

ADULT SOCIAL CARE, HEALTH AND HOUSING

QUARTERLY PERFORMANCE DIGEST

**Fourth Quarter
January – March 2010**

Quarterly Performance Digest

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1. Significant Events or Publications This Quarter

In February the Housing and Well Being Team held a successful Consultation Event on the forthcoming Adults Plan. The points raised were fed into the draft plan that was presented to the Health and Well Being Partnership on April 26th.

2. Achievements and Areas for Improvement

2.1. Achievements

Against the theme: **taking control of care – empowering adults to control their own care** Richmond was shortlisted for a **Local Innovation Award Scheme**. Representatives from the council and voluntary sector went to 11 Downing Street in March to celebrate this achievement. The council were runners up in this category and our work on delivering personal budgets was acknowledged as demonstrating best practice and leading the way.

We received confirmation of £3,375,000 of grant funding from the Homes and Communities Agency to Network Housing to deliver an additional **27 social rented family homes** during 2010-2011 through our 'purchase and repair scheme' with them. This was made possible through the Borough's commitment of £1,620,000 from its Housing Capital Programme into this scheme.







The average length of **time waiting for major adaptations** from assessment to work beginning has reduced from 31 weeks in 07/08 to 27 weeks in 2009/10. This improvement has been achieved through reviewing business processes, closer monitoring of cases and the use of additional/ temporary surveyors.

2.2 Areas for Improvement

People with Learning Disabilities (PLD) in Settled Accommodation – the target of 55% of service users in settled accommodation was not achieved with the 09/10 result of 33.9%. This year there were more people in settled accommodation but performance is measured by those people that have been reviewed. A large increase in safeguarding referrals has taken priority over reviewing and consequently not all reviews were completed, with an adverse effect on the result of the indicator. For 2010/11 social workers have been given weekly targets for reviews.

Reablement – At 27%, the percentage of people not requiring a service following reablement is below the 38% target. The key issues affecting performance are quality of service and capacity of providers to take on new cases which is being addressed with providers in monthly meetings. Targets have been introduced to ensure there is a consistent length of stay. Longer term provider quality is being addressed through work with the Dept of Health Care Services Efficiency Delivery (CSED) team to identify core competencies for Reablement workers and identify London-wide training opportunities. A tender process for a single expert Reablement service provider is underway.

3. Strategic Projects – Update

Key to symbols used in tables:		
	G – (Green)	On track to achieve target (PIs) or deliver project to timescale
	A – (Amber)	Not on track but likely to achieve target (PIs) or deliver project to timescale
	R – (Red)	Not on track and not likely to achieve target (PIs) or deliver project to timescale
	Improving	 Deteriorating
		 No change

Issue/Project Name and Brief Description	Progress Q4	Status Q4	Responsible Officer	Action Needed
Develop & implement a re-ablement service	Short term -. Working with reablement providers in developing more capacity to deliver good quality care. Some staff for new Reablement service in post but no manager recruited. . Longer term - Specification for service completed and agreed for tender. Part of London network to determine key competencies for reablement homecare providers.	A	Ged Taylor	Locate accommodation for Reablement service and recruit all staff. Develop/ refine business processes to deliver more effective service
Safeguarding Adults - zero	Plans being developed as part of Communication Strategy to raise profile in wider community.	G	Ged Taylor	

Issue/Project Name and Brief Description	Progress Q4	Status Q4	Responsible Officer	Action Needed
tolerance of abuse of vulnerable adults.	Peer and spot audits have provided opportunity for targeted improvement, particularly manager involvement in early stages of case.			
Implement PLD Change Programme	<p>Project manager appointed and work plan agreed for Cost Funding Calculator (CFC) to review costs of residential placements. Needs analysis almost completed and will be used to focus intervention for the Cost Funding Calculator.</p> <p>Block contract review meetings completed and costs recovered towards offsetting costs of voids. Two providers to reconfigure services to improve fit with service user needs. Note: Project noted amber as 09/10 savings not achieved</p>	A	Ged Taylor	<p>Monitor impact and savings from CFC</p> <p>Complete deregistration of 3 Mencap homes</p> <p>Work with providers to reconfigure existing services based on needs analysis data</p>
Social care transformation	<p>Work streams and governance structure agreed.</p> <p>Recruitment in progress.</p> <p>High level business process developed.</p> <p>Staff newsletter and communication strategy in process.</p>	A	Ged Taylor	<p>Finalise business processes</p> <p>Implement phase 1 Access service.</p> <p>Identify accommodation for all teams and arrange moves where required.</p>
Joint MH Commissioning Strategy	<p>Commissioning Strategies (Older People and Working Age Adults) signed off by Cabinet and PCT Board in March 2010. Implementation planning nearly complete for year 1 of the five year strategies.</p> <p>MH Polysystems Steering Group and Joint Commissioning Group overseeing the work.</p>	G	Ged Taylor	
Introduce Transport efficiencies	<p>All identified efficiency targets have been achieved for the 2009/10 financial year. Final figures are being agreed with finance. We have reduced the cost in transport for children with special educational needs</p>	G	Brian Castle	




