

Norfolk County Council

Adult Social Care

Benchmarking

Report

2015/16

snapshot  
quality  
compares  
results  
scores  
services  
satisfaction  
data  
admissions  
support  
reablement  
cost  
average  
information  
trend  
priorities  
care  
figures  
average  
reflects  
change  
population  
performance  
direct payments  
mental health  
residential



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Referrals into short term care from hospital	
People in receipt of long term support	
What do we mean by long term support?	
People admitted to permanent residential or nursing care	
Residential admissions compared to those already in receipt of care	

## 65+ Adult Social Care Pathway

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## Who is this report for?

This report presents benchmarking information for Norfolk Adult Social Care for the year 2015/16 and is designed to help managers and elected members compare the performance of Norfolk with other councils that have social care responsibilities and identify areas for improvement. It is not designed for use by the public.

## What is benchmarking?

'Benchmarking' is a widely used term within all sectors, describing when an organisation compares what it does against others. Organisations can benchmark their business processes, performance, finance, quality etc. to understand strengths and weaknesses and respond accordingly. Essentially 'benchmarking' provides a snapshot of how a 'business' is performing in relation to a particular standard. We use benchmarking in a variety of ways in order to inform how we are doing and help us determine what our priorities are. It enables us to position ourselves amongst others, letting us know where our issues are as well as informing the target setting process. Benchmarking is not an exact science and should be treated with some caution. It is important that the information is used properly and within context.

## Warnings to consider:

Where possible, this report has tried to overlay performance against population but there are some warnings to consider when using benchmarking information. Broadly these include:

- Not all councils were able to provide a full set of data for the social care indicator values and estimates have not been made for those with missing data. England and regional totals are based on councils that have provided the complete data.
- The disparity between the size, demography, structure, budget etc. of councils, even amongst our 'family group', can sometimes impact on the results.

This does not negate the benefits of benchmarking but understanding what it is telling you is vital; resist simplistic interpretations by sourcing some contextual understanding.



## What is this report measuring?

This report presents benchmarking information for Norfolk Adult Social Services for the year 2015/16.

## Where does the data come from?

Every social services department must submit a range of returns each year relating to Short and Long Term care (SALT), the Adult Social Care Survey (plus the Carers' Survey every other year) and Adult Social Care Finance Return (ASC-FR). The results of these returns are collected together by the National Adult Social Care Intelligence Service (NASCIS) and made available to the Council online. Most of the data in this report has been taken from the SALT return and the ASCOF data set. The source of data is listed on each page.

## What time period does the report look at?

Most of the data presented relates directly to the year 2015/16. Where the latest reportable data relates to another financial year, details are always provided with the data on the relevant page of the report. When there is data available to compare against previous years, the year is stated on the page. In some cases this may be as far back as 2010/11, for others it may be more recent.

## Important Notes

All data included in this report can be subject to change as the Department of Health can retrospectively republish data of councils if issues or amendments are identified.

# Which councils are being compared?

Our results are mostly compared to Norfolk's 'family group' - a collection of 15 other councils that the Care Quality Commission considers to have similar characteristics to Norfolk and are therefore a valid comparison for performance. Our 'family group' consists of:



Where financial information is being compared with other councils the comparator group is based on Area Cost Adjustment (ACA) factors. The ACA factors are derived from the relative cost of providing services within a council's geographic area. For comparison of expenditure data, Norfolk was placed into one of four ACA groupings with 49 other councils with similar ACA factors in 2007/08.



1

In this report, information is presented in several different ways. In many case, traditional bar charts or line graphs and pie charts are used. In some other cases, pictographs (or picture icons) are used to provide a visual demonstration of how Norfolk figures compare to other councils. The size of these pictographs is adjusted to provide an approximate reflection of the figures represented. The method used for sizing pictographs is not consistent throughout the report so icons on different pages may appear to be different sizes even though they represent the same figure. The figure represented is always provided inside or next to the icon.

2



**Data relating to people is sometimes represented with a stick person icon.**



**Data relating to living accommodation is sometimes represented with a house icon.**



**Data relating to satisfaction is sometimes represented with a smiley face icon.**

3

- A key is provided on each page but in most cases the following colours indicate the following things:

A dark purple arrow pointing right.
 **England**

A red arrow pointing right.
 **Family Group**

An orange arrow pointing right.
 **Norfolk**

A light orange arrow pointing right.
 **East England**

4

- Grey boxes also indicate how the data has been counted. This is normally per 100,000 population but may also be by a %.
- An information icon is used to mark important information about the data.

A dark grey arrow pointing right.
 **Per 100,000 population**


**18 - 64**

**Adult**

**Social Care**

**Pathway**



# Number of requests for support for people aged 18 – 64

6,000

5,000

4,000

3,000

2,000

1,000

0

England

Family Group

Norfolk

East England

## 22%

of all contacts in  
Norfolk were from  
people aged 18 – 64

### What this measures:

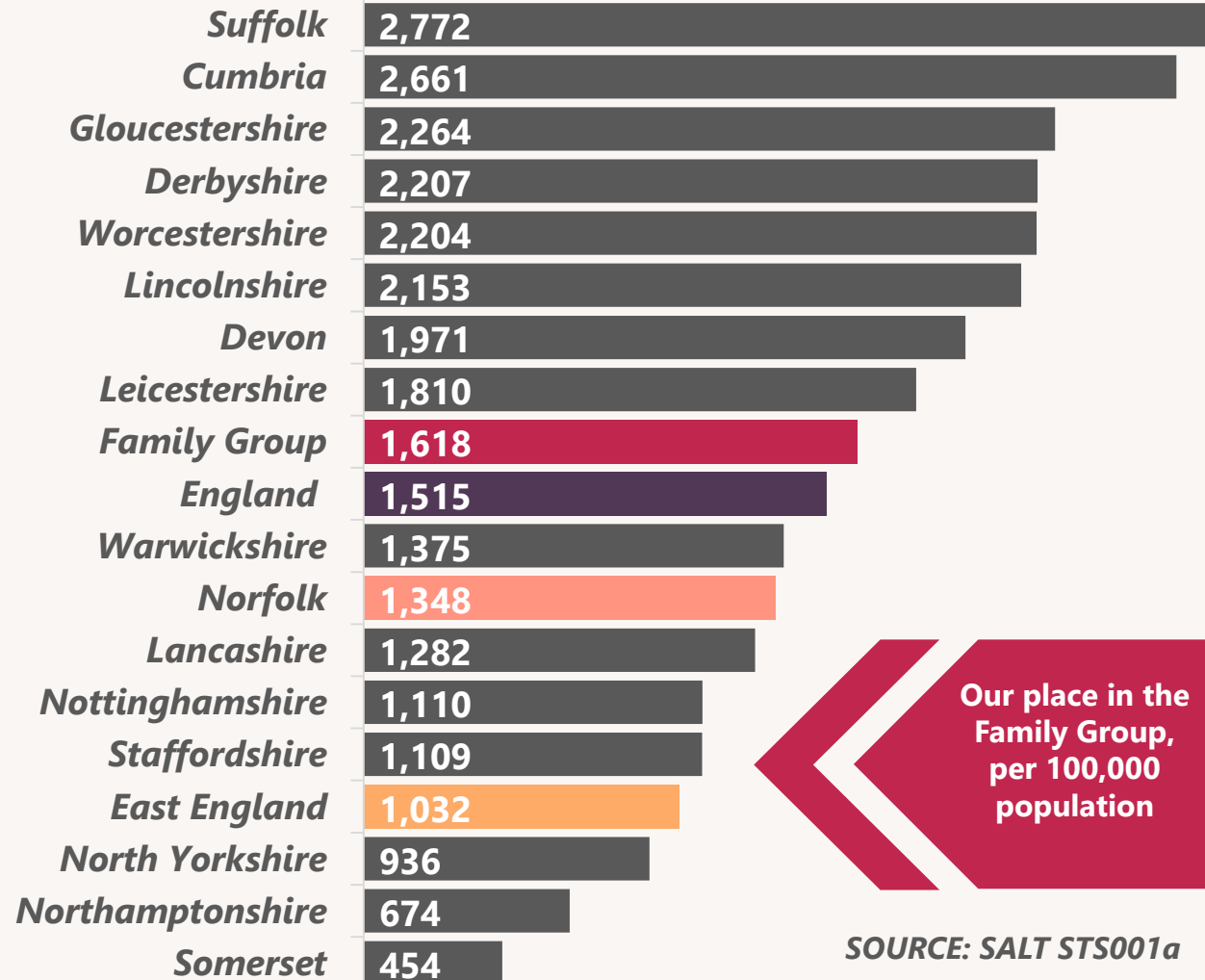
The number of contacts from people aged 18-64 requesting support per 100,000 population. It does not include requests from people already in a long term service. The figures for England, Eastern and the family group are based on averages.

### What does this tell us?

Norfolk is around the middle for both family group and all authorities – but missing Blue Badge recording means the figures are certainly lower than they should be. Difference between this and previous very high contacts results possibly indicates suppressed figures, but also high levels of mis-directed re-referrals coming through the front door – particularly given that people already in services aren't included in these figures.



This measure is significantly different to the 'contacts' measure reported previously in the RAP return. Norfolk's figure is artificially low because we don't capture Blue Badge requests in the right way – other councils may have been able to include these.



Our place in the  
Family Group,  
per 100,000  
population

SOURCE: SALT STS001a



7

What happened next in Norfolk for those aged 18-64?

**What this measures:** This shows us what happened following a new request for support from somebody not already receiving a service. This is split by the route of access for each request, and by percentage split to each service classification. The classification of short term support is for people who receive a short period of reablement after leaving hospital to help them regain their independence, or are helped by an emergency intervention, such as assistance after pressing their community alarm.

