

3. SERVICE PERFORMANCE AND WLAM OUTCOME REPORT AND PRESENTATION- COMMUNITY CARE

The Committee considered a report (copies of which had been circulated) by the Depute Chief Executive providing an overview of a service assessment from the West Lothian Assessment Model process (WLAM 2017/20).

The report also provided a summary of recommendations from the officer led panel that had been identified for action and were to be delivered by the service management team.

The report advised that self-assessment was an important part of the council's Best Value Framework, ensuring that there was rigorous challenge of performance and continuous improvement embedded at all levels of the organisation. Regular, programmed self-assessment was also an integral part of improvement planning and preparation for external inspections.

The report provided the outcome from the self-assessment of Community Care and the agreed recommendations for improvement for the service as well as a summary overview of performance.

The West Lothian Assessment Model applied an evidence based rigorous model – the European Foundation for Quality Management (EFQM) Framework. This required employees to consider the long-term impact of the service in the stated objectives.

The Depute Chief Executive explained that Community Care comprised of a wide range of services provided to adults with care needs. Services included Care at Home, Care Homes, Occupational Therapy, Sheltered Housing and Housing with Care, Support for People with Learning and Physical Disabilities and Support for People with Mental Health problems.

The main aim of the service was to promote, enable and sustain independence and social inclusion for service users and carers. It was anticipated that an increasing number of people would seek control of their own care and support provision by accessing Direct Payments or other Self Directed Support options.

The report went on to advise that the nature of the demographic and economic challenges highlighted the need for effective outcome focused partnership working, particularly between health and social care. Within the responsibility of the Integration Joint Board (IJB) a series of commissioning plans for each of the main client groups was developed and agreed in 2016/17. These plans were informed by a detailed analysis of needs and resources.

Community Care was part of Social Policy and worked with NHS services, through the Health and Care Partnership (HSCP), to deliver integrated health and care services that would improve the wellbeing, safety and quality of life for people in West Lothian, particularly those most at risk in society.

The service made a critical contribution to the council's corporate priorities 4 and 6.

- Priority 4 – Improving the quality of life for older people
- Priority 6 – Delivering positive outcomes on health

The service went through the West Lothian Assessment Model process in 2017/18 with a representative group of employees from the service critically evaluating the service effectiveness in the nine criterion parts of the assessment model. The service scored 528.

Table 1 contained an overview of the service's score in the last four cycles. The trend column was based on a comparison between the base position and the current WLAM score.

The Review Panel in the WLAM Programme 2017/20 had three possible outcomes that would identify the progress and risk level of service performance and subsequently the level of scrutiny that would be applied to the service during the period of the WLAM programme. Table 2 provided the outcome of the Review Panel. Table 3 contained the evaluation of Performance Management in the service.

The Review Panel set out the following recommendations for the service:-

1. The Panel noted the immense value of the service to the community and the positive impact of the management team on how the service operated.
2. The Panel noted the performance of delayed discharge from hospital in West Lothian and that the current target was challenging to achieve, especially when prioritising the health and wellbeing of the patient. The service was to monitor and improve performance, where possible, in this measure.
3. It was acknowledged by the Panel that workforce planning was vital to the continued performance of the service and in some teams there were challenges in the labour market when attracting and retaining employees. Work was to continue to better promote the service as a potential employer in future recruitment activity.
4. The Panel noted that a range of measures were being pursued by the service with support from HR Services to improve sickness absence levels. The Panel encouraged the service to reduce absence levels through effective application of the policy, monitoring arrangements and proactive management and support.
5. The panel noted the positive improvement in five out of seven staff survey results in 2017/18 and encouraged the service to continue to embed appropriate recognition for the strong commitment shown by staff.
6. The service was to review the customer engagement approach

with the aim of improving the response rates to customer satisfaction surveys.

7. The service was to ensure trend chart commentary provided a clear explanation of trends, giving details of the reasons for dips and peaks in performance.
8. The service was to continue to review targets and thresholds set for performance indicators, ensuring they encourage improved levels of performance.
9. The service was to continue to develop the benchmarking approach identifying appropriate benchmarking and using this to improve performance.

An overview of the performance indicators categorised as Public or High Level were included in Appendix 2 to the report.

The service had four indicators in the Local Government Benchmark Framework that were aligned with the activity of Community Care. The data for 2017/18 had not yet been published however the performance and ranking information for 2016/17 was as follows:

- SW1 – Home care costs per hour for people aged 65 or over.

WLC had an average cost of £28.73 per hour in 2016/17. This cost was higher than the Scottish average of £22.54 and ranked at 27 (out of 32) overall in Scotland.

- SW2 – SDS spend on adults 18+ as a percentage of total social work spend on adults.

A total of 1.90% of Social Work spend for adults in West Lothian was through Self Directed Support. This was lower than the Scottish average of 6.4% and ranked at 30 (out of 32) overall in Scotland

- SW3 – Percentage of people aged 65 or over with intensive needs receiving care at home.

A total of 35.20% of adults aged 65 or over with intensive needs in West Lothian received care at home in 2016/17. This was marginally lower than the Scottish average of 35.27% and ranked at 14 (out of 32) overall in Scotland.

- SW5 – Residential costs per week per resident for people aged 65 and over.

WLC had an average cost of £394.73 per week in 2016/17. This cost was higher than the Scottish average of £375.06 and ranked at 20 (out of 32) overall in Scotland.

The Community Care service also actively engaged with National and Local Groups to share best practice and learn from emerging issues in

other areas.

In conclusion it was advised that Community Care completed the WLAM process as part of the council's corporate programme of self-assessment. This helped to ensure that excellent practice and performance was supported and that the principle of continuous improvement was adopted in all council services.

The report recommended that the Committee:-

1. Note the outcome from the WLAM and Review Panel process;
2. Note the recommendations for improvement;
3. Agree any other recommendations that may improve the performance of the service.

The Committee then asked a number of questions in relation to the key risks to the service.

It was explained that a key risk to the service was in relation to recruiting and retaining staff. Working in this field often meant that an employee was often working alone and it was therefore essential that they felt safe whilst carrying out their duties. It was also noted that it was difficult to attract staff into community care if the salary was not competitive. Workforce planning was a key element for the service and meetings had taken place with providers and West Lothian College in an effort to attract younger people into the service.

The Committee was interested to know how the service engaged with people with complex needs. It was advised that engagement often took place through agencies or advocacy services for people with incapacity, however as response rates were low, improvements were sought through the set-up of focus groups.

In answer to questions raised in relation to support for carers of dementia patients the officer responded that the service had invested in technology that was able to assess and establish a pattern of every-day living needs. From this pattern a personalised support plan which best suited the needs of the patient and care was then provided to the carer.

It was also noted that in circumstances where the carer was no longer able to continue home care and professional intervention was required, discussions would have previously taken place with the carer and Community Care to consider the alternatives to home care if and when it became necessary.

Whilst it was acknowledged that the cost of care homes had gone up it was explained that everything that was done was designed to improve quality. It was also acknowledged that a robust strategy was required to be developed in an effort to respond to workforce challenges, including consideration of providing training to the existing workforce to carry out other duties.

Decision

To note the terms of the report.