Delayed Transfers of Care

(see also pages 2 and 3)

Daily average delay beds per 100,000 population (Social Care delays and joint NHS and social care delays)

Target: 7.95 Q4 performance: 9.49 RED (February data due to release schedule)

What happened:

-We did not meet the target, and our performance has remained steady recently.

-This 12 month period is a significant improvement of the previous one- the average number of beds per day has dropped from 11.82 to 9.38.

What were the challenges:

-We have had a number of complex cases requiring Nursing Home care who can't be placed in Enhanced assessment beds (EAB) due to care needs, and some covered by section 117 of the mental health act. These people require lengthier assessments.

-Some hospital sites have experienced additional demand.

What we are doing:

- -Early Intervention test sites are now active, and working to improve the patient journey
- -We follow a "home first" principle to avoid unnecessary care home admissions
- -We are using an intensive wrap-around homecare service for people who would otherwise require a care home bed
- -The Clinical Commissioning Group is working with us to improve the movement of patients through EAB
- -From March, we have put in place a 3-times-weekly conference call, including Commissioning and an Assistant Director, to solve the blockages keeping the 5 most delayed people in hospital.

Clients reviewed in the last 12 months

(see also page 4)

The proportion of clients receiving a long-term service who have been reviewed, reassessed or assessed in the last 12 months

Target: 85.0% Q4 performance: 77.6% RED

What happened:

-We have not made the target, but

-We have made a concerted effort and improved performance from 69.8% to 77.6% in 8 weeks.

-We achieved this through overtime, and by managers encouraging staff to complete reviews already allocated to them.

-We estimate that our March performance would have been around 65% without this.

What were the challenges:

-Council-wide and directorate initiatives had a real impact on the capcity of our teams to conduct reviews.

What we are doing:

We are developing a sustainable model to ensure that we complete reviews, taking the following actions:

- -Reconsidering how reviews are defined in Birmingham, and identifying other opportunities for reviews
- -Reconsidering whether people other than social work staff should carry out reviews, including care providers
- -Looking at how we record reviews to meet statutory reporting requirements
- -Being smarter about allocating resources to reviews across the whole year
- -Developing a clear escalation process to senior management.

Direct Payments (see also pages 5 and 6)

The proportion of eligible clients in receipt of a Direct Payment

Target: 30.0% Q4 performance: 30.2% Green

What happened:

We have achieved our target.

What went well:

We have followed a programme that included:

-co-production initiatives, and partnership working with support agencies and Commissioning

-encouragement and support from managers, and the hard work of social work staff

-training and development support to all social work teams

What we are doing:

We intend to continue providing training and development support, but with a a focus on specific issues affecting individual teams.

Shared Lives (see also page 7)

The number of people who have shared lives

Target: 140 Q3 performance: 76 RED

What happened:

We have made a small increase in the number of people who are living in a shared lives arrangement.

What we are doing:

-The Early Help and Prevention project board continues to oversee the improvement plan for Shared Lives.

-Our proposal to use the tendering process so that other providers can carry out matching clients and carers is on track

-The project board has signed off our proposal to use an incentive scheme to encourage carer recruitment. We also created a recruitment video for social media that continues to gain views.

-We are developing a "day opportunities" offer as part of shared lives for support in the daytime only.

People with Learning Disabilities in employment (see also pages 8 and 9)

The percentage of service users aged 18-64 with learning disabilities in employment

Target: 2.00% Q4 performance: 1.40% RED

What happened:

Our performance has improved for the third month running, although we recognise that it is less than the increase required to meet the target.

What we are doing:

- -We have a specific action plan, and the Readiness and Delivery Project continues to meet regularly to address the problems around this measure.
- -We have requested permission to recruit a lead person to support improvements
- -The PURE Project (Placing vulnerable Urban Residents into Employment and training) have shared details of employers who have made a commitment to support vulnerable adults into employment. We will embed this into the Three Conversations social work model.
- -Day Centre staff are identifying people who attend the centres who are interested in being employed
- -We are encouraging social work staff to ensure that recording is correct, and we are in the process of examining more streamlined processes.

