Performance Report relating to Healthy City Priority in Local Area Agreement and related issues – December 2008 update

# Report of the Director of Health, Housing and Adults Services

### 1. Why has this report gone to Board?

- 1.1 To provide an update for members about key performance issues associated with adult social care for the periods ending March 2008 and December 2008.
- 1.2 In particular, to provide members with a position statement in relation to the first nine months of the Local Area Agreement (LAA) and implementation of the new National Indicator set during 2008/09 in relation to the Healthy City priority in the LAA.

### 2. Description of the Decision

- 2.1 The Adult Social Care Partnership Board is recommended to note the performance of partners across the City against key health and social care performance measures, including those within the Healthy City priority in the LAA.
- 2.2 The Board is also asked to support the general approach to performance reporting described in Sections 3 (i.e. expanding performance reporting to support strategies sponsored by the Board) and 6 (i.e. engaging with Board members and their representative organisations about their understanding of adult social care delivery).

# 3. Background

- 3.1 As discussed previously at the Board, the Adult Social Care Partnership Board has agreed to receive regular performance reports describing how the city is performing in terms of adult social care and related issues. In the future, a number of the strategies which are sponsored by the Board for example, the Carers' Strategy will also have a number of outcome-based performance measures and these will be developed within the Sunderland Strategy and Local Area Agreement Frameworks. In due course, these measures will also be provided to the Partnership Board once these measures are established.
- 3.2 In this first report, however, the focus will be on establishing the baseline for the new National Indicators included in the Local Area Agreement, as well as the Commission for Social Care Inspection (CSCI) former Performance Assessment Framework (PAF) indicators that are well established nationally.
- 3.3 This report also contains an additional section with some proposals about how representative organisations can contribute to the Council's continuous monitoring of its performance at an operational level.
- 3.4 The report is structured around the following key questions:

- How is the city improving citizen's quality of life?
- What choice and control do vulnerable adults have in relation to their Council services?

#### 4. Performance

- 4.1 The report provides Board members with key performance information based around the indicators listed in Appendix 2.
- 4.2 Board members will recall that the Commission for Social Care Inspection (CSCI) now the Care Quality Commission continue to rate the delivery of adult social care in Sunderland as a three-star with 'excellent' delivery of outcomes of adult social care and 'excellent' capacity for improvement, with similar high-performing ratings provided by the Audit Commission and Healthcare Commission for the overall Council and NHS Trusts in Sunderland, respectively.
- 4.3 In 2007/08, part of the evidence for the judgement about adult social care is the results of the Performance Assessment Framework (PAF) indicators within Adult Services published annually. An update against all relevant PAF indicators for the 12 months ending March 2008 and December 2008 can be found in Appendix 1. These PAF indicators have been replaced on a statutory basis by a new National Indicator set.
- 4.4 Performance improved in a number of areas between March 2008 and December 2008. In particular those that relate to promoting individual's choice and control. However, the City recognises the need to accelerate progress in some areas. Some of the key areas of strength and for improvement are discussed in Section 5.
- 4.5 Local Area Agreement and New National Indicators
- 4.6 The department of Communities and Local Government have led on the development of a new National Indicator set across all aspects of local government, including adult health, well-being and social exclusion. This indicator set therefore includes several measures about individuals' perceptions of their own health, wellbeing and overall quality of life, and how well the city supports these needs. However, some of the other indicators in the adult health and wellbeing sector of the indicator set also measure other key aspects of support and help provided by the Council. Several of the latter are based on existing adult social care PAF or health NHS indicators.
- 4.7 The development of Sunderland's Local Area Agreement with Government Office North East (GONE) also included a negotiated sub-set of the national indicators relating to adult health and social care against which the city will be measured and judged by GONE. There are 8 new National Indicators in the Local Area Agreement relating to health and adult social care, listed below, in which comments in brackets link the indicator to an existing measure of performance where appropriate:
  - NI 119 Self reported reason of people's overall health and wellbeing (new PI).
  - NI 120 All age all cause mortality rate (existing public health measure).

