

## Directorate Performance Overview Report

**Directorate:** Communities Directorate

**Reporting Period:** Quarter 4 – Period 1<sup>st</sup> January – 31<sup>st</sup> March 2016

### 1.0 Introduction

1.1 This report provides an overview of issues and progress within the Directorate that have occurred during the fourth quarter 2015/16.

### 2.0 Key Developments

2.1 There have been a number of developments within the Directorate during the fourth quarter which include:

#### **I COMMISSIONING AND COMPLEX CARE SERVICES**

##### **Supported accommodation – vulnerable adults**

Procurement for a new framework agreement has been completed and new contracts will commence in June 2016. Services provision will change from the current model of agencies delivering dispersed provision across the Borough to a dedicated provider for each of seven zones. This will enable providers to deploy staff more efficiently whilst maintaining quality services. The new rates include the impact of the national living wage/national minimum wage increases and sleep in support.

The Council is finalising agreements with Halton Housing Trust for the 5 specialist bungalows at Barkla Fields and Signature Supported Housing for 12 apartments at 5 Widnes Road. This will be a valuable resource for adult social care which will be able to nominate tenants for the properties to meet the accommodation and complex support needs of some of Halton's most vulnerable adults.

##### **Mental Health Services**

Review of the 5Boroughs Acute Care Pathway and Later Life and Memory Service: following the recent review of the above services; a number of multiagency work streams have been set up to take forward the review recommendations. The Council and CCG are fully involved in these developments, which are overseen locally by the Halton Mental Health Delivery Group.

CQC inspection of 5BoroughsPartnership NHS Trust: this detailed inspection took place across the whole footprint of the 5Boroughs in summer 2015. The final report has now been submitted to the 5Boroughs; mental health services were rated as good throughout; two other areas – forensic inpatient services and end of life care services – required improvement and are the subject of an internal action plan.

## **Other developments in the Commissioning and Complex Care Department**

Halton and St Helens Emergency Duty Team (EDT): following approaches from two local authorities to join the existing partnership to deliver the EDT across Halton and St Helens, and an understanding that the current requirements for the service have changed substantially since it was first set up in 2007, a review of the service delivery has been undertaken. This has concluded that it is not currently feasible to extend the service to include more partners, not least because of the complexity of incorporating additional IT systems. Internal work is now taking place to consider whether, in the medium term, the current model of service delivery should change.

## **II PREVENTION AND ASSESSMENT SERVICES**

### **Oak Meadow**

Oak Meadow Community Support Centre received an unannounced visit from CQC on 29<sup>th</sup> December and a second announced visit on 5<sup>th</sup> January 2016. It has received an overall rating of good across all areas – safe, effective, caring, responsive and well led. Comments from people included ‘I could have sat here and felt sorry for myself but they have given me hope for my future’. Work is ongoing to ensure that the service maintains standards and further improves on them.

### **Transforming Domiciliary Care**

Work is under way to develop and redesign domiciliary care in the borough. The current workstreams include looking at an outcome based model of care, understanding the local market, identifying infrastructure requirements and co-production of the overall project. The first phase is to complete a needs assessment and then submit a funding application to an appropriate body by July 2016.

### **“Making a Difference” a strategy**

The “Making a Difference” a strategy for transforming care management in Halton that is aimed at staff and partner agencies, continues to be developed. The overall purpose has been to provide a shared vision of the future of care management services and provide us with a plan to shape our future, over the next five years. This Care Management strategy has stemmed from the growing need to identify a future vision of assessment and care management services that are fit for purpose to meet the many challenges at national and local level whilst maintaining high quality, effective and safe practice. A key strand has been the successful development of, a “Progression Routes Policy and Procedure.” It demonstrates Halton is committed to developing the careers of Social Workers through vocational and academic routes. Adopting a stepped advancement pathway that allows for the successful recruitment, retention and succession planning of social work staff within the Borough. This created a new role of Advanced Social Worker, which will support practice and supervision, as required within the Professional Capability framework. We are currently, recruiting to two new posts.

