Adult's Services Scorecard - Quarter 2 2018 - 2019

PI Ref	Measure	Polarity	NW stat Av	National Av	18-19 Target	Year end 2017-18	Quarter 1	Quarter 2	Quarter 3	Quarter 4	18-19 yr to date	RAG	Qtly dir of travel	Comments
Benchmarking/ ASCOF Indicators														
1.01	Residential Admissions for 18-64 age band (Total Admissions YTD)	Low is good			28	45	5	14			14	Green	↑	Please note this is a Year to date figure. See below for rate per 100k of population
1.02	Residential Admissions for 18-64 age band per 100k population (ASCOF 2A1) ytd fig	Low is good	13.7	13.3	13	20.2	2.3	6.4			6.4	Green	↑	Please note this is a yeat to date figure. The rate of residential admissions up to Q2 this year is consistent with the same point last year and indicates that we are track to meet the target. The small numbers involved in this measure however mean that the position can change very quickly.
1.03	Residential Admissions for 65+ age band (Total Admissions YTD)	Low is good			536	611	133	275			275	Amber	→	Please note this is a year to date figure. See below for rate per 100k of population
1.04	Residential Admissions for 65+ age band per 100k population (ASCOF 2A2) ytd fig	Low is good	715.0	628.2	628.2	728.0	155.8	322.2			322.2	Amber	→	Please note this is a year to date figure. There is a significant reduction in the rate of residential admissions up to Q2 this year compared to the same period last year where the rate was 383. Providing admissions remain at the same rate for the remainder of the year we should see a reduction compared to year and an outturn closer to target and national average. The ongoing scrutiny of all requests at panel, to ensure all options to support individuals in their own home have been explored, should assist in acheiving this.
1.05	Total number of individuals currently in residential/ nursing care 18-64	Low is good				196	196	184			N/A	Amber	↓	See below
1.06	Total number of individuals currently in residential/ nursing care 65+	Low is good				1173	1190	1175			N/A	Amber	↓	Across all age bands, 47% of Cheshire East (Permanent) Residential Clients are receiving Nursing Care compared to the (year-end) national percentage of 28%. Whilst this means that Cheshire East appear as a high outlier for active nursing clients in North-West benchmarking reports and a low outlier for active residential clients this could be indicative of a proactive approach to ensuring individuals remain in their own homes for longer and are only entering permanent care homes at a later stage in life
1.07	Delayed transfers of care from hospital - days per quarter total	Low is good				14,118	2822	3152			5974	Green	↑	This is the raw monthly figure of total bed days lost for individuals resident in CE taken from the CE LA table produced by NHS Digital. Compared with the previous quarter there has been an increase of 330 days (up 11.7%). However when compared with the same quarter in the previous year there has been a significant reduction in total delays from 4,261 days to 3,152 - a reduction of 1,109 days (-26%). This reflects the significant amount of work that has been done in partnership with health colleagues to ensure timely and appropriate discharge from hospital.
1.08	Delayed transfers of care from hospital - days per quarter attributable to Social Care	Low is good				4,752	892	1016			1908	Green	↑	This is the raw monthly figure of days lost which are attributable to Social Care for individuals resident in CE taken from the CE LA table produced by NHS Digital. Compared with the previous quarter there has been an increase of 124 days (up 13.9%). When compared with the same period in the previous year there has been a significant reduction in delay days from 1,428 days to 1,016 days - a reduction of 412 days (-28.9%). The main reason for delays attributable to Social Care is Awaiting Care Package in Own Home which accounted for 48% of the delays in the quarter and ehos similar issues nationally.
1.09	Delayed transfers of care from days delayed per 100,000 population (ASCOF 2C1) (average mthly fig)	Low is good		N/A	475	390.5	310.4	328.6			N/A	Green	→	See commentary on two indicators above
1.1	Delayed transfers of care from hospital days delayed which are attributable to adult social care per 100,000 population (ASCOF 2C2) (average mthly fig)	Low is good		N/A	160	132.7	104.4	112.0			N/A	Green	→	See commentary on two indicators above
1.11	Proportion of adults with a learning disability in paid employment (ASCOF 1E)	High is good	3.7%	5.8%	10%	11.6%	6.0%	5.8%			N/A	Green	→	This figure purely relates to those individuals with an employment status loaded in the case management system. There will be additional individuals supported via the supported employment service that will be included in a year end calculation and reporting in the year end returns. Whilst full validation of records hasn't been finalised internal discussion with the supported employment service confirms we will likley report a similar position to last year.
1.12	Proportion of adults with a learning disability living in their own home or with their family (ASCOF 1F) - YTD	High is good	85.7%	75.4%	87%	87.3%	86.6%	85.7%			85.7%	Green	→	Please note that this is a year to date figure. We continue to work closely with providers and families to ensure that individuals with the highest needs are supported to live as independently as possible in a family/ safe environment. Ongoing commissioning activity together with transition planning ensures that sufficient provision is available.
1.13	Proportion of adults receiving self-directed support - YTD	High is good	83.4%	86.90%	92%	96.7%	96.4%	96.3%			96.3%	Green	→	Please note that this is a year to date figure. All individuals are provided with details of their personal budget entitlement so they can chose to take a direct payment and arrange their own care should they wish. This approach will be strengthened in 2018/19 with the introduction of the Resource Allocation System.

