Appendix A

## **ADULT SERVICES**

## PERFORMANCE REPORT

**QUARTER 4 2018-19** 







### **Executive Summary**

### What is working well?

- The Director and senior managers met with all final year **social work students** on placement in Cardiff. Feedback was positive around the support they have received and they are keen to seek permanent employment in Cardiff.
- Agile working is fully implemented across both the University Hospital of Wales (UHW) and University Hospital Llandough (UHL). This has enabled more timely decision making and more effective screening and allocation of cases as there is better access to information. All of this has had a **positive impact on Delayed**Transfers of Care (DToC) as evidenced by information reported by for the 20<sup>th</sup> March 2019 DToC census; which shows the total number of DToCs for March 2019 was 37 compared to 49 for February 2019, a decrease in a month of 24%, the number is 21% lower than the same period last year March 2018, which was 47.
- **Grand opening for new dementia day service** A new integrated service, providing a supportive and enhanced environment for people living with dementia in Cardiff, officially launched on 18<sup>th</sup> March. The Leader of the Council, Cllr Huw Thomas officially launched the new service, which is being delivered to meet the needs of people with moderate to high care and support needs across the city, at the new Integrated Dementia Day Service on Grand Avenue in Ely. The facility has undergone a complete redesign and major refurbishment works to create a stunning example of a best practice dementia-friendly environment, thanks to a successful capital bid to the Welsh Government's Intermediate Care Fund.
- Adult Services achieved **budget underspend** of £1.362 million against a budget of £111.368 million.
- Increased the number of adults and children in need of care and support using **Direct Payments** during the year, 966 compared to 908 in 2017-18.
- Continued to increase in the number of carers assessments completed (936 in 2018-19 compared to 798 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 (93.6% in 2018-19 compared to 87.2% last year).
- Voices of people are heard, better listened to and taken into account as a result of work towards implementing a strengths based approach in Adult Services.
- The **voice of people with Dementia** continues to be heard in achieving 'working towards' Dementia Friendly City status. Staff awareness of dementia improved through corporate training programme.
- More people with mental health problems are being supported in the community following the expansion of Ty Canna.
- Quality of care experienced by older people and their relatives in care home settings substantially improved by effective application of the Escalating Concerns procedure.
- Further **strengthening of safeguarding for adults** by the introduction of targeted resource with the creation of a Service Manager post with an adult safeguarding focus.
- Better placed to **enable more people to remain as independent as possible** in their own homes through our commissioning activity. For example, during the year we commissioned supported living accommodation for vulnerable adults with substance misuse and we commenced the procurement process for the recommissioning of supported living accommodation for adults with a learning disability.
- Better placed to increase the range of **accommodation options** to meet the needs of older people with physical frailty and dementia issues with the development of the Older Person's Housing Strategy.

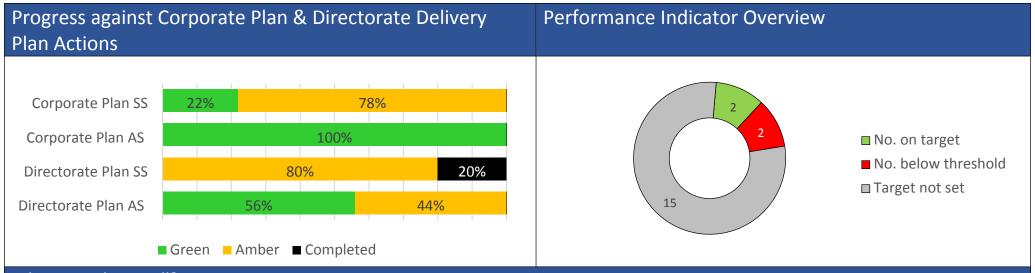
#### What are we worried about?

- Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA) which requires all domiciliary care workers to be registered by 2020.
- Poor condition of University Health Board (UHB) buildings where staff are based.
- Timeliness of Deprivation of Liberty Safeguards (DoLS) assessments.
- Implementation of adult safeguarding improvement plan.
- Quality of some provider services evidenced by the number being managed through the escalating concerns processes.
- Delay in fee setting for domiciliary care and care home provision and risk of legal challenge.
- Finance system is end of life and needs supporting.
- Progress with Mental Health Community Services Review.
- New senior management arrangements are being implemented following consultation and as with any change there are risks at a time of uncertainty.

### 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.
- Work closely with Health & Safety and University Health Board estates to identify alternative accommodation for the CRT and CMHTs.
- Develop workforce plan for the whole of Adult Services which develops a career structure for all parts of the workforce and addresses retention and recruitment challenges in key posts such as AMHPs.
- Action plan to improve timeliness of DoLs assessments.
- Continue to closely monitor timeliness of Adult Safeguarding enquiries and implement a new operating model for adult safeguarding.
- A new approach that focuses on planned visits that prevent the need to instigate the Escalating Concern process is required.
- 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 (approved 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.
- 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 develop a strategy and supporting action plan to progress the Community Services Review of adult mental health services.
- Implement new senior management arrangements and support with an OD plan to develop strength based culture and support strength based practice.

### Quarterly Performance – Q4 2018-19



### What is working well?

The Director and senior managers met with all final year **social work students** on placement in Cardiff. Feedback was positive around the support they have received and they are keen to seek permanent employment in Cardiff.

