

Health Overview and Scrutiny Committee

Key Performance Indicators Q2 and Q3 2021-22

Adult Services

Wokingham Borough Council February 2022



Adult Services

Overview

Our ambition is for Wokingham Borough to be one of the best boroughs for adults and carers in need of support to live, where they feel safe, included and a key part of our community. Our key priorities for the next four years are: Keeping people safe; Prevent, reduce and delay the need for formal care and support; Involve people in their care and support; Work in partnership and commission services that deliver quality and value for money.

Top 3 wins

Despite the additional pressure on the service over the winter period, performance has improved for a number of the KPIs:

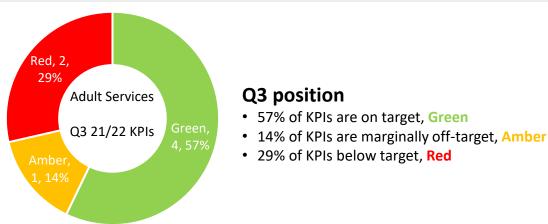
- Safeguarding concerns completed within timescales improved in Q3 and is now 'green' following a seasonal dip in performance for Q2. ٠
- The timeliness of reviews has steadily improved, leading to greater outcomes for our customers and financial efficiencies against our targets. In Q3, the service managed to ٠ achieve our highest % of reviews completed on time in the last 3 years.
- Wokingham has continued to perform well in comparison to our neighbouring authorities, by working closely with the local hospital to ensure timely discharges. ٠

Top 3 opportunities

Adult Services' Transformation Programme will identify and maximise opportunities for improvement over the next 3-4 years. Improvements are expected with the following KPIs: •Front door activity (AS10) and better demand management due to strength-based practice (AS3 & AS9)

An increase in self-directed support (AS11)

Consistent operational performance management (AS7)



Challenges

Covid-19 and its' impact has been, and remains, our main challenge.

The service has seen an overall increase in demand and this manifests in increases in numbers but also people with higher needs, this is having an impact particularly on the KPI AS1 – timeliness of allocating assessments.

The focus for the service during Q3 has been supporting our care providers and their staff to maintain business continuity over the winter period with pressures increasing due to the Omicron strain.

Wokingham Council staff have been trained to work alongside experienced professionals in order to provide additional capacity to support care providers in the local area.

We have proactively engaged people with caring responsibilities to ensure people remain safe and supported in their own home.

KPI AS3:

Highlights and lowlights



Amber (Q2) to

Green

(Q3)

Quarter 3 21/22 Position

Matt Pope Director of Adult Services





Adult Services Key Performance Indicators Summary 2021/22

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Ref	Description	RAG	Change from Q2 (2020-21)	Benchmarking	Target Commentary
<u>AS1</u>	Social work assessments allocated to commence within 7 days of the requests (counted at point of allocation)	Red	Worse	Not available	This is not monitored as a national performance measure, however, we know from the results of a recent survey of Local Authorities that nationally 12% of people awaiting a social work assessment have been waiting more than 6 months. Over the last 18 months, the maximum wait for anyone in Wokingham was 38 days. We aim to not keep people waiting more than 28 days and currently 93% of assessments are allocated in this time-frame. The aim of maintaining high performance allocated in 7 days is a stretch target.
<u>AS3</u>	People aged 65+ who received reablement from the START team following discharge from hospital and remained at home 91 days later	Green	Better	<u>2019-20:</u> 85% WBC 77% South East 82% England	This is a national 'ASCOF' indicator monitored through annual statutory returns. We performed well in comparison to the regional and national performance for 2019-20 with 85%. The target is set with the aim of improving our local performance.
<u>AS4</u>	N S af eguarding timeliness – concerns completed within 2 working days	Green	Better	Not available	This is not monitored as a national indicator. The indicator is set to achieve best practice performance by responding to safeguarding concerns in a timely manner. Our annual performance for 2019-20 was 50%, however, improvements with the team in Q4 2019-20 increased performance to 84%. This target was set with the aim of maintaining that level of improved performance.
<u>AS7</u>	Proportion of people receiving long term care who were subject to a review in the last 12 months	Red	Better	2 out of 16 South East LAs (1=high)	The 2021-22 target has been set as a challenging stretch target. Our aim is to perform in the top quartile in comparison to other Local Authorities. Currently our performance for people with a review or assessment in the last 12 months places us 2 nd highest in the South East benchmarking club.
<u>AS9</u>	Permanent admissions to residential and nursing care homes per 100k population	Green	Worse	30 of 152 LAs for 2019- 20 (1=low admissions)	We are aiming to reduce the number of long-term admissions to care homes. The target was set with the aim of performing well in comparison to regional performance (131 on average per quarter for 2019-20).
<u>AS10</u>	Information and Advice at the front door – Percentage of contact referrals closed with 'NFA – Advice & Information Only'	Green	Worse	Not available	The target is set with the aim of improving our local performance for this specific area (information and advice). Comparative data from our statutory return is not reported with the same definition but monitors all new contacts from the community resulting in signposting or universal services. For this measure we were 5th highest in the region for those aged 18-64 and 4th highest for those aged 65+.
<u>AS11</u>	Proportion of people who use services who receive direct payments – snapshot at end of quarter	Amber	Worse	3 out of 16 South East LAs (1=high)	This is a stretch target with the aim of improving our local performance which has remained relatively static for the last 2 years. Our performance is good for this area in comparison to other Local Authorities and ranked 3 rd highest in the region.

