ADULT AND PUBLIC HEALTH SERVICES PORTFOLIO DECISION SCHEDULE



Monday 22 August 2011

at 10.00 a.m.

in Committee Room A, Civic Centre, Hartlepool

Councillor G Hall, Cabinet Member responsible for Adult and Public Health Services will consider the following items.

1. KEY DECISIONS

No items

2. OTHER ITEMS REQUIRING DECISION

No items.

3. ITEMS FOR INFORMATION

- 3.1 Adult and Community Services Departmental Plan 2010-2011 4th Quarter Monitoring Report *Director of Child and Adult Services*
- 3.2 Hartlepool Safeguarding Vulnerable Adults Board Quarterly Statistics and Update *Director of Child and Adult Services*

ADULT AND PUBLIC HEALTH SERVICES PORTFOLIO

Report to Portfolio Holder 22 August 2011



Report of: Director of Child and Adult Services

Subject: ADULT AND COMMUNITY SERVICES

DEPARTMENTAL PLAN 2010/2011 – 4TH

QUARTER MONITORING REPORT

SUMMARY

1. PURPOSE OF REPORT

To inform the Portfolio Holder of the progress made against the Child & Adult Services Departmental Plan 2010/11 in the fourth quarter of the year.

2. SUMMARY OF CONTENTS

The progress against the actions contained in the Child & Adult Services Departmental Plan 2010/11, the fourth quarter outturns of key performance indicators and associated risks.

3. RELEVANCE TO PORTFOLIO MEMBER

The Portfolio Member has responsibility for performance management issues in relation to Adult Services.

4. TYPE OF DECISION

Non-key

5. DECISION MAKING ROUTE

Adult and Public Health Services Portfolio – 22 August 2011.

6. DECISION REQUIRED

Achievement on actions, indicators and risks be noted

Report of: Director of Child and Adult Services

Subject: ADULT AND COMMUNITY SERVICES

DEPARTMENTAL PLAN 2010/2011 - 4TH

QUARTER MONITORING REPORT

1. PURPOSE OF REPORT

1.1 To inform the Portfolio Holder of the progress made against the key actions identified in the Child and Adult Services Departmental Plan 2010/2011, progress of key performance indicators for the period up to 31 March 2011 and associated risks.

2. BACKGROUND

- 2.1 The Child and Adult Services Department includes:
 - Community Services, reporting to Culture, Leisure and Tourism Portfolio Holder;
 - Adult Services, Adult Education and Supporting People reporting to the Adult and Public Health Services Portfolio Holder; and
 - Children's Services reporting to Children's Services Portfolio.
- 2.2 The Child and Adult Services Departmental Plan 2010/11 sets out the key tasks and issues with an Action Plan to show what is to be achieved by the department in the coming year. The plan also describes how the department contributes to the Organisational Development Improvement Priorities as laid out in the Corporate Plan. It provides a framework for managing the competing priorities, communicating the purpose and challenges facing the department, and monitoring progress against overall Council aims.
- 2.3 In 2008-09, the Council introduced a new electronic Performance Management Database (Covalent) for collecting and analysing corporate performance. The database collects performance information detailed in the Corporate Plan and the specific Departmental Plans. The aim is that the database will eventually collect performance information for all levels of the Council, including individual service / operational plans in each department.

3. QUARTER FOUR PERFORMANCE

3.1 This section looks in detail at how the Department has performed in relation to the key actions and performance indicators that were included in the Child and Adult Services Departmental Plan for this Portfolio, as well as associated risks.

- 3.2 On a quarterly basis officers from across the department are asked, via the Performance Management database (Covalent), to provide an update on progress against every action contained in the Departmental Plan and, where appropriate, every Performance Indicator and risk.
- 3.3 Officers are asked to provide a short commentary explaining progress made to date, and asked to traffic light each action based on whether or not the action will be, or has been, completed by the target date set out in the Departmental Plan. The traffic light system is:-

Red	Action/PI target not completed			
	or			
	Action/PI intervention required			
Amber	Action/PI progress acceptable			
Green	Action/PI target on track or			
	Action/PI target achieved.			