- NI 130 Social care clients receiving self-directed support.
- **NI 136** Adults of all ages supported to live independently through social services (revised social care indicator PAF C29 C32, see below).
- NI 139 People over 65 who say that they receive the information, assistance and support needed to exercise choice and control to live independently (new PI).
- **NI 123** 16+ current smoking rate prevalence (existing public health measure).
- **NI 39** Alcohol-harm related hospital admission rates (existing public health measure).
- NI 56 Obesity amongst primary school children in Year 6 (new PI)

Indicator	Outturn 2007/08	December 2008 or Latest Update	Target 2008/09 (Year 1)	Target 2009/10 (Year 2)	Target 2010/11 (Year 3)
NI 119	67.4% Provisional baseline (2008/09 Place Survey)	67.4%	TBC	TBC	TBC
NI 120	610 (M) 863 (F)	-	562 (M) 777 (F)	546 (M) 748 (F)	530 (M) 720 (F)
NI 130	258/100,000	317.87/100,000	303	8.5%	30%
NI 136	3188/100,000 (Jan 2008)	2942.61/100,000 (April – Dec 2008)	3284	3415	3507
NI 139	35.5% Provisional baseline (2008/09 Place Survey)	35.5%	N/A	N/A	38.5%
NI 123	1,134/100,000	466/100,000 (April - Sept 2008)	1,337	1,430	1,484
NI 39	2038/100,000 +5% change from previous year	570.5 /100,000 (April - June 2008)	2132 / 100,000 +4.5% change from previous year	2207/ 100,000 +3.5% change from previous year	2251/ 100,000 +2% change from previous year
NI56	21.9%	21.2%	22%	22%	21%

- 4.8 The Government only require the Council and city to set targets for those National Indicators that form part of the Local Area Agreement in 2008/09. However, the city's partners have set targets for the both these indicators and other local performance indicators for 2008/09 to ensure a robust commitment to service improvement across the city.
- 4.9 However, targets cannot be set for all indicators, as 2008/09 is the first year of collection for a number of new indicators (e.g. those included in the Place Survey). The Government therefore see 2008/09 as a baseline year on which we can target future improvement.

- 4.10 Current Update & Risks Associated with National Indicators in Healthy City Priority
- 4.11 In relation to the LAA, an assessment of the potential risk for each National Indicator in the Agreement can be found at Appendix 1. It is based on the city's position in demonstrating improvement. This is intended to inform discussion in relation to how we can drive future improvement in addition to focussing on historical data from performance updates. A performance update for the data available at this point of 2008/09 along with trend and target traffic lights is included as well as an overview of key improvement actions that have been identified to ensure achievement of targets.
- 4.12 In relation to the National Indicator set, an overview of current position in relation to each indicator has been included in Appendix 2, which also contains local performance indicators that are either being retained or introduced in 2008/09 to supplement the new national framework. Many of these localised indicators relate to previous PAF indicators about adult social care with which Board members will be familiar and for which historical and current data is available. This will ensure we have a complete picture of service delivery and related improvements.
- 4.13 Performance against the priorities identified in the LAA and associated improvement targets will be a key consideration in the Comprehensive Area Assessment (CAA) in terms of the extent to which the partnership is improving outcomes for local people.

### 5. How is the city improving citizen's quality of life?

- 5.1 Risks associated with Local Area Agreement Targets:
- 5.2 One of the main sub-objectives in this area is to promote independence for individuals in order for them to live in their own homes for as long as possible. This is particularly true for older people, but also includes support for younger adults with life-limiting conditions.
- 5.3 NI 136 People supported to live independently through social services (all ages): The latest performance update is 2943/100,000, with a target of 3284 per 100,000 for the year. The Directorate of Health, Housing and Adult Services is currently addressing this issue, via developing "case finding" models and working with the Third Sector to better support people to live independently as part of its 3 Year Delivery Plan. Section 6.3 discusses the remedial action that the Council is taking to improve its performance against this indicator, including locality-based working, including use of in-reach teams to penetrate into communities, improved marketing and working with the Third Sector to build capacity and more focussed outcomes. However, some of these actions have already been completed or are well in progress e.g. working with GP surgeries directly in specific localities such as Washington.

