

Health Overview & Scrutiny Committee

24 July 2013

Report of the Director of Health & Wellbeing

2012/13 FINANCE & PERFORMANCE YEAR END REPORT – ADULT SOCIAL SERVICES

Summary

This report analyses the outturn performance for 2012/13 and the financial outturn position by reference to the service plan and budgets for all of the relevant services falling under the responsibility of the Director of Health & Wellbeing.

Financial Analysis

- The Adult Social Services budget overspent by £2,083k (4.3% of the £48,567k net budget) where pressures that have been evident in previous years related to demand, particularly for community based care, still remain.
- In Adult Social Services, the population growth of older people is already placing a greater demand on council services and budgets, with increased numbers of people seeking support from social care services. As the number of customers receiving personal budgets to support them continues to rise, it promotes independence, enables choice and control over the daily lives of our customers and they can exercise greater choice and control over their lives.
- The strategy to address these trends and their incumbent pressures has been to develop early interventions that address needs early and prevent the escalation into more complex care needs and more expensive care packages. This means that whilst the total number of people supported by social care packages is not increasing significantly, they have more complex needs so the costs of the packages are increasing. Local health provision is under strain and increasingly social care is being asked to support people who would previously have received health care support. With developments in medical science young people with complex needs are living for longer and moving from children's services to adult services, where they can need intensive support to keep them safe and able to live a full life. 35 young people have moved from children's to adult services in the last 2 years, which is a trend we would not have seen even 5 years ago.

- There is also a shared ambition across local government and health agencies to see health care delivered closer to home. This is underlined in York by the need to work as a community to address the budget deficit within the local health care system. The North Yorkshire and York Review highlighted the need for more joined up working and the need to reduce hospital admissions and lengths of stay. This approach does mean that more people will require social care support and this is currently an area of major concern as early discharge from hospital leads to people with complex care needs requiring very expensive care within their community.
- The Council has seen increasing numbers referred from the hospital for discharge support over the last two years:
 - Average of 125 a month in 2010/11
 - Average of 135 a month in 2011/12
 - Average of 143 a month in 2012/13
- People are leaving hospital on average 7 days earlier this year. This means that they require more social care for longer. This is a positive indicator for delivery of the care closer to home strategy, but progress in one part of the system brings pressures in other parts. Top level discussions are taking place with the GP commissioners and the Hospital Trust to consider this problem and seek mitigations.
- Homecare The Homecare service has been substantially redesigned and has been successful in signposting customers with low level needs to other forms of provision. This has meant that the number of customers has remained stable despite the growth in the number of potential customers, but it does also mean that the customers receiving the service have more complex needs. This is one reason why, despite unit costs going down following the outsourcing of the service weekly, spend on our home care contracts has increased from £54k a week in July 2011 to £82k a week in November 2012. In March 2011 there were 553 customers receiving an average 7 hours per week of home care. There are currently 697 customers on the tiered contracts receiving an average of 8.4 hours per week. This results in an overspend of £2,947k.
- Residential and Nursing Care The number of admissions to care homes has remained fairly stable but, as predicted, the demographic pressures and the increasing ability to support people at home for longer means people are needing more intensive support as they enter care homes. This is leading to higher costs in nursing homes and, for some residents, additional 1:1 support to keep them safe. In addition, unbudgeted fee increases of 1% were approved in April and October. All these factors have resulted in an overspend of £433k.

- Demographic pressures are also evident in Adult Transport with a forecast overspend of £205k and there has been a continued increase in the number of customers taking up Direct Payments (£408k) and respite placements (£185k). In addition there has been an increased cost of repairs and maintenance (£297k) at our Elderly Persons Homes, and a shortfall in income (£276k).
- However, mitigating actions had been identified to offset these pressures. Vacancies in small day services (£251k) and contracting and commissioning (£80k), an under spend on Warden Call (£135k) and delays in a Supported Living scheme result in an under spend (£157k). Mitigation strategies as outlined in the in year monitoring reports and strict budgetary control measures contribute a further £1,629k to the overall position.

