





Section 4: Adult Social Care

Adult social care

Introduction : Adult Social Care

• The collaboration of local health and social care services strives to minimize permanent placements in care homes, delay dependency, and promote independence.

• This section combines demographic insights into Lambeth adult social care service users, quantitative shortand long-term measures of service care use, as well as qualitative measures from the Adult Social Care Survey.

• The Adult Social Care Outcomes Framework (ASCOF) measures outcomes that matter to individuals, locally and nationally, using various data sources. It concentrates on enhancing quality of life, delaying and reducing the need for care, ensuring positive care experiences, and safeguarding vulnerable adults. ASCOF reports data at national and regional levels, integrating information from local authorities and the NHS in England.







1. Use and provision

- Admissions to residential and nursing care homes
- Nursing home beds
- Care home beds

2a. Adult social care framework SALT measures

- Proportion of people who use services who receive self-directed support
- Proportion of people who use services who receive direct payments
- The percentage of people aged 65 and over who were still at home 91 days after discharge from hospital into reablement services
- The percentage of people aged 65+ offered reablement services following discharge from hospital.
- The outcome of short-term services: sequel to service

2b. Adult social care framework ASCS measures

- · Social care-related quality of life
- · Adjusted social care-related quality of life
- The proportion of service users who have control over their daily life
- The proportion of service users who have as much social contact as they would like
- Overall satisfaction of service users with care
 and support
- The proportion of people who use services who feel safe
- The proportion of people who use services who say those services have made them feel safe and secure

1. Use and provision

Local health and social care services work together to reduce permanent placements in residential and nursing care homes. This is a good indication of delaying dependency and promoting independence. Research suggests where possible, people prefer to stay in their own home rather than move into residential care. This section covers the demographics of the population who use adult social care services and how satisfied they are. Reablement services can also be used to support people in their homes following a hospital admission and thus are included in this section.

Facts and figures

- In 2020/21 there were 116 permanent admissions to residential and nursing care homes per 100,000 aged 65+. The trend for admissions to residential and nursing care homes in Lambeth since 2018/19 appears to be decreasing. Lambeth's rate of permanent admissions is similar to London and better than England, and is ranked 22 out of 32 for local authorities in London where a lower ranking is better.
- In 2021 there were 1,098 care home beds for people 75+ in Lambeth and there were 786 nursing beds for people over 75.
- Local data shows there are 3,054 Lambeth service care users, who are at least 50 years old, in 2022, 2,359 (77%) of these are in community care, 310 (10%) are in nursing home care, and 385 (13%) are in residential care.

What's the inequality?

 National data shows people living in the most deprived areas of England are more likely to be admitted to a residential or nursing care home than people living in the least deprived areas



Adult social care in Lambeth



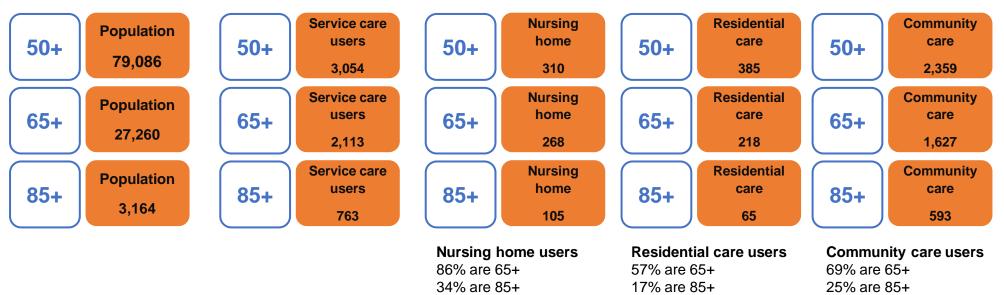




2022

The majority of Lambeth care users are in community care 1 in 4 are in nursing or residential care Stability of distribution over 5 years suggests long term care for

Stability of distribution over 5 years suggests long term care for service care users Majority of service care users are classified as Black or White ethnic category The distribution of sex is consistently 60:40 Female:Male.

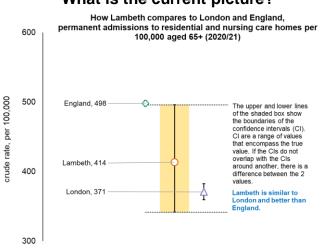




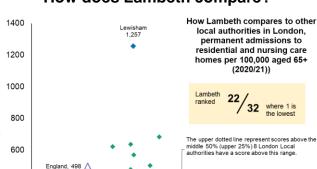
Permanent admissions to residential and nursing care homes per 100,000 aged 65+, Lambeth

What is the rationale?





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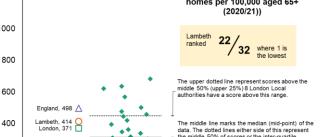


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What is the current picture?

Avoiding permanent placements in residential and nursing care homes is a good indication of delaying dependency, and local health and social care services will work together to reduce avoidable admissions. Research suggests where possible people prefer to stay in their own home rather than move into residential care.

What does the data tell us?

What is the current picture?

- In 2020/21 there were 116 permanent admissions to residential and nursing care homes per 100,000 aged 65+.
- A crude rate of 414 per 100,000 compared to 371 in London and 498 in England.
- The crude rate per 100,000 for Lambeth is similar to London and better than England.

What is happening over time?

- The underlying trend for permanent admissions to residential and nursing care homes is no significant change.
- Over the last year admissions have **decreased** by 15% in Lambeth compared to a 14% decrease in London and 15% decrease in England.
- Over the last 10 years admissions have decreased by 48% in Lambeth compared to a 31% decrease in London and 28% decrease in England.
- Over the last year the gap between Lambeth and London has narrowed and Lambeth has a better outcome than England.

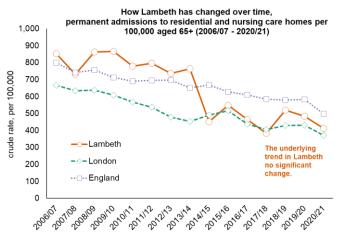
How does Lambeth compare?

