

Classification:	Decision Type:
Open	Non-Key

Report to:	Cabinet	Date: 04 September 2024		
Subject:	Adult Social Care Performance Quarter One Report 2024/25			
Report of	Report of Deputy Leader and Cabinet Member for Health and Wellbeing			

Summary

1. This is the Adult Social Care Department Quarter 1 Report for 2024-25. The report outlines delivery of the Adult Social Care Strategic Plan, preparation for the new CQC Assessment regime for local authorities and provides an illustration and report on the department's performance framework.

Recommendation(s)

2. To note the report.

Reasons for recommendation(s)

3. N/A.

Alternative options considered and rejected.

4. N/A.

Report Author and Contact Details:

Name: Adrian Crook

Position: Director of Adult Social Services and Community Commissioning

Department: Health and Adult Care

E-mail: a.crook @bury.gov.uk

Background

5. This is the Adult Social Care Department Performance Report covering Quarter 1 of 2024-25.

Links with the Corporate Priorities:

The Adult Social Care is Department is committed to delivering the Bury 'LETS' (Local, Enterprising, Together, Strengths) strategy for our citizens and our workforce.

Our mission is to work in the heart of our communities providing high-quality, person-centred advice and information to prevent, reduce and delay the need for reliance on local council support by connecting people with universal services in their local communities.

For those eligible to access social care services, we provide assessment and support planning and where required provide services close to home delivered by local care providers.

We aim to have effective and innovative services and are enterprising in the commissioning and delivery of care and support services.

We work together with our partners but most importantly together with our residents where our intervention emphasises building on individual's strengths and promoting independence.

We ensure that local people have choice and control over the care and support they receive, and that they are encouraged to consider creative and innovative ways to meet their needs. We also undertake our statutory duties to safeguard the most vulnerable members of our communities and minimise the risks of abuse and exploitation.

Equality Impact and Considerations:

6. In delivering their Care Act functions, local authorities should take action to achieve equity of experience and outcomes for all individuals, groups and communities in their areas; they are required to have regard to the Public Sector Equality Duty (Equalities Act 2010) in the way they do carry out their work. The Directorate intends to drive forward its approach to EDI, ensuring that equality monitoring information is routinely gathered, and consider how a realistic set of S/WL-term objectives may help to focus effort and capacity.

Environmenta	I Impact and	Considerations:
---------------------	--------------	-----------------

7. N/A

Assessment and Mitigation of Risk:

Risk / opportunity	Mitigation
N/A.	N/A.

Legal Implications:

7. This report demonstrates the Council's preparation for the new CQC inspection regime, its Care Act 2014 statutory duties and the strategic plan for Adult Social Care.

Financial Implications:

8. There are no financial implications arising directly from this report.

Appendices:

Appendix - Data sources and what good looks like.

Background papers:

Adult Social Care Strategic Plan 2023-2026

Please include a glossary of terms, abbreviations and acronyms used in this report.

Term	Meaning	
CQC	Care Quality Commission	

Adult Social Care Performance Report for Quarter One, 2024/25

1.0 Executive Summary

- 1.1 This report provides a summary of the performance of the Adult Social Care Department during Quarter 1 of 2024-25. The report outlines delivery of the Adult Social Care Strategic Plan, preparation for the new CQC Assessment regime for local authorities and provides an update on the department's performance framework. It also provides an opportunity to reflect on the achievements of the last year and which areas require further improvement.
- 1.2 This first quarter saw a review of last year's strategic objectives and a reset of our priorities for the coming years. This resulted in the addition of a priority on supporting carers because this year sees the preparation of the next Carers Strategy due for 2025 onwards along with the recommissioning of our carers service where a new contract will start on 1st April 2025
- 1.3 The department also reset a number of our obsessions (see 2.5 below) to ensure focus on areas we hope to see significant improvement in. This saw the addition of people waiting for a social work assessment and increasing the number of people who provide feedback about their experience of receiving support.
- 1.4 Much positive work has taken place over the last quarter with many of our ongoing transformation programmes moving forward at pace with significant progress being achieved in all 6 of our strategic priorities
- 1.5 Despite a drop in people contacting us for support, which we will monitor, we actually saw our activity increase in the quarter with both more reviews and more assessments taking place. This is a result of our investment in and commitment to reducing waiting numbers and waiting times. This is particularly evidence in the large reductions in people waiting for a review following investment in additional staff last year.
- 1.6 We reported last year that we were disappointed not to see an increase in people with a learning disability in paid employment despite a real focus on this in 23/24 and huge improvements in our employment support services. We were concerned this was a recording issue and we are pleased to report this was correct and the numbers of people with al learning disability now in paid employment nearly doubled from 2.6% to 3.8% of the people living with a learning disability known to us, The best performance in our region is currently 4.1% so whilst we have further to go this is a huge improvement.

2.0 Delivery of the Adult Social Care Strategic Plan

2.1 Adult Social Care are committed to delivering the Bury 'LETS' (Local, Enterprising, Together, Strengths) strategy for our citizens and our workforce. Our mission is to work in the heart of our communities providing high-quality, person-centred advice and information to prevent, reduce and delay the need for reliance on local council support.