Performance Analysis

The table below shows the end of year outturns for the National and Local measures against the targets set in 2012/13. The table also shows the comparable performance of the Local Authorities in the Yorkshire and Humber Region (Y&H), the average outturn for All Local Authorities in England, and the average of our nearest comparator authorities, as defined by CIPFA. The benchmarking data is provisional at the time of writing. *NB: Local Indicators have no Benchmarking Comparison.*

Code	Description of PI	Comparators - Benchmarking				
		TARGET	Year End (12- 13)	Y & H (12- 13)	England (12-13)	Comparator (12-13)
	Self reported	TARGET	78.99	13)	(12-13)	(12-13)
A&S1A	experience of		<u>%</u>			
(NPI 127)	social care users	80%	(18.9)	19.1	18.8	18.9
(141 1 127)	The proportion of	0070	(10.5)	10.1	10.0	10.5
	people who use					
	social care who					
	have control over		80.50	77.3		
A&S1B	their daily life	80%	30.33 %	0%	75.90%	76.20%
	Customers &					
	Carers receiving					
	Self Directed					
	Support (Direct					
	Payments and					
A&S1C	Individual		31.12	54.3		
(NPI 130)	Budgets)	30%	<u>%</u>	0%	55.60%	55.50%

A&S1C Part2 (NPI 130)	Customers & Carers receiving Self Directed Support (Direct Payments ONLY)	20%	12.37 %	15.4 0%	16.40%	19.30%
A&S1C Part3	Customers & Carers receiving Self Directed Support (Direct Payments and Individual	2070	73.11	070	10.4070	10.0070
(NPI 130)	Budgets)	70%	<u>%</u>	-	-	-
A&S1C Part4 (NPI 130)	Of part 1C Part 3, percentage with Direct Payment	20%	18.63 <u>%</u>	_	_	_
1D	Carers Quality of Life	8.40		0.2	8.1	8.3
טו	Adults with	0.40	<u>8.47</u>	8.3	0.1	0.3
A 9 O 4 E	learning		0.00	0.00		
A&S1E	disabilities in	100/	8.66	6.60	7 200/	0.000/
(NPI 146)	employment Adults with MH	10%	<u>%</u>	%	7.20%	8.00%
	services in					
1F	employment	10%	10.8	8.6	7.70%	8.70%
	Adults with	1070	10.8	0.0	7.7070	0.7070
A&S1E (NPI 146) Part 2 Local	learning disabilities in employment - includes Supported employment (less than Min. Wage)	30%	38.58 <u>%</u>	-	-	-
A&S1G (NPI 145)	Adults with learning disabilities in settled accommodation	74%	63.19 %	78.4 0%	73.30%	76.00%
A&S1G (NPI 145) Part 2 Local	Adults with learning disabilities in settled accommodation - includes Res and Nursing care	74%	73.80 %	_	-	_

	Adults with MH		I	I	1	1
	Services in settled		65.00	63.5		
1 1 1	accommodation	65%	%	0%	59.30%	64.30%
111	Permanent	0070	70	0 70	00.0070	04.0070
	admissions to					
	residential &					
	nursing care					
	homes for					
	younger people					
	(18-64) per					
A&S2A	100,000	Monitorin				
part 2	population	g only	<u>7.77</u>	15.2	14.9	12.8
	Permanent					
	admissions to					
	residential &					
	nursing care					
	homes for older					
A&S2A	people (65+) per 100,000	Monitorin	646.4	697.		
part 2	population	g only	2	4	708.8	747.5
part 2	Achieving	gony	=		7 00.0	7 17.0
	independence for					
	older people					
A&S2B	through					
(NPI 125)	rehabilitation/		<u>69.77</u>	81.3		
Part 1	intermediate care	93%	<u>%</u>	0%	81.50%	84.20%
	Achieving					
	independence for					
4 4 4 4 4	older people					
A&S2B	through	N A a va i t a vi va				
(NPI 125) Part 2	rehabilitation/ intermediate care	Monitorin	0.7	2	3.30%	3.30%
r ail Z	Delayed transfers	g only	<u>0.7</u>	2	J.JU //0	3.30 /0
	of care from					
	hospital, per					
A&S2C	100,000	Monitorin				
Part 1	population.	g only	<u>18.5</u>	7.8	9.50%	10.10%
	Delayed transfers					
	of care from					
	hospital, which					
	are attributable to					
	adults social care					
	per 100,000					
A 8 C C C	population.	NA '1 - '				
A&S2C		Monitorin	100	2.4	0.000/	2.000/
Part 2		g only	<u>10.9</u>	2.4	3.30%	3.00%

