# **ADULT SERVICES**

# PERFORMANCE REPORT

**QUARTER 1 2019-20** 







### **Executive Summary**

### What is working well?

- Care Inspectorate Wales (CIW) visited the First Point of Contact (Adult Services) in April 2019 to undertake focused activity. The feedback received was really positive and demonstrated that staff who worked within or alongside the FPoC were enthusiastic and felt that the co-location made a real difference in terms of collaborative work. CIW noted "We found staff treated people with respect and provided people with a positive first point of contact. The staff we spoke with were enthusiastic and positive about working collaboratively with other disciplines and the small sample of people we spoke with who had been in contact with services were positive about the response they received".
- A brand new First Point of Contact (FPoC) Hospital Team within Independent Living Services (ILS) was established at the beginning of April to work in partnership with Health, Social Services and Third Sector colleagues. It is located at the University Hospital of Wales. There is close integrated working between the team and the hospital social work team, with regular meetings every morning to share information with the duty Social Worker who is based in the FPoC room.
- Cardiff Council proudly joined partner agencies, The Vale Council and Cardiff and The Vale University Health Board, at the launch of the joint regional Learning Disability Strategy Promoting Independence and Improving Lives 2019-2024. The Strategy outlines the commitment of all partners to work together alongside people with Learning Disabilities and their carers to co-produce person-centred solutions to their needs. The event was well attended with a good mix of service providers, third sector organisations, people with learning disabilities and their families making up the 200 strong audience.

### What are we worried about?

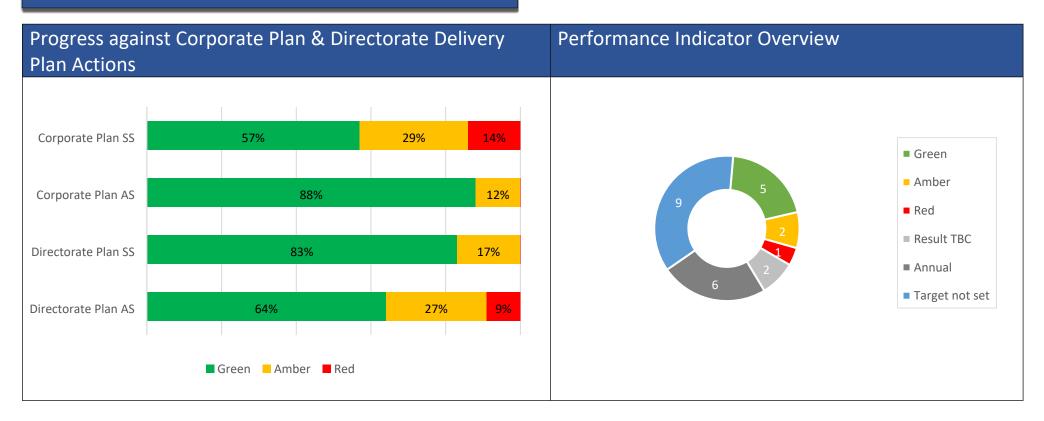
- Difficulties in recruiting to Approved Mental Health Practitioners in Adult Services.
- Capacity to take forward key pieces of work in Adult Services.
- Capacity within Adult Services Mental Health teams to complete **Deprivation of Liberty Safeguards (DoLS) assessments**.
- Regulation and Inspection of Social Care (Wales) Act (RISCA) 2016 which requires all domiciliary care workers to be registered by 2020.
- Increase in number of **Delayed Transfers of Care** (22 people aged 75+ compared with 15 in Quarter 1 2018/19).

### What do we need to do?

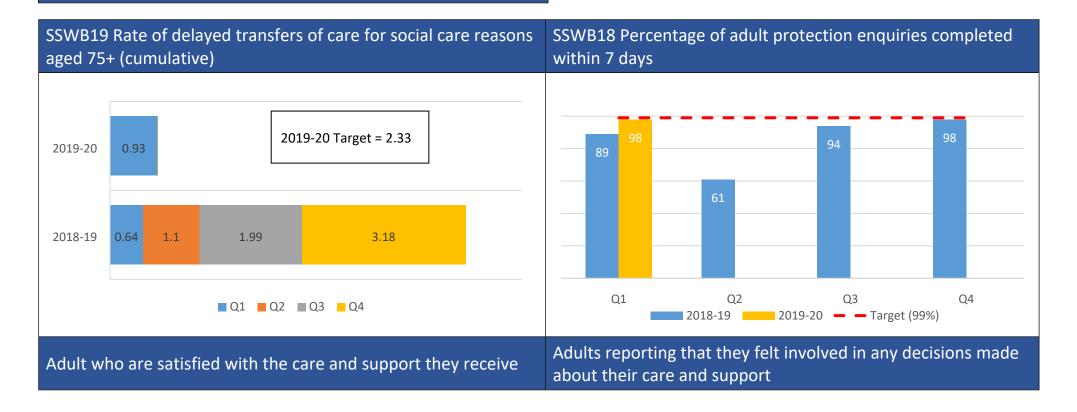
- Approved Mental Health Practitioner (AMHP) lead in post and AMHP posts advertised; AMHPs have access to regular support through supervision and AMHP forum. In addition, we are implementing the Association of Directors of Adult Social Services guidance around recruitment and retention of AMHPs.
- Work is underway to scope out what additional capacity is required in order to deliver on key pieces of work, such as the Adult Services Strategy.
- Action plan is in place to improve timeliness of **DoLS** assessments.