2.2 The Adult Social Care Strategic Plan 2023-26 sets out the Department's roles and responsibilities on behalf of Bury Council. It explains who we are, what we do, how we work as an equal partner in our integrated health and social care system and identifies our priorities for the next three years:



- 2.3 To build a health and social care system which will sustain our communities in the coming years within the funding available to us we need to look at providing support in different ways. Our journey over the next 3 years will be one of improvement and transformation, with the development of clear assurance mechanisms to enable transparency and accountability to the communities we serve. As we explore what social care delivery will look like 3 years from now, we will ensure that people who receive our support and their carers are at the heart of co-producing our social care delivery model and that their voice is central as we navigate through the financial and systemic changes we must make. The need for a new strategic priority to 'connect unpaid carers to quality support services' has been identified alongside the preparation of a new carers strategy in 2024/25 and progress will be included in future quarterly reports.
- 2.4 As part of the refresh of our strategic plan we have identified new obsessions for us to focus on. An obsession is a key part of an outcome-based accountability framework where focus on these areas have positive knock-on effects right across our areas of work.
- 2.5 Over the next year we will focus on:
 - Reducing the number of people waiting for a social work needs assessment.
 - Increasing the number of peoples safeguarding outcomes partially or fully met.
 - Increasing the number of people leaving intermediate care services independently.
 - Increasing the number of people with a learning disability who are provided with the opportunity to live more independently.
 - Increasing the number of people accessing care and support information and advice that promotes people's wellbeing and independence.
 - Increasing the number of people with lived experience who provide feedback.
 - Increasing the number of unpaid carers identified.
- 2.6 The 2023-26 Strategic Plan includes an annual delivery plan to deliver the service priorities, this is monitored on a quarterly basis. Quarter 1 highlights include:

<u>Priority 1 – Transforming Learning Disabilities</u>

• The newly recruited Adult Social Care Preparing for Adulthood staff have completed their induction.

- The Together Towards Independence project governance was established with work streams in place, an initial project plan and measures approved.
- A real-time online reporting system has been introduced to allow us to track progress in training and employment achieved by local people with learning disabilities and autism. During April to June, the Bury Employment Service Team (BEST) supported nine people into jobs, which is a significant achievement.

Priority 2 – Delivering Excellence in Social Work

- A draft progression policy for social workers has been produced and shared with managers to cascade to teams for feedback.
- New case file audit and feedback forms have prepared for the Social Work Quality board for further design and feedback. Their purpose is to enable the regular collection of feedback from people in receipt of care and support.

Priority 3 – Superb Intermediate Care

- An internal commissioning review has been completed and a report with recommendations and action plan has been prepared as part of the IMC services review. Task and Finish groups have been initiated, concentrating on specific actions from the plan.
- Reablement coordinators have been analysing service delivery data to establish a starting benchmark. They are working alongside the reablement team to increase performance and productivity by understanding data and KPIs.
- The IMT Quality Assurance meeting is continuing to oversee the plans to ensure that a strengthsbased ('I statements') approach has been undertaken. This approach continues to support great outcomes for Bury residents.

Priority 4— Making Safeguarding Everybody's Business

- The Safeguarding Adults Board has signed-off of a multi-agency MARM protocol.
- The Strategic MARM Panel has been established with multi-agency partnership buy-in.
- The 'Safeguarding Transformation' programme mandate has been agreed with Adults Senior Leadership Team.
- A Safeguarding Operational Group has been established for management of Safeguarding Adults Review (SAR) recommendations.

Priority 5— A Local and Enterprising Care Market

- Housing programmes for extra care and older people's accommodation scoping has been completed and potential sites are being explored.
- Initial scoping and engagement for the Prevention and Wellbeing Strategy has been completed.
- The Dementia Steering Group is meeting monthly to develop commissioning action plans in line with national and local policy.
- The Ageing Well Steering Group is meeting monthly and has completed initial scoping of an Ageing Well strategy.
- The current Provider Workforce Support Offer has been extended to help Adult Social Care
 Providers with permanent recruitment as well as reducing the use of agency staff by providing
 access to a bank of flexible workers. This will allow for the procurement of a permanent support
 offer moving forward.

Priority 6 – Connect Unpaid Carers to Quality Support Services

• Engagement and consultation for the Carers Strategy has been completed along with data analysis of demographics/support needs of carers.

 N-Compass has developed a proposal for Bury, Rochdale and Oldham Councils to connect carers to services when they are discharged from Hospital, through the Accelerated Reform Fund.

3.0 Update on CQC Assessment of Local Authorities

- 3.1 Since the CQC published its finalized assessment guidance for local authorities in December 2023, it has now contacted over 40 councils (<u>Local authority assessment reports Care Quality Commission</u>) as it works towards assessments of all 153 councils over two years. No local authorities in Greater Manchester had been contacted at the time of writing.
- 3.2 Local progress in terms of CQC Assessment readiness activity includes:
 - Continuing to compile the CQC Information Return.
 - Preparation of a self-assessment of Adult Social Care in Bury in conjunction with briefings for senior stakeholders across the Bury health and care system.
 - A 'Getting the Call' plan for pre-assessment planning is in place.
 - Local key contacts for the CQC for the site visit have been confirmed.

