

# **HEALTH AND ADULT SOCIAL CARE SYSTEM PERFORMANCE**

**FEBRUARY 2021**

## 1. INTRODUCTION

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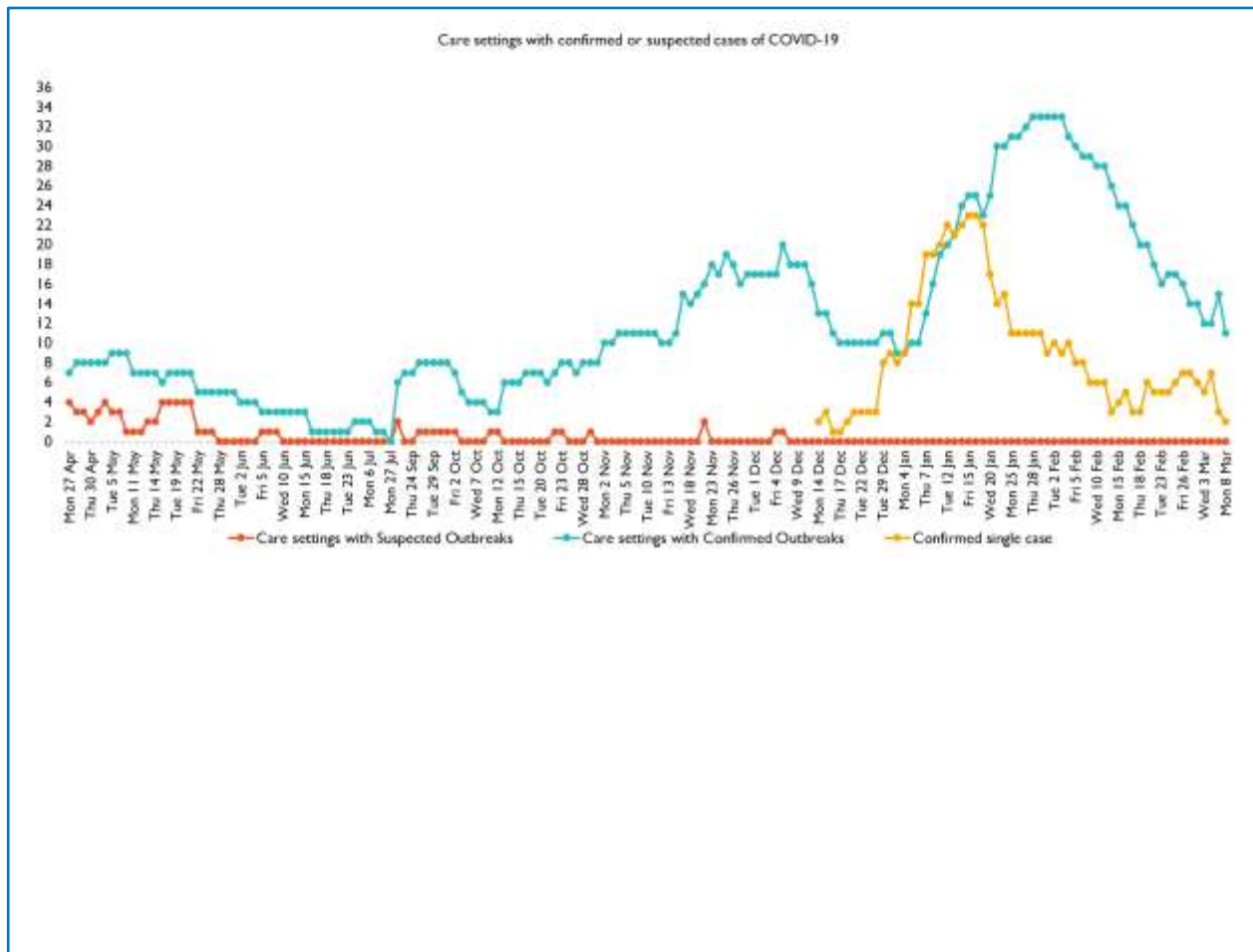
The purpose of this report is to inform members of the latest performance against a number of key indicators that provide a view of how care is being delivered to the people of Plymouth in light of the COVID-19 emergency. The pandemic has had an impact on how performance is reported and this has limited the ability to provide benchmarking information like we have done so previously.