<b>What does this tell us?</b> People who are not eligible for a service are usually given tailored advice and information on other organisations who could help. The majority of people that contact us are signposted onto other services <i>SOURCE: SALT STS001a</i>		Route of Access			
		Moving from Children's Services 0.52%	Discharge from Hospital 10.10%	Preventing Hospital Admission 1.25%	Other Route 88.14%
11.86%	Short Term Support	0%	34.31%	35.29%	9.03%
4.42%	Long Term Community Care	14.29%	8.76%	5.88%	3.85%
0.07%	Long Term Nursing Care	0%	0.73%	0%	0%
0.07%	Long Term Residential Care	0%	0%	0%	0.08%
0.15%	End of Life Care	0%	0.73%	0%	0.08%
13.49%	Ongoing Low Level Support <i>eg. Equipment/adaptations</i>	85.71%	2.92%	5.88%	14.88%
69.42%	Universal Services/ Signposted to other services	0%	51.09%	52.95%	71.66%
0.52%	No Services Provided	0%	1.46%	0%	0.42%

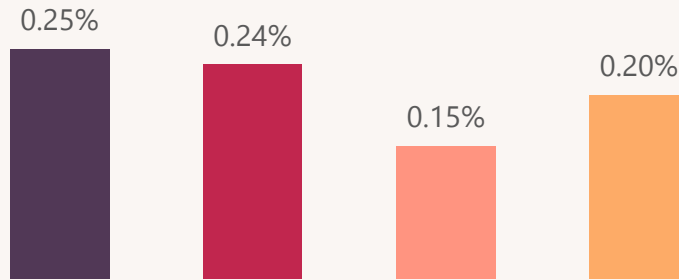
# How does Norfolk compare for those aged 18-64?

## What this measures:

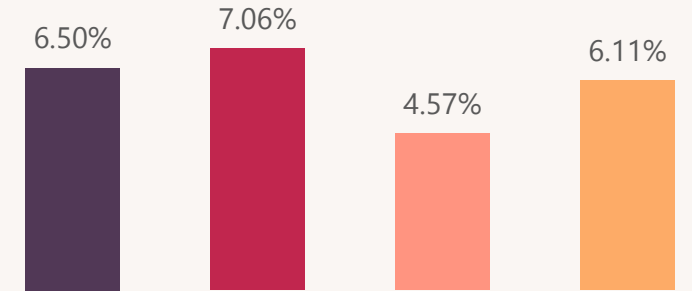
This looks at the percentage of people whose request for support resulted in each of the 6 types of sequel described on the previous page, compared against England, our family group and East England

**SOURCE: SALT STS001a**

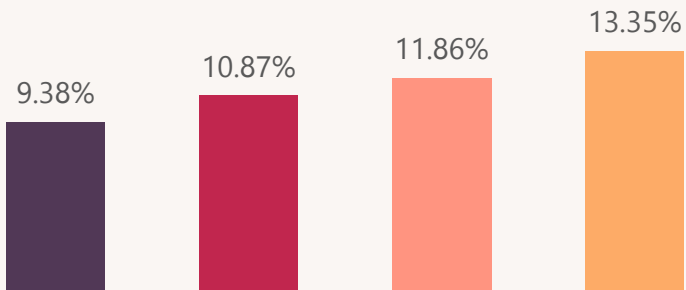
### End of Life Care



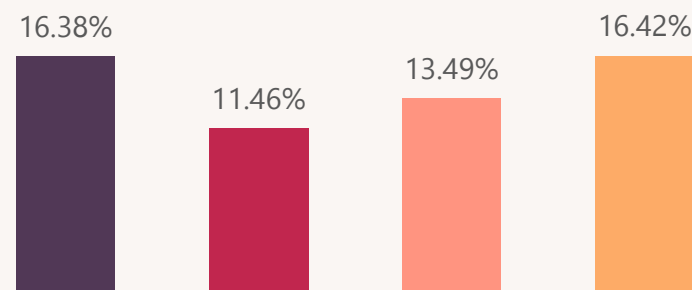
### Long Term Support



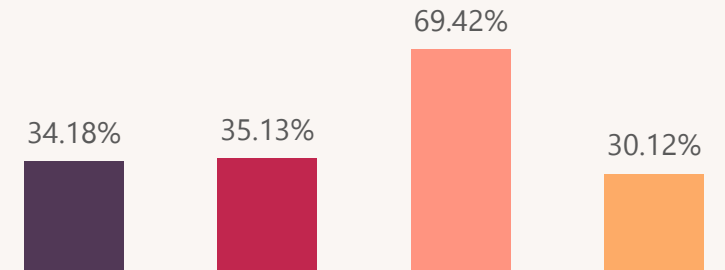
### Short Term Support



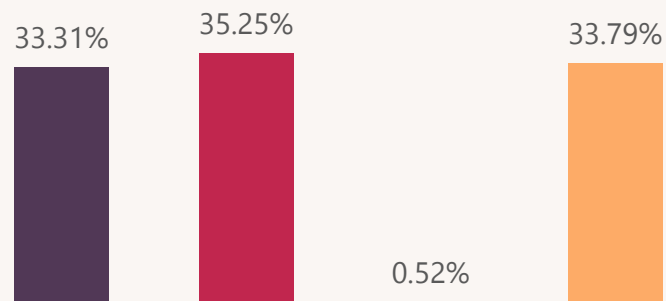
### Ongoing Low Level Support



### Universal Services/ Signposted to other services



### No Services Provided



England

Family Group

Norfolk

East England

**What does this tell us?** Norfolk has extremely low numbers of people that receive no services but has extremely high numbers of people that receive universal services and are signposted to other services. This is because where people are not eligible for a service we give them tailored advice and information about other possible ways to get help. For all other sequels, we are fairly comparable with our family group and the rest of England.

# People in receipt of short term support aged 18-64

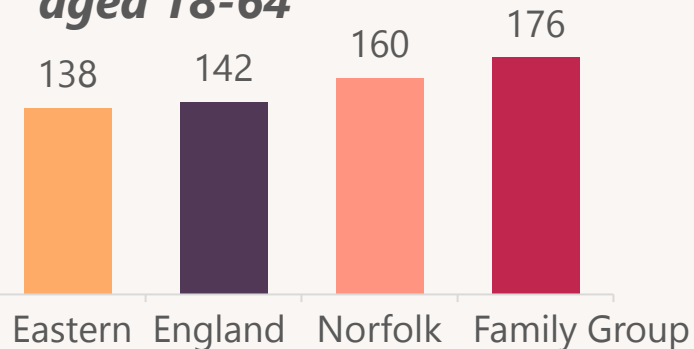


Short Term Support refers to people who have a short period of reablement after leaving hospital to help them regain their independence, or are helped by an emergency intervention, such as assistance after pressing their community alarm.

**What this measures:** This measures the number of people aged 18-64 receiving short term support per 100,000 population. The graph shows the percentage split across our family group between reablement and emergency intervention.

**SOURCE: SALT STS001a**

## Per 100,000 population aged 18-64



Per 100,000 population, short term support for those aged 18-64 in Norfolk has increased by

**18%**

compared to 2014/15



## What does this tell us?

All four comparator groups have more people receiving short term support per 100,000 population compared to 2014/15. The split between the two types of short term support, has also increased by 3% more weighted to emergency intervention compared to 2014/15. Norfolk is around the middle of our comparator groups for both emergency intervention and reablement and has more of an equal split between the different types of short term support

England

Family Group

Norfolk

East England

**Northamptonshire**

**Lincolnshire**

**Warwickshire**

**Derbyshire**

**Leicestershire**

**Lancashire**

**Family Group Total**

**Norfolk**

**Cumbria**

**Staffordshire**

**England Total**

**Eastern**

**Worcestershire**

**Suffolk**

**Gloucestershire**

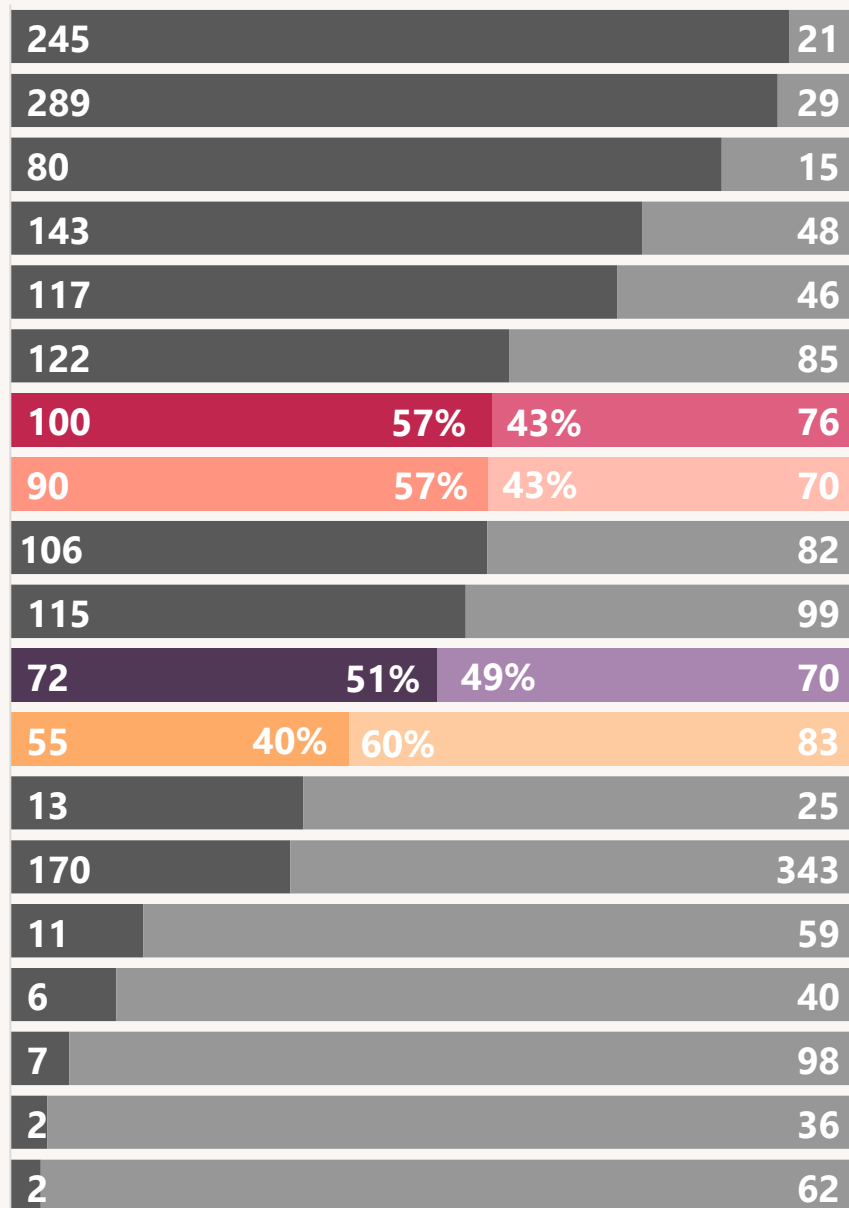
**North Yorkshire**

**Nottinghamshire**

**Somerset**

**Devon**

■ **Emergency Intervention** ■ **Reablement**  
per 100,000 population aged 18-64



## The national picture...

Per 100,000 population



**What does this tell us?** Norfolk is the second highest in our family group, which supports the emerging hypothesis that this explains some of the high levels of long term care in the age group. This is likely as requests for support and other sequels are around the mid-point of councils but referrals into short term care are disproportionately higher.

