

2011/12 Adult Social Care Directorate Scorecard

Reporting Period : Quarter 4 2011/12

Contribution to Cross Council Priorities	Progress Summary	Overall Progress	Supporting Measures	Q1	Q2	Q3	Q4
Appraisals	At 31st March the Directorate had 95% outturn of completed appraisals. 6 Month Reviews are at 80% however issues around recording in SAP indicating this figure is under reporting. In preparation for the Performance and Learning System launch in May 2012, services are currently verifying and validating structures reporting relationships. A Communication Plan is being rolled out, briefing all appraising managers across ASC.	Amber	Every year 100% of staff have an appraisal	51%	92%	96%	95%
Staff Engagement	ASC DLT have approved and is engaged in a cross-Directorate communications and engagement plan with 'off-site' sessions/events throughout 2012. Feedback from the sessions has been excellent so far. These sessions have been supported by the introduction of Key Messages from DLT sent to all appraising managers on a monthly basis and the development of a new 'Better Lives DVD' that shows the work that is happening to transform our services.	Amber	Increase the level of staff engagement NB The engagement score measures the extent to which the organisation is satisfying what employees need to feel engaged	N/A	N/A	72% baseline	N/A
Consultation	The directorate only submitted a small number of reports, so any that fail against VAL3 significantly affected the overall score. Not all contract extension reports gave evidence that ongoing user feedback was part of the evidence used to make the decision to extend. Not all reports made it clear how the results of consultation impacted on the final decision. Officers should remember to reference Talking Point records of relevant consultation activity.	Amber	Every year we will be able to evidence that consultation has taken place in 100 per cent of major decisions affecting the lives of communities	To be reported in Quarter 4			88%
Equality	The one report that did not provide sufficient evidence to meet the criteria for this indicator, was a delegated decision to extend an existing contract. Whilst the contract is focused on Leeds Mental Capacity Independent Advocacy Service and so equality considerations are embedded within the contract and delivery of the service, within the relevant section of the report there was not explicit narrative to explain how due regard to equality had been determined within the contract extension and if it was not relevant, A QA undertaken of how due regard to equality was demonstrated overall within reports has shown that across the board, reports from Adult Social Care are complying with the requirements of the report writing guidance and only in a few instances are minor improvements needed. The outcomes from the QA exercise will be discussed within the Directorate to inform future reports and the report clearance process.	Amber	Every year we will be able to evidence that equality issues have been considered in 100 per cent of major decisions	To be reported in Quarter 4			94%
Keep within budget	Although budgeted procurement savings for residential accommodation have not been achieved in the current year, this has been partly offset by savings on placement numbers in the independent sector, which have averaged 5 per week below the budgeted number. External funding of £6.2m has also been received from the health authority for investment in social services	Green	No variation from agreed directorate budget in the year	£2,849,000 overspend	£2,675,000 overspend	£1,262,000 overspend	£587,000 underspend

Directorate Priorities	Progress Summary	Overall Progress	Supporting Measures	Q1	Q2	Q3	Q4
Create the environment for effective partnership working	<p>The Leeds shadow Health and Wellbeing Board (HWB) has been meeting since October 2011. The board reports to the Leeds Initiative Board which is the partnership agency for the city bringing together public, private and third sector bodies. An organisational development programme has been agreed by the board and is jointly funded by NHS Airedale, Bradford and Leeds and Leeds City Council. The work programme of the board will be used as a basis for the themes it focuses on, and will explore the work that underpins the city priorities. It will include three types of learning:</p> <ul style="list-style-type: none"> • Action orientated learning using visits and panels of experts to explore issues in the community. • Masterclasses to innovate at a strategic level. • Coaching and mentoring so that leaders can develop as individuals.. <p>This will be supplemented by learning programmes for individual organisations represented on the board. This includes development sessions for elected members - and recently held workshops on health inequalities, city priorities and building relationships with Clinical Commissioning Groups (CCGs). There is acknowledgement from the board that as some partners are new to this type of partnership working, some work needs to be done to break down organisational culture barriers. As a result of this there are already plans to hold a similar session for the CCGs so that they can learn about how the local authority operates</p>	Green	N/A	N/A	N/A	N/A	N/A
Deliver the Health and Wellbeing City Priority Plan	<p>The Leeds shadow Health and Wellbeing Board (HWB) leads on overseeing the agreed four year city priorities which have the ambition of making Leeds the best city for health and wellbeing:</p> <ul style="list-style-type: none"> • tackling health inequalities; • protecting people from the harmful effects of tobacco; • developing integrated health and social care services that reduce the need for people to go into hospital or residential homes; and • improving the patient experience of care. <p>It has also supported the recent refresh of the Joint Strategic Needs Assessment and is currently developing the Joint Health and Wellbeing Strategy and an approach to establishing HealthWatch Leeds.</p>	Green	N/A	N/A	N/A	N/A	N/A