PI Ref	Measure	Polarity	NW stat Av	National Av	18-19 Target	Year end 2017-18	Quarter 1	Quarter 2	Quarter 3	Quarter 4	18-19 yr to date	RAG	Qtly dir of travel	Comments
1.14	Proportion of adults receiving direct payments - YTD	High is good		28.1%	23%	21.1%	21.0%	20.5%			20.5%		→	Please note that this is a year to date figure. All individuals are provided with details of their personal budget entitlement so they can chose to take a direct payment and arrange their own care should they wish. The take up of Direct Payments is lower than we would like.

Core Service Activity

PI Ref	Measure	Polarity	NW stat Av	National Av	18-19 Target	Year end 2017-18	Quarter 1	Quarter 2	Quarter 3	Quarter 4	18-19 yr to date	RAG	Qtly dir of travel	Comments
2.01	Number of New case Contacts in period	Low is good			N/A	15,719	3,628	3532			7,160		↓	This is the number of contacts with outcome of either progress to new referral, info and advice given and signpost to other agency. Ongoing work with the teams to ensure that 'contacts' is only used for new people asking for assistance means that we have much better understanding of new contacts as oposed to ongoing activity on open clients. Q1 and Q2 figures suggest a significant reduction in contacts which could indicate that use of the Live Well site is increasing as the first option to access information and advice (rather than contacting us directly).
2.02	Percentage of all new contacts (other than safeguarding) where the Client had any other Contact in the previous 12 months	Low is Good				37%	40%	39%			40%		↓	For repeat contacts (as per this metric), the average length of time since the preceding contact is 114 days. For 55% of repeat contacts, the preceding contact had an outcome of 'progress to new case', for 40% of repeat contacts it was either 'information and advice' or 'signposted' and for 4% it was 'link to existing referral'. This will help us better understand at what stage prefessionals and individuals are contacting social care and understanding of thresholds for involvement by partner agencies
2.03	Number of Contacts resulting in a New Referral	Low is good			N/A	9,391	2,064	2163			4,227		→	Comparing data from 2018/2019 to the quarterly results from 2017/2018, we are seeing a reduction in the no. of contacts progressing to a New referral. This is largely due to improvements in signposting at point of contact
2.04	Number of Assessments completed in period	n/a			N/A	3,329	1007	959			1,966		↓	Figures to the end of quarter 2 indicate an increase in the number of Assessments compared to 2017/2018. Work is underway to investigate whether Assessments recorded as 'Assessment' are actually for new clients
2.05	% of assessments that result in a commissioned service (service defined as Long Term Support or Short-Term Support to Maximise Independence)	n/a				78%	82%	83%			83%		↑	Very similar position to last quarter. The high conversion rate of those progressing to assessment requiring a service would suggest that we are appropriately signposting and decision making at the front door.
2.06	Number of Support Plan Reviews completed in quarter	High is good				4,488	1,293	1,476			2,769		↑	The Home Care recommissioning project has contributed to the increase in support plan reviews particularly where there is a need for the client to change provider. 63% of the reviews completed in quarter 2 were planned/scheduled reviews. This ensures that individuals are receiving the most appropriate care and that any changes in needs have been ...
2.07	Percentage of Clients who have received Long Term Support for 12 months continuously that have been reviewed in the last 12 months - snapshot position at end of quarter	High is good				47%	52.3%	62.6%			N/A		↑	The percentage of clients in long-term support that have received a support plan review has increased month on month since year end, which ensures that individuals are still receving the most appopriate care for their needs and any changes have been addressed
2.08	Percentage of Clients who have received Long Term Support for 24 months continuously that have been reviewed in the last 24 months - snapshot position at end of quarter	High is good				78.2%	79.3%	84.0%			N/A		↑	The percentage of clients in long-term support that have received a support plan review has increased month on month since year end, which ensures that individuals are still receving the most apporiate care for their needs and any changes have been addressed
2.09	Proportion of service users in receipt of a community based service.	High is good			80%	81.9%	78.3%	78.4%			N/A		↑	Quarter 2 represents the current picture in terms of the individuals in receipt of community based service compared to all individuals in receipt of a service. Our focus continues to be on supporting as many people at home as possible (whilst recognising that some people will require care home placements).
2.10	External Care Costs	Low is good				£98,992,000	£22,215,325	£22,548,139			£44,763,464		→	Quarter 1 is the total external cost (Gross) for Periods 1-3, Quarter 2 is the total external cost (Gross) for Periods 4-6. Based on this the estimated year end position for 13 periods is approx £96,987,505 (c£2mil less)