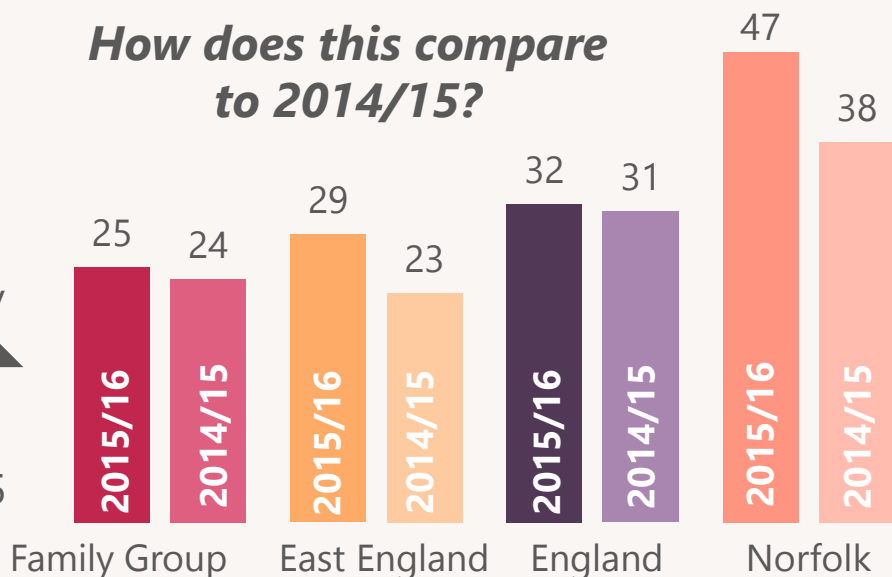
SOURCE: SALT STS001a

All four comparator groups have seen an increase of referrals into short term care from hospital. Norfolk's has risen by

**24%** ↑

compared to 2014/15

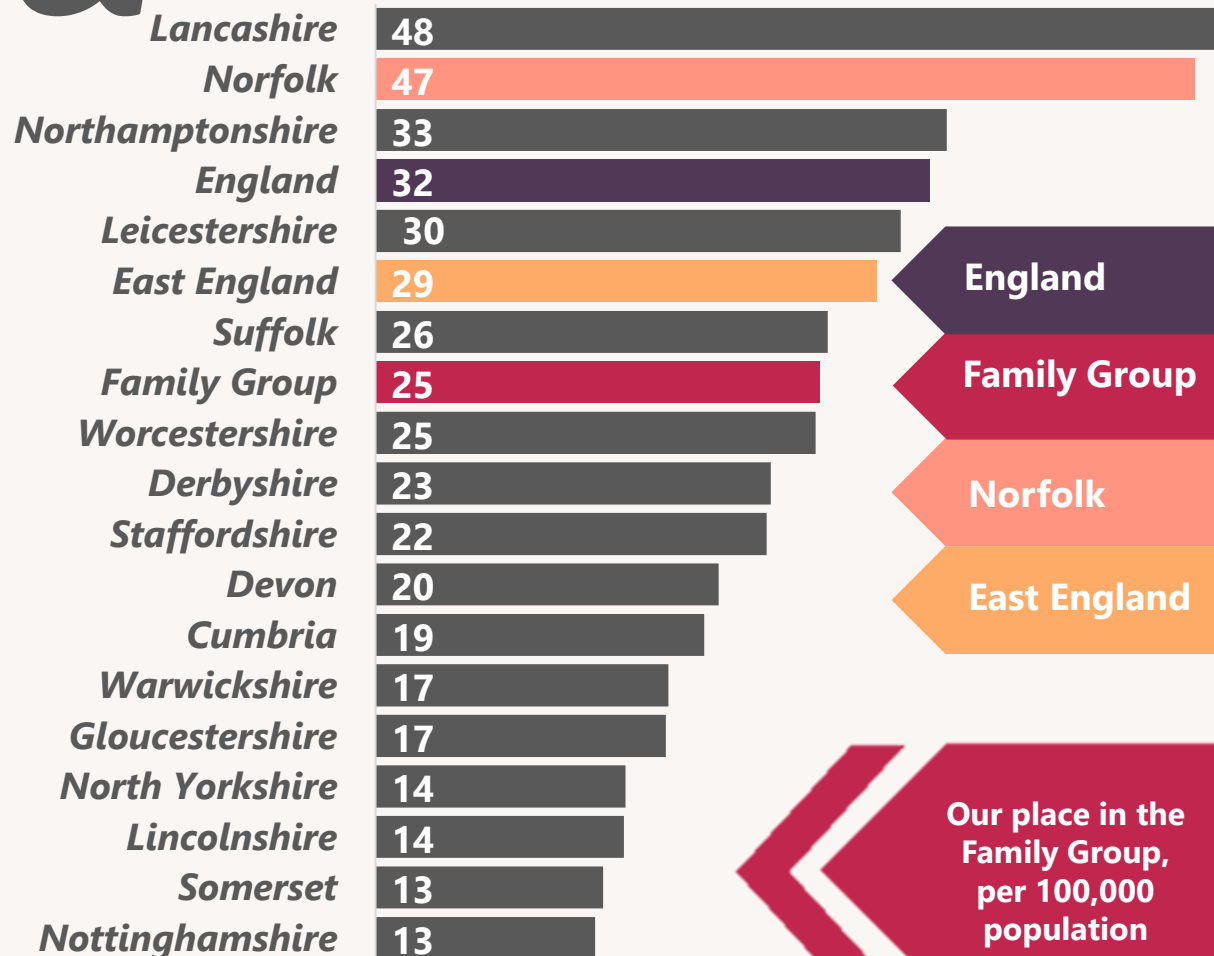
## How does this compare to 2014/15?



## What this measures:

The number of people aged 18 – 64 being referred into short term social care from hospitals per 100,000 population aged 18-64.

