# **Performance Review Report for Herefordshire**

# Social Services: 2004 Summary of improvement recommendations

The review of social services in Herefordshire has highlighted the following performance issues that need to be addressed over the next twelve months. Further information about the standards against which social services are assessed is contained in the detailed report.

#### Services for Children and their families -

- Further improving assessment practice, monitoring and evidencing improved out -comes for children including children in need
- Understanding and addressing the reasons for rereferrals, re-registrations, time on the child protection register.
- Increasing services for disabled children and their carers and improving life chances outcomes for looked after children
- Improving further the recruitment and retention of staff and foster carers
- Evidencing the Council's aspirations for excellence by building on performance strengths to extend performance towards that of the best performing Councils of similar profile, where possible.

#### Services for Adults -

- Promoting independence for younger adults and in particular increasing the pace of change to services for learning disabled people
- Ensuring robust capacity building for older people's services, improving quality, delivering changes to Older Peoples services and implementing the plan following the inspection in March 2004

- Implementing plans for improving the timely supply of items of equipment to ensure countywide coverage.
- Improving care management and review processes
- Promoting increased stakeholder involvement

# Performance Review Report 2004 HEREFORDSHIRE COUNTY COUNCIL

#### **SERVICES FOR CHILDREN AND FAMILIES**

The Council has maintained its commitment to increase resources to Social Care despite a range of other pressures. The additional resources have been vital in enabling the Council to start to implement its modernising agenda. The Council has been establishing underpinning measures to improve its capacity and performance management arrangements<sup>1</sup>. A range of strategies and plans have been developing, a number due for completion in 2004 and several new posts also due to commence during the year. A great deal of effort has been involved in driving the changes, whilst sustaining other core business. There has been some progress against the last Annual Review letter, whereas other areas have not been able to sustain their position or have not yet moved forward.

#### National priorities and strategic objectives

# Improvements observed since the previous annual review

- Several strategic developments include the roll out of the Child Concern model which is a major change programme and will underpin developments over a 2 year period and into the future, and includes clearer eligibility criteria; the strategy to increase the range of community family support and partnership working which is setting the scene for a formal Partnership Board in 2004/5.
- A number of performance indicators underline the importance placed upon improving life chances of Looked After Children (LAC). In respect of (A1), stability of placements measured by the percentage of LAC with 3 or more placements in a year, performance improved and is strong, Of health checks (C19), the completion rate was slightly down from last year but still within a good performance level. The Council has also performed comparatively well towards the Government target for looked-after care leavers going in to employment, education and training (A4), though performance was less good than last year. The number of Final warnings of LAC (C18) remained acceptable though performance indicates the challenges that are present.

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<sup>&</sup>lt;sup>1</sup> Applies equally to services for adults

#### **Areas for Development:**

- The number of LAC remains comparatively high compared to other Councils in the Region and the comparator family. This has wide implications for resources, for instance the Council is to be congratulated on having maintaining full allocation of cases to social workers, but will remain challenged if the number of LAC cannot be reduced. There are modest targets for reduction by 2006 within the roll out of the Child Concern model, though the immediate forecast is for an increase in numbers. The 2006 target would still be above the current national average
- The Council accepts the requirement and plans to complete the improvements in respect of four outstanding Victoria Climbie Inquiry (VCI) issues covering: management information about referrals; accommodation to support assessments; guidance on children moving from overseas and governance/ systems to review referral and assessment arrangements. Work is not due for completion until later this year, whereas the urgency of this is underlined in that this is one of only 5 West Midlands Councils which has not completed all VCI improvements. Development of a model and implementation of audits are delayed since the Joint Review action plan 2003. The Council recognises that interagency audit will also be required following the current intention to begin with an audit of internal referrals.
- Whilst the Council has continued to work hard (despite adoption team staffing difficulties) to try to ensure that adoption is achieved where it is the appropriate outcome for LAC, fewer adoptions were completed by April, but a number were completed subsequently.

#### **Cost and Efficiency**

# Improvements observed since the previous annual review

- Increased external placement costs put pressure on a tight budget with a resultant overspend but this was contained within manageable limits. The relative spend on family support services increased.
- Average costs of foster care are low compared to nationally and family placements comprise the majority of placements, with 93.3% of all LAC and 100 % of young children living in family placements.