Agile working is fully implemented across both the University Hospital of Wales (UHW) and University Hospital Llandough (UHL). This has enabled more timely decision making and more effective screening and allocation of cases as there is better access to information. All of this has had a **positive impact on Delayed Transfers of Care** (DToC). Get Me Home Officers have been covering the most demanding wards at UHW (C6 and A4) to support and facilitate a more timely discharge during the 'winter pressure' months. The 20<sup>th</sup> March 2019 DToC census; which shows the total number of DToCs for March 2019 was 37 compared to 49 for February 2019, a decrease in a month of 24%, the number is 21% lower than the same period last year March 2018, which was 47.

**World Social Work Day** was celebrated on 19<sup>th</sup> March. One social worker was quoted on Cardiff Council's Twitter feed as saying "Social work is about getting alongside people at the hardest times in their lives to help them see that there are always possibilities, by supporting them to draw on the highs to get through those lows and have hope".

Grand opening for new dementia day service - A new integrated service, providing a supportive and enhanced environment for people living with dementia in Cardiff, officially launched on 18<sup>th</sup> March. The Leader of the Council, Cllr Huw Thomas officially launched the new service, which is being delivered to meet the needs of people with moderate to high care and support needs across the city, at the new Integrated Dementia Day Service on Grand Avenue in Ely. The facility – the former Council-

owned and managed Grand Avenue Older People's Day Centre, has undergone a complete redesign and major refurbishment works to create a stunning example of a best practice dementia-friendly environment, thanks to a successful capital bid to the Welsh Government's Intermediate Care Fund.

Adult Services achieved budget underspend of £1.362 million against a budget of £111.368 million.

#### What are we worried about?

#### **Community Services Review:**

Members wrote to the Director of Operations for the Mental Health Clinical Board Cardiff & Vale University Health Board in Quarter 2 recommending that a strategy and/or action plan 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. The new Assistant Director for Adult Services will meet with Health Board leads to ensure this work is progressed in a timely way.

The risk of a judicial review around the **fee setting process for care homes and domiciliary care providers** has been mitigated by further consultation and engagement with the sector and a revised decision in respect of 2018/19 fees. 2018/19 fees confirmed via Officer Decision Report and meetings progressing with providers to agree timeline for 2019/20 fee setting. A cost of care exercise for care homes is being undertaken to understand the true cost of service provision and inform future fee setting exercise. This exercise formally began in December 2018 and is expected to be completed in Quarter 1 2019/20. We are part way through this exercise and it is delivering detailed information from providers regarding their cost of care. It is anticipated this work will deliver a care home fee setting strategy for the next 5 years for the Council.

#### What do we need to do?

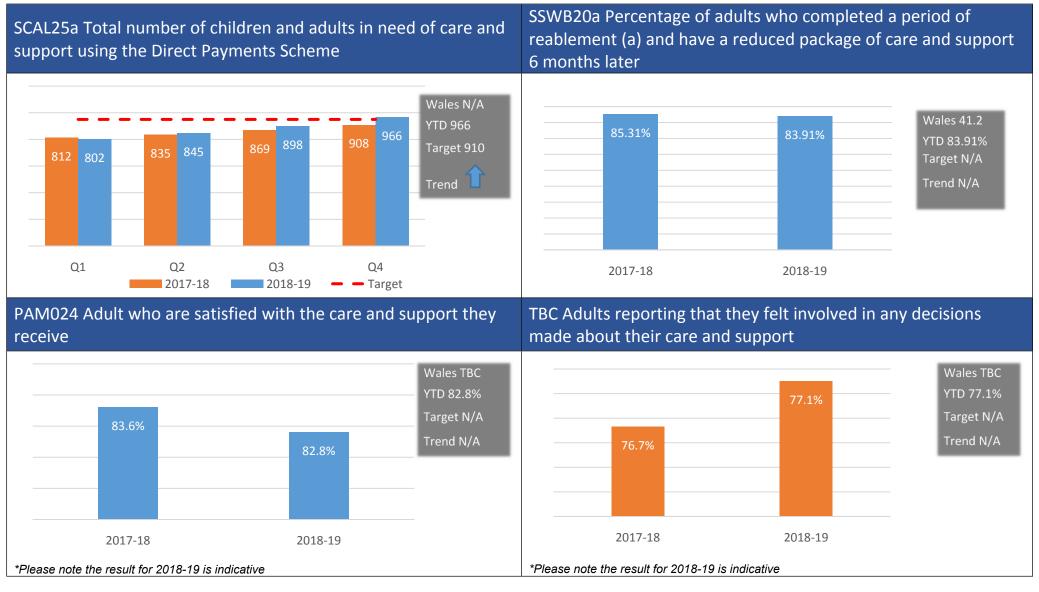
Adult Safeguarding - timeliness of 7 day enquiries: Continue to closely monitor timeliness of Adult Safeguarding enquiries and implement a new operating model.

**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.

**Commissioning Care Homes and Domiciliary Care:** progress work to implement new model of domiciliary care and care home fee strategy.

