



Doncaster Council

Report

Date: 14 March 2018

To the Chair and Members of the Health and Adult Social Care Scrutiny Panel
Adults Transformation (Community Led Support) and Quarter 3 2017/18
Performance Update

Relevant Cabinet Member(s)	Wards Affected	Key Decision
Cllr Rachael Blake Portfolio holder for Adult Social Care	All	No

EXECUTIVE SUMMARY

1. This report provides Members with an update on Community Led Support as a part of the Adults Transformation Programme and also details key Adults Health and Wellbeing performance results as at quarter 3 2017/18.
2. There will be a presentation at the meeting to illustrate the objectives of and progress on Community Led Support.
3. Performance highlights are set out within the report.
 - a. Despite increasing pressure on Adults Health and Wellbeing (AHWb) services and the challenging time of the year, overall performance has been positive in quarter 3.

PERFORMANCE HIGHLIGHTS

Delayed Transfers of care



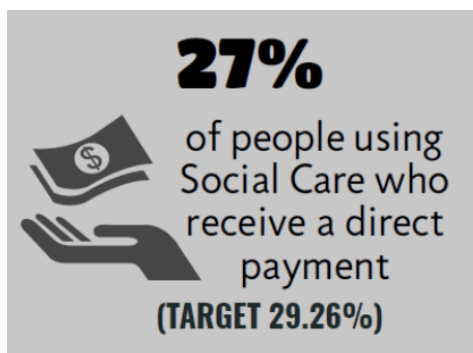
4. The council has invested significant effort and commitment into reducing delays in hospital discharges during quarter 3. Working closely with NHS colleagues, Doncaster's joint health and social care resources have been used to improve services and better understand care and support needs, in order to get people home from hospital quickly when they are medically fit and it is safe to do so.
5. Latest figures from NHS England demonstrate that Doncaster has reduced delays by almost 50% between August and November 2017. Days delayed per 100,000 population have improved from 11.5 (860 actual days) in August to 6.4 (461 actual days) in November. This represents a reduction of 399 individual days delayed and is better than the target of 7.1 days set by the Better Care Fund.
6. Doncaster is now amongst the top quartile performers nationally, having previously been ranked in the bottom quartile. Furthermore, Doncaster is highlighted as a "beacon site" for improving Delayed Transfers of Care in the monthly iMPower DTOC index.

Residential Care



7. There were 20 more admissions to residential care in quarter 3 than anticipated, but the rate of admission for the full year is still consistent with expectations (293 admissions between April and December). The actual number of adults living in residential care has continued to reduce and now stands at 1,342, which is a reduction of 101 from the same time last year. Residential placements are managed through a robust panel process that puts the emphasis on helping people to continue to live at home where this is the most appropriate setting.
8. Residential care is being monitored closely, since the reductions largely relate to people who pay for their own care. This means that although numbers are reducing the cost of care is not reducing in a proportionate way.

Direct Payments



9. There was a very small reduction in the number of people receiving a direct payment for their care and support. At the end of quarter 3 there were 752 (27%) people with a

direct payment, whereas in Quarter 2 there were 766. (27.5%). This is against a target of 29.3%. Numbers are beginning to increase once again in January and February and currently stand at 761.

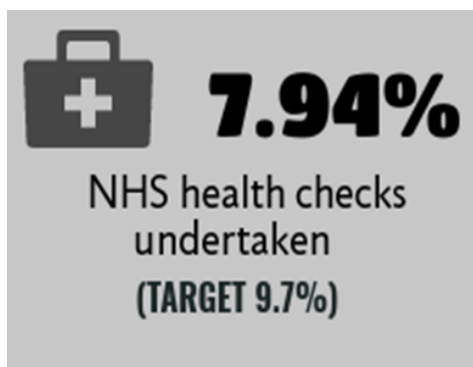
10. The reduction in direct payments is in part due to a lower number of new direct payments for homecare as a result of the improvements in DTOC. This is because, in order to get people home from hospital, home care is being arranged more quickly using a wider range of providers, without the requirement to have a direct payment.
11. Targets for direct payments are currently being stabilised to make sure that administration arrangements are able to facilitate the increased demand.

Learning Disabilities



12. There has been a big increase in the proportion of adults with learning disabilities who live in their own home or with their family, from 56.1% in 2015/16 to 84.4% in 2016/17. This is now better than target and higher than national and regional averages.

