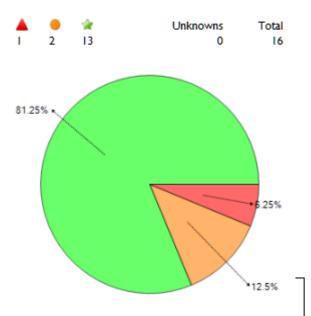
### Performance Pie Chart



# Adult and Community Services

Head of Service Comments

At year end performance remains strong despite the disruption caused by the implementation of WCCIS.

Although IP1 is amber the variances are small and must be viewed in the context of data only being available for the purposes of this report until March 6th when SWIFT was de-activated to make way for the new National recording system (WCCIS) that is now live.

The transition from SWIFT to WCCIS required SWIFT to be closed down on the 6th March in order to facilitate WCCIS go live during the weekend of 10th/11th March. Data was captured up until 6th march in SWIFT but the recording functionality in WCCIS is different and we are still at an early stage of development. Therefore, reliable data for 17/18 was only available until 6th March 2018, 3 weeks short of the full year report. This did not impact on measures that were over performing against target but in the case of the OT assessments the loss of 3 weeks did affect the year end position and was under the 85% target by 3.2%. This is a very small variation and it is helpful to note that this has previously been consistently over achieved and that the OT team generally prioritise the completion of outstanding assessments and reviews during March. Therefore, it is fair to assume that it is a reporting issue rather than a drop in performance.

The red report also contained within this measure is in relation to people over the age of 75 who have received advice and assistance and have no repeat contact within the following 6 months. This is problematic as during the first year of reporting (16/17) the recording methodology was different in order to provide a full year of data. Additionally, the target was based on prediction rather than analysis as there was no available evidence base.

This made the target of 40% for 17/18 potentially unrealistic as the data was based on 12 months of activity rather than the 6 measured in the previous year. It is also worth noting that this age group are more likely to require social care services and seek information and advice. This is the reason why the over 75's were separated out from the over 18's as a local indicator to ensure the difference could be recorded. In these circumstances the achievement of 33.8% against a target of 40% has to be seen as a demonstration of effective call and enquiry management.

The indicator that measures the same activity for over 18's has come in green as this age group are less likely to make frequent contact with the Department.

Delayed Transfers of Care (DTOC) remain a challenging area of work and are closely managed in partnership with Health. The in reach project also impacts on performance as it seeks to streamline the discharge process. However, the numbers in Newport are still low and within the National context performance is strong. At mid-year point the measure was red and the target was increased from 4 to 6 to reflect service pressures. At year end we are only 0.2 outside of target and this demonstrates the effectiveness of the on-going management strategy. For this reason, and to reflect the consistently strong performance in adult safeguarding the IP2 measure has been recorded overall as green.

For 2018/19 there will be changes to the way that performance is recorded for 2 reasons:

Firstly, the implementation of WCCIS means that information is captured in a different way and this will have implications for performance reporting. The benefits of the system are not fully realised or embedded and Performance staff have had be re-trained to familiarise themselves with reporting protocols.

Secondly, the datasets prescribed by the Welsh Government in response to the Social Services Well Being Act are all being reviewed.

Newport has been involved in the consultations with Welsh Government to develop a new outcomes reporting framework for 2018/19. During the first two years of reporting since the implementation of the SSWB Act a number of anomalies have been identified and National discussion and collaboration has been ongoing to develop a more meaningful set of measures. Newport awaits further guidance from the Welsh Government to clarify reporting requirements in 2018/19 and 2019/20.

Measure	Actual (YTD)	Target (YTD)	Target	DoT	Comments
ACS/23b Adults who have received advice and assistance no repeat contact (aged over 75) (SSPM, IP1)	33.80%	40.00%		**	The reason the over 75 age group was separated out for this measure is that this age group are more likely to require social care services and seek information and advice. Although the actual performance is below target the achievement of 33.8% demonstrates effective call and enquiry management. It is worth noting that the PI that measures the same activity for over 18's has exceeded target as this age group are less likely to make frequent contact with the Department.
CCAS/L/026 OT Assessments & Reviews % (IP1) (M)	81.80%	85.00%	•	•×	It is believed that this measure is amber due to three weeks' worth of data being lost, as performance for this PI has been consistently strong.
ACS/19 PAM/025 Delayed Transfers of Care (SSPM, PAM, IP2, SP) # (M)	6.02	6	•	*	DToC remains a challenging area of work and is closely managed in partnership with Health. The In Reach project will also impact on performance as it seeks to streamline the discharge process.
ACS/L/28 % citizens who, after the Welsh Active Offer, choose to have a service delivered in Welsh	0	0	*	÷	
ACS/23a Adults who have received advice and assistance no repeat contact (SSPM) (A)	41.90%	40.00%	*	•×	