4.0 Highlight Report for Quarter 1, 2024/5

Adult Social Care - Quarterly Highlight Report - Quarter 1								
	Performance Measures				ata of Travel	Rank (higher is better)		Rank (lower i better)
Obsessions			Polarity	Sparkline	Lastest Data Direction of	CIPFA (16) 22/23	NW (24) Q4 23/24	GM (8) Q1 24/25
Reduce the number of people waiting for a	Number of people on waiting list for ASC needs assessment	Q	L	_	90 🕝			2
social work needs assessment	Median number of days waiting for an ASC needs assessment	Q	L		39 🕝			6
Increase the number of people who have their	Proportion of people that were asked about their outcomes	Q	н	~	86% 🔕		9	
safeguarding outcomes partially or fully met	Of those who expressed outcomes the proportion of people who have their safeguarding outcomes fully or partially met	Q	н	V/-	95% ()		7	
Increase the number of people leaving	The proportion of people who received short-term services during the year where no further request was made for ongoing support	Q	Н	~~	89% 🕥	8	8	
intermediate care services independently	The proportion of older people (65+) who were still at home 91 days after discharge from hospital	Α	Н	V	86% 🔕	8		
Increase the number of people with a learning	Number of people trained in the progression model	Q	Н		38			
disability who are provided with the opportunity to live more independently	Number of customers who have had an assessment or review using the progression model [TBC]	Q	Н					
Increase the number of people accessing care and support information and advice that	The proportion of people and carers who use services who have found it easy to find information about services and/or support	Α	Н	^	66% 🕥	11		
promotes people's wellbeing and independence.	The proportion of people who use services, who reported that they had as much social contact as they would like	Α	Н		46% 🕗	11		
Increase the number of people with lived experience who provide feedback	Number of feedback provided [TBC]	Q	н				\overline{Z}	
Increase the number of unpaid carers identified	Total number of new carers registered with Bury Carers' Hub	Q	Н	1	70 🔕			

Quarterly Measures: updated Q1 24/24

The Department has adopted an outcome-based accountability framework to monitor performance and drive improvement. Several outcomes have been chosen that will change if the objectives of our strategic plan are met, we call these our obsessions. An obsession is a key part of an outcome-based accountability framework where focus on these areas have positive knock-on effects right across our areas of work

Reduce the number of people waiting for a social work needs assessment.

The first quarter of the 2024/25 year has been marked by a robust performance in the area of assessments. The data from page 12 of the report provides a comprehensive overview of our achievements and the areas where we aim to improve further.

During this period, we have seen a **steady increase in the number of assessments completed**, which is indicative of our department's enhanced capacity and efficiency. The average time between initial contact and completion of assessment has seen a **notable decrease**, demonstrating our commitment to providing timely support to those in need.

Our team has worked diligently to streamline the assessment process, introducing new methodologies that have significantly improved our response times. We have also focused on staff training, ensuring that our social workers are equipped with the latest tools and knowledge to conduct thorough and effective assessments.

Moreover, we have taken steps to ensure that our assessments are not just quick, but also of high quality. We have implemented a quality assurance framework that allows for regular review and improvement of our assessment procedures. This has led to more accurate identification of needs, enabling us to tailor our services more effectively to each individual's circumstances.

As we continue to refine our processes, we remain dedicated to the principle that every individual who appears to have needs for care and support should receive a comprehensive assessment. Our goal is not only to maintain the improvements we have achieved but to build on them, ensuring that our assessments are both prompt and of the highest possible standard.

Increase the number of people who have their safeguarding outcomes fully or partially met

Asking people what outcomes they want to achieve and whether they have them during a safeguarding intervention is a central component of making safeguarding personal.

The making safeguarding personal framework was developed to provide a means of promoting and measuring practice that supports an outcomes focus and person led approach to safeguarding adults The framework aims to enable councils and SABs to better identify how practice is impacting on outcomes, indicate areas for improvement, enable bench marking, and share best practice and learning.

As stated in the Q1 update below we are now meeting our 23/24 obsession to ensure that we are asking meeting their outcomes. We are now working on our 24/25 obsession to fully or partially achieving those outcomes; the data now shows that we are now meeting this obsession. However, when this was discussed at the Safeguarding Operations Group, we have taken an action to review the data we do expect that if there is a slight data error. However, we still are confident that we are making improvements in this area.

Increase the number of people leaving intermediate care independently.

Intermediate Care is a range of services aimed at preventing, reducing and delaying the need for care, helping people recover after hospital or avoid being admitted.

Rarely do we find people keen to be dependent upon adult social care, so it is important we have services available that aim to prevent this. This is why continuing to improve these services are a key priority in our plan.

This indicator is available quarterly and shows that 89% of the people who use our intermediate care services receiving no ongoing long-term care which is an improvement on the 84% last quarter. which means we are currently ranked 8 out of 24 in the Northwest. This metric continues to improve due to the quality checks and a strengths-based approach.

People with learning disabilities or autism provided with the opportunity to live more independently

Our "Together Towards Independence" programme brings together commissioners, Providers and social workers to redesign how we support people with learning disabilities or autism to live more independently.

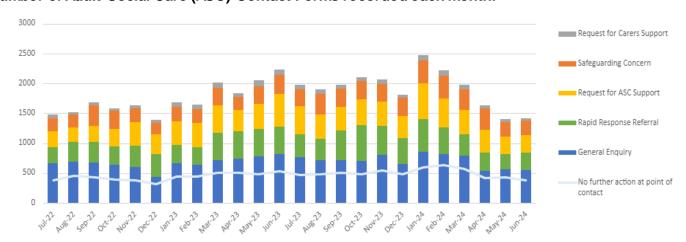
Over 40 social workers have been trained April-June to use strengths-based approaches when they assess people; and we are developing ways of making sure that good practice is embedded and self- sustaining. Workshops are planned in August and September to engage with Providers of care and accommodation to improve our services and re-design processes.