- Compared to local authorities in London Lambeth has a similar value
- Values in London range between 130 and 683.
- Lambeth is ranked 22 out of 32 London local authorities where 1 is the lowest.
- Compared to Lambeth's CIPFA neighbours, areas with similar population and socioeconomic compositions, Lambeth has a higher value.
- Values for CIPFA neighbours range between 193 and 1257.
- Lambeth is ranked 12 out of 15 CIPFA neighbours where 1 is the lowest.

Are there any inequalities?

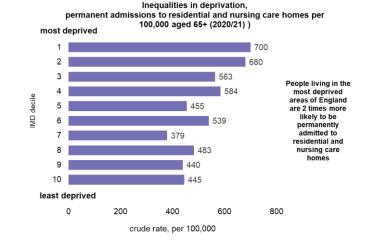
National data shows people living in the most deprived areas of England are more likely to be admitted to a residential or nursing care home than people living in the least deprived areas.





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Are there any inequalities?



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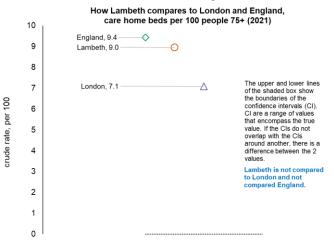


Care home beds per 100 people 75+

This indicator is higher or lower this does not mean better or worse

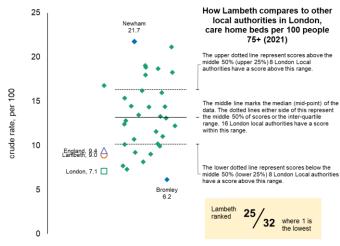






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How does Lambeth compare?



What is the rationale?

To understand the trends and variations in the availability of care home beds in nursing and residential care homes. The annual proportion of beds in care homes (all; nursing and residential) per 100 population aged 75 and over. This is an all-age indicator because people under 75 years of age can also use care home beds.

What does the data tell us?

What is the current picture?

- In 2021 there were 1,098 care home beds for people 75+ in Lambeth.
- A crude rate 9.0 of per 100 in Lambeth compared to 7.1 in London and 9.4 in England.
- · The crude rate for Lambeth is not compared to London and not compared to England.

What is happening over time?

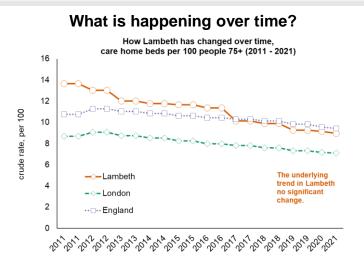
- The underlying trend for care home beds per 100 people 75+ is no significant change.
- Over the last year the number of care home beds per 100 people 75+ has decreased by 2% in Lambeth compared to a 1% decrease in London and 1% decrease in England.
- Over the last 5 years the number of care home beds per 100 people 75+ has decreased by 12% in Lambeth compared to a 9% decrease in London and 8% decrease in England.
- Over the last 10 years the number of care home beds per 100 people 75+ have decreased by 31% in Lambeth compared to a 22% decrease in London and 16% in England.
- Over the last year the gap between Lambeth and London has narrowed and the gap between Lambeth and England has narrowed.

How does Lambeth compare?

- Compared to local authorities in London Lambeth has a higher value.
- Values in London range between 6.2 and 21.7
- Lambeth is ranked 25 out of 32 London local authorities where 1 is the lowest.
- Compared to Lambeth's CIPFA neighbours, areas with similar population and socioeconomic compositions, Lambeth has a **higher** value.
- Values for CIPFA neighbours range between 2.3 and 10.5.
- Lambeth is ranked 15 out of 16 CIPFA neighbours where 1 is the lowest.

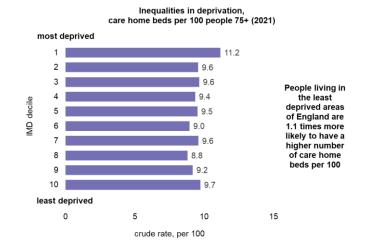
Are there any inequalities?

 National data shows people living in the least deprived areas of England are more likely to have a higher number of care home beds per 100 population over 75 than people living in the most deprived areas.



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Are there any inequalities?



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A link to the OHID Fingertips website for this indicator : nursing home beds per 100 people 75+

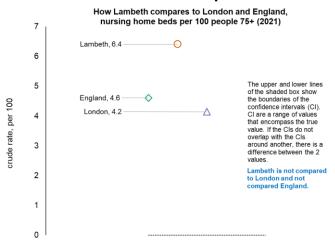


Nursing home beds per 100 people 75+

This indicator is higher or lower this does not mean better or worse

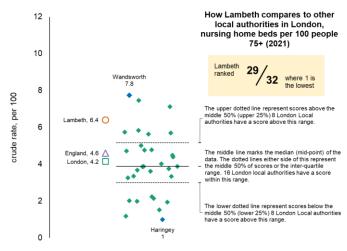


What is the current picture?



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How does Lambeth compare?



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What is the rationale?

To understand the trends and variations in availability of nursing home beds available in nursing homes. The annual proportion of beds in nursing homes per 100 population aged 75 and over. This is an all age indicator because people under 75 years of age can also use nursing home beds.

What does the data tell us?

What is the current picture?

- In 2021 there were 786 nursing beds for people over 75.
- A crude rate of 6.4 per 100 in Lambeth compared to 4.2 in London and 4.6 in England.
- The crude rate per 100 for Lambeth is not compared to London and not compared to England.

What is happening over time?

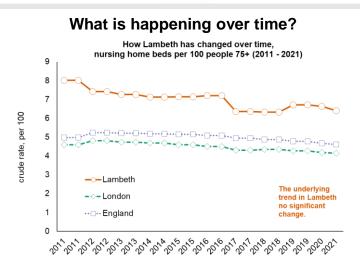
- The underlying trend for nursing beds per 100 population over 75 is no significant change.
- Over the last year the number of nursing beds per 100 population over 75 has decreased by 3% in Lambeth compared to a 1% decrease in London and a 1% decrease in England.
- Over the last 5 years the number of nursing beds per 100 population over 75 has increased by 1% in Lambeth compared to a 4% decrease in London and a 7% decrease in England.
- Over the last 10 years the number of nursing beds per 100 population over 75 has decreased by 14% in Lambeth compared to a 14% decrease in London and 12% in England.
- Over the last year the gap between Lambeth and London has widened and the gap between Lambeth and England has widened.