### Key Performance Indicators – Corporate Plan



### Key Performance Indicators - Directorate Delivery Plan

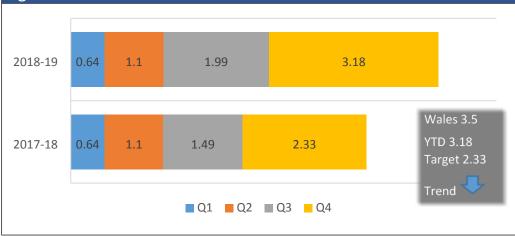
### Strategic Direictorate Priority 1 - Safeguarding

SSWB18 Percentage of adult protection enquiries completed within 7 days



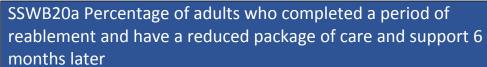
### Strategic Directorate Priority 2 - Prevention & Independence

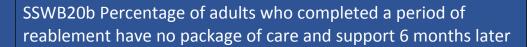
SSWB19 Rate of delayed transfers of care for social care reasons aged 75+

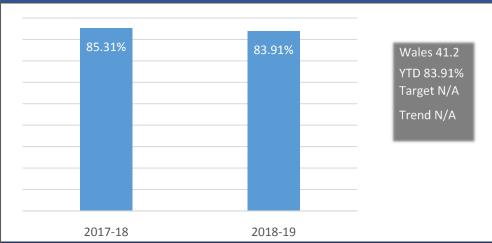


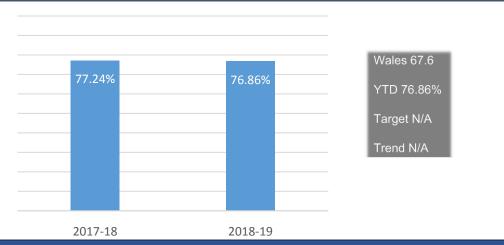
SCAL23 Percentage of people helped back to independence without ongoing care services, through short term intervention







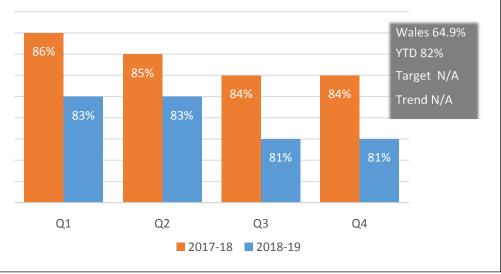




SCAL25a Total number of children and adults in need of care and support using the Direct Payments Scheme

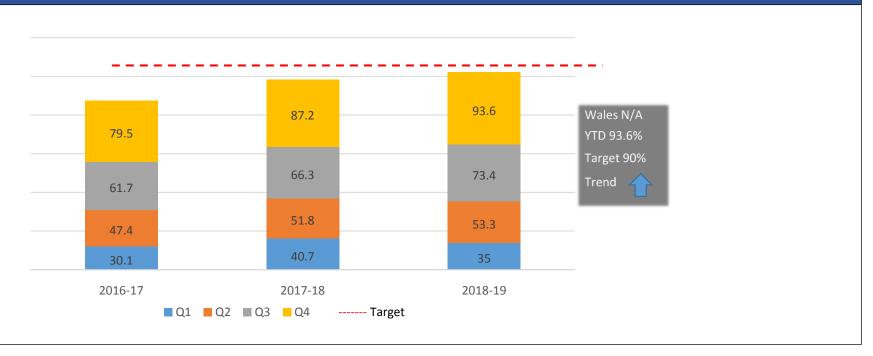
SSWB 23 Percentage of adults who have received advice and assistance from the information, advice and assistance service and have not contacted the service for 6 months





