

SOCIAL SERVICES PERFORMANCE

Report By: Director Of Social Care And Strategic Housing

Wards Affected

County-wide

Purpose

1. To inform the Committee of the Social Services Inspectorate (SSI) Report on Herefordshire Social Care Performance 2002-03.

Financial Implications

2. There are no financial implications.

Background

3. The SSI report annually on Social Care performance. The report comes after the formal annual review meeting. This year it also comes following the publication of the Joint Review report presented to Cabinet on 10th July, 2003.

Main Themes

4. The SSI report attached (Appendix 1) endorses the sustained children's service progress and reminds us of the performance challenge in older people's services.
5. The report has to be presented to Cabinet and this will happen on 25th September, 2003.
6. It will be appropriate for the Scrutiny Committee to review progress on the Joint Review Action plan as finalised in early October 2003, following consultation.

RECOMMENDATION

THAT the report be noted.

BACKGROUND PAPERS

- None

Further information on the subject of this report is available from Sue Fiennes, Director of Social Care and Strategic Housing on 01432 260039

PERFORMANCE REVIEW REPORT 2003: HEREFORDSHIRE

SERVICES FOR CHILDREN AND FAMILIES

Improvements observed since the last review

Assessment has highlighted the following improvements since the last review:

- ◆ The 2001/02 Performance Indicator (PI) data that became available subsequent to the last review, and which informed the November 2002 star refresh, showed that overall the council's work to improve child protection services, to provide safe and secure care for children looked after and to increase their life chances had shown significant improvements. These improvements have been sustained during 2002/03 and confirmed through the Joint Review and the Climbie Audit. (Standard 1)
- ◆ Improved management of child protection processes had decreased numbers on the register, considerably improved performance in reviewing and for duration on the register.

(Standard 4)
- ◆ The Performance and Improvement Group had been successful in managing access and workloads; all children on the register and looked after children were allocated to social workers.

(Standard 5)
- ◆ The priority given to safe and secure care for looked after children had maintained a good level of performance overall and realistic forecasts have been made for a sustained good level of service;
 - a very high proportion of children were in fostering placements;
 - an increased proportion were cared for by family and friends;
 - stability of placements had improved, especially long-term stability;
 - there had been particular improvement in adoptions of looked after children consistent with new service developments; and
 - a high level of attention to children's health was maintained.
(Standards 1,3 and 4)
- ◆ The already excellent performance in supporting care leavers had improved. (Standard 3)
- ◆ Significant and needed improvements in increased life chances for looked after children had been achieved:

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- considerable improvement in absences from school had been gained through good joint working with education services;
- an already good performance in the achievement of educational qualifications had seen improvement; and
- final warnings and convictions of looked after children had reduced.

(Standards 1 and 3)

- ◆ The timeliness of initial and core assessments had improved significantly. (Standard 4)

Areas for Improvement

Assessment has highlighted the following concerns about performance:

- ◆ A more consistent quality of assessment and care planning for children across the service was required, which focussed on outcomes and, for children on the child protection register, identified clearly what had to change in order to secure their safety and welfare.

(Standard 4)

- ◆ Clearer eligibility for services and agreement with partner agencies about responses to children for whom there are welfare concerns but who do not meet the child protection threshold.

Standard 5)

- ◆ The council had embarked on a number of initiatives in response to the two areas identified above; the practice support project, case recording standards and audits and the development of the Herefordshire Child Concern Model. Implementation of the latter is to begin in the autumn. Together these should impact on the high rate of re-registrations on the child protection register. (Standards 4 and 5)

- ◆ Consistent with its strategy of focusing first on improving child protection and the care of looked after children the council now planned to give more attention to services for children in need and especially for children with disabilities. Attention was needed to:

- integrated access and assessment and care planning arrangements through the joint team;
- more support services for families; and
- transition to adulthood.

(Standards 4 and 3)

Capacity for Improvement (Standard 6)

Assessment has highlighted the following improvements to capacity:

- ◆ Strong leadership and securing increased and effective management capacity had shown tangible results in improvements, particularly in child protection and looked after children's services.
- ◆ Good partnerships and a positive ACPC had been major factors in the forward movement of the services and planned service developments are embedded in partnership working.
- ◆ Supervision and staff development processes work well for staff in children's services.
- ◆ There is a strong ACPC training programme and training is being enhanced especially by a major training initiative for team managers and a 'whole- team' approach to professional development.
- ◆ Performance management has had a clear impact on the services at council, senior management and operational levels. Appropriately, more attention is now being given to quality aspects of performance.
- ◆ Clear priorities have been set for service improvement and these are reflected in the budget to the extent that, although the council spends just below the average for its comparator group overall, its relative spend on family support services is just above the average.

Assessment has highlighted the following concerns about capacity:

- ◆ The need for a more effective case management information system (CLIX);
- ◆ The lack of capacity for strategic workforce planning.