How does Lambeth compare?

- · Compared to local authorities in London Lambeth has a higher value.
- Values in London range between 1 and 7.75.
- Lambeth is ranked 29 out of 32 London local authorities where 1 is the lowest.
- Compared to Lambeth's CIPFA neighbours, areas with similar population and socio-
- economic compositions, Lambeth has a higher value.
- Values for CIPFA neighbours range between 1 and 7.75.
- Lambeth is ranked 15 out of 16 CIPFA neighbours where 1 is the lowest.

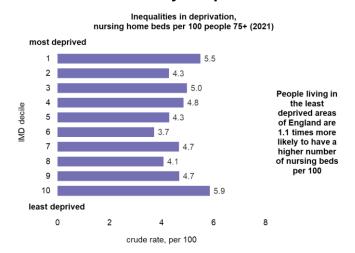
Are there any inequalities?

National data shows people living in the least deprived areas of England are more likely to have a higher number of nursing beds per 100 population over 75 than people living in the most deprived areas.



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Are there any inequalities?



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2. Adult social care framework measures

The Adult Social Care Outcomes Framework (ASCOF) measures how care and support services achieve outcomes matter to people. The ASCOF is used locally and nationally to set the priorities for care and support, measure progress, and strengthen transparency and accountability. It uses different data sources to generate these measures. It focusses on enhancing the quality of life for people with care and support needs, delaying and reducing the need for care and support, ensuring people have a positive experience of care and support, and safeguarding adults whose circumstances make them vulnerable and protecting users from avoidable harm. It reports on data at a national and regional level from data supplied from local authorities in England as well as data from NHS

ASCS indicators are simplified to a single number, often losing the full response from qualitative indicators; it samples a small proportion of the eligible population with a low response rate.

ASCOF data sources

Short and Long-Term Return (SALT) data tracks the client journey through the adult social care system in England. It comprises two main sections, short term support (described as 'STS' measures) and long term support (described as 'LTS' measures). It derives some of its structure from Adult Social Care Collections Data Dictionary. The Data Dictionary replaces the Equalities and Classifications (EQ-CL) Framework. The particular elements which are taken from SALT for the ASCOF are detailed in the companion document '<u>SALT sources for ASCOF 2022-23</u>'.

The Adult Social Care Survey (ASCS) is an annual survey for England. Service users are sent questionnaires, issued by Councils with Adult Social Services Responsibilities (CASSRs), in the period January to March to seek their opinion on a range of outcome areas. The eligible population for this survey covers all service users aged 18 and over in receipt, at the point data are extracted, of long-term support services provided or commissioned by the CASSR or an NHS health partner under Section 75 Arrangements and part of a care/support plan following an assessment of need. The survey seeks the opinions of service users and is designed to help the adult social care sector understand more about how services are affecting lives to enable choice and for informing service development.

Further information about the data sources and their quality is provided in this document <u>Measures from the</u> <u>Adult Social Care Outcomes Framework England 2022-23 Appendices</u>

Summary

- 24 measures in ASCOF
- 6 different sources
 - ASCS Adult Social Care Survey
 - SALT Short and Long-Term Return
 - MHSDS Mental Health Services
 Data Set
 - ONS Office of National Statistics
 - HES Hospital Episode Statistics
 - NHS England
- Data presented from 2022-23 ASCS
 where possible





Adult social care outcomes framework (ASCOF) indicators people aged 65 years and older 2022-23



London England Lambeth Measure Short and Long Term support (SALT) measures Proportion of people who use 97% services who receive self-directed 100% 93% 1C(1A) support Proportion of people who use services who receive direct 7% 16% 15% 1C(2A) payments The percentage of people aged 65 and over who were still at home 91 92% 85% 82% 2**B**1 days after discharge from hospital into reablement services The percentage of people aged 65+ offered reablement services 3% 4% 3% 2B2 following discharge from hospital. The outcome of short-term 67% 66% 74% **2D** services: sequel to service ASCOF 22 All ages (/ \/ |) Total number of 1,637 51,697 231,328 surveys sent out 2022-23 Π Ascof 2Usuable responses from 65+ pop 264 6,221 32,378 65+ (excluding learning 2022-23 disability support)

ASCS indicators are simplified to a single number, often losing the full response from qualitative indicators; it samples a small proportion of the eligible population with a low response rate.

Adult social care survey (ASCS) measures	Lambeth	London	England	Measure
Social care-related quality of life	18	18	19	1A
Adjusted social care-related quality of life	18	18	19	1J
The proportion of service users who have control over their daily <u>life</u>	66%	67%	74%	18
The proportion of service users who have as much social contact as they would like	39%	36%	42%	11
Overall satisfaction of service users with care and support	51%	56%	62%	3А
<u>The proportion of people who use</u> services who feel safe	62%	64%	70%	4A
The proportion of people who use services who say those services have made them feel safe and secure	74%	80%	86%	4B

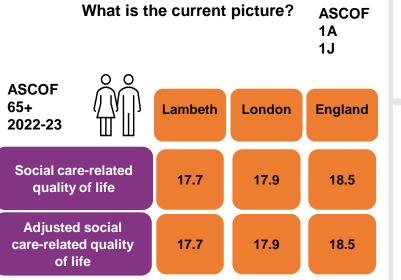
Adult social care



age friendly LAMBETH

Social care-related quality of life





This composite measure is an average quality of life score and uses responses to the Adult Social Care Survey. It covers eight domains identified in the ASCOT; control, dignity, personal care, food and nutrition, safety, occupation, social participation and accommodation. The full definition for this measure, and others, can be found in this document

Final_ASCOF_handbook_of_definitions_2018-19_2.pdf (publishing.service.gov.uk).

Each of the eight questions has four possible answers and allows a self-reported determination of need to be recorded.

For indicator 1A responses given equal weight before generating an overall score of the respondents self-reported quality of life. For indicator 1J responses are utility weighted; people place different degrees of importance on these questions. These multiplier numbers apply to each possible rating for the eight areas.

Higher scores are assigned to better outcomes, the higher the overall score the better the average social care-related quality of life. The maximum possible score is 24.

Measures from the Adult Social Care Outcomes Framework 2019/20 - 2022/23

What is the rationale?

