ITEM NO.

# YEAR END PERFORMANCE REPORT 2016/17

## SUMMARY REPORT

### Purpose of the Report

1. To provide Members with the year-end performance for 2016/17 against the key performance indicators for Adult Social Care.

### Summary

- 2. Year-end performance information has now been compiled for our key performance indicators which are currently based upon the Adult Social Care Outcomes Framework (ASCOF) indicators.
- 3. Carers Survey: The Carers Survey is carried out bi-annually, 5 of the questions are reported in ASCOF. Darlington's performance in 4 of these questions has fallen since the last survey in 2014-15, in line with both regional and national trend. However when Darlington is compared to the provisional data of the North East Regional Performance Group (NERPG), it shows that we are one of the lower performing authorities within this group. These results can be seen in Appendix 1.
- 4. It has been acknowledged that additional work needs to take place during the period up to the next survey in 2018-19. One issue that needs to be addressed is the fall in response rate from 63% in 2014/15 to 51% in 2016/17. It is important to note however, that although Darlington's response rate has fallen along with the other members of the NERPG, Darlington still has the highest response rate out of the group for the second consecutive time. Consideration will made to determine how the response rate can be improved, resources allowing during the 2018/19 collection. Options could include incentives for surveys being returned or surveys being carried out in person during reviews.
- 5. **Permanent Admissions:** Both 65+ and 18-64 year olds admitted to residential or nursing care on a permanent basis have performed better than last year and have come in under the targets set.

- 6. Learning Disabilities / Mental Health in settled accommodation and employment: Both these areas have continued to perform well during the year. There has been a slight drop in the number of adults with learning disabilities in employment since last year. This can be attributed to a number of adults retiring in the year.
- 7. **Reablement Services:** Although there has been a reduction in the number of packages offered due to the service targeting those individuals with a higher level of need, the proportion of individuals with no ongoing care needs has remained the same as last year, and the proportion of individuals whose need reduced home care has increased. This shows that the effectiveness and quality of services still remains high. The number of assistive technology toolkits successfully assigned have increased from last year.
- 8. An analysis of all key performance indicators is included in the main body of this report.

# Recommendation

9. It is recommended:that Members note the report and consider progress against key performance indicators.

### Suzanne Joyner Director of Children and Adults Services

**Background Papers** No background papers were used in the preparation of this report

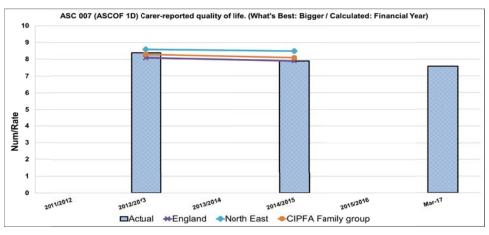
S17 Crime and Disorder	This report has no implications for Crime and Disorder				
Health and Well Being	This report has no direct implications to the Health and Well Being of residents of Darlington.				
Carbon Impact	There are no issues which this report needs to address.				
Diversity	There are no issues relating to diversity which this report needs to address				
Wards Affected	The impact of the report on any individual Ward is considered to be minimal.				
Groups Affected	The impact of the report on any individual Group is considered to be minimal.				
Budget and Policy Framework	This report does not represent a change to the budget and policy framework.				
Key Decision	This is not a key decision.				
Urgent Decision	This is not an urgent decision				
One Darlington: Perfectly Placed	The report contributes to the Sustainable Community Strategy in a number of ways through the involvement of Members in contributing to the delivery of the eight outcomes.				
Efficiency	The Performance Report is integral to scrutinising and monitoring adult social care efficiently (and effectively), however this report does not identify specific efficiency savings.				

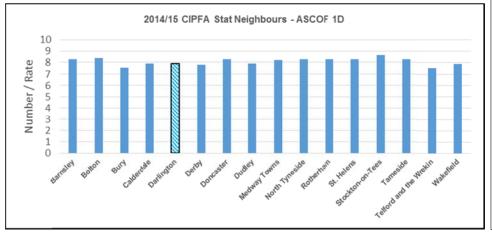
## MAIN REPORT

# QUALITY OF LIFE: ASC 007 (ASCOF 1D) Carer-reported quality of life

**Numerator:** Each respondent is assigned a score based on their answers to the six questions in the Carers Survey Q7 to Q12. The numerator is then a sum of the scores for all respondents who have answered all six questions.

**Denominator:** The number of respondents who answered all six questions in the Carers Survey. Exclusions: Any respondents who failed to answer any of the six questions above are excluded from the calculation of the measure.





Annual Trend	2012/13	8.4
	2014/15	7.9
	2016/17	7.6

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Comparator Groups	2014/15
England Average	7.9
North East Average	8.5
Statistical Neighbours Average	8.0

ASC 007 is a composite measure which combines individual responses to 6 questions measuring different outcomes related to overall quality of life.

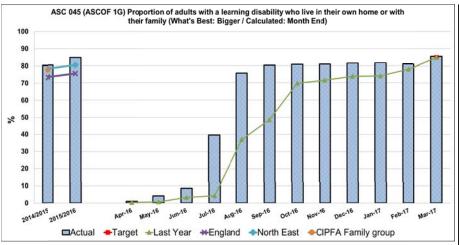
Darlington's performance in this aspect of the survey has fallen since 2012/13. 335 questionnaires were posted for the 2016/17 survey with 172 being returned. This gave a response rate of 51.3%. This is a decrease in rate from the 2014/15 survey when 169 surveys were returned out of 267, a response rate of 63.3%.

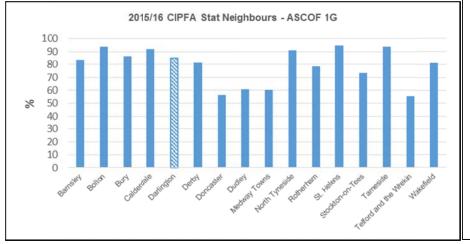
The drop in performance for this indicator has been a national trend since 2012/13, this could be attributed to the reduction in service provision due to the cuts in social care funding.

Appendix 1 shows that Darlington currently has the lowest score when compared to the other local authorities in the North East Regional Group, however it also shows that the majority of local authority's performances are decreasing. QUALITY OF LIFE: ASC 45 (ASCOF 1G) Proportion of adults with a learning disability who live in their own home or with their family

**Numerator:** All people within the denominator who are "living on their own or with their family." The numerator should include those living in their own home or with their family irrespective of whether they have had a review during the year. Source: SALT

**Denominator:** Number of working-age learning-disabled clients known to CASSRs during the period. This includes: a) Clients who received long term support during the year and with a primary support reason of learning disability support. All support settings should be included (i.e. residential, nursing and community settings)





Annual Trend	2014/15	80%
	2015/16	85%
	2016/17	86%

Month Performance (%)											
Apr 16	May 16	Jun 16	Jul 16	Aug 16	Sept 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17
1.02	4.11	8.56	40	71	80	81	81	82	82	81	86

Comparator Groups	2015/16
England Average	75%
North East Average	80%
Statistical Neighbours Average	78%

The proportion of adults with a learning disability who live in their own home or with family has remained similar to 2015/16.

During 2016/17, 2 clients have moved from temporary accommodation to settled accommodation whilst another 2 moved from settled to temporary accommodation.