NHS Health Checks



13. In the 3 months that make up quarter 3, 2,002 people aged 40-74 took advantage of an NHS health check, making 7,132 for the year to date. After a slight decline in uptake in recent months, numbers are steadily increasing as a result of a new promotional campaign during the early part of 2018.

People Feeling Safe and Secure



14. The number of people who say that services have made them feel safe and secure has steadily increased since 2013 to the current level of 87.3%. This is better than the target level and also higher than regional and national averages.

Continuous Improvement

15. Work is currently underway to implement a new performance management framework in Adults Health and Wellbeing. This will include a reconciliation of all AHWb performance measures to better reflect the directorate's objectives, including the Transformation Programme.

EXEMPT REPORT

16. This report is not exempt

RECOMMENDATIONS

17. The Chair and Members of the Health Adult Social Care Scrutiny Panel are asked to note and comment on the Community Led Support presentation and the quarter 3 performance information.

OPTIONS CONSIDERED

18. There are no alternative options as this report merely provides the Committee with an opportunity to note and comment upon information provided.

REASONS FOR RECOMMENDED OPTION

19. Not applicable

IMPACT ON THE COUNCIL'S KEY OUTCOMES

- 20.

	Outcomes	Implications
	<p>Doncaster Working: Our vision is for more people to be able to pursue their ambitions through work that gives them and Doncaster a brighter and prosperous future;</p> <ul style="list-style-type: none">• Better access to good fulfilling work• Doncaster businesses are supported to flourish	<p>The work of Overview and Scrutiny has the potential to have an impact on all the Council's key outcomes.</p>

	<ul style="list-style-type: none"> • Inward Investment 	
	<p>Doncaster Living: Our vision is for Doncaster's people to live in a borough that is vibrant and full of opportunity, where people enjoy spending time;</p> <ul style="list-style-type: none"> • The town centres are the beating heart of Doncaster • More people can live in a good quality, affordable home • Healthy and Vibrant Communities through Physical Activity and Sport • Everyone takes responsibility for keeping Doncaster Clean • Building on our cultural, artistic and sporting heritage 	
	<p>Doncaster Learning: Our vision is for learning that prepares all children, young people and adults for a life that is fulfilling;</p> <ul style="list-style-type: none"> • Every child has life-changing learning experiences within and beyond school • Many more great teachers work in Doncaster Schools that are good or better • Learning in Doncaster prepares young people for the world of work 	
	<p>Doncaster Caring: Our vision is for a borough that cares together for its most vulnerable residents;</p> <ul style="list-style-type: none"> • Children have the best start in life • Vulnerable families and individuals have support from someone they trust • Older people can live well and independently in their own homes 	
	<p>Connected Council:</p> <ul style="list-style-type: none"> • A modern, efficient and flexible workforce • Modern, accessible customer interactions • Operating within our resources and delivering value for money • A co-ordinated, whole person, whole life focus on the needs and 	

	aspirations of residents <ul style="list-style-type: none"> • Building community resilience and self-reliance by connecting community assets and strengths • Working with our partners and residents to provide effective leadership and governance 	
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RISKS & ASSUMPTIONS

21. There are no specific risks arising from this report.

LEGAL IMPLICATIONS (SRF 02/03/18)

22. There are no specific legal implications arising from this report.

FINANCIAL IMPLICATIONS (CC 02/03/18)

23. There are no specific financial implications arising from this report.

HUMAN RESOURCES IMPLICATIONS (DD 02/03/18)

24. There are no human resource implications arising from this report.

TECHNOLOGY IMPLICATIONS (NR 02/03/18)

25. Technology is used within many of the initiatives included in this report. ICT must always be involved via its governance model where technology-based procurements, developments or enhancements are required. This ensures all information is safe and secure and the use of technology is maximised providing best value.

HEALTH IMPLICATIONS (RS 02/03/18)

26. Community led support (cls) has the potential to improve and protect health. Scrutiny panel members will want to consider the opportunity cost of this model, how health impacts and health equity impacts are measured, if the service is matched to need and if there any unintended consequences of the current model.

EQUALITY IMPLICATIONS (SC 28/02/18)

27. There are no specific equality implications associated with this report. Within its programme of work Overview and Scrutiny gives due consideration to the extent to which the Council has complied with its Public Equality Duty and given due regard to the need to eliminate discrimination, promote equality of opportunity and foster good relations between different communities.

CONSULTATION

28. Not applicable

BACKGROUND PAPERS

29. Not applicable.

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