Theme: Use of Resources

Daily Average Delay beds per day per 100,000 18+ population – combined figure (Social Care only and Joint NHS and Social Care)



Change:

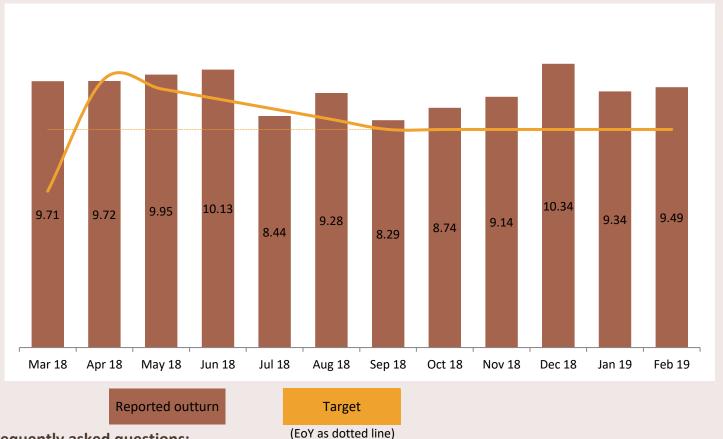
Up Red) 1.7% Last Month This Month 9.34 9.49

Target 7.95

(EoY 7.95)

Source:

UNIFY data as issued by NHS Digital. Data collated by health, available a month in arrears



Commentary:

We are not meeting the target on this measure and we recognise that our performance has remained steady recently. However, our performance across these 12 months shows a significant improvement over the previous 12, with an average of 9.38 beds per day, down from 11.82.

Recently, we have had a number of complex cases involving people who need nursing home care, and who can't be placed in an enhanced assessment bed (EAB) due to their care needs, and some people whose care needs are covered by section 117 of the Mental Health Act. These assessments take longer to carry out, and result in additional delays.

We are currently addressing delays with a range of initiatives. Our Early Intervention programme test sites are all now active, and are working to improve the patient journey. We are continuing to follow a "home first" principle for care, to avoid placing people unnecessarily in care homes, and we are now using a wrap-around, intensive home-care service for people who would otherwise be waiting for a care-home bed. The Clinical Commissioning Group is working with us to improve the movement of patients through the EAB service.

From March, we have put in place a 3-times-weekly call that includes Adult Social Care Commissioning, chaired by an Assistant Director. This aims to solve the blockages keeping the 5 most delayed people in hospital. We are also encouraging managers to attempt new solutions to the problem of delays, with the understanding that any failures

Measure Owner: Pauline Mugridge

Responsible Officer:
Natalie McFall

Frequently asked questions:

Please advised that there has been a change to the target for this measure which was imposed by the Better Care Fund. This target remains externally set and has changed because the National Better Care Fund Team has now revised the provisional DToC figures following the recent period allowed for baseline challenges. There were 3 accepted challenges nationally of which one was in Birmingham, following counting adjustments by the former Heart of England Foundation Trust. This challenge has been factored in to the revised DToC expectations. This means that the yearend target is now slightly higher, with profiled monthly targets revised in line with this change. The change also affects targets for months which have been previously reported and this has been reflected in the Adult Social Care and Health scorecard.

< Previous: Other drug users employment

Return to Scorecard

Next: DTOC Total quartiles >

Theme: Use of Resources

Daily Average Delay beds per day per 100,000 18+ population – combined figure (Social Care only and Joint NHS and Social Care)

Performance against national quartiles

Worst, 17.7 10.34 10.13 9.95 9.72 9.71 9.34 9.49 9.28 9.14 8.74 8.29 Q4 3rd, 4.9 Q3 2nd, 2.9 Q2 1st, 1.4 Q1 Best, 0 Apr 18 Jun 18 May 18 Aug 18 Sep 18 Oct 18 Nov 18 **Dec 18** Jul 18 Feb

Benchmarking data is taken from 2017/18 Ascof
This benchmarking is against historical results- current
performance by other local authorities may differ from this.

		Difference		Beds/day
Quartile	Score	Figure	%	Difference
Worst	17.70	8.21	86%	69
Birmingham	9.49			
3rd	4.90	-4.59	-48%	-38
2nd	2.90	-6.59	-69%	-55
1st	1.40	-8.09	-85%	-68
Best	0.00	-9.49	-100%	-80

Current Quartile	4th
Distance to next quartile	38 Beds/day
Distance to top quartile	68 Beds/day

Please advised that there has been a change to the target for this measure which was imposed by the Better Care Fund. This target remains externally set and has changed because the National Better Care Fund Team has now revised the provisional DToC figures following the recent period allowed for baseline challenges. There were 3 accepted challenges nationally of which one was in Birmingham, following counting adjustments by the former Heart of England Foundation Trust. This challenge has been factored in to the revised DToC expectations. This means that the year-end target is now slightly higher, with profiled monthly targets revised in line with this change. The change also affects targets for months which have been previously reported and this has been reflected in the Adult Social Care and Health scorecard.