# **Areas for improvement**

- The high proportion of LAC will continue to challenge limited resources and the ability to change the balance towards other family support and preventative services. Whilst a reduced number of residential placements are currently used (down from 19 to 11 in the last period), all externally provided, there was a further large increase of £500 per week in their average costs. Unit cost indicators suggest that the cost of residential services is particularly high when compared with other similar councils. This underlines the need for measurable progress against targets in the Council's strategies to reduce LAC numbers and develop alternatives to external residential care.
- To ensure that placement options are maintained, a range of strategies needs to be implemented and monitored for the recruitment and support of new foster carers. From a net loss of 32 in 2003/4, the age profile of many existing foster carers indicates the need for planning and action to avoid a shortfall in the near future. The Council also recognises that it needs to increase the number of salaried foster carers who are able to meet the complex needs of many LAC.

#### **Effectiveness of service delivery and service outcomes**

#### Improvements observed since the previous annual review

- The completion of initial assessments within timescales has again improved slightly to just over three quarters and completion of core assessments from 71% to 88.7 %,
- The number of children on the child protection register has been held low although forecast to rise by 10%. The council maintains 100% allocation of all children who are on the register and of those Looked After. All are allocated to qualified social workers.

# **Areas for improvement**

- Not all statutory requirements for reviews of LAC within timescales were met, with about 5% of reviews being completed within two weeks after the due date, representing those for about 9 –10 children.
- PI's for a number of life chance issues that had improved at the time of the last review had fallen back in 2003/4.

- PI's for educational outcomes (that is, the proportion of LAC achieving 1 or 5 GCSE's) were lower and below local targets in some cases. Compared with other Councils with similar performance profiles, the out turn for A2 (1 GCSE) was 52% compared to 75%. The current local public service agreement (LPSA) for looked after children supports the council's efforts on the 5 GCSE target which is extremely ambitious against a small cohort, requiring achievement by 15 children next year. The out turn in 2003/4 was 4.35% compared to the best 2-starred Council at 26.7%. National targets on education for LAC and care leavers stipulate that 15 per cent of LAC should achieve 5 GCSE's. A further national target is that 75 per cent of care leavers should be in appropriate education, training or employment, Herefordshire's out turn having dropped from 76% to 69%, and the best other Council achieving 100%. The Council therefore needs to continue to focus on its action to improve these outcomes commensurate with the profile of each group
- LAC school attendance absences of at least 25 days (C24) doubled in 03-4, with 68% of other Council's reporting lower levels of absence. It is important that every possible measure is taken with partners to understand and improve on this target, which is reported to be in part associated with health needs of LAC.
- In 2003/4 the long-term stability of placements (PI D35) had improved but has dropped significantly to below that level and well below the planned level of 76%. The best performing 2-starred Council achieved 100% whereas Herefordshire's out turn was 49%.

# **Quality of services for users and carers**

#### Improvements observed since the previous annual review

- Aftercare services are available to out of county care leavers and offer a range of services
- Child & Adolescence Mental Health Service (CAMHS) provides most MH services for adolescents and further CAMHS developments are proposed including services for young people with autistic spectrum disorders and the development of Lead clinicians roles.

# **Areas for improvement:**

Smooth transitions between child and adult services are vital.
Protocols between CAMHS and Adult services should be further
developed to build on the existing basis in mental health, and
arrangements for the transition process for children with disabilities
should also receive focus.

 The proportion of children who are repeatedly referred to social services (27.6%) remains above an acceptable level. Additionally, despite some improvement this year, the level of child protection reregistrations remains high, (84% of Council's have a lower rate) yet the target is modest and below Government expectations. The duration on the register is also higher than desirable.

These indicators highlight a significant issue, which needs to be understood and addressed by plans and targets. The issue is underpinned by the already reported and acknowledged need to adopt audit standards, audit assessment processes and outcomes and improve referral, assessment and care planning. The Annual Review report 200/3 said "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. "Maintaining 100% allocation of cases against the volume of demand may also have impacted on the ability for active work to move cases forward, and the availability of appropriate packages of care.

 Adoption Support Regulations were due to be fully met by April 2004. 71% of councils reported full compliance, whereas Herefordshire reported further development being required in respect of groups for parents and children and support arrangements. Difficulties of recruitment to this area of work are widely recognised and recruitment remains a challenge, which impacts on developing services.

