

Health and Adult Social Care Overview and Scrutiny Committee

26th March 2018

Tanya Miles
Head of Adult Social Care



http://www.bbc.co.uk/news/av/health-42785938/the-good-ae-facing-unprecedentedwinter-pressures



Performance Metrics

- S Reduction in delayed transfers of care per 100,000 of population (target of 2.6)
- § Reduction in the admission of people into residential care (target no more than 600 new placements)
- § Increase in the number of people supported in their own homes from hospital (80% of all hospital discharges)
- S Increase number of discharges per week from the Acute hospital (48 per week)
- § Reduction on length of stay on Integrated community services caseload (max 42 days)
- § Increase in the number of people at home after 91 days from hospital (target 78%)
- § Increase in the number of people receiving no long term care after successful Reablement. (target 74%)



https://www.youtube.com/watch?v=JYezDb0 Wgz8



IBCF Withywoods September 2017 - Present

Withywoods Hours Delivered

Withywoods IBCF Scheme

200 180 Number of individuals supported during the period 13 160 140 120 Number of Hours during the period 901.5 100 80 Number of individuals currently 'Active' 2 20 Average number of days each person accessed the scheme 37.00 September October November December January February March (Closed Cases)

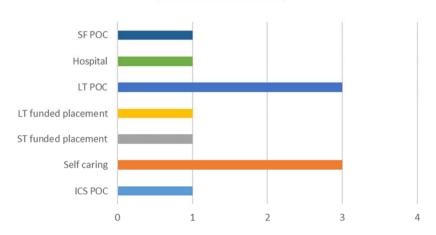


IBCF Withywoods September 2017 – To Date

Outcomes (Closed Cases)

ICS POC 1 Self caring 3 ST funded placement 1 LT funded placement 1 LT POC 3 Hospital 1 SF POC 1

Withywoods Outcomes





Withywoods

Adeline Ndoro,

Social Care Practitioner for the ICS Central team

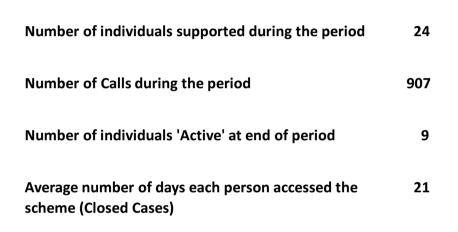
In a time of mounting pressures on our NHS, Adele plays a crucial role in helping people move from hospital to independence at home. She coordinates a temporary move into rehabilitation apartments at Withy Wood in Shrewsbury.

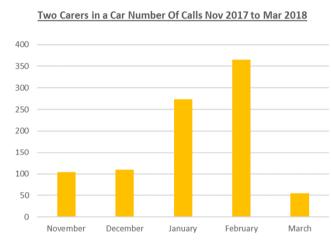
"The idea is simple" explains Adele, "here's an example..."

"A woman had fallen and fractured her neck. I assessed her in hospital and welcomed her to Withy Wood, where she accessed social care and occupational therapy support while redeveloping her independence. Over just 2 weeks her confidence grew when using walking frames. With the support of her family care calls were reduced. She then made the decision to move in to a new apartment, keeping a pendant alarm just for security. She's happy. I'm happy."



Two Carers in a Car 13th November 2017 to 4th March 2018







Client A said:

The carers make sure I am alright and they help to put me into bed as I can't lift my legs anymore. I look forward to them coming and checking on me as it makes me feel safe.

Next of Kin:

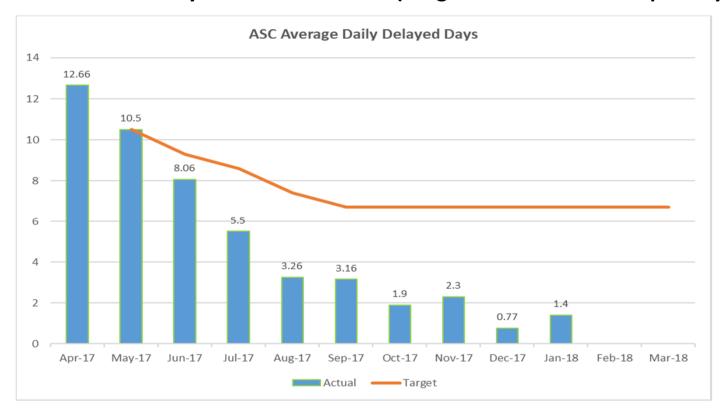
It's a tremendous help for me and my mum especially as I don't live local and I used to worry all the time that mum had fallen trying to get out of bed to use the toilet – I think that the service is wonderful and me and mum are so grateful for all of the help.

Client B said:

They help me use the commode in the night because I can get myself out of bed but I can't get myself back in so now the ladies come and help me I am not frightened anymore that I might fall. They come to me twice in a night and its working really well for me.