< Previous: DTOC Total

Return to Scorecard

Next: Good provider all >

Theme: Use of Resources

Proportion of clients reviewed, reassessed or assessed within 12 months



Change:

Up (Green) 6.1 p Last Month 71.5% This Month

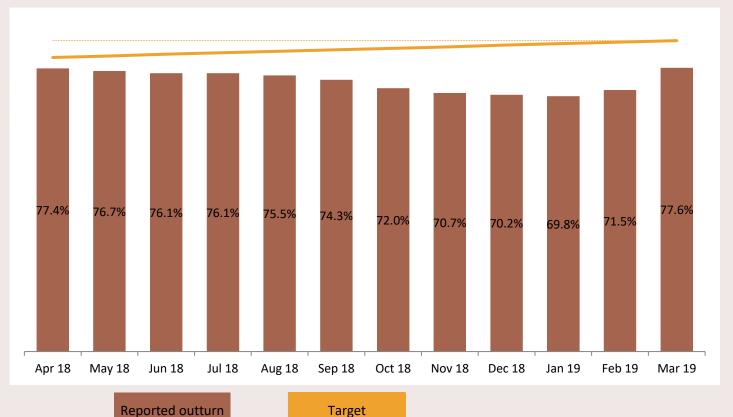
77.6%

Target 85%

(EoY 85%)

Source:

Carefirst snapshot. The proportion of people receiving a reviewable service who have had a recorded review, assessment or reassessment in the last 12 months



Commentary:

Whilst we have not met the target for this measure, we made a concerted effort and improved performance from 69.8% to 77.6% in 8 weeks. Council-wide and directorate initiatives had a real impact on the capacity of our teams to conduct reviews.

We achieved the improvement in performance through overtime, and by managers encouraging staff to complete reviews already allocated to them. Without this, we estimate that our performance would have continued to drop and our March position would have been around 65%.

For the future, we are developing a sustainable model to ensure that we complete reviews and meet our performance targets. We are taking the following actions in developing this future plan:

-Reconsider how reviews are defined in Birmingham and identify other opportunities for reviews, especially when a worker is already in contact with a citizen.

-Reconsider whether people other than social work staff should carry out reviews, such as service providers

-Look at how we record reviews in order to meet statutory reporting requirements

-Be smarter about how we allocate resources to reviews across the whole year

-Develop a clear escalation process to senior management in the event that competing priorities are likely to impact on performance.

Measure Owner: Linda Harper Responsible Officer:

Grace Natoli

Frequently asked questions:

(EoY as dotted line)

< Previous: Good provider all

Return to Scorecard

Next: Long term admissions >

Theme: Personalised Support Change: Last Month This Month Target GREEN Uptake of Direct Payments 30% 29.7% 30.2% (EoY 30%) Recalculated: 29.8% Source: Carefirst service agreements. The proportion of clients receiving an eligible care package who have at least part of it delivered via direct payment.

30.2% 26.8% 26.6% Feb 19 Jul 18 Sep 18 Dec 18 Apr 18 May 18 Jun 18 Aug 18 Oct 18 Nov 18 Jan 19 Mar 19 Reported outturn Recalculated **Target** (EoY as dotted line)

Commentary:

We have achieved our target of increasing the proportion of people who receive social care services in the community in the form of a direct payment to 30%. In order to do this, we have followed a programme that has included co-production initiatives, partnership working with support agencies and Adult Social Care Commissioning, encouragement and support from managers, and the hard work of social work staff. We have also provided training and development support to all social work teams in order to overcome some of the difficulties people were encountering when setting up direct payment services.

We intend to continue providing training and development support into the new year, but with a focus on specific issues affecting individual teams.

Measure Owner: Pauline Mugridge

Responsible Officer: Julia Parfitt

Frequently asked questions:

< Previous: Safeguarding MSP

Return to Scorecard

Next: Direct payments quartiles >

Theme: Personalised Support

Uptake of Direct Payments

Performance against national quartiles

Best, 58.3 Q1 30.2 1st, 33.4 29.7 28.1 28.5 29.2 25.3 25.5^{Q2} 26.2 26.6 27.7 26.8 2nd, 2824.5 3rd, 21.7 Q4 Worst, 0 May 18 Jun 18 Jul 18 Sep 18 Oct 18 Nov 18 Dec 18

Benchmarking data is taken from 2017/18 Ascof
This benchmarking is against historical results- current
performance by other local authorities may differ from this.