The indicators in this report are;

- Number of COVID-19 outbreaks within Care Settings
- Admissions to Residential and Nursing Care Homes
- Community Based Care
- Reablement
- Adult Safeguarding
- Referral to Treatment

Performance Indicators

	Fri 26 Feb	Mon 1 Mar	Tue 2 Mar	Wed 3 Mar	Thu 4 Mar	Fri 5 Mar	Mon 8 Mar	Trend
Total number of care settings	0	0	0	0	0	0	0	▲ ▼
Care settings with suspected outbreaks	16	14	14	12	12	15	15	▲ ▼
Care settings with confirmed outbreaks	7	7	6	5	7	3	3	▲ ▼
Care settings with one confirmed case	19	19	20	22	21	22	23	▲



Performance Insights

In total there are 97 care homes in Plymouth; those with confirmed or suspected outbreaks of COVID-19 will be closed to new residents and visitors. Local protocols are in place upon notification of an outbreak. A care home is declared to be in outbreak when two or more cases are confirmed, whilst a home will also be declared out of an outbreak on the 29th day after the date of the latest positive test.

The number of outbreaks within care homes has reduced by three compared to last week; the number of outbreaks was 9 on 8 March. There are no homes with a suspected outbreak, although there are two further homes with at least one confirmed case. This means that the percentage of care homes with a current COVID-19 positive case is 9.3%, down on last week.

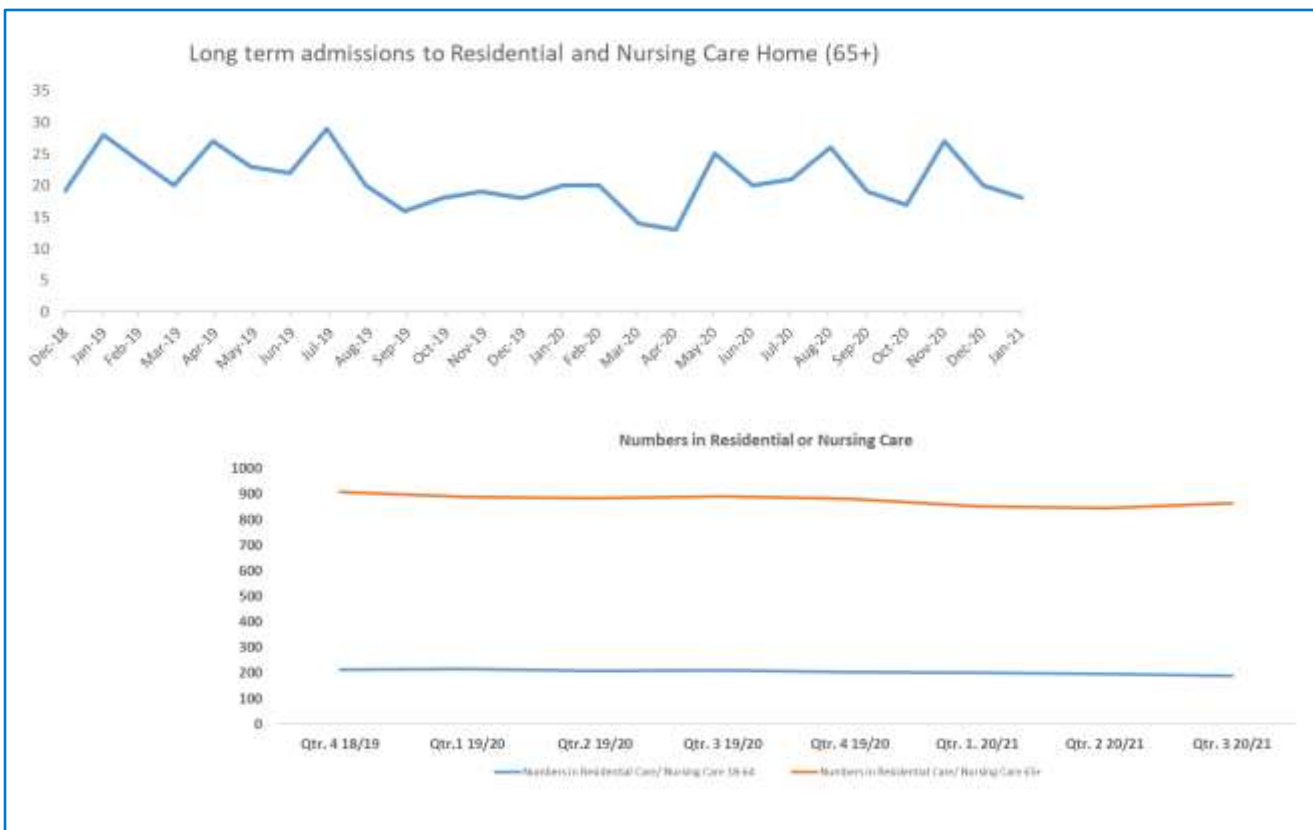
In addition to these outbreaks there are a further two confirmed outbreaks; one within Domiciliary Care/ECH care settings and one within a Supported Living setting.

