

PART 1 - PUBLIC

Decision Maker: **Adult and Community Policy, Development and Scrutiny Committee**

Date: 24th February 2010

Decision Type: Non-Urgent Non-Executive Non-Key

Title: **TIMELINESS OF ASSESSMENTS AND REVIEWS**

Contact Officer: David Roberts, Assisitant Director Care Services
Tel: 020 8313 4754 E-mail: david.roberts@bromley.gov.uk

Chief Officer: Terry Rich - Director - Adult and Community Services

Ward: All

1. Reason for report

This report gives an update on performance on assessments and reviews during 2009 / 2010.

2. **RECOMMENDATION(S)**

The PDS Committee is asked to:-

Note the current performance in respect of assessments and reviews and the action being taken to improve performance in these areas.

Corporate Policy

1. Policy Status: Existing policy.
 2. BBB Priority: Supporting Independence.
-

Financial

1. Cost of proposal: N/A contained within budget
 2. Ongoing costs: N/A.
 3. Budget head/performance centre: Assessment and Care Management and Learning Disabilities Care Management
 4. Total current budget for this head: £5.7m, (of which £902,330 is the budget for Learning Disabilities Care Management)
 5. Source of funding: Revenue Support Grant and Area Based Grant
-

Staff

1. Number of staff (current and additional): 116 fte existing
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: Statutory requirement.
 2. Call-in: Call-in is not applicable.
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Approx 2000 new assessments with approx 8500 people receiveing services.
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? No.
2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1 This report covers the action underway to improve the quality of our adult social care service delivery in two critical areas; i) the timeliness of assessments and ii) the annual review of care packages provided.

3.2 People with social care needs requesting assistance from the Council enter the system via a referral through BSSD or via the hospital care management team if there is a need identified during a hospital admission. These referrals lead to an assessment of need with referees either being signposted to other providers for those that do not meet our eligibility criteria, or their needs being assessed and a care plan devised for those that do. Local authorities are monitored against the number of assessments that are completed within 28 days and the number of annual reviews completed. Once an assessment is completed Local Authorities are also monitored on the proportion of care services commenced within 28 days, following assessment.

Bromley's performance in completing assessments and undertaking annual reviews is set out below

	Assessments completed with 28 days	Reviews (% completed during year)
2006 / 2007	73.84%	70%
2007 / 2008	77.12%	74%
2008 / 2009	72.6%	66%
2009 /2010	Forecast: 80%	Forecast: 85%

3.3 As can be seen performance for assessments and reviews declined over the period 07/08 to 08/09.

This performance was a significant factor contributing to CQC's overall annual assessment of social care services in Bromley as "adequate" in 2008/09. ([Bromley Annual Performance Assessment Report 08/09 \(PAR\)](#)). As members will recall, the department experienced increased pressures on front door services last year and this report provides an analysis and explanation of the current situation and progress made by Care Services in respect of:

- The timeliness of completing assessments of users referred to the Department for assessment
- Annual Reviews of service users in Residential and Nursing homes
- Reviews of service users in their own homes and receiving services from the Department
- Speed of delivery of service packages to the service users

This report also highlights the growth of referrals within the current financial year, and the impact that this has had on service delivery and the actions taken to mitigate the impact.

3.4 To improve performance in both assessments and reviews targeted work has been completed in improved business processes and improved management reporting. To monitor progress, a fortnightly programme of targeted monitoring meetings with the Director, Assistant Directors, performance staff and service delivery team managers has been implemented to ensure that performance and actions in respect of assessments and reviews is scrutinised regularly. This regular monitoring also ensures that any outstanding reviews and assessments are identified and scheduled for completion.

Assessments: The timeliness of completing assessments of users referred to the Council for assessment.

3.5 The Department’s target for the completion of assessments for 2009/10 is 85%. Current performance for 09/10 (as at end of January 2010) is 75% which is below target, however if the current assessment performance continues the year end performance is predicted to be 80%.

3.6 The 28 day period for assessment is a benchmark for measuring and comparing performance. However, it is the level and complexity of a person’s need which determines the specific assessment response for individuals. Those in the most urgent need are treated as a priority. Some people will wait longer than 28 days as their situation is more stable than the demand from urgent cases.

3.7 This years assessment performance has been achieved, despite a growth in referrals of just over 63%(excluding Safeguarding alerts). The current number of referrals received by month is as shown below:

Year	Quarter 1	Quarter 2	Quarter 3	Quarter 4
2008 / 2009	1931	2069	2145	3505
2009 / 2010	3800	3546	2689	N /A

3.8 Actions taken to mitigate the impact of the increased volume and provide timely assessments include:

- Additional short term staff within the older peoples teams to undertake assessments.
- Integration of occupational therapy and care management assessments in two older people’s teams since September 09 which has reduced the duplication of assessments. For older people this means they do not have to wait on two lists and have only one assessment for both care and equipment providing them with a more timely response.
- The Care Placement Team was expanded in November 09, and this has improved the quality and timeliness of the placement process (including contractual and financial matters falling within the care management area of responsibility) taking pressure away from the older peoples care management teams.
- From the 1st March 2010 a qualified staff member is being located within BSSD. This will ensure that customers who require a low level assessment, at point of contact, can be dealt with immediately and timely appointments for assessments can be arranged at venues around the Borough.

Annual Reviews of service users in Residential and Nursing homes.

3.9 It is a requirement to complete an annual review of a service user who has been resident within a care home for more than 12 months. Where a service user moves into a care home within the

current performance monitoring year, their first annual review is completed twelve months after their date of entry.

