

Key Priorities ASC business objectives:

Reduce the number of older and younger adults whose long term support needs are met by admission to care homes.

Increase the number of customers whose short term support services enable them to live independently for longer

Increase the number of older people who stay at home following reablement or rehabilitation

Sustain the current performance on delayed transfers of care from hospital

Prevent, reduce or delay the need for care

Priority- Reduce the number of older and younger adults whose long term support needs are met by admission to care homes

Indicator: Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population (ASCOF 2A(1)) (low is good)

Analysis: This national indicator looks at planned admissions and as such includes 12 week disregards, so potentially some of those included will eventually become self funders.

This includes people within the age group 18-64 who have physical disabilities, learning disabilities or mental health issues. Controls are in place to ensure that permanent admissions are minimised and are only used where there is no other support available in a community based setting. Work is ongoing to ensure that maximum use is made of services such as supported living, and all options to support young people to remain living independently or with families are considered as a priority.

The admission rate per 100,000 of the younger population for Worcestershire was 19.3 for the year to the end of Mar-19 (66 young people) - this was higher than the national (13.9) and comparator averages (17.8) (national and comparator results are shown on the graph in the green and purple blocks).

For Q1 2019-20 results were down to 17.30 (59 people) and for Q2 18.17 (62 admissions). (Both reported on a year to end of the quarter basis). Reporting for Q3 is currently being tested and will be available shortly.

Priority- Reduce the number of older and younger adults whose long term support needs are met by admission to care homes

Indicator: Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population (ASCOF 2A(2)) (low is good)

Analysis: This national indicator looks at planned admissions and as such includes 12 week disregards, so potentially some of those included will eventually become self funders. All people over the age of 65 are included in this indicator.

Measures are in place to control all permanent admissions to either residential or nursing care. Any new placements can only be approved at Area Manager level and all new high cost placements go through a scrutiny panel. Projects are underway to look at practice in authorities with lower rates of admissions. Compulsory pick ups such as those from continuing health care and self funders also impact on results here. There is a pilot planned to start where a single worker will complete all self funding pick ups using a risk assessment tool to ensure this is applied consistently.

The admission rate per 100,000 of the older population for Worcestershire was 637.9 at the end of Mar-19 based on 849 admissions (revised with updated population figures). This is above the national (579.4) and comparator (571.3) averages. Monthly data is shown for 2019-20 which covers a full year to the end of the month so all the data reported on the same basis.

Results for Q1 show the number of admissions are reducing slightly, to 836 people and then 842 for end Q2. Reporting for Q3 is currently being tested and will be available shortly.

Priority: Increase the number of customers whose short term support services enable them to live independently for longer

Indicator: Proportion of people with no ongoing social care needs following reablement after hospital discharge - Sequel to short term services to maximize independence (ASCOF 2d) (high is good)

Analysis: This is a national ASCOF indicator which measures rehabilitation success rates for older people, in terms of the percentage who no longer require services following a reablement service. In Worcestershire this relates solely to services provided by the urgent promoting independence team. A service which is available to support hospital discharge. As such the service is working with people with increasingly complex needs. Despite the increasing acuity of people requiring the service performance has increased over the last year and remains high in Q2 2019-20 at 82.7%. Reporting for Q3 is currently being tested and will be available shortly.

DAS set a stretch target for 2018-19 for this measure at 81% and have further increased this for 2019-20 to 83.5%. This target was set at the start of the financial year and was based on achieving good performance in comparison to similar authorities/nationally based on the most recent data available at that time which was 2017-18 performance.

National results for 2017-18, and 2018-19 are shown on the graph - comparator and England lines (green and purple). For 2018-19 the comparator average was 86.7% and nationally 79.6%.

Performance achieved by other authorities is very much linked to the type of service included in this measure. As Worcestershire's service targets people coming out of hospital with complex needs it will be more difficult to perform at levels

Priority- Increase the number of older people who stay at home following reablement or rehabilitation

Indicator: Older people remaining at home following hospital discharge and a reablement service - Proportion of 65+ who were at home 91 days after discharge from hospital into reablement/rehabilitation services (ASCOF 2b) (high is good)

Analysis: This is a national indicator used as a supporting metric for the Better Care Fund program. It measures the percentage of older people who have gone through a reablement program on discharge from hospital and are still at home 91 days later, on a quarterly basis. Reablement services include some that are health led.