The total number of confirmed outbreaks across care settings is 11, which is three less than last week.

Our care settings support some of our most vulnerable residents and unfortunately during the pandemic a number of these had outbreaks. With partners, the Council provided ‘wrap around’ support in a coordinated way that ensured residents, care home management and staff are assisted during an outbreak. We have provided access to information on best practice, and supported through weekly bulletins and monthly webinars to ensure that our providers have access to the most up to date guidance.

Performance Indicators

	August	September	October	November	December	January	February	Trend
Long term admissions to Residential or Nursing Care (18-64)	1	1	1	3	1	2	2	▲ ▼
Long term admissions to Residential or Nursing Care (65+)	21	26	19	17	27	20	18	▼
	Qtr.1 19/20	Qtr. 2 19/20	Qtr.3 19/20	Qtr. 4 19/20	Qtr. 1 20/21	Qtr. 2 20/21	Qtr. 3 20/21	
Numbers in Residential Care/ Nursing Care 18-64	216	209	212	204	201	197	190	▼
Numbers in Residential Care/ Nursing Care 65+	889	885	891	882	853	848	864	▲



Performance Insights

In 2019/20 the number of long term admissions to residential/ nursing care dropped, falling from 305 in 2018/19 to 239 (-66),

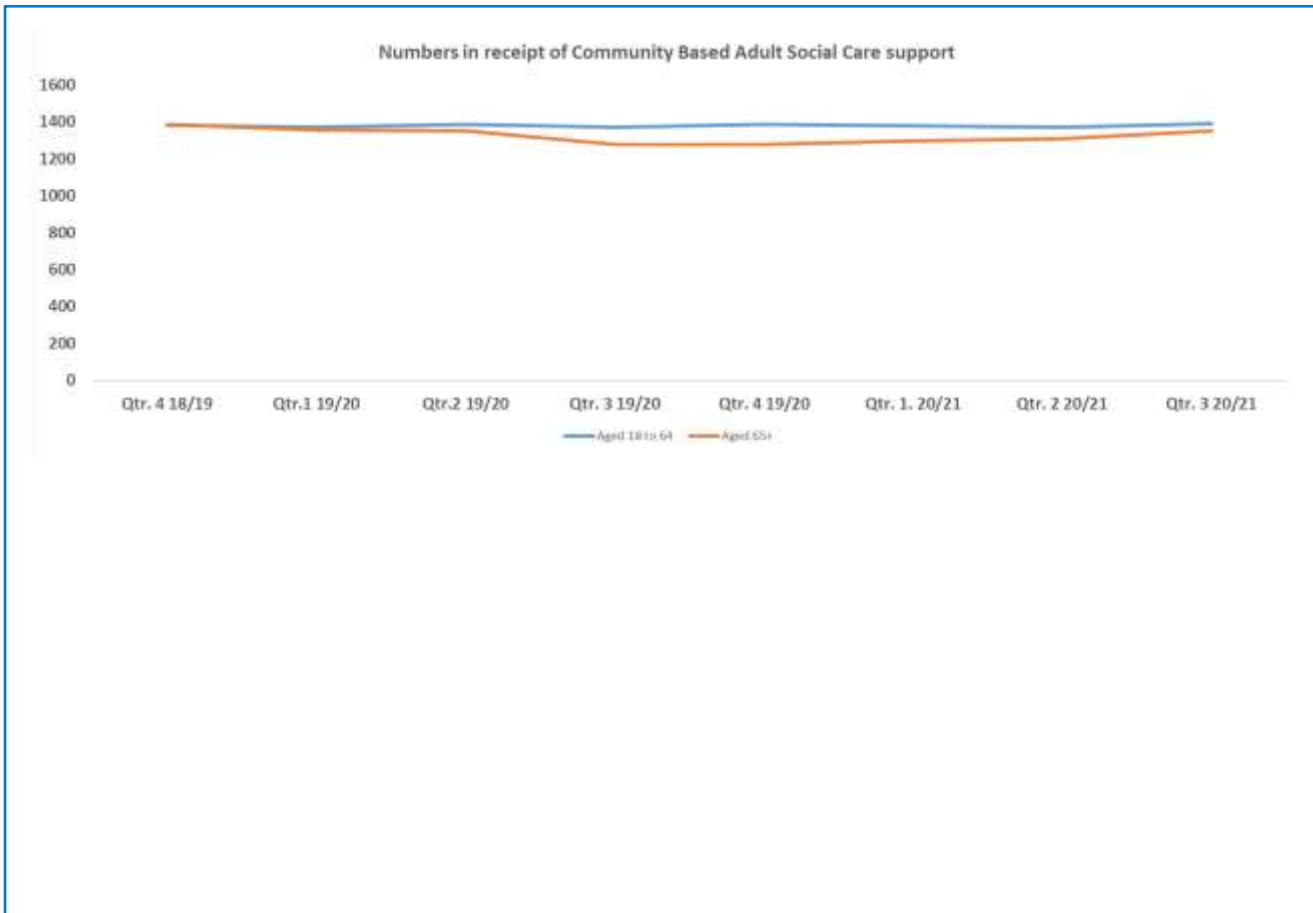
The downward trend in admissions for those over 65 has slowed in 2020/21. Between April 2020 and the end of February 2021 there have been 220 admissions where a completed assessment has been recorded, this is a decrease of 12 over the same period in 2019/20. Increases over the past few months means we are on a trajectory to have seen a similar number of admissions to 2019/20 by the end of the year 2020/21.