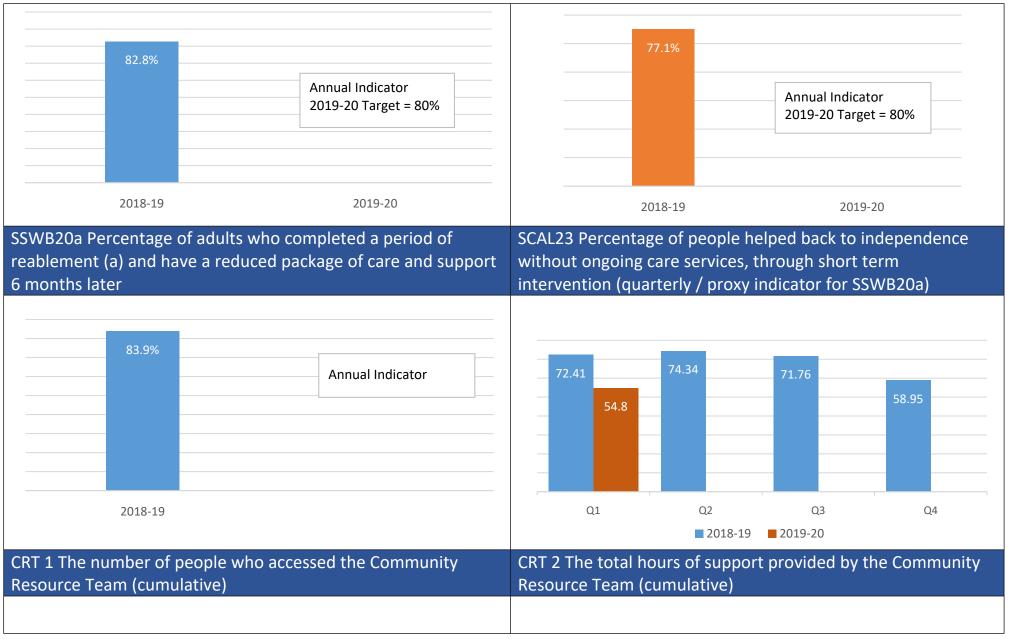
- A task and finish group to oversee implementation of the requirements of the **Regulation and Inspection of Social Care (Wales) Act (RISCA) 2016** and ensure that all relevant professionals are appropriately qualified and registered by 2020.
- **DToC** action plan to be developed.

## Quarterly Performance – Q1 2019-20

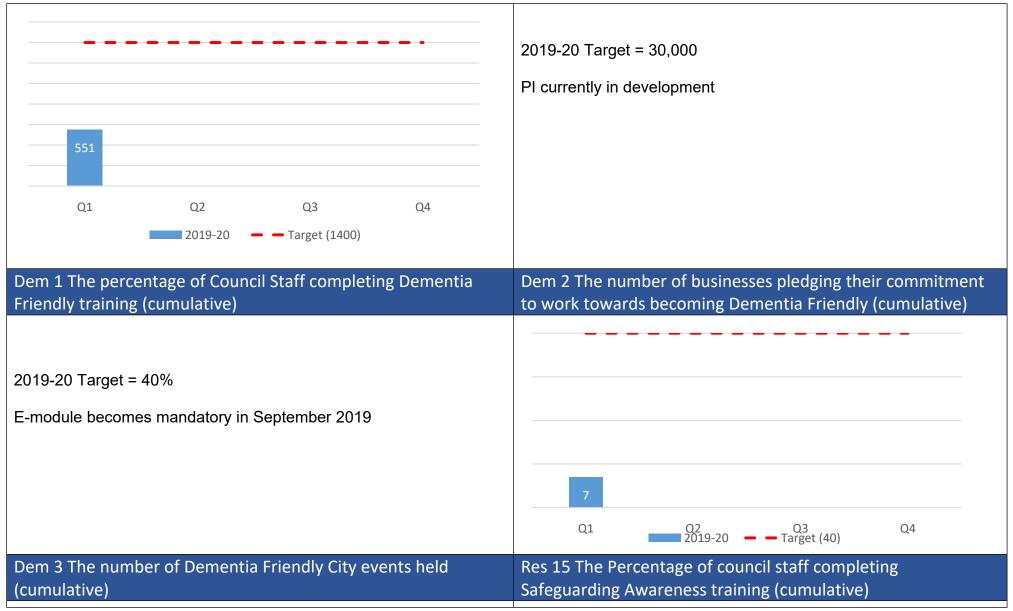


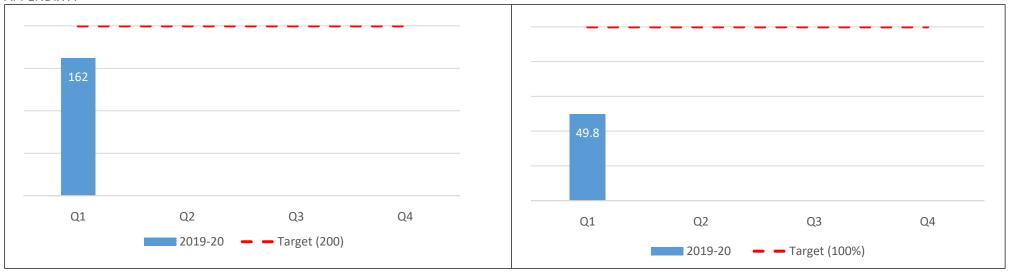
## Key Performance Indicators – Corporate Plan











# Prevention and Well-Being

What is working well?	What are we worried about?	What do we need to do?
Care Inspectorate Wales visited the First Point of Contact in April 2019 to undertake focused activity. The feedback received was really	Community Resource Team (CRT) capacity.	Current CRT system is in review with a view to trialling new model.
positive and demonstrated that staff who worked within or alongside the FPoC were enthusiastic and felt that the co-location made a real difference in terms of collaborative work.	Capacity in the Domiciliary Care Market is still fragile.	<ul> <li>Ongoing dialogue with providers.</li> <li>Test and learn session with IPC in relation to future model.</li> </ul>
<ul> <li>Locality Services Home Care Manager/s are working closely with re-ablement carers, the lead Health Manager for Occupational Therapy,</li> </ul>	<ul> <li>Increase in number of Delayed Transfers of Care (22 people aged 75+ compared with 15 in Quarter 1 2018/19).</li> </ul>	Action plan to be developed.

Health Hospital ward staff and Get Me Home Officers to better support a person's timely discharge from hospital and providing information and advice about Council services and activities within their communities.

- Collaborative working with Programme Partnerships team, Alzheimer's Society and Bilingual Cardiff and Dementia Friendly Cardiff.
- All teams have started strengths based training and systems are being reviewed to ensure that people are being supported to work in a strengths based way.
- Work commenced and in very early stages with Communities and GP clusters in a particular area to implement Multi Disciplinary Team working in the community.

- Transformation funding has only been secured for 18 months.
- Adoption of the pledge scheme by business limited capacity to target businesses, although networking has taken place.
- Through joint working with health secure more sustainable integrated funding.
- Contribute to the development of a formalised communication plan to encourage business to create supportive dementia environments.