## Strategic Direcorate 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

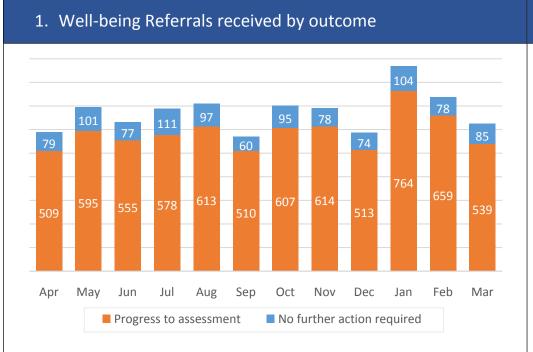


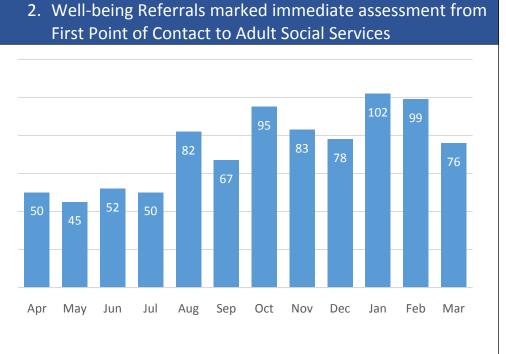
## Prevention and Well-Being

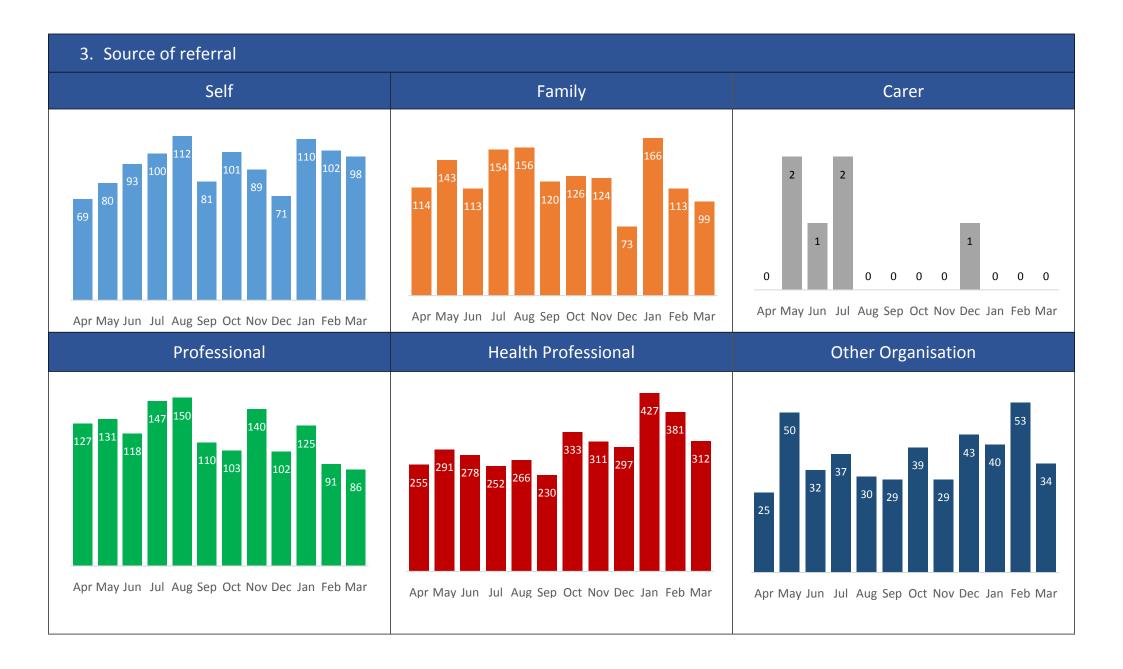
What is working well?	What are we worried about?	What do we need to do?
<ul> <li>Positive progress of Dementia Friendly Cardiff.</li> <li>Services offered ensure that 62% of people with Learning Disabilities that we support</li> </ul>	Increase in court of protection work.	<ul> <li>Commission training for key staff in undertaking court work, including report writing and recording.</li> </ul>
are able to remain living in their communities with their families.	<ul> <li>Design of services to change - proactively seek to keep people well rather than respond in a crisis.</li> </ul>	<ul> <li>Crisis Team and Primary Mental Health Support Service need to be based together with the Community Mental Health Teams</li> </ul>
<ul> <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> </ul>		for a collaborative approach.
<ul> <li>Expansion of Ty Canna to support more people with mental health problems in the community.</li> </ul>		
<ul> <li>Provision of timely support to service users         <ul> <li>carers in the management of complex</li> <li>situations to prevent admission to care</li> <li>home / carer breakdown.</li> </ul> </li> </ul>		

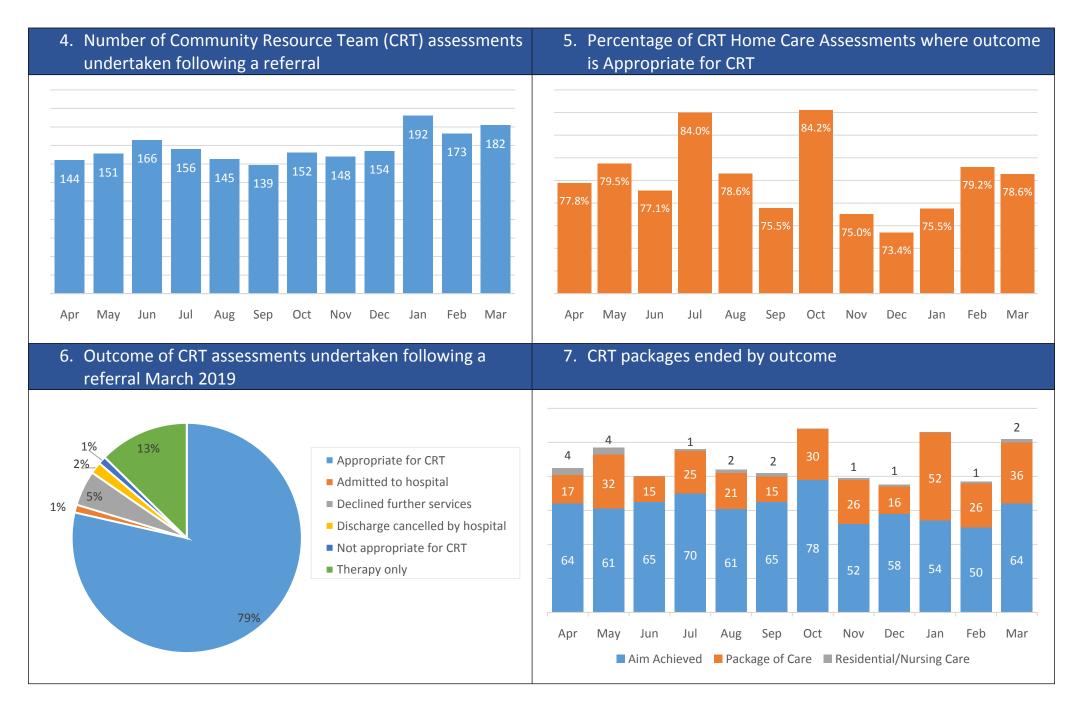
### **Key Statistics**

- Number of Well-being Referrals:
  - Mental Health Services for Older People: year to date 192 (March:14)
  - Learning Disabilities: year to date 39 (March: 4)
  - Community Alcohol & Drug Team and City Centre Team: year to date 96 (March: 4)
  - Hospital UHW & UHL: year to date 754 (March: 80) of which, referrals taken by UHW Contact Team (Get Me Home team commenced December 2018): year to date 128 (March: 37)
- Well-being Referrals pending as at 31st March 2019: 19. Well-being Referrals outcome progress to safeguarding: year to date 5 (March: 1)
- Referrals into Adult Assessment: year to date 774 (March: 58)
- 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 70 (March: 4)
- Referrals into Adult Assessment Team relating to visual impairment: year to date 56 (March: 3)
- Referrals into Adult Assessment Team relating to hearing impairment: year to date 17 (March: 1)