This measure gives an overarching view of the quality of life of users of social care. It is based on the outcome domains of social care-related quality of life identified in the Adult Social Care Outcomes Toolkit (ASCOT) developed by the Personal Social Services Research Unit (<u>www.pssru.ac.uk/ascot</u>). The measure gives an overall indication of reported outcomes for individuals – it does not identify the contribution of councils' adult social care services towards those outcomes.

What does the data tell us?

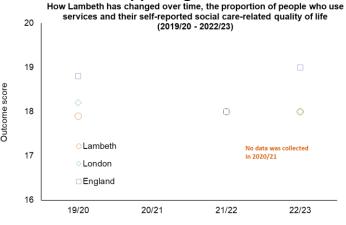
What is the current picture?

- In 2022/23 6,221 in Lambeth were sent the adult social care survey
- In 2022/23 51,697 in London were sent the adult social care survey
- In 2022/23 231,328 in England were sent the adult social care survey
- · In Lambeth 264 people aged 65 years or older responded to the survey in total.

What is happening over time?

- Because of COVID-19, data collection was not mandatory in 2020/21. In 2020/21 only 18 local authorities submitted data.
- The social care-related quality of life score in Lambeth's over 65 population of social care users (excluding learning disability support users) appears to have remained consistent since 2019/20 at around 18 (where the maximum score is 24).
- The social care-related quality of life score in Lambeth's over 65 population of social care users (excluding learning disability support users) is approximately the same as London since 2019/20 and is only marginally lower than the scores for England in 2022/23.

What is happening over time?



Measures from the Adult Social Care Outcomes Framework 2019/20 - 2022/23 https://digital.nhs.uk/data-and-information/publications/statistical/adult-social-care-outcomes-framework-ascof

Are there any concerns with the data?

The ASCS was sent to 6,221 people in Lambeth in 2022/2, of these 988 were people over the age of 65.0f these 988 people, 264 people provided responses to the questions; these 264 people will not have responded to all the questions. In London and England there were 27,265 and 128,115 people over 65 who were sent a survey and 6,221 and 32,378 respondents, respectively.

This is a composite measure of responses and requires answers to each of the questions 3a to 9a and question 11 from the ASCS. Any respondents who failed to answer all of the questions from 3a to 9a and question 11 are excluded from the calculation of the measure. For example, a respondent who answered questions 3a to 8a and 11 but did not answer 9a would be excluded from the calculation.

ASCS simplifies indicators, losing details; it samples a small proportion of the eligible population with a low response rate



Lambeth

66%

Value from data table below

How do Lambeth residents respond?

Lambeth

(n = 261)

27%

37%

30%

5%

0 0

Π

ASCOF published

measure

Percentage of adult social

I have as much control over

care users with control

over their daily lives

my daily life as I want

I have adequate control

I have some control over

I have no control over my

my daily life, but not

enough

daily life

over my daily life

ASCOF

2022-23

65+

What is the current picture? ASCOF

1B

London

67%

London

(n = 6,042)

27%

39%

25%

8%

England

74%

England

(n =

31,303)

30%

43%

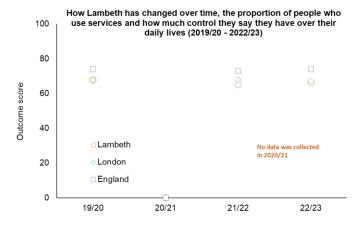
20%

7%

Percentage of adult social care users with control over their daily lives



What is happening over time?



Measures from the Adult Social Care Outcomes Framework 2019/20- 2022/23 https://digital.nhs.uk/data-and-information/publications/statistical/adult-social-care-outcomes-framework-asco

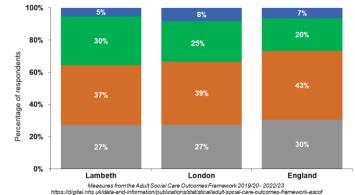
How does Lambeth compare?

How much control do adult social care users say they have over their daily lives?

I have no control over my daily life

I have some control over my daily life but not enough I have adequate control over my daily life

I have as much control over my daily life as I want





What is the rationale?

The goal of personalizing care is to align support with individual needs and preferences, empowering users to control their care. Assessing users' sense of control in daily life helps measure the success "Which of the following statements best describes how much control you have over your daily life?" The measure is defined by determining the percentage of all those responding either 'I have as much

What does the data tell us?

What is the current picture?

In 2022/23 in Lambeth the ASCOF published measure is 66% of adult social care users have adequate or as much control over their daily life, compared to 67% in London and 74% in England. Of the 261 Lambeth responses to the question, 30% do not have enough control over their daily life. Of 261 respondents, 5% say they have no control over their daily life.

What is happening over time?

Data from OHID was not available for 2022/23 at the time of compilation for statistical comparison; as of 2021/22, the underlying trend for people over 65 who say they have control over their daily lives is no significant change.

How does Lambeth compare?

- Using 2021/22 values from OHID, Lambeth has a similar value to other local authorities in London, which range between 58.9 and 80.4. Lambeth is ranked 15 out of 32 London local authorities where 1 is the lowest.
- Compared to Lambeth's CIPFA neighbours, areas with similar population and socioeconomic compositions, Lambeth has a similar value; CIPFA neighbours' values range between 61 and 76.2. Lambeth is ranked 10 out of 16 CIPFA neighbours where 1 is the lowest.

Are there any inequalities?

National data shows people living in the most deprived areas of England are more likely to say they have control over their daily lives than people living in the least deprived areas.

Are there concerns with the data?

- The ASCS was sent to 6.221 people in Lambeth in 2022/2, of these 988 were people over the age of 65.0f these 988 people, 264 people provided responses to the questions; these 264 people will not have responded to all the questions. In London and England there were 27,265 and 128,115 people over 65 who were sent a survey and 6,221 and 32,378 respondents, respectively.
- Because of COVID-19, data collection was not mandatory in 2020/21.

ASCS indicators are simplified to a single number, often losing the full response from qualitative indicators; it samples a small proportion of the

eligible population with a low response rate.

Use and provision

of this objective. This measure uses responses to Question 3a in the Adult Social Care Survey: control over my daily life as I want' or "I have adequate control over my daily life".