Pilot work in 23-24 using this strengths-based approach showed that it's possible to achieve better outcomes for people whilst providing less care, this led to our residents becoming more independent, better able to live in their communities locally, and needing fewer services. This is now being scaled up across all learning disability services.

4.1 Contacts

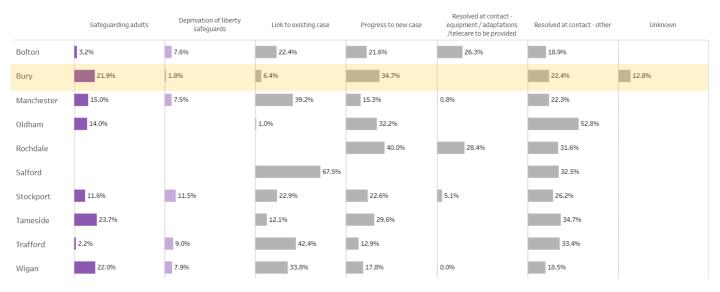
The primary means of public contact to request support, information and advice is through our care, connect and direct office (CAD). A higher proportion of contacts resolved by CAD means that people's enquiries are being dealt with straightaway and not passed on to other teams.

Number of Adult Social Care (ASC) Contact Forms recorded each month.



How does Bury Compare?

Contacts by Outcome | May 2024



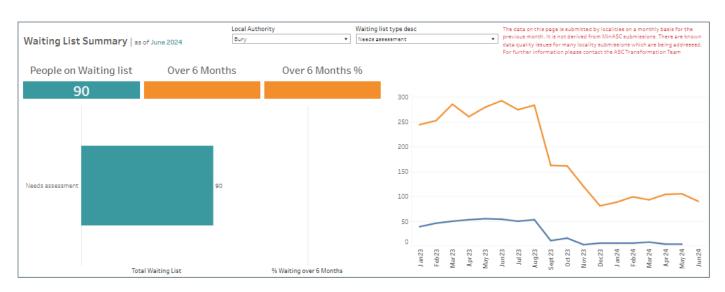
Contacts – Q1 commentary

This shows the number of contacts the department receive each month and what they were about. It also illustrates the number resolved by our contact centre.

After a busy Q4 2023/24, April, May and June were quieter for CAD with volumes returning to levels not seen since 2022. The reduction was consistent for all types of contact, and nothing has changed externally that would influence this so we will monitor this going forward.

4.2 Waiting Times for Assessments and Reviews

People awaiting an assessment or review of their needs by social workers, occupational therapists or deprivation of liberty safeguards assessors. Reduced waiting times lead to improved outcomes for people because they are receiving a timelier intervention.



How does Bury Compare?



Waiting list - Q1 commentary

Significant progress has been made in reducing the number of individuals awaiting a social work needs assessment. As of June 2024, we have successfully decreased the waiting numbers by approximately two-thirds, a testament to the efficacy of our targeted initiatives under the oversight of the Performance and Improvement Board and the dedication of our staff. We now have only 90 waiting to see a social worker and no-one over 6 months.

This achievement was facilitated by the strategic investment in expanding our Reviewing Team, which directly addressed the backlog of overdue reviews, the results of which can be seen later in this report. The government's MSIF funding enabled this reduction by allowing us to recruit additional social workers into

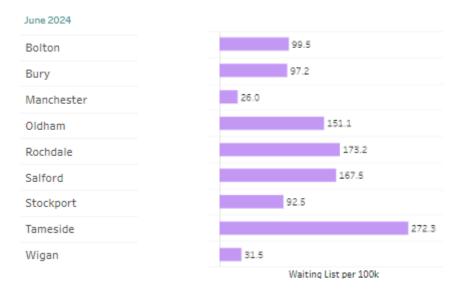
our community teams, but we acknowledge the necessity for continued efforts to maintain and improve upon this progress.

Having identified in previous years the lack of prompt allocation of young people transitioning into adult social care we have invested in additional social work and business support roles, we have established a dedicated resource for 'preparing for adulthood,' ensuring a smoother transition for these individuals. The collaboration between the Adults' department and Children's and SEND colleagues has been instrumental in co-producing a revised Preparing for Adulthood Standard Operating Procedure, reflecting our commitment to continuous improvement.

As we move forward into the 2024/25 period, we remain focused on our mission to reduce waiting times further. Our strategies are informed by data, informing a targeted approach via our governance boards to deliver timely allocation and intervention reducing waiting times. We are dedicated to enhancing our pathways and systems and ensuring timely assessments for all those in need despite increasing demand for our services. We have set ambitious targets for our workforce with a specific focus on median waiting times which are starting to impact. We will be building on progress in the next quarter by reviewing the NHS initiatives on 'Waiting Well' to establish if the same principles can be applied in Adult Social Care.

The measures implemented in Q1 have begun to show positive results, with a gradual reduction in waiting times. The department remains committed to further reducing the waiting list and will continue to monitor progress closely.