<p>Help people with poor physical or mental health to learn or relearn skills for daily living</p>	<p>The reablement service has received over 500 service users this year and performance information shows the service is having a positive impact on enabling continued independence and quality of life for those receiving the service. Recent figures show that 62% of people experienced a reduction in their need for support. Tracking people over time found that 89% did not receive support six months after reablement and 61% were still independent a year later. Figures also showed that reablement improved the quality of life with recipients generally feeling they had more control, as well as feeling cleaner, better fed, and safer.</p> <p>The reablement model for hospital discharges, new community referrals and following unscheduled review has gone live across Leeds. People with learning disability, those coming via the Joint Care Management Teams and out of area hospitals will also be considered for reablement services from April/May 2012. Work is also underway to boost referrals into the reablement service, and to improve Skills productivity, with a productivity action plan drafted for use by senior operational managers. An Intermediate Care (IC) and Reablement Project Board has been formed and appointed a Project Manager from Adult Social Care to develop a business case to support the bringing together of these services. This will enable patients and service users to access the full range of rehabilitation services across Leeds in a seamless way. Work has started to develop a joint short term residential facility at Harry Booth house which will provide both intermediate care and reablement services.</p> <p>Care management teams have been realigned from March 2012 to include an increased focus on reablement for all new service users and aligning more closely with area health teams so that joint support can be provided to maximise independence. An important recent development has been to enable better access to these services for people leaving hospital.</p>	<p>Green</p>	<p>Increase the number of people successfully completing a programme to help them relearn the skills for daily living.</p>	<p>166</p>	<p>317</p>	<p>462</p>	<p>563</p>
<p>Extend the use of personal budgets</p>	<p>During 2011/12 significant progress has been made in realigning the everyday practice of the care management service so that self directed support and personalisation are integral features of how we work and provide support. Further work is required and underway to embed these practices across a complex and changing social care landscape. Provisional end of year figures show that we have exceeded the target of making self directed support available to 45% of all users of community based social care services.</p> <p>A particular challenge is to build capacity in communities and in the social care market so that it is equipped to support those with a personal budget and provide personalised services, Leeds is at the forefront of innovation in this area. The Combining Personalisation with Community Engagement (CPCE) project is working with Neighbourhood Networks to develop a model proving a brokerage service and enabling people to purchase their own support. Visits and assessments with 15 older people in the localities have been undertaken, and stronger links are being developed with reablement, Intermediate care and hospital discharge to identify more people.</p> <p>Funding has been secured to provide direct payments for respite services to carers across Leeds. A partnership arrangement with Carer Leeds, HS and ASC will oversee the implementation of this project. Two dedicated social workers have been recruited and will be based in the carers service to work specifically with carers and support them to access self directed support.</p>	<p>Green</p>	<p>Increase percentage of service users and carers with control over their own care budget</p>	<p>25%</p>	<p>31%</p>	<p>33%</p>	<p>52%</p>
			<p>Increase percentage service users who feel that they have control over their daily life.</p>	<p>79%</p>	<p>75%</p>	<p>N/A</p>	<p>75.60%</p>

Improve the range of daytime activities for people with eligible needs	<p>The Better Lives for Older People proposals to reduce the level of directly provided day services continues apace. Four day centres have closed during the quarter with service users receiving a choice of alternative provision in the independent and third sector. Work continues to develop community based options in partnership with the third sector including the development of neighbourhood networks, the extension of SDS, and the SeNS project looking at ways to combat social isolation for older people.</p> <p>The transformation of day services for people with learning disabilities continues. A further seven community bases for people with learning disabilities are in development. Outdated large scale day services based in Rothwell and Horsforth are due for closure in June 2012. Community participation for people with learning disabilities is being further supported through the development of changing places, accessible changing facilities for adults, and 'Safe Places' a national scheme to establish a register of businesses and organisations willing to provide assistance to a vulnerable adult.</p> <p>The Mental Health Advisory Board have an away day booked on 24th April 2012 to develop a new proposed service model for mental health day services. This will then provide the basis</p>	Green	N/A	N/A	N/A	N/A	N/A
Ensure more people with poor physical or mental health remain living at home or close to home for longer	<p>Kippax, Meanwood and Pudsey, with a further three areas identified Teams will be working with people identified as at risk of long term care or hospital admission, as part of the Risk Stratification work being led by colleagues in health. Three therapeutic models for intervention for people with long term conditions to support self management of their health have been agreed and training is planned for staff on these approaches.</p> <p>The construction of Holt Park Active - a flagship health and wellbeing centre, has started. This will provide a model for a joint service across health and council service which enables people to maintain their health, wellbeing and independence.</p>	Green	Reduce number of older people admitted permanently to residential and nursing care homes (per 10,000 population)	86.8	84.6	82.8	67.9
Support adults whose circumstances make them vulnerable to live safe and independent lives	<p>2011/12 figures show an improvement on year end figures for 2010/11, an increase from 33.7% to 34.6% of referrals including a safeguarding concern had been found to require investigation. During the year work has been undertaken to provide guidance regarding thresholds and include this in training. Investigation shows that there is a low conversion rate for people who use mental health services. Dedicated resources have been allocated to the mental health care management service to further explore and support improvements.</p>	Amber	Increase percentage of safeguarding referrals which lead to a safeguarding investigation	31.50%	34%	32.30%	34.60%
Ensure resources are efficiently matched and directed towards those with greatest need	Efficiencies of £7.253m were set, an achievement of 85.3%	Amber	Delivery of efficiency savings for directly provided services	£3.1m	£4.0m	£5.2m	£6.2m
Provide easier access to joined-up health and social care services	<p>'Clinical Navigation' is the name for a multi agency group which has brought partners from the NHS and adult social care together to improve the channel strategy for patients/service users requiring admission, diversion or discharge from hospital. A Single Point of Urgent Referral (SPUR) is being launched in June 2012 to ensure that patients/service users benefit from these improved referral pathways, and wherever possible support people to remain in their own homes whilst receiving the appropriate medical and social interventions.</p> <p>Adult Social Care community based care management services have reorganised into three areas aligned to Neighbourhood District Nursing Teams. These arrangements will enable greater integration with health locally and link into citywide health and wellbeing structures and agendas.</p>	Amber	Reduce number of delayed discharges from hospital due to adult social care only (per 100,000 adult population per week)	1.84	2.18	2.34	2.42