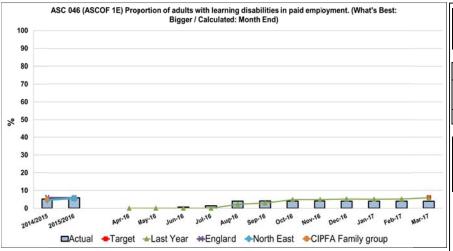
The Life Stages service work uses a progression model, utilising residential care when all other options have been exhausted. We have also skilled workers up through team meetings and training so they understand the importance of the data that they record and why it needs to be accurate. In addition when there were changes known through the performance clinic these were looked into and inaccurate data was corrected.

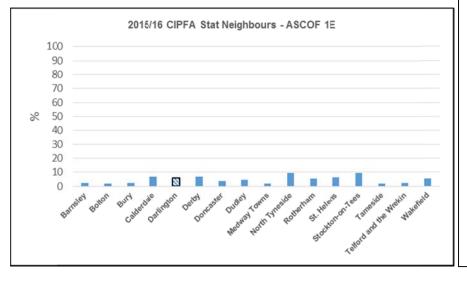
# QUALITY OF LIFE: ASC 046 (ASCOF 1E) Proportion of adults with learning disabilities in paid employment

Numerator: All people within the denominator, who are in employment. The numerator should include those recorded as in paid employment irrespective of whether the information was recorded in an assessment, review or other mechanism. Source: SALT

**Denominator:** Number of working-age learning-disabled clients known to CASSRs during the period. This includes: a) Clients who received long term support during the year and with a primary support reason of learning disability support. All support settings should be included (i.e. residential, nursing and community settings)

Annual Trend





		-	2015/16		5.8%						
		2	2016/17		4.3%						
Month	n Perfor	mance	(%)								
Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	
16	16	16	16	16	16	16	16	16	17	17	
0.0	0.0	0.68	1.37	4.07	4.08	4.04	4.08	4.01	4.00	3,99	

5.2%

	1
Comparator Groups	2015/16
England Average	5.8%
North East Average	5.6%
Statistical Neighbours Average	5.0%

2014/15

There has been a drop in performance since 2015/16. This can be contributed to 4 people no longer being in paid employment. 2 of these were due to retirement, 1 was no longer eligible under the new criteria and 1 left paid employment to start voluntary work.

Mar 17

4.3

Work has been underway with staff in team meetings and training so they understand the importance of the data that they record and why it needs to be accurate

Post Care Act 2014 the level of services changed to supporting only those with substantial and critical needs. Many of the individuals who previously would have had the skills to maintain paid employment were supported into universal services and data around these individuals would no longer be collected. Therefore many individuals who would have been able to access paid employment are now no longer in receipt of services from the local authority. Previous services that were available to support individuals into employment and voluntary work opportunities are no longer provided, such as Aspire.

At present this is an area that is being focused on, through Preparing for Adulthood. Work has been ongoing to facilitate a working group with a focus on learning and developing better ways of supporting individuals who have the skills and ability into paid employment.

The table on the following page shows the companies where each individual currently works.

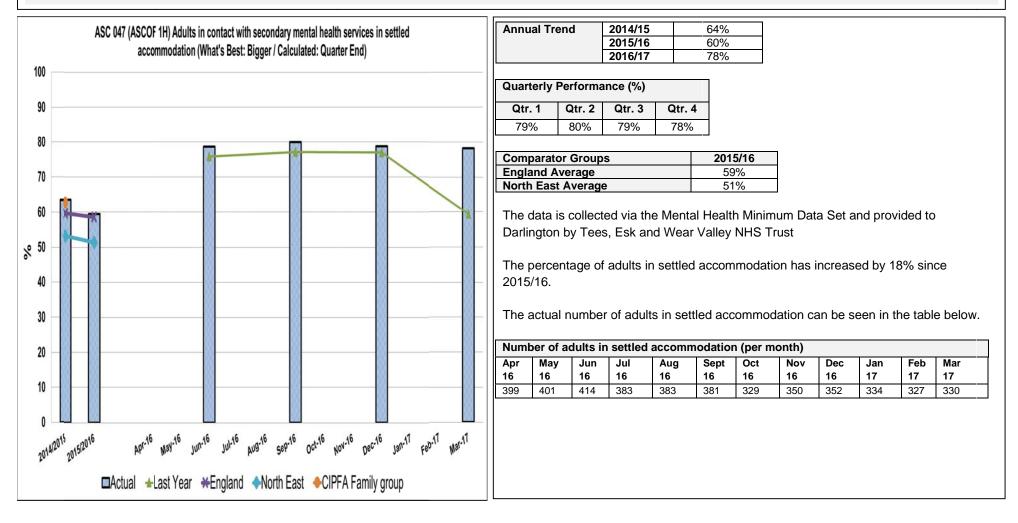
Client Number	Company	Job Role				
P1479	Capita Harthead	Postroom Administrator				
	Milburn House	Cleaner				
P2887	Mencap	Office worker				
366259	Magnet	Canteen worker				
186119	Sainsbury's	Restaurant Worker				
284011	St Aidan's CoE Academy	Canteen worker				
188380	Rosemary Court	Cleaner				
198005	Information not accessible	Information not accessible				
352135	Information not accessible	Information not accessible				
279811	Darlington College	Food Service Assistant				
84555	The Education Centre for Children with Down Syndrome	Support children with Down Syndrome				
361403	B&Q	Shop worker				
178285	The Education Centre for Children with Down Syndrome	Support children with Down Syndrome				

# Table 1: Companies and Job Titles where adults with learning disabilities work

# QUALITY OF LIFE: ASC 047 (ASCOF 1H) Adults in contact with secondary mental health services in settled accommodation

**Numerator:** Number of adults aged 18-69 who are receiving secondary mental health services on the Care Programme Approach recorded as living independently (with or without support). Source: Mental Health Minimum Data Set

**Denominator:** Number of adults aged 18-69 who have received secondary mental health services and who were on the Care Programme Approach at the end of the month. Source: Mental Health Minimum Data Set



# QUALITY OF LIFE: ASC 048 (ASCOF 1F) Adults in contact with secondary mental health services in employment.

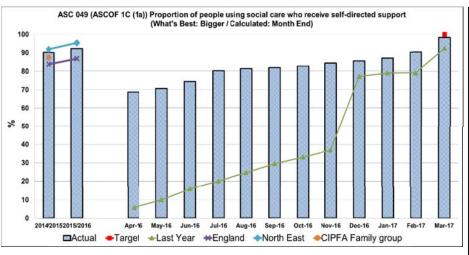
Numerator: Number of working age adults (18-69 years) who are receiving secondary mental health services and who are on the Care Programme Approach recorded as being in employment (Code 01). Source: Mental Health Minimum Data Set

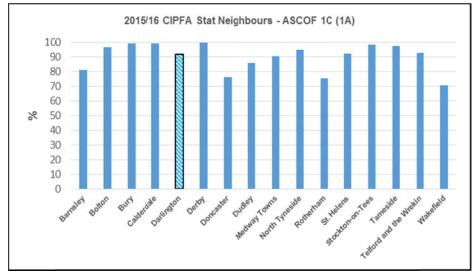
Denominator: Number of working age adults (18-69 years) who have received secondary mental health services and who were on the Care Programme Approach at the end of the month. Source: Mental Health Minimum Data Set