## & our place in the family group

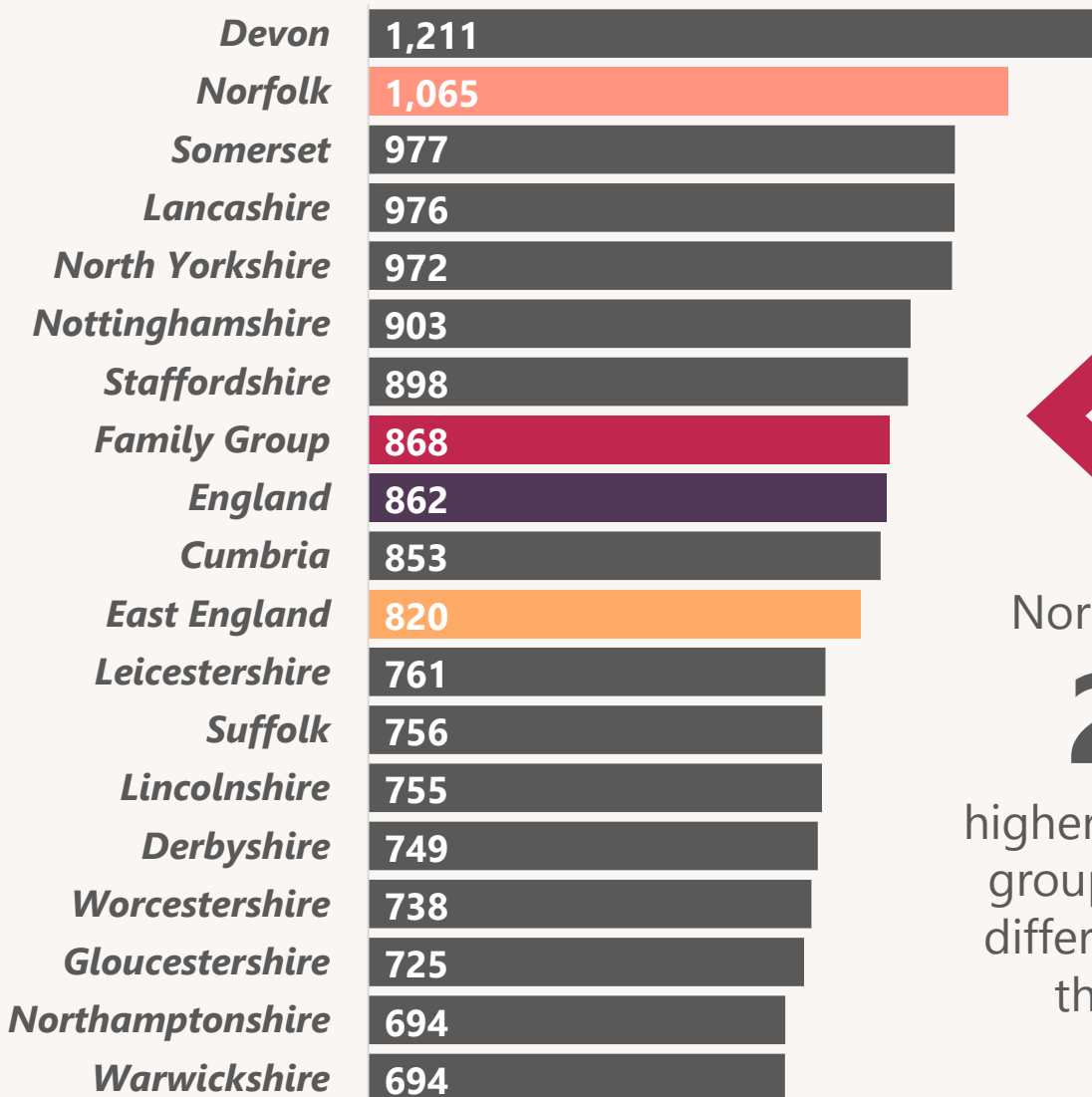


Our place in the Family Group, per 100,000 population

# 11 People in receipt of long term support aged 18-64

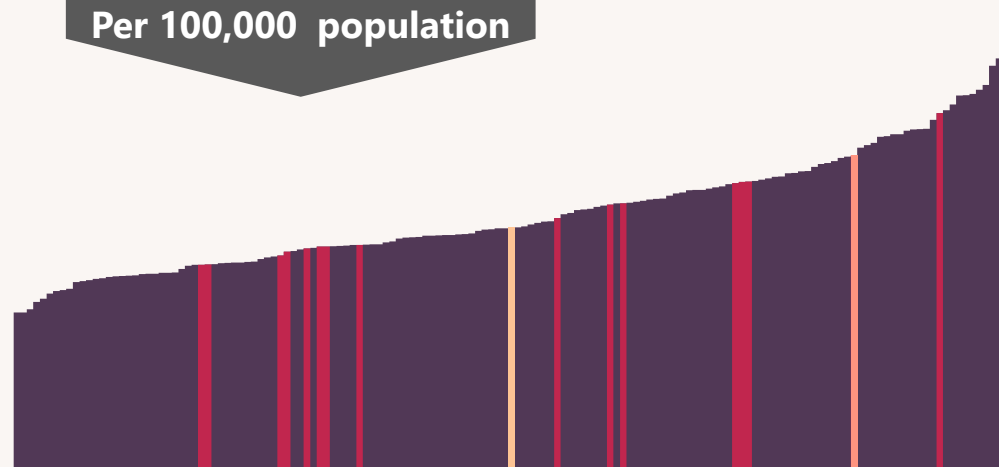
## What this measures:

The number of people aged 18 – 64 receiving long term support per 100,000 population aged 18 – 64.



1,600  
1,400  
1,200  
1,000  
800  
600  
400  
200  
0

Per 100,000 population



England

Family Group

Norfolk

East England

## What does this tell us?

Norfolk is the second highest in our family group for long term support for this age range. So whilst there is an 'average' position up to the allocation of reablement/short term services, the picture changes dramatically thereon.

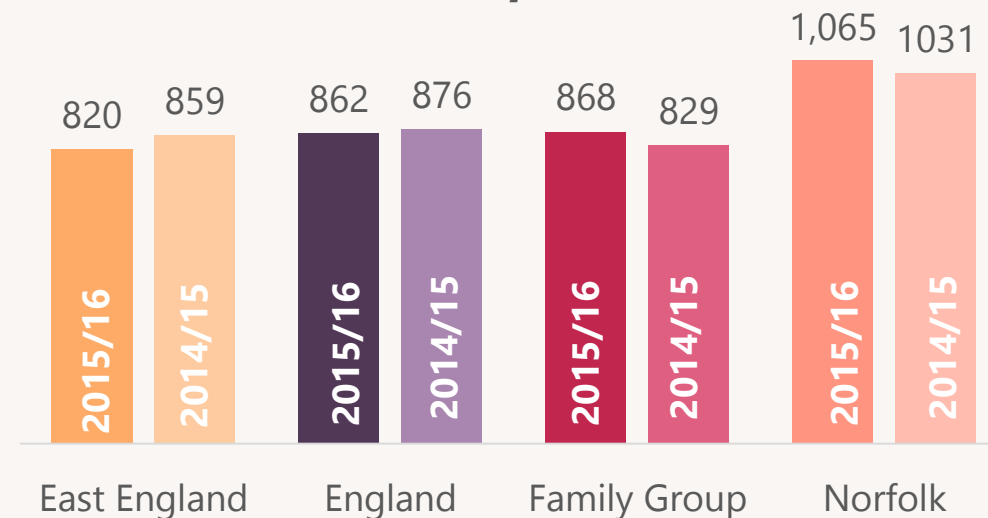
SOURCE: SALT LTS001a

Norfolk's figure is

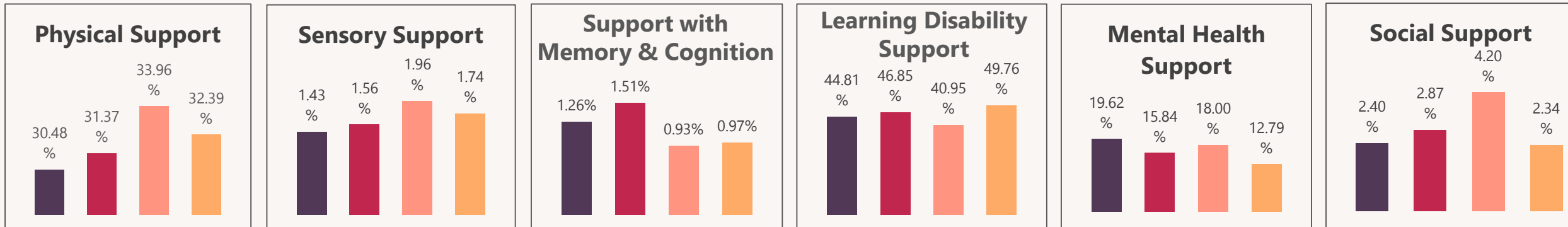
23%

higher than the family group average. This difference is 1% less than 2014/15

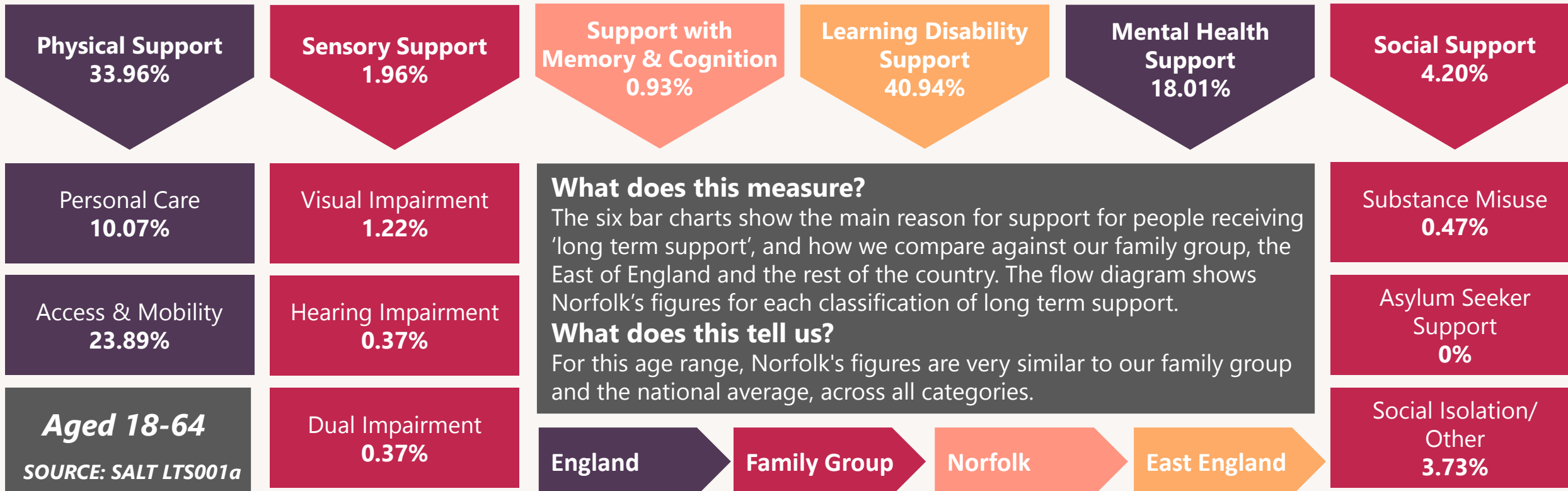
## How does this compare to 2014/15?







The breakdown of long term support in Norfolk



\*Key just for reference to bar charts, not flow diagram.

# 13 People admitted to permanent residential or nursing care

## What this measures:

The number of people aged 18-64 being permanently admitted to residential or nursing care per 100,000 population aged 18-64.

SOURCE: ASCOF 2A(1)