#### Fair access

#### Improvements observed since the previous annual review

- There is effective 24 hour 7 days a week access to services and advice.
- The Child Concern model (CCM) promotes eligibility criteria across all agencies and extends their responsiveness.
- The percentage of children contributing to a statutory review improved to 89.5%

#### **Areas for improvement**

 The Council is aware of the need for monitoring of data from CCM referrals to give information about Children in Need (CIN) and for auditing referrals, which resulted in decisions to take No Further Action. This will increase understanding of sources of inappropriate referral and quality assure the appropriateness and consistency of decision making.

- Arrangements should improve and increase transition pathway planning and review.
- The use of direct payments to children and carers of disabled children should be increased.
- An implementation plan is required following the Independent Reviewing Officer guidance.

# **Capacity for improvement**

# Improvements observed since the previous annual review

- A raft of preparation and strategies are in place or planned
- Social care benefits from strong commitment and interest of the Council, and strong leadership of the Director.
- Performance management has been strengthened by the appointment of a corporate performance management lead and a Performance Improvement Manager in the Directorate.
- Resources have been committed to review management information system needs including cross- agency information, and a more effective replacement system is being given high priority.
- The adoption of the inter-agency Child Concern model (CCM) has been a significant investment for the future.

#### **Areas for improvement**

 Following the roll out of CCM, the Council will have to play a leading role in driving the cultural change needed towards the Child Concern model, developing stakeholder involvement, monitoring and adjusting processes to ensure safe and secure care, and reducing the number of LAC. A small staff team is overseeing a raft of strategies to change services/curtail costs and divert resources to prevention and services for children in need.

The Council continues to face recruitment and retention issues, which require the capacity to develop work force strategies. The delivery of service and change is meanwhile challenged by the impact of vacancies in small teams, and especially in respect of qualified or specialist staff. Monitored attention will be needed to sustain the level of family placements given competition from independent agencies and known other factors.

- Pending replacement, effective management is hampered by the previously identified difficulties of the case management information system. This is now planned to be implemented by end March 2005 The Council knows it needs to extend and embed the performance management culture and the use of data to improve performance.
- A clear, multi-agency commissioning strategy is vital, as is progress on delivering more of the options to avoid external residential placements.

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#### SERVICES FOR ADULTS AND OLDER PEOPLE

The council has begun the process of responding to the Government's priorities to promote independence. From a historically low position, the Council has increased spending on services for older people. An inspection of services for older people took place in March 2004 and plauded this development amongst a number of positives for the future. The judgement of the inspection was that services showed promising prospects and were serving some people well. Effective and committed relationships have been developed with health service partners so that there is greater mutual recognition of the shared responsibilities, though there remains a significant challenge due to the financial and other demands to which partners have also to respond.

Increasing the number of people supported at home and modernising services for vulnerable adults, particularly those with learning disabilities must be the central thrusts to improving outcomes for service users. Last year's annual review judgement of uncertain prospects reflected the implications of the disappointing out turn against several adult performance indicators (PIs) and the concerns about resourcing and capacity. There have been some dips in out-turn in adult services, whilst other PIs have risen slightly or maintained an acceptable or good performance. One indicator – D54, delivery of equipment within 7 working days, at 38% failed to achieve a key threshold for performance.

# National priorities and strategic objectives

#### Improvements observed since the previous annual review

- A number of strategic partnerships have been developed, notably the Health and Care, Joint planning and Partnership unit. Some pooled budgets have been established, including those for the integrated Mental Health service and the Learning Disabilities team. Since the previous annual review, additional strategic partnerships have been established with Hillside Intermediate Care, Community Equipment and the SHAW transfer. There are now 6 Section 31 agreements across a range of adult services.
- Valuing People strategies have been submitted and were generally evaluated positively. A revised and more inclusive partnership board is being established in 2004.
- The council has identified and published the ethnic monitoring data to comply Race Relations (Amendment) Act Part 3. The published data does not identify any significant issues in respect of equality in employment and training opportunities.

- The Council and its partners have worked together to minimise delayed transfers from the acute trust and have plans to sustain this position whilst developing more preventative services. The reimbursement grant has funded additional places including interim care, and equipment, and staff.
- The development of extra care housing is vital to implement change strategies away from institutionalised care. The Council is to be congratulated for securing a Department of Health capital contribution towards a local initiative a major scheme that should start to deliver homes in 2005.