### Key for measure RAG status

### Direction of Travel - DoT

- 쉙 Green star on target
- Amber circle slightly short of target (15%tolerance)
- Red triangle off target (over 15% away)
- ? Data missing/ not available
- No target set

- Green tick performance has improved
- Red cross performance has declined
- + performance remains the same

up arrows indicate that high values are better down arrows indicate low values are better

Measure	Actual (YTD)	Target (YTD)	Target	DoT	Comments
ACS/L/26 Number of people receiving a service from the Rehabilitation Officer (Visual Impairment) (M	63	60	*	→	
ACS/22 Average age of adults entering residential care homes (SSPM) (M)	79.2	75	*	ŧ,	
ACS/18 The percentage of adult protection enquiries completed within 7 days (SSPM, IP2) (M)	98.90%	90.00%	*	\$	
ACS/20a reablement reduced package of care and support (A) (SSPM, IP1)	56.50%	50.00%	*	ŧ,	Note there has been a change to the Welsh Government Guidance for this PI for 2017/18. So a direct comparison between previous years is not valid.
ACS/13 PAM/024 % of adults satisfied with their care & support (SSPM, PAM) (A)	81.00%	70.00%	*	•	
ACS/15 PAM/026 % of carers that feel supported (PAM) (A)	58.70%	50.00%	*	D	
ACS/21 Length of time (days) adults are in care homes (SSPM) (M)	868.2	1100	*	₹⁄	



No target set

- performance remains the same

up arrows indicate that high values are better down arrows indicate low values are better

Measure	Actual (YTD)	Target (YTD)	Target	DoT	Comments
ACS/20b reablement no package of care and support (A) (SSPM, IP1)	76.00%	50.00%	*	•×	Note there has been a change to the Welsh Government Guidance for this PI for 2017/18. So a direct comparison between previous years is not valid.
CCAS/L/027 Number of integrated assessments completed per month (IP2) (M)	1278	600	*	v	
ACS/L/24 Number of assessments of need for support for carers (IP2) (Q)	257	90	*	ŧ,	
ACS/L/25 Number of people per month who have received a proportionate assessment (M)	2089	200	*	ŧ,	



## Well-being Objective: To enable people to be healthy, independent and resilient

# IP1 Improving independent living for older people

Lead Cabinet Member	<ul> <li>Cabinet Member for Social Services</li> </ul>
Lead Officer	<ul> <li>Head of Adult and Community Services</li> </ul>

# Overall Judgement

	Mar 2018						
Actual	Performance	Comments					
Actual Amber - Acceptable	Performance	In 2017/18 this is made up of 4 measures, I relates to OT assessments that is currently amber. However the cut off point for recording was 6th March as SWIFT was replaced by WCCIS. There fore, the reported figure does not include the last 4 weeks of assessments that would have ensured compliance with the 85% target. This is further supported by the fact that previous performance has been over achieved and by the 6th March the figure was 81.8% The remaining 3 are annual measures, 2 of which relate to Reablement that are currently green with strong performance. The remaining measure is red and relates to adults over 75 requesting advice and assistance once in a 6 month period with no repeat contact during the following 6 month period. During 16/17 the way this was recorded was to identify the number of people over 75 who received advice and assistance between April and September 2016. Any repeat contact from this cohort between October and March was then monitored. This was to facilitate the first year of reporting. During 17/18, we took into account a whole year of contacts (people over the age of 75 who had received advice and assistance) from October 2016 to the end of September 2017. This captured approximately twice as many so a comparison between the two years is not valid. However, 33% achievement recorded against the 40% target with such increased numbers demonstrates we are dealing efficiently with high volumes of calls. In addition, it is useful to compare the National PI - ACS/23a (the number of people aged over 18 who received advice and assistance with no					
		assistance between April and September 2016. Any repeat contact from this cohort between October and March was then monitored. This was facilitate the first year of reporting. During 17/18, we took into account a whole year of contacts (people over the age of 75 who had received advice and assistance) from October the end of September 2017. This captured approximately twice as many so a comparison between the two years is not valid. However, 33% achievement recorded against the 40% target with such increased numbers demonstrates we are dealing efficiently with high vo calls. In addition, it is useful to compare the National PI - ACS/23a (the number of people aged over 18 who received advice and assistance with repeat contact within a 6 month period) where performance is green. This demonstrates that people over 75 are more likely to make contact Social Services and this is a pattern that would be expected from the age group with higher social care needs.					
		Because of the mitigating circumstances stated above this measure is recorded overall as amber					

# Actions

- Key for Actions 🙀 Green on track
- Amber Deviation from Plan
- A Red Action is of concern