Issue/Project Name and Brief Description	Progress Q4	Status Q4	Responsible Officer	Action Needed
	by 9% per child.			
Improve the school scores of children in temporary accommodation	Working with Children's Services to agree a methodology for providing year on year comparative data so we can evidence that school scores have improved for children in temporary accommodation	A	Brian Castle	Continue to work with Children Services to produce the comparator data required to evidence performance improvements.
Implement Telecare strategy	Demo site open on request as demand not high. Telecare business processes developed for new referrals Telecare awareness training provided	A	Ged Taylor	Implement new telecare business processes in Access service from June
Develop new supported living accommodation. - PLD and MH	MH - Accommodation Review finalised and actions included in implementation of MH Commissioning Strategy (working age adults). Increase in MH floating support now available for people both in supported living and living independently. PLD - Supported living at Seymour Rd to be completed June 10 and moves of individuals into tenancies planned. Mini tender underway for core Provider at scheme	G	Ged Taylor	
Adults' Strategic Plan	Stakeholder event held in February. Initial draft of the Plan produced and considered by the Health and Wellbeing Partnership on 26 April. Further consultation with stakeholders and the public will be carried out in late May/June. The Plan is provisionally scheduled to be considered by Cabinet for signoff in July.	G	Mandy Skinner	
Borough based Commissioning with PCT	In principle proposals agreed for closer governance arrangements and joint management structure for borough based commissioning.	A	Cathy Kerr	Detailed work on joint management structure and governance ongoing. Report to be presented at next Project Board scheduled for May 10.

4. Performance Indicators

4.1. All Performance Indicators – Summary of Progress

There are **50** indicators for Adult Social Care, Housing and Health that monitor progress against National Indicators (43), Community /Corporate plans (7) and LAA (5 included in the National Indicators).

Information is available for 47 (94%) of indicators and the status of these is shown below

Status	Indicators	
	Number	%
	33	70.2%
	5	10.6%
	9	19.1%

4.2. Local Area Agreement

The following are the Adult Social Care and Housing indicators in the Local Area Agreement

Indicator	Baseline	Data provided	08/09	09/10 Target	09/10 Q4	Lead Officer	Status	Progress and Comments
NI 125 – Number of people living at home, 3 months after discharge from intermediate care /reablement	Not available	Qtrly	77.4%	79.7%	84.0%	Ged Taylor	G	Target of 79.7% has been agreed with Government Office for London. Performance above target.
NI 129 - End of life care – %	05/06	Annually	19.3%	26%	20.7%	Ged	R	2009 data – 5.3% behind target

Indicator	Baseline	Data provided	08/09	09/10 Target	09/10 Q4	Lead Officer	Status	Progress and Comments
of people who die at home	18.8%					Taylor		is about 60 deaths. 1.4% increase in performance in 2009. End of life delivery plan in place and council officers working with NHS Richmond to deliver actions
NI 138 - Satisfaction of people over 65 with home and neighbourhood	88.9%	Bi-annually	88.9%	88.9%	Not provided this qtr	Cathy Kerr	G	Place survey – Results are top in London
NI 155 - Number of affordable homes delivered	337 homes over 3 years	Qtrly	Outturn 185	119	20 this qtr 41 yr to date provisional	Mandy Skinner	G	A revised target agreed with CLG of 337, meaning we are now on target with approx 67% completed at the end of year 2 of this three year programme. Provisional figures at this stage. (226 units).
NI 187 - Tackling fuel poverty—people on income based benefits in homes with low energy efficiency rating	<35 13.2% >65 24.5%	Annually	<35 13.2% >65 24.5%	<35 12.95% >65 25.8%	<35 17.22% >65 25.57%	Brian Castle	R	Data is gathered by survey Result of <35 do not reflect significant activity to deliver high number of energy saving measures to fuel poor households. Now targeting all private tenants with low efficiency ratings and encouraging them to apply for grant aid and to take part in the next home visitor scheme.