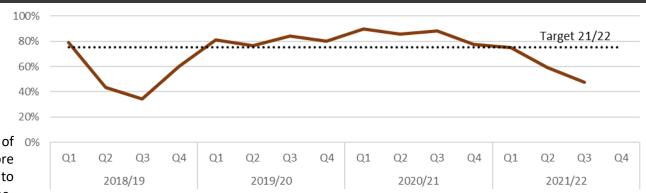
Safe & Strong Communities

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AS1: Social work assessments allocated to commence within 7 days of the requests (counted at point of allocation)



Period	Number	Percentage	Target	RAG	Direction of Travel
Q1 21/22	119/159	75%		Green	Worse
Q2 21/22	106/179	59%		Red	Worse
Q3 21/22	73/154	47%	75% or more	Red	Worse
Q4 21/22					
Full year 21/22					



Red

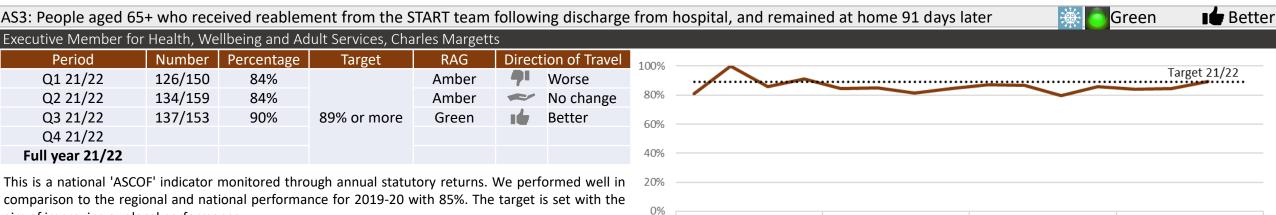
Worse

This is not monitored as a national performance measure, however, we know from the results of a survey of 0% Local Authorities that nationally 12% of people awaiting a social work assessment have been waiting more than 6 months. Over the last 2 years, the maximum wait for anyone in Wokingham was 38 days. We aim to not keep people waiting more than 28 days and currently 93% of assessments are allocated in this timeframe. Maintaining high performance allocated in 7 days is a stretch target.

The reason for the decline in timeliness of allocation against our stretch target this year has been the impact of an increase in complexity of cases.

Actions to address the increased pressure on the team include ongoing recruitment and a review of pay rates to support retention.

Allocations are made according to the level of complexity and people requiring urgent work will be allocated instantly without being recorded on the waiting list, and therefore not included in this measure. A national performance measure is planned for 2023 which will be based on customer experience, calculating the wait from referral through to assessment completion and the commencement of a package of care. We will move towards monitoring this measure and including those allocated immediately.



Q1

Q2

Q3

2018/19

Q4

Q1

Q2

Q3

2019/20

Q4

Q1

Q2

Q3

2020/21

Q4

Q1

Q2

2021/22

Q3

Q4

aim of improving our local performance.

Performance improved in Q3 which was a significant achievement given the level of acuity of customers referred for reablement from hospital, in addition to added pressures over the Christmas period.

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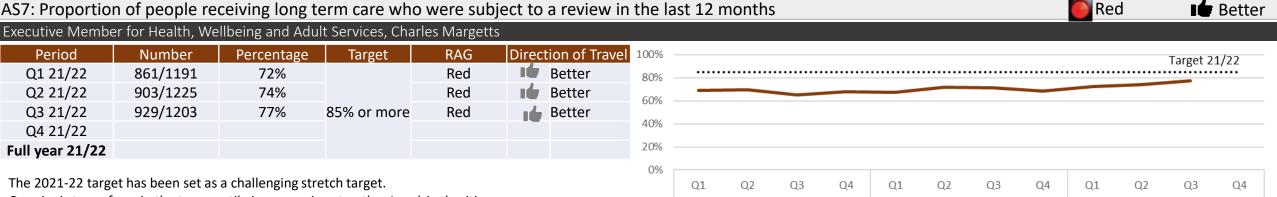
AS4: Safeguarding timeliness – concerns completed within 2 working days

Executive Member 1	for Health, We	llbeing and Ad	ult Services, Cha	arles Marget	ts	
Period	Number	Percentage	Target	RAG	Direction of Trave	10
Q1 21/22	499/527	95%		Green	Better	8
Q2 21/22	418/554	75%		Red	Worse	6
Q3 21/22	509/582	87%	85% or more	Green	🖬 Better	
Q4 21/22						4
Full year 21/22						2

Timeliness has improved in Q3 and performance is now above target.