		ASC 048 (ASCOF 1F) Adults in contact with secondary mental health services in employment (What's Best: Bigger / Calculated: Quarter End)	Annu	al Trer	d	2014/1 2015/1 2016/1	6	5.9 6.2 8.8	%					
	100 90		Quar Quar 8.2	terly Po ter 1	erforma Quart 8.0	er 2	Quarter 8.0	3 Q 8.	uarter 4 8					
	80 70 -		Engla	parator and Av h East /	erage			6	<b>15/16</b> 5.7% 1.9%					
%	60 50 40		Darlin The i The a	ngton I numbe actual	oy Tees r of adu numbe	ed via tl s, Esk a ults in e r of adu <b>n emplo</b>	nd Wea mploym Its in en	r Valle ent has nploym	y NHS s increa ent per	Trust ised by	2.6%	since 2	015/16	
	30		Apr 16	May 16	Jun 16	Jul 16	Aug 16	Sept 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17
	20		45	41	41	<b>10</b> 35	37	42	29	36	40	41	36	37
	10 0 201 <sup>4/7</sup>	2015 <sub>2016</sub> Ap <sup>r-16</sup> Nay <sup>-16</sup> Jun <sup>-16</sup> Jun <sup>-16</sup> Jun <sup>-16</sup> Sep <sup>-16</sup> Oct <sup>-16</sup> Nov <sup>-16</sup> Dec <sup>-16</sup> Jan <sup>-17</sup> Feb <sup>-17</sup> Nar <sup>-17</sup>												
		Actual +Last Year +England North East CIPFA Family group												

## QUALITY OF LIFE: ASC 049 (ASCOF 1C (1)) – Proportion of people using social care who receive self-directed support (Bigger is better)

Numerator: The number of users receiving either a) Direct Payment, b) Part Direct Payment or c) CASSR managed Personal Budget at the year-end 31st March: SALT Denominator: Clients (aged 18 or over) accessing long term community support at the year end 31st March: SALT





Annual Trend	2014/15	90%
	2015/16	92%
	2016/17	98%
Month Performa	nce (%)	

	Apr 16	May 16	Jun 16	Jul 16	Aug 16	Sept 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17
	69	71	74	80	81	82	83	84	86	87	90	98

Comparator Groups	2015/16
England Average	87%
North East Average	95%
Statistical Neighbours Average	87%

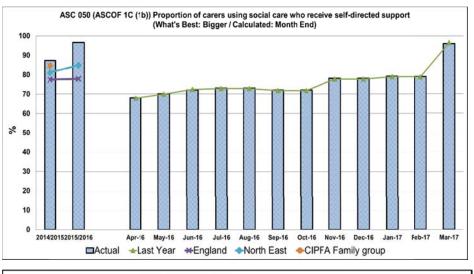
There has been an increase in the proportion of people receiving self-directed support by 6% since 2015/16 to 98%. The actual number of people receiving self-directed support is 921.

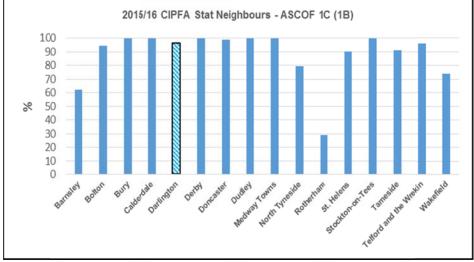
The target for 2016/17 was set at 100%, however after discussions throughout the reporting year it has been agreed that this was an unrealistic target. To have been able to perform at 100% those individuals in receipt of Mental Health Professional Support would have had to have been included in both the numerator and denominator. However a query was sent to NHS Digital requesting clarification on how to capture Mental Health Professional Support. The response was that those individuals receiving professional support should be included in ASCOF 1C denominator, but only to appear in the numerator if they are receiving direct payments or a managed personal budget.

When Darlington's current performance is compared to the latest figures of the comparator groups it shows that we are performing a lot better than both the England and Statistical Neighbours average and 3% better than the North East average.

# QUALITY OF LIFE: ASC 050 (ASCOF 1C (1b)) – Proportion of carers using social care who receive self-directed support.

Numerator: The number of carers receiving either a) Direct Payment, b) Part Direct Payment or c) CASSR managed Personal Budget in the year to 31st March. Source: SALT Denominator: Carers (caring for someone aged 18 or over) receiving carer-specific services in the year to 31st March. Source: SALT





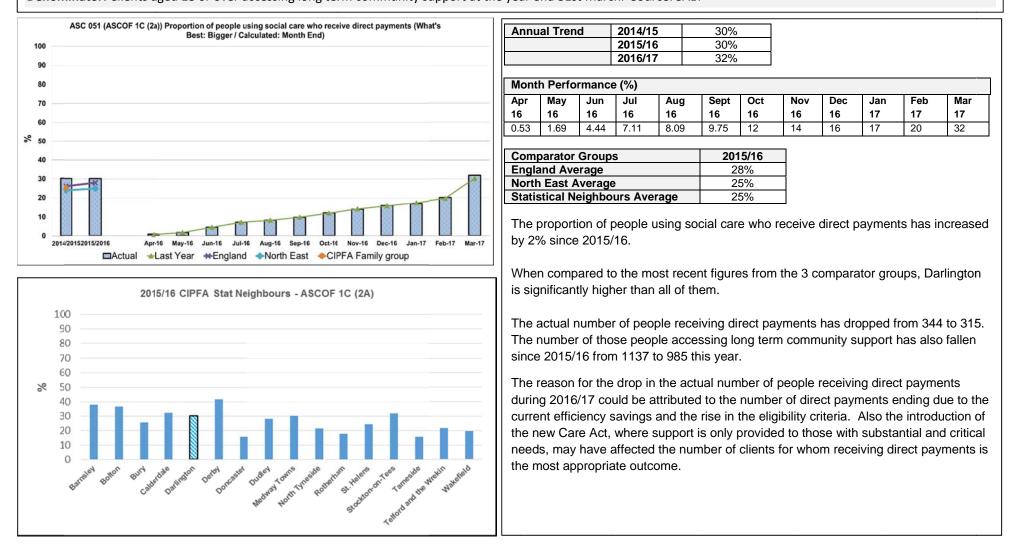
Annu	ual Tren	d	2014/15	5	87%						
			2015/16	6	97%						
			2016/17	7	96%						
	th Perfo										
Apr	Мау	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
			. ,	Aug 16 73	Sept 16 72	Oct 16 72	Nov 16 78	Dec 16 78	Jan 17 79	Feb 17 79	Mar 17 96

Comparator Groups	2015/16
England Average	78%
North East Average	85%
Statistical Neighbours Average	85%

The current number of carers who receive self-directed support is 216. Performance has fallen by 1% since 2015/16, however Darlington is still out performing the 3 comparator groups.

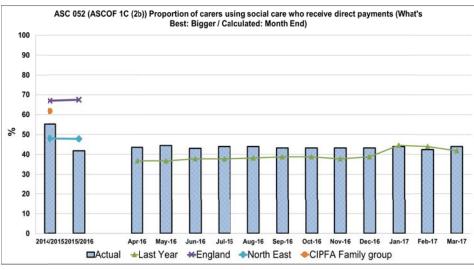
When compared to the most recent figures for the North East and our statistical neighbours, Darlington is 11% better, whilst we are performing 18% better than the England average.