What is the current picture? ASCOF 1C1A 1C2A



Previous ASCOF versions had limitations, including the inclusion of services where self-directed support might not be suitable, thus not accurately representing its provision. The introduction of the SALT return strengthens the measure by narrowing its focus to those receiving long-term support, aligning with the relevance of self-directed support. The new approach better reflects councils' progress in delivering personalized services. Additionally, the measure now separately assesses users and carers and adopts a "snapshot" approach rather than using full-year data for self-directed support.

This is a two-part measure and reflects the proportion of people using services who receive self-directed support, and the proportion who receive a direct payment through a personal budget or through other means.

The Care Act requires local authorities inform service users and their carers about their personal budget, detailing the cost of meeting their needs. In most cases, they can request a direct payment. The ASCOF is undergoing evaluation to better incorporate the Care Act's impact and determine the most effective way to reflect service personalization.

Final ASCOF handbook of definitions 2018-19 2.pdf (publishing.service.gov.uk).

Proportion of people who use services who receive self-directed support and the proportion who receive direct payments

What is the rationale?

Research has indicated personal budgets impact positively on well-being, increasing choice and control, reducing cost implications and improving outcomes. Direct payments increase satisfaction with services and are the purest form of personalisation. This pair of indicators measure the number of older people over the age of 65 receiving self-directed support and the number of people over 65 receiving a direct payment.

What does the data tell us?

What is the current picture?

- In 2022/23 the proportion of older people and carers over 65 who receive self-directed support was 100% in Lambeth compared to 97% in London and 93% in England. The proportion for Lambeth is better than London and better than England.
- In 2022/23 the proportion of older people and carers over 65 who receive direct payments was 7% in Lambeth compared to 16% in London and 15% in England. The proportion for Lambeth is worse than London and worse than England.

What is happening over time?

- The underlying trend for older people and carers over 65 who receive self-directed support is increasing and getting better.
- The underlying trend for older people and carers over 65 who receive direct payments is decreasing over time.

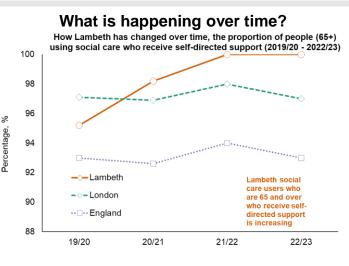
How does Lambeth compare?

- Using values from 2021/22, Lambeth has a similar value for the proportion of people over 65 who receive self-directed support to other London local authorities; values in London range between 65 and 100.
- Lambeth is ranked 15 out of 21 London local authorities where 1 is the lowest.
- Compared to Lambeth's CIPFA neighbours, areas with similar population and socio-economic compositions, Lambeth has a similar value; value es for CIPFA neighbours range between 65 and 100.
- Lambeth is ranked 9 out of 11 CIPFA neighbours where 1 is the lowest.

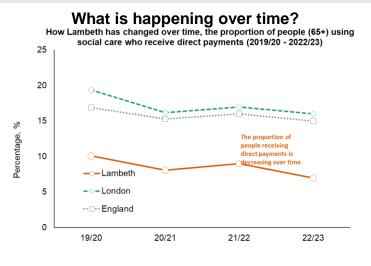
Are there concerns with the data?

The SALT data collection is a set of measures co-produced with stakeholders. It has two main sections, relating to requests for social care support and provision of short term support (described in the guidance as STS measures) and service users and carers receiving eligible support (described as LTS measures).





Measures from the Adult Social Care Outcomes Framework 2019/20- 2022/23 https://digital.nhs.uk/data-and-information/publications/statistical/adult-social-care-outcomes-framework-ascof



Measures from the Adult Social Care Outcomes Framework 2019/20- 2022/23 https://digital.nhs.uk/data-and-information/publications/statistical/adult-social-care-outcomes-framework-asco



What is the current picture? ASCOF 1L1 0 0 ASCOF 65+ England London Lambeth 2022-23 % service users who had as much social 39% 36% 42% contact as they would like

How do Lambeth residents respond?

Percentage of adult social care users with control over their daily lives	Lambeth (n = 254)	London (n = 5,986)	England (n = 31,241)
I have as much social contact as I want with people I like	35%	33%	39%
I have adequate social contact with people	31%	34%	35%
I have some social contact with people, but not enough	24%	23%	20%
I have little social contact with people and feel socially isolated	11%	9%	7%

Proportion of people who use services who reported that they had as much social contact as they would like

What is the rationale?



There is a clear link between loneliness and poor mental and physical health. This measure uses self-reported levels of social contact as an indicator of social isolation for both users of social care and carers. The impact of social isolation and loneliness extends beyond those receiving services and requires involvement from all parts of the health and care system. Efforts to establish a measure for loneliness in the wider population have concluded due to the inability to identify a suitable metric. The development of this measure is deferred for the foreseeable future, but there is continued interest in exploring alternative ways to measure the issue in a manner supportive of Local Authorities. A key element of the Government's vision for social care is tackling loneliness and social isolation, supporting people to remain connected to their communities and to develop and maintain connections with their friends and family.

What does the data tell us?

What is the current picture?

In 2022/23 the proportion of Lambeth service users over 65 who say they have as much social contact as they would like was proportion of 33% in Lambeth compared to 34% in London and 37% in England. The proportion or Lambeth is higher than London and lower than England.

What is happening over time?

Data from OHID was not available for 2022/23 at the time of compilation for statistical comparison; as of 2021/22, the underlying trend for service users over 65 who say they have as much social contact as they would like is no significant change.

How does Lambeth compare?

- Using values from 2021/22, Lambeth has a similar value to other local authorities in London; values in London range between 24 and 55. Lambeth is ranked 10 out of 31 London local authorities where 1 is the lowest.
- Compared to Lambeth's CIPFA neighbours, areas with similar population and socio-economic compositions, Lambeth has a similar value. Values for CIPFA neighbours range between 26 and 41. Lambeth is ranked 5 out of 14 CIPFA neighbours where 1 is the lowest.

Are there any inequalities?

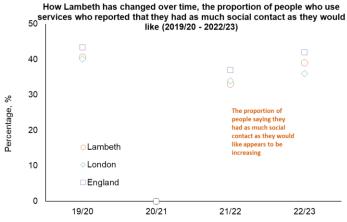
 National data, from 2021/22, shows people living in the most deprived areas of England are more likely to have as much contact as they would like than people living in the least deprived areas.