# **Areas for improvement**

• Sustained progress on the strategy for older people's services has not yet been significantly reflected in outcomes on a number of targets. PIs B11 and C28, indicators on intensive home care provision show an out turn at half the national target and low comparatively. For (C32) - older people helped to live at home - the PI demonstrated increased numbers in 2003 /4. (However, potentially affected by the revision of the indicator, the 04/05 plan forecasts a considerable reduction that would be well below the LPSA target). The registration of the service and proposed change of role of the in- house home care service, when achieved, will provide capacity to support people through re-ablement and rehabilitation.

# **Cost and efficiency**

# Improvements observed since the previous annual review

- The improved position in arrangements with health partners enabled beneficial use of the reimbursement grant to fund interim care places and extra social work time. There has been notable progress in the use of Health Act flexibilities including 6 S31 agreements.
- Against a difficult financial position the Directorate made significant progress in reducing the over-commitment brought forward from 2002/03. Council has invested additional much- needed revenue and capital resources in social care.
- B12 the average cost of providing intensive social care reduced

#### **Areas for improvement**

 Commissioning the volume and quality of required services whilst controlling costs remains a challenge. The purchase of a number of services is comparatively costly, including unit costs for home care (B17), which are reported as slightly reduced since 02/03 but still in the most costly 3% nationally. Block purchasing is going to be introduced and needs to be successful in managing this market. (B15) Mental Health Residential /Nursing Home care costs are higher than for all comparators. (B14) costs of Residential /Nursing Home care for people with learning disabilities, are forecast to rise next year from £514 to £545; given the high number of such placements (219) this has significant financial implications.

- The Inspection of services for older people identified as a significant issue the need for a clear commissioning strategy based on improved market management information, an agreed model of care, signed up to by stakeholders and setting appropriate rates for levels of service. The historically high level of residential and nursing home placements was due to a lack of alternatives for older people. In order to meet this volume of placements, the Council has needed to work within a tight fee structure, hence average costs are low comparatively, a factor which now impacts on the ability of services to meet the needs of people with increasingly complex needs. The market needs to be developed to reflect the changed context of care. In the next year the implementation of the contract with SHAW plans to refocus the former- Council provided care homes.
- The capacity for contract monitoring needs to be extended, as planned, to assure value for money and appropriate provision of service across all user groups.

# **Effectiveness of service delivery and service outcomes**

#### Improvements observed since the previous annual review

- The take up of direct payments (C51) is comparatively good and developments are in hand including a project officer. It is recognised that offering services through direct payments represents a significant culture change for many staff. Grant Funding was secured to employ a Welfare -to -work co-ordinator, increasing employment opportunities for people with disabilities. The Council has used a local public sector agreement (LPSA) to introduce a highly successful signposting service.
- The arrangements with Health partners have avoided recharges as a result of delayed transfers of care (DTC) and some additional intermediate care places were developed.
- In 2003/4 the Council completed all but the final details of the transfer of its older persons' homes to an independent provider, part of its longer term strategy to increase specialist provision especially for people with dementia.

# **Areas for improvement**

- Whilst the use of intermediate care increased, this was provided largely as step down facilities from acute care. The Council and health partners are planning to address the difficulties that delayed the implementation of services to prevent admissions to acute hospitals. The range of services will be further increased by maximising the effectiveness of community hospitals and increasing non- residential intermediate care.
- User choice will be promoted by achieving widened scope in the use of direct payments to service users including older people
- Whilst the aim is to promote independence, the indicators of performance for people with learning disabilities being helped to live at home (C30) show reduced and low performance in comparison with other authorities in the West Midlands or the comparator family. This Council has a high number (219) of people with Learning Disabilities in residential or nursing home care, also a financial challenge given increasing average costs (£514). Work is underway to reduce unnecessary, historic, out of county placements but in- county capacity is currently limited and there is a lack of capacity for individualised services that are able to promote independence. The Council recognises the need to increase capacity to develop and implement delivery strategies and champion the changes to modernise all service areas.

### **Quality of services for users and carers**

#### Improvements observed since the previous annual review

- Assessments and Waiting times for Assessments (D55), a new indicator, showed that performance at 70% is above the average of the comparator family. Assessment and review are vital care management processes in targeting and delivering appropriate and effective care.
- New posts of customer services officers have been established to signpost older people to services across the community. Signposting has been very successful and has provided a range of alternatives to people who do not meet the criteria for services provided by the Council.
- The percentage of people receiving a statement of their needs and how they will be met (PAF D39) has improved though from a very low level.

