

Bute & Cowal: Adult Care Performance Indicators

24th September 2013

Home Care:

Number of clients:

Over the 5 years there's been an increase of 44% in the number of service users provided with homecare – that's a straight comparison between the numbers in 2008/09 and 2012/13. Most of the increase has been in the 75-84 and 85+ age bands, 43% and 60%, with a more modest increase in the 65-74 age band of 12%. Although all of the age groups have increased, the age mix is slightly different with the percentage of clients aged 65-74 making up approx. 4.5% less of the client group and the 85+ bracket making up approx. 4.5% more of the client group in 2012/13 compared to 2008/09. (See appendix 1 for detail)

Waiting List for Free Personal Care:

The management of the provision of Free Personal Care is an on-going issue however as the issues of budget and recruitment difficulties combine. These issues are not specific to Bute and Cowal and are more noticeable in MAKI and OLI within Argyll & Bute. The same issues are reported nationally.

Intensive Packages:

The stats indicate that there's been a reduction in the number of clients receiving intensive care packages (10 hours +). Again, in terms of the age band mix, more of the clients in the 85+ bracket are receiving intensive package, up by 5.5%, and fewer of the 65-74 age bracket, down by 5%. The 75-84 bracket is down by approx. 0.5%. This statistic is based on the average number of hours provided to clients over the year and isn't based on a specific snapshot date. This may skew the figures for service users who were getting small packages for most of the year and moved to an intensive package for a short period of time – such service users would probably average below 10 hours over the year and wouldn't be counted. The only way to get an accurate figure for these cases would be to look at each client individually to see if they went through 10 hours per week at any point during the year.

Other issues that may impact on the fall in intensive home care would be

- The use of Telecare and a more disciplined approach to step down of home care hours where a high number of hours was introduced at a time of crisis or discharge from hospital but was reduced once the care package was reduced.
- More active use of anticipatory care practice across health and social care that reduces the impact on the statutory services and the greater use of the

voluntary sector for alternative forms of care as being promoted via the Re-Shaping Care/Change Fund framework.

Number of Hours

Overall, the number of hours has increased by 39%, with the activity in all three client groups up by 14%, 22% and 73% respectively. In terms of mix, the number of hours provided to the 65-74 and 75-84 age bands are down by 4% and 5% respectively with an increase in the share for 85+ increasing by 9%.

Overall Conclusion:

We are looking after more service users, we are providing more hours but, on average, we're providing fewer hours to individual clients than we were five years ago. The focus has moved more towards looking after clients in the 85+ bracket, which I would expect given the ageing population and associated dependency levels.

Care Home Admissions:

Care home admissions have fallen in Cowal over the last two years with admissions from Bute being relatively stable (see appendix 2).

Pyramid figures highlight that the number of service users being cared for in care homes in Cowal has fallen from 162 Care Home numbers in March 2011 to 130 at the end of August 2013. The equivalent figures for Bute are 44 and 43 indicating no significant change in numbers.

Further analysis however does indicate a change in the nature of the placements with a significant move to the use of enhanced residential and nursing home placements over the period 2008/09 to 2012/13. This would indicate that an increasing number of our service users cared for in care homes are of high dependency with more lower dependency cared for in the community. (See appendix 3, 2008/09 to 2012/13 figures for all admissions)

Bute: Enhanced & Nursing Home Placements:

March 2009: 26%

March 2013: 47%

Cowal: Enhanced & Nursing Home Placements:

March 2009: 25%

March 2013: 33%

Conclusion: Care Home activity moving in the right direction of a reduced number of admissions with those admitted being of higher dependency.

One area of concern is the relatively high number of unplanned admissions to care homes in the Cowal area. The impact of this practice is that service users rarely return home and invariably become permanent admissions to care homes while good practice is to avoid such a scenario and deal with a crisis at home. Good practice is that permanent admissions to care should be a planned piece of work not a response to a crisis though there will always be exceptions. (Pyramid)

The Cowal figures are significantly higher than other areas and reflect an inability for social work and health staff to manage crisis in the community. I am of the view this is primarily an issue of culture and management and not a resource issue and it is of note that similar practice is not evident in Bute.

This pattern is duplicated in unplanned admissions to hospital. A 10% reduction in emergency admissions has been set for 20-13/14 and across Argyll & Bute the overall reduction in the year to date is below target. Oban, Mid Argyll and Kintyre performing at or above target, whilst Cowal, Bute, Islay and Vale of Leven (Helensburgh patients) show an increase in unplanned admissions, as compared to last year. (Joint Performance Report June 2013)

It should also be noted that unplanned admissions to both care homes and hospital has a significant impact on the commitments to the care home commissioning budget and our delayed discharge performance as a significant number of service users/patients move into long term care homes placements and do not return home.

Delayed Discharge|:

On 1st April the Partnership moved to a target of discharge to have taken place within 2 weeks of being assessed as fit for discharge by a clinician. This is in advance of 2014 the 2 weeks target being implemented nationally in April 2014.

Performance on delayed discharge has been consistently good over a number of years across Argyll & Bute and in Bute & Cowal.

Present issues:

- Both Home Care Home and Home Care budgets are fully committed and as a consequence patients are being discharged from hospital very near to the monthly census date.
- Recruitment of home care staff for new packages has become problematic generally across Argyll & Bute but most significantly in the MAKI and OLI areas hence early discharge to home becomes problematic. A small number of patients are being discharged to care homes as an interim before returning home.

Telecare:

The number of enhanced Telecare packages across Argyll & Bute continues to grow and pattern is duplicated in Bute & Cowal although figures will fluctuate on a month to month basis.

As previously agreed at full council, the main target for Telecare is new referrals rather than existing service users. Each service user will be assessed on their own merits but existing service users will not be forced to update their package to Telecare without their consent or where appropriate their carer's consent.

Allocation of work within 5 days of referrals and Assessments completed within 28 days:

On both counts the Bute & Cowal area is performing well. Note the context of a very high Adult Protection referral rate which require to be investigated at short notice and are very time consuming with Bute & Cowal having a disproportionate rate of referrals of nearer 33% of the council's total. This additional workload has required a significant level of re-prioritisation within the service as there has been no increase in the qualified Social Work staff complement in Adult Care since 2007

2009-10: 124 referrals across the council

2012-13: 565 referrals across the council

Adult Protection

Adult Protection is an area of work where we continue to attempt to raise community awareness. As noted, the referral rate for Bute & Cowal is higher than any other area which creates workload issues that require to be managed. The main issue relating to referrals is the inconsistent referral rate from the Police across the council area. This has been highlighted as a national issue and not specific to Argyll & Bute.

Direct Payments:

The number of Direct Payments taken up in the Bute & Cowal area has been historically low and continues to be. Without some detailed research it is impossible at this stage to provide an explanation. Possible reasons vary staff not promoting the option, carers not wanting the burden of the responsibility and significant paperwork to service users being satisfied with the quality of the present service.

With Self Directed support to be implemented from 1st April 2014, the focus will turn to a greater variety of options of which Direct Payments will be one.

SDS Act requires council's to offer people four choices on how they can get their social care. The choices are:

- **Option 1** *direct payment*
- **Option 2** *the person directs the available support*
- **Option 3** *the local authority arranges the support*
- **Option 4** *a mix of the above.*

The monitoring of uptake and feedback from service users will be central to the implementation.

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