### **Key Statistics**

• Number of Well-being Referrals:

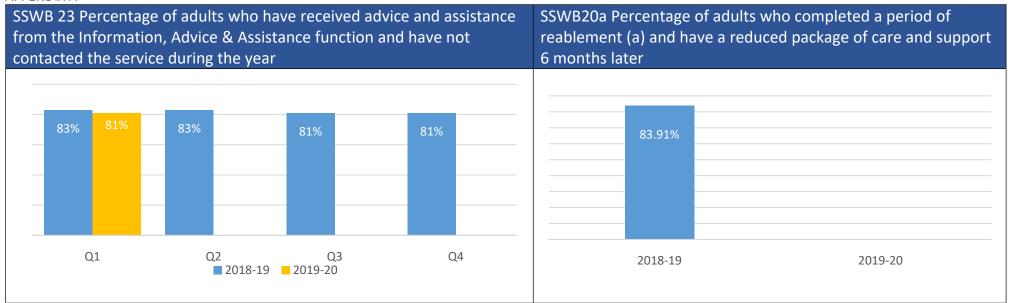
Mental Health Services for Older People: April: 10, May: 11, June: 14

Learning Disabilities: April: 7, May: 2, June: 4

Community Alcohol & Drug Team and City Centre Team: April: 9, May: 6, June: 8

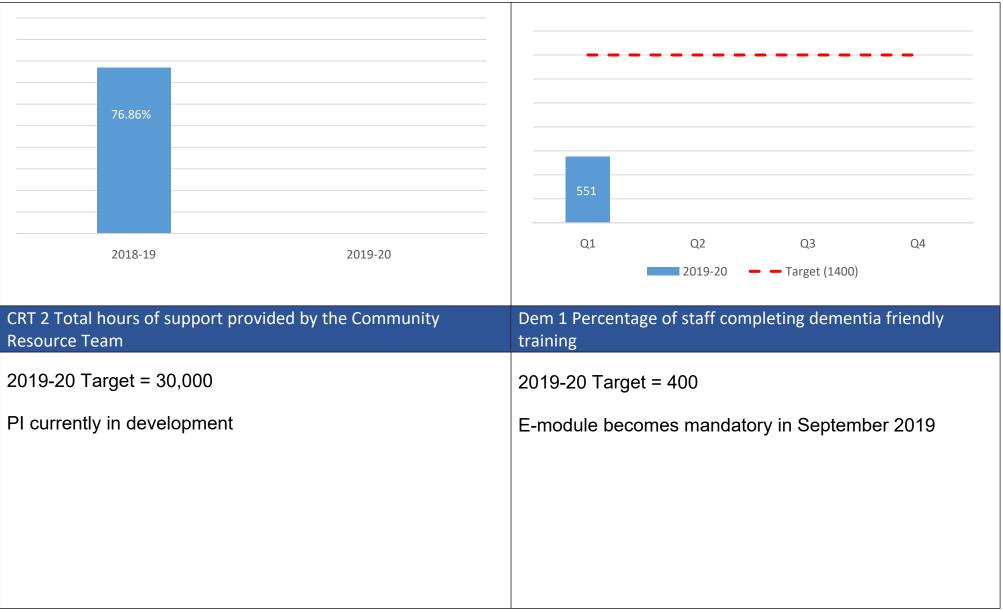
Hospital UHW & UHL: April: 33, May 48, June: 38 UHW First Point of Contact: April: 47, May: 69, June: 67

- Well-being Referrals pending as at 30<sup>th</sup> June: 39.
- Well-being Referrals outcome progress to safeguarding: April: 3, May: 1, June: 1
- Referrals into Adult Assessment: April: 60, May: 56, June: 40
- Referrals into Adult Assessment Team relating to capital limit threshold for care home placements (dropped funds in self-funding care home placements): April: 8, May: 8, June: 2
- Referrals into Adult Assessment Team relating to visual impairment: April: 5, May: 7, June: 5
- Referrals into Adult Assessment Team relating to hearing impairment: April, May & June: 0

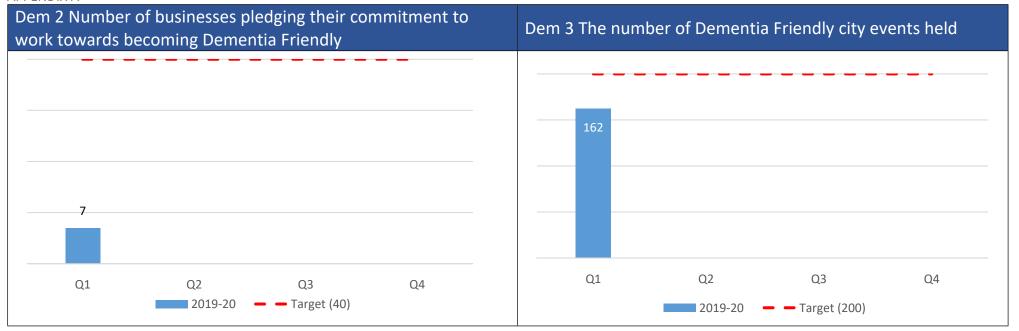


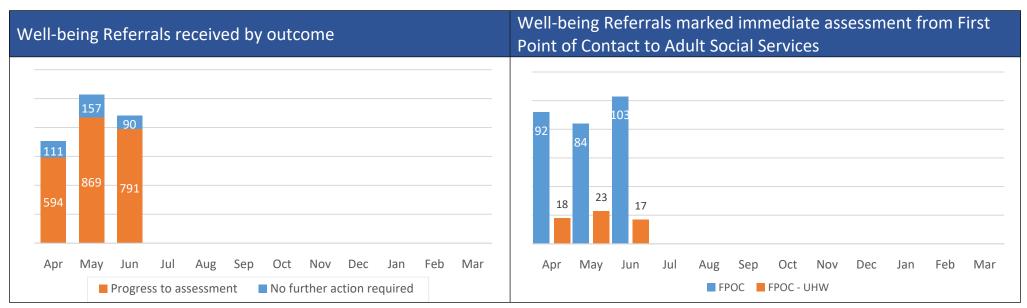
SSWB20b Percentage of adults who completed a period of reablement (b) have no package of care and support 6 months later