England

Family Group

Norfolk

East England

Per 100,000 population



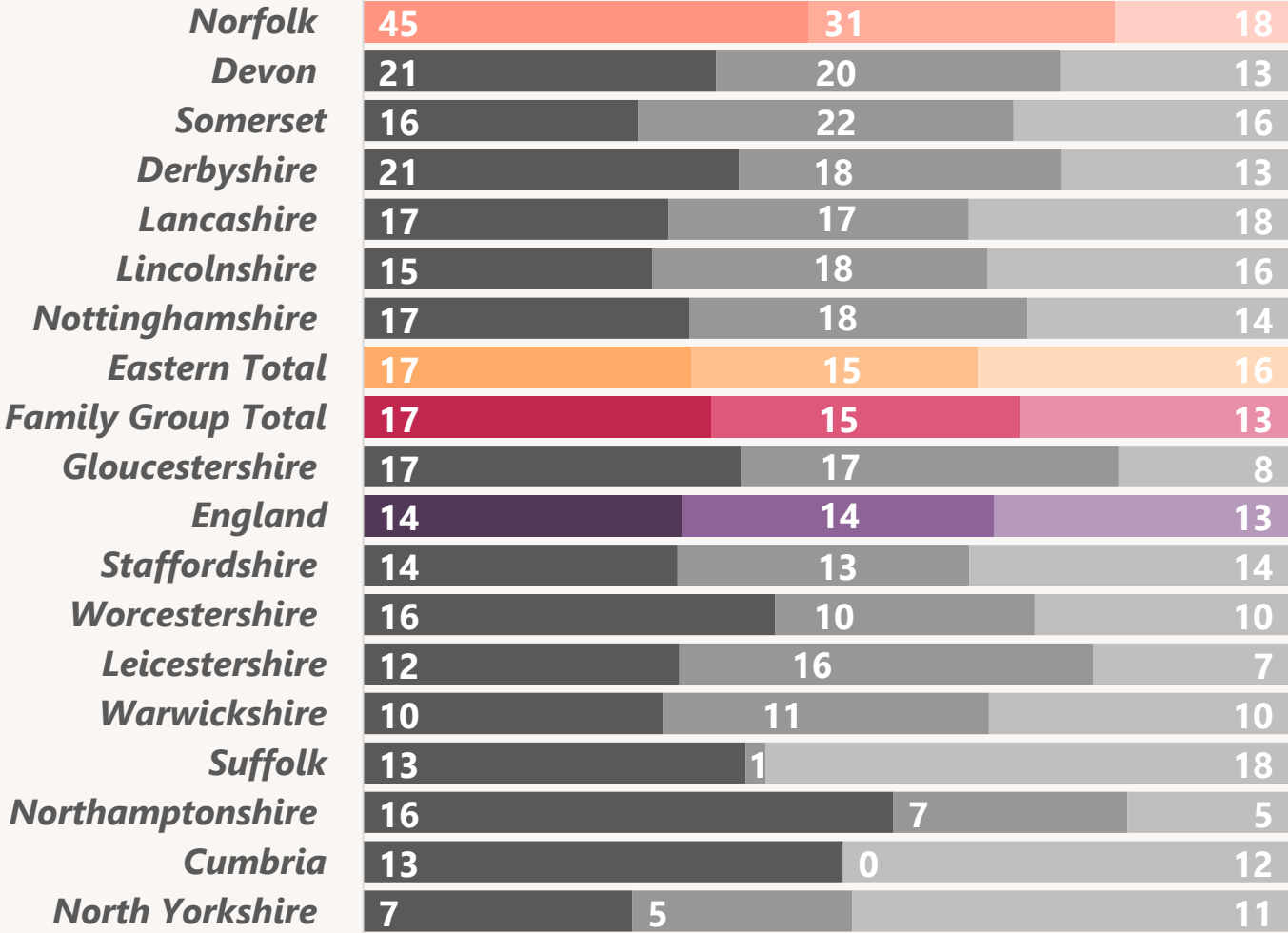
Norfolk's figure has decreased by

43%

compared to 2014/15

## Our place in the family group and how this has changed over time

2013/14 2014/15 2015/16



For 2014/15 Cumbria did not provide any results so they have not been included in the family group average.

## What does this tell us?

Norfolk has the highest number of people in this age range being admitted to permanent or nursing care in its family group. This accounts for the large number of long term services we provide.

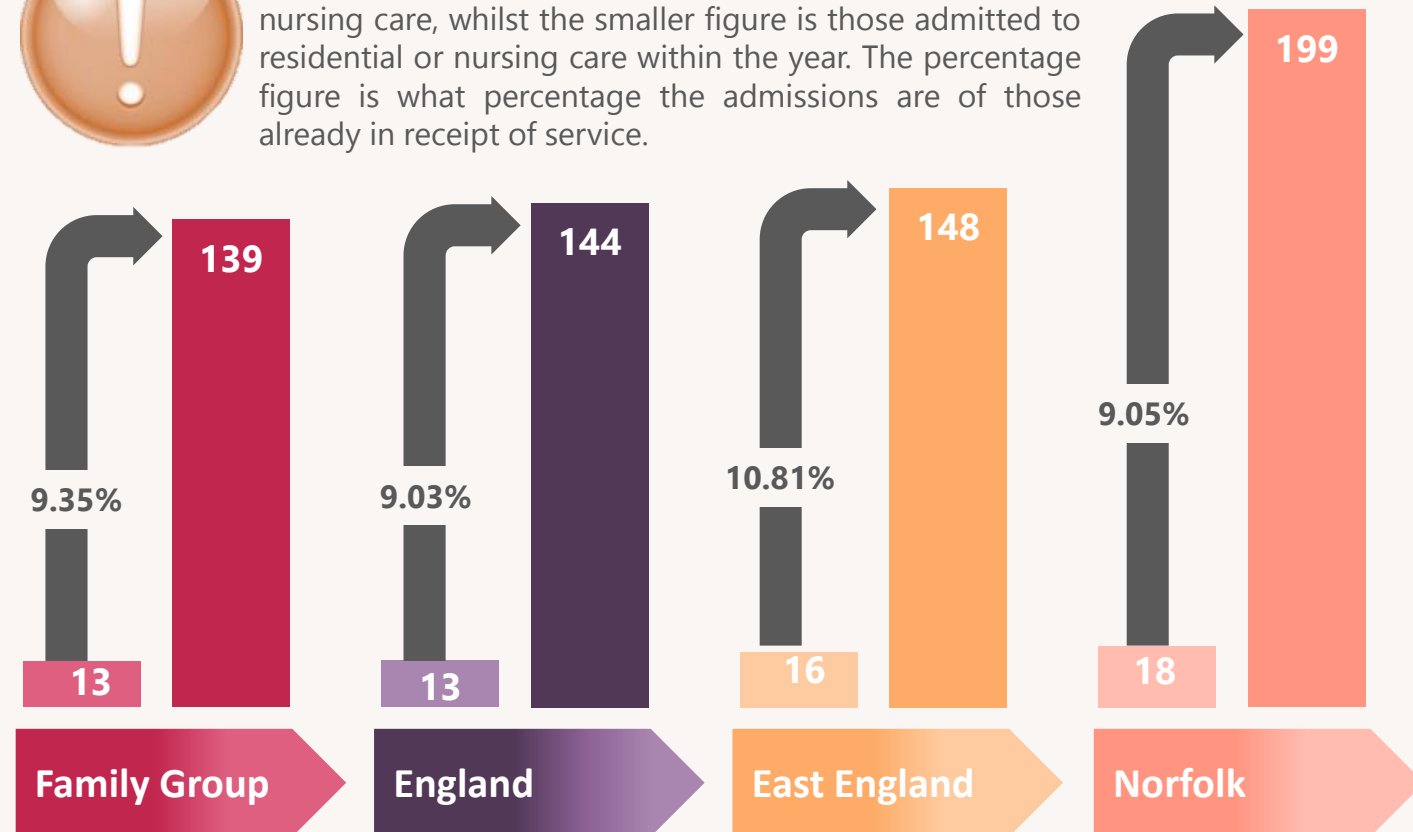
## What this measures:

This compares the number of people aged 18-64 being permanently admitted to residential or nursing care (per 100,000 population) in year, against the number of people aged 18-64, who were in receipt of residential or nursing care per 100,000 population.

Per 100,000 population

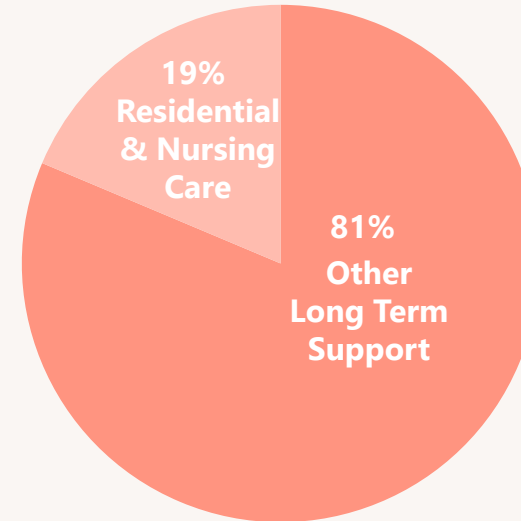


The larger of the two numbers for each comparator groups is people aged 18-64 in receipt of residential or nursing care, whilst the smaller figure is those admitted to residential or nursing care within the year. The percentage figure is what percentage the admissions are of those already in receipt of service.

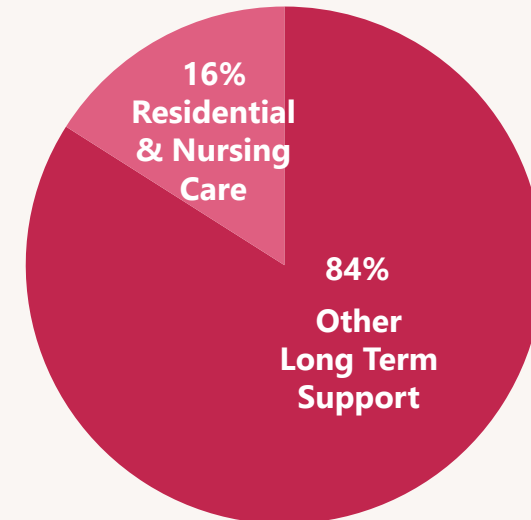


## What % of Long Term Support is Residential and Nursing Care?

### Norfolk



### Family Group



## What do we mean by 'Other Long Term Support'?

Other long term support includes direct payments, part direct payments, personal budgets and other commissioned support.

## What does this tell us?

Norfolk's rate of existing service users in residential care is higher than our comparator groups. However when we look at the proportion of new admissions, this figure is relatively consistent with everyone else.

