**ADULT SERVICES AND HEALTH COMMISSION**
**11 December 2006**

DERBY CITY COUNCIL

Report of the Director of Corporate and Adult Social Services

# Performance Monitoring – Assessment Waiting Times for Social Care Services (PAF D55)

## RECOMMENDATION

The commission notes the findings of the analysis based upon the information held on social care information systems and endorses the actions identified to improve performance.

## SUPPORTING INFORMATION

1.1 At the Scrutiny Management Commission meeting on 30 October 2006 the Commission requested further information on waiting times for assessment for those citizens presenting for social care needs.
   - Specifically the commission were keen to see a full profile of waiting times for those presenting themselves for assessment.
   - An understanding of the action being taken to improve the performance to reach the target of 85%.

1.2 It was noted by the commission the performance at Q1 (75%) although adrift of the target at 85% was comparable with the previous year's performance and a very close to the IPF comparator group average performance for 2005/06 (77%).

1.3 Clearly there has been no marked deterioration in performance but the indicator does not show an improvement towards the target set. Coupled with this there is an expectation within the Performance Assessment Framework (PAF) for social care that performance will improve. There has been a 10% shift upwards in the performance bandings for this indicator in 2006/07. Hence a 5% improvement is required to stand still, as Derby was in the middle of the acceptable band for 2005/06 (70 %< 80%). The target set, if achieved would move Derby from the acceptable to the good band (85% < 90%).

1.4 **Definition**

The definition for this indicator is detailed below;

For new older clients (65 & Over), the average of

i)        the percentage where the time from first contact to beginning of assessment is less than or equal to 48 hrs (that is, 2 calendar days), and

ii)       ii) the percentage where the time from first contact to completion of assessment is less than or equal to four week (that is, 28 calendar days).

When calculating timescales it is important to note:-

a)  the timescales are based upon <u>calendar</u> days, therefore weekends and bank holidays are included in the calculations.
b)  the day of the contact is classed as 'Day 1', therefore assessments need to start on the same day or the following day to meet the 48 hr (or 2 calendar day) timescale. So in some cases the maximum time is 24 hours.

## 1.5     Profile & Action

The profiles for both halves of the indicator for those referrals received in the first half of this year to 30 Sep 2006 are detailed at Appendix 2.

### Assessments Starting within 48 Hours

On those assessments started within 48 hours the profile shows that of the 1418 assessments started in the first half of the year, in 1005 (71%) cases the target was met. Then there are a number of assessments starting in the range 3 to 14 days. There would appear to be a uniform pattern over 3 to 14 days before there is a noticeable and sustained dip in the volume of assessments starting two weeks after contact. Those at the extreme end tend to be individuals who have been hospitalised or on holiday.

There are a number of reasons why we do not hit the timescales for assessment start within 48 hours for some assessments.

a)  The person is not contactable by phone.
b)  The details provided at point of contact are inaccurate.
c)  The change to the single stream of assessment structure has transferred a disproportionate amount of work into the reception team relative to the number of staff transferred due to the service standards compliance requirement within homecare.
d)  The Reception team have carried 1.5 vacancies through a large part of the first half of 2006/07.

The action we are taking to improve performance is;

a)  We shall issue a letter to all people requiring assessment that we have not been able to contact by phone, within 48 hours. This will count as the start of the assessment process and complies with the indicator definition.

b) We are seeking to transfer some admin resource into the Reception team to support the above process.
c) We are seeking to maximise contact information collection which shall allow more contacts to be dealt with at source.
d) We shall streamline the referral information collection volume. In order to increase output.
e) There are some additional staff hours going into the Reception team.

We believe these actions shall lead to an improvement in those assessments started within 48 hours. There is some evidence to suggest there have been improvements already. October's proportion of assessments within the Reception team starting within 48 hours improved from an average of 58% in the first half of the year, to 74% in October.

