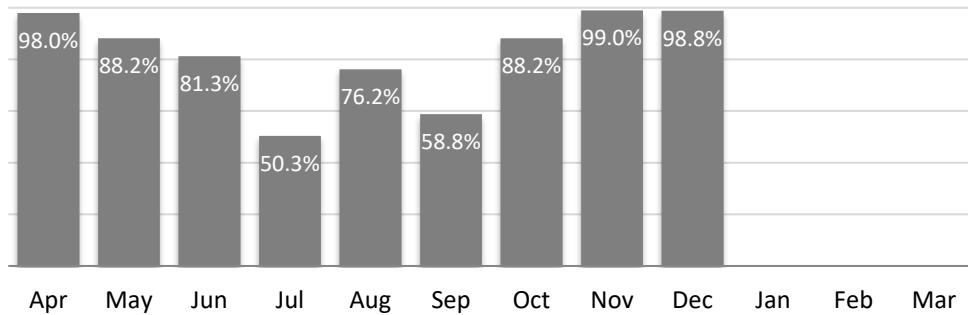
### 1. Number of contacts received



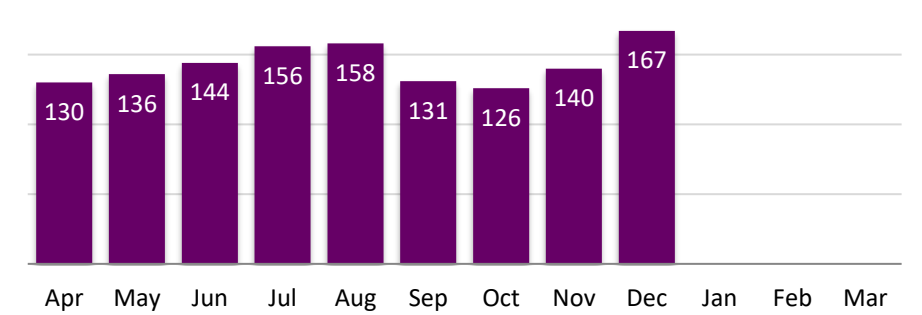
### 2. Number of contact records completed



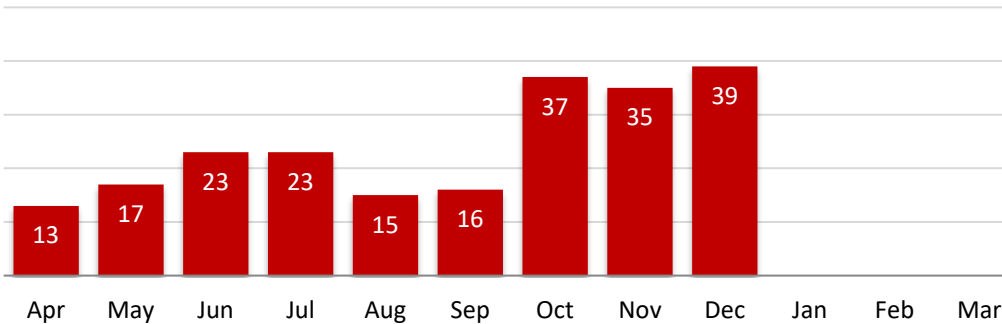
### 3. Percentage of contacts completed within 7 days