3.4 Within the Child and Adult Services plan there were a total of 35 actions and 38 Performance Indicators identified in the Departmental Plan. Table 1, below, summarises the progress made, to the 31st March 2011, towards achieving these actions and Pls.

Table 1 – Adult Services (APH portfolio) progress summary

	APH Portfolio		
	Actions	Pls	
Green – completed	35	24	
Green – on track	-	-	
Amber - acceptable	-	7	
Red – Intervention required	-	-	
Red – not completed	-	7	
Annual	1	-	
Total	35	38	

- 3.5 A total of 35 actions (100%) have been completed. There are no actions that have not been achieved.
- 3.6 It can also be seen that 24 (63.2%) of the Performance Indicators have reached their target. There are 7 (18.4%) of the Performance Indicators where progress is acceptable. There are 7 (18.4%) PI's that did not reach their target.

Table 2: Adult Services Actions – intervention required or target not met.

Ref	Action	Milestone	Comment

NONE.

Table 3: Adult Services Pl's - Target not met.

Ref	PI	Milestone	Comment
P038	No of emergency psychiatric re- admissions as % of discharges	4%	The percentage of emergency readmissions to an inpatient ward within 28 days of discharge (Hartlepool) is 7.45% for 2010-11. This is made up of 14 readmissions out of 188 admissions over the full year and is over target for the year. We are currently checking with TEWV (Tees ESk & Wear Valley NHS Foundation Trust) if this includes only Hartlepool residents, or if any Easington / Blackhall residents are included.
P066	Admissions to residential care – age 65+	109	We have revised our system and process and the end of year figure (due to the increased number of permanent admissions) is above the target of 109 admissions per 10,000 population - actual performance is 179 (rate 120.4) admissions. We have changed the process to maximise income, and give vulnerable people quicker options to help them decide where and how they want to live their lives – which has increased the number of people going into residential care.
P078	Number of Deprivation of Liberty Safeguards (DoLS) referrals during the year	50	After quarter 4, performance of 86 referrals is over target for 2010-11 - target of 50. This target was set as an expectation of performance and not a limit for the number of DoLS referrals that we should have. Hartlepool has the highest rate in the country (per capita) - which has driven a review of how others are counting their DoLS referrals. Paul Gantly (the national lead for Mental Capacity Act and DOLs) has identified Hartlepool as an area of good practice, which will help inform the national review of DoLS.

NI	All Age All Cause	704	Progress slow er for males than females on
120b	mortality (Males)	' 0 -	this indicator. Implementation of the
	, , , , , , , , , , , , , , , , , , , ,		smoking ban and smoking cessation
			initiatives and the cardiovascular disease
			primary prevention programme are all
			contributing to improve life expectancy and
			the reduction in the heart attack rate.
NI 130	Social Care	90%	This is the proportion of people with
	clients receiving		Personal Budgets and / or Direct
	Self Directed		Payments of all those who are eligible due
	Support (per		to receiving ongoing community support.
	100,000)		This reflects excellent performance. The
			full definition does include those in the
			denominator who would receive services,
			but would not be eligible to receive a
			Personal Budget / Direct Payment (e.g.
			those receiving only equipment, intermediate care or professional support).
			The figure of 79.4% excludes those
			mentioned above (i.e. people receiving
			only equipment or intermediate care) and
			represents 1,564 people in receipt of a
			personal budget (at any point during
			2010/11). Considerable work is ongoing
			across the department to ensure that
			everyone who is entitled to have a
			personal budget is encouraged and
			supported to do so.
NI 145	Adults with	70%	Revisions have been made as per the
	learning		requirements for the ASC-CAR statutory
	disabilities in settled		return. Quarterly figures throughout the
			year included all ages of clients. The year-
	accommodation		end figure has only taken into account 18-64 year olds, as follows:
			- 30 LD clients (aged 18-64) in Non-Settled
			Accommodation
			- 229 LD clients (aged 18-64) in Settled
			Accommodation
			- The LD denominator has increased
			slightly to 349 LD clients known to the
			council.
			Although we have not met the target, the
			number of people in unsettled
			accommodation has reduced from 52 to
			30. This is due to the de-registration of a
			residential care home, the re-provision of
			campus accommodation with people
			moving to supported tenancies and the
			reduction in the number of people in
			existing residential establishments.

