

Report of: Director Housing & Adult Social Services

Meeting of:	Date	Agenda item	Ward(s)
Health and Wellbeing Board	10 October		All

Delete as appropriate	Exempt	Non-exempt

SUBJECT: Adult Social Care Outcomes Framework Performance 2012/13
1. Synopsis

- 1.1 This report sets out highlights of adult social services performance against the national Adult Social Care Outcomes Framework for the financial year 2012/13.

2. Recommendation

- 2.1 To note the contents of this report and its appendices; and to acknowledge that the annual Local Account will be the main mechanism for setting out future improvement actions identified as a result.

3. Background

- 3.1 The Adult Social Care Outcomes Framework was introduced in 2010/11 and is the Department of Health's first attempt at moving towards a performance framework that measures the impact and outcomes of adult social care interventions rather than measures of process.
- 3.2 The framework is no longer used by the Department of Health and the Care Quality Commission to create national league tables or generate performance ratings for Adult Social Services departments. Local Authorities are instead encouraged to benchmark performance against indicators within the framework and make comparisons against other authorities that they feel are appropriate comparators. These comparator authorities can be selected based on geographic location, socio-economic or demographic similarities. For the purpose of this report authorities within the London region have been selected as comparators it is felt that they cover similar issues that are faced by adult social care in Islington.

- 3.3 Islington continues to demonstrate its commitment to ensure that service users receive personalised care that meets their needs and is delivered in the way that they want. As a result its status as a regional lead for both the number of service users and carers receiving their services in a self-direct way and through a direct payment has been retained for the third year.
- 3.4 Islington's strong integration with health has led to us been the top performing authority in London in terms of the number of people discharged from hospital into rehabilitative services that remain in the community 91 days after they have left hospital. This has also contributed to our top quartile position for delayed transfers of care from hospital.
- 3.5 Carers reported that they felt consulted and included in the decisions we made about the people they care for. We are placed 8th in London for this indicator.
- 3.6 Throughout 2012-13 there has been a focus on reducing the number of people aged 65 and over that are admitted to residential or nursing homes. This work is reflected in the shift from the bottom quartile position in 2011-12 to the third quartile in 2012-13.
- 3.7 Our performance against indicators relating to the self-reported satisfaction and quality of life for both carers and service users are benchmarking in the bottom quartile for London. Further analysis is being conducted to understand the issues that are contributing to these scores and a series of focus groups will be held later in the year to gain carer and user feedback about how these can be improved. This will be feedback back through the annual local account which will be published later in the financial year.
- 3.8 The number of younger adult admitted to residential or nursing homes increased in 2012-13 and as a result this indicator is benchmarking in the bottom quartile. The main contributing factor to this was an increased admission level in adults with mental health needs due to the unplanned closure of a supported housing unit. It is important to remember that despite this increase the overall number of younger adults in residential and nursing accommodation remains low.
- 3.9 Comparative performance against the number of secondary care mental health service users in paid employment is low. A new employment service has been commissioned during 2012-13 to work with people with mental health needs to assist them into work which is anticipated will improve performance in this area.
- 3.10 Nationally figures reported for ASCOF indicators 1H and 1H relating to mental health service users receiving secondary care in paid employment and living independently have been questioned. Data for these indicators is submitted directly through the National Minimum Dataset which Mental Health Trusts upload directly to the Department of Health. Trusts across England are reporting that published outturn figures were much lower than what they had identified internally through their own management information reporting. Department of Health has as yet not been able to identify the cause for these significant variations; therefore caution must be exercised when looking at these indicators. Nationally discussions are being held whether these indicators are deleted from the framework in future years.
- 3.11 Self-reported feelings of safety in service users is comparatively low, this will be included as part of the focus group work being conducted around quality of life. However, it is worth noting that once asked the supplementary question about if the services you received from social services made you feel safer approximately 80% of service users answered that it did.

4. Implications

4.1 Financial implications - None identified

This is a performance report and is for benchmarking and ongoing information purposes.

4.2 Legal Implications

The Adult Social Care Outcomes Framework, with its focus on promoting people's quality of life and their experience of care, and on care and support that is both personalised and preventative, is a key

tool to track progress locally and nationally towards the transformation of care and support.

4.3 Environmental Implications

4.4 Equality Impact Assessment:
NA

5. Conclusions

5.1 Islington continues to demonstrate it has some clear strengths and is a regional leader for national priorities such as the Personalisation agenda and the Integration of Social Care and Health services.

5.2 In terms of service user and carer perceptions around their services and quality of life we have identified there is still further work to undertake in understanding how they would like to feel more supported. This will be addressed through a series of focus groups that will be conducted later in this financial year.

Appendices

Appendix 1: ASCOF benchmarking report 2012/13

Background papers:

Final Report Clearance

Signed by

Date:

Received by

Date

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