The 2019-20 target for this indicator is 81.8% , it was previously set as a stretch target in 2017-18, but has been reduced to be in line with performance in similar/comparator authorities (2017-18 as this is the latest comparator data available).

For 2018-19 the result was 85.1 for Worcestershire which was above the family average of 83.3 and the England average of 82.4.

The acute hospitals is under increasing pressure, and there continues to be higher acuity in patients discharged to reablement services. These services support people being discharged to remain independent for as long as possible, and it becomes increasingly challenging to ensure that they are at home after 91 days as the needs of people using these services become more complex. Despite this performance on this measure has increased steadily through 2019-20, and is at its highest, 89.3% for Q3.

Priority- Sustain the current performance in delayed transfers of care from hospital

Indicator: No of days people are delayed in hospital each month that are a social care responsibility - No of days delayed per month (responsibility of social care, in and out of County) (low is good).

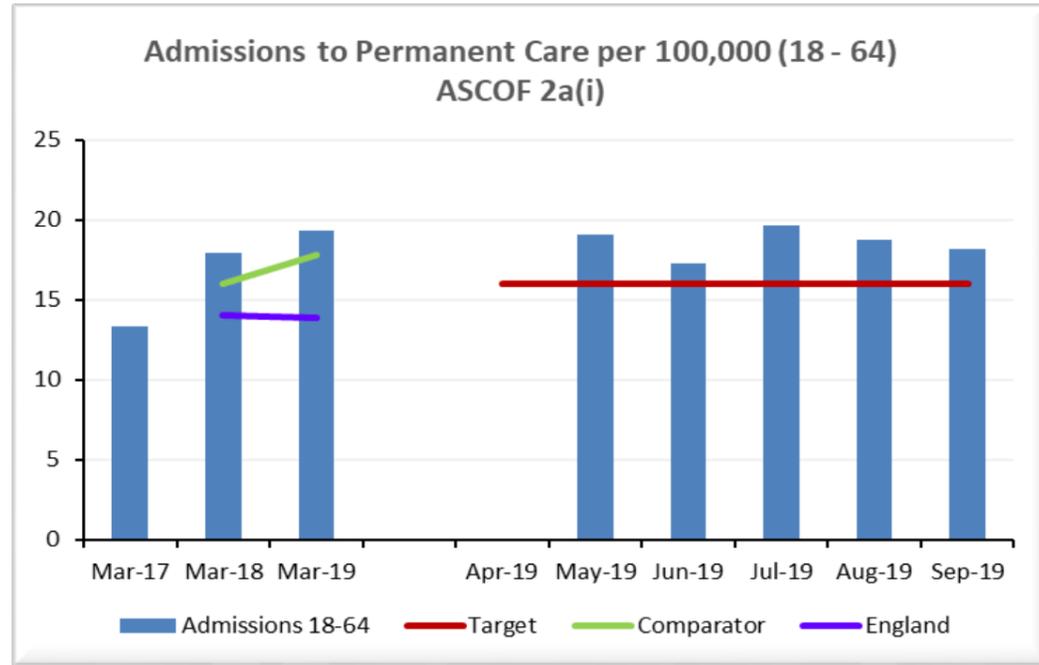
Analysis: Data on delayed transfers from hospital is published nationally and the results are shown here to Dec-19. Social care delays have however risen in this month (514). The proportion that are delays in acute hospitals is low (23% or 117 days), and of these acute delays the majority (95% or 111 days) are in out of county hospitals. The Directorate has achieved this by worked effectively with health colleagues to ensure that pathways are available to patients coming out of hospital and delays including social care delays are kept to a minimum.