Delayed Discharge	Average number of Acute delayed					
s 1	discharges	7.98	10.67	_	_	_
Delayed	Average number of reimbursable CYC delays	7.00	10.01			
Discharge s 2	(people) at period end	3.80	6.17		_	
Delayed	end	3.00	0.17	_	_	-
Discharge	Average number	444.00	<u>218.2</u>			
s 3	of CYC bed days	144.30	<u>5</u>	-	-	-
Delayed Discharge	Total CYC bed		5264			
s 4	days cost	215K	£261, 900	_	_	_
Delayed	days cost	21010	300			
Discharge	Hospital Referrals	Monitorin				
s 5	- per month	g only	<u>143</u>	-	-	-
	Overall satisfaction of					
	people who use					
	services with their					
	care and support		<u>65.80</u>	65.5		
A&S3A		70%	<u>%</u>	0%	63.70%	64.10%
	Overall					
	satisfaction of					
	carers with social		<u>54.50</u>	45.4		
A&S3B	services	55%	<u>%</u>	0%	42.70%	45.60%
	The proportion of carers who report that they have					
	been included or					
	consulted in discussion about					
	the person they		83.79	76.3		
A&S3C	care for	80%	3011 	0%	72.80%	74.40%
	The proportion of					
	people who use					
	services and					
	carers who find it					
	easy to find information about		82 00	73.8		
A&S3D	services	85%	82.90 %	0%	71.50%	73.40%
710000	Timeliness of	30 /0	70	0 /0	7 1.00 /0	70.7070
A&SNPI	social care		91.02			
133	packages	90%	<u>%</u>		-	_

	Carers receiving					
	needs					
	assessment or					
	review and a					
	specific carer's					
A&S	service, or advice	0=0/	<u>22.16</u>			
NPI35	and information	25%	<u>%</u>	-	-	-
	Joint					
	Assessments that					
A&S	are unlinked on FWi to Carer -					
NPI35 a	snap shot	_	91	_	_	_
141 155 &	Carers Separate		<u> </u>			
	Assessment					
A&S	waiting list -					
NPI35 b	snap shot	100.00	<u>137</u>	_	-	_
	People supported					
	to live					
	independently					
	through social					
	services					
A&S	PACKAGES OF	4 000	4=04			
NPI36(a)	CARE	1,800	<u>1784</u>	-	-	-
	People supported to live					
	independently					
	through social					
A&S	services					
NPI36(b)	PREVENTION	2,800	2822	_	_	_
· /	Statement of	,	97.85			
A&SD39	Needs	97%	<u>%</u>	-	-	_
	All services		<u>81.38</u>			
A&SD40	Reviews	90%	<u>%</u>	-	-	_
	Assessments	less than	<u>1.99</u>			
RAP A6	missing Ethnicity	5%	<u>%</u>	-	-	_
RAP P4	Services missing Ethnicity	less than 5%	3.06 <u>%</u>			
1001 14	The proportion of	J /0	<u>/0</u>	_	-	_
	people who use					
	services who feel					
	safe					
			<u>61.80</u>	67.8		
A&S4A		67%	<u>%</u>	0%	65.00%	66.60%

	The proportion of people who use services who say that those services have					
	made them feel		<u>83.50</u>	79.1		
A&S4B	safe and secure	85%	%	0%	77.90%	80.80%