CRT 1 Number of people who accessed the Community Resource Team

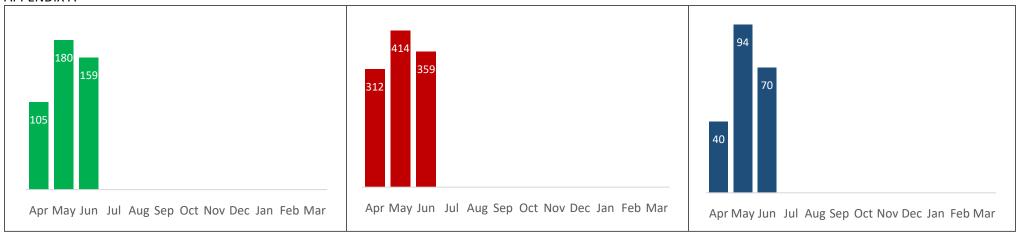


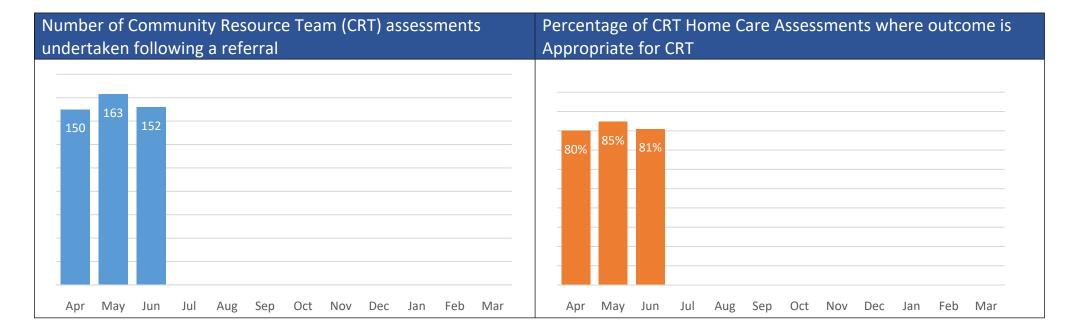
APPENDIX A

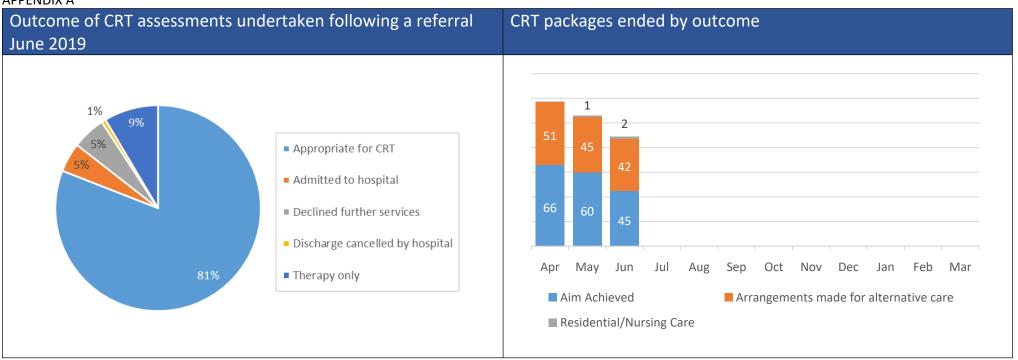




# Source of referral Self Family Carer Apr May Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar Other Organisation Professional **Health Professional**







# Assessment and Outcome Focussed Care Planning

What is working well?	What are we worried about?	What do we need to do?
<ul> <li>Comprehensive training programme has commenced in relation to a strength based model for Adult Services.</li> </ul>	Embedding strength based practice across the whole workforce.	<ul> <li>Ensure that engagement is continual and embed an approach which focuses on the strengths and resources people have in their own circles of family and friends.</li> </ul>
<ul> <li>Weekly catch up meetings are in place in relation to developing a new way of delivering domiciliary care and the pace of work has picked up since these have been</li> </ul>	<ul> <li>Progress in relation to the Community Services Review of mental health services.</li> </ul>	A further update following a root and branch review of progress will be presented in

#### put in place

 Engagement events have assisted in the development of the Cardiff & Vale Carers Strategy and associated priorities.

- Capacity within Adult Services Mental Health teams to complete Deprivation of Liberty Safeguards (DoLS) assessments.
- Decrease in the percentage of carers assessments offered.

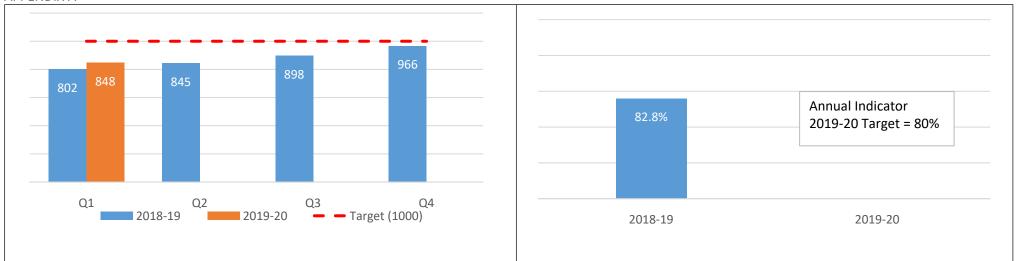
#### Quarter 3.

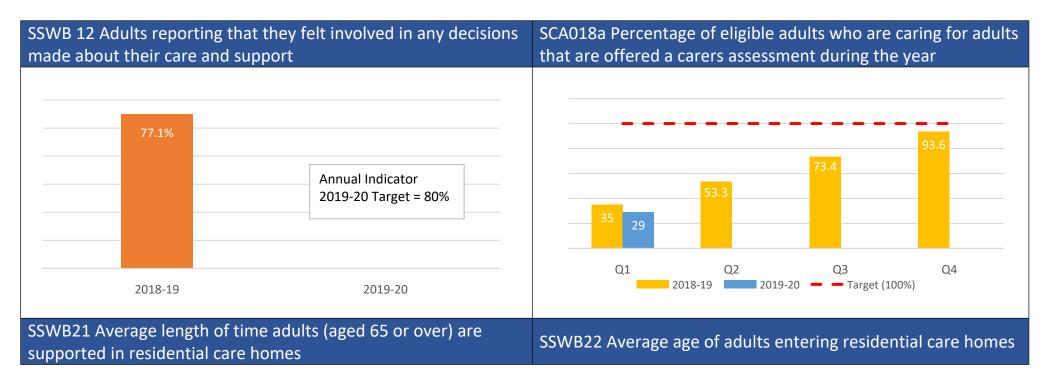
- Continue to implement action plan to improve timeliness of DoLS assessments and review of regional service underway.
- This PI is cumulative as carers are reviewed during the year, so performance will improve as the year progresses.