65+

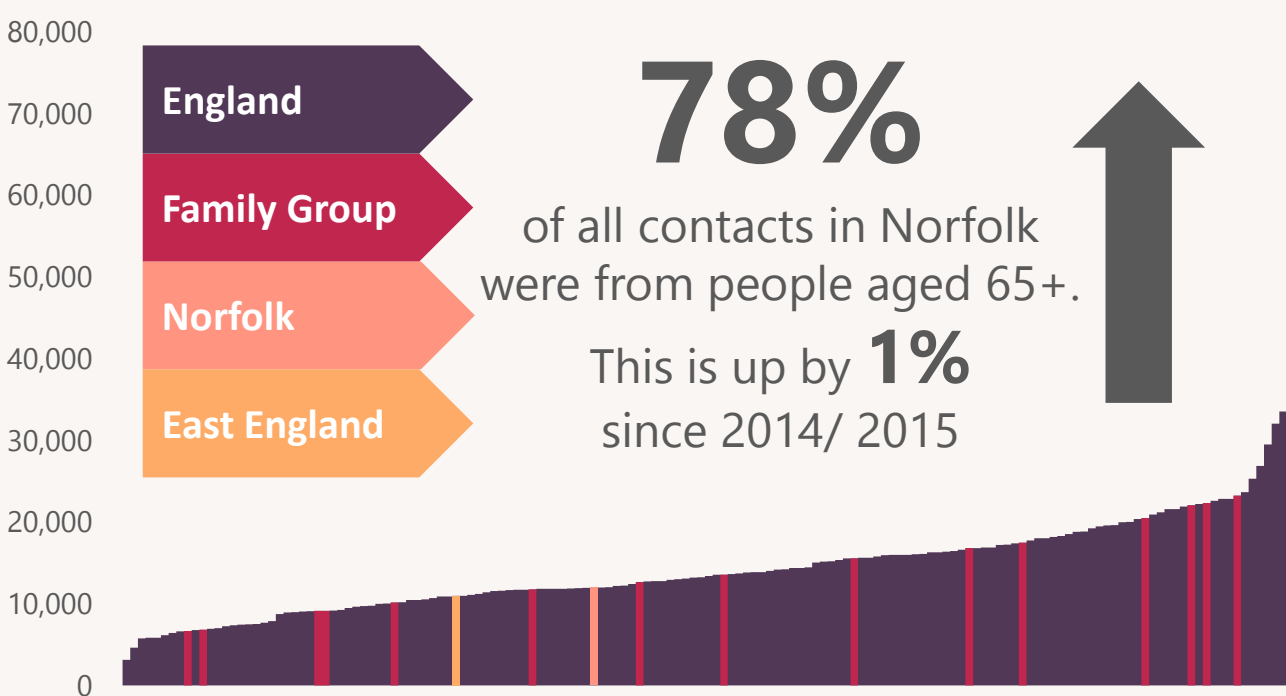
Adult

Social Care

Pathway



# 16 Number of requests for support for people aged 65+



## What does this tell us?

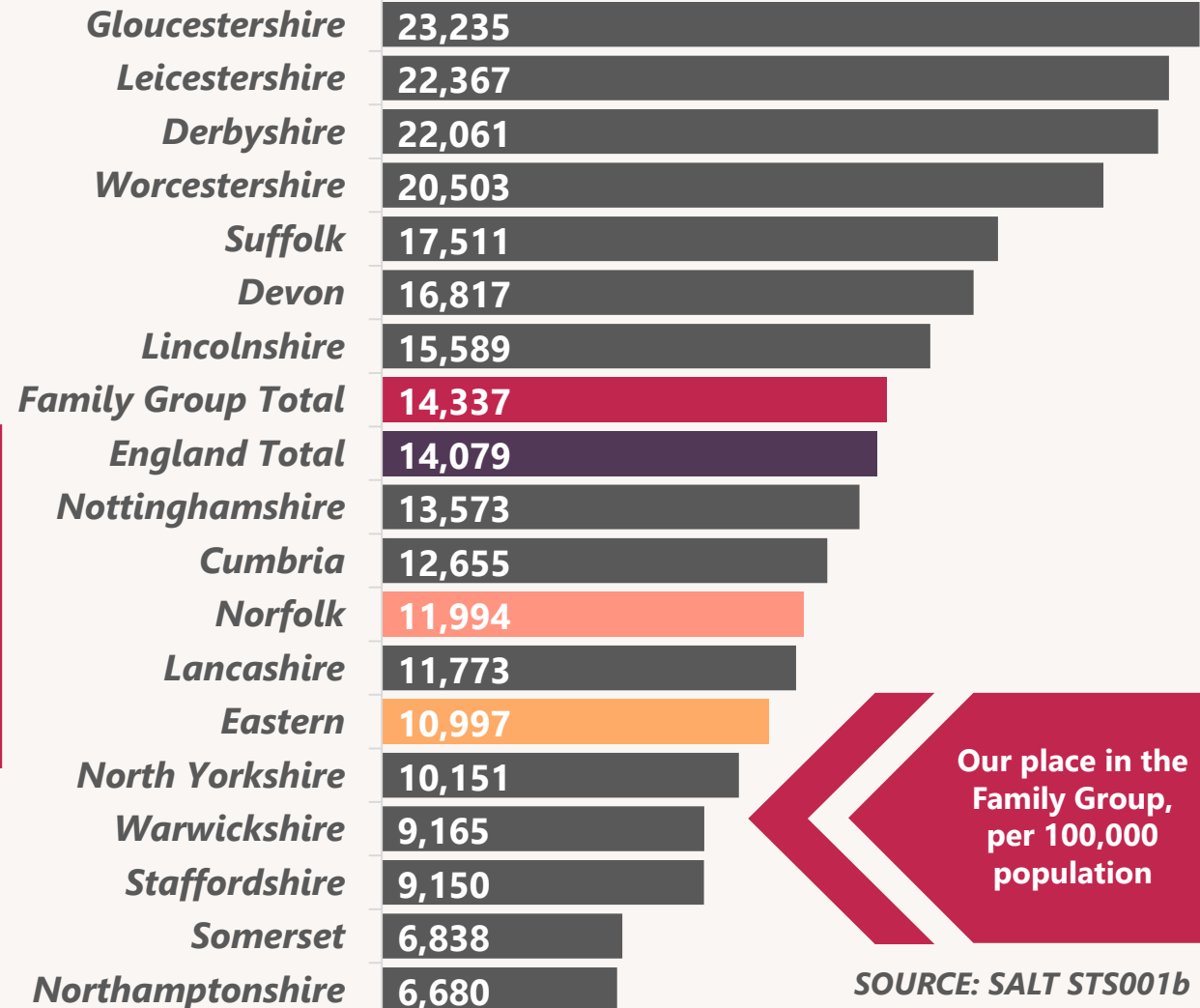
Norfolk is significantly below average compared to our family group and England – but missing Blue Badge recording means the figures are certainly lower than they should be. Difference between this and previous very high contacts results possibly indicates suppressed figures, but also high levels of mis-directed re-referrals coming through the front door – particularly given that people already in services aren't included in these figures.



This measure is significantly different to the 'contacts' measure reported previously in the RAP return. Norfolk's figure is artificially low because we don't capture Blue Badge requests in the right way – other councils may have been able to include these.

## What this measures:

The number of contacts from people aged 65+ requesting support per 100,000 population. It does not include requests from people already in a long term service.



Our place in the Family Group, per 100,000 population

SOURCE: SALT STS001b



# 17 What happened next in Norfolk for those aged 65+?

## What this measures:

This shows us what happened following a new request for support from somebody not already receiving a service. This is split by the route of access for each request, and then by percentage split to each service classification i.e Short Term Support.

**What does this tell us?** Compared to 2014/15 the percentage split by the route of access has not really seen any significant changes. However, there has been a decrease in ongoing low level support, end of life care and an increase in short term support, which supports Norfolk’s promoting independence strategy.

SOURCE: SALT STS001b

The ‘No Services Provided’ category includes people whose assessment is terminated, usually because they go in to hospital or die before it is completed. This is why the percentage in this category is higher than for younger people.



us? Compared to 2014/15 the percentage split by the really seen any significant changes. However, there has going low level support, end of life care and an increase which supports Norfolk’s promoting independence		Route of Access		
		Discharge from Hospital 25.31%	Preventing Hospital Admission 2.71%	Other Route 71.98%
SOURCE: SALT STS001b				
38.29%	Short Term Support	48.77%	63.84%	33.65%
5.95%	Long Term Community Care	11.68%	3.08%	4.05%
0.29%	Long Term Nursing Care	0.90%	0%	0.09%
0.75%	Long Term Residential Care	1.81%	0%	0.40%
0.46%	End of Life Care	0.41%	0%	0.49%
9.32%	Ongoing Low Level Support eg. Equipment/adaptations	2.22%	2.31%	12.09%
42.17%	Universal Services/ Signposted to other services	30.26%	29.23%	46.83%
2.77%	No Services Provided	3.95%	1.54%	2.40%

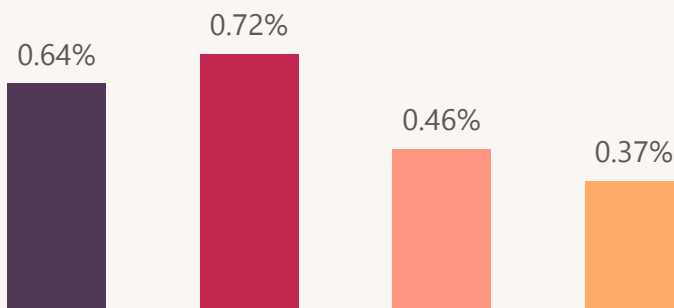
# 18 How does Norfolk compare for those aged 65+?

## What this measures:

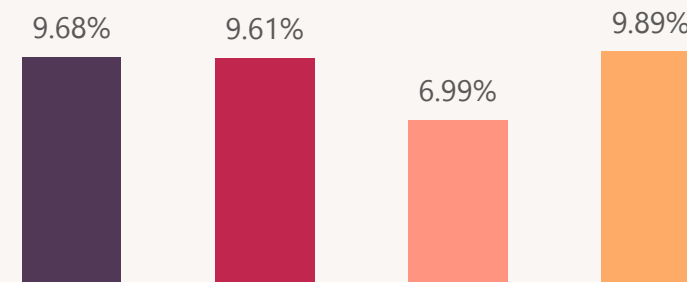
This looks at the percentage of people whose request for support resulted in each of the 6 types of sequel described on the previous page, compared against England, our family group and East England

SOURCE: SALT STS001b

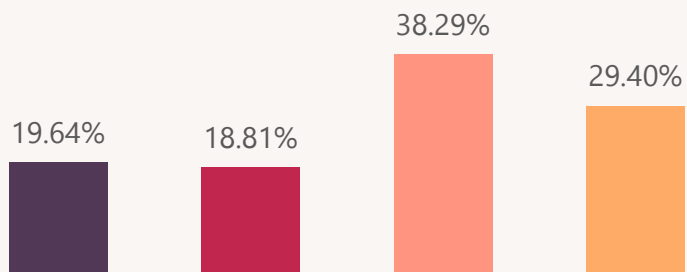
### End of Life Care



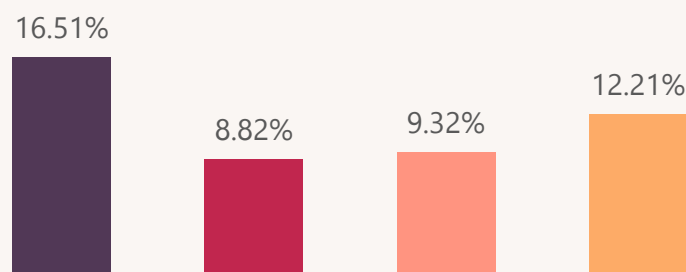
### Long Term Support



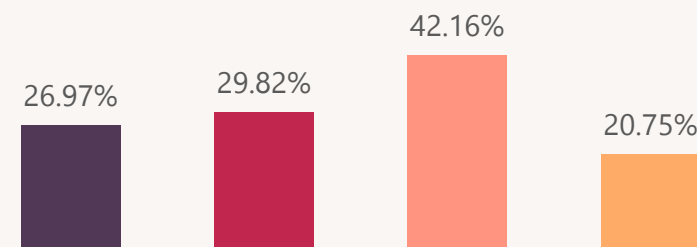
### Short Term Support



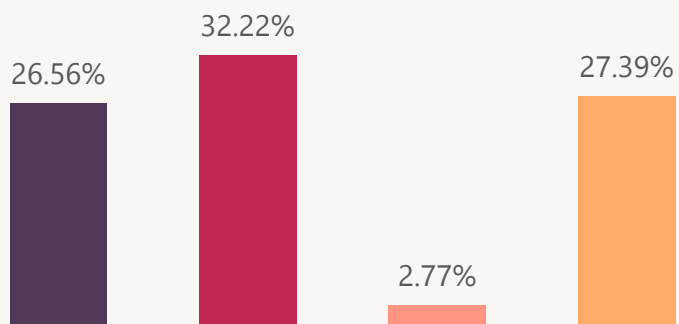
### Ongoing Low Level Support



### Universal Services/ Signposted to other services



### No Services Provided



## What does this tell us?

When compared to the rest of England and our family group, Norfolk has very high levels of short term support but lower levels of long term support. This suggests that the short term support to maximise independence is working by reducing the need for long term support. Long term support has decreased since 2014/15, whilst short term support has increased.

