

Report of the Corporate Director of Health, Housing & Adult Social Care

2018/19 Finance and Performance First Quarter Report – Health, Housing & Adult Social Care

Summary

- 1 This report analyses the latest performance for 2018/19 and forecasts the financial outturn position by reference to the service plans and budgets for all of the services falling under the responsibility of the Corporate Director of Health, Housing & Adult Social Care.

Financial Analysis

- 2 A summary of the service plan variations is shown at table 1 below.

Table 1: HHASC Financial Summary 2018/19 – Quarter 1

2017/18 Draft Outturn Variation £000		2018/19 Latest Approved Budget			2018/19 Projected Outturn Variation	
		Gross Spend £000	Income £000	Net Spend £000	£000	%
-165	ASC Prevent	7,477	1,608	5,869	+31	+0.5%
-93	ASC Reduce	11,800	4,428	7,372	-214	-2.9%
-85	ASC Delay	12,665	9,294	3,371	+110	+3.2%
+744	ASC Manage	50,040	16,453	33,587	+961	+2.9%
	ASC Mitigations				-400	
401	Adult Social Care	81,982	31,783	50,199	+488	+1.0%
0	Public Health	7,605	8,211	-606	0	0%
-116	Housing and Community Safety	11,930	9,523	2,407	+20	+0.8%
+285	HHASC GF Total	101,517	49,517	52,000	+508	+1.0%
-1,535	Housing Revenue Account Total	39,839	33,423	6,416	0	0%

+ indicates increased expenditure or reduced income / - indicates reduced expenditure or increased income

- 3 The following sections provide more details of the significant general fund outturn variations, which are predominantly within Adult Social Care budgets.
- 4 Pine Trees, a day support service for customers is forecast to underspend by £61k due in the main to securing additional Continuing Health Care (CHC) Income for two customers. Underspends are also forecast on the Supported Employment scheme at Yorkcraft (£79k) as places within the scheme have been held vacant pending a review of the supported employment offer and on the Older Persons' Direct Payment budget (£83k) where there are fewer customers and the average payments have reduced in cost.
- 5 The early part of this year has seen an increase in residential placements for those with Mental Health issues, both over 65 and working age. There are 6 more customers than budgeted for at this point in the year, causing a projected £381k overspend.
- 7 The Supported Living for Learning Disability customers continues to be a budget pressure. This is forecast to overspend by £405k and this also assumes that savings attributable to the transforming care programme (£153k) and review of the schemes (£169k) is achieved. An action plan has been drawn up and is about to be implemented. A range of other minor variations make up the overall directorate position.
- 8 The directorate management team are committed to doing all they can to try and contain expenditure with the approved budget and are currently exploring the options available to further mitigate the forecast overspend. This includes reviewing the level of continuing health care contributions, the ongoing costs of customers transitioning from children's services, consideration of existing efficiency savings to identify if these can be stretched further or implemented early and continued restrictions on discretionary spending.

Housing Revenue Account

- 9 The Housing Revenue Account budget for 2018/19 is a net cost of £5,715k due to the £10m investment from the working balance into providing new council houses. Overall, the account continues to be financially strong and is forecasting a nil variance at this early stage in the financial year meaning that the working balance will reduce to £23m at 31 March 2019 as outlined in the 2018/19 budget report. This compares to the balance forecast within the latest business plan of £22.3m.
- 10 The working balance is increasing in order to start repaying the £121.5m debt that the HRA incurred as part of self financing in 2012. The current business plan assumes that reserves are set aside to enable the debt to be repaid over the period 2023/24 to 2042/43. Following the decision by Members to fund new Housing Development initiatives through the HRA this will impact the thirty year business plan and therefore an update of the business plan is due to be presented to members later in the year.

Performance Analysis

ADULT SOCIAL CARE

- 11 Much of the information in paragraphs 13 to 24 can also be found on CYC's "Open Data" website, which is available at

<https://data.yorkopendata.org/dataset/executive-member-portfolio-scorecards-2017-2018>

and by clicking on the "Explore" then "Go to" in the "Adult Social Care and Health Q2" section of the web page. Further information relating to paragraphs 25-41 can be found on Public Health England's "Fingertips" site, which is available at

<https://fingertips.phe.org.uk/indicator-list/view/TBYIWbgJ6E>

- 12 Some of this information also forms part of CYC's overall "Service Delivery" suite of performance indicators, which are shown here:

Performance - Overview			2014-15	2015-16	2016-17	2017-18 Q4	2018-19 Q1	Latest Benchmark	DoT
Service Delivery	A Focus on Frontline Services	Average beds occupied each day in hospital which are attributable to adult social care DTOC, per 100,000 population	6.7	6.5	6.8	6.0	7.3	Above National and Regional Average	↓
		Percentage of panel confident they could find information on support available to help people live independently	NC	NC	65.46	NC	NC	Not known	↓
		Percentage of adults in contact with secondary mental health services living independently, with or without support	55.10	28.50	39.21	72.75	82.76	Above National and Regional Average	↑
		Percentage of physically active and inactive adults - active adults	62.18	69.83	70.20	NC	NA	Above National and Regional Average	↑
		Number of days taken to process Housing Benefit new claims and change events (DWP measure)	5.91	5.87	5.58	1.84	2.97	Lower than National Average	↓
	A Council That Listens to Residents	Percentage of panel who agree that they can influence decisions in their local area	NC	NC	25.65	NC	NA	Above National Average	↑
		Percentage of panel satisfied with their local area as a place to live	NC	NC	89.84	NC	NA	Above National Average	→
		Percentage of panel satisfied with the way the Council runs things	NC	NC	65.54	NC	NA	Above National Average	↓
		Overall Customer Centre Satisfaction (%) - CYC	58.15	91.54	92.48	93.63	93.16	Not known	→
	A Prosperous City for All	Net Additional Homes Provided (YTD)	507	1,121	977	260	NA	Not known	↑
		Percentage of panel who give unpaid help to any group, club or organisation	NC	NC	64.30	NC	NA	Above National Average	↑

NA - Data not available
NC - Not due to be collected during that period

Residential and nursing admissions

- 13 Avoiding permanent placements in residential and nursing care homes is a good measure of ensuring of how effective packages of care have been in ensuring that people regain control of their lives quickly. Research suggests that, where

possible, people prefer to stay in their own home rather than move into residential care. It is important that even with lower numbers going into Residential Care, we can balance the system through ensuring that equal or greater numbers are moved on. This means offering alternatives such as Supported Living for people who would otherwise stay in Residential Care for long periods.

- 14 The number of people in long-term residential and nursing care rose to 603 at the end of 2018-19 Q1, compared with 575 at the end of 2017-18 Q4. There were four admissions of younger people and 77 admissions of older people to residential and nursing care in the first quarter of 2018-19. These are higher than 2017-18 Q4 for older people (41), but the same number of admissions of younger people. This is partly due to the extension of Sheltered Housing with Extra Care facilities

Adults with learning disabilities and mental health issues

- 15 There is a strong link between employment and enhanced quality of life. Having a job reduces the risk of being lonely and isolated and has real benefits for a person's health and wellbeing. Being able to live at home, either independently or with friends / family, has also been shown to improve the safety and quality of life for individuals with learning disabilities and mental health issues.
- 16 Our performance level during 2018-19 Q1 (on average, 8.9% of adults with a learning disability were in paid employment), is higher than reported during 2017-18 Q4 where 8.3% of adults with a learning disability were in paid employment. Additionally, during 2018-19 Q1 on average 79.3% of adults with a learning disability were living in their own home or with family, which is an improvement from the 2017-18 Q4 position (the corresponding figure was 77.2%). For those with mental health issues, on average 18.4% of this group were in paid employment during April 2018, which is a big improvement on the corresponding 2017-18 Q4 figure of 14.2%. These figures are now taken from NHS Digital as they include people not known to CYC's main provider of MH services, TEWV. It was also reported that 83% of adults with mental health issues were in settled accommodation on average during April 2018 (compared with an average of 73% during 2017-18 Q4). The mental health data for April 2018 is the most recent that is available.

Delayed Transfers of Care

- 17 This measures the impact of hospital services and community-based care in facilitating timely and appropriate transfer from all hospitals for all adults. This indicates the ability of the whole system to ensure appropriate transfer from hospital for the entire adult population. It is an important marker of the effective joint working of local partners, and is a measure of the effectiveness of the interface between health and social care services. A delayed transfer of care (DToC) occurs when a patient has been clinically assessed as ready for

discharge from hospital, but a care package (from either the NHS or Adult Social Care) is not available.

- 18 Approximately 13 beds were occupied per day in York hospitals because of delayed transfers of care, attributable to ASC, during the first quarter of 2018-19. This is an increase on the previous quarter (where, on average, 10 beds per day were occupied) and is largely due to a increase in waiting for places in nursing homes. We are working with health colleagues to enable assessments to happen outside hospitals to reduce delays for patients, and have recently introduced seven-day social working, a multi-disciplinary Integrated Complex Discharge Hub and Step Up Step Down beds.