This year we have recorded an increase in the number of long term admissions of those aged 18 to 64, between April 2020 and February 2021 there have been 21 admissions, compared to 15 over the same period in 2019/20.

Overall, numbers of people in care home settings remains static, and in line with national COVID-19 Discharge guidance a number of people will be in receipt of care within homes but currently funded by the NHS. These will not be included in these figures but are being monitored.

Performance Indicators

	Qtr.1 19/20	Qtr.2 19/20	Qtr. 3 19/20	Qtr. 4 19/20	Qtr. 1. 20/21	Qtr. 2 20/21	Qtr. 3 20/21	Trend
Numbers in receipt of Community Based Care (18-64)	1372	1385	1370	1385	1379	1372	1390	▲
Numbers in receipt of Community Based Care (65+)	1355	1349	1275	1276	1298	1308	1349	▲



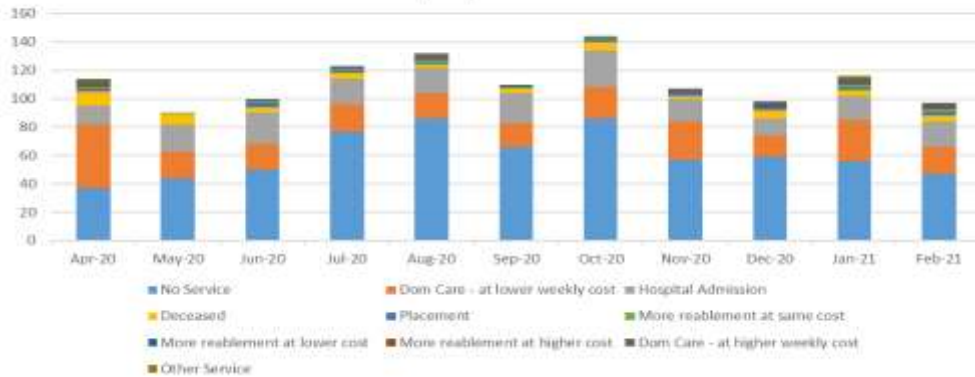
Performance Insights

As complexity and need increases, ensuring that demand on services is well managed is a key priority for Adult Social Care.