- 3.10 At the time of entering a home, six weekly and three monthly reviews are completed as part of the settling in process, by the appropriate care manager, to ensure that there are no care issues. However, the annual view is required to be completed within twelve months of the date of entry and is completed by the Care Services Review team.
- 3.11 As at 8th February 2010 there are 700 service users in Residential homes and 349 service users in Nursing Homes. In total 1,049 service users are living in residential or nursing homes.
- 3.12 As at 8th February 2010 of those 1,049 service users 892 are due a review. Of those due a review - 729 have been completed, which gives a completion rate of reviews for residential and nursing service users of 82% as at 8th February 2010.
- 3.13 As at 8th February 2010, of those service users that have been residential in a home for more than 12 months, 80 service users in Residential and 19 service users in Nursing have not yet received an annual review. These have all been scheduled for review by the end of February 2010 as part of the department's programme of undertaking reviews in a planned way taking account of priorities. Also, there are no service users within this group that are placed with in a zero or one star home. The following table provides a breakdown by service user group and service type of those who have a planned review but which is over the 12 month period.

Service Users Group	Nursing	Residential
Adult Physical Disability	1	9
Mental Health	0	28
Learning Disability	0	16
Older People	18	27
Total	19	80

- 3.14 Members will be aware of the recent publicity concerning the quality of some care home placements purchased by local authorities as reported recently by CQC - ([The Quality and Capacity Of Adult Social Care Services \(CQC\)](#)).
- 3.15 CQC currently rate Care Homes using a range of standards including environmental as well as care factors. For example two homes within the Councils Re-provision (Manorfields and Isard House) are rated as adequate due to environmental issues rather than care factors.
- 3.16 In Bromley, there is currently one person in a home now rated as Zero or Poor by CQC. This service user has received an annual review, is happy and chooses to stay in the home.
- 3.17 Currently we have 216 service users in 36 homes classed as Adequate (1 star). 18 service users who have an outstanding review as at 8th February 2010, (again these are programmed for review by the end of February 2010). The following table provides a breakdown by service user and service:

	Nursing	Residential
Adult Physical Disability	0	0
Mental Health	0	2
Learning Disability	0	0
Older People	6	10
Total	6	12

3.18 All service users in zero or one star home are now scheduled to receive six monthly reviews to ensure that they remain within a safe and supported environment.

Reviews of service users in their own homes and receiving services from the Council.

3.19 It is a requirement that a review of the service received by service users living in their own home, where that service has been in place for more than 12 months, is carried out annually.

3.20 As of the 31st January 2010, 89% of people living in their own homes have a received a review within the previous 12 months. This is an improvement over the outturn of last year's performance. Overall, there are 1,870 service users in their own homes receiving a range of services, with 1,122 service users due an annual review and 748 service users not yet due an annual review (receiving a service for less than 12 months). Of the service users who should have received an annual review, there are 73 service users who have not yet received an annual review. It is planned that these outstanding reviews will be completed by the end of February 2010. The following table provides a breakdown by client group:

Service user group	Personal care
Adult Physical Disability	17
Mental Health	0
Learning Disability	9
Older People	47
Total	73

3.21 Actions taken to improve review performance include:

- The review team now undertakes all reviews for older people and additional staffing has, this year, been allocated to respond to the increased volume.
- Programme of reviews scheduled ensuring review “peaks” can be better managed this year and going forward.
- Service users in homes that CQC rate as poor or adequate are to be reviewed at least twice yearly. (note ratings change as inspections are undertaken by CQC)

3.22 During 09/10 an audit of review activity, combined with regular monitoring and additional concerted work within the Care Services division has improved the timeliness of reviews. Any outstanding reviews, as identified above, are scheduled for completion in February 2010.

Speed of delivery of service packages to the service users.

3.23 The position as at 31st January 2010 is that 87% of service users received their service within 28 days of the assessment.

3.24 People in urgent need are assessed and receive services inside the 28 day target set to benchmark overall performance.

3.25 People who do not receive services within 28 days include those who may be waiting for a place in specific care home of choice, or require a complex piece of equipment that needs to be ordered.

3.26 The outturn for 2008 / 2009 was 87.4 %. Our performance in relation to England and the Comparator group performance is as shown below:

Year 2008/09	Average
Bromley	87.4
Comparator Group	90.8
England	90.9

3.27 In respect of the anticipated year end performance for 09/10, we are still on target to improve on last year's performance and predict that 90 % of service users will have received their service within 28 days of their assessment, which will be comparable to performance across England and the Comparator group.

Summary

3.28 During the course of this year more people have self-referred or been referred to adult social care for services and actions have been taken, within the resources available, to ensure that people receive better responses from both assessment and review services.

3.29 Performance in both assessments and reviews has improved during 9/10 and it is expected to continue to improve during the remainder of the current year. The service will continue to prioritise responses for those in the most urgent need, whilst aiming to maintain and improve overall performance.

3.30 The department has set challenging targets for next year with assessment completion within 28 days for all set at a 90% target figure and annual reviews set at 95%.

Non-Applicable Sections:	Policy, Financial, Personnel
Background Documents: (Access via Contact Officer)	Bromley Annual Performance Assessment 08/09: (Bromley Annual Performance Assessment Report 08/09 (PAR)). The Quality and Capacity of Adult Social Care Services: Quality and Capacity Of Adult Social Care Services (CQC) .