Another important area to highlight is a regular “Social Work Matters Forum” where the Principal Social Worker meets with social workers to ensure the professionalism and voice of social work is supported within the integrated working environment. Social Workers are meeting in “Action Learning Sets” to enable opportunity for reflective learning, research, and support evidence based practice. The forum will receive a visit from the chief social worker Lyn Romeo in July. Lyn Romeo issued her Annual Report in

March this year which references the good practice being undertaken in Adult social work in Halton.

### **Making it Real in Personalisation**

In Care Management Services as part of 'Personalisation' we will be running a follow up event in June to evaluate the work that has been done with the 'Making it real' agenda regarding us marking our progress in Halton towards personalised, community based support. We will be co-producing a workshop with people using services that will help check our progress and completion of work.

### **Making Safeguarding Personal**

The Local Government Association and ADASS (Directors of Adult Social Services) published an evaluation of Making Safeguarding Personal (MSP). This is the approach embedded within the Care Act and has moved safeguarding investigations from a process driven approach to one which focusses on outcomes for the person involved. The new IT system went live in July 2015 and the report on outcomes has been presented to the Safeguarding Adult Board.

## **3.0 Emerging Issues**

3.1 A number of emerging issues have been identified during the fourth quarter that will impact upon the work of the Directorate including:

### **I COMMISSIONING AND COMPLEX CARE SERVICES**

#### **Mental Health Services**

Social Work for Better Mental Health: this is a national programme from the Department of Health designed to clarify the roles and functions of social work in mental health services across the country. Halton, along with Sefton Borough Council, is an early implementer site for this work. This follows the publication of national guidance in relation to this issue in 2014.

Two meetings have taken place, facilitated by the authors of the national guidance, and two more are planned. The facilitators will then produce a report with recommendations for the future, and this will then be incorporated into the partnership between the Borough Council and the 5BoroughsPartnership to deliver social work services within the Trust.

Direct Payments in Mental Health: following an internal review of the low uptake of direct payments within Halton's mental health services, the Halton Disability Partnership has been commissioned to work directly with people who use mental health services, to offer them practical support and encourage them to take up this form of help. It is expected that this will lead to an increase in the take-up of direct payments.

## **II PREVENTION AND ASSESSMENT SERVICES**

### **Rapid Clinical Assessment Team (RCAT)**

The new RCAT is due to go live in Halton from Monday 4<sup>th</sup> April 2016.

RCAT will be available following a referral from a Halton based GP, for acutely unwell over 75s, who require a Care of the Elderly Consultant opinion.

The interim model being introduced from the 4<sup>th</sup> is a consultancy only service, with any diagnostics or treatment changes for patients being implemented by the GP.

Referrals to service will be accepted between 9am – 4pm, Monday to Friday.

As previously outlined the service introduced is an interim model pending the development of the service via EMIS Web, when the service will then be able to manage a caseload of patients including accessing diagnostics directly and providing treatment.

### **Expansion of Care Home Support Team**

The Care Home Support Team has been operating in Halton since July 2013.

The Team currently consists of 2 full time equivalent nurses employed by Bridgewater Community Healthcare NHS Foundation Trust.

It is evident that the work that the Team has undertaken with the Care Homes within Halton has generated positive outcomes for Service Users, but there are issues associated with capacity to be able to continue to support and work with the Care Homes to develop further etc. As such discussions are ongoing with Bridgewater to explore the feasibility of expanding the Team.

### **Care at Home Service**

In response to the current strategic challenges within the domiciliary care market an 'in house' care service is being developed to undertake a pilot locally to meet the needs of people with complex health conditions. The intention is to provide some additional capacity within the sector for a three month period to allow some proposals for change to strengthen and develop the local care market to be considered and progressed.