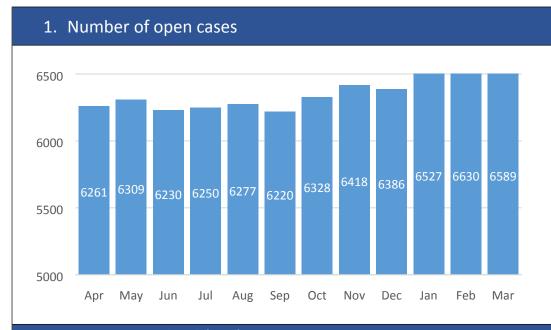


## **Assessment and Outcome Focussed Care Planning**

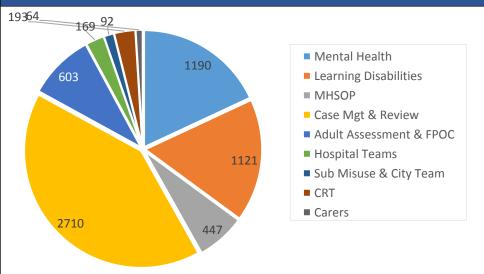
What is working well?	What are we worried about?	What do we need to do?	
<ul> <li>Provision of timely reablement services to support people who are currently eligible for CRT to maintain or regain independence.</li> </ul>	<ul> <li>Only a small proportion of people who potential could benefit from CRT services receive a service from CRT. Most people accessing homecare from the community do not receive a reablement service first.</li> </ul>	<ul> <li>Develop a business case and implement new ways of working in the CRT to work towards everyone who potentially receives long term home care receiving a reablement service first.</li> </ul>	
	<ul> <li>Embedding positive risk taking and the trailing strength based approaches.</li> </ul>	<ul> <li>Programme of strengths based training is currently rolling out across Adult Services.</li> </ul>	

### **Key Statistics**

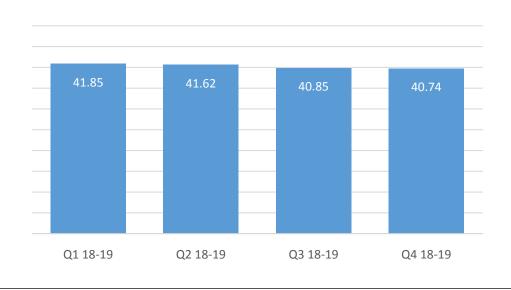
- Number of completed Well-being Assessments in secure estate: year to date is 8
- Number of people who had review: year to date 3,498, number of reviews completed 4,599
- Advocacy Offer At the referral and/or assessment stage, 19% of adults answered No to "is the person able to participate fully in the assessment, Care & Support Planning or safeguarding process (1430 / 7534 people). Of those, 87% 1245 people had an appropriate person to assist them, 3% (39) answered no and 10% (146) didn't have the answer recorded.
- Number of Care & Support Plans outcome No Longer Required: year to date 57 (March: 2)



## 2. Number of open cases per team March 2019



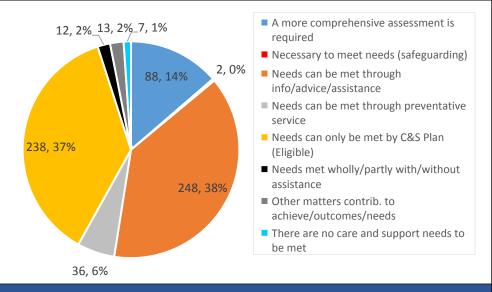
### 3. Average caseload (FTE)



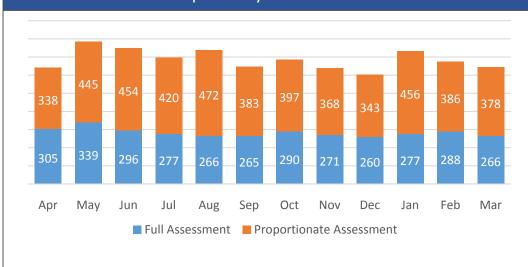
### 4. Number Well-being Assessments completed by month



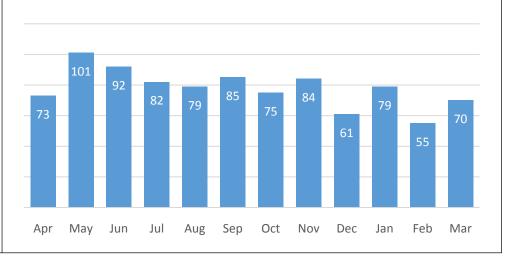
# 5. Number of Well-being Assessments completed by outcome March 2019