Care4Ce

PI Ref	Measure	Polarity	NW stat Av	National Av	18-19 Target	Year end 2017-18	Quarter 1	Quarter 2	Quarter 3	Quarter 4	18-19 yr to date	RAG	Qtly dir of travel	Comments
3.01	Number of mental health reablement referrals received in quarter	n/a				1,515	698	830			1,528		↑	There has been a process change for recording Mental Health Reablement on Liquid logic instead of manual spreadsheets. Data from Q3 onwards should fully incorporate the new process but earlier quarters will be unreliable and should not be used for analysis or decision making. This measure will be based on Mental Health Reablement Action Plans.
3.02	% of referrals where individual engaged	High is good				72%	78%	69%			72.9%		↓	There has been a process change for recording Mental Health Reablement on Liquid logic instead of manual spreadsheets. Data from Q3 onwards should fully incorporate the new process but earlier quarters will be unreliable and should not be used for analysis or decision making. This measure will be based on Mental Health Reablement Outcome Forms which are completed at the end of the Reablement hence the cohort for this measure is not the same as the number of new referrals (above)

PI Ref	Measure	Polarity	NW stat Av	National Av	18-19 Target	Year end 2017-18	Quarter 1	Quarter 2	Quarter 3	Quarter 4	18-19 yr to date	RAG	Qtly dir of travel	Comments
3.03	% of completed interventions which resulted in no ongoing package (ongoing package defined as a Long Term Support Service)	High is good				100.0%	99.8%	100.0%			99.9%		↑	There has been a process change for recording Mental Health Reablement on Liquid logic instead of manual spreadsheets. Data from Q3 onwards should fully incorporate the new process but earlier quarters will be unreliable and should not be used for analysis or decision making. This measure will be based on Mental Health Reablement Outcome Forms where the Outcome of Reablement is not 'Long Term Support'
3.04	Number of dementia reablement referrals received in quarter	n/a				204	193	270			463		↑	There has been a process change for recording Dementia Reablement on Liquid logic instead of manual spreadsheets. Data from Q3 onwards should fully incorporate the new process but earlier quarters will be unreliable and should not be used for analysis or decision making. This measure will be based on Dementia Reablement Action Plans.
3.05	Number of community support reablement referrals received in quarter	n/a				977	333	388			721		↑	There has been a process change for recording Community Reablement on Liquid logic instead of manual spreadsheets. Data from Q3 onwards should fully incorporate the new process but earlier quarters will be unreliable and should not be used for analysis or decision making. This measure will be based on Community Reablement Action Plans.
3.06	% community support reablement completed with no ongoing package of care (ongoing package of care defined as Long Term Support in SALT)	High is good				79%	74%	83%			79%	🟩	↑	There has been a process change for recording Community Reablement on Liquid logic instead of manual spreadsheets. Data from Q3 onwards should fully incorporate the new process but earlier quarters will be unreliable and should not be used for analysis or decision making. This measure will be based on Reablement Plans where the Outcome of Reablement is not 'Long Term Support'. There is some concern about inconsistency with outcomes selected in staff plan.