- 5.4 NI 130: Adult social care customers receiving Self-Directed Support (Direct Payments, Individual & Personalised Budgets): The Department of Health's definition for this National Indicator is currently changing, but the current analysis calculates the number of customers receiving self-directed support – in 2008/09, the number receiving Direct Payments during the financial year - per 100,000 standardised head of population. It replaces the previous indicator (PAF C51), which measures Direct Payments only, and for which Sunderland was the best performing metropolitan authority in England (Figure 1). The intention is that NI 130 will also monitor the number of people provided with other self-directed support options such as Individual & Personalised Budgets. The Directorate will also be widening the availability of self-directed support, including through Personalised and Individualised Budgets, to provide people with more flexibility to choose and purchase support which reflects their needs and preferences. This may include, for example, support via personal assistants, that enable people to carry out not just daily living tasks such as shopping and cleaning, but also access to leisure and social activities.
- 5.5 Performance against this original definition of the new National Indicator NI 130 continued to improve and exceeded its target for 2008/09 318 per 100,000 head of standardised population at the end of December (with a target level of 303/100,000). The December position meant that a total of 684 customers received Direct Payments in 2008.

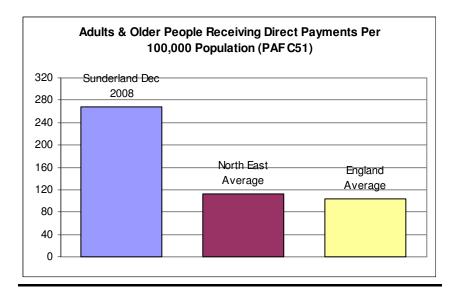


Figure 1 – PAF C51 – Adults & Older People receiving Direct Payments at December 2008 per 100,000 population, compared with North-East average and England average (2006/07).

# 6. What choice and control do vulnerable adults have in relation to their Council services?

6.1 NI 139: People over 65 who say that they receive the information, assistance and support needed to exercise choice and control to live independently: This indicator was reported for the first time in the national Place Survey. The outturn position was 35.5%, which is exactly comparable with the position for much of Tyne & Wear (35.1%).

- 6.2 The above analysis supports the Council's view, supported through this Survey and through Citizen's Panel and other consultation mechanisms over the last six months that the Council needs to improve its community engagement and marketing about adult social care to residents, building on strong engagement with other (primarily health) professionals.
- 6.3 The Directorate of Health, Housing & Adult Services is developing a marketing strategy, which will include better and more accessible public information, over the coming months to help people recognise more easily the types of support and services they can expect. It will also be developing a number of different ways of improving access for those people that might need "a little bit of help" with daily living, including working with the community/voluntary sector, GP surgeries and Customer Service Centres. This will include the development of greater degree of locality-based working, including the use of in-reach teams to penetrate into communities thus improving "case-finding". In the shorter-term, the Council is currently following up the cases of individuals who were signposted, or supported to access, Third Sector schemes over the last 2 years to see if they need any further assistance, for example, as a result of their changing circumstances. It's estimated that this is true in around one-quarter of cases, particularly for older people.
- One measure in this objective is the number of admissions to authority-supported permanent residential or nursing care. The national strategy is to reduce this level and promote more support, particularly intensive support at home.
- 6.5 Emergency admission rates have been minimised, as the Council and NHS switched resources to more preventative measures over the last 3 years e.g. increased use of Urgent Care Team and Primary Care Centres.

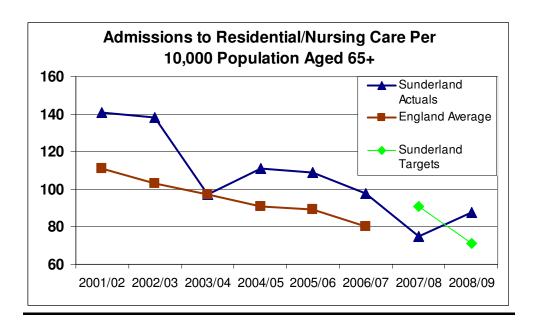


Figure 2 – PAF C72 – Annual number of authority-supported admissions of older people to residential/nursing care per 10,000 population

6.6 Strategies developed over the last two years have improved individuals' ability to remain in their own home for as long as possible – which is what most people

want. As Members will recall, this includes the launch of the Sunderland Telecare Service, which incorporates a community alarm service to over 23,000 people in Sunderland.