<p>People with social care needs receive coordinated and effective personalised support from local health and wellbeing agencies</p>	<p>Leeds has produced 'The Time of Our Lives,' a framework of principles for organisations working with older people in Leeds, including a charter which states that all older people should be valued in their communities, live healthy fulfilling lives and be able to choose and control the support they may need.</p> <p>Joint work with health continues to improve seamless services for people with health and social care needs. Leeds City Council and health partners have identified a site in Clarence Dock for a joint assistive technology service. Work continues to develop a joint service at Harry Booth house for intermediate tier and reablement services. Refurbishment on both these will start later in the year.</p> <p>The Integrated Health and Social Care teams for West North West area goes live in Pudsey Health Centre and the team for East North East areas goes live in Meanwood Health Centre from 30.03.12.</p>	<p>Green</p>	<p>Increase proportion of older people (65 and over) who were still at home 91 days after leaving hospital into rehabilitation services</p>	<p>92.90%</p>	<p>93.80%</p>	<p>89%</p>	<p>86%</p>
<p>Our customer experience is enhanced through improved information systems developed with health partners</p>	<p>A Programme Manager has been appointed to lead the Integrated health and Social Care Information and Technology Programme and project briefs have been approved. The Information Governance toolkit submission has been approved for submission by the Senior Information Risk Owner (Deputy Chief Executive), this will enable electronic connectivity between the council and the NHS. Approval has been granted to obtain the NHS number on all current Adult Social Care Records and plans for uploading to the case management system are in place. Work has commenced to develop appropriate information sharing agreements for the Integrated Health and Social care teams. Tactical access has been set up for council staff working in Integrated health and social care teams located in health sites. Technical parties across health and social care are working on a strategic technology design.</p>	<p>Green</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>
<p>Establish local joined-up services for older people</p>	<p>See above</p>	<p>Green</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>

City Priority Plans	Overall Progress	Headline Indicator	Q1	Q2	Q3	Q4
<p>Make sure that more people make healthy lifestyle choices.</p>	<p>Amber</p>	<p>Reduce the number of adults over 18 that smoke.</p>	<p>22.8%</p>	<p>22.7%</p>	<p>22.8%</p>	<p>tbc</p>
<p>Support more people to live safely in their own homes.</p>	<p>Green</p>	<p>Reduce the rate of emergency admissions to hospital.</p>	<p>Data not provided</p>			
		<p>Reduce the rate of admission to residential care homes.</p>	<p>Annually reported</p>			<p>67.2 per 10,000</p>
<p>Give people choice and control over their health and social care services.</p>	<p>Green</p>	<p>Increase the proportion of people with long-term conditions feeling supported to be independent and manage their condition.</p>	<p>29%</p>		<p>42%</p>	
<p>Make sure that people who are the poorest improve their health the fastest.</p>	<p>Red</p>	<p>Reduce the differences in life expectancy between communities</p>				

Self Assessment
<p>One care home, under the management of the council was inspected on 05.04.12. According to the draft report received by CQC the home is "Meeting all the essential Standards of quality and safety inspected". The two care homes, which were previously judged as "Not meeting one or more essential standards" were re-inspected and CQC judgment is that the homes are now "Meeting all the essential Standards of quality and safety inspected". CQC are in the process of publishing these report on their website.</p> <p>The quarterly survey of Adult Social Care service users has picked up a decline in performance related to an number of areas of the experience and outcomes for people who use FAC's eligible services. Relevant operational leads have been alerted to this and an action plan is being pulled together to address this.</p>