Active Service Users

PI Ref	Measure	Polarity	NW stat Av	National Av	18-19 Target	Year end 2017-18	Quarter 1	Quarter 2	Quarter 3	Quarter 4	18-19 yr to date	RAG	Qtly dir of travel	Comments
4.01	Total number of individuals on the visual impairment register	n/a				1,910	1,932	1,968			N/A	🟩	→	
4.02	Learning Disability Support (18-25) - Clients with an active service (other than Telecare)	n/a				170	175	179			N/A	🟩	→	The following measures all relate to snapshot positions at the end of the quarter and are counts of the number of distinct clients with an active service.
4.03	Learning Disability Support (26-64) - Clients with an active service (other than Telecare)	n/a				662	658	656			N/A	🟩	→	
4.04	Learning Disability Support (65+) - Clients with an active service (other than Telecare)	n/a				110	114	112			N/A	🟩	→	
4.05	Mental Health Support (18-64) - Clients with an active service (other than Telecare)	n/a				253	249	248			N/A	🟩	→	
4.06	Total number of Clients with an active service other than Telecare (18-25)	n/a				236	246	246			N/A	🟩	→	Across all age bands, 35% of Clients receive a Home Care service, 31% receive a permanent residential/nursing service, 13% receive a Direct Payment, 13% receive Day Care. Clients may be counted multiple times in these percentages.
4.07	Total number of Clients with an active service other than Telecare (26-64)	n/a				1,314	1,300	1,298			N/A	🟩	↓	as per above
4.08	Total number of Clients with an active service other than Telecare (65-84)	n/a				1,576	1,565	1,558			N/A	🟩	↓	as per above
4.09	Total number of Clients with an active service other than Telecare (85+)	n/a				1,301	1,314	1,286			N/A	🟩	↓	as per above
4.10	Total number of Clients only receiving a Telecare service	n/a				1,534	1,575	1,582			N/A	🟩	→	as per above
4.11	Numbers of individuals supported through the carer hub	n/a				N/A	728	490			N/A	🟩	→	There is ongoing work with the commissioning team to understand the data being provided as part of the contract monitoring work.

Risk Enablement

PI Ref	Measure	Polarity	NW stat Av	National Av	18-19 Target	Year end 2017-18	Quarter 1	Quarter 2	Quarter 3	Quarter 4	18-19 yr to date	RAG	Qtly dir of travel	Comments
5.01	Number of mental health act assessments completed	n/a				535	157	133			290	🟩	→	Cheshire East are currently on track to complete 8% more mental health act assessments than 2017/2018 based on figures up to the end of quarter 2.
5.02	Number of S117 clients	n/a				522	545	547			N/A	🟩	→	This reflect the S117 Clients currently recorded on Liquid logic. There is ongoing work to ensure that this figure also includes individuals that may previously have only been captured on partner agency systems who are also known to Social care services.
5.03	New DOLS Requests	n/a			<500 per quarter	2,446	654	633			1287	🟥	↓	The 2nd quarter has seen an average of 211 DOLS applications per month. 172 of these were Granted. 161 of the applications were renewals which is to be expected given there is a cohort on people now requiring a 12 month renewal, plus new referrals. This could also be linked to the increased number of care homes under scrutiny, with a focus on their understanding of MCA and DOLS. When compared to the same period in the previous year there has been a 10.3% increase in applications.