Reduction in delayed transfers of care (target no more than 6.7 per day)

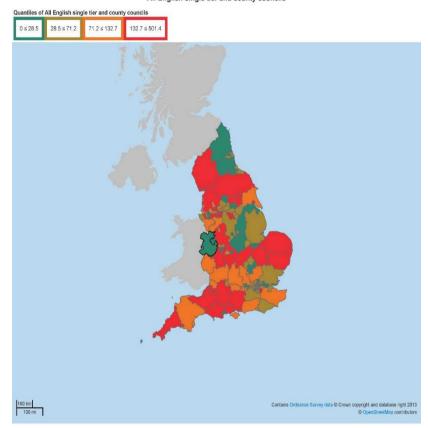


Calculated using number of delayed days in month attributable to Social Care divided by the number of days in the calendar month. There has been a 89% reduction between April 2017 result and January 2018 result.



NHS England

Delayed days per 100,000 population aged 18+ attributable to social care (per 100,000 adults) (Jan 2018) for Shropshire & All English single tier and county councils



<u>Shropshire Adult Social Care</u> <u>January Performance</u>

- **S** Top quartile for delays per 100,000 adults
- § 3rd lowest rate of ASC delays per 100,000 in the West Midlands
- Ranked 22nd within English authorities for ASC delays per 100,00
- § 88.4% reduction in delays attributed to ASC when compared to April 2017
- § 93% reduction in delays attributed to ASC when compared to January 2017

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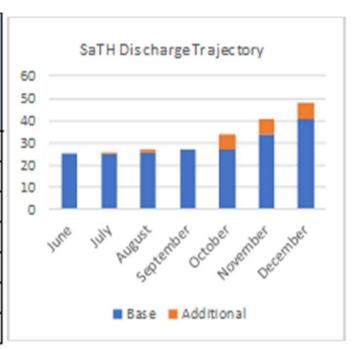
Reduction in admission to residential care (Targets) 18-64 (10) 65+ (600) (Targets per 100,000)





Increase number of discharges per week from the Acute hospital (48 per week)

	Baseline Ave PW	Additional Ave Per Week	Total
June	25	0	25
July	25	1	26
August	26	1	27
September	27	0	27
October	27	7	34
November	34	7	41
December	41	7	48





Shropshire and Telford Hospital Discharges

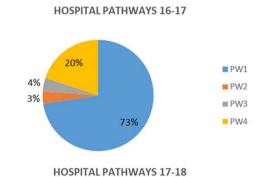
		FFAs			Planned Discharges			Actual Discharges			Discharge Targets			Discharge Projection based on 75%			
Week Start	Week End	FFA Target	FFA Actual	RAG	RSH	PRH	Total	RAG	RSH	PRH	Total	Total	Var	RAG	Projected	Actual	RAG
02/10/2017	08/10/2017	45	44		31	4	35		27	4	31	34	-3		33	31	
09/10/2017	15/10/2017	45	33		28	3	31		26	3	29	34	-5		25	29	
16/10/2017	22/10/2017	45	46		27	8	35		25	8	33	34	-1		35	33	
23/10/2017	29/10/2017	45	35		24	11	35		18	6	24	34	-10		26	24	
30/10/2017	05/11/2017	55	49		39	13	52		32	11	43	41	2		37	43	
06/11/2017	12/11/2017	55	39		24	15	39		22	12	34	41	-7		29	34	
13/11/2017	19/11/2017	55	60		32	12	44		28	11	39	41	-2		45	39	
20/11/2017	26/11/2017	55	55		36	12	48		28	10	38	41	-3		41	38	
27/11/2017	03/12/2017	55	43		34	12	46		33	10	43	41	2		32	43	
04/12/2017	10/12/2017	64	39		27	6	33		23	6	29	48	-19		29	29	
11/12/2017	17/12/2017	64	38		27	10	37		20	10	30	48	-18		29	30	
18/12/2017	24/12/2017	64	50		30	8	38		28	8	36	48	-12		38	36	
25/12/2017	31/12/2017	64	24		22	4	26		18	3	21	48	-27		18	21	
01/01/2018	07/01/2018	64	59		35	15	50		28	15	43	48	-5		44	43	
08/01/2018	14/01/2018	64	58		35	11	46		30	11	41	48	-7		44	41	
15/01/2018	21/01/2018	64	40		33	9	42		28	9	37	48	-11		30	37	
22/01/2018	28/01/2018	64	52		39	15	54		35	10	45	48	-3		39	45	
29/01/2018	04/02/2018	64	47		34	11	45		29	10	39	48	-9		35	39	
05/02/2018	11/02/2018	64	45		31	12	43		29	10	39	48	-9		34	39	
12/02/2018	18/02/2018	64	46		36	5	41		27	5	32	48	-16		35	32	
19/02/2018	25/02/2018	64	47		38	9	47		31	8	39	48	-9		35	39	
26/02/2018	04/03/2018	64	54		31	9	40		22	7	29	48	-19		41	29	
05/03/2018	11/03/2018	64	41	0	32	10	42		29	9	38	48	-10		31	38	
		1351	1044		725	224	949		616	196	812						