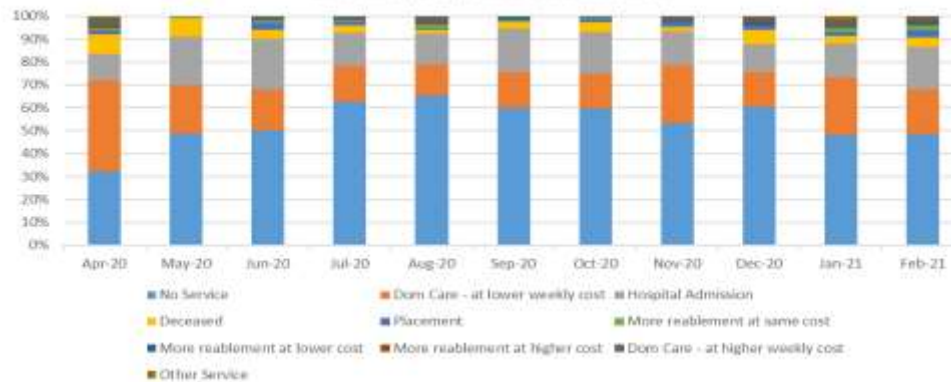
An approach which includes a strengthened gateway to care with direct links to the community and voluntary sector, Wellbeing Hubs and access to Healthcare has delivered a more integrated model of care. Improved access to advice and information along with timely access to a reablement approach will enable more people to live fully independent lives in their communities without the reliance on long term care. This has enabled us to maintain client levels.

During quarter three of 2020/21 there were 2,739 individuals who accessed community based care, this is higher than Q3 of 2019/20 when we saw reductions. The numbers receiving community based care are also up on last quarter, an increase of 59 (+2.2%) but the longer term steady trend is at present being maintained.

Outcome post period of reablement



Outcome post period of reablement



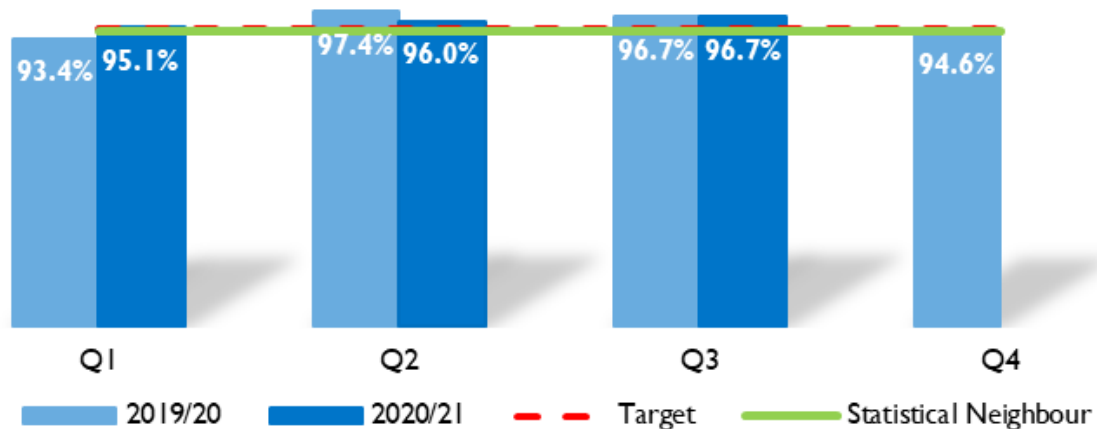
### Performance Insights

The Independence at Home service monitors its activity and outcomes on a weekly basis and presented here is a monthly breakdown of outcomes to reablement. The increased availability of and better access to reablement packages over recent months has been key to keeping the number of people accessing long term community based support on a static trend in the face of increased complexity of need.

Between April the end of February 1,231 outcomes to reablement have been recorded. On average 54% of these cases the individual in receipt of the reablement has left the service fully independent requiring no further service.

Of those individuals who go on to require long term care, the majority go on to a package that is at a lower cost to any previous package received. On average each month 20% of all outcomes will be a package of Domiciliary Care that is at a lower weekly cost.