England

Family Group

Norfolk

East England

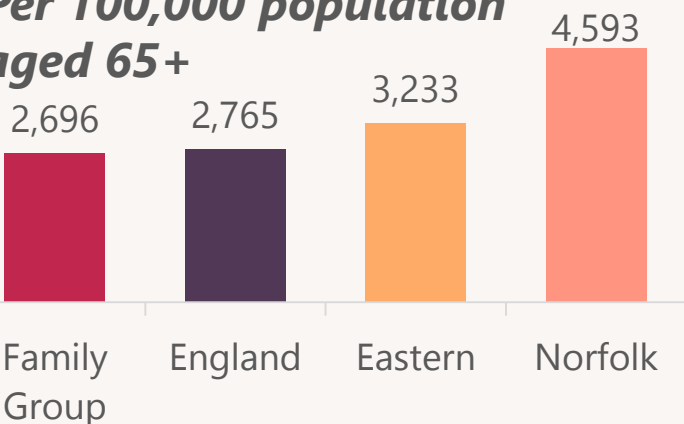


Short Term Support are people who have a short period of reablement after leaving hospital to help them regain their independence, or are helped by an emergency intervention, such as assistance after pressing their community alarm.

**What this measures:** This measures the number of people aged 65+ receiving short term support per 100,000 population. The graph shows the percentage split across our family group between reablement and emergency intervention.

**SOURCE: SALT STS001b**

**Per 100,000 population aged 65+**



Per 100,000 population, short term support for those aged 65+ in Norfolk has increased by

**21%**

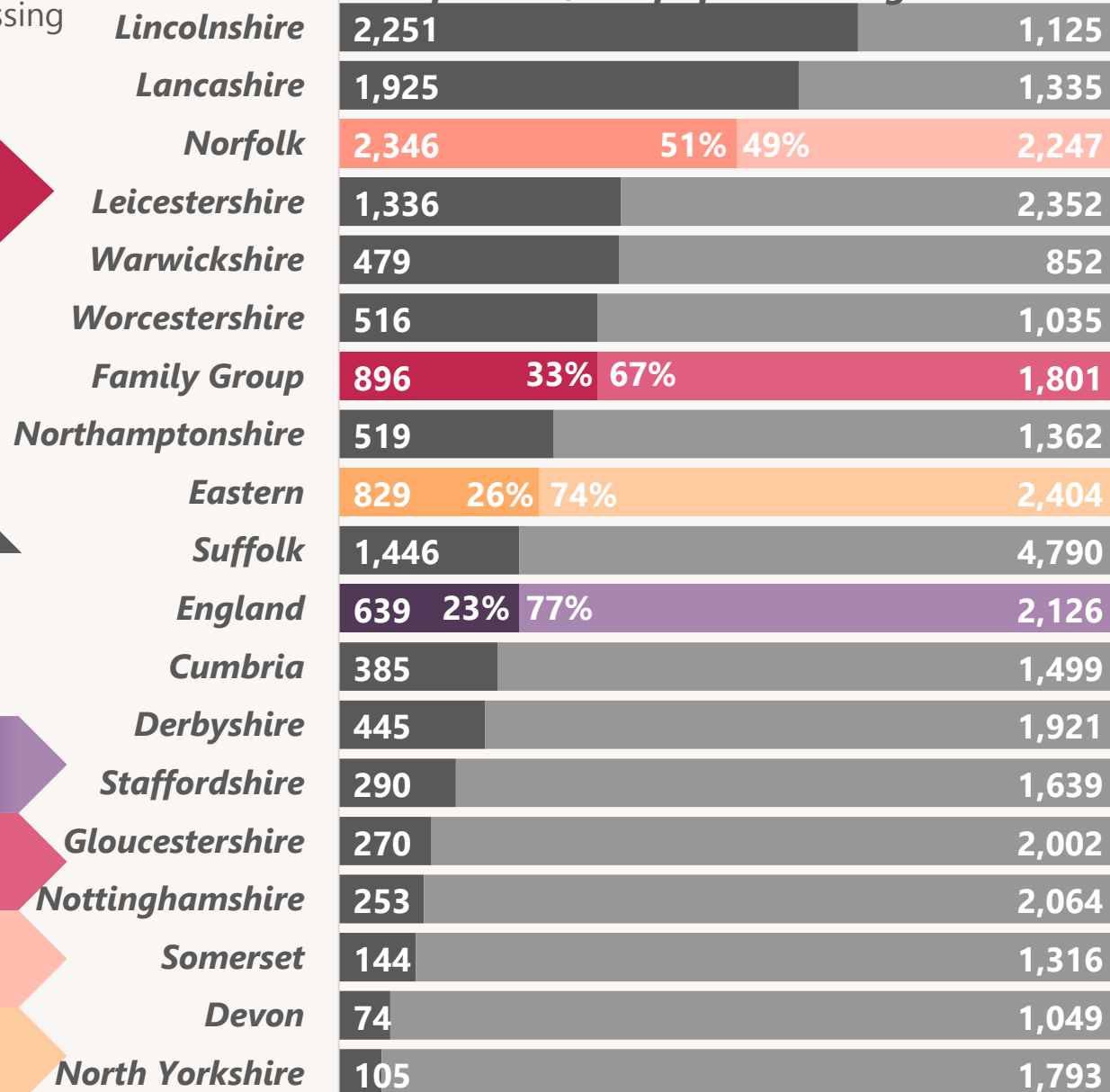
compared to 2014/15



## What does this tell us?

Norfolk is the third highest in the family group and higher than all our comparator group averages for short term emergency intervention. This suggests we are providing large amounts of short term support compared to other councils. As with short term support for those ages 18-64, we are providing more short term support per 100,000 population compared to 2014/15.

■ **Emergency Intervention** ■ **Reablement**  
per 100,000 population aged 18-64



England

Family Group

Norfolk

East England

*The national picture...*

Per 100,000 population

**What does this tell us?**

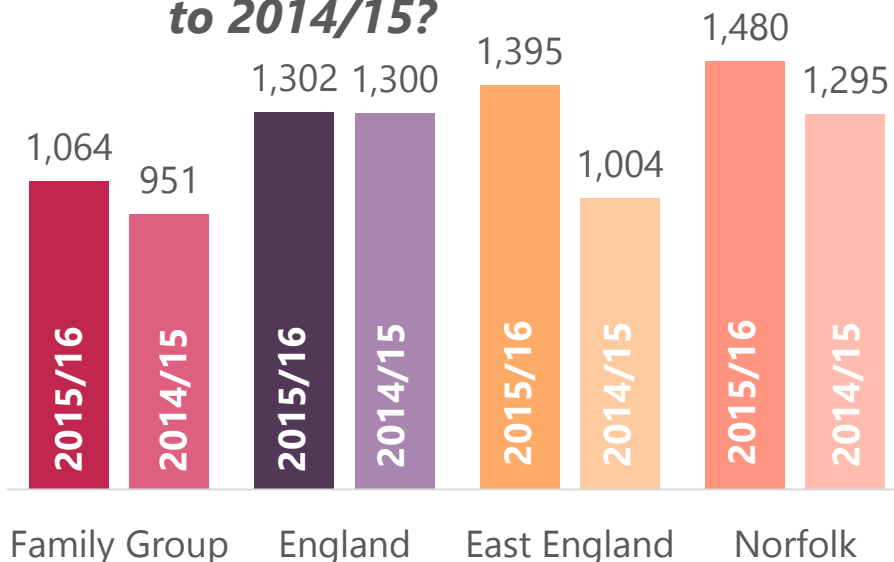
When compared to our family group, Norfolk's figures are quite high. However, looking nationally, our figures are around the mid-point.