### **Community Multi-Disciplinary Team (MDT)**

There is ongoing development of a Community Multi-Disciplinary Team (MDT) approach in Halton. This is being introduced to help the management of people with Complex Needs and intends to Improve the health and well-being of people with complex needs, building on the current Social Care In Practice Model. We are working with GP's and CCG colleagues to look at integrate approaches, including assessment, IT, team working.

### **SALT**

SALT (Short and Long Term Support) was introduced as a return for the year end 2014/15, which replaced Referrals, Assessments and Packages of Care return and Adult Social Care Combined Activity Return. SALT differs from its predecessors in that it attempts to track in a more meaningful way a client/carer's journey through social services from referral to service provision by identifying significant events (for example planned/unplanned hospital episodes, change of residence or safeguarding concern) and key outcomes of users (e.g. long term support, long term support ended/temporarily suspended). Several ASCOF measures are drawn from the SALT return and these provide performance information on the critical issues of:

- Self-directed support and direct payments
- Learning disability (LD) service users in paid employment and living in their own home or with their family

- Permanent Admissions to Residential / Nursing Care

Data for Self-directed Support and LD users in paid employment and settled accommodation is drawn from long term support services only, a significant difference from how these measures were generated previously. For statutory reporting purposes, the following service types are now categorised as short term support – Adaptations and Equipment including Telecare. As such these users have been excluded from these measures.

Given that SALT is only in its second year, the data needs to be looked at with some consideration for data quality issues due to differences in interpretation and how data capture systems have been configured. There will also be some discrepancies with comparability across previous years because base data used for ASCOF measures has changed – number of service users receiving self-directed support in 2013/14 included service types which are considered short term support in 2014/15 onwards, thus decreasing the potential number of clients receiving self-directed support.

Preliminary regional benchmarking has highlighted variances which point to interpretation issues and lack of clarity in Health and Social Care Information Centre guidance documents. These issues are due to be discussed in more detail within the North West performance leads group.

Figures for permanent admissions to residential / nursing care are different from those reported in Better Care Fund and to AQuA\_ADASS benchmarking due to the fact that SALT tables report the intention to place client into care (outcome of an assessment/review) rather than actual placements made.

Reports will continue to be monitored for accuracy following year end returns.

#### **4.0 Risk Control Measures**

Risk control forms an integral part of the Council's Business Planning and performance monitoring arrangements. During the development of the 2015/16 Business Plan, the service was required to undertake a risk assessment of all key service objectives with high risks included in the Directorate Risk Register.

As a result, monitoring of all relevant 'high' risks will be undertaken and progress reported against the application of the risk treatment measures in Quarters 2 and 4.

#### **Progress against high priority equality actions**







There have been no high priority equality actions identified in the quarter.

## 6.0 Performance Overview

The following information provides a synopsis of progress for both milestones and performance indicators across the key business areas that have been identified by the Communities Directorate. The way in which the Red, Amber and Green, (RAG), symbols have been used to reflect progress to date is explained at the end of this report.

### Commissioning and Complex Care Services

#### Key Objectives / milestones

Ref	Milestones	Q4 Progress
CCC1	Continue to monitor effectiveness of changes arising from review of services and support to children and adults with Autistic Spectrum Disorder. <b>Mar 2016.</b> (AOF 4) <b>(KEY)</b>	
CCC1	Continue to implement the Local Dementia Strategy, to ensure effective services are in place. <b>Mar 2016.</b> (AOF 4) <b>(KEY)</b>	
CCC1	Continue to work with the 5Boroughs NHS Foundation Trust proposals to redesign pathways for people with Acute Mental Health problems and services for older people with Mental Health problems. <b>Mar 2016</b> (AOF 4) <b>(KEY)</b>	
CCC1	The Homelessness Strategy be kept under annual review to determine if any changes or updates are required. <b>Mar 2016.</b> (AOF 4, AOF 18) <b>(KEY)</b>	
CCC2	Ensure Healthwatch is established and consider working in partnership with other Councils to deliver this. <b>Mar 2016</b> (AOF 21)	
CCC3	Undertake on-going review and development of all commissioning strategies, aligning with Public Health and Clinical Commissioning Groups, to enhance service delivery and continue cost effectiveness, and ensure appropriate governance controls are in place. <b>Mar 2016.</b> (AOF 21 & 25)	

#### Supporting Commentary

##### **CCC1 - Children and adults with Autistic Spectrum Disorder:**

The current autism strategy is presently being reviewed to identify gaps in services. The redesign of transition between children and adult services (due to be completed in June 2016) will further enhance support to children and young people with a diagnosis of autism.