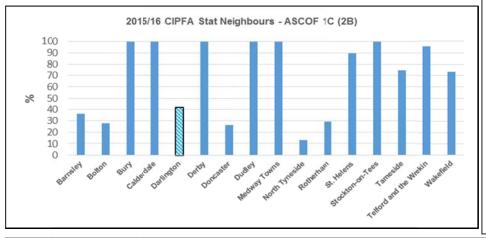
QUALITY OF LIFE: ASC 051(ASCOF 1C (2a)) – Proportion of people using social care who receive direct payments (Bigger is better) Numerator: The number of users receiving direct-payments and part-direct payments at the year end 31st March. Source: SALT Denominator: Clients aged 18 or over accessing long term community support at the year end 31st March. Source: SALT



## QUALITY OF LIFE: ASC 052(ASCOF 1C (2b)) – Proportion of carers using social care who receive direct payments

**Numerator:** The number of carers receiving direct-payments and part direct payments in the year to 31st March. Source: SALT **Denominator:** Carers (caring for someone aged 18 or over) receiving carer specific services in the year to 31st March. Source: SALT





Annual Trend	2014/15	55%
	2015/16	42%
	2016/17	45%

Month Performance (%)

wont	Month Performance (%)										
Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
16	16	16	16	16	16	16	16	16	17	17	17
43	44	43	44	44	43	43	43	43	44	42	45

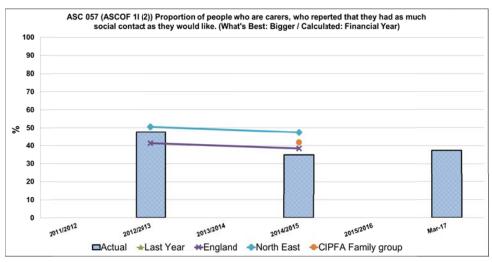
Comparator Groups	2015/16
England Average	67%
North East Average	48%
Statistical Neighbours Average	62%

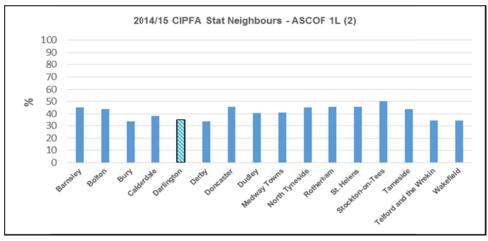
Performance has increased by 3% since 2015/16. When Darlington's current performance is compared to the 2015/16 comparator group figures it shows we are below the average for each area.

The reason for the relatively low proportion of carers receiving direct payments could be a reflection of the work carried out which ensures that service users are getting the right level of support therefore the pressures put upon carers are reduced resulting in less needing to receive direct payments.

# QUALITY OF LIFE: ASC 057(ASCOF 1L (2)) – Proportion of people who are carers, who reported that they had as much social contact as they would like.

**Numerator:** The sum of all those who in response to question 23 of the Carers Survey, selected the response "I have as much social contact as I want". Source Carers Survey **Denominator:** The sum of all those that responded to the above question of the Carers Survey. Source Carers Survey





Annual Trend	2012/13	48	
	2014/15	35	
	2016/17	37	
<b>Comparator Gro</b>	ups	2014/15	
England Average	•	39	
North East Avera	47		
Statistical Neigh	<b>e</b> 42		

The proportion of carers who have reported that they have had as much social contact as they would like has increased by 2% since 2014/15. Although performance has increased, Darlington's figure is still lower than the 3 comparator groups.

166 carers responded to this question with 62 reporting that they have had as much social contact as they would like. Although this is an improvement on the 2014/15 survey, it still means that 63% of respondents had had either 'some contact but not enough' or 'little social contact and felt isolated'.

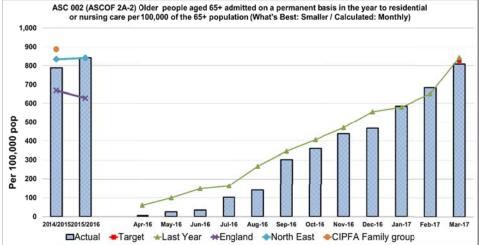
Unlike other carer survey indicators, ASC 057 has not followed the national trend and performance has actually improved since the last survey. **Appendix 1** shows that currently Darlington and South Tyneside are the only 2 authorities within the North East Regional Performance Group whose performance has improved since 2014/15 and that Darlington has seen the biggest improvement of 2%.

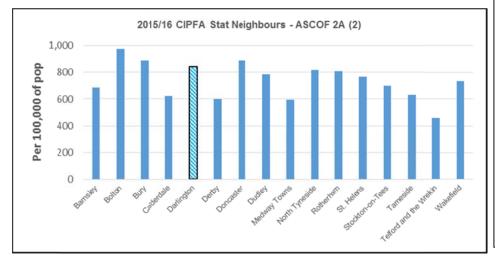
# REDUCE THE NEED: ASC 002 (ASCOF 2A (2)) – Older people aged 65+ admitted on a permanent basis in the year to residential or nursing care per 100,000 of the 65+ population. (Smaller is better)

Numerator: The sum of the number of council-supported permanent admissions of older people (aged 65 and over) to residential and nursing care during the year

(excluding transfers between residential and nursing care): SALT

Denominator: Size of older people population (aged 65 and over) in area (ONS mid-year population estimates).





	Annual Trend	2014/15	788
-		2015/16	843
		2016/17	809

Mont	Month Performance (100,000 per pop)										
Apr 16	May 16	Jun 16	Jul 16	Aug 16	Sept 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17
4.87	24	34	102	141	302	361	439	468	585	682	809

Comparator Groups	2015/16
England Average	628
North East Average	843
Statistical Neighbours Average	889

Since April 2016 the number of people aged 65+ admitted to residential / nursing care on a permanent basis is 166 (809 per 100,000 population). When the annual target is broken down into actual numbers then to meet the target the number of people in permanent admissions needed to be lower than 170, which has been achieved.

When compared to the latest comparative group figures Darlington's current result is better than both the North East and statistical neighbours' average.

The breakdown of data can be found on the following 2 pages.

Matching exercises with Finance (CONTROCC) have taken place throughout the year and figures are now more in line. Monthly meetings are held between the Operations Manager, Adults Performance Co-ordinator and Finance Officer (Adults) to ensure that data held by CONTROCC and CareFirst continues to match. Moving forward it is expected that data from CONTROCC and CareFirst will continue to match each other on a month on month basis.

Breakdown of data for 65+ admitted to residential or nursing care on a permanent basis.

### Table 2: In month total of placements made

	April	Мау	June	July	August	September	October	November	December	January	February	March	Year Total
2016/17	16	12	11	9	13	16	18	14	16	18	8	15	166
2015/16	19	13	12	17	14	22	17	17	14	14	8	7	174
2014/15	11	19	20	14	18	12	5	13	11	17	11	8	159

Table 3: In month total of leavers and reasons why

Month placement ended	No of leavers (per month)	Reasons for placement ending
April	0	
Мау	1	Deceased
June	1	Deceased
July	0	
August	1	Deceased
September	1	Deceased
October	4	Deceased (4 residents)
November	4	Deceased (2 residents) 2 residents left residential care. Both clients were receiving adult mental health services: 1 client was admitted to hospital no alternative placement has yet to be made 1 client no longer is supported by the Department.
December	4	Deceased (4 residents)
January	1	Deceased
February	6	Deceased
March	2	Deceased

 Table 4: In month total of clients in residential care (both Older Persons and EMI)

	April	Мау	June	July	August	September	October	November	December	January	February	March	Year
													Total
	14	10	10	8	10	15	15	14	12	15	8	15	146
%	88%	83%	91%	89%	77%	94%	83%	100%	75%	83%	100%	100%	88%

#### Table 5: Breakdown in age range of service users

Age	Total
65-69	4
70-74	16
75-79	24
80-84	37
85-89	42
90-94	30
95-99	10
100+	3

#### Table 6: Breakdown of Service Type for each placement

Service Type	Total
Permanent Nursing Care	20
Permanent Residential Care	146

#### Table 7: Breakdown of Service Element for each placement

Service Element	Total
EMI Nursing	4
EMI Residential	52
OP Nursing	16
OP Residential	94