- 13. Positive outcomes for people living in York during a challenging year with continued high level of satisfaction on self reported experiences (79%). Satisfaction with social care support has reduced marginally, but a small increase in the numbers reporting control over their lives. We exceeded the target for the number of people offered a personal budget and improved the timeliness of the delivery of support packages.
- 14. We have learned from the sector led peer improvement work that we were not counting our assessments in the same way as best performers, and this change gives an improved performance this year. However we have introduced local indicators to track waiting times for some assessments as we know that our lean capacity in care management has had an impact on delays in the start of some assessments.
- 15. Discharges from hospital continue to be a challenge, with a continued increase in the number of referrals from the hospital (54% higher in 2012-13 compared to 2009-10).
- 16. <u>Customers & Carers receiving Self Directed Support (Direct Payments and Individual Budgets):</u> Of the three measures used to monitor the take up of self directed support, two have met target. We still have work to do to encourage and support more people to choose to take a Direct payment
- 17. <u>Adults with learning disabilities in Employment.</u> Clarification from the Information Centre has led to a change that all authorities measure this indicator.
 - As a result there has been a reduction against last year's figures. Our local indicator shows that we are still offering 30% of people the opportunity for an employment based day time activities.
- 18. <u>Adults with learning disabilities in settled accommodation (including Residential and Nursing Care).</u> This indicator is sensitive to the number of reviews undertaken with people we support. Due to maternity leave, and budget pressures which meant we were not able to backfill, we did not complete all planned reviews. We know that we have high numbers of people living in their own tenancies (44% compared to 15% nationally)

- 19. <u>Admissions to care homes</u>: In relation to our whole population York continues to show low levels of admissions. We have seen an increase in the number of admissions this year, which is not surprising given the demographic pressures. We had hoped to be able to maintain admissions at last year's levels, but budget pressures have meant we have to consider the relative costs of residential and home based support for the very complex support packages that some people would need to stay at home.
- 20. <u>Average weekly number of CYC Acute delayed discharges / Average weekly number of bed days / Total bed days cost.</u> The pace and volume of hospital discharges and the delays continue. York will remain an outlier with regards to this target.
- 21. <u>Achieving independence after discharge from hospital.</u> Last year's performance was high due to a very small sample of people surveyed. This year's sample is more likely to be representative and better reflects the outcomes being achieved by the new Reablement Service, which supports people to regain independence in the community.
- 22. <u>Timeliness of social care assessment Commencement of assessments.</u>
 Significant work to understand why York was an outlier with regards to timeliness of assessments has been completed. Discussion with other councils showed that there were variations in how these were measured. As a result the old National Indicator shows an improvement this year. Our own local indicator was developed because we were aware we have delays in commencing assessments and are managing waiting lists. We will continue to work to develop smarter ways of working, as we know we are lean in care management capacity based on Audit Commission analysis.
- 23. <u>Unlinked Carers and Carers Separate Assessment waiting list.</u> Throughout the year there has been an increase in carers records not linked on the case management system. This has impacted on the numbers counted in other measures and could well have contributed to a fall in numbers of those receiving advice and information. The service continues to work towards a joint client and carer assessment unless there is an identified need to do separate assessments.
 - Waiting lists have reduced significantly form over 200 to 137, but progress was delayed whilst secondment arrangements were put in place to bring in additional temporary capacity funded through the old Carers Grant funding.
- 24. <u>Reviews of support packages.</u> The lower performance at the end of the year reflects capacity issues, with maternity leave and ill health absence not covered due to budget pressures
- 25. Other Areas of Good performance are noted as:
- Timeliness of Social Care Packages.

• Packages of Care – a trend to ensure that we increase our focus on prevention work and attempt to reduce our overall clients in Packages of Care is shown in the numbers. The 13% increase in those with Warden Call and Telecare Packages show how investment in this area is providing good prevention services to keep people safe and independent in their homes.

Council Plan

The information included in this report demonstrates progress on achieving the council's corporate priorities for 2011-2015 and in particular, priority 4 'Protect Vulnerable People'.

Implications

27 The financial implications are covered within the main body of the report. There are no significant human resources, equalities, legal, information technology, property or crime & disorder implications arising from this report.

Risk Management

28 The overall directorate budget is under significant pressure. This is particularly acute within Adult Social Services budgets. On going work within the directorate has identified some efficiency savings in services that offset these cost pressures.

Recommendations

29 As this report is for information only there are no specific recommendations.

Reason: To update the committee on the final finance and performance position for 2012/13.

Contact Details

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For further information please contact the author of the report

Background Papers
2012/13 Finance and Performance Year End Report, Cabinet 16 July 2013
http://democracy.york.gov.uk/ieListDocuments.aspx?Cld=733&Mld=7639&Ver=4

Annexes

None