**Assessments Completed within 28 Days**

The profile shows that the vast majority, 669 (81%) of assessments are completed within 28 days. A further 47 (5.7%) within 35 days. The numbers beyond these timeframes can relate to individuals who have been hospitalised, more complex multi agency assessments for older people with complex needs and those awaiting a major adaptation. The assessment process for the latter can be drawn out and the availability of resource can lead to a waiting list situation.

We are seeking to improve to 85%, which is our target and ideally above 90%.

The actions we are taking to improve the performance on assessments completed within 28 days are detailed below.

a) Focussed assessments on identifying current presenting needs, on teams where activity data displays bottlenecks.
b) Transfer of assessments between teams, to resolve bottleneck issues.
c) Guidance and support for individual staff members identified as part of the investigatory process.
d) Re visiting definition of completed assessments in relation to complex cases.

These actions will help us reach our target. It is our intention to ensure that when we have reached the desired level of performance we sustain it by keeping timely response to assessment as a live and important service issue.

1.6    **Summary**

We have investigated activity around both components of the assessment waiting time indicator, PAF D55. The investigation has

revealed that the current profile of assessment waiting times requires action to improve performance to the desired level. Actions have been identified, some are process related others resource and team performance related. These actions are being implemented to correct the performance to the desired target and beyond.

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| **For more information contact:** | Perveez Sadiq 01332 716759  e-mail perveez.sadiq@derby.gov.uk |
| **Background papers:** | None |
| **List of appendices:** | Appendix 1 – Implications |
| | Appendix 2 – Assessment Waiting Time Profiles |

| IMPLICATIONS |
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**Financial**

1. None

**Legal**

2. None arising from this report.

**Personnel**

3. None arising from this report.

**Equalities impact**

4. Effective scrutiny is to the benefit of all Derby people.

**Corporate Priorities**

5. Monitoring key indicators to improve performance will help the Council take forward all of its objectives and priorities.

**Assessment Waiting Time Profile (PAF D55)** <span style="float:right">**Appendix 2**</span>

**Definition**
For new older clients, the average of i) the percentage where the time from first contact to beginning of assessment is less than or equal to 48 hrs (that is, 2 calendar days), and ii) the percentage where the time from first contact to completion of assessment is less than or equal to four week (that is, 28 calendar days).

When calculating timescales it is important to note:-

    a)   that the timescales are based upon <u>calendar</u> days, therefore weekends and bank holidays are included in the calculations.

    b)   the day of the contact is classed as 'Day 1', therefore assessments need to start on the same day or the following day to meet the 48 hr (or 2 calendar day) timescale.

**Part i) Assessments starting within 48 hrs of Contact**

|  | a) 1 to 2 days | b) 3 to 4 days | c) 5 to 6 days | d) 7 to 8 days | e) 9 to 10 days | f) 11 to 12 days | g) 13 to 14 days | h) 15 to 16 days | i) 17 to 18 days | j) 19 to 21 days | Grand Total |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **Cases** | 1005 | 64 | 38 | 68 | 79 | 41 | 66 | 40 | 7 | 10 | 1418 |
| **Percentage** | 70.9% | 4.5% | 2.7% | 4.8% | 5.6% | 2.9% | 4.7% | 2.8% | 0.5% | 0.7% | 100.0% |

**Part ii) Assessments completed within 28 Days**

|  | Timescale met | | | | Timescale failed | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
|  | a) 0 to 7 days | b) 8 to 14 days | c) 15 to 21 days | d) 22 to 28 days | e) 29 to 35 days | f) 36 to 42 days | g) 43 to 49 days | h) 50 to 56 days | i) 57 to 63 days | j) 64 to 70 days | k) 71 days & over | Grand Total |
| **Cases** | 347 | 159 | 98 | 65 | 47 | 15 | 16 | 9 | 14 | 13 | 42 | 825 |
| **Percentage** | 42.1% | 19.3% | 11.9% | 7.9% | 5.7% | 1.8% | 1.9% | 1.1% | 1.7% | 1.6% | 5.1% | 100.0% |