4.3. Progress of Indicators that are not on track

Indicator	2008/09 Actual	2009/10 target	Q4	Direction of travel	Lead Officer	On track?	Comments	Action to improve
NI 131 - Delayed transfers of care – No. of people delayed pw	15.7 people delayed pw	7.25 people pw	10.38 People pw	↑	Ged Taylor	R	Performance in <i>non-acute</i> delays has improved further during Q4 and has achieved target for the first time in 09/10	Most delays due to problems with Continuing care assessments at West Mid. Met with NHS Richmond and senior managers at the hospital to identify potential solution. Fortnightly monitoring of action/issues by Assistant Director.
NI 179 Value for money - total net value of ongoing cash-releasing value for money gains since the start of 08-09 financial year	(£000) 1,793	(£000) 2,065	(£000) 1,691	↑	Jeremy De Souza	R	NI179 replaces data in Annual Efficiency Statement - only ACS data here. Planned savings from reablement and PLD Change Programme behind target.	Revised efficiency savings targets have been set for the Reablement Service in 2010/11 and further efficiency savings targets relating to the LD Change Programme.
NI 132 - Timeliness of social care assessment	75%	90%	73.9% Whole year 78.6% Q4	→	Ged Taylor	R	Q4 is a provisional figure. No longer a national indicator. Will not achieve target	The new Access service will provide services such as equipment at the initial stage of assessment which will mean a reduction in people waiting for assessment
NI 40 - Drug users in effective treatment	364 Users	408 users	Year-end figures	↓	Ged Taylor	R	Data is provided a qtr behind as the indicator reports on	Providers set challenging targets within 2010/11 contracts for new people

Indicator	2008/09 Actual	2009/10 target	Q4	Direction of travel	Lead Officer	On track?	Comments	Action to improve
			expected in June 10.				people who are in treatment for 12 weeks. PCT are predicting that the target will not be met.	entering treatment. Richmond has applied to the Home Office to become a DIP intensive borough to increase the number of Richmond drug users who offend and access treatment.
NI 141 - Percentage of vulnerable people achieving independent living year to date	88%	85%	77.3% cumulative (65.0% Q4)	↓	Ged Taylor	R	More unplanned moves than in previous years though numbers are small and one person can significantly affect the indicator results	The user groups involved are high risk – ex-offenders and single homeless people. An analysis of the issues to be presented in a report with recommendations for improvement to the SP Partnership Group.
NI 145 Clients with Learning Disabilities in settled accommodation	35.5%	55%	33.9%	↑	Ged Taylor	R	Performance is dependent on all people in the community having a review.	See under Areas for Improvement in Section 2
% of people receiving reablement who do not need a service at the end of their reablement	New	38.5%	28%	↑	Ged Taylor	R	Evidence of a reduction in spending on the homecare which is due to Reablement.	See under Areas for Improvement in Section 2

5. Customer Feedback

5.1 *Feedback by Service Area*

In Adult Social Care, the Quality Assurance (QA) team gather feedback from service users either directly or through Care Managers asking questions about the quality of service at review. The purpose of the monitoring is to gather feedback from service users who are not satisfied with the quality of the care delivered. All service users that say they are dissatisfied with their service are followed up by the QA team with the service provider to resolve the issues identified.

Service Area	2008/09	2009/10 Q1	2009/10 Q2	2009/10 Q3	2009/10 Q4	Comments
Homecare						
% people very satisfied	58%	44%	48%	47%	47%	Overall satisfaction remains 5% higher than in 08/09 and the number of concerns raised has decreased this quarter. Only 5 complaints in 09/10 compared to 13 in 08/09
% people quite satisfied	32%	52%	48%	49%	48%	
Total % people satisfied	90%	96%	96%	96%	95%	
No. of concerns upheld	83 per qtr	39	89	95	85	
Stage 1 complaints	13	0	2	1	2	
Res and Nursing Care						
% people very satisfied	63%	71%	57%	60%	58%	Overall satisfaction is very high, with no one dissatisfied this quarter. There were 6 concerns in 09/10 and 2 complaints.
% people quite satisfied	36%	26%	39%	37%	41%	
Total % people satisfied	99%	97%	96%	97%	99%	
No. of concerns upheld	7	0	0	2	4	
Stage 1 complaints	0	0	1	1	0	
All community services i.e. homecare, meals,						