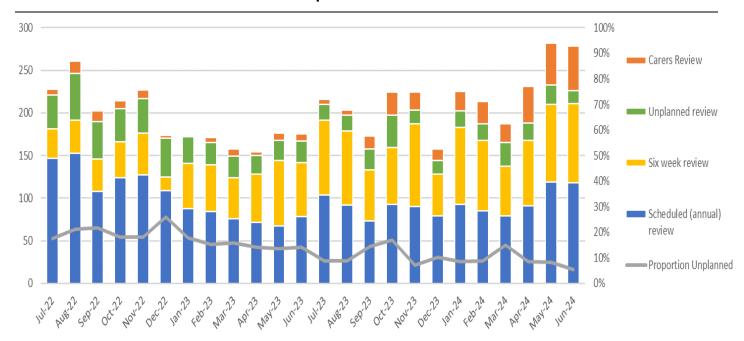
Further attention is required in people waiting for Waiting for Occupational Therapy assessments were at the end of June 190 people were waiting. Whilst too high this is one of the lower numbers waiting in Greater Manchester. A business case is currently being prepared to address this area for improvement.



4.3 Reviews

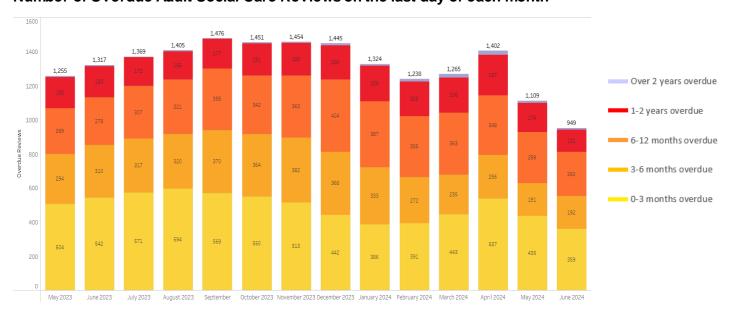
Adult Social Care reviews are a re-assessment of a person's support needs to make sure that they are getting the right support to meet their needs. Needs may change and new services and technology may give someone more independence and improve their wellbeing. A lower proportion of unplanned reviews means that people are support through scheduled reviews of their support needs rather than when a significant event has occurred requiring a change in support. Support packages should be reviewed every 12 months. It is important to note that it not just the adult social care reviewing team who undertake reviews, however, the majority of review activity is completed by this team.

Number of Adult Social Care Reviews Completed each month.



Note - the % axis references the grey line which is the proportion of unplanned reviews.

Number of Overdue Adult Social Care Reviews on the last day of each month



How does Bury Compare?

This is an annual measure and does not reflect the progress made in the last 6 months.

Metric	Bury	Northwest Average	Rank in Northwest (out of 22)
% of completed annual reviews in a rolling 12- month period	29.8%	57.3%	20 th
% of backlog of reviews overdue	6.4%	10.3%	6 th

Reviews – Q1 commentary

This shows the number of people who have had a review of their care and support and those who are overdue an annual review. All the 3000+ people receiving long term services should receive and annual review each year and those new or in short term services should receive a review in the first 6 to 8 weeks.

A review is an opportunity to ensure someone's care and support is meeting their needs and personalised to them. It is also an opportunity to ensure care is not resulting in dependence and provides an opportunity to reduce care to increase a person's independence. This also releases care back into the market to be used by others.

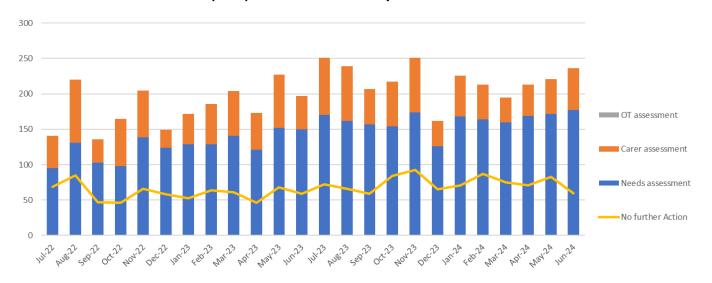
Within Q1 of 2024/25, there has been a significant month on month drop in the number of overdue reviews, with the figure in April reducing by 38.5% when compared with June's figures. This is significant progress when compared to previous months and is down to several factors, including: the expanded adult social care reviewing team now being fully staffed, as well as a big push on data quality across the system and ensuring that reviews are not incorrectly showing as overdue. The graphs also demonstrate the extra efforts which have been taken to target carers reviews, with considerably more carers reviews having been completed in Q1 than at any other period. Identifying and supporting unpaid carers is a departmental target and it is expected that by the end of Q2, there will not be any overdue carers reviews within Bury which will be a great achievement.

This is a very positive achievement for the department and further demonstrates where adopting an obsession drives positive performance.

4.4 Assessments

Local Authorities have a duty to carry out an assessment of anyone who appears to have needs for care and support, regardless of whether those needs are likely to be eligible. The focus of the assessment is on the person's needs, how they impact on their wellbeing, and the outcomes they want to achieve. Assessments where there was no further action are where there were no eligible needs identified or a person with eligible needs declined services. A lower number means that operation teams can focus their time on those people with identified needs.

Number of Adult Social Care (ASC) Assessments Completed each month.



Assessments – Q1 commentary

Despite the reduced number of contacts seen the high demand for assessments continues to be a challenge. To address this, the department has focused on optimising workflows through the implementation of the short-term assessment to enable proportionate assessment in urgent cases and maintained a focus on caseload reviews to ensure workflow. additional resources strategically. Maintaining a sufficient workforce to meet demand remains a priority. The department is exploring further recruitment and training initiatives to ensure a robust and responsive workforce.