	Adults in contact with secondary Mental Health in employment		Quarter 4 figure obtained from PCT report sent from Alison Barber to Peter Turner on 11 July 2011. The outturn, of 6.1% represents 29 adults in paid employment out of a total of 474.
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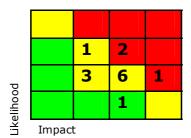
- 3.7 At the end of the fourth quarter, Adult Services have achieved all 35 actions - a number of these are shown below:-
 - Continue to safeguard and protect vulnerable people by increasing awareness and understanding of what constitutes abuse and advising people how to appropriately respond if they feel at risk by actively promoting the empowement of vulnerable adults (CADHW035).
 - Continue to develop housing and support options for older people through extra care housing, floating support and intermediate care (CADHW036).
 - Improve access to assessment and support for carers through implementation of the Carers Strategy (CADHW047).

4. **RISK MONITORING**

- 4.1 It is the policy of Hartlepool Council to take an active and pragmatic approach to the management of risks that could prevent the achievement of corporate and departmental objectives. On a quarterly basis the Adult Services division assesses the risks identified within the Child and Adult Services Risk Register. The Council's approach acknowledges that the purpose is not to remove all risks (this is neither possible nor, in many cases, desirable), rather it is to ensure that potential 'losses' are prevented or minimised and that 'rewards' are maximised.
- 4.2 This summary is reported to the Portfolio Holder within the quarterly monitoring report to provide an overview of risks being addressed by the Adult Services Division of the Child & Adult Services Department.

4.3 The diagram below shows the distribution of risks according to their risk rating. Detail of the rating system is in appendix A.

Diagram 1 –Risk Register Heat Map for Adult Services division of Child & Adult Services Department



See Appendix A for key to diagram above

4.4 There are a total of 14 risks. There is 1 risk on 'GREEN' status, 10 risks on an 'AMBER' status and 3 of these risks are highlighted as 'RED'.

Table 5: Adult Services risk's – highlighted red:

Ref	Risk	Comment
ACS R001	Services damaged by insufficient budget allocation or changes in national funding.	2011/12 cuts will add to risk, even though balanced as carefully as possible.
CAD NEW 012	Increased demand on services due to demographic pressures and current economic climate.	Economic position is expected to add to demand for care etc, and reduce ability to pay for services.
CSD R023	Failure to plan future needs and be able to respond to market pressures.	There are ongoing pressures in adult social care in relation to residential care for older people and younger adults with complex needs due to increasing life expectancy, medical advances and increasing prevalence of dementia. Pressures on placements are being managed or contained through the development of alternative options that enable people to remain independent for longer including reablement services, extra care housing and increasing use of assistive technology.

5. RECOMMENDATIONS

i) It is recommended that achievement of key actions and fourth quarter outturns of performance indicators are noted.

CONTACT OFFICER: Trevor Smith,

Performance & Information Manager (Adults)

Support Services

3.1 APPENDIX A

HARTLEPOOL BC RISK ASSESSMENT MATRIX AND VALUE GUIDES

		IMPACT			
LIKELIHOOD		1	2	3	4
		Low	Medium	High	Extreme
Almost certain	4	AMBER 4	RED 8	RED 12	RED 16
Likely	3	GREEN 3	AMBER 6	RED 9	RED 12
Possible	2	GREEN 2	AMBER 4	AMBER 6	RED 8
Unlikely	1	GREEN 1	GREEN 2	GREEN 3	AMBER 4

Use the following suggested value guides to help rate the level of the **controlled risk**.

IMPACT

Extreme Total service disruption / very significant financial impact /

Government intervention / sustained adverse national media

coverage / multiple fatalities.