SOURCE: SALT STS001b

All four comparator groups have seen an increase of referrals into short term care from hospital. Norfolk's has risen by

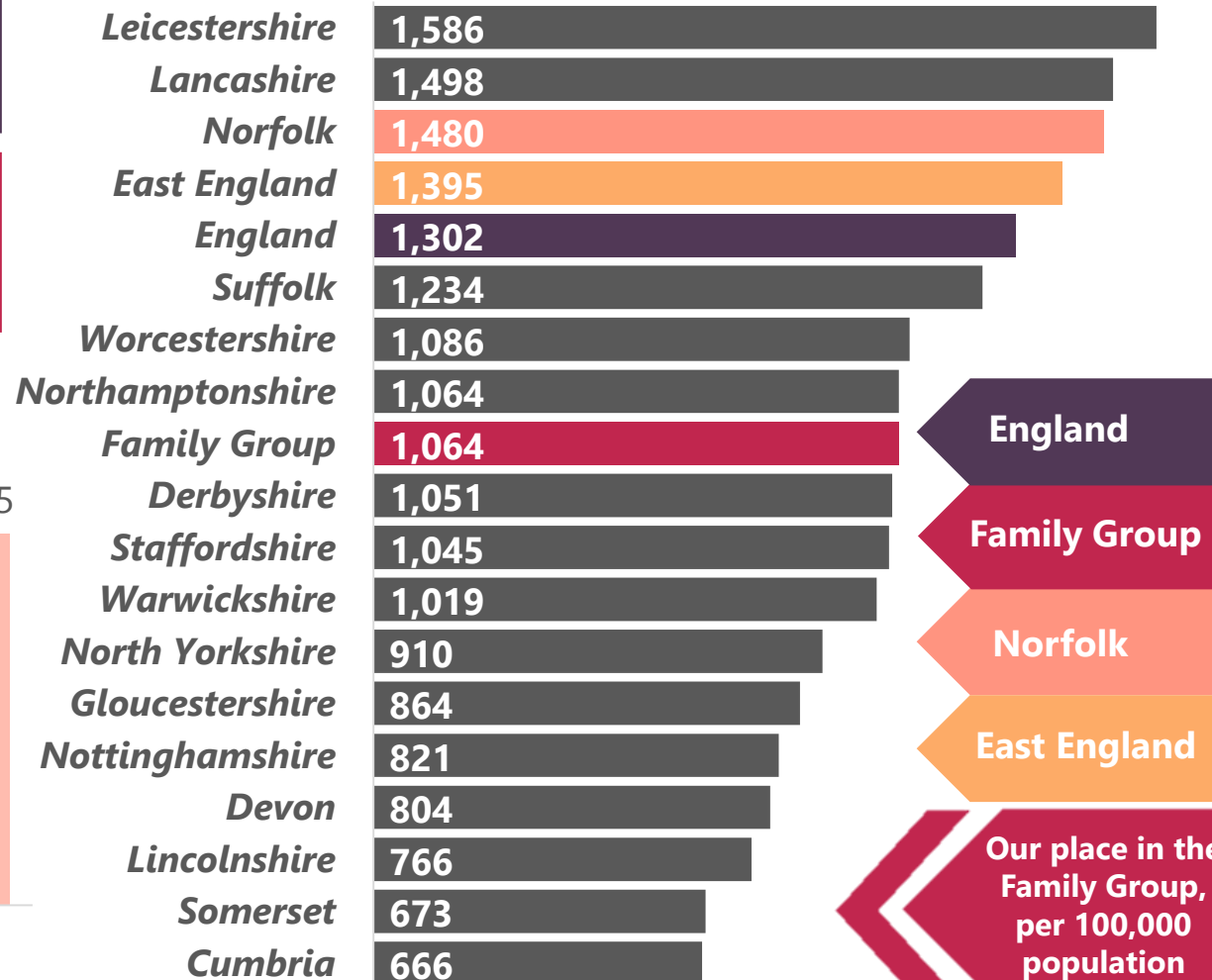
**14%↑**

compared to  
2014/15

*How does this compare to 2014/15?***What this measures:**

The number of people aged 65+ being referred into short term social care from hospitals per 100,000 population aged 65+.

&amp;

*our place in the family group*

England

Family Group

Norfolk

East England

Our place in the  
Family Group,  
per 100,000  
population

# 21 People in receipt of long term support aged 65+

## What this measures:

The number of people aged 65+ receiving long term support per 100,000 population aged 65+.

14,000

Per 100,000 population

SOURCE: SALT LTS001b

12,000

10,000

8,000

6,000

4,000

2,000

0

England

Family Group

Norfolk

East England

Lancashire 7,267

Derbyshire 6,340

England 6,313

Somerset 6,099

Devon 5,972

Staffordshire 5,928

Cumbria 5,709

Leicestershire 5,683

East England 5,663

Family Group 5,661

Warwickshire 5,618

Norfolk 5,554

North Yorkshire 5,455

Nottinghamshire 5,302

Lincolnshire 5,189

Northamptonshire 5,088

Gloucestershire 5,023

Suffolk 4,673

Worcestershire 4,395

**What does this tell us?** Norfolk has moved from being the second highest in our family group, to now being eighth in our family group. This decrease suggests that the short term support to maximise independence is working by reducing the need for long term support.

Norfolk's figure is

12%

below the national average. This difference has dropped by 10% since 2014/15

## How does this compare to 2014/15?

5,554

5651

5,661

5938

5,663

6781

6,313

7170

Norfolk

Family Group

East England

England

2015/16

2014/15

2015/16

2014/15

2015/16

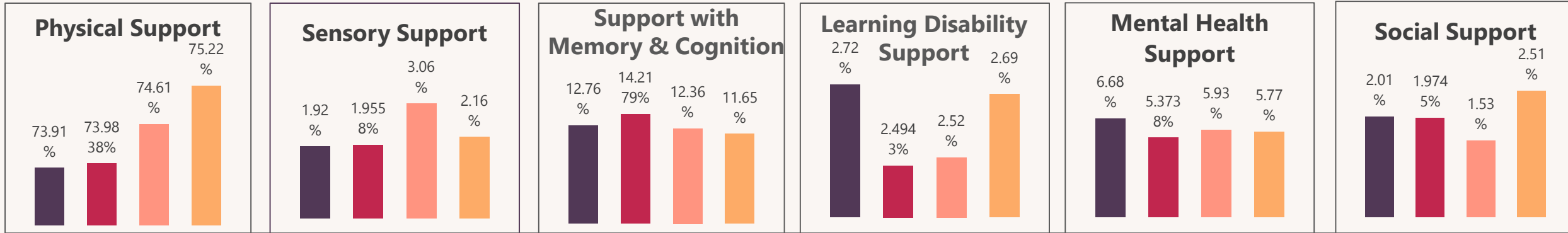
2014/15

2015/16

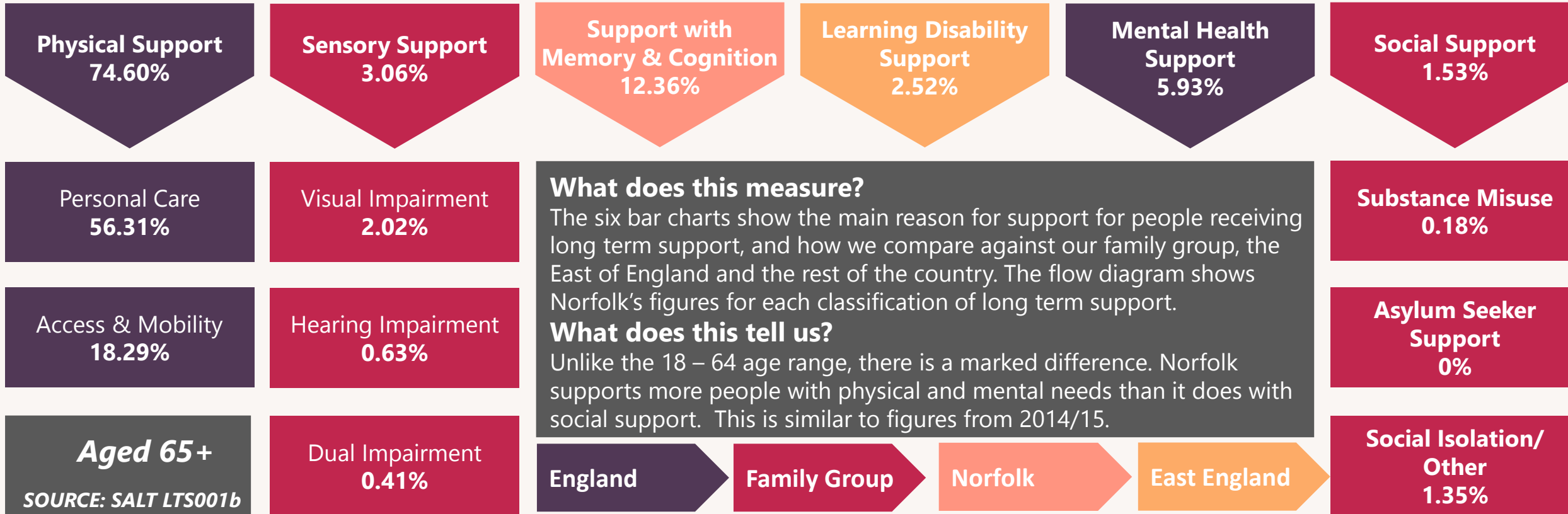
2014/15



# 22 What do we mean by 'long term support' for those aged 65+?



The breakdown of long term support in Norfolk



\*Key just for reference to bar charts, not flow diagram.

# 23 People admitted to permanent residential or nursing care

## What this measures:

The number of people aged 65+ being permanently admitted to residential or nursing care per 100,000 population aged 65+.

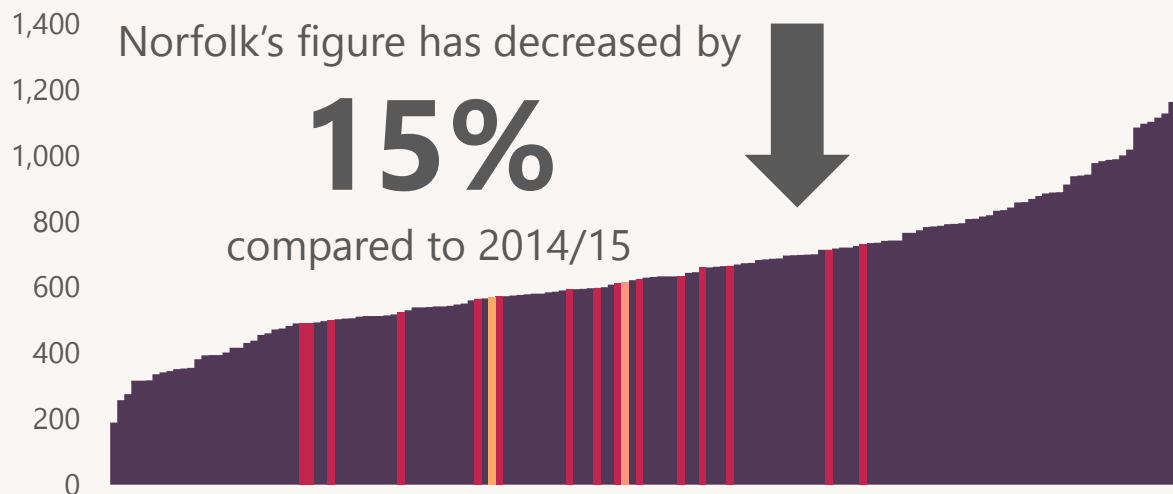