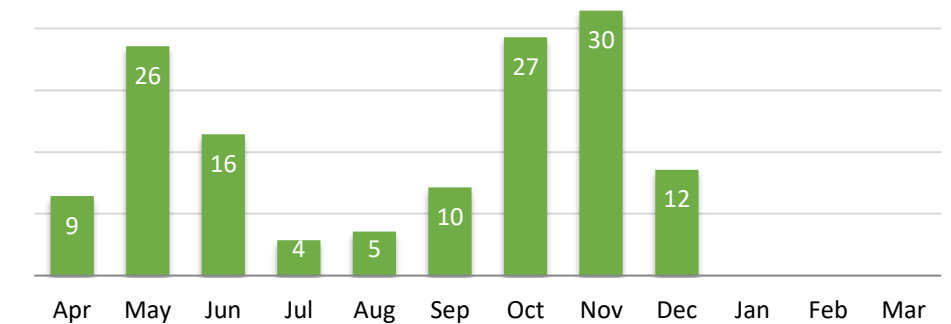
### 4. Number of pending investigations



### 5. Number of investigations started



### 6. Number of investigations completed



## Managing People, Resources, Systems and Processes

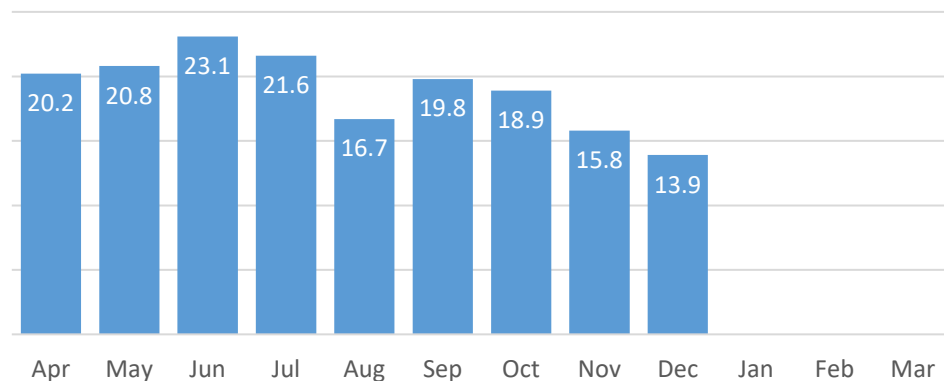
What is working well?	What are we worried about?	What do we need to do?
<ul style="list-style-type: none"> <li>Good staff retention across Adult Services, low levels of agency workforce.</li> </ul>	<ul style="list-style-type: none"> <li>Impact of sickness levels in key service areas</li> <li>Recruitment specifically into Grade 8 and Approved Mental Health Practitioner (AMHP) vacancies is difficult.</li> </ul>	<ul style="list-style-type: none"> <li>Improved use of Matrix to fill vacancies.</li> <li>Workforce planning for AMHPs.</li> <li>Develop training matrix to set out mandatory training by role.</li> </ul>

### Key Statistics

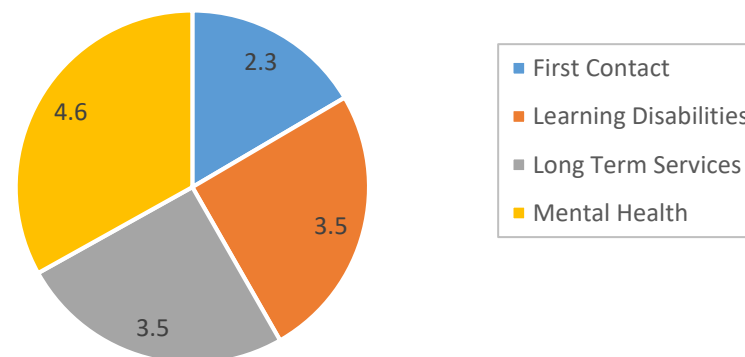
- Sickness rate (FTE) target for 18-19 is 16.5
- Top 4 reasons for sickness (Quarter 3 2018-19):
  - Chest-respiratory
  - Stomach-liver-kidney
  - Stress
  - Infection

- Return to work interviews Q3 – 94.3% (157 total, 9 pending)
- Trigger interviews completed Q3 – 79.5% (44 total, 4 pending, 5 not conducted)