High Significant service disruption/ significant financial impact /

significant adverse Government, Audit Commission etc report / adverse national media coverage / fatalities or serious disabling

injuries.

Medium Service disruption / noticeable financial impact / service user

complaints or adverse local media coverage / major injuries

Low Minor service disruption / low level financial loss / isolated

complaints / minor injuries

LIKELIHOOD

Expectation of occurrence within the next 12 months -

- Almost certain
- Likely
- Possible
- Unlikely

ADULT AND PUBLIC HEALTH SERVICES PORTFOLIO

Report to Portfolio Holder 22 August 2011



Report of: Director of Child and Adult Services

Subject: HARTLEPOOL SAFEGUARDING

VULNERABLE ADULTS BOARD QUARTERLY

STATISTICS & UPDATE

SUMMARY

1.0 PURPOSE OF REPORT

To present the Hartlepool Safeguarding Vulnerable Adults Board (HSVAB) quarterly statistics covering the period from 1st April to 30th June 2011 and to report on the progress of the HSVAB Safeguarding Action Plan for 2011 - 2012.

2.0 SUMMARY OF CONTENTS

This report provides information concerning Safeguarding Vulnerable Adults quarterly statistics for the first quarter of the 2011 – 2012 reporting period and provides information relating to progress with the Safeguarding Action Plan covering the same period.

3.0 RELEVANCE TO PORTFOLIO MEMBER

The Local Authority holds the lead responsibility for Adult Safeguarding.

4.0 TYPE OF DECISION

Non Key

5.0 DECISION MAKING ROUTE

Adult and Public Health Services Portfolio – August 22nd 2011

6.0 DECISION(S) REQUIRED

The Portfolio Holder is asked to note the contents of the report.

Report of: Director of Child and Adult Services

Subject: HARTLEPOOL SAFEGUARDING

VULNERABLE ADULTS BOARD QUARTERLY

STATISTICS & UPDATE

1. PURPOSE OF REPORT

1.1 To present the Hartlepool Safeguarding Vulnerable Adults Board (HSVAB) quarterly statistics covering the period from 1st April to 30th June 2011 and to report on the progress of the HSVAB Safeguarding Action Plan for 2011 - 2012.

2. BACKGROUND

2.1 This is the eighth report to the Portfolio Holder following a request for a regular submission of information about trends, activity and challenges.

3. TRENDS

- 3.1 The first reporting period is from 1st April 30th June 2011. During this period there were 81 alerts identifying possible cases of abuse or neglect brought to the attention of the first point of contact, which is the Duty Team. Of these 40 were managed via 'general discussions' by the Duty Team or the Safeguarding Vulnerable Adult Team and 41 required further investigation and action under safeguarding adult procedures.
- 3.2 In relation to the 40 alerts that required no further action in terms of safeguarding procedures, if the Duty and / or Safeguarding Teams considered advice and guidance was insufficient to safely manage the alert, the information was passed on to and dealt with via the social work and care management teams or the Commissioned Services Team. These teams made their own enquiries into the matters raised to determine the risk of harm to adults who may be vulnerable and based on gathered intelligence decided how best to progress the alert.
- 3.3 Of the 41 safeguarding referrals 16 were over the age of 65 years and unusually in comparison to all previous reporting periods over 50% were aged below 65 years of age. Care homes continue to be the most common location of reported abuse. However it should be noted that in this reporting period the statistical analysis should not be really compared with previous reporting periods due to one specific investigation as described below.