- 6.7 Another important area for development has been the progression of the city's Home for Life Strategy, led by the Council but supported by housing partners. This aims to develop a range of innovative accommodation schemes for particularly vulnerable individuals. The first elements of this Strategy is the building of 3 Extra Care schemes, a form of sheltered accommodation for (often older) people with complex needs, in Silksworth, Washington and Hetton over the next 3 years. Building at the first site, Silksworth, will officially open in April 2009.
- 6.8 NI 132 & NI 133: These indicators measure timescales for social care assessments and acceptable waiting time for care packages, respectively. For the 12 months ending December 2008, performance has improved for both of these indicators. Timescales for social care assessments has improved to 88.4%, whilst the number of care packages completed within acceptable waiting times was 92%. The Council expects to improve further against both measures during 2008/09, with the aim of putting the customer at the centre of service delivery.

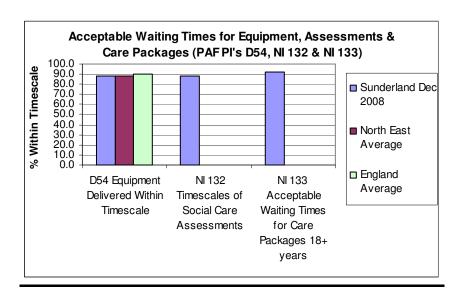


Figure 3 – PAF PI's D54, NI 132 & NI 133 – Acceptable waiting times for equipment, assessments and care packages for the period ending December 2008.

- 6.9 PAF indicator D54 measures the proportion of equipment delivered within 7 working days of the need being identified. The 2007/08 outturn figure for this indicator was 88%. Performance for the 12 months ending December declined slightly, with only 87.8% of equipment delivered within timescales.
- 6.10 A specific indicator measures improvements to quality of life, which have resulted from equipment and adaptations. The 2007/08 outturn figure for this PI was 98% (PAF PI D83). The User Experience Survey also aimed to find out how the equipment/adaptation affected the individual's quality of life. A total of 411 out of 420 respondents indicated their equipment/adaptation made their life much or a little better. Furthermore, the majority of respondents felt confident using their equipment safely and correctly.

### 7. Board Member Engagement with Performance

7.1 The Council would like to improve its formal monitoring of operational performance more qualitatively with individual Third Sector representatives of the Board. This would mean Third Sector representatives providing regular updates about their observations of the advice, information, care and support of individuals that need help with daily living (or their carers) provided or commissioned through the Council. These updates, which will be designed to make it as simple as possible to be completed by individual organisations minimising bureaucracy – will then be fed into the regular performance monitoring of individual divisions and the Directorate as a whole, including any contract monitoring of independent providers, embedded within the Council's Performance Management Framework. Participating agencies will be provided with feedback about the thematic, rather than individual, issues identified and any remedial action to address the underlying issues. Clearly, feedback about specific issues about individuals' cases will continue be taken forward through existing operational mechanisms, e.g. as part of care management and assessment.

### 8. Recommendation

8.1 The Adult Social Care Partnership Board is asked to note the contents of this report and support the proposed approach to performance monitoring arrangements described in Section 3 relating to wider performance reports, and the arrangements outlined in Section 7 about performance reporting.

# 9. Background Papers

Sunderland Local Area Agreement 2008 - 2011 Our Health, Our Care, Our Say: A New Direction of Community Services White Paper, Department of Health, 2006

## 10. Appendices

Appendix 1 – Risk Assessment of Local Area Agreement Targets
Appendix 2 – Update of Key Performance Measures for Healthy City Priority

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