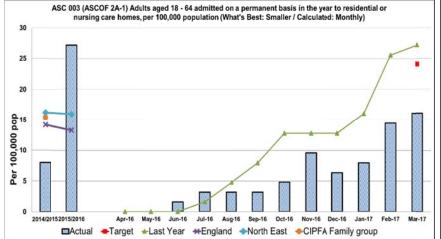
# REDUCE THE NEED: ASC 003 (ASCOF 2A (1)) – Adults aged 18-64 admitted on a permanent basis in the year to residential or nursing care home, per 100,000 population

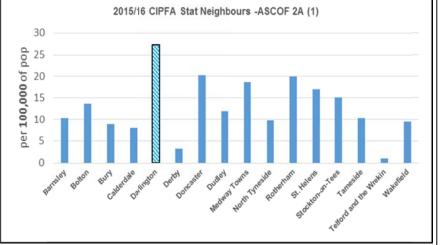
**Numerator:** The sum of the number of council-supported permanent admissions of adults (18-64) to residential and nursing care during the year (excluding transfers between residential and nursing care): SALT

**Denominator:** Size of population (aged 18-64) in area (ONS mid-year population estimates).

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Annual Trend	2014/15	8.0
	2015/16	27
	2016/17	16

#### Month Performance (per 100,000 pop)

month renormance (per rec,ece pep)												
	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
	Apr 16	16	16	16	16	16	16	16	16	17	17	17
	0.0	0.0	1.6	3.2	3.2	3.2	4.8	9.6	6.4	8.0	14	16

L		
	Comparator Groups	2015/16
	England Average	16
	North East Average	16
	Statistical Neighbours Average	15
н		

The number of 18-64 year olds permanently admitted to residential and nursing care has risen to 10 (16 per 100,000 population) since April 2016, yet is much better than previous year.

Reasons for this improvement in performance is due to

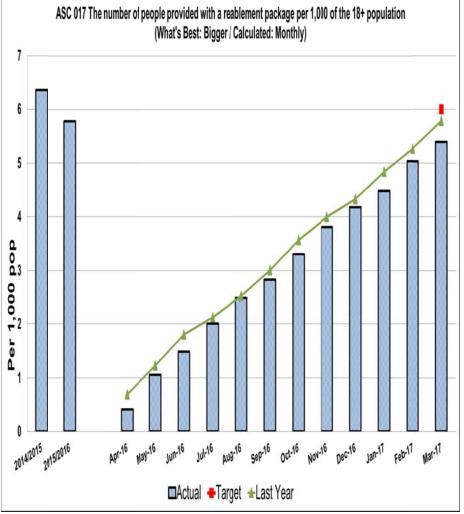
- Additional senior management oversight introduced in September 2016 within learning disabilities and mental health to be adopted by other service area. Oversight includes Team Managers flagging up potential residential placements with Head of Service (prior to submission to Validation) and providing up to date assessments and support plan together with a rationale on why residential care is the most appropriate option. Rationale to provide evidence for exploration of community alternatives including cost comparisons.
- Bi-monthly meetings with children services to continue to track cases that may require residential provision.
- Continue to work with staff to develop the use of residential placements as an intervention in planned rehabilitation back into the community.

The opportunity to categorise those in residential mental health placements as temporary rather than permanent if the aim of the support plan is to regain independence is to be

REDUCE THE NEED: ASC 017 - The number of people provided with a reablement package per 1,000 of the 18+ population.

Numerator: Any person who has started a new reablement service during the reporting period.

Denominator: Latest population estimates for 18+ taken from Office of National Statistics (ONS)



<b>2015/16</b> 5.	4
0040/47	8
<b>2016/17</b> 5.	4

### In Month Performance (per 1,000 pop)

Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
16	16	16	16	16	16	16	16	16	17	17	17
0.4	1.1	1.5	2.0	2.5	2.8	3.3	3.8	4.2	4.5	5.0	

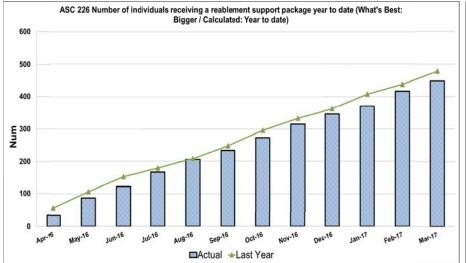
The number of reablement packages provided to service users during 2016/17 was 448. To have reached the target of 6 (per 1,000) population the actual number of services supplied needed to exceed 500.

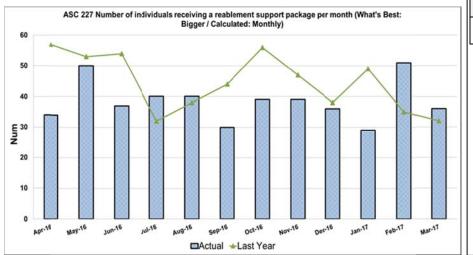
The reduction in the number of packages can be contributed to noted changes in practice for mostly the Strength Based assessment. This has enabled the service to target those individuals with a higher level of need and would benefit from an effective reablement package. Supporting the preventative agenda the individuals previously receiving reablement are now been signposted towards universal services within the community and voluntary sector or low level preventative services such as Care Connect.

It would also appear that the First Point of contact has also had an impact however we are unable to substantiate this at present, going forward we would look to provide data to support this.

The actual number of individuals receiving a reablement support package both per month and year to date can be found on the following page.

# REDUCE THE NEED: ASC 226 – Number of individuals receiving a reablement support package (year to date) ASC 227 – Number of individuals receiving a reablement support package per month





Annual Trend	2015/16	478
	2016/17	453

### In Month Performance (number)

	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
	16	16	16	16	16	16	16	16	16	17	17	17
	35	50	37	40	40	30	39	39	36	29	51	41

The number of individuals receiving a reablement support package within the year has fallen from 478 in 2015/16 to 453 in 2016/17.

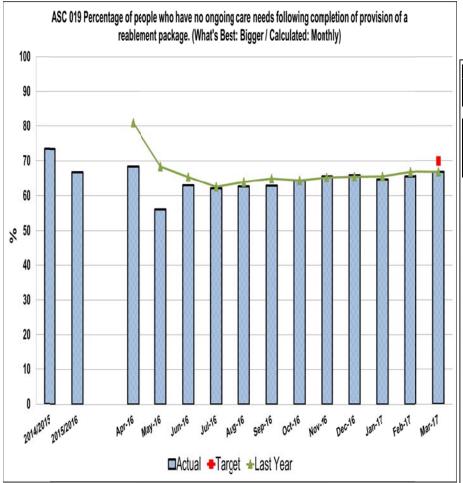
The age breakdown of the service users receiving reablement support packages is shown in the table below. The table shows that the age range with the largest number of people receiving reablement support packages is the 80-89 year olds.

Age breakdown of service users											
18-29	30-39	40-49	50-59	60-69	70-79	80-89	90-99	100+			
1	0	6	18	36	106	203	82	1			

# REDUCE THE NEED: ASC 019 – Percentage of people who have no ongoing care needs following completion of provision of a reablement package.