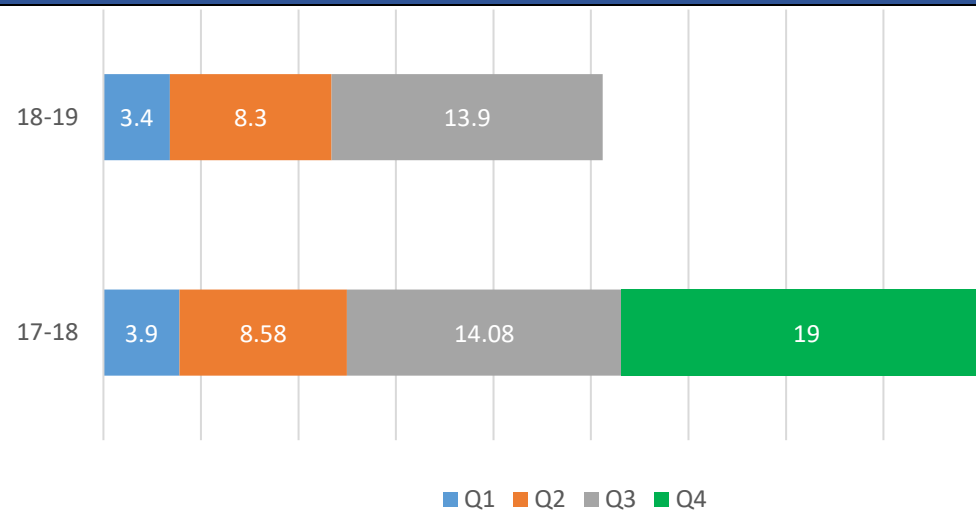
#### 1. Number of social work vacancies



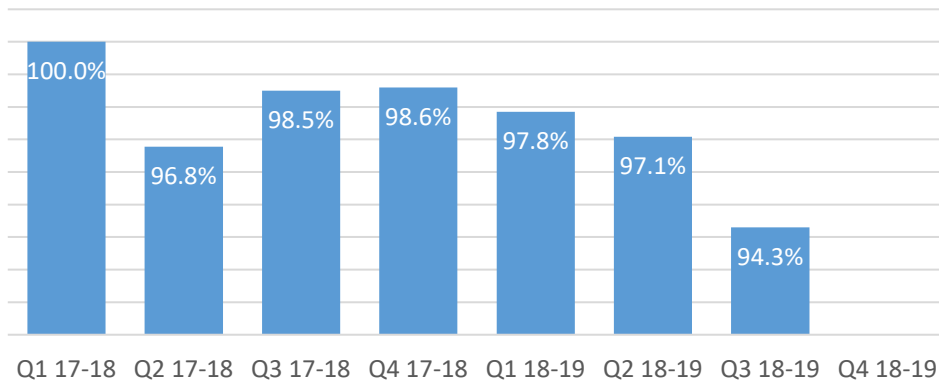
#### 2. Social work vacancies by service area December 2018



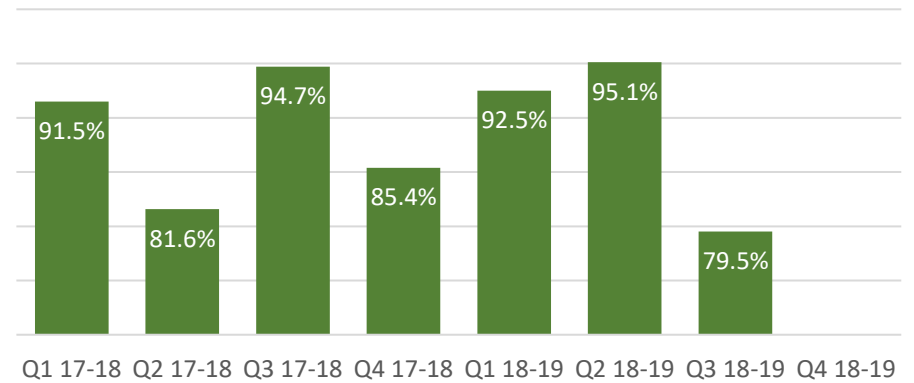
### 3. Sickness Rate (FTE)



### 4. Percentage of return to work interviews completed



### 5. Percentage of trigger interviews completed



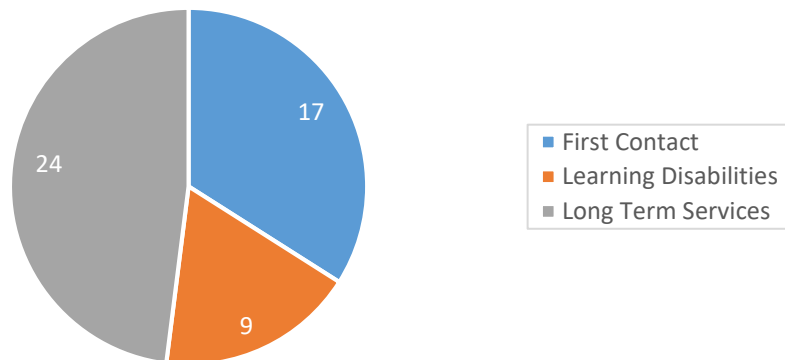
## Quality of Practice

What is working well?	What are we worried about?	What do we need to do?
<ul style="list-style-type: none"> <li>• Listening to people, giving them choice and control</li> <li>• Wide range supported living accommodation with good monitoring practices.</li> <li>• Engagement exercises undertaken in adult mental health services leading up to the Community Services Review. People wanted to be listened to and treated with respect. They didn't want to repeat their story a number of times - numerous assessments by different services. The strong emphasis on co-production and service user involvement in mental health can be harnessed as a powerful asset in quality improvement work.</li> </ul>	<ul style="list-style-type: none"> <li>• Consistency of practice across all teams.</li> <li>• There is a need to ensure consistency of quality assurance processes to support practice improvement.</li> </ul>	<ul style="list-style-type: none"> <li>• Introduction of strength based practices. A major programme of work to embed strength based approaches in partnership with social care wales is to be launched in April 2019.</li> <li>• Implement a Quality Assurance Panel to work on ensuring consistency of quality assurance process and embed learning from audits and celebrate success.</li> </ul>

## Key Statistics

- 2017-18 Survey for Adults sent to 1,825 (1,232 deemed inappropriate to send. Response rate 35% (711 surveys)
- 2017-18 Survey for Carers sent to 348 (19 deemed inappropriate to send. Response rate 35% (122 surveys)
- 2018-19 Survey for Adults & Carers January & February 2019.

### 1. Case file audits completed during the year



### 2. Compliments & Complaints Q3 2018-19

#### Compliments & Complaints

Stage 2 complaints	No.
Open	2
Initiated during Q3	1
Closed during Q3	1
Open at 31.12.18	2

Q3 Compliments
5