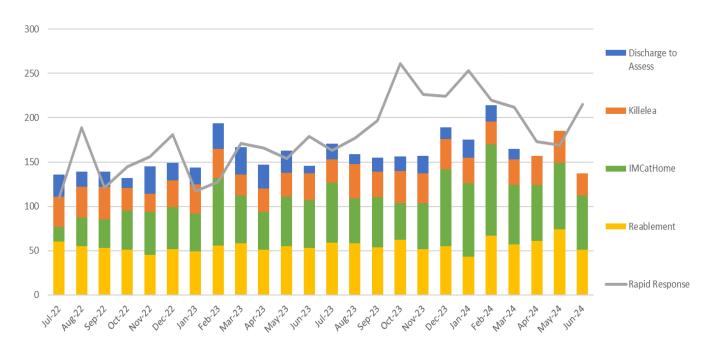
The focus on efficiency and workforce capacity has resulted in a stable assessment completion rate, with the time taken to complete assessments improving compared to the Greater Manchester (GM) average. Moving forward, the department will continue to monitor demand and make necessary adjustments to staffing and processes to ensure that the high standards of service are maintained.

By addressing these areas with targeted strategies and ongoing improvements, Bury Council's Adult Social Care Department aims to enhance service delivery and outcomes for all individuals requiring assessments and support.

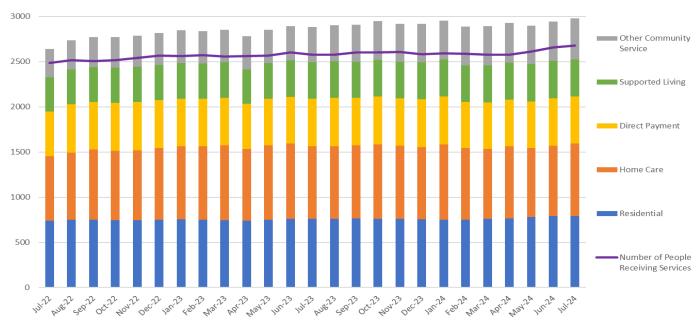
4.5 Services

Adult Social Care services may be short-term or long-term. Short-term care refers to support that is time-limited with the intention of regaining or maximising the independence of the individual so there is no need for ongoing support. Long-term care is provided for people with complex and ongoing needs either in the community or accommodation such as a nursing home. It is preferable to support people in their own homes for as long as it is safe to do so.

Number of Intermediate Care (short-term) services completed each month.

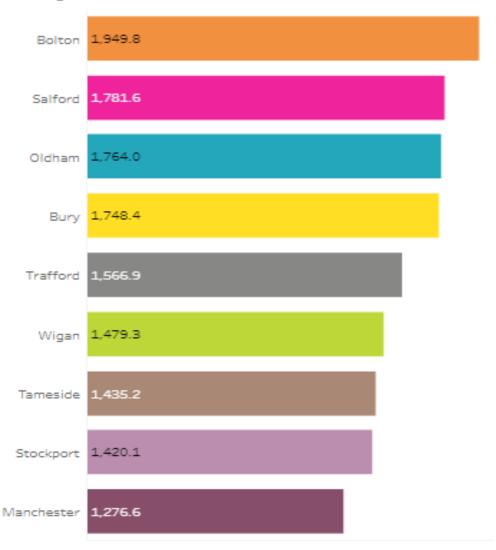


Number of Long-term Adult Social Care services open on the 1st of each month.



How does Bury Compare?

People receiving services per 100,000 population June 2024 - Direct Payment, Home Care, Long term nursing care and 2 more



Services - Q1 commentary

This shows the number of people we support in our various service types.

The first chart shows the number of people supported in our intermediate care services. These services aim to prevent, reduce and delay the need for long term care and support so the busier they are the better. May was the busiest month in quarter one due to the number of referrals received in April.

The whole service returned to a steadier state this quarter after seeing record numbers using the service as part of the post-Christmas push to facilitate hospital discharges. Intermediate Care at home and Reablement continue to see high numbers of referrals.

The number of people receiving long term care and support services in the community continued to grow and after a slowdown in that growth at the end of 23/24 more than made up for it in the first quarter of 24/25 with larger than expected growth in the numbers of people receiving home care as the reduction of 50 people at the end of the last year was completed reversed.

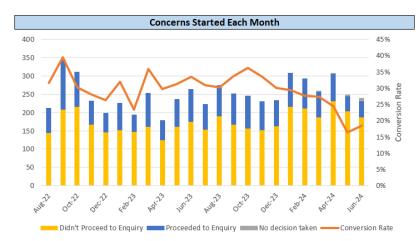
Despite these changes Bury continues to provide services to its residents at the same level as before.

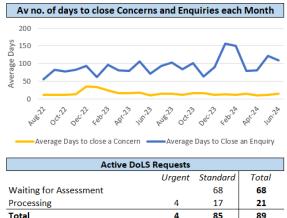
4.6 Safeguarding

Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working **together** to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action.



Open Safeguarding Enquiries							
	Number	Av. Days	Max Days				
ACS Safeguarding Team	96	95	383				
Hospital Social Work Team	5	12	35				
Learning Disability Team	3	58	138				
ОРМНТ	6	75	137				
Community Mental Health Team							
Strategic Adults Safeguarding Team	12	138	652				
Operation Crawton	11	583	742				
Total	133	134	742				





How does Bury Compare? - Still to update

Metric	Bury	Rank in Northwest (out of 22)
Conversion Rate	30%	12 th
Making Safeguarding Personal – Asked	72%	9 th
Making Safeguarding Personal - Outcomes	83%	7 th

Last Updated: Q4 2023/24

Safeguarding – Q1 commentary

A continuing picture of improvement for Bury Adult Safeguarding. The work on our obsession from 23/24 to ask people their outcomes is now 98% well above our target of 90% and we will work to hold this high standard moving forward. The bar chart shows the steady improvement made in this area. We are now working on fully or partially achieving those outcomes; which is now rated at 100%. However, when this was discussed at the Safeguarding Operations Group, we have taken an action to review the data as achieving 100% in any area does raise questions, we do expect that if there is a slight data error it will remain >95% and show a good improvement.