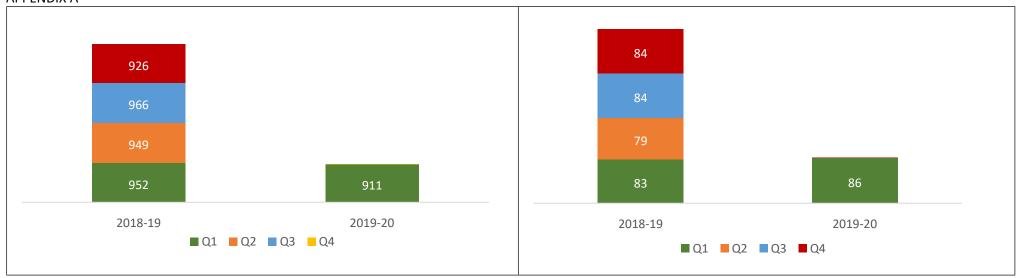
### **Key Statistics**

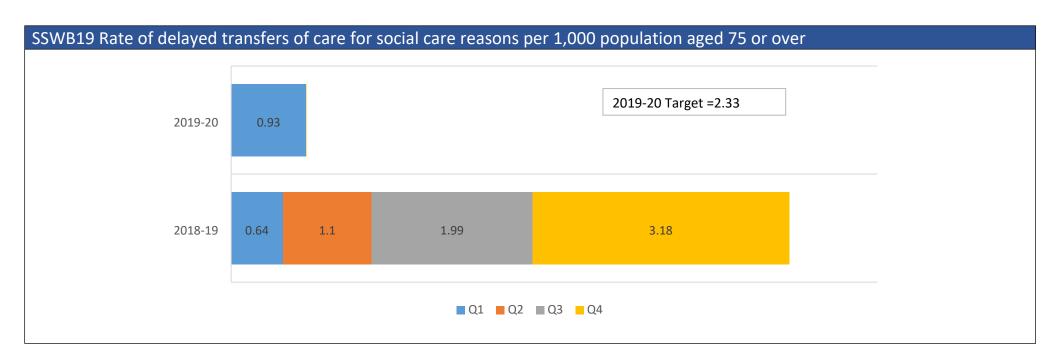
- Number of completed Well-being Assessments in secure estate: April & May: 0, June: 1
- Number of people who had review: April June: 1,158
- At the referral and/or assessment stage, 18% of adults answered No to "is the person able to participate fully in the assessment, Care & Support Planning or safeguarding process (523 / 2,988 people). Of those, 90%, 470 people had an appropriate person to assist them, 3% (14) answered no and 7% (39) did not have the answer recorded.
- Number of Care & Support Plans outcome No Longer Required: April-June 13

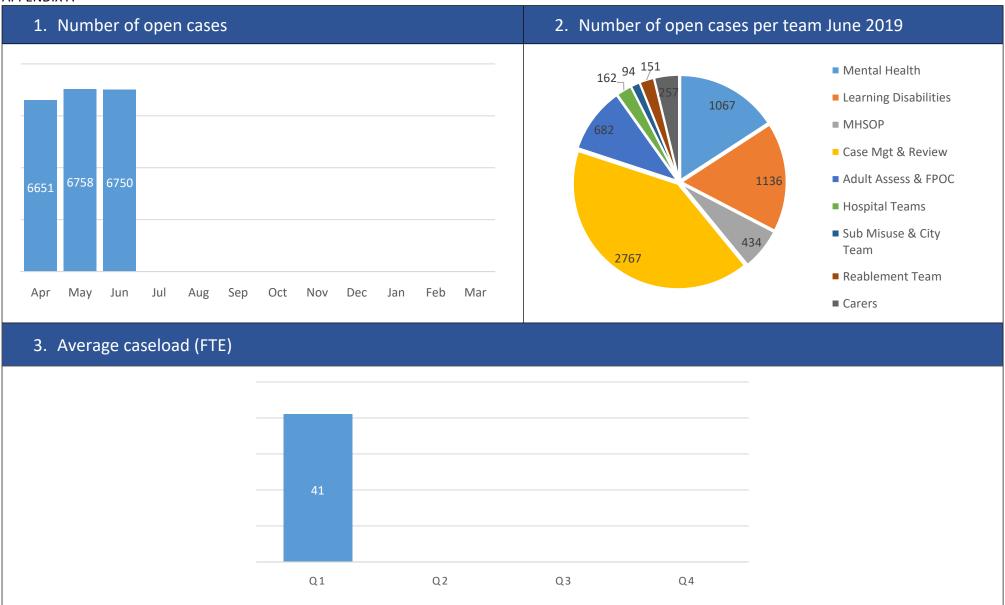
SCAL25a Total number of children and adults in need of care and	SSWB13 Adults who are satisfied with the care and support
support using the Direct Payments scheme	they received