Service Area	2008/09	2009/10 Q1	2009/10 Q2	2009/10 Q3	2009/10 Q4	Comments
% people very satisfied	61%	43%	47%	47%	41%	All negative responses are followed by the QA team to ensure that issues are resolved – there were 7 people dissatisfied in 09/10.
% people quite satisfied	36%	53%	51%	49%	50%	
Total % people satisfied	97%	96%	98%	96%	91%	
Disabled Facilities Grant						
% people very satisfied/satisfied with DFGs	96%	100%	100%	100%	92%	The drop equates to one person responding that they were neither satisfied nor dissatisfied.
Meals						
No. of concerns upheld	3	1	6	1	1	Meals was delivered outside the normal delivery time and person was not told beforehand.
Stage 1 complaints closed	3	0	0	0	0	
Care Management						
Stage 1 complaints closed	15	3	5	7	4	19 complaints in 09/10 compared to 15 in 08/09
Finance						
Stage 1 complaints closed	11	0	3	2	3	Less Finance complaints in 09/10 – 8 compared to 11 in 08/09
Housing						
Stage 1 complaints closed	10	3	2	4	3	12 housing complaints in 09/10 compared to 10 in 08/09

5.2. Learning from Complaints that were upheld

A complainant was unhappy with the language used in a letter relating to a debt. The debt was not their responsibility yet we contacted them repeatedly. Changes to procedures were agreed following the complaint. In future Finance will limit 'successful' calls to debtors to one per day and calls that don't get through to five per day. Finance will agree a standard paragraph to put in their debt recovery letters relating to the Council's finances. All staff will be reminded of the importance of Customer care and the Council's reputation in the community.

5.3 User surveys

Equipment and Minor Adaptations - 459 surveys were sent to people who have had equipment and minor adaptations between September and December 09. The survey is a Dept of Health survey which was last run three years ago. 299 surveys were returned (65.1% response rate), which is a high response rate giving +/-3.4% confidence level. Two questions from the survey are used as National Indicators

- NI127 – Percentage of individuals responding "It has made it much better" to the question "How has the equipment/minor adaptation affected the quality of your life". Initial results 72% - a 2% increase on previous results
- NI 128 - User reported measure of respect and dignity in their treatment -% responded "I was very happy with the way they treated me" to question "How happy were you with the way those who discussed your needs treated you?" Initial results are 91% - a 2% increase on previous results

Initial benchmarking of the results with a few London boroughs shows we have performed very well. A full summary of the survey results with benchmarking will be available in the next quarter performance report

Carers Survey - The Dept of Health also asked councils to take part in a Carers Survey. The council was unable to undertake the survey at the time required but did send out the survey to known carers at a later date. 300 surveys were sent to carers with 56 returned (18.6%). In answer to the question '*Overall how satisfied are you with help from London Borough of Richmond Social Services in the past year?*', 68% were satisfied. A full summary of the survey results with benchmarking will be available in the next quarter performance report

5.4 Mystery Shopping

There were 12 mystery shops of Richmond Direct undertaken by Age Concern during this period and 11 of them provided a good level of response. In the one scenario with a poor response, the caller was transferred directly to an internal department without

warning, and the phone went through to voicemail. Customer contact standards state that we will only transfer people with their agreement.

Feedback from Age Concern is that they have seen significant improvements in the customer care approach of the staff in Richmond Direct. Feedback from the mystery shopping is used to identify areas of good practice as well as areas that could be improved. The information gathered is also used to inform the development of resources to support the new Access Service.

6. Equality and Diversity

Following a lengthy self assessment process and external scrutiny, ACS along with other Council directorates have concluded that they are working at level 4 of the Local Authority Equality Standard. The self assessment identified a spread of good practice and identified areas for further development. The latter are included in the 2010/11 work plan.

EINA's progressed through the quarter include:

- **The Local Area Agreement**

The LAA cycle completes at the end of March 2011. In the meantime, a list of key recommendations has been made and is being progressed.

- **Reablement**

Work has progressed well with Care Services Efficiency Delivery (CSED) team consultants. Targeted consultation will be necessary as this work progresses

- **Joint Equipment**

The EINA looked at the current service and the implications of the introduction of the "retail model". The Retail Model will be implemented during 2010, and a post-implementation review will be carried out in October 2010.

- **Care Management re-design**

Several recommendations were made to ensure that no groups are disadvantaged and include:

- Reviewing all Person Specifications to ensure that they do not discriminate on the grounds of age
- To review and update the EINA at the beginning of Phase 2 of the restructure to include outcomes of discussions with staff,
- To give regard to equality impacts arising from staff moving to different office accommodation including the needs of staff with a disability.