We have moved up considerably in the last 12 months at a regional level in Making Safeguarding Personal. Now we are in the top 10 local authorities in the Northwest, and there is potential as new data is collected and collated that this will improve further.

S.42 enquiry length times have decreased over the last quarter and showing a good picture. This is partially due to reviewing how allocations have been taking place and focusing the front-line staff in completion of

paperwork where the risk has already been managed. We have undertaken some reflective sessions over the last 6 months with the safeguarding service to support and promote a shared risk culture. This has potentially, and by design, allowed more positive risk management on safeguarding outcomes.

Operation Crawton (Edenfield) is concluding from a safeguarding perspective; we are pushing for the one local authority that still needs to return their S.42 enquiries so that we can close all statutory work in this area. Our Head of Adult Safeguarding continues to meet with his counterpart in this area to get this piece of work finalised.

Deprivation of Liberty Safeguards (DoLS) continues to perform well with no concerns from a supervisory body perspective. We are starting to set up our training for our first cohort of internal Best Interest Assessors which will support this statutory process.

4.7 Complaints and Compliments

Complaints

Period 2024/25	Number of complaints received	Decision			20 working day timescale		
	received	Upheld	Partially Upheld	Not Upheld	Within	Outside	
Q1	18	1	3	12	8	10	

Compliments

Period 2024/25	Source				
	Person receiving or had received services	Relative of person receiving or had received services	Other (incl. various survey responses)		
Q1	9	26	209		

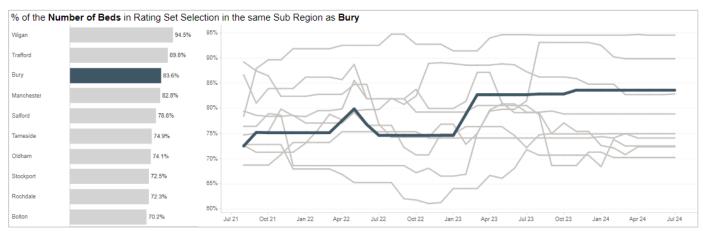
Complaints and Compliments – Q1 Commentary

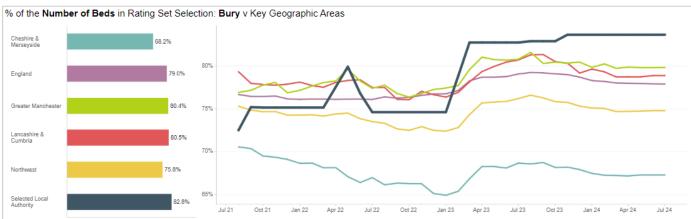
Complaints remain steady and are at a similar level to this time last year.

Compliments continue to be high especially for where we provide services directly such as our Older People's Staying Well Team and our intermediate care services.

4.8 State of the Care Market

Number of care home beds rated good or outstanding.





Quality Ratings of Bury's Home Care Agencies



Last Updated: Q1 2024/25

State of the Care Market - Q1 commentary

The top charts show the quality ratings of care homes in Bury compared to the rest of Greater Manchester showing the % of beds rated good or outstanding. The second chart shows Great Manchester compared to the other regions in England and the Northwest. The final chart shows the rating of home care agencies operating in Bury. For both charts the nearer to 100% the better.

The overall quality of our care homes continues to increase with Bury now 3rd amongst its GM Neighbours and performing well above the England average and the average of all Northwest regions.

4.9 Adult Social Care Summaries of Submitted and Published Data

The 23/24 SALT was submitted on 4th June, these are the main changes to the data from the 22/23 SALT.

Total Requests for support – this data was previously an outlier, decreased by 15% to 7817 requests for support.

ASCOF 2D outcome of short-term services increased from 78.8% to 80.8%.

ASCOF 2B(1) at home 91 days later has remined constant at 86.8% to 86.4%

Number of long-term service users during the year has remained constant. While those open at the end of the year has increased by 2%, 58 people.

Res/nursing placements during the year and those remaining open at the end of the year, have both increased by 5%.

ASCOF 2A Permanent Admissions 65+ rate has increased from 591 to 674. This equates to an increase of 32 people from 207 to 239.

ASCOF 1C(2a) Proportion who receive direct payments has decreased from 28.5% to 27.6%

ASCOF 1E: LD in employment has increased from 2.6% to 3.8%

ASCOF 1G: LD in settle accommodation has remained constant at 90.6 to 90.3%

Commentary

The Adult Social Care Short- and Long-Term support return (SALT) is an annual report submitted by all councils. It is due to be phased out and replaced by a Client Level Data submission which is a quarterly submission and the data to produce most of the other charts in this report.

Two items are of note in this submission. Firstly, our total request for support, we are always an outlier in this indicator which measures the number of times people need support. This is because Bury is one of the very few councils that delivers the locality Rapid Response Service. This service sees up to 350 people per month and this activity is included in our data making us look higher when compared to others.