Independence of ASC service users

- 19 It is important that social care service users have as much contact with others as possible as this maintains their health and independence. It is also a good proxy measure for the work done by Local Area Teams in terms of bringing people from all sectors of the various York communities together.
- 20 During the first quarter of 2018-19, on average 1,822 people were supported to live independently by CYC Adult Social Care packages of care. This is a 1% increase on the corresponding number in the final quarter of 2017-18 (1,795). There was also an increase in the number of those supported to live independently by the use of preventative measures: this averaged 984 during the first quarter of 2018-19, compared with 979 in the final quarter of 2017-18.

“Front door” measures and how adults are supported financially

- 21 CYC has a responsibility to conduct appropriate risk assessments for those contacting it who state that they may have care needs. The purpose of the “Future Focus” transformation programme is to ensure that people are best informed about the choices available to them, and to provide timely, cost-effective, services for those requiring support.
- 22 In the first quarter of 2018-19 a total of 646 supported self-assessments were completed, under the national eligibility framework, for CYC-funded adult social care services. This is an increase from the number assessed in the previous quarter (619). Of these 646 people, 501 were eligible to receive a service from CYC, an increase from the 469 that were given a service in the final quarter of 2017-18. Almost all (99.92%) of those using social care received self-directed support during the first quarter of 2018-19 – a percentage unchanged from the final quarter of 2017-18. The percentage receiving direct payments increased to 22.4% in the first quarter of 2018-19, compared with 20.8% in the final quarter of 2017-18.

Safety of ASC service users and residents

- 23 The safety of residents, whether known or not to Adult Social Care, is a key priority for CYC. The ability of CYC to ensure that their service users remain safe is monitored in the annual Adult Social Care User Survey, and for all residents by the number of safeguarding concerns and enquiries that are reported to the Safeguarding Adults Board.
- 24 In the first quarter of 2018-19 there were 301 completed safeguarding enquiries, which is a 9% increase on the number completed during the previous quarter (277). The percentage of completed enquiries where people reported that they felt safe as a result of the enquiry increased, from 97% during 2017-18 Q4 to 98% during 2018-19 Q1.

PUBLIC HEALTH

NHS Health Checks

- 25 The Health Check programme aims to help prevent heart disease, stroke, diabetes and kidney disease. Everyone between the ages of 40 and 74, who has not already been diagnosed with one of these conditions, will be invited (once every five years) to have a check to assess, raise awareness and support them to manage their risk of cardiovascular disease. A high take up of NHS Health Check is important to identify early signs of poor health leading to opportunities for early interventions.
- 26 Up to the end of 2017-18 Q4, 72.7% of those eligible for an NHS health check (those aged 40-74) had been offered one over a five-year period compared with 90.9% nationally. Of those eligible for an NHS health check in the last five years, 27.5% had received one at the end of Q4 compared to an England average of 44.3%.

Adult Obesity

- 27 Obesity amongst the adult population is a major issue as it puts pressure on statutory health and social care services, and leads to increased risk of disease, with obese people being more likely to develop certain cancers, over twice as likely to develop high blood pressure and five times more likely to develop type 2 diabetes. Nationally, around 60% of adults are classified as obese or overweight according to the most recent (2016) Health Survey for England, with men being more likely to be obese than women. It is estimated that obesity costs wider society £27 billion, and is responsible for over 30,000 deaths each year.
- 28 In York, it is estimated that 60.4% of people aged 18 or over are overweight or obese. This is lower than the national (61.3%) and regional (65.3%) percentages and is based on the most recent "Active Lives" survey.

Smoking

- 29 Smoking, amongst the general population, has a number of well-known detrimental effects, such as increased likelihood of certain cancers, heart disease, diabetes, weaker muscles and bones. For pregnant mothers, it can lead to detrimental effects in their child's development and their health. It is estimated that smoking-related illnesses contribute towards 79,000 premature deaths each year in England, and that the cost to the NHS is approximately £2.5bn each year, with almost 500,000 hospital admissions directly attributable to smoking.
- 30 The estimated current smoking prevalence amongst people aged 18 or over in York is 9%, which compares favourably with the rates nationally (14.9%) and in the Yorkshire and Humber region (17.0%). This is taken from the Annual Population Survey. Amongst those working in routine and manual occupations, the estimated current smoking prevalence is 24.6% in York, which is lower than both the national (25.7%) and regional (28.2%) rates.
- 31 The percentage of pregnant women who are recorded as smoking at the time of delivery was 11.9% in 2017-18 Q4, compared with 7.5% in 2017-18 Q3. These figures are for the Vale of York CCG area; it is believed that the percentage in the City was around 10.9% in Q4.