The chart highlights the seasonal trend causing a dip in performance in Q2 (summer period) for the last two years which is something the service will plan for next year to try to reduce the impact in that period.

23



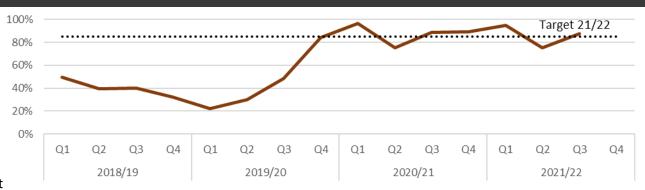
2019/20

Our aim is to perform in the top quartile in comparison to other Local Authorities. Currently our performance for people with a review or assessment in the last 12 months places us third

highest in the South East benchmarking club.

Performance has steadily improved over the last 3 quarters leading to greater outcomes for our customers and financial efficiencies against our targets.

The service achieved the highest level of performance in Q3 in the last 3 years.



2020/21

Better

Green

2021/22

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AS9: Permanent admissions to residential and nursing care homes per 100k population

Executive Member for Health, Wellbeing and Adult Services, Charles Margetts

Period	Number	Rate (per 100k)	Target	RAG	Directio	n of Travel	
Q1 21/22	19	62.15		Green	9 1	Worse	
Q2 21/22	15	49.07	120 or loss	Green	14	Better	
Q3 21/22	17	55.61	130 or less	Green	9 1	Worse	
Q4 21/22							
Full year 21/22			520 or less				

We are aiming to reduce the number of long-term admissions to care homes. The target was set with the aim of performing well in comparison to the South East region.

This indicator is monitored for the Better Care Fund and 2022-23 targets have been agreed to keep admissions below 10 a month. We have averaged 6 a month so far in 2021-22 and are on track to achieve next year's target.

Performance has remained strong for the last year which evidences the success of the Discharge to Assess (D2A) model, where going home is the default pathway for people discharged from hospital with care needs.

4



0%

Q1

Q2

2020/21

Q3

Q4

Q1

Q2

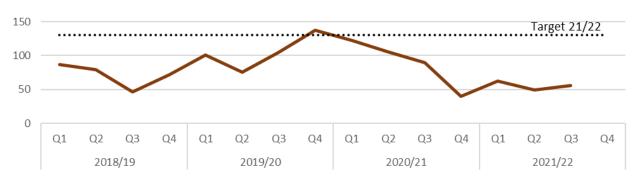
2021/22

Q3

Q4

The target is set with the aim of improving our local performance for this specific area (information and advice). Comparative data from our statutory return is not reported with the same definition but monitors all new contacts from the community resulting in signposting or universal services. For this measure we were 5th highest in the region for those aged 18-64 and 4th highest for those aged 65+.

To achieve a significant shift in this indicator the planned re-design of Adult Social Care will need to be finalised. This has been delayed due to the pandemic but is due to recommence shortly.



Green

Q Worse

Safe & Strong Communities

AS11: Proportion of people who use services who receive direct payments – snapshot at end of quarter

🦰 Amber 🛛 🖣 🛛 Worse

Executive Member for Health, Wellbeing and Adult Services, Charles Margetts

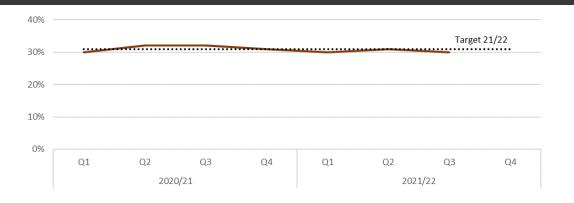
Period	Actual	Target	RAG	Dir	ection of Travel
Q1 21/22	30%	31% or more	Amber	9 1	Worse
Q2 21/22	31%		Green	14	Better
Q3 21/22	30%		Amber	9 1	Worse
Q4 21/22				Ū	

This is a stretch target with the aim of improving our local performance, which has remained relatively static for the last 2 years. Our performance is good in comparison to other Local Authorities, and we are ranked as 3rd highest in the region.

Take up of direct payment is just below the 31% target, this is a reduction of 6 people from Q2.

A review of the direct payment policy and practice guidance is due to take place which will provide greater charity to practitioners to promote the uptake of direct payments.

This work is planned to focus on increasing the uptake particularly with people aged 65 and above. Currently the uptake for people aged 18-64 is 41% and for those aged 65+ is 16%.



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