**Numerator:** Of those in the denominator, those who have had a completed reablement review with outcomes of 'No Services Provided or Identified, Long Term Support Ended, Universal Services/Signposted'

Denominator: The total number of clients completing a reablement package during the period



Annual Trend	2014/15	73%
	2015/16	67%
	2016/17	67%

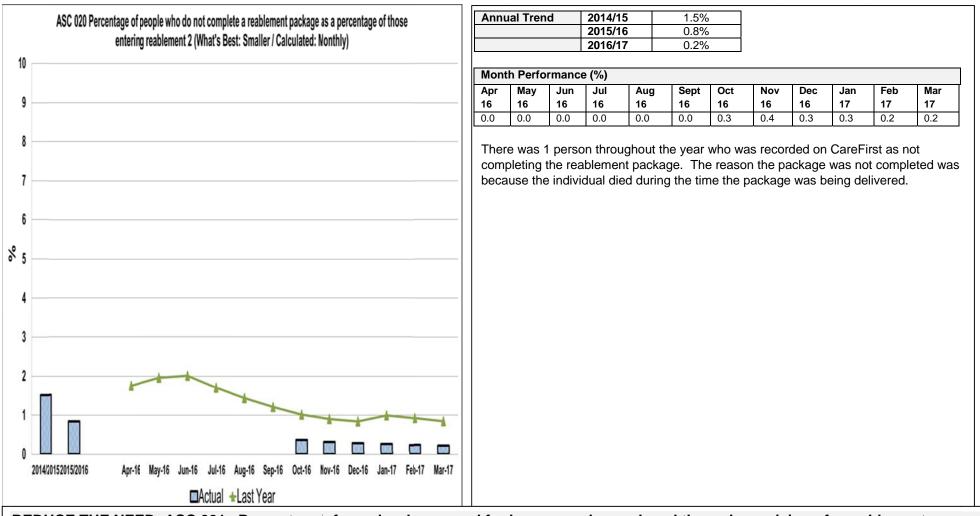
Mont	Month Performance (%)										
Apr 16	May 16	Jun 16	Jul 16	Aug 16	Sept 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17
68	56	63	62	63	63	64	66	66	65	66	67

The actual number of individuals who completed a reablement package throughout the year was 416. Of these 278 had no ongoing care needs following completion of the package.

The target for 2016/17 was 70%, this was missed by 3%. However, due to services only being offered to those individuals with a higher levels of need, there is a greater chance of the numbers still needing care after the reablement package to increase. The fact that the percentage of people who have no ongoing care needs after completing a reablement package has remained the same as last year, demonstrates that although the number of packages provided has fallen the quality and appropriateness of the packages remains high.

# REDUCE THE NEED: ASC 020 – Percentage of people who do not complete a reablement package as a percentage of those entering reablement

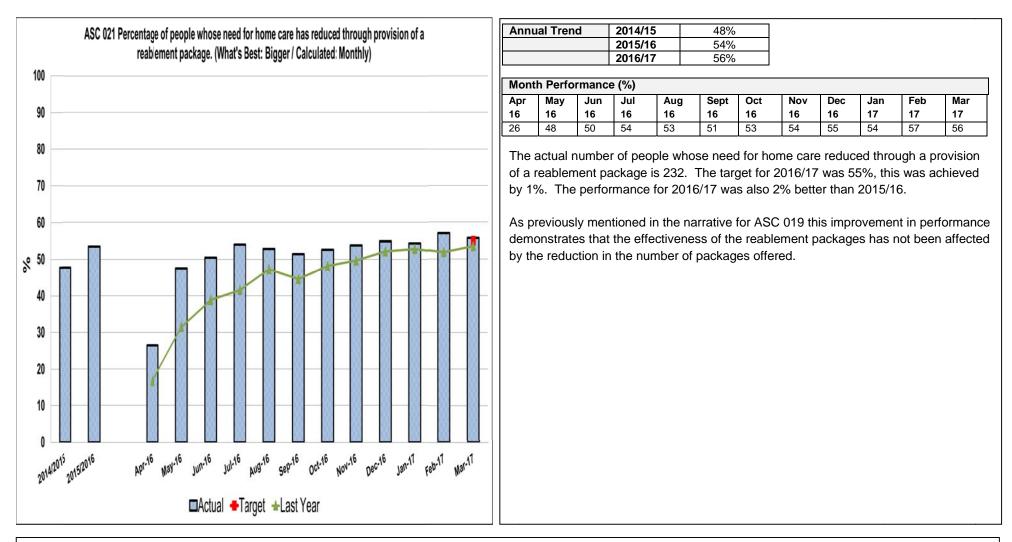
**Numerator:** The total number of clients who have ended a reablement package in the period but not completed it i.e. Agreement end reason = 'Reablement not completed'



# REDUCE THE NEED: ASC 021 – Percentage of people whose need for home care has reduced through provision of a reablement package

**Numerator:** Of those in the denominator, the number where the hours provided during the last week of service is lower than the hours provided during the first week of service.

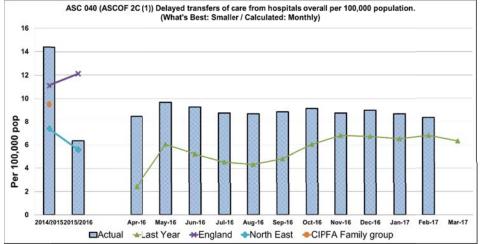
**Denominator:** The total number of clients completing a reablement package during the period.

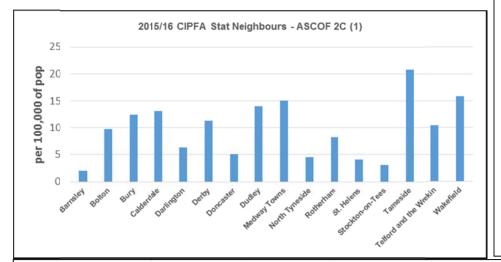


# REDUCE THE NEED: ASC 40 (ASCOF 2C (1)) Delayed transfers of care from hospitals overall per 100,000 population

**Numerator:** The average number of delayed transfers of care (for those aged 18 and over) on a particular day taken over the year. This is the average of the 12 monthly snapshots collected in the monthly Situation Report (SitRep). Source: Unify2

Denominator: Size of adult population in area (aged 18 and over) Source: ONS mid-year population estimates





Annual Trend	2014/15	14
	2015/16	6.4
	2016/17	8.4

#### Month Performance (per 100,000 pop)

Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
16	16	16	16	16	16	16	16	16	17	17	17
8.4	9.7	9.3	8.8	8.7	8.9	9.1	8.8	9.0	8.7	8.4	-

Comparator Groups	2015/16
England Average	12
North East Average	5.6
Statistical Neighbours Average	10

This indicator measures the number of delayed transfers of care from hospital as a whole. There is a delay in receiving information of approximately 6 weeks so this report does not include March's results.

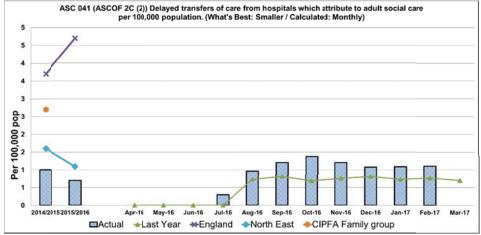
When compared to last year the actual number of delayed transfers during 2016/17 is higher. The number of these delayed transfers which can be attributed to Adult Social Care can be found on the following page.

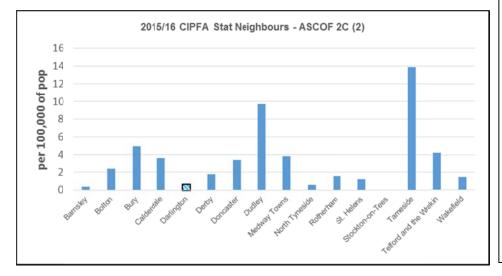
The data on this and the following page shows that Adult Social Care is not the main contributor to delayed transfers of care.