		Difference		Packages
Quartile	Score	Figure	%	Difference
Worst	0.0%	-30.2	-100%	-2492
3rd	21.7%	-8.5	-28%	-702
2nd	28.0%	-2.2	-7%	-182
Birmingham	30.2%			
1st	33.4%	3.2	11%	264
Best	58.3%	28.1	93%	2319

Current Quartile	2nd
Distance to next quartile	264 Packages
Distance to top quartile	264 Packages

< Previous: Direct payments uptake

Return to Scorecard

Next: Care in own home >

Theme: Personalised Support Change: Last Month This Month Target RED The number of people who have Shared Lives **75** 76 140 Up 1.3% (EoY 140) Recalculated: 75 Source: Carefirst service agreements **Commentary:** We have made a small increase this month in the number of people who



We have made a small increase this month in the number of people who are living in a Shared Lives arrangement, which reflects the improvements we are making to our processes. We are currently in the process of matching another two people with Shared Lives carers.

The Early Help and Prevention Project Board continues to oversee the improvement plan for Shared lives. Our proposal to use the tendering process so that other providers can carry out matching is on track. An integral part of the development of our service is the recruitment of new carers, and at the time of writing, another 3 new carers are due to go to our recruitment panel for approval. To encourage recruitment, we proposed an incentive scheme for Shared Lives carers, and the project board has now formally signed this off. We also created a recruitment video in December for social media, and this continues to gain views. We have also made progress in developing a "day opportunities" offer as part of Shared Lives, where we will match people with carers for support in the daytime only, rather than to live in their home, and we recognise this as key to the growth of Shared Lives as a service.

Measure Owner: Linda Harper Responsible Officer: Sonia Mais-Rose

Trequently asked questions.

< Previous: Care in own home

Return to Scorecard

Next: Home visits after births >

Theme: Community Assets

The percentage of service users aged 18-64 with learning disabilities in employment



Change:

Up Green) 0.1 pp Last Month 1.3%

This Month 1.4%

Target 2%

(EoY 2%)

Source:

Carefirst classifications



Commentary:

Our performance against this measure has improved for the third month running, although we recognise that it is less than the increase required to meet the target. We have a specific action plan aimed at supporting people with Learning Disabilities into employment, and the Readiness and Delivery Project continues to meet regularly to address the problems around this measure. We have requested permission to recruit a lead person to support improvements to our performance, however we are waiting for approval.

As part of our link with the Pure Project (Placing vulnerable Urban Residents into Employment and training), they have shared the details of employers who have made a commitment to support vulnerable adults into employment. We will embed the use of this information as part of the three conversations model of social work to connect people with these opportunities. Day centre staff are supporting this by identifying people who attend the centres who would like to be employed. We expect that this will result in a gradual improvement over time.

We are also encouraging social work staff to ensure that our recording of this is correct and up to date to address any potential under-recording, and we are in the process of examining more streamlined recording processes.

Measure Owner: Linda Harper Responsible Officer: Sonia Mais-Rose

< Previous: Obesity in year 6

Return to Scorecard

Next: LD Employment quartiles >

Theme: Community Assets

The percentage of service users aged 18-64 with learning disabilities in employment

Performance against national quartiles

Best, 20.2 Q1 1st, 9.7 Q2 2nd, 5.4 Q3 3rd, 3.2 1.3 1.4 1.15 O4 1.24 1.1 1.05 1.01 1.05 1.05 Worst, 0 May 18 Sep 18 Mar 19 Jun 18 Jul 18 Aug 18 Oct 18 Nov 18 Dec 18 Feb 19

Benchmarking data is taken from 2017/18 Ascof
This benchmarking is against historical results- current
performance by other local authorities may differ from this.

		Difference		People
Quartile	Score	Figure	%	Difference
Worst	0.00%	-1.40	-100%	-29
Birmingham	1.40%			
3rd	3.20%	1.80	128%	37
2nd	5.40%	4.00	285%	82
1st	9.70%	8.30	592%	170
Best	20.20%	18.80	1340%	386

Current Quartile	4th
Distance to next quartile	37 People
Distance to top quartile	170 People

< Previous: LD Employment

Return to Scorecard

Next: MH Employment >