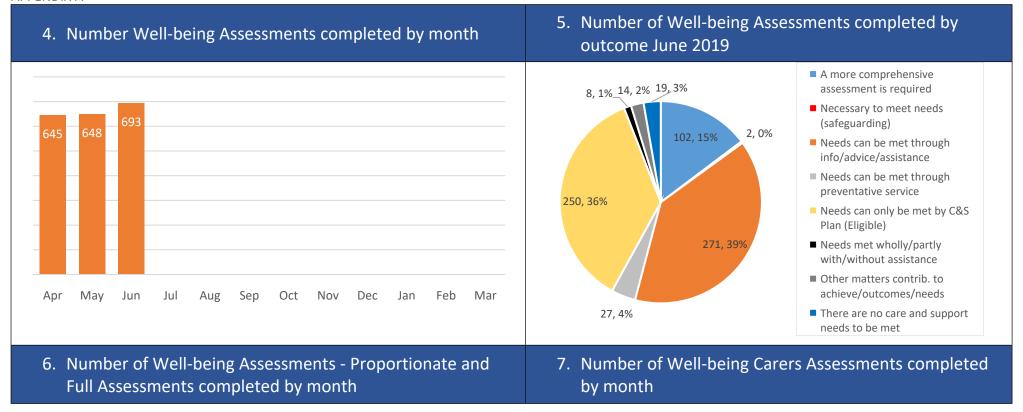


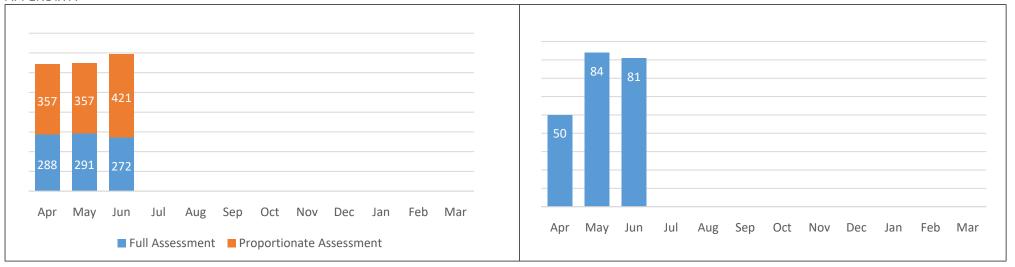


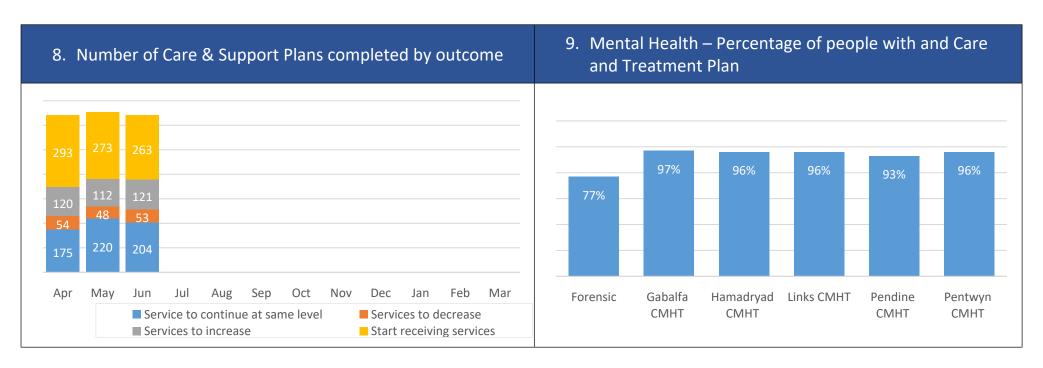


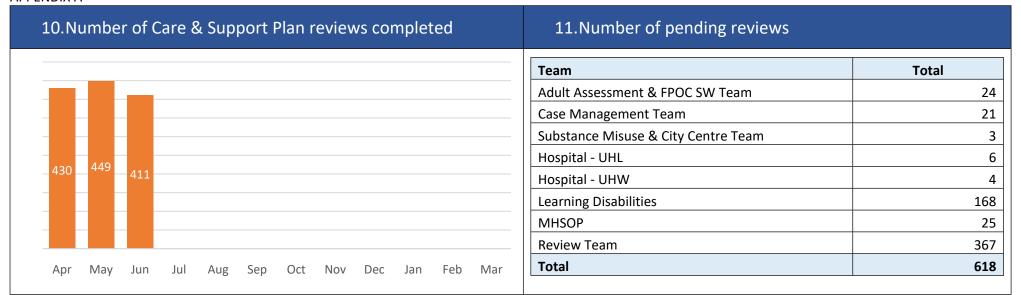










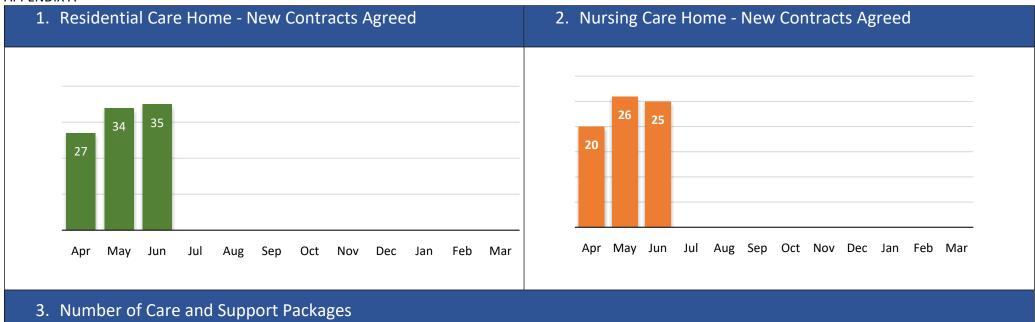


# Commissioning & Service Provision

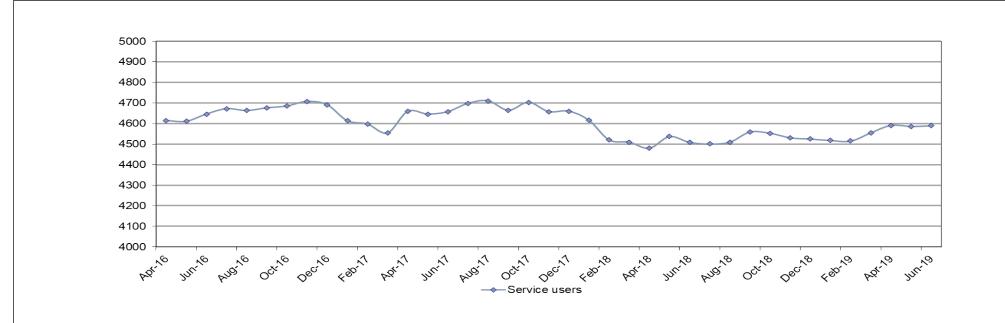
What is working well?	What are we worried about?	What do we need to do?
<ul> <li>Launch of Learning Disability Commissioning Strategy "Promoting Independence and Improving Lives".</li> </ul>	Cost and capacity in the domiciliary care sector.	Work with providers to understand how these issues can be addressed moving forward.
<ul> <li>Authority to invite to tender for Supported Living for Adults with a Learning Disability agreed and obtained and issued during Quarter 1.</li> </ul>	Increased demand for supported living accommodation.	Work with Housing and partners to identify to develop more accommodation options locally to support people to return to Cardiff with the right care and support.
<ul> <li>Although the group of providers who have engaged in the cost of care exercise is relatively small, engagement has been good and many providers have reported that they felt the process has been worthwhile.</li> </ul>		

### **Key Statistics**

- Average age of people entering of residential care April: 86, May: 86.3, June: 84.1
- Average age of people entering nursing care April: 83.3, May 80.8, June: 83.0