Percentage of closed safeguarding enquiries where the desired outcomes have been fully or partially achieved



### Performance Insights

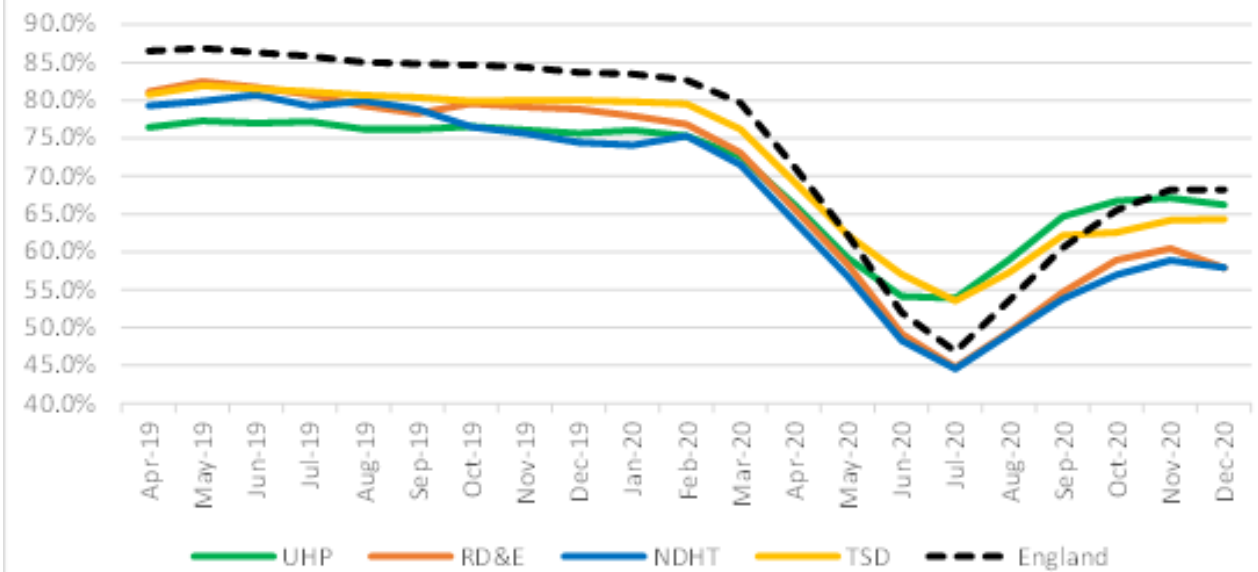
Making Safeguarding Personal (MSP) is a person-centred outcome focus to safeguarding work that aims to support people to improve or resolve their circumstances. This is an indication of how well we are meeting the person’s desired outcome, but not necessarily a measure of the degree to which they have been safeguarded.

Between 1 October 2020 and 31 December 2020, 234 individuals were the subject of a completed safeguarding enquiry. 153 of which expressed a desired outcome at the start of the enquiry (65% compared to 73% in Q2), the percentage of people not asked about their preferred outcome increased to 28% (18% in Q2). We will look into this further in our regular meetings with Adult Social Care managers.

The percentage that has been either fully or partially achieved is 97.0%, this exceeds the 95% target and continues to be above the average of our CIPFA groups of similar local authorities. The percentage fully achieved increased to 71% (65% in Q2).

Safeguarding activity, performance and outcomes are monitored on a quarterly basis by the Safeguarding Assurance meetings and the Adult Safeguarding Board.

RTT 18 week waits (providers)



Performance Insights

December data shows a worsening position for RTT 18-week performance, falling from 61.5% to 60.3% at an STP level, compared to the target of 92% and national performance of 68.2%.

Waiting lists have risen in December for all providers except NDHT. The table below shows the RTT waiting list movement between November and December by provider:

	RD&E	NDHT	UHP	TSD
November	43746	13492	30292	26638
December	48005	13354	31294	28030
Variance	4259	-138	1002	1392

The number of long waiting patients also continues to increase, with numbers waiting over 52 weeks rising quickly at all providers in December as can be seen in the table below. Breaches are expected to continue to rise in January.

During this period all trusts have been impacted by increased COVID activity and loss of capacity due to outbreaks on wards.

	RD&E	NDHT	UHP	TSD
November	3401	1290	1445	1277
December	4237	1358	1596	1435
Variance	836	68	151	158

Work closely as a network to manage resources. There will be a centrally collated STP waiting list to support provider trusts, all of whom are clinically prioritising their waiting lists to ensure that the patients with the greatest clinically are treated first.