##### **CCC 1 Dementia Strategy:**

The procurement process for the Dementia Community Pathway redesign is underway, with the provider interviews scheduled for April 2016, with the contract due to commence 1<sup>st</sup> May 2016. In the intervening period a waiver has been accepted by Procurement for a period of 1 month

(31<sup>st</sup> March – 30<sup>th</sup> April 2016) to extend the existing provider contract until the new contract commences.

The Admiral Nurse service is now operational and actively promoting the service to engage with partners and generate referrals

The Dementia Action Alliance continues to engage with partners and public to promote local dementia related activity and seek insight from people living with dementia and their carers. The event held during the quarter attracted over 60 people, professionals and carers to educate around food, nutrition and supportive meal times for people living with dementia.

### **CCC 1 Mental Health:**

The review of the Acute Care Pathway and the Later Life and Memory Service was completed and published at the end of 2015, with a number of recommendations for change, designed to improve service delivery. Working groups have now been set up, both internally within Halton and more widely across the 5Boroughs, and the council is fully involved in each of these. The outcomes of these groups is monitored by the Halton Mental Health Delivery Group.

### **CCC 1 Homelessness Strategy:**

The homelessness strategy 2014 – 2018 is a working document that captures future change, trends, and demands. A further consultation event is due to be held September 2016 to review the action plan, which will involve both statutory and voluntary agencies to determine the level of achievement and key priorities for next 12 months.

The main priorities identified for 2016/17 are Health and Homelessness, and Complex needs and a number of initiatives have been developed to improve the level of agency integration and service area provision. The focus will be around the key priorities, with additional emphasis placed upon achieving the objectives outlined within the St Mungo's report, which will be incorporated within the reviewed strategy action plan. The purpose of the review is to ensure that the working document is current and reflects legislative and economical change.

As part of the homelessness strategy a further youth strategy is being developed to identify key area services for young people. A consultation event was held mid-2016 and the CLG consultant is working directly with Halton to identify key objectives and good practice.

The reconfiguration of services has improved the overall service delivery and effectiveness of the supported accommodation within the district. The temporary accommodation provision within Halton is deemed sufficient to meet both present and future demands and will enable the Authority to fully comply with changing legislation and statutory duty, with emphasis placed upon Homelessness Prevention.

The Gateway single point of access for support and accommodation needs is proving successful and reduced the level of assessment duplication amongst providers. The system captures client movement, placement and support across the Halton district; with additional information that indicates if clients are accessing services across the sub regional Authorities.

Recently two services being YMCA and Grangeway Court went out to tender and new services were awarded with effect from 1/4/2016. The YMCA contract was awarded to Creative Support and the Grangeway Court contract was awarded to P3, both services are proving to be successful with many changes implemented to improve service delivery and value for money.

### **CCC 2 HealthWatch:**

Healthwatch Halton is the independent consumer champion created to gather and represent the views of the public. Over the past year Healthwatch has:

- been present at Party in the Park, both Urgent Care Centres, CCG Health Forum events, Age UK MM support groups, SPARC at Riverside College, Halton Disability Partnership and many others.
- consulted their membership and the wider community on topics such as Flu, Domiciliary Care, MSK, End of Life Services, Hospital Discharge, Urgent Care Centres and Dentists. The Flu

survey garnered 149 responses.