		Mar 20	018
	Performance	IP Progress Update	IP Activity Planned
IP I.I To deliver an integrated assessment process for older people	*	WCCIS fully implemented in Newport and data migrated to the system	WCCIS at a very early stage of development, NCC continues to engage with Regional and National workstreams
IP 1.2 To roll out the integrated pathway for older people	÷	Integrated pathway for older people is now managed by ABUHB.	To continue to develop preventative services across the City. The Older Persons Pathway is an example of how Heath and Social Care services can collaborate to improve well-being and potentially divert future demand for statutory provision. The Older persons Pathway sits within the development of Care Closer to Home services being led by ABUHB
IP 1.3 Restructure the operational adult social services teams on the NCN footprints.	*	Re-structure complete - continue to work on an NCN footprint in conjunction with ABUHB	Re structure complete - continue to work on an NCN footprint in conjunction with ABUHB

## Well-being Objective: To enable people to be healthy, independent and resilient

IP2 Ensuring people have the right social services to	Lead Cabinet Member	• C
meet their needs	Lead Officer	• H

Overall Judgement	
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Lead Cabinet Member	•	Cabinet Member for Social Services
Lead Officer	•	Head of Adult and Community Services

		Mar 2018
Actual	Performance	Comments
Green - Good	*	There are two measures contained within IP2 Adult Safeguarding and Delayed Transfers of Care (DTOC). Although Delayed Transfers of Care is showing at amber it is felt that we can represent this measure overall as green with the supporting evidence of strong performance within adult protection I., DTOC - Delayed Transfers Of Care
		This annual target was reduced in 17/18 (from 4 to 3.5) as a result of strong performance last year. However, continuous improvement is challenging and after a difficult first half of year the target was increased to 6 in response to new demand.
		This is a complex area of work and receives continuous management oversight to monitor the interface between health and social care. Overall, the length of stay in hospital is reducing and this increases the turnover of patients and the number of hospital discharges. Additionally, the hospital in reproject is streamlining the discharge process and the combined effect is creating additional pressure on the ability of NCC to broker packages of care the community and find providers with capacity to meet the demand
		The end of year target is 6 and we are currently at 6.02. This represents a valid prediction of performance at mid year point and within the National context the numbers are still very low.
		Oversight of hospital discharge processes continue to be intensively managed from a social care perspective and the movement from red to amber f the mid year point must be seen as a positive.
		I. Adult Safeguarding.
		Safeguarding continues to perform strongly despite the continual high rates of referral. At current levels it is predicted that by the end of the 4th quarter 900 referrals will have been processed,
		However, performance has been consistently strong and at year end we are 98.9% achievement against an annual target of 90%. The decision has b made to increase the annual target to 95% with the caveat that the safeguarding hub is now live and we will continue to monitor the short and longe term impact on referral activity.

## Actions

- Key for Actions ☆ Green on track
- Amber Deviation from Plan
- Red Action is of concern

		Mar 20	018
	Performance	IP Progress Update	IP Activity Planned
IP 2.1 Establish the pathway for adult social services across health and social care	*	WCCIS Successfully implemented	Continue to develop WCCIS locally and engage with Regional and National workstreams
IP 2.2 Restructure the operational adult social services teams.	*	Completed	Continue to develop the NCN model, monitor capacity and demand and work in conjunction with Health where the integration of Health & Social Care Services is identified as a priority
IP 2.3 Develop and implement the integrated assessment tools	*	The IA assessment process is fully operational, and Act compliant processes embedded within WCCIS.	Completed in relation to assessment tools - WCCIS will continue to develop business processes
IP 2.4 Review and recommission services as necessary	*	Extracare is in the process of being re-commissioned, the specification and contract is in the process of being finalised to prepare for tendering. Meetings have been held with tenants at the 4 sites and the Landlord (Linc) is fully engaged within the process. In house Supported Living services are being reduced from 4 houses to 2 by 2020. The project team are scoping the work and sourcing alternative placements for existing tenants. Collaborative work with Registered Social Landlords and Independent providers is identifying opportunities for move on. Staffing issues are overseen by the Project group who are developing a communication strategy in accordance with HR.	Extracare tender to be published in June Supported Living continues to be scoped in terms of move on opportunities and the impact of individual tenants moving out of the 4 houses and how that affects the overall project plan for reduction of service.

		Mar 20	018
	Performance	IP Progress Update	IP Activity Planned
IP 2.5 Review and develop our systems and processes	÷.	WCCIS now implemented, staff trained and are recording live on the system.	WCCIS, although live is still at an early stage of development. Business processes continue to evolve and early system issues are being worked through. The National context is that implementation is about half way complete although all of the Gwent Authorities are now live. ABUHB is not yet live but are planning a phased implementation - the first service are is mental health and the second frailty. NCC continues to work through local issues and is engaged with Regional and National workstreams to identify common areas of challenge and progress
IP 2.6 Undertake a Questionnaire of people who have a care and support plan	×	The questionnaire for 2017/18 has been completed and the results forwarded to Welsh Government. Adults sent out 1200 questionnaires representing the number in receipt of a care and support plan at the time of survey. The majority of which reported that they were happy with the care and support received	