## **Areas for improvement**

- Community equipment services (PAF D38 and 54) are not providing a timely service nor is the target in line with government expectations. The Council will be seeking to make significant improvements to reach outlying areas. Performance in delivery of equipment within seven days failed to meet the threshold.
- Care management in adult services faces some critical challenges; not least the need to improve the quality of care plans to better reflect needs and intended outcomes. The proportion of people receiving a statement of need should be at or near 100%, whereas the plan is low at 86%. Performance in reviewing (D40) has improved but at 50% is low against comparators (61.4% average) and the proposed improvement to 55% is a modest target); improvement in the completion of reviews would support and protect service users whilst ensuring the Council's resources are effectively deployed.
- In purchasing residential and nursing care, the proportion of places which are in single rooms has decreased, unlike in Councils in the comparator family and nationally. This is well below the national average and worse than all but one authority in the comparator family. Market management and further development of the relationship with the independent sector needs to ensure it responds to the changing nature of the demands for care. The Council recognises the need for privacy and dignity are examples of this, especially in view of the complex needs of many service users and the profile of these issues may need to be raised in arranging, contracting and commissioning services.

#### Fair access

#### Improvements observed since the previous annual review

- Carer assessments (PAF D42) showed significant improvement as a result of dedicated resources (up from 5.9 to 22.6%). However this is still below comparators and the plan shows little increase
- The planned reductions in the percentage of assessments leading to service (E50) were achieved, a significant issue which had formerly been a concern.

#### **Areas for improvement**

 The provision of assessments of carers needs to improve. The Older Peoples service inspection identified that carers' assessments need to be integrated into the assessment of need, in a holistic and meaningful manner, and the Council needs to address this whilst sustaining and improving the provision of assessments.

- The proposed replacement of the Management information system will improve the capacity to implement the Single Assessment Process with partners.
- There is a need to improve information and accessibility for older people and people from Black or minority ethnic communities (BME).

# **Capacity for improvement**

# Improvements observed since the previous annual review

- The approval by the Council of the business case for older people provides a good foundation on which to build change.
- Performance management processes and capacity are developing under the committed corporate objectives that have recognised the need for increased resources and improved training provision including enhancing performance management support at Directorate level. A training plan has been developed this year
- The Council's corporate objectives are supportive of many aspects underpinning social care improvement.
- There has been successful development of partnerships to deliver improved outcomes and this has been reflected in the use of HAF.
- The commitment of increased resources for staff training has been evidenced in the numbers of trained staff proportionate to several national targets, thus improving the quality of the Council's own skills base.

# **Areas for improvement**

• The most significant challenge to improvement is in the ability of the Council and its partners to invest in older person's services, resourcing remaining low comparatively even after increases in the past two years. Capping has added further constraints, however, the Council has indicated its intent to prioritise social care over the next 3 years. The pace and scale of change needed for alternative, enabling services for older people and the move away from residential care presents capacity challenges for managers and partners, and will be heavily reliant on achieving robust, sustainable development of the independent sector. Dementia care strategies are a recognised focus and general commissioning strategies are being developed. The Council and Health partners will need to consider further capacity building and service improvement strategies and programmes across the care sector especially in view of the growing numbers of older people in rural areas.

- The modernising agenda for services for Learning Disabled people is stretched at management and implementation levels, threatening the capacity to provide detailed plans to improve services consistent with the Valuing People agenda and its targets.
- Stakeholder and Corporate plans need to ensure they promote inclusivity e.g. of lifelong learning, not only education of the young, and championing of the modernising agenda for people with Learning Disabilities.

Lynette Ranson Business Relationship Manager, 21st August 2004

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# Social Services: 2004

# **Summary of improvement recommendations**

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#### Services for Children and their families -

- Continuing to improve assessment practice and monitoring and evidencing improved out -comes for children including children in need
- Understanding and addressing the reasons for rereferrals, re-registrations, time on the child protection register.
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- Improving life chances outcomes for looked after children
- Continuing to improve recruitment and retention of staff and foster carers
- Evidencing the Council's aspirations for excellence by building on performance strengths to extend them to the extent of the best performing Councils of similar profile, where appropriate.

#### Services for Adults -

- Promoting independence for younger adults and in particular increasing the pace of change to services for Learning disabled people
- Ensuring robust capacity building for older people's services, improving quality, delivering changes to Older Peoples services and implementing other aspects of the plan following the inspection in March 2004
- Implementing plans for improving the timely supply of items of equipment
- Improving care management and review processes
- Promoting greater stakeholder involvement