The second item to note relates to people with a learning disability in employment, this is a significant increase and is a result of our focus on this in the previous year as one of our obsessions. We had feared we had not been recording it correctly in the last report and now we have corrected this we can see a significant improvement.

ASC Users Survey: Question Response Summary

Analysis of data from the ASC Users Survey, comparing data from the 23/24 ASC Users Survey with that from the 22/23 ASC Users Survey and against the England average for provisional 23/24 data submitted. Questions where data has changed since the last survey or is significantly different from the England average:

Responses regarding the quality of care and support services accessed in the last 12 months:

1. Overall Satisfaction with Care and Support Services:

 The percentage of respondents who were quite dissatisfied increased from 2.3% to 6.4%, which is 3.7% higher than the England average of 2.7%.

2. Quality of Life:

 Respondents rating their quality of life as good increased from 24.5% to 29.7%, 0.7% lower than the England average of 30.4%.

3. Feeling Safe:

The percentage of respondents who feel as safe as they want increased from 66.4% to 72.7%, which is 1.9% higher than the England average of 70.8%.

4. Finding Information and Advice:

The percentage of respondents finding it fairly/very difficult to find information decreased from 22.6% to 18.7%, which is 0.2% lower than the England average of 18.9%.

Responses regarding personal health and independence:

5. Anxiety or Depression:

Respondents reporting extreme anxiety or depression decreased from 11.6% to 6.9%, which
is 2% lower than the England average of 8.9%.

6. Indoor Mobility:

 Respondents who can't get around indoors by themselves decreased from 21.8% to 17.1%, which is 5.7% lower than the England average of 22.8%.

7. Managing Finances and Paperwork:

 Respondents who can easily manage finances and paperwork by themselves increased from 18.4% to 25.4%, which is 5.5% higher than the England average of 19.9%.

ASC Users Survey: Additional Questions Responses

Question 12b - If you have had community equipment, telecare or a minor adaptation to your home what impact has this had upon your level of independence?	No of Responses	Percentage of Responses
a) I have not had community equipment, telecare or minor adaptation	157	45.2%
b) Made it much better	121	34.9%
c) Made it a little better	51	14.7%
d) Had no effect	17	4.9%
e) Made it a little worse	0	0.0%
f) Made it a lot worse	1	0.3%
Total No of respondents	347	

Question 13b - Do you have access to the Internet and e-mail?	No of Responses	Percentage of Responses
a) Yes, I have access to the Internet and e-mail	133	35.8%
b) Yes, Someone else can access it on my behalf	129	34.7%
c) No	110	29.6%
Total No of respondents	372	

Two additional questions were added to the Adult Social Care Survey regarding use of equipment and assistive technology following the launch over a year ago of our new assistive technology service. Response show that use of equipment and assistive technology 94.8% of people said it had a positive impact on their level of independence

A further question was asked about access to the internet. This was asked to better understand the potential risk of digital exclusion of adult social users as we create more digital ways of interacting with our department and also wider council services. As only 35.8% of the people who responded are able to access the internet unaided demonstrates we must be cognisant of this and always ensure a range of alternative routes of connecting with the department are always available.

Appendix - Data sources and what good looks like

Section	Chart	Data Source	What does good look like?	
Contacts	Number of Adult Social Care (ASC) Contact Forms recorded each month.	Contact Records in LiquidLogic: Contact Type Contact Outcome	Six Steps to Managing Demand in Adult Social Care: ≈ 25% of contacts go on to receive a full social care assessment.	
	GM Comparison			
Waiting Lists	Waiting List Summary Needs and Carers Assessments: No of Cases Waiting for Allocation	Professional Involvement in LiquidLogic: Awaiting allocation work trays Brokerage Work trays Overdue Review Tasks	Lower is better	
	GM Regional Comparison	DoLS data from the database.		
Assessments	Number of Adult Social Care (ASC) Assessments Completed each month	Assessment forms in LiquidLogic		
	GM Regional Comparison	Av. number of days from the contact start date to the assessment end date	Lower is better	
Services	Number of Intermediate Care (short-term) services completed each month	All IMC Service data from 4 data sources		
	Number of Long-term Adult Social Care services open on the 1 st of each month.			
	Proportion of Home Care vs Nursing and Residential Care Services compared against 2 years ago	Service data from Controcc Grouped by Service Type Count of service types, not people	Lower Residential & Nursing Care is better	
	Northwest Regional Comparison			
Reviews	Number of Adult Social Care Reviews Completed each month	Review forms completed in LiquidLogic	Higher number of completed reviews. Lower proportion of Unplanned reviews.	
	Number of Overdue Adult Social Care Reviews on the last day of each month	Review Tasks in LiquidLogic past the due date	Lower is better	
	Regional Comparison	As above		
Safeguarding	Percentage of people who have their safeguarding outcomes met Outcomes were achieved	Completed safeguarding enquiries: Making Safeguarding Personal questions	Higher is better	
	Open Safeguarding Enquiries	Safeguarding enquiryforms on LiquidLogic and CMHT/EIT spreadsheets	Target: Enquiries closed in 56 days or less	
	Concerns Started Each Month	Contact Forms on LiquidLogic: form type safeguarding concerns		
	Average number of days to close Concerns and Enquiries each month	As above	Targets: Concerns closed in 3 days or less. Enquiries closed in 56 days or less	
	Regional Comparison	As above	Higher is better	