Priority: Prevent, reduce or delay the need for care

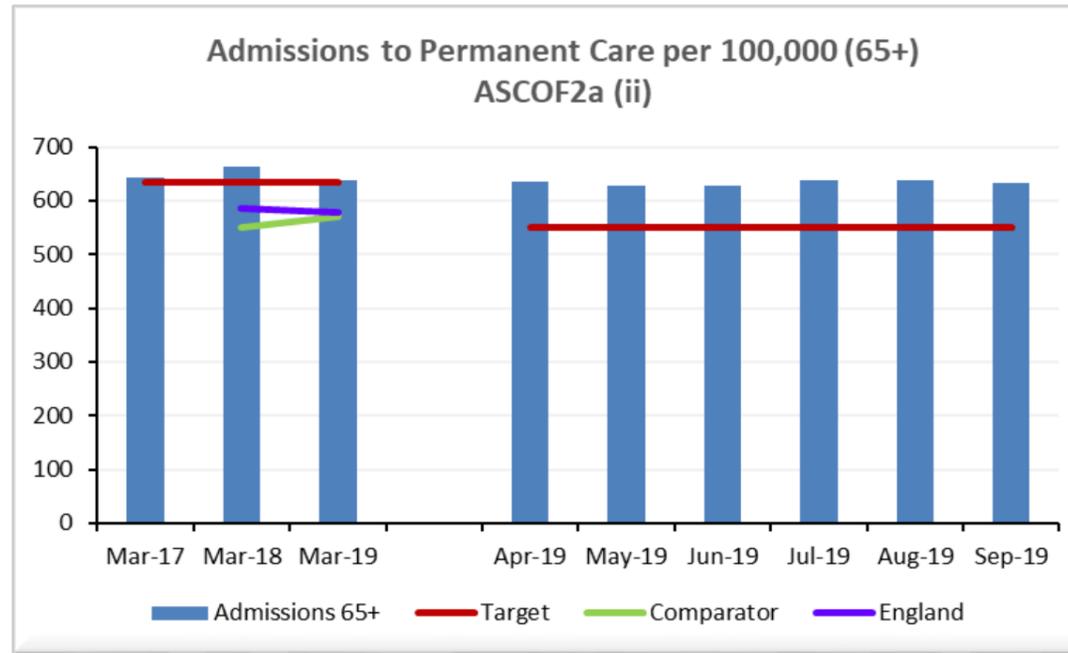
Indicator: Annual care package reviews completed - Percentage of people in services for 12 months who had a review completed in those 12 months or whose review is in progress at that point (high is good)

Analysis: This is a local measure that looks at people who have been in receipt of services for a year or more and checks that they have been reviewed in that period. Up until Mar-17 this measure was set at 15 months. DAS have maintained the target 95% whilst reducing the time allowed to 12 months. Performance at the end of 2018-19 was at 94%, but has deteriorated during 2019-20 and at Q3 was 85.7% (rated as red). Performance across different services varies with the area social work teams, and young adults being on target, whilst mental health and particularly learning disability teams are well below target and rated as red. This is being picked up as part of the improvement plan from the recent peer review.

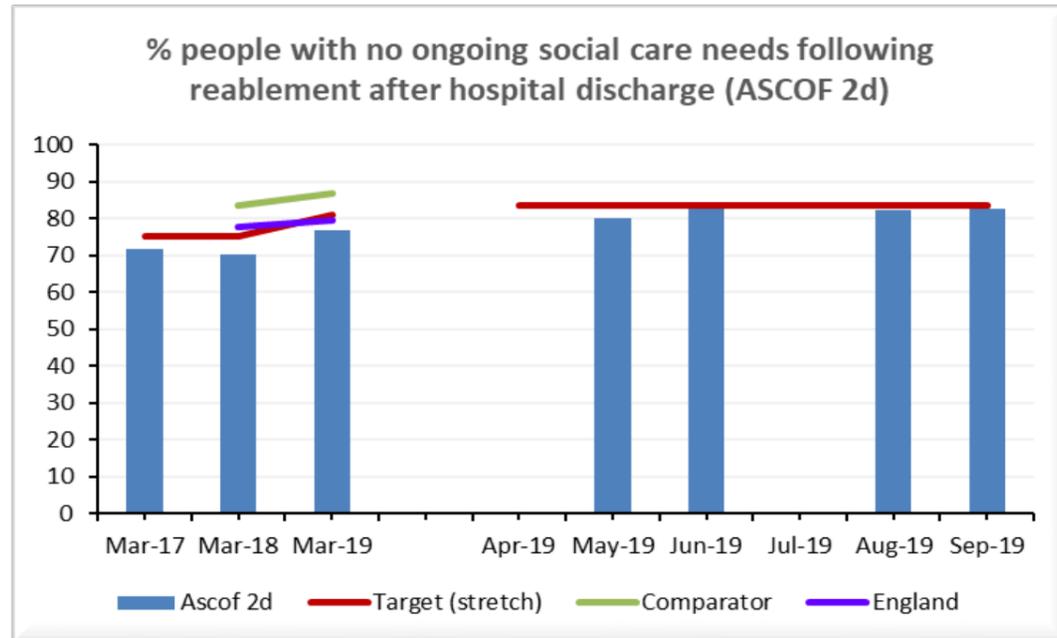
ASCOF 2a(1)