- 3.4 In this reporting period one specific investigation should be brought to the attention of the Portfolio Holder. This concerned an investigation into a registered facility for people with a learning disability. In relation to this case although Hartlepool Borough Council does not commission this service there were a number of people placed within the facility from 'out of the borough'. Therefore when an allegation of abuse was made, as 'host' authority we had a duty to lead the investigation under No Secrets guidance. Sixteen people with a learning disability resided in the facility and this generated sixteen referrals which were all investigated under safeguarding procedures. A multi-agency approach was utilised including the involvement of the Care Quality Commission (CQC) who completed an unannounced inspection of the facility. Officers from CQC identified three actions for the Home which were dealt within agreed time-scales. The outcome of the investigation was that the allegation(s) were not substantiated and the referrals are now closed to safeguarding.
- 3.4 In relation to Deprivation of Liberty Safeguards (DoLS), the figures for the reporting period 1st April June 30th 2011 are as follows:
 - Total Number of DOLS Referrals 13
 - Total Number of DOLS Referrals Granted 9
- 3.5 In the comparable reporting period for last year the figures were:
 - Total Number of DOLS Referrals 24
 - Total Number of DOLS Referrals Granted 13
- 3.7 This information confirms that there was a 46% reduction in DOLS referrals over the first quarter.
- 4. CONTINUOUS IMPROVEMENT UPDATE ON SAFEGUARDING ACTION PLAN 2011 12.
- 4.1 An initial HSVAB safeguarding action plan was developed for the financial year 2011 12 and this was shared with strategic Partners for comment. This action plan focused upon challenges impacting upon adult protection and identified key deliverables under the following specific themes: Leadership; Personalised Responses; Effective Prevention; Performance; Workforce Development.
- 4.2 However prior to finalising the annual safeguarding action plan, the Board members decided that in the light of the learning from the Safeguarding Peer Review and the Scrutiny Enquiry into Adult Safeguarding, as well as the learning from the publication of the final report of the Law Commission's review of adult social care law, that this was an opportune time to re-consider the future direction of travel for the HSVAB. Essentially Board members considered that they needed time to reflect upon this detailed information in order to inform their decision-making regarding how best the Board could discharge its responsibilities and meet the significant strategic and operational challenges going forward.

- 4.3 To this end Board members have decided to arrange a development day in September 2011 and at this point they will also review the content of the HSVAB safeguarding action plan for 2011 12.
- 4.4 In the interim, work continues in order to safeguard and protect adults at risk of harm and this can be summarised as follows:
- 4.5 The Tees-wide Interagency Policy and Procedures Sub-group has now almost finalised the revised policy and procedures. These have been written to respond to changes across health and social care which affect adult protection and promote best practice. Additionally the revised procedures now attempt to promote more active involvement of service users and their advocates in the safeguarding process.
- 4.6 Skills for People, an independent provider, has now been commissioned to assist us to engage with people or advocates who have been involved in safeguarding investigations to explore how we can learn lessons and determine how satisfied those involved with the safeguarding investigation are with the quality of the support they receive. The learning from the 'model', which we have called 'expert by experience' will inform our understanding and enable us to make further improvements in operational practice. The learning will also be used to increase our understanding of the training requirements of the work-force. Hartlepool is leading the way locally in this work and we anticipate that the work itself will commence from September 1st 2011.
- 4.7 Across Tees there is considerable interest in improving responses to hate crime and an event was undertaken in Hartlepool in May to begin the process of addressing this significant issue at a strategic level. Locally the Hartlepool Learning Disability Partnership Board has arranged an event entitled 'Stopping Hate Crime Together' to consider what we can do locally to address this issue. Potential attendees include people with a learning disability, family members, self advocates, Crown Prosecution Service, Police, Community Leaders, Victim Support, Mencap and housing providers. It is anticipated that the outcome of the event will include the creation of a plan which when implemented will enable us to address the issue of hate crime more effectively.
- 4.8 The HSVAB is currently working with a number of strategic Partner agencies to explore how we can improve our responses to domestic violence. Officers took part in a Domestic Violence Commissioning Event in July to consider how we can prevent domestic violence, promote earlier intervention and support those who suffer this type of abuse. This work is on-going and progress will be reported in the coming months.

4.9 Work has commenced between health and social care professionals to improve the patient experience of hospital discharge arrangements. Systems are being established to promote safety and learn lessons from practice to ensure patients are protected from avoidable ham during the transition from hospital to the community and vice versa.

5. FINANCIAL IMPLICATIONS

5.1 There are no financial implications arising from the report.

6. RECOMMENDATIONS

6.1 Report be noted

Contact Officer: John Lovatt Head of Service (Adult Social Care)