SERVICES FOR ADULTS

Improvements observed since the last review

Assessment has highlighted the following improvements since the last review:

- ◆ Access to services for older people and adults with physical disabilities has been improved:
 - locality teams have been re-configured;
 - fair access to care criteria have been implemented;
 - a hospital social work team established;
 - new duty arrangements are in place; and
 - outposting and linking of social workers with GP practices has continued.

(Standard 5)

- ◆ Once assessed service users receive a relatively responsive service:

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- most smaller equipment for daily living is delivered within three weeks;
- waiting times for care packages have improved; and
- most users said they got help quickly.

(Standard 4)

◆ Management capacity for adult services has increased:

- in late 2001/02 a Head of Adult Services was appointed
- in late 2002/03 a second service manager post was filled and both postholders have briefs for service re-design and improvement; and
- a new senior practitioner/assistant team manager post has been appointed in each of the three locality teams for older people and adults with physical disabilities; and
- a new senior practitioner post has been appointed in the older people's mental health service.

(Standards 1,2 and 4)

◆ Although performance in the numbers of people with mental health problems being supported to live at home and those with learning difficulties had both deteriorated a little the PIs remained in Band 3 i.e. 'acceptable' and Band 4 i.e. 'good' respectively. At the same time, the historical pattern of high rates of admissions for both these user groups to residential and nursing home care had been reversed. People had been given more appropriate alternatives that better promoted their independence. In 2002/03, the rate of admissions of adults with disabilities to residential and nursing home care improved from an already 'good' to a 'very good' performance. In 2001/02 and in relation to its population, Herefordshire no longer had the highest number of people with mental health problems in institutional long-term care relative to other councils in its comparator group. Although the rate of admissions of people with learning difficulties had declined the council still had a historical legacy of the highest number of people from this user group in institutional long-term care within its comparator group. (Standard 3)

◆ Relatively good progress had been made in implementation of the National Service Framework for mental health services for adults of working age:

- the Care Programme Approach had been implemented;
- the assertive outreach service had been extended; and
- the introduction of crisis resolution and early intervention services were priorities for the current year.

(Standard 1)

◆ Within a difficult historical context of only one-third of adults with learning disabilities living with family carers and so high numbers in long term residential and nursing home care (but none in long-stay hospitals), and the consequences this has for setting carers' expectations, alternatives to institutional care are being offered and have been taken up:

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- Some people have moved out of residential care into supported tenancies;
- five people have been supported to buy their own homes;
- a train and build scheme has been planned which gives individuals opportunities to take part in building their own homes and subsequent cost benefits; and
- a supported living project to support people living with carers who are over 75 years old has also been planned.

(Standard 1 and 3)

- ◆ A relatively high number of people use the Herefordshire Direct Payments scheme. This has increased from 33 to 50 in the year and performance had just reached the 'acceptable' level. The increase has included small but significant numbers of older people and people with a learning disability. Most users of the scheme had physical disabilities and performance in supporting people from this group to live at home improved to an 'acceptable' level.

(Standard 3)

- ◆ A management review of the sensory loss services was completed and improvements made; a Service Level Agreement had been completed with an external provider of services for hearing impaired people and one was soon to be finalised for services for visually impaired people.

(Standard 2)

Areas for improvement

Assessment has highlighted the following concerns about performance:

- ◆ There has been no significant progress in developing services to promote the independence of older people:
 - in 2001/02, the council had the lowest per capita spend on older people compared to others in its group (but had a relatively high expenditure on mental health and learning disabilities services);
 - relatively few older people receive a service as Herefordshire assesses the lowest proportion of its population for services in its comparator group;
 - a realistic improvement in the numbers assessed is planned for 2003/04 which could bring the council up to a Band 3 i.e 'acceptable' level. (The council has one of the lowest levels of care managers/social workers for adults and older people in its group but this will improve with the addition of three new posts.);
 - the council has a good record of performance in not admitting a high proportion of older people to long stay residential and nursing home care and although the number has decreased it had not been matched by increased intensive provision in the community (This PI -C28- increased marginally and moved to the bottom of Band 2 i.e. 'ask questions about performance' where it is forecast to remain in 2003/04.)

- older people receiving intensive home care as a percentage of all older people receiving intensive home care, residential and nursing home care remained static at 12.5 percent in 2002/03 and is forecast in the council's Delivery and Improvement Statement (DIS) to reduce to 12 percent for 2003/04. (Subsequent work by the council has identified a rise of 15.5 percent as the true forecast but this means that performance will remain in Band 2 i.e. questions about performance'.)(This Performance Indicator -B11- is included in the council's Local Public Service Agreement (LPSA) as target to be 'stretched' to 20 percent by 2005, but a national target of 30 percent by 2006 has now been set for all councils.)