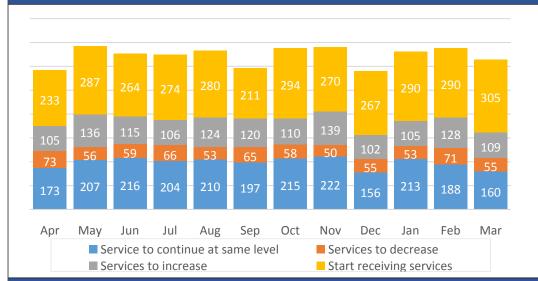
# 6. Number of Well-being Assessments - Proportionate and Full Assessments completed by month



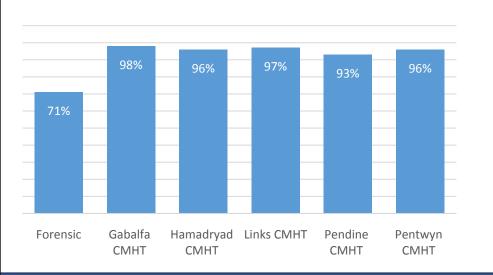
## 7. Number of Well-being Carers Assessments completed by month



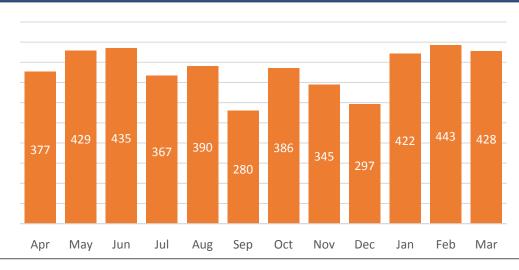
### 8. Number of Care & Support Plans completed by outcome



# 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 (April 2018 – March 2019)

Team	Total Pending
Adult Assessment	14
Case Management Team	15
City Centre Team	4
Community Drug and Alcohol Team	3
Hospital - Llandough	7
Hospital - UHW	15
Learning Disabilities	171
MHSOP	30
Review Team	274
Total	533

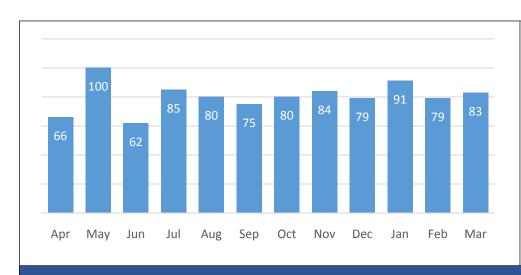
## Commissioning & Service Provision

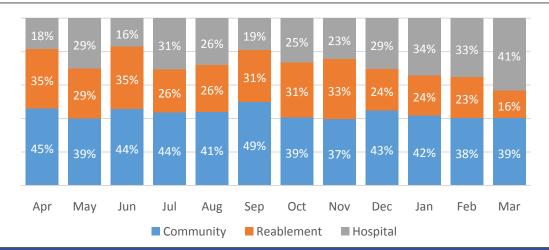
	What is working well?	What are we worried about?	What do we need to do?
•	A number of contracts with Voluntary Organisations have a strong prevention focus; these provide good value for money and achieve good outcomes.	<ul> <li>Delays in the setting of 2018/19 fees for providers and the risk of legal challenge.</li> </ul>	A new approach that focuses on planned visits that prevent the need to instigate the Escalating Concern process is required.
•	We have some good examples of including people in the commissioning process to drive up quality in provision, e.g. supported living tender.  We have a commissioning framework and contract management framework that clearly sets out our key commissioning priorities and our approach.	<ul> <li>Number of care homes and domiciliary providers in escalated concerns reduces the opportunity for proactive work to improve quality.</li> </ul>	<ul> <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>
•	Positive examples of regional commissioning activities, e.g. development of joint escalating concerns process, Advocacy Gateway for adults, Learning Disability Strategy.		opportunities.
•	Significant work with Supported Living team to remove £500k overspend over last year. Closure of inappropriate and old stock. Improved management of vacancies.		

Key Statistics

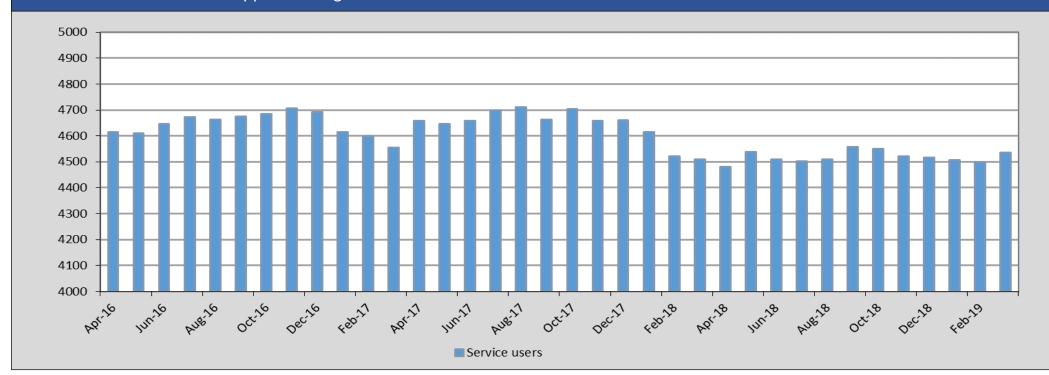
- Average age of people in entering of residential care is 84 (median age is 86) during Q4 2018-19
- Average length of time adults (aged 65 or over) are supported in residential care homes is 925 days Q4 2018-19