- Undertaken 'enter & view' visits to the following carer homes; Oakmeadow Community Support Centre, St Luke's Nursing Home, St Patrick's Nursing Home, Croftwood Care Home and Beechcroft Care Home
- Undertaken 'enter & view' visits to the following hospital trusts; Warrington & Halton Hospitals NHS Foundation Trust, Ward B12 Warrington Hospital, Ward B14 Warrington Hospital , Cheshire Merseyside & Treatment Centre Halton Hospital and Ward B1 Intermediate Care Ward Halton Hospital.
- In partnership with Healthwatch Warrington and 4 other local Healthwatch, made visits to: Hollins Park Hospital, Peasley Cross Hospital Mental Health Unit, St Helens, Leigh Infirmary Mental Health Unit, Whiston Hospital Mental Health Unit, Brooker Centre - Halton General Hospital.







As of the end of December 2015, 1426 members.

### **CCC 3 Review and development of commissioning strategies to align with Public Health and Clinical Commissioning Groups:**

Progress continues to be made on this agenda and detailed work to align contracting and commissioning will continue throughout the financial year 2016/17.



## Key Performance Indicators

Ref	Measure	14/15 Actual	15/16 Target	Q4 Actual	Q4 Progress	Direction of travel
CCC 3	Adults with mental health problems helped to live at home per 1,000 population	2.64	3.0	2.37		
CCC 4	The proportion of households who were accepted as statutorily homeless, who were accepted by the same LA within the last 2 years (Previously CCC 6).	0	1.2	0		
CCC 5	Number of households living in Temporary Accommodation (Previously NI 156, CCC 7).	19	11	10		

### Supporting Commentary

#### **CCC 3 Adults with mental health problems helped to live at home per 1,000 population:**

Following service redesign within the 5Boroughs and the increasing development of shared care within primary care services, the numbers of people dealt with by the Trust has reduced. This has also meant that the numbers of people seen by social work staff have also reduced. The work of delivering the recommendations into the review of the Acute Care Pathway will consider this and make recommendations for future service delivery.

#### **CCC 4 The proportion of households who were accepted as statutorily homeless, who were accepted by the same LA within the last 2 years:**

The Authority places strong emphasis upon homelessness prevention and achieving sustainable outcomes for clients.

The Authority will continue to strive to sustain a zero tolerance towards repeat homelessness within the district and facilitate reconnection with neighbouring authorities.

#### **CCC 5 Number of households living in Temporary Accommodation:**

The Housing Solutions Team has taken a proactive approach to preventing homelessness. There are established prevention measures in place and the Housing Solutions team fully utilise and continue to promote all service options available to clients.







The changes in the TA process and amended accommodation provider contracts, including the mainstay assessment process, has had a positive impact upon the level of placements.

The emphasis is focused on early intervention and empowerment to promote independent living.

The improved service process has developed stronger partnership working and contributed towards an effective move on process for clients.

## Prevention and Assessment Services

### Key Objectives / milestones

Ref	Milestones	Q4 Progress
PA 1	Monitor the effectiveness of the Better Care Fund pooled budget ensuring that budget comes out on target (AOF 21 & 25) <b>March 2016 (KEY)</b>	
PA 1	<i>Integrate frontline services with community nursing (AOF 2, 4, &amp; 21) <b>March 2016</b></i>	
PA 1	<i>Develop and implement the Care Management Strategy to reflect the provision of integrated frontline services for adults (AOF 2,3 &amp; 4) <b>March 2016</b></i>	
PA 1	Implement the Care Act (AOF 2,4, 10, 21) <b>NEW March 2016 (KEY)</b>	
PA 1	Develop an integrated approach to the delivery of Health and Wellbeing across Halton (AOF 2, 4, 21) <b>March 2016</b>	
PA 2	Continue to establish effective arrangements across the whole of adult social care to deliver personalised quality services through self-directed support and personal budgets. <b>Mar 2016.</b> (AOF 2, AOF 3 & AOF 4)	

### Supporting Commentary

#### **PA 1 Better Care Fund:**

The pooled budget is on target for a small underspend at year end.

