Adult Care and Well-being Scrutiny Panel - Summary Report

Q1: 2022-23

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

Prevent, reduce or delay the need for care

1. Admissions to Permanent Care per 100,000 (18-64)

2022-23 Target rate = 16

Worcestershire 18-64 Population = 341,261*

Good Performance = Lower ♥

Definition: Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population.

Analysis:

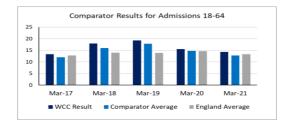
This national indicator looks at planned admissions and as such includes 12 week disregards, so potentially some of those induded will eventually become self funders.

The data 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.

Comparator Data: (Latest national data available is Mar-21)

Although the WCC rate of admissions for younger people decreased in Mar-21 to 14.4, it was still above the comparator and England average.



Year/Month	WCC Result	Comparator Average	England Average
Mar-17	13.3	12.0	12.8
Mar-18	17.9	16.0	14.0
Mar-19	19.3	17.8	13.9
Mar-20	15.5	14.7	14.6
Mar-21	14.4	12.8	13.3
Mar-22	15.8*		

^{*} estimated pending confirmed population

Worcestershire Results

Month	Mar-21	Jun-21	Sep-21	Dec-21	Mar-22	Jun-22				
Result and RAG	14.4	17.6	20.5	19.9	15.8	16.4				
Numerator	49	60	70	68	54	56				
Reporting method		Rolling 12 months (Q1 = July 2021 to June 2022)								

Admissions per month	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Total
No. of Admissions	5	5	8	6	7	2	0	4	8	2	7	2	56

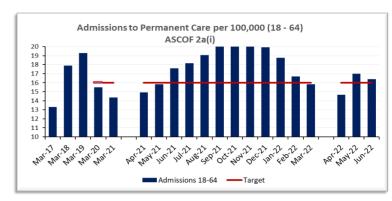
Q1 2022-23 Commentary:

Over the period 2019-21, the rate of admissions for younger people fell. From 19.3 (66 young people) Mar-19 to 15.5 (53 young people) in the year to Mar-20, and to 14.4 (49 young people) in the year to end Mar-21. The Mar-21 figure was particularly low due to the pandemic. Numbers rose during 21-22, declining towards the end of the year but remaining higher than the previous year.

For Q1 2022-23 the rate has increased to 16.4 (56 people) which has resulted with an Amber rating.

Please note, the results from Mar-22 are provisional as we are waiting for finalised population figures to be released nationally for the confirmed result.

The action plan to focus on demand and spend is not fully established. All placements are routinely scrutinised and alternatives to admission considered as the preferred option. Additional scrutiny of all funding decisions is currently in place to ensure maximum use of prevent, reduce and delay options to maximise peoples independence wherever possible. Where long term funded services are required, we are using best value principles and identify any themes/improvement actions.



*estimated

Good Performance = Lower ♥

Definition: 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)

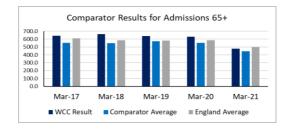
Analysis:

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. Permanent admissions for people over the age of 65 are included in this indicator.

The aim is to support older people to remain living independently, in their own homes, for as long as possible. Measures are in place to ensure that admissions only occur where there is no other option to meet a person's needs. There are audits of new admissions each month to ensure they are appropriate and to identify any key trends/themes. These are reported to the Assistant Director and to PDLT monthly. As the population ages and has increasingly complex needs the pressure on preventing admissions becomes increasingly challenging. There will be an implication of Covid on people's long-term health and well-being that could impact on the need for 24/7 care.

Comparator Data: (Latest national data available is Mar-21)

The WCC rate of admissions for 65+ dropped significantly in this period and although still above the comparator average (more admissions than other similar authorities) it is below the England average.



