

Adults Corporate Performance Report

To: Adults & Health Committee

Meeting Date: 14 December 2023

From: Patrick Warren-Higgs – Executive Director for Adults, Health and Commissioning

Electoral division(s): All

Key decision: No

Forward Plan ref: N/A

Outcome: To provide the Committee with a performance monitoring information update.

Recommendation: The Committee is asked to:

- a) Note and comment on performance information and act, as necessary

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1. Background

- 1.1 The Performance Management Framework sets out that Policy and Service Committees should:
- Set outcomes and strategy in the areas they oversee.
 - Select and approve the addition and removal of Key Performance Indicators (KPIs) for the committee performance report.
 - Track progress quarterly.
 - Consider whether performance is at an acceptable level.
 - Seek to understand the reasons behind the level of performance.
 - Identify remedial action.
- 1.2 This report, delivered quarterly, continues to support the committee with its performance management role. It provides an update on the status of the selected Key Performance Indicators (KPIs) which track the performance of the services the committee oversees.
- 1.3 The report covers the period of quarter two 2023/24, up to the end of September 2023.
- 1.4 The most recent data for indicators for this committee can be found in the dashboard at Appendix 1. The dashboard includes the following information for each KPI:
- Current and previous performance and the projected linear trend.
 - Current and previous targets. Please note that not all KPIs have targets, this may be because they are being developed or the indicator is being monitored for context.
 - Red / Amber / Green / Blue (RAGB) status.
 - Direction for improvement to show whether an increase or decrease is good.
 - Change in performance which shows whether performance is improving (up) or deteriorating (down).
 - The performance of our statistical neighbours. This is only available, and therefore included, where there is a standard national definition of the indicator.
 - KPI description.
 - Commentary on the KPI.
- 1.5 The following RAGB criteria are being used:
- Red – current performance is 10% or more from target.
 - Amber – current performance is off target by less than 10%.
 - Green – current performance is on target or better by up to 5%.
 - Blue – current performance is better than target by 5% or more.
 - Baseline – indicates performance is currently being tracked in order to inform the target setting process.
 - Contextual – these KPIs track key activity being undertaken, to present a rounded view of information relevant to the service area, without a performance target.
 - In development - KPI has been agreed, but data collection and target setting are in development.

2. Main Issues

2.1 Current performance of indicators monitored by the Committee is as follows:

Status	Number of KPIs	Percentage of KPIs*
Red	0	0%
Amber	0	0%
Green	0	0%
Blue	0	0%
Baseline	0	0%
Contextual	0	0%
In Development	11	100%
Suspended	0	0%

*Figures may not add to 100 due to rounding.

2.2 Commentary on the indicators is as follows:

2.2.1 Indicator 230: Number of new client contacts for Adult Social Care per 100,000 of the population

New client contacts per 100,000 of population increased across all 4 quarters in 2022/23 compared to 2021/22. The demand continues to grow the lowers number of contacts in covid periods have not been sustainable and currently we are receiving a higher percentage of calls in to ASC requesting for support and remain on par with the equivalent quarters for 2021/22.

Cambridgeshire recorded a higher number of new client contacts in 2022/23 compared to the previous two financial years. In part this is attributable to the new reporting processes implemented in the latter part of the 2021/22 financial year, as well as normal statistical variation. However, there has been a level of increase in new client contacts that is felt to be linked to need in the community (see indicator 231), reflected in the increased numbers of new client assessments for care and support being undertaken (2021/22 monthly average of completed assessments/reassessments: 330, 2022/23 monthly average = 392).

Part of the increase in contact numbers may also be due to proactive work with primary care social prescribers to increase awareness of prevention and early intervention services such as lifeline alarms. During the 2022/23 financial year, Cambridgeshire implemented a system to receive electronic referrals from GP and social prescribing systems to improve the referral route and increase the quality of information received.