#### **PA 1 Integrated provision of frontline services:**

Social Care in Practice (SCiP) is now fully operational across the whole of the Borough. Work continues on the development of Multi-Disciplinary Team working and this will continue into 2016/17.

#### **PA 1 Develop a Care Management Strategy:**

The Care Management Strategy is now in place, it has been agreed at respective Boards. It is now at a phase where the action plan is being implemented.

#### **PA 1 Implement the Care Act:**

All key stages of the first phase of the implementation of the Care Act have been completed. Additional training in relation to the Care Act and the law has been identified and procured and will be delivered in May 2016.







#### **PA 1 Integrated approach to the delivery of Health and Wellbeing across Halton:**

Integrated approach is now in place.

## PA 2 Personalisation/Self-directed Support:

To enable effective arrangements for 'Personalisation' across adult social care, we have a steering group to take forward the 'Making it Real' agenda. Work has been ongoing from when TLAP (Think Local Act Personal) initially supported us to facilitate a 'Making It Real Live' event. From the event we developed an action plan and leads have worked on task finish groups. A follow up event is now planned for June. Care Management continues to review processes and procedures and provide training to staff to ensure compliance with the care act which is focused on personalisation and a training programme is planned.

### Key Performance Indicators

Ref	Measure	14/15 Actual	15/16 Target	Q4 Actual	Q4 Progress	Direction of travel
PA 1	Numbers of people receiving Intermediate Care per 1,000 population (65+)	80	77	(Q4= 406; 1622) cumulative		
PA 2	Percentage of VAA Assessments completed within 28 days	86.8%	85%	<b>85%</b> (estimated, further data quality work ongoing to confirm this)		
PA 6a	Percentage of items of equipment and adaptations delivered within 7 working days	95.5%	97%	<b>99%</b>		

### Supporting Commentary

#### **PA 1 Numbers of people receiving Intermediate Care per 1,000 population (65+):**

The Q4 figure is provisional. There have been amendments to previous quarter figures which have meant an increase in some referral figures. Up to date figures for IC referrals for each quarter during 2015/16 are as follows: Q1 = 401, Q2 = 401, Q3 = 414.

#### **PA 2 Percentage of VAA Assessments completed within 28 days:**

This target has been achieved, albeit the figure is slightly lower than 2014/15; this is due to data loading issues; this will be addressed by a more detailed analysis of the completed safeguarding investigations for 2015/16, with a view to providing mandatory training for operational staff and support surgeries undertaken by the performance and carefirst teams to reduce the risk of these issues reoccurring in the future.




#### **PA 6a Percentage of items of equipment and adaptations delivered within 7 working days:**

This indicator has achieved in excess of its target figure; performance has improved compared to last year's figure. We are still missing information from Housing

Maintenance Solutions, which was a new contract during the year.




## APPENDIX: Explanation of Symbols

Symbols are used in the following manner:

Progress		<u>Objective</u>	<u>Performance Indicator</u>
Green		Indicates that the <u>objective is on course to be achieved</u> within the appropriate timeframe.	<i>Indicates that the annual target <u>is on course to be achieved</u>.</i>
Amber		Indicates that it is <u>uncertain or too early to say at this stage</u> , whether the milestone/objective will be achieved within the appropriate timeframe.	<i>Indicates that it is <u>uncertain or too early to say at this stage</u> whether the annual target is on course to be achieved.</i>
Red		Indicates that it is <u>highly likely or certain</u> that the objective will not be achieved within the appropriate timeframe.	<i>Indicates that the target <u>will not be achieved</u> unless there is an intervention or remedial action taken.</i>

### Direction of Travel Indicator

Where possible performance measures will also identify a direction of travel using the following convention

Green		Indicates that <b>performance is better</b> as compared to the same period last year.
Amber		Indicates that <b>performance is the same</b> as compared to the same period last year.
Red		Indicates that <b>performance is worse</b> as compared to the same period last year.
N/A		Indicates that the measure cannot be compared to the same period last year.