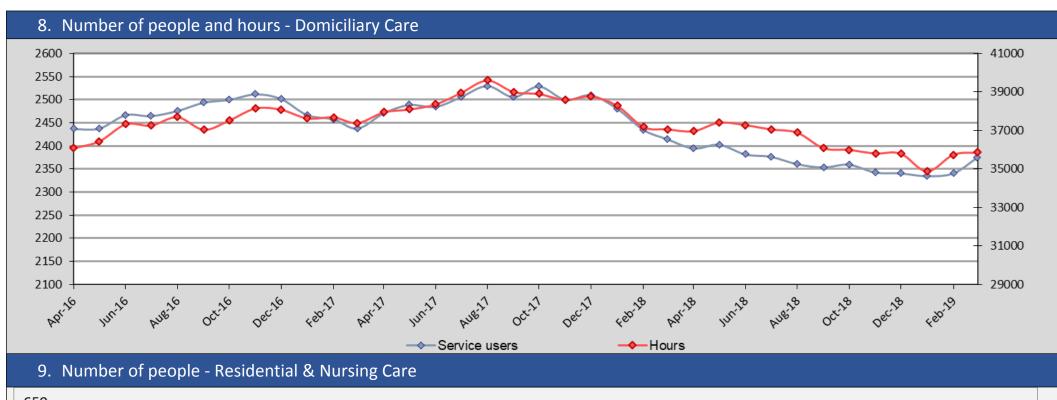


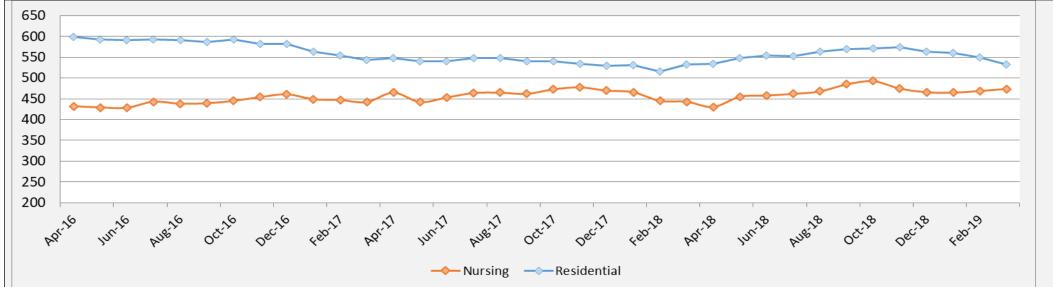




### 7. Number of Care and Support Packages







## Safeguarding (Adult)

What is working well?	What are we worried about?	What do we need to do?
<ul> <li>An action plan has been developed to work on a number of areas ahead of the implementation of the new operating model. Quarter 4 performance against the 7 day enquiry target has improved.</li> </ul>	<ul> <li>Training around understanding an 'adult at risk' is required.</li> <li>Management of investigations.</li> </ul>	<ul> <li>Delivery of 'adult at risk' training has commenced.</li> <li>Audit underway to understand reasons for delay.</li> </ul>

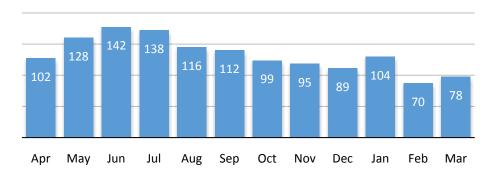
## **Key Statistics**

• Adult Safeguarding weekly monitoring of contacts completed report commenced 1st October 2018

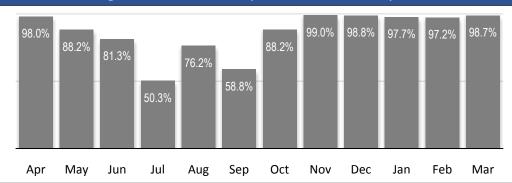
## **Contracts & Service Development Team Escalating concerns – March 2019**

Domiciliary		Residential/Nursing Care Homes	
Provider Performance Meetings	2	Provider Performance Meeting	4
Joint Interagency Monitoring Panel	0	Joint Interagency Monitoring Panel	1
Closure Procedure (HOSG)	0	Closure Procedure (HOSG)	0
Number of issues reported	18	Number of issues reported	7
Escalating concerns processes closed	0	Escalating concerns processes closed	0

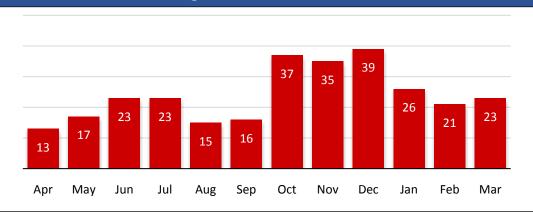
### 1. Number of contacts received



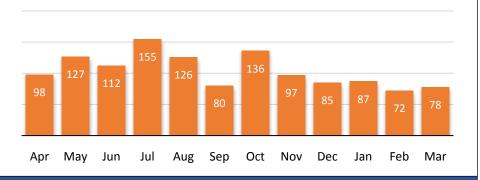
### 3. Percentage of contacts completed within 7 days



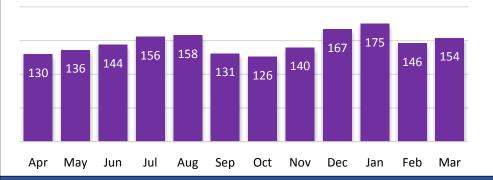
### 5. Number of investigations started



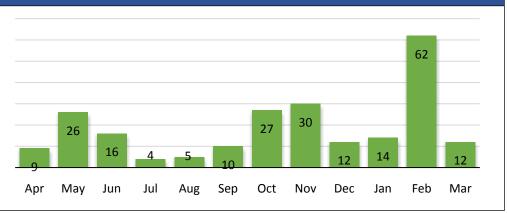
### 2. Number of contact records completed