2.2.2 Indicator 231: % of new client contacts not resulting in long term care and support

The percentage of new client contacts not resulting in long-term care and support has shown a decreasing trend over the last year but has now stabilised around 88%. This figure is slightly higher than the overall percentage for 2021/22 but remains below the equivalent quarter last year. When interpreted in line with indicator 230, which presents slightly less contacts for Q2 2023/24 compared to 2022/23, the overall picture is that the need for Long

Term services remains high compared to 2021/22 but has provisionally stabilised in terms of contact numbers and the % progressing to Long Term support.

2.2.3 Indicator 232: Proportion of people receiving long term support who had not received a review in the last 12 months, % of all people funded by ASC in long-term

The % of clients at the end of Q2 2023/24 with no review in the last 12 months is the lowest across the last 3 financial years.

During 2022/23, there was a significant level of activity undertaken to clear review backlogs that built up during the pandemic. An external agency was commissioned from March 2022 to work through the backlog of reviews for clients receiving long-term services. This additional capacity significantly increased the number of reviews being completed; in 2021-22 there was an average of 294 reviews completed per month, increasing to an average of 472 reviews for the completed financial year 2022-23.

2.2.4 Indicator 233: Number of carers assessed or reviewed in the year per 100,000 of population

A move away from carers assessments by default to a more constructive and timely conversation accounts for the lower volume of carers assessments. This should be seen alongside our carers conversation and carers triage activity. During Q2 2023/24 we have completed 152 assessments and reviews. A paper of carers recommissioning is being presented to committee which will set the road map for future carers provision.

2.2.5 Indicator 105: Percentage of those able to express desired outcomes who fully or partially achieved their desired outcomes

We continue to have reporting gaps for safeguarding. New dashboards are currently in development meaning not all the data needed to inform these indicators is available for routine use by staff.

2.2.6 Indicator 126: Proportion of people using social care who receive direct payments

The percentage of people receiving direct payments in Q2 2023/24 continues to be low, reflecting the challenge in making direct payments an attractive solution. The general decrease in performance across the last year compared to 2021/22 is mostly driven by an increase in the number of people using social care rather than the number of people receiving direct payments, which has remained relatively stable (828 at the end of Q4 2021/22 compared to 808 at the end of the latest quarter). The alternative options like individual service funds are being explored to increase choice of control to Adults receiving care in the community.

Our work with Community Catalyst around micro enterprises seeks to build more opportunities for people to use direct payments to access care and support opportunities local to them.

The council has recently introduced Individual Service Funds, a personal budget managed by a provider of the persons choice rather than held by themselves. This alongside the

work to develop place based micro-enterprises within the Care Together programme should help to build on the range of options available.

2.2.7 Indicator 140: Proportion of people receiving reablement who did not require long term support after reablement was completed

The proportion of people not requiring long-term support after a period of reablement remains high compared to the national and statistical neighbour average. Q2 2023/24 has decreased showing the complexity of cases coming through needing further support following a short-term intervention.

2.2.8 Indicator 234: % total people accessing long term support in the community aged 18-64

The percentage of clients accessing long term support in the community aged 18-64 has remained relatively static over the last 12 months but increased slightly to 90.77% in Q2 2022/23. The overall number of community-based clients has also increased, from 2243 in Q2 2022/23 to 2360 in Q2 2023/24. Increasing need for long term services in general and community clients specifically has been experienced throughout the last year for 18-64 clients.

2.2.9 Indicator 235: % total people accessing long term support in the community aged 65 and over

The percentage of clients aged 65+ accessing long term support in the community had increased during 2022/23 but has now dropped to a comparable rate with last year (62% in Q2 2022/23, 61% in Q2 2023/24). The number of clients receiving long term support and support in the community specifically have both increased marginally in the last 12 months.

2.2.10 Indicator 236: Percentage of Cases where Making Safeguarding Personal (MSP) questions have been asked

Performance in this area continues to be high and comparable with national and statistical neighbour averages (96% in Q2 of 2023-24)

We continue to have reporting gaps for safeguarding. New dashboards are currently in development meaning not all the data needed to inform these indicators is available for routine use by staff. However, current performance suggests that the Making Safeguarding Personal agenda is fully imbedded in the safeguarding process.