Are there concerns with the data?

- The ASCS was sent to 6,221 people in Lambeth in 2022/2, of these 988 were people over the age of 65.Of these 988 people, 264 people provided responses to the questions; these 264 people will not have responded to all the questions. In London and England there were 27,265 and 128,115 people over 65 who were sent a survey and 6,221 and 32,378 respondents, respectively.
- Because of COVID-19, data collection was not mandatory in 2020/21.

ASCS indicators are simplified to a single number, often losing the full response from qualitative indicators; it samples a small proportion of the eligible population with a low response rate.



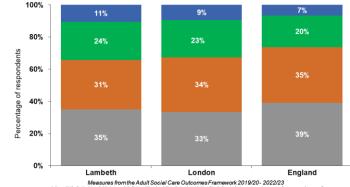


Measures from the Adult Social Care Outcomes Framework 2019/20 - 2022/23 https://digital.nhs.uk/data-and-information/publications/statistical/adult-social-care-outcomes-framework-ascof

How does Lambeth compare?

How much social contact with people do adult social care users say they have?

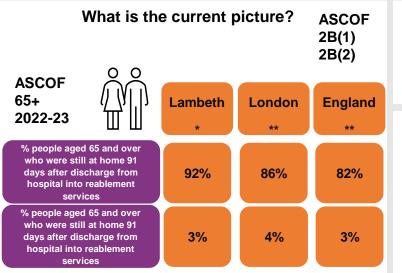
I have little social contact with people and feel socially isolated
 I have some social contact with people, but not enough
 I have adequate social contact with people
 I have as much social contact as I want with people I like



Measures from the Adult Social Care Outcomes Framework 2019/20- 2022/23 https://digital.nhs.uk/data-and-information/publications/statistical/adult-social-care-outcomes-framework-ascof

Measures from the Adult Social Care Outcomes Framework 2019/20 - 2022/23





*Taken from the disaggregated data table

** Taken from ASCOF report 2022-23

This measure collects data on the benefit to clients from reablement / rehabilitation services following a hospital episode. Reablement services are for people with poor physical or mental health and help them accommodate their illness by learning or re-learning the skills necessary for daily living.

It captures the joint work of social services and health staff and services commissioned by joint teams as well as those commissioned by social services only. The information collected through this measure is essential for commissioning and planning and the monitoring of joint working arrangements. It is used in answering parliamentary guestions and ministerial briefings. The measure covers both residential and non-residential short-term services intended to maximise independence.

Final ASCOF handbook of definitions 2018-19 2.pdf (publishing.service.gov.uk).

The percentage of people aged 65 and over who were still at home 91 days after discharge from hospital into reablement services and the percentage of people aged 65+ who received reablement services following discharge from hospital.

What is the rationale?

The key outcome for many people using reablement services is whether they remain living at home 91 days following discharge. There is strong evidence reablement services lead to improved outcomes and value for money across the health and social care sectors. Reablement seeks to support people and maximise their level of independence, minimising their need for ongoing care and dependence on public services. Here we present both parts of the two-part measure around discharge and reablement in people aged 65.

What does the data tell us?

What is the current picture?

In 2022/23, the proportion of Lambeth people over 65 still at home 91 days after a hospital episode (part 1) was 92%, compared to 86% in London and 82% in England. This is higher than both London and England. The proportion of people aged 65+ who received reablement services following discharge from hospital (part 2) was 3%, this is lower than London but the same as England.

What is happening over time?

Data from OHID was not available for 2022/23 at the time of compilation for statistical comparison. There appears to be an increase in the proportion of people offered reablement services following discharge from hospital since 2020/21.

How does Lambeth compare?

- Using the OHID comparison for 2021/22, compared to other local authorities in London Lambeth has a similar value for part 1 and a lower value for part 2.
- Values in London range between 62% and 100% and 0.6% and 8.2% for part 1 and part 2, respectively. Using the OHID comparison for 2021/22, part 1 is ranked 22 out of 32 London local authorities and part 2 is ranked 8 out of 32 London local authorities: 1 is the lowest rank.
- Using the OHID comparison for 2021/22, values for CIPFA neighbours (areas with similar population and socio-economic compositions) range between 62% and 97% and 0.6% and 8.2% for part 1 and part 2, respectively.
- Using the OHID comparison for 2021/22, part 1 is ranked 10 out of 15 CIPFA neighbours and part 2 is ranked 5 out of 15 CIPFA neighbours: 1 is the lowest rank.

Are there any inequalities?

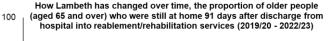
· National data shows people living in the most deprived areas of England are less likely to be at home 91 days after a hospital episode than people living in the least deprived areas but they are more likely to offered reablement services after a hospital episode than people living in the least deprived areas.

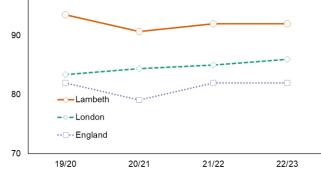
Are there concerns with the data?

This measure makes use of Hospital Episodes Statistics (HES) data, numerators and denominators as well as pathways of care will have been affected by COVID-19.



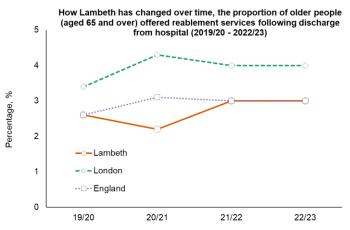
What is happening over time?





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What is happening over time?



Measures from the Adult Social Care Outcomes Framework 2019/20- 2022/23 https://digital.nhs.uk/data-and-information/publications/statistical/adult-social-care-outcomes-framework-ascof

Measures from the Adult Social Care Outcomes Framework 2019/20 - 2022/23



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Π

ASCOF published

measure

ASCOF

2022-23

65+

What is the current picture?

Lambeth

43%

Value from data table below

London

74%

age friendly LAMBETH

ASCOF

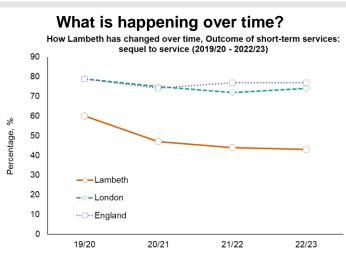
England

78%

2D

The outcome of short-term services: sequel to service





Measures from the Adult Social Care Outcomes Framework 2019/20- 2022/23 https://digital.nhs.uk/data-and-information/publications/statistical/adult-social-care-outcomes-framework-ascol

Are there any concerns with the data?