### 4. Number of pending investigations



### 6. Number of investigations completed



## Managing People, Resources, Systems and Processes

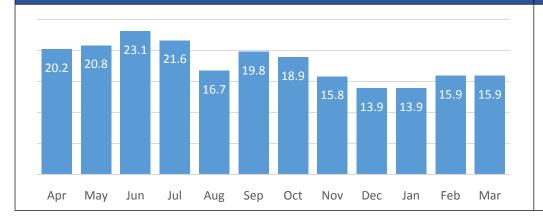
What is working well?	What are we worried about?	What do we need to do?
Good staff retention across Adult Services, low levels of agency workforce.	<ul> <li>Impact of sickness levels in key service areas</li> <li>Recruitment specifically into Grade 8 and Approved Mental Health Practitioner (AMHP) vacancies is difficult.</li> </ul>	<ul> <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**

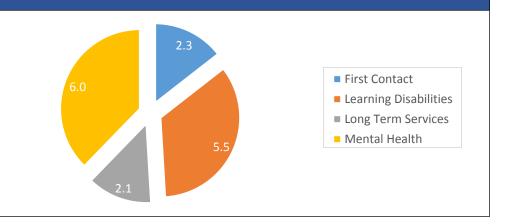
- Sickness rate (FTE) target for 18-19 is 16.5
- Top 4 reasons for sickness (March-19):
  - 1. Chest-respiratory
  - 2. Stomach-liver-kidney
  - 3. Infection
  - 4. Eye-Ear-Nose-Mouth

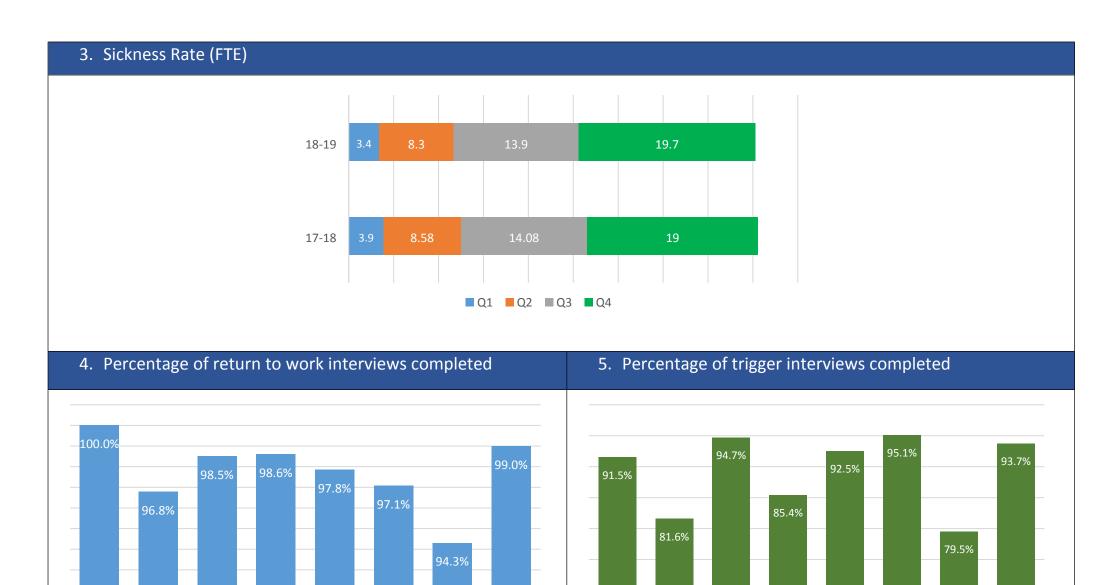
- Return to work interviews Quarter 4 99% (208 total, 2 pending)
- Trigger interviews completed Quarter 4 93.7% (109 total, 4 pending, 1 missed)

#### 1. Number of social work vacancies



### 2. Social work vacancies by service area March 2019





Quality of Practice

Q1 17-18 Q2 17-18 Q3 17-18 Q4 17-18 Q1 18-19 Q2 18-19 Q3 18-19 Q4 18-19

Q1 17-18 Q2 17-18 Q3 17-18 Q4 17-18 Q1 18-19 Q2 18-19 Q3 18-19 Q4 18-19

What is working well?	What are we worried about?	What do we need to do?
<ul> <li>Listening to people, giving them choice and control</li> <li>Wide range supported living accommodation with good monitoring practices.</li> </ul>	Consistency of practice across all teams.	<ul> <li>Introduction of strength based practices.         A major programme of work to embed strength based approaches in partnership with Social Care Wales launched in April 2019.     </li> </ul>
<ul> <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>	There is a need to ensure consistency of quality assurance processes to support practice improvement.	Implement a Quality Assurance Panel to work on ensuring consistency of quality assurance process and embed learning from audits and celebrate success.

## **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 (as at 30<sup>th</sup> April 2019): sent to: 3050, response rate 33% (1002) \*
- 2018-19 Survey for Carers (as at 30<sup>th</sup> April 2019): sent to 343, response rate 36% (122) \*

<sup>\*</sup>please note these are indicative figures