# REDUCE THE NEED: ASC 41 (ASCOF 2C (2)) Delayed transfers of care from hospitals which attribute to adult social care per 100,000 population

**Numerator:** The average number of delayed transfers of care (for those aged 18 and over) on a particular day taken over the year, that are attributable to social care or jointly to social care and the NHS. This is the average of the 12 monthly snapshots. Source: UNIFY2

Denominator: Size of adult population in area (aged 18 and over) Source: ONS mid-year population estimates





	r		
	Annual Trend	2014/15	1.0
-		2015/16	0.7
_		2016/17	1.1

#### Month Performance (per 100,000)

Apr 16	May 16	Jun 16	Jul 16	Aug 16	Sept 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17	
0.0	0.0	0.0	0.3	1.0	1.2	1.4	1.2	1.1	1.1	1.1	-	

Comparator Groups	2015/16
England Average	4.7
North East Average	1.1
Statistical Neighbours Average	3

NHS England are reporting that currently 10 patients have had delayed transfer of care attributed to adult social care throughout the year. Confidence in the accuracy of this figure is low. This is due to the fact that Adult Social Services do not have the opportunity to verify the data before it is submitted to NHS England. Also there are a number of recording issues around postcodes (patients living in North Yorkshire are being recorded as Darlington residents).

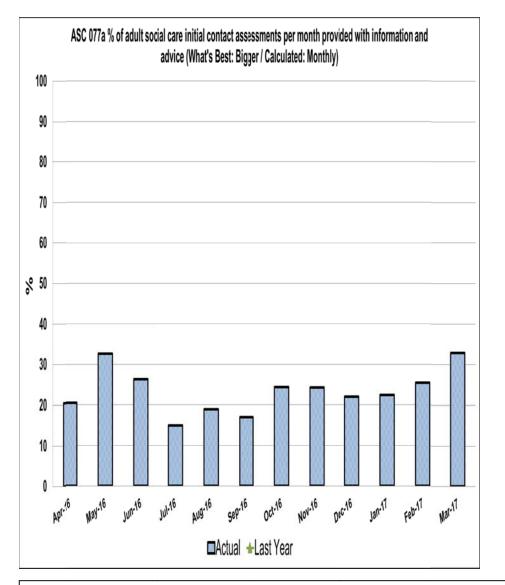
Therefore although this indicator is currently being reported as 1.1 this will be adjusted when the correct figure is released by NHS England.

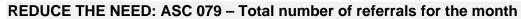
Presuming that Darlington's performance will fall once the figures have been adjusted then this year's figure will remain lower than the latest figures from the 3 comparator groups. This reflects the proactive work our social workers based in hospitals are doing and the improved relationship we now have with our health partners.

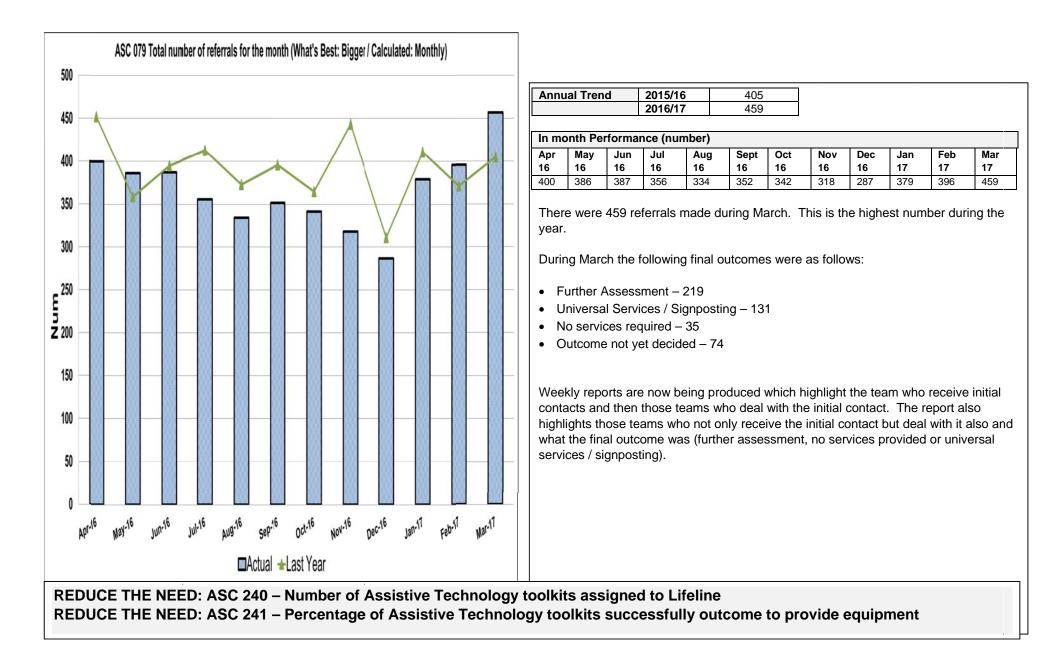
Ensuring that when someone is ready to be discharge everything is in place so no delays take place, is now top priority for staff working with hospital settings. Prior to discharge the patient needs to be classified as medically fit and a safe discharge plan is in place.

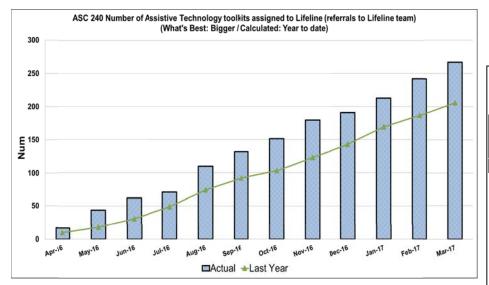
# REDUCE THE NEED: ASC 077a – Initial contact assessment provided with information and advice

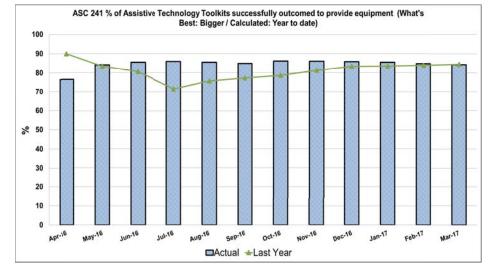
	Annu	ial Tren	d	2016/1	7	34%						
	Mont	h Perfo	rmance	e (%)								
	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
- 25 of 31-	16	16	16	16	16	16	16	16	16	17	17	17
- 25 01 51-	20	33	26	15	19	17	17	24	22	22	26	34
_	- 25 of 31-	- 25 of 31-	- 25 of 31-	Apr May Jun - 25 of 31-	- 25 of 31-	Month Performance (%)           Apr         May         Jun         Jul         Aug           16         16         16         16         16	Month Performance (%)           Apr         May         Jun         Jul         Aug         Sept           - 25 of 31-         16         16         16         16         16	Month Performance (%)           Apr         May         Jun         Jul         Aug         Sept         Oct           - 25 of 31-         16         16         16         16         16         16         16	Month Performance (%)           Apr         May         Jun         Jul         Aug         Sept         Oct         Nov           - 25 of 31-         16	Month Performance (%)           Apr         May         Jun         Jul         Aug         Sept         Oct         Nov         Dec           - 25 of 31-         16	Month Performance (%)           Apr         May         Jun         Jul         Aug         Sept         Oct         Nov         Dec         Jan           - 25 of 31-         16         16         16         16         16         16         16         16         16         16         17	Month Performance (%)           Apr         May         Jun         Jul         Aug         Sept         Oct         Nov         Dec         Jan         Feb           - 25 of 31-         16         16         16         16         16         16         16         16         16         17         17











Annual Trend 2015/16 206											
			2016/17	,	267						
In Month Performance (number)											
In Mo	onth Per	formar	nce (nun	nber)							
In Mo Apr	onth Per May	formar Jun	nce (num Jul	nber) Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
			· · ·		Sept 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17

The number of assistive technology toolkits which have been assigned to Lifeline throughout the year was 267.