This measure takes the number of new clients where sequel to "Short Term Support to maximise independence" was:

"Ongoing Low Level Support", "Short Term Support (Other)", "No Services Provided - Universal Services/Signposted to Other Services", "No Services Provided - No identified needs"

This number is divided by the number of new clients who had short-term support to maximise independence. Those with a sequel of either early cessation due to a life event, or those who have had needs identified but have either declined support or are self-funding should be subtracted from this total.

The following categories are excluded from this measure: "Early cessation of service (not leading to long term support)"; "Early cessation of service (not leading to long term support) - 100% NHS Funded Care/End of Life Care/Deceased"; "Early cessation of service (leading to long term support) ", "No services provided - needs identified but self funding"; and "No services provided - needs identified but support declined".

What is the rationale?

This measure applies to those people aged 65 and over in receipt, at the point data are extracted, of long-term support services funded or managed by social services following a full assessment of need. It is based on responses to Question 3a in the Adult Social Care Survey: 'Which of the following statements best describes how much control you have over your daily life?' The measure is defined by determining the percentage of all those responding either 'I have as much control over my daily life as I want' or "I have adequate control over my daily life".

What does the data tell us?

What is the current picture?

In 2022/23, the outcome of short-term services was 43%, compared to 74% for London and 78% for England. This means fewer Lambeth residents who received short-term services made no further requests for ongoing support.

What is happening over time?

- London and England values for seguel to service are high they have decreased since 2019/20.
- Lambeth values for sequel to service have shown a decrease year on year since 2019/20.

This measure reflects the proportion of new clients who received short-term services during the year, where no further request was made for ongoing support. Since short-term services aim to reable people and promote their independence, this provides evidence of a good outcome in delaying dependency or supporting recovery - short-term support that results in no further need for services. In this context, short-term support is defined as 'short-term support which is designed to maximise independence, and therefore excludes carer contingency and emergency support. This prevents the inclusion of short-term support services which are not reablement service

It captures the joint work of social services and health staff and services commissioned by joint teams as well as those commissioned by social services only. The information collected through this measure is essential for commissioning and planning and the monitoring of joint working arrangements. It is used in answering parliamentary questions and ministerial briefings. The measure covers both residential and non-residential short-term services intended to maximise independence. Final ASCOF handbook of definitions 2018-19 2.pdf

(publishing.service.gov.uk).

Measures from the Adult Social Care Outcomes Framework 2019/20 - 2022/23



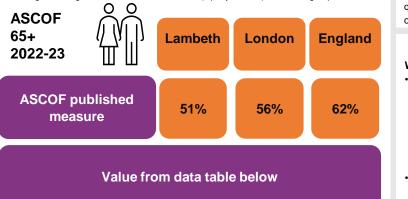
Overall satisfaction of people who use services with their care and support





3A

This question asks directly about services but is potentially subject to the influence of exogenous factors. A previous study of home care users suggested better perceptions of home care were related to, amongst other things, receiving less than ten hours of home care (a proxy for need) and receiving help from others.



How does Lambeth compare? Overall satisfaction of Lambeth London England (n = 256)(n = 31,710)people who use services (n = 6.080)with their care and support 50% 54% I am extremely or very 60% satisfied I am quite satisfied 29% 30% 27% I am neither satisfied nor 10% 7% 9% dissatisfied I am quite dissatisfied 7% 3% 4% I am very or extremely 4% 3% 2% dissatisfied

Measures from the Adult Social Care Outcomes Framework 2019/20 - 2022/23

What is the rationale?

Analysis of surveys suggests reported satisfaction with services is a good predictor of people's overall experience of services. The published ASCOF measure is the percentage of all adults aged 65 and over responding who identify strong satisfaction – i.e. by choosing the answer "I am extremely satisfied" or the answer "I am very satisfied", and of those responding to the Easy Read questionnaire with "I am very happy with the way staff help me, it's really good". However, the complete answers are presented on this page to give a better understanding of user satisfaction.

What does the data tell us?

What is the current picture?

- The ASCOF measure states 51% of 256 people over 65 who responded to this question, are satisfied with their care and support. There is more to this measure than "51% of users are satisfied with their care and support in Lambeth" this only reports those who have expressed a strong satisfaction. The full survey results show the proportion of care users who express "strong satisfaction" and also "I am quite satisfied" with their care and support is 79%. In contrast, 11% are quite, very, or extremely dissatisfied with their care in Lambeth in 2022/23.
- In London and England 84% and 87% of residents, respectively, were extremely, very, or quite satisfied with their care and support. While 7% and 5% were quite, very, or extremely dissatisfied with their care and support.

What is happening over time?

Data from OHID was not available for 2022/23 at the time of compilation for statistical comparison. Using the statistical comparison from 2021/22, the underlying trend could not be calculated. Most likely because of insufficient data from a suitable time period for valid comparison.

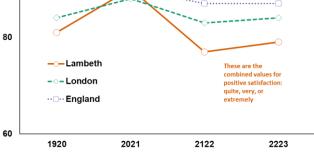
How does Lambeth compare?

- Using the OHID comparison for 2021/22, compared to other local authorities in London Lambeth has a lower value for users who express strong satisfaction for their care and support. Values in London range between 45% and 71% for users who express strong satisfaction with their care and support. Using the OHID comparison for 2021/22, Lambeth is ranked 6 out of 32 London local authorities where 1 is the lowest rank.
- Using the OHID comparison for 2021/22, values for CIPFA neighbours (areas with similar population and socio-economic compositions) range between 45% and 58% for users who express strong satisfaction with their care and support. Using the OHID comparison for 2021/22, Lambeth is ranked 6 out of 15 CIPFA neighbours where 1 is the lowest rank.
 Are there any inequalities?
- National data from 2021/22 shows people living in the most deprived areas of England are about as likely to say they are satisfied with their care and support services than people living in the least deprived areas.