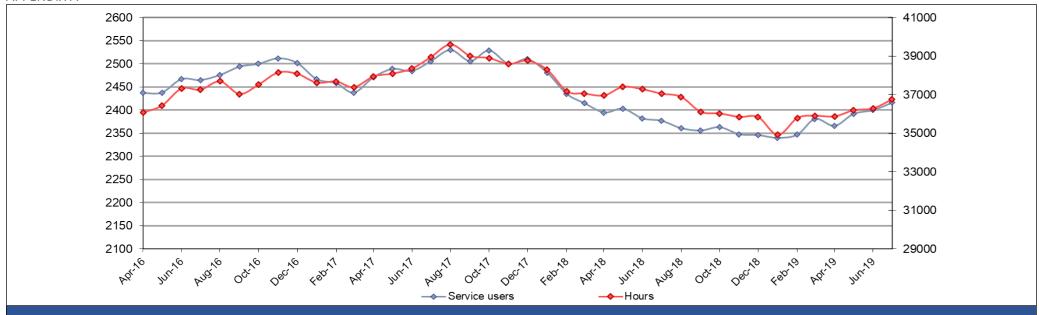




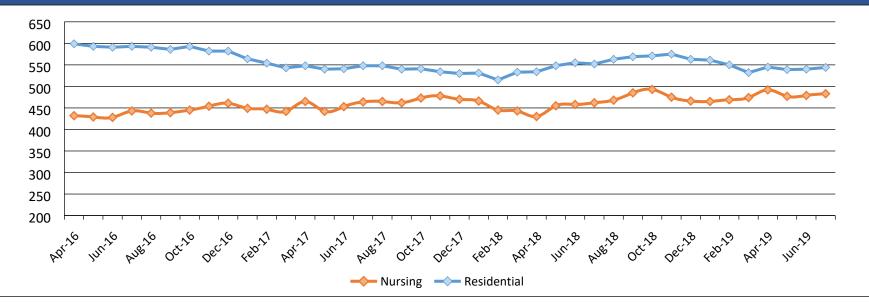


## 4. Number of people and hours - Domiciliary Care





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



# Safeguarding (Adult)

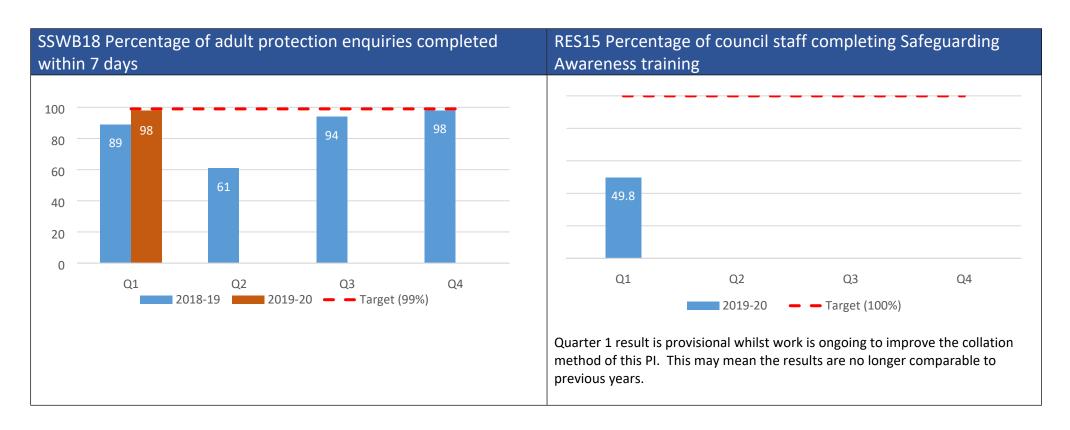
What is working well?	What are we worried about?	What do we need to do?
<ul> <li>Exploitation Strategy is being developed to include adults and all forms of exploitation.</li> <li>The bespoke training for Designated Lead Managers (DLMs) has been positively received. It has enabled both DLMs and Operational Managers in Adult Services to understand each other's roles better and strengthen working relationships between Adult Services and the Safeguarding team with the aim of improving the quality of information recorded.</li> </ul>	<ul> <li>Ensuring a consolidation of approaches from Children's to Adult Services.</li> </ul>	Discuss and develop clear pathways between Children's and Adult Services over a number of months and develop and agree joint processes and procedures. Consider good practice from elsewhere – Family Safeguarding + model.

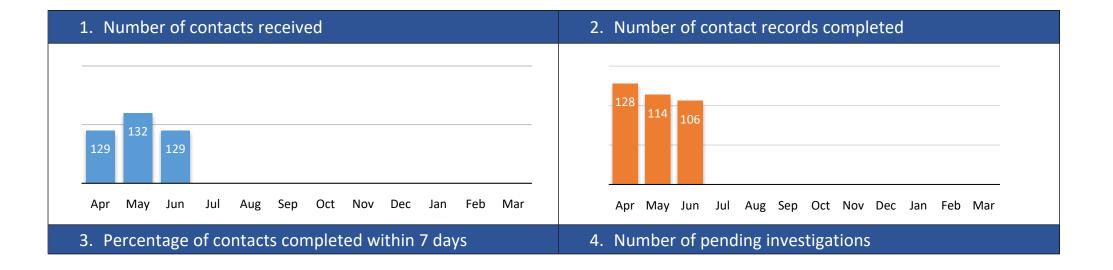
## **Key Statistics**

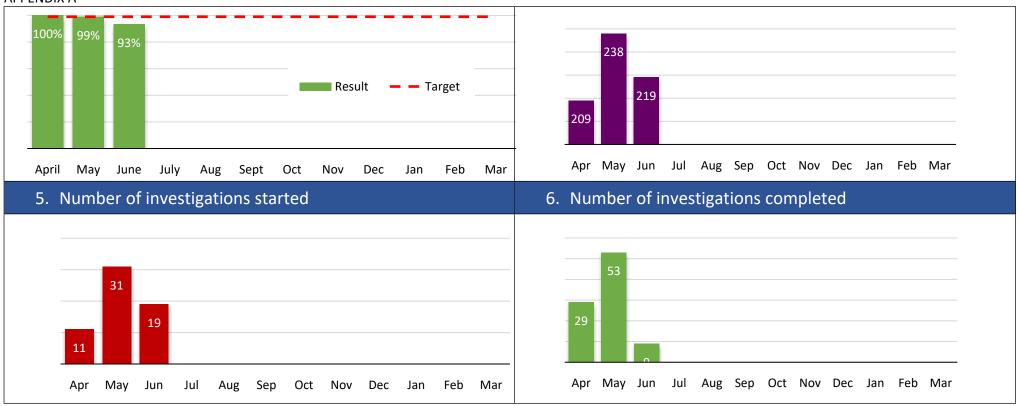
• Corporate Safeguarding report card available from Quarter 1 2019-20

**Contracts & Service Development Team Escalating concerns – June 2019** 

Domiciliary		Residential/Nursing Care Homes	
Provider Performance Meetings	2	Provider Performance Meeting	5
Joint Interagency Monitoring Panel	0	Joint Interagency Monitoring Panel	1
Closure Procedure (HOSG)	0	Closure Procedure (HOSG)	0
Number of issues reported	38	Number of issues reported	9







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.
- Appointment to senior management posts in Adult Services.
- Recruitment to Approved Mental Health Practitioner (AMHP) vacancies is difficult.