Alcohol prevalence

- 32 The effects of alcohol misuse are that it leads to poor physical and mental health, increased pressure on statutory health and social care services, lost productivity through unemployment and sickness, and can lead to public disorder and serious crime against others. It is estimated that harmful consumption of alcohol costs society £21bn each year, with 10.8 million adults, in England, drinking at levels that pose some risk to their health.
- 33 Public Health England estimate, using 2011-14 Health Survey data, that 30% of adults in York drink over 14 units of alcohol each week. This is higher than both the regional and national average levels (both 26%). Around 1.4% of the city's adult population are estimated to be dependent on alcohol. This is the same as the national average level, and slightly below the regional average level (1.5%). York has fewer people who abstain from drinking alcohol (8.1%) compared with regional (16.8%) and national (15.5%) averages.

Successful completions of Drug and Alcohol Treatment (without representation)

- 34 Individuals successfully completing drug / alcohol treatment programmes demonstrate a significant improvement in health and well-being in terms of increased longevity, reduced alcohol related illnesses and hospital admissions, reduced blood-borne virus transmission, improved parenting skills and improved physical and psychological health.

- 35 In the latest 18 month monitoring period to June 2018, 5.52% of opiate users who were in treatment successfully completed it and did not represent within six months; this is a deterioration from the rate reported at the end of the previous quarter (5.85%), and is lower than the national average rate of 6.5%. Of non-opiate users, 30.33% of them successfully completed treatment and did not represent within six months; this is higher than the rate reported at the end of the previous quarter (30.19%) but lower than the national average of 36.9%. There has been a change in provider of drug and alcohol treatment in the city since June and most of the activity will relate to the previous provider, which had significant financial challenges and were decommissioned by CYC to provide these services.
- 36 In quarter 4 of 2017-18 no clients had to wait more than three weeks to start treatment out of 166 new starters on substance misuse programmes. This is a lower percentage than national averages, where, depending on the programme, between 1.3% and 2.3% of new starters have to wait more than three weeks before they start their treatment.

Sexual health

- 37 Being sexually healthy enables people to avoid sexually transmitted infections, illnesses and that they are taking responsibility for ensuring that they protect themselves and others, emotionally and physically. It also ensures that unwanted pregnancies are less likely to occur.
- 38 In 2017, 26,599 York people aged 15-64 had a test for a sexually transmitted infection, which is equivalent to a rate of 19,172 per 100,000 population. This is higher than the national (16,730 per 100,000) and regional (13,204 per 100,000) rates. There were 8,945 people aged between 15 and 24 that were screened for chlamydia – 25% of that age group. This is higher than occurs nationally (19%) and regionally (20%). The detection rate of 1,985 cases per 100,000 is higher than the England average (1,882 per 100,000). In 2016, 12 people in York were diagnosed with HIV – a rate of 6.8 per 100,000 aged 15 or over. The England rate was 10.3, and the regional rate 6.0.

Mental health

- 39 It is crucial to the overall well-being of a population that mental health is taken as seriously as (more visible) physical health. Common mental health problems include dementia, depression, panic attacks, anxiety and stress. In more serious cases, this can lead to thoughts of suicide and self-harm, particularly amongst older men and younger women.
- 40 In 2018, there had been 1,645 people aged 65 or over in York diagnosed with dementia. It is estimated that this number is 62% of all those in the city with dementia. This dementia diagnosis rate is lower than both the national (68%) and regional (71%) averages. It has increased from the rate reported in 2017 (60%).

41 In 2016-17, there were 291 admissions to hospital by people aged between 10 and 24 as a result of self-harm in York. This equates to a rate of 631 admissions per 100,000 population. This was well above the national (405 per 100,000) and regional (401 per 100,000) rates. However, this rate is lower than the rate in 2015-16 (675 per 100,000).

Corporate Priorities

42 The information included in this report is linked to the council plan priority of “A focus on frontline services to ensure all residents, particularly the least advantaged, can access reliable services and community facilities.”

Implications

43 The financial implications are covered within the main body of the report. There are no other direct implications arising from this report.

Recommendations

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

Reason: To update the committee on the latest financial and performance position for 2018/19.

Contact Details

Authors:

Richard Hartle
Finance Manager: Adults,
Children & Education
Phone: 01904 554225
richard.hartle@york.gov.uk

Patrick Looker
Finance Manager: Place,
Housing & Health
Phone: 01904 551633
patrick.looker@york.gov.uk

Terry Rudden
Strategic Support Manager
(Adults and Public Health)
Phone: 01904 551655
terry.rudden@york.gov.uk

Chief Officers Responsible for the report:

Michael Melvin
Assistant Director of Adult Social Care

Sharon Stoltz
Director of Public Health

Report **Date** 30 August 2018

Approved

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Specialist Implications Officer(s) None

Wards Affected: *List wards or tick box to indicate all* **All** ✓

For further information please contact the author of the report

Background Papers

2018/19 Finance and Performance Monitor 1 Report, Executive 30 August 2018