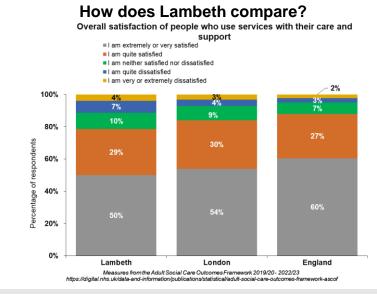
ASCS indicators are simplified to a single number, often losing the full response from qualitative indicators; it samples a small proportion of the eligible population with a low response rate.



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Measures from the Adult Social Care Outcomes Framework 2019/20- 2022/23 https://digital.nhs.uk/data-and-information/publications/statistical/adult-social-care-outcomes-framework-ascof





What is the current picture?

friendly LAMBETH

ASCOF

Proportion of people who use services who feel safe

What is the rationale?

What does the data tell us?

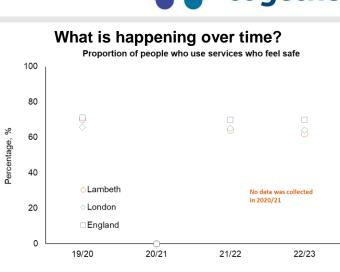
The proportion of people who use Lambeth services who say they feel safe appears to be

approximately the same year on year since 2019/20, no data was collected in 2020/21

What is happening over time?

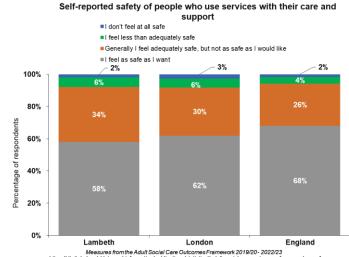
because of COVID-19.



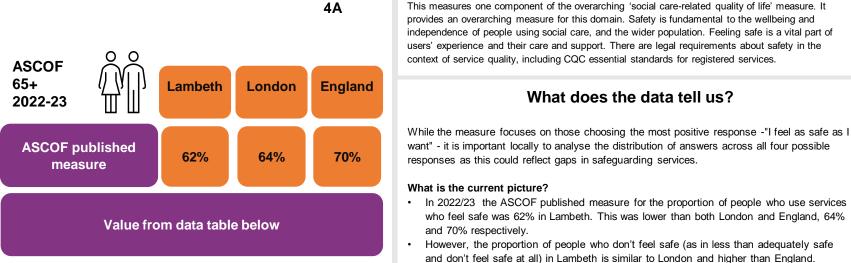


Measures from the Adult Social Care Outcomes Framework 2019/20- 2022/23 https://digital.phs.uk/data-and-information/oublications/statistical/adult-social-care-outcomes-framework-asco

How does Lambeth compare?



https://digital.nhs.uk/data-and-information/publications/statistical/adult-social-care-outcomes-fr



How does Lambeth compare?					
Proportion of people who use services who feel safe	Lambeth (n = 255)	London (n = 6,024)	England (n = 31,282)		
l feel as safe as l want	58%	62%	68%		
Generally I feel adequately safe, but not as safe as I would like	34%	30%	26%		
l feel less than adequately safe	6%	6%	4%		
l don't feel at all safe	2%	3%	2%		

How dood Lambath compare?

ASCS indicators are simplified to a single number, often losing the

full response from qualitative indicators; it samples a small proportion of the eligible population with a low response rate.



What is the current picture? ASCOF **4B** 0 0 ASCOF 65+ England London Lambeth 2022-23 Π **ASCOF** published 74% 80% 86% measure

Value from data table below

How does Lambeth compare?

Proportion of people who use services who say that those services have made them feel safe and secure	Lambeth (n = 244)	London (n = 5,716)	England (n = 29,940)
Yes	73%	79%	85%
No	27%	21%	15%

Proportion of people who use services who say that those services have made them feel safe and secure

What is the rationale?

This measures one component of the overarching 'social care-related quality of life' measure. It provides an overarching measure for this domain. Safety is fundamental to the wellbeing and independence of people using social care, and the wider population. Feeling safe is a vital part of users' experience and their care and support. There are legal requirements about safety in the context of service quality, including CQC essential standards for registered services.

What does the data tell us?

This measure supports measure 4A by reflecting the extent to which users of care services feel their care and support has contributed to making them feel safe and secure. As such, it goes some way to separate the role of care and support in helping people to feel safe from the influence of other factors, such as crime levels and socio-economic factors. Whilst the overarching measure (4A) indicates a higher-level individual perspective on feeling safe, this complementary measure gives a specific comment on the impact of services on this outcome

What is the current picture?

- In 2022/23 x number of people were sent the adult social care survey
- X number of people responded to the survey
- Of these x were aged 65 years or older
- The number of people aged 65 years or older who use adult social care services in Lambeth is y

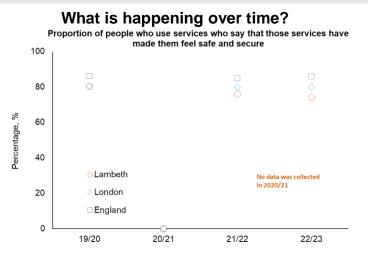
What is happening over time?

- The underlying trend for people over 65 who say they have control over their daily lives, as of 2021/22 is no significant change. Data was not available for 2022/23 from OHID at the time of compilation for statistical comparison.
- Because of COVID-19, data collection was not mandatory in 2020/21. In 2020/21 only 18 local authorities submitted data.

How does Lambeth compare?

Are there any inequalities?

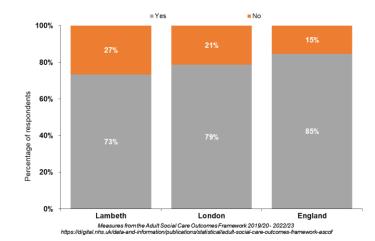
A higher value is better Lambeth together



Measures from the Adult Social Care Outcomes Framework 2019/20 - 2022/23 https://digital.nhs.uk/data-and-information/publications/statistical/adult-social-care-outcomes-framework-ascof

How does Lambeth compare?

Proportion of people who use services who say that those services have made them feel safe and secure



ASCS indicators are simplified to a single number, often losing the

full response from qualitative indicators; it samples a small

proportion of the eligible population with a low response rate.

Use and provision

Measures from the Adult Social Care Outcomes Framework 2019/20 - 2022/23