(Standards 1 and 3)

- ◆ Although the council achieved its target for delayed transfers of care at 31 March 2003, the pattern of delays has been volatile and otherwise above the target. During the late winter the level of delays almost reached the point at which they become a 'hot spot' nationally. This arose from budget pressures in social services and the need to reduce the potential, demand-led overspend. This pressure, which has been the pattern over recent years, has its roots in the council's low level of investment in services for older people and lack of capacity for refocusing and modernising services to promote independence.

(Standards 1 and 3)

- ◆ The Joint Review found an inconsistent and sometimes poor level of care management and assessment practice. Relevant PIs that were identified as requiring improvement over the year have either deteriorated or improved little, supported this finding:
 - the PI for the percentage of people assessed who received a statement of need -D39- deteriorated and was significantly under the forecast figure (The plan is to increase performance by greater than that forecast for last year but if achieved this is likely to bring performance only up to Band 2 i.e. 'ask questions about performance');
 - the PI for carers' assessments -D48- was also significantly under forecast and remains in Band 2 i.e. 'ask questions about performance. (The plan for 2003/04 is to reach the level forecast for last year which will reach the bottom of Band 3 i.e. 'acceptable'.); and
 - the PI for reviewing of care packages -D40- improved a little, but was considerably under forecast and remains in Band 2 i.e. 'ask questions about performance'. (The ambitious plan for 2003/04 is to increase this performance fourfold up to the bottom of Band 3 i.e. 'acceptable'.)

Securing a more consistent and inclusive assessment and care management practice is a management priority for this year through increased management capacity in the locality teams, case recording standards and audits and the practice support project led by a Service Manager.

(Standard 4)

- ◆ Within the integrated mental health service for adults of working age, which is supported by a Section 31 agreement and a pooled budget there is a need develop:
 - more integrated working and systems at operational level (This has been achieved in the older people's mental health service); and
 - integrated performance management arrangements up to strategic level.

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(Standards 4 and 1)

Capacity for Improvement (Standard 6)

Assessment has highlighted the following improvements to capacity:

- ◆ The 2003/04 budget increases for services for older people, both from internal and external sources, have been ring-fenced.
- ◆ A number of key plans and service developments have been and are intended to contribute to the modernising of services for older people and to increase service capacity. They include:
 - the refocusing of the in-house home care service;
 - the joint commissioning of the Hillside intermediate care centre;
 - the transfer of the management of the council's elderly persons homes to a 'not-for-profit-' organisation; and
 - new approaches to contracting domiciliary care from the independent sector.
- ◆ The increased management capacity for improving performance in services for older people, led by the Head of Adult Services, should provide a better basis for the improvements not achieved in 2002/03. Capacity has been improved within the teams and a range of approaches to improving practice led by the new service manager have been launched.
- ◆ The enhanced profile and capacity for performance management across the council and within social services should strengthen the performance culture. The main elements are:
 - a new Performance Management Framework for the whole council and the plan to recruit to a new corporate post of Head of Performance
 - the further development of quality assurance systems in social services ;
 - the use of business planning in social services;
 - the appointment of a Service Improvement Manager; and
 - the appointment of a Client Index Support Officer and internal audits of data quality.
- ◆ The improvement plan resulting from a recently completed Best Value review of Human Resources services throughout the council is being implemented and the appointment to the new post of Head of Human Resources has enhanced the previously limited capacity for strategic workforce planning.

Assessment has highlighted the following concerns about capacity:

- ◆ The most significant challenge to improvement is in the level of investment of older person's services. Councillors and senior managers are fully aware of this as an impediment to modernising the services. It appears to be straining the good partnership working that has been built up with health partners over recent years. An outline

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business case has been put to the council and the plan is to follow this with a detailed business case in the autumn

- ◆ The council has had difficulty in aligning forecasts of improved performance against key PAF PIs with planned changes in the level of service provision. The business case is expected to and will need to identify the scope and scale of the planned service changes and link plans, forecasts and finances across the system.
- ◆ The need for a more effective case management information system (CLIX).
- ◆ The Joint Review identified lack of management capacity in both the learning disabilities and mental health services for working age adults.
- ◆ The results of Best Value reviews within social services have yet to make an impact, but the implementation of the improvement plan from the review of home care services has begun and the review of carers' services is nearing completion.
- ◆ The council-wide Human Resources strategy is being implemented and the first monitoring report has shown improvement in most areas, except for :
 - equal opportunities and diversity both in service provision and employment;
 - the social services average sickness rate increased to nine percent compared to six percent in the previous year.
- ◆ The percentage of gross expenditure on staffing which was spent on training in 2002/03 was below the average for the comparator group and has been at this level for some years, although training opportunities for social services staff have been widened through greater access to corporate provision.
- ◆ Work begun on a workforce development plan has been frustrated by lack of training and development capacity.