Year/Month	WCC Result	Comparator Average	England Average
Mar-17	642.0	552.2	610.7
Mar-18	663.9	549.8	585.6
Mar-19	637.9	571.3	579.4
Mar-20	629.1	553.7	584.0
Mar-21	475.8	447.2	498.2
Mar-22	585*		

* estimated pending confirmed population

Worcestershire Results

Month	Mar-21	Jun-21	Sep-21	Dec-21	Mar-22	Jun-22			
Result and RAG	475.8	595.2	659.1	639.6	585.0	533.6			
Numerator	654	818	906	879	804	746			
Reporting method		Rolling 12 months (Q1 = July 2021 to June 2022)							

Admissions per month	Jul-21	Aug-21	Sep-21	Oct-21		Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Total
No. of Admissions	65	70	69	57	71	60	60	66	71	51	62	44	746

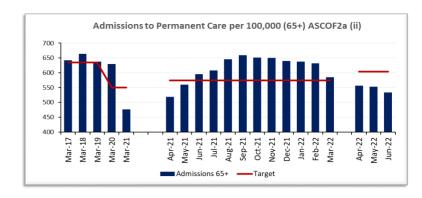
Q1 2022-23 Commentary:

Over the last 4 years, the admission rate for older population has fallen from 663.9 (850 older people) in 2018 to 475.8 (654 older people) in the year to end Mar-21. Admissions have steadily risen since Mar-21, peaking in Sep and now slowly falling. The Mar-22 result, although higher than the previous year has not returned to pre-pandemic levels seen in Mar-20.

For Q1 2022-23 the result has continued to decrease to 533.6 which has resulted with a Green rating.

Please note, the results from Mar-22 are provisional as we are waiting for finalised population figures to be released nationally for the confirmed result.

Work streams to address this are ongoing. An action plan has been established to focus on demand and spend. High cost packages, authorisation and actions post review are being scrutinised as part of this. Ongoing work with Commissioners looking at extra care provision, Continuing Health care decisions continues as does the scrutiny of all new placements. Additional scrutiny of all funding decisions is currently in place to ensure maximum use of prevent, reduce and delay options to maximise peoples independence wherever possible. Where long term funded services are required, we are using best value principles and identify any themes/improvement actions.



3. Outcomes of Short-term Services

2022-23 Target = 83.5%

Good Performance = Higher 1

Definition: Proportion of people with no ongoing social care needs following a reablement service - sequel to short term services to maximize independence (ASCOF 2d)

Analysis:

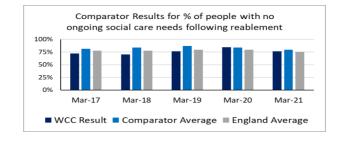
This is a national ASCOF indicator which measures rehabilitation success rates for people (all ages 18+), in terms of the percentage who do not require ongoing services following a reablement service. In Worcestershire this has related solely to services provided by the Urgent Promoting Independence Team (UPI) (focusing on hospital discharge) but from Oct-21 the new community reablement service is also included. The community team have assisted with hospital discharges at various stages within the pandemic.

COVID-19 has significantly impacted the cohort of people using these services, particularly for those discharged from hospital where the focus has needed to be on system flow. New hospital discharge models were in place from the start of Covid-19 and have meant that more complex people are being given the opportunity for reablement and leaving hospital via Pathway 1 with the UPI team.

Comparator Data:

The latest comparator data available is 2020-21.

The result for WCC was 76% - which is higher than the England average but below comparators.



Year/Month	WCC Result	Comparator Average	England Average
Mar-17	71.7%	81.2%	77.8%
Mar-18	70.1%	83.5%	77.8%
Mar-19	76.6%	86.7%	79.6%
Mar-20	84.2%	83.9%	79.5%
Mar-21	76.0%	79.1%	74.9%
Mar-22	78.4%		

Worcestershire Results

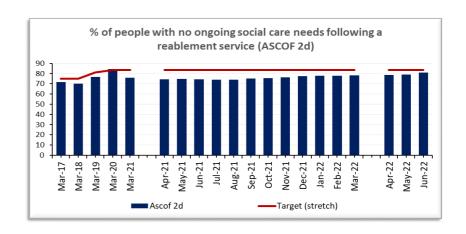
Month	Mar-22	Apr-22	May-22	Jun-22				
Result and RAG	78.4%	78.6%	78.9%	80.8%				
Numerator	1135	110	220	341				
Reporting method	ear to date (Q1 = April 2022 to June 2022), monthly data, cumulative							

Q1 2022-23 Commentary:

For 2020-21 the result was 76% compared with 84.2% in the previous year. This decrease is linked to pressures during the pandemic meaning people with more complex needs were discharged from hospital through pathway one to facilitate hospital discharge and flow across the whole system.

