Improvement Objective

IO 6 - Improve the Timeliness and Quality of Assessments of the clients needs

Outcomes:

- 1. Users of our service will receive a more timely and appropriate response.
- 2. The number of assessments completed within the timescale will increase.
- 3. Improve the quality of assessments completed by our social workers.
- 4. We will speed up how long you have to wait from the time you were assessed to the time you receive the services agreed.
- 5. The standards of care we provide will improve the quality of life for all service users.
- 6. We will make clear links with action we take resulting from complaints intelligence.



Quarter 2 Progress Summary

Generally, good progress is being made across the range of actions contained in the Improvement Objective. All actions have made at least some progress. Out of the 10 main actions within this Improvement Objective, 6 have been completed and the remaining 4 actions some progress has been made.

Out of the 9 monthly performance indicators at the end of September 2012 (Qtr2), Five are performing well (Green) and are already achieving the target set:

- ASPI 42 The number of people awaiting for personal care for more than 14 days was 0 for September.
- SCA/002a The rate of older people supported in the community aged 65 or over was 145.17 for September and ranked 1st in Wales.
- SCA/020 The percentage of adult clients supported in the community during the year was 91.27% for September and ranked 3rd in Wales.
- The percentage of assessments that were service user focused was 97% at the end of Qtr2.
- The percentage of assessments which evidences the risk to independence was 86% at the end of Qtr2.

One local indicator is just below the target set (ASPI 18) however, there are three indicators of concern (Red) and they are:

• ASPI 02 - Number of adults waiting for an assessment outside of the timescale (28 days) – currently performing at 223 adults waiting compared to 288 adults waiting the previous month. The main areas of delays are in the Older People, Mental Health and Substance Misuse teams. Some of this can be attributed to the fact that the Mental Health Measure was introduced in June 2012 and has had a big impact on the service, i.e. implementation of the measure, change in practice and documentation. Substance Misuse is a very small team and are currently running with 2 staff on long term sick.

• ASPI 03 - The percentage of adult services assessments started on time - currently performing at **76.60%** compared to **79.50%** the previous month. The target for this measure is 90%. 6034 out of 7874 assessments were started on time due to the above reasons.

• ASPI 43 - Number of people waiting to access day care for more than 28 days - is currently at **6 service users** compared to **4 service users** waiting the previous month. There has been an increase in the number of people waiting to access day care, compared to the previous periods, this can be attributed to the move from traditional day care services (establishments) to an outreach community based service.

Risk Table									
Title	Original Date	Original RAG	Original Likelihood of occurence	Original Impact	RAG	Likelihood of occurence	Impact	Comment	
Failure to improve the timeliness and quality of assessments will have a major impact on the client's needs and the services they require	01 Apr 2010	•	4	5	¢	4	5	In order to mitigate the risk and to improve the timeliness and quality of assessments we continue to aim to allocate assessments within the appropriate timescales to allow service users and their carers time to plan their availability to undertake the assessment. However due to the complexity of some cases this is not always achievable as their needs take priority.	
Lack of participation in the Continuing Health Care process by Health	01 Apr 2010	•	4	5	¢	4	5	We continue to work in partnership with ABHB and develop working relationships, problems still remain in relation to Learning Disability and Mental Health Service Users, where there are significant delays in processing claims, however there is ongoing work to improve the CHC process in these service areas.	
Lack of participation in Unified Assessment process by partners, may result in a single agency assessment which will have a negative impact on the speed and quality of assessments	01 Apr 2010	•	4	5	\$	4	5	The secondment of Social Workers within the Frailty Programme Community Resource Team (CRT) based within CCBC has proved successful in improving the assessment process and better outcomes for our service users particularly in relation to hospital discharge.	

Actions Table							
Title	Comment	Overall Status	% Complete	RAG			
01. Review the direct payments procedure to allow adults to arrange their own care, by promoting Self Directed Support more effectively.	We continue to promote Self Directed Support and a recent review of policies and procedures, as a result we have now introduced a flat hourly rate which makes it easier for the service user to manage.	In Progress	80	•			
02. We will improve the timeliness of assessments across Adult Services	In order to improve the timeliness and quality of assessments we continue to aim to allocate assessments within the appropriate timescales to allow service users and their carers time to plan their availability to undertake the assessment. However due to the complexity of some cases this is not always achievable as their needs take priority.	In Progress	80	•			
03. We will improve the quality and standards of assessments by moving away from the quantity of assessments and give more focus on the quality of how we assess adults in the social care system.	The quarterly case file audits and subsequent findings evidences the continued improvement in the quality and standard of assessments.	In Progress	50	•			
04. We will evidence and evaluate the risks to the independence of the service user and determine how these will be managed.	The quarterly case file audits monitors that all risks to independence are evidenced and evaluated to ensure that these risks are managed.	In Progress	50	•			
05. Carry out more quality assurance of case files and providing staff with regular supervision		Complete	100	•			
06. We will accurately record and capture the unmet need		Complete	100	•			
07. We will implement the shared eligibility criteria with our health partners		Complete	100	•			
08. We will improve the Recruitment & Retention of Assessment and Care Management (ACM) staff		Complete	100	•			
09. We will pilot a post-assessment questionnaire to all service users		Complete	100	•			
10. We will review our current performance nformation in regards to timeliness of assessments		Complete	100	•			

	Measure Table							
Period	Title	Actual	Target	Intervention	RAG	Previous Month	Comment	
Sep 12	ASPI 02 - Number of adults waiting for an assessment outside of the timescale (28 days)	223.00	100.00	165.00	T	288.00	The main areas of delays are in the Older People, Mental Health and Substance Misuse teams. Some of this can be attributed to the fact that the Mental Health Measure was introduced in June 2012 and has had a big impact on the service, i.e. implementation of the measure, change in practice and documentation. Substance Misuse is a very small team and are currently running with 2 staff on long term sick.	
Sep 12	ASPI 03 - The % of adult services assessments started on time	76.60	90.00	80.00	¥	77.90	6034 out of 7874 assessments were started on time due to the above reasons.	
Sep 12	ASPI 18 - % mental health assessments completed on time	84.20	90.00	80.00	¥	84.30	919 out of 1092	
Sep 12	ASPI 42 - Number of people awaiting personal care for more than 14 days	0.00	0.00	5.00	-	0.00	0 service users	
Sep 12	ASPI 43 - Number of people waiting to access day care for more than 28 days	6.00	0.00	5.00	¥	4.00	6 service users	
Sep 12	SCA/002a - The rate of older people supported in the community aged 65 or over	145.17	142.00	138.00	Ţ	142.89	4219 service users	
Sep 12	SCA/020 - The percentage of adult clients who are supported in the community during the year	91.27	90.00	85.00	↑	91.31	7012 out of 7683	
Q2 12/13	The percentage of assessments that were service user focused	97.00	85.00	75.00	•		New measure for 2012-13. Evidence gathered from case file audit parameter 1. The majority of assessments audited were focused on the service user's situation and the impact that this had on their independence.	
Q2 12/13	The percentage which shows the evidence that the assessment identifies the risks to independence	86.00	85.00	75.00	¥		New measure for 2012-13. Evidence gathered from case file audit. Parameter 11. The assessment identifies risks to independence and they are relative to the needs identified.	