

Theme summary – Adults’ Services	
<i>Under this theme the following indicators are included in the corporate basket:</i>	Target
All eligible people are care managed through the Self Directed Support (SDS) process (increase from 30% to 100% during 2011/12).	100% achieved by end of year (although 67% over whole year) – i.e successfully improved during the period in line with target.
Increase the proportion of people choosing to manage their own personal budget to fund the support plan – target of 10% for 2011~12.	★
Telecare programme to increase to 5,000 connections by March 2013.	★
Improve the proportion of carers receiving a service: target of 28%– 2011/12.	■
Reduce permanent admissions to residential and nursing care – target rate 96 per 10,000 in 2011/12.	Final year end rate of 98.9 i.e. within 5% tolerance.
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into re-ablement / rehabilitation services from 68.2% in 2010/11 to 75% in 2011/12.	★
Overall progress	
Performance	
<p>1. The following measures indicate some positive progress in supporting independence through community-based packages of support.</p> <ul style="list-style-type: none"> Continued increase in the number of telecare connections (5548 by the year end, exceeding the 5,000 target). Reablement support: year end data indicates that 78.2% of older people (65 and over) were still at home 91 days after discharge from hospital into re-ablement / rehabilitation services, ahead of the 75% target, and a good improvement on the 68.2% for the previous year. The Reablement Team has supported an additional 83 clients, of which 59% were able to return home with no ongoing support needs following a period in hospital. The Intermediate Care Service has supported hospital discharges of 322 clients. There have been no delayed discharges from hospital attributable to social care. 235 people across Intermediate Care and Reablement Services received 6 weeks free Telecare and Care Call following discharge from hospital – helping to reduce hospital readmissions. <p>2. However, there was no reduction over the year in the rate of admissions to residential care: Q4 saw a higher rate of admissions than previous quarters, resulting in a year end position of 295</p>	

permanent admissions of clients aged 65+, a rate of 989 per 100,000 population (compared to 284 admissions, a rate of 969, for the previous year).

3. Self Directed Support (SDS) is now embedded as the approach to care management. Analysis of data over the year, alongside audits and data validation checks, indicates that all new eligible clients are assessed using a PNQ (Personal Needs Questionnaire) and receive an offer of a personal budget; and that an increasing number of existing clients are now being reviewed through the same process.
4. The number of service users who have chosen to convert their personal budget to a direct payment (DP) in order to manage their own support plan has increased slowly over the period. At the end of Q4 there were a total of 573 clients in receipt of a direct payment – this represents 23% of the clients who received a service over the year.
5. Recorded levels of carer support are still below expected levels, although not all relevant carer activity is yet included in the data.
 - For new service users assessed over the year, there was a carer assessment provided in 43% of cases.
 - At the year end there were 232 carers, of those assessed, who were also in receipt of some support (11% of all new service users assessed) – although this is below target, it is a provisional figure, pending completion of all year end returns and validation checks..
6. Adults Safeguarding: Q4 has seen a continuation of the increasing levels of activity over the year.
 - During 2011~12, 664 alerts were received into the Safeguarding Team (compared to 394 in 2010~11).
 - Of these alerts, 289 progressed to a referral (a conversion rate of 43% for the year). The increased number of alerts suggests there is improved awareness of the need to report concerns about vulnerable adults, even if a significant proportion of those concerns do not lead to a referral.
 - The low number of repeat referrals (17, or 6%, over the year) suggests that the majority of referrals are concluded satisfactorily – even though the proportion of completed referrals that are substantiated or partly substantiated is approx 50%.
 - Physical abuse and neglect remain the main reasons for a referral, closely followed by financial abuse.

Actions taken

7. There has been continued development of Reablement provision:
 - The Reablement Team is working alongside Intermediate Care and Rapid Response Teams to support effective discharge; and close links have now been developed with the Health Community Integrated Assessment Team (CIAT).
 - Discharge pathway mapping has been undertaken to establish improvements in the process, and to increase the number of people referred in to the service.
 - Priority clients have been identified for adaptation support to assist in independent living. 19 new clients received major adaptations in the home, avoiding potential unplanned admissions.
 - Training programmes have been procured across Tees Valley for social work professionals. Reablement training for social care staff and key professionals has been delivered to 110 staff.

- Telecare support for hospital discharge is in place and in receipt of referrals from the new Multi-link service.
- Increased capacity at Rosedale has enabled more people to access discharge support (136 people, an increase of 56 from last year).

8. Residential admissions:

- All proposed admissions are reviewed and challenged through a Panel to ensure that all appropriate options for community based support have been considered.
- The LD EIT Review has developed proposals for improved community based services, aimed at reducing more costly residential options.
- A small amount of funding has been awarded for a Prevention project, following a bid to the LGA and DH. This project aims to identify, through research of evidence-based practice and through tracking the case histories of a sample of residential clients, those factors that trigger escalation of care needs, prior to the stage of needing higher level or crisis intervention that results in residential admission. The research will help to inform future targeting of needs and improved use of shared intelligence across agencies.

9. Self Directed Support (SDS):

- Work will continue through care plan reviews to bring all existing service users in line with SDS requirements, including those in residential provision.
- Further analysis will take place regarding the conversion rate of personal budgets to direct payments, to identify any improvement actions required.

10. Carers:

- The recently completed EIT Review of Commissioned Carers services will lead to revised arrangements for commissioning services which are more focused on improved outcomes for carers, including young carers.
- Future reporting of carer activity will include data for carers receiving services from commissioned providers who may not be known to social care services.
- Future tracking of performance in this area will monitor the extent to which carers for new clients have been identified, contacted and provided with further information about carer support; as well as the extent to which specific services have been provided for carers.

11. Safeguarding:

- Analysis of safeguarding activity is reported to the Stockton Vulnerable Adults Committee to identify areas where practice can be improved across agencies.
- Benchmarking of 2011~12 activity and performance with other Councils will be undertaken when the comparative data is published later in the year.
- There will be a thematic programme of case file audits undertaken in Adult Social Care during June, focused on safeguarding cases.

Customer perception/ satisfaction

12. As part of the new national Adult Social Care (ASC) Outcomes Framework, an annual ASC Survey of User views has been introduced. Results of the survey will inform some of the indicators in the new national framework, and will provide benchmarking data across all Councils. The first survey was completed during the Q4 period and results returned for national aggregation and subsequent publication in the autumn. Key results from the Stockton-on-Tees

survey, linked to the new national indicators, include:

- 70% of service users were very or extremely satisfied overall with their care and support.
- 80% said they have at least adequate control over their daily life.
- 61% said that the care and support services they receive help them to feel safe.

These results will be more meaningful once the national results are published and comparisons can be made, at which stage a fuller analysis will be provided.

Risk

13. There has been no significant change to the risk register arising from review of progress at this Q4 stage.

Finance

14. Residential placement costs have continued to be a pressure on budgets for Physical Disability and Learning Disability clients. However, Elderly residential costs have stayed well within budget, partly linked to higher than expected levels of income from Health and from individual client contributions.
15. Direct payment (DP) costs have also been a pressure – mainly for Physical Disability and Learning Disability clients; less so for Elderly clients. Although there has been only a small number of new DP clients during the year to date, the increasing costs reflect the complexity of some of the cases involved, as well as changes to existing care packages following the review process.
16. The budget continues to be monitored closely; pressures have been managed in CESC from within year variances.