2.2.11 Indicator 229: Percentages of safeguarding enquiries where risk has been reduced or removed

We have been consistent in our approach and have been managing risk well and in over 88% of safeguarding cases risk is removed or reduced. Safeguarding pathways are being revisited to increase the number of S42's to give further considerations to risks.

3. Alignment with ambitions

3.1 Net zero carbon emissions for Cambridgeshire by 2045, and our communities and natural environment are supported to adapt and thrive as the climate changes

There are no significant implications for this ambition.

3.2 Travel across the county is safer and more environmentally sustainable

There are no significant implications for this ambition.

3.3 Health inequalities are reduced

There are no significant implications for this ambition.

3.4 People enjoy healthy, safe, and independent lives through timely support that is most suited to their needs

The following bullet points set out details of implications identified by officers:

- The indicators proposed here provide an overview of performance in key priority areas, to enable appropriate oversight and management of performance.

3.5 Helping people out of poverty and income inequality

There are no significant implications for this ambition.

3.6 Places and communities prosper because they have a resilient and inclusive economy, access to good quality public services and social justice is prioritised

There are no significant implications for this ambition.

3.7 Children and young people have opportunities to thrive

There are no significant implications for this ambition.

4. Significant Implications

4.1 Resource Implications

There are no significant implications within this category.

4.2 Procurement/Contractual/Council Contract Procedure Rules Implications

There are no significant implications within this category.

4.3 Statutory, Legal and Risk Implications

There are no significant implications within this category.

4.4 Equality and Diversity Implications

There are no significant implications within this category.

4.5 Engagement and Communications Implications

There are no significant implications within this category.

4.6 Localism and Local Member Involvement

There are no significant implications within this category.

4.7 Public Health Implications

There are no significant implications within this category.

4.8 Climate Change and Environment Implications on Priority Areas:

4.8.1 Implication 1: Energy efficient, low carbon buildings.

Positive/neutral/negative Status: There are no significant implications within this category.

Explanation: There are no significant implications within this category.

4.8.2 Implication 2: Low carbon transport.

Positive/neutral/negative Status: There are no significant implications within this category.

Explanation: There are no significant implications within this category.

4.8.3 Implication 3: Green spaces, peatland, afforestation, habitats and land management.

Positive/neutral/negative Status: There are no significant implications within this category.

Explanation: There are no significant implications within this category.

4.8.4 Implication 4: Waste Management and Tackling Plastic Pollution.

Positive/neutral/negative Status: There are no significant implications within this category.

Explanation: There are no significant implications within this category.

4.8.5 Implication 5: Water use, availability and management:

Positive/neutral/negative Status: There are no significant implications within this category.

Explanation: There are no significant implications within this category.

4.8.6 Implication 6: Air Pollution.

Positive/neutral/negative Status: There are no significant implications within this category.

Explanation: There are no significant implications within this category.

4.8.7 Implication 7: Resilience of our services and infrastructure, and supporting vulnerable people to cope with climate change.

Positive/neutral/negative Status: There are no significant implications within this category.

Explanation: There are no significant implications within this category.

Have the resource implications been cleared by Finance?

Name of Financial Officer: N/A

Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the Head of Procurement and Commercial?

Name of Officer: N/A

Has the impact on statutory, legal and risk implications been cleared by the Council's Monitoring Officer or Pathfinder Legal?

Name of Legal Officer: N/A

Have the equality and diversity implications been cleared by your EqIA Super User?

Name of Officer: N/A

Have any engagement and communication implications been cleared by Communications?
Name of Officer: N/A

Have any localism and Local Member involvement issues been cleared by your Service Contact?
Name of Officer: N/A

Have any Public Health implications been cleared by Public Health?

Name of Officer: N/A

If a Key decision, have any Climate Change and Environment implications been cleared by the Climate Change Officer?

Name of Officer: N/A

5. Source documents guidance

5.1 Source documents

Adults Corporate Performance Report Appendix 1 Quarter 1 2023/24

Adults Corporate Performance Report Appendix 2 Quarter 2 2023/24