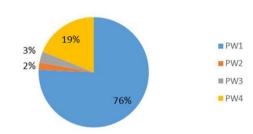


Number of people supported in their own homes from hospital

Hospital Pathways 16-17								
PW1	622	72.66%						
PW2	30	3.50%						
PW3	34	3.97%						
PW4	170	19.86%						
TOTAL	856	100.00%						

Hospital Pathways 17-18								
PW1	2126	75.74%						
PW2	59	2.10%						
PW3	92	3.28%						
PW4	530	18.88%						
TOTAL 2807 100.009								





PW1 - Package of Care

PW2 - Rehab Bed

PW3 - Discharge to Assess Bed

PW4 - Nursing or Residential Placement



ICS Length of Stay Summary

	Months											
Pathway	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
1-POC	32.94	31.00	30.68	23.58	26.70	28.28	27.37	25.07	25.49	27.18	23.28	22.91
2 - Rehab Bed	25.57	20.57	22.63	26.80	20.83	20.71	22.00	44.14	17.50	40.00	43.00	32.33
3 - D2A Bed	34.17	45.50	18.50	21.88	32.83	28.00	19.33	18.88	28.64	21.17	41.54	33.00
4 - N or R Placement	41.30	21.44	21.60	36.50	43.29	36.92	20.80	38.38	30.29	34.00	38.09	45.63
Combined	33.48	30.78	29.41	24.40	28.00	28.61	26.97	26.26	25.49	27.81	25.61	24.88



PW2 - Rehab Bed

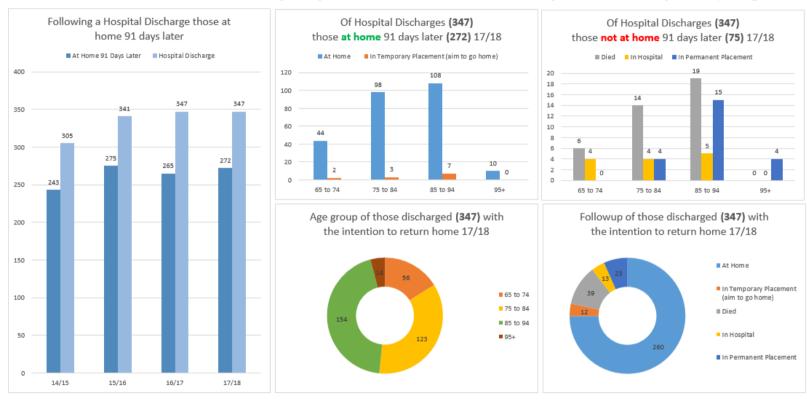
PW3 - Discharge to Assess Bed

PW4 - Nursing or Residential Placement



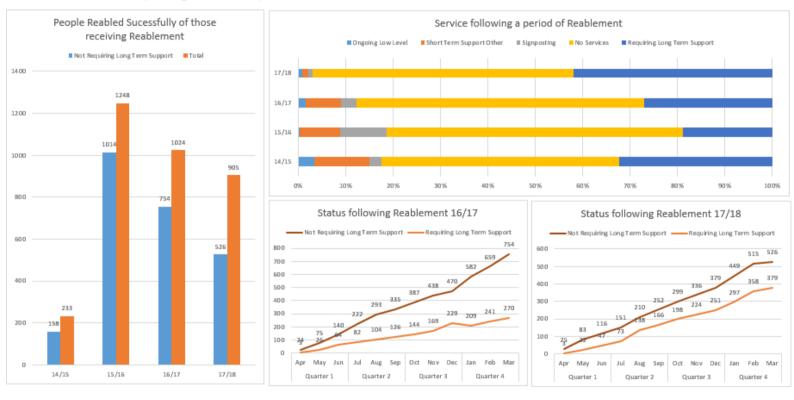


Increase in the number of people at home after 91 days from hospital (target 78%)





Increase in the number of people receiving no long term care after successful Reablement (Target 74%)





Video interview



Performance Measures – Summary

Measure 2017/2018	Target	Shropshire Current Performance	
Reduction in delayed transfers of care per 100,000 population (Average performance for England is 3.65)	2.6	0.56	Ø
Reduction in the admission of people into residential / nursing care age group 18 - 64 per 100,000 population	10	10	Ł
Reduction in the admission of people into residential / nursing care age group 65 + per 100,000 population	600	303	Ø
Increase in the number of people supported in their own homes from hospital	Percentage of Packages of care 80%	76%	
Increase number of discharges per week from the Acute hospital	48 Per Week	38 Average per week	Ł
Reduction on length of stay on Integrated community services caseload	Less than 42 days	27 Days Average	Ø
Increase in the number of people at home after 91 days after being discharged from hospital to reablement services	78%	78.4%	Ø
Increase in the number of people receiving no long term care after successful Reablement	74%	58.1%	

Key:

- Exceeding Target.
- On Target

Below target - currently improving







Any questions?