PI Ref	Measure	Polarity	NW stat Av	National Av	18-19 Target	Year end 2017-18	Quarter 1	Quarter 2	Quarter 3	Quarter 4	18-19 yr to date	RAG	Qtly dir of travel	Comments
5.04	New DOLS Requests per 100,000	n/a	433	454		833.8	215.8	208.9			424.7		↓	The number of DOLS applications in Q2 has fallen slightly with a rate of 208.9 per 100,000 of the adult population when compared to Q1 (215.8). When compared to the same period in the previous year (where the rate was 189.4) this represents quite an increase. CEC has a robust system for triaging and prioritising requests against the ADASS screening tool and continued increase in demand is placing pressure on the allocated budget.
5.05	Timeliness of DOLS Application processing *Average days lapsed from Date Application Received to Date Application Signed Off (for completed applications)*	Low is good			21	35.8	46	35.7			40.8		↓	As regards timeliness in processing (the average number of days it takes to sign off applications is 35.7 days (reduced from 46 days in Qtr 1). This, however, does still reflect the increasing demand in this area and mirrors the national picture with still increasing numbers of applications (albeit the rate of increase is slightly reducing).
5.06	Number of Substantiated S42 Enquiries concluding with a 'Type' of Domestic Abuse	Low is good				17	7	10			17		↑	Domestic Abuse is a relatively new 'Type of Enquiry' in terms of recording so the increase in 2018/2019 may be as a result of more comprehensive recording rather than actual increased frequency of Domestic Abuse. The Safeguarding team will continue training staff to ensure that multiple categories (including Domestic Abuse) are selected where appropriate.
5.07	Number of new Safeguarding Concerns received in a period (events not individuals)	n/a				4,328	1257	1056			2313		↓	There has been a 16% drop in the number of new Safeguarding Concerns which is consistent with expectations as a result of the Care Concern pilot (see below).
5.08	Number of new S42 Safeguarding Enquiries starting in period	n/a				905	234	131			365		↓	Cheshire East are currently piloting a Care Concern process where providers keep a log of low level safeguarding concerns and submit these to the council on a monthly basis rather than sending in First Accounts for each incident. Analysis of submissions from the providers that are included in the pilot have shown a 50% reduction in Safeguarding First Accounts submitted by these providers, therefore significantly reducing the number of S42 safeguarding enquiries which is reflected in the Quarter 2 figure.
5.09	Number of new Other (Non-S42) Safeguarding Enquiries starting in period	n/a				36	12	8			20		↓	There has been a 33% drop in Non S42 Enquiries starting in the quarter which is consistent with the Care Concern pilot (see above). Small numbers however make it difficult to make definitive conclusions regarding this drop.
5.10	Number of S42 Enquiries Concluded in the period	n/a				856	177	152			329		→	There has been a 14% drop in concluded S42 enquiries which is again consistent with the Care Concern pilot (see above). The drop in new enquiries is far more prominent than the drop in concluded enquiries which is logical as many of the concluded enquiries will have commenced before the pilot.
5.11	Percentage of S42 Enquiries Concluded for which the client expressed their desired outcomes	High is good				52%	53%	55%			54%		↑	Since year-end, there has been a slight improvement in the collection of desired outcomes and work continues with the teams to ensure this information is captured for all clients.
5.12	Of S42 Enquiries Completed that the client expressed their desired outcomes, the percentage that were fully achieved (not partially achieved)	High is good				70%	77%	69%			73%		↓	as per above
5.13	% of concluded S42 enquiries where outcome of enquiry was substantiated/ partially substantiated	High is good			N/A	56%	59%	52%			55%		↓	as per above