In 2021-22 the result has gradually increased to 78.4% at Mar-22. There continues to be pressures across the system, so any increase shows how well the service are doing.

For Q2 2022-23 the monthly results are still increasing from 78.6% in April to 80.8% in June.



4. People aged 65+ at home following Rehabilitation

2022-23 Target = 82.0%

Good Performance = Higher ↑

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

Analysis:

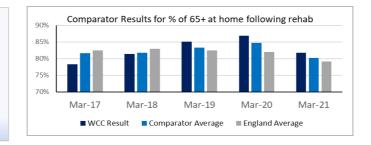
This is a national indicator that measures the percentage of older people who have completed a reablement program on discharge from hospital and are still at home 91 days later, on a quarterly basis. Reablement services include some that are health led.

The acute hospitals are 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. As before, COVID-19 has significantly impacted this cohort of people.

Comparator Data:

The latest comparator data available is 2020-21.

The result for WCC was 81.8% - above both the national and comparator averages.



Year/Month	WCC Result	Comparator Average	England Average
Mar-17	78.3%	81.6%	82.5%
Mar-18	81.4%	81.8%	82.9%
Mar-19	85.1%	83.3%	82.4%
Mar-20	86.9%	84.7%	82.0%
Mar-21	81.8%	80.2%	79.1%
Mar-22	80.8%		

Worcestershire Results

Month	Mar-22	Apr-22	May-22	Jun-22				
Result and RAG	80.8%	81.2%	81.3%	82.4%				
Numerator	497	558	548	546				
Reporting method	3 months running total (Q1 = April to June 2022)							

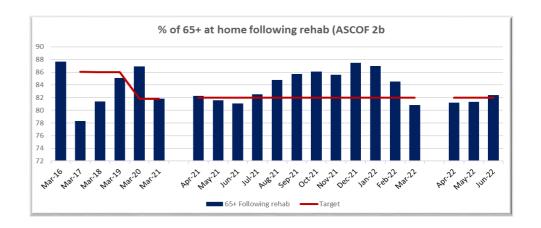
Q1 2022-23 Commentary:

Despite the pressures across the health and social care system due to Covid, performance on this measure for 2021-22 was 80.8%. This was lower than the pre-pandemic level in Mar-20 of 86.9% but a good result considering pressures on the system and acuity of need.

For 2021-22 the monthly results have varied considerably and been impacted by levels of COVID and hospital system pressures.

There has been a historic trend for results to fall through the winter months as the focus needs to be on hospital flow to alleviate pressures across the system. From January to March 2022 there were less positive returns from nearly all teams which made the result for year-end decrease to 80.8%.

For Q1 2022-23 the result from April to June has improved to 82.4%



5. Annual Care Package Reviews Completed

2022-2023 Target = 95%

Good Performance = Higher ↑

Definition: Percentage of people in services for twelve months who had a review completed in those twelve months or whose review is in progress at that point

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.

Worcestershire Results

Month	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22
Result and RAG	88.1%	87.8%	87.2%	86.2%	86.8%	87.5%	87.2%	88.4%	87.3%	85.7%	86.3%	86.0%
Numerator	4181	4184	4172	4128	4154	4156	4143	4222	4184	4109	4149	4149
Reporting method		Rolling 12 months (Q1 = July 2021 to June 2022)										

Q1 2022-23 Commentary:

Performance for Q2 2022-23 is 86% with small variances over the last 12 months. Mental health teams have improved performance significantly and are now GREEN at 95.6% - improving from 78% when they returned to WCC in Apr-21.

An external provider is now set up to support completion of reviews for Learning Disability teams, with further consideration across other teams where resource allows.