The 1st graph shows that the number of toolkits assigned each month has been significantly higher than 2015/16.

The breakdown in the age range of those individuals who have been referred to the Lifeline Team for assistive technology for the year can be seen in the table below. It shows that similarly to the reablement figures it is the 80-89 year olds who have the most referrals made.

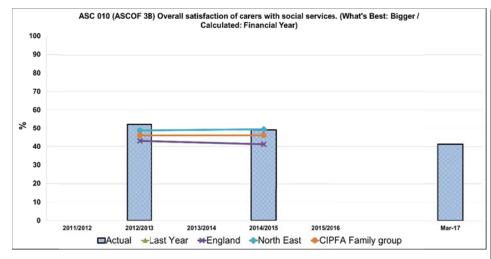
Age br	Age breakdown of service users										
18-29	30-39	40-49	50-59	60-69	70-79	80-89	90-99	100+			
11	3	10	14	34	50	102	42	1			

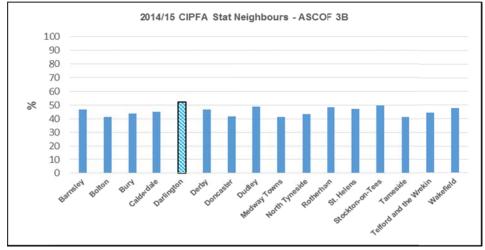
The percentage of assistive toolkits successfully outcome is **84%**, this is the same performance as 2015/16. The outcome of the referrals are shown below.

Outcome	Number
Completed – service(s) provided	225
Completed – service(s) but declined	38
Completed – service(s) declined due to cost	2
Completed – further assessment	1

### POSITIVE EXPERIENCE: ASC 010 (ASCOF 3B) Overall satisfaction of carers with social services.

**Numerator**: In response to the question Carers Survey question 4: "Overall, how satisfied or dissatisfied are you with the support or services you and the person you care for have received from Social Services in the last 12 months?" those individuals who selected the response "I am extremely satisfied" or "I am very satisfied". **Denominator**: All those that responded to the question.





Annual Trend	2012/13	52
	2014/15	49
	2016/17	41

Comparator Groups	2014/15
England Average	41
North East Average	49
Statistical Neighbours Average	49

This indicator is a good predictor of overall performance of service and quality. There has been an 8% drop in satisfaction from 49% in 2014/15 to 41% in 2016/17.

The number of carers who responded to this question in the Carer's Survey was 152. Out of this number, 63 responded by answering either 'I am extremely satisfied' or 'I am very satisfied'. There was 19 respondents that indicated that they were 'neither satisfied nor dissatisfied' with the overall support of services they and the person they cared for had received. This means that there were 70 carers who responded that they were either 'quite satisfied' or 'quite, very or extremely dissatisfied' with the overall support of services.

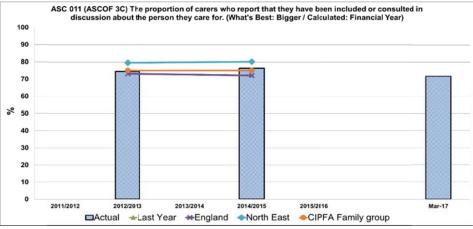
If Darlington's current performance is compared to the latest results of the 3 comparator groups then the number of satisfied carers is lower in Darlington than North East average and our statistical neighbours.

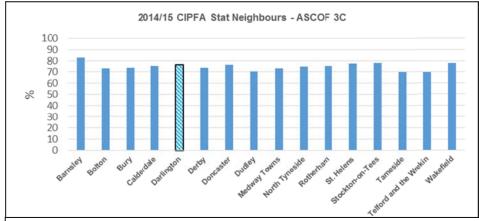
**Appendix 1** shows that Darlington has seen one of the largest drops in overall satisfaction with social services of the local authorities in the North East Regional Performance Group. Darlington has gone from being one of the highest performing authorities in terms of carers overall satisfaction with social services to one of the worst.

# POSITIVE EXPERIENCE: ASC 011 (ASCOF 3C) The proportion of carers who report that they have been included or consulted in discussion about the person they care for.

**Numerator**: In response to Q15: "In the last 12 months, do you feel you have been involved or consulted as much as you wanted to be, in discussions about the support or services provided to the person you care for?", all those individuals who selected the response "I always felt involved or consulted" and "I usually felt involved or consulted".

Denominator: All those that responded to the question.





Annual Trend	2012/13	78
	2014/15	76
	2016/17	72

Comparator Groups	2014/15
England Average	72
North East Average	80
Statistical Neighbours Average	75

The proportion of carers who reported that they have been included or consulted in discussions about the person they care for has fallen by 4% since 2014/15. When Darlington's current performance is compared to the 3 comparator groups then we are performing worse than both the North East average and our statistical neighbours.

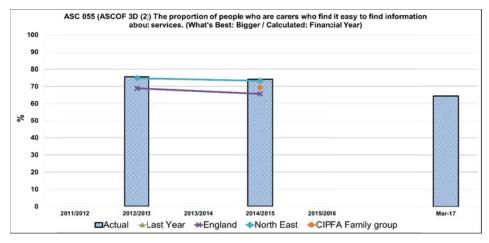
The number of carers who responded to this question in the Carer's Survey was 138. Out of this number, 99 responded by answering either 'I always felt included or consulted' or 'I usually felt included or consulted'. This means that there were 39 clients who 'Sometimes' or never felt included or consulted' in discussions about the support or services provided to the person they care for.

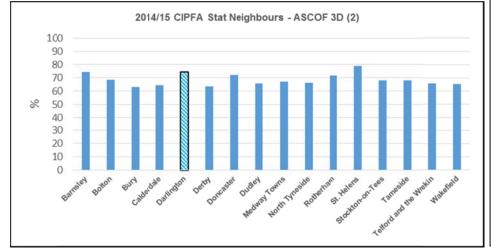
**Appendix 1** shows that as performance figures currently stand Darlington has the lowest proportion of carers who have felt included or consulted in discussions about the person they care for with the North East Regional Performance Group.

# POSITIVE EXPERIENCE: ASC 055 (ASCOF 3D (2)) The proportion of people who are carers who find it easy to find information about services

**Numerator**: The sum of all those who in response to the question 13 of Carers Service : "In the last 12 months, have you found it easy or difficult to find information and advice about support, services or benefits? Please include information and advice from different sources, such as voluntary organisations and private agencies as well as Social Services", selected the response "very easy to find" and "fairly easy to find".

Denominator: The sum of all those that responded to the above question of the Carers Survey





Annual Trend	2012/13	76
	2014/15	74
	2016/17	64

Comparator Groups	2014/15
England Average	66
North East Average	73
Statistical Neighbours Average	69

The proportion of carers who reported that they have been included or consulted in discussions about the person they care for has fallen by 10% since 2014/15. When Darlington's current performance is compared to the 3 comparator groups then we are performing worse than all of them.

The number of carers who responded to this question in the Carer's Survey was 112. Out of this number, 72 responded to the question regarding how easy they had found information about services either 'very easy to find' or 'fairly easy to find'. This means that there were 40 clients who 'Sometimes or never felt included or consulted' in discussions about the support or services provided to the person they care for.

**Appendix 1** shows that as performance figures currently stand Darlington has the lowest proportion of carers who find it easy to find information about services available to them. There is only Darlington and Gateshead who have seen a drop in satisfaction of 10% or more.