- Registration figures for external providers in response to the Registration and Inspection of Social Care (Wales) Act 2016 remain low.
- Getting new starters into post in a timely manner.
- Sickness levels in some parts of adult services

- Approved Mental Health Practitioner (AMHP) lead in post and AMHP posts advertised;
   AMHPs have access to regular support through supervision and AMHP forum. We are currently reviewing retention packages across a number of local authority areas. In addition, we are implementing the Association of Directors of Adult Social Services (ADASS) guidance around recruitment and retention of AMHPs.
- Work with providers on an individual basis to guide them through the registration process.
- Learn from experience and developments in Children's Services.
- Increased capacity in place to support sickness management.

### **Key Statistics**

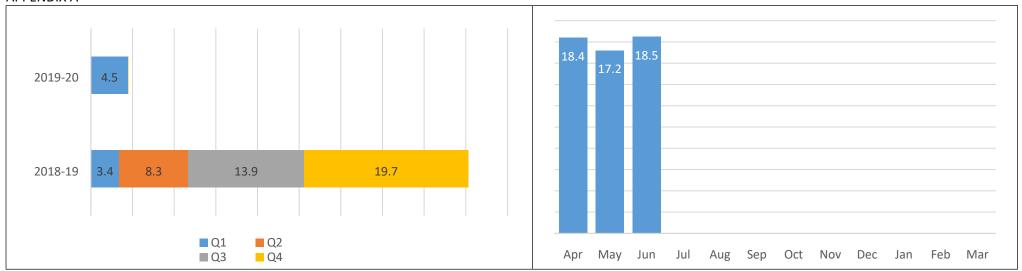
Sickness - Adult Services

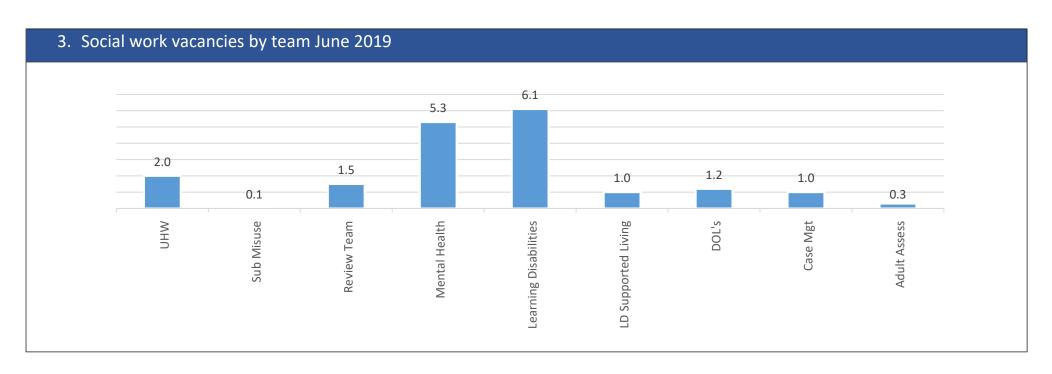
	Ave FTE Staff No. (forecast)	FTE Target	Target FTE days lost	FTE days lost	Forecast based on Qtr result	RAG
Q1						
	535	16.4	8771	4.50	19.33	

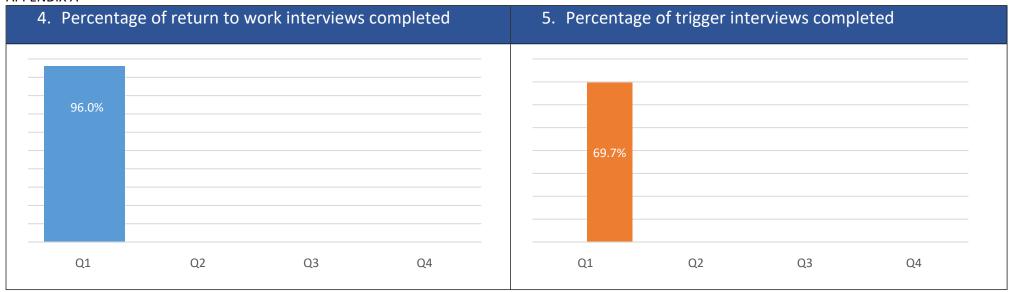
- Top 4 reasons for sickness during the quarter:
  - Stomach-Liver-Kidney
     Chest-Respiratory
     Stress
     Eye-Ear-Nose-Mouth

1. Sickness Rate (FTE)

2. Number of social work vacancies (Total FTE = 137.4)







# Quality of Practice

What is working well?	What are we worried about?	What do we need to do?
<ul> <li>Quality Assurance Framework developed.</li> <li>Letter received from Ombudsman recognising good practice in relation to complaints – no action required in 2018-19.</li> </ul>	Consistency of practice across all teams.	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.
	<ul> <li>There is a need to ensure consistency of quality assurance processes to support practice improvement.</li> </ul>	Implement a Quality Assurance Panel to work on ensuring consistency of quality assurance process and embed learning from audits and celebrate success.
	<ul> <li>Ensuring consistency of quality assurance mechanisms across Social Services where appropriate.</li> </ul>	Session planned for Quarter 2 to map our areas of consistency across Social Services.

# **Key Statistics**

Adult & Carer Survey 2018-19					
Survey Type	Population	Sent	Response	Response Rate	
Adult Survey	4,513	2,705	865	32%	
CRT Survey	191	191	75	39%	
IAA Survey	154	154	55	36%	
Adults Survey Total	4,858	3,050	995	33%	
Carers Survey Total	362	353	126	36%	

Compliments & Compla	ints	
Stage 2 complaints	No.	Compliments
Open from Q4	1	10
Initiated during Q1	0	
Closed during Q1	0	
Open	1	
	Stage 2 complaints Open from Q4 Initiated during Q1 Closed during Q1	Stage 2 complaints No.  Open from Q4 1  Initiated during Q1 0  Closed during Q1 0