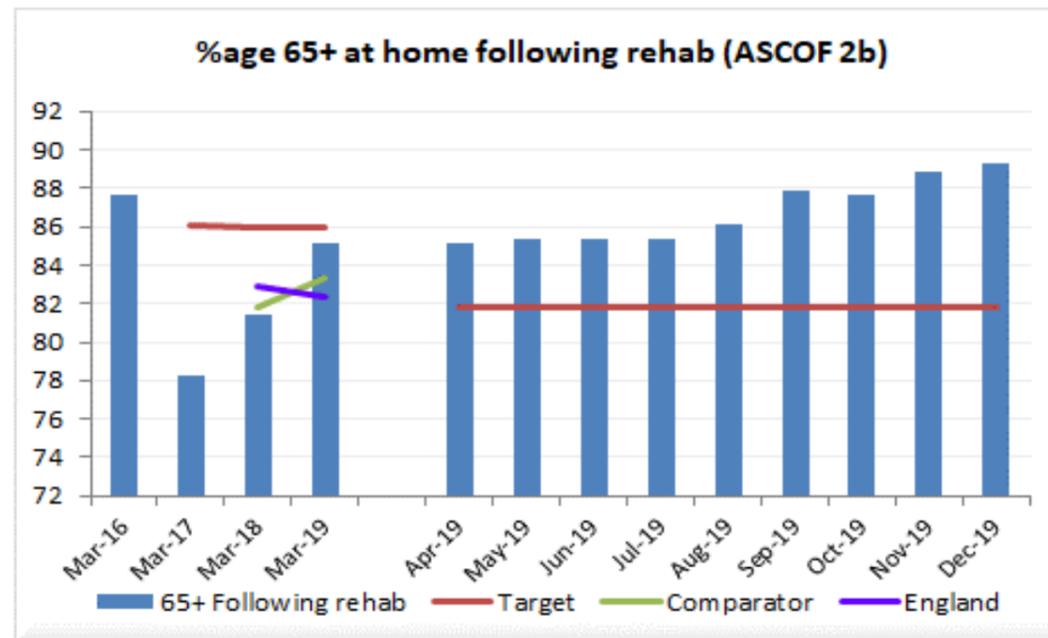
ASCOF 2a(2)



ASCOF 2d



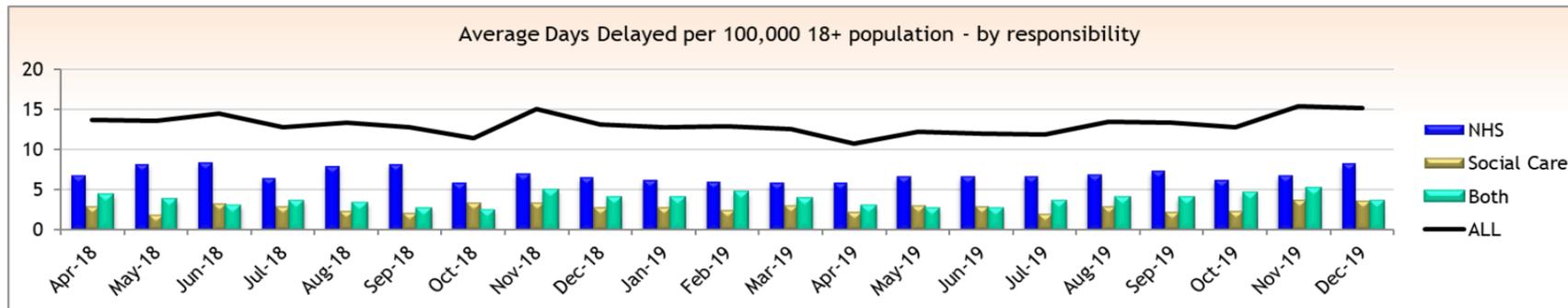
ASCOF 2b



Note: the purple and green blocks are the comparator and England average

Delayed Transfers of Care

Data	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19
NHS	937	1171	1164	915	1125	1127	830	973	929	882	774	837	801	970	940	961	991	1030	903	954	1200
Social Care	387	255	448	412	326	289	478	450	391	396	306	425	290	430	395	278	404	309	322	506	514
Joint	595	534	415	512	470	369	345	686	571	563	609	548	409	384	364	507	585	561	655	721	506
Total	1919	1960	2027	1839	1921	1785	1653	2109	1891	1841	1689	1810	1500	1784	1699	1746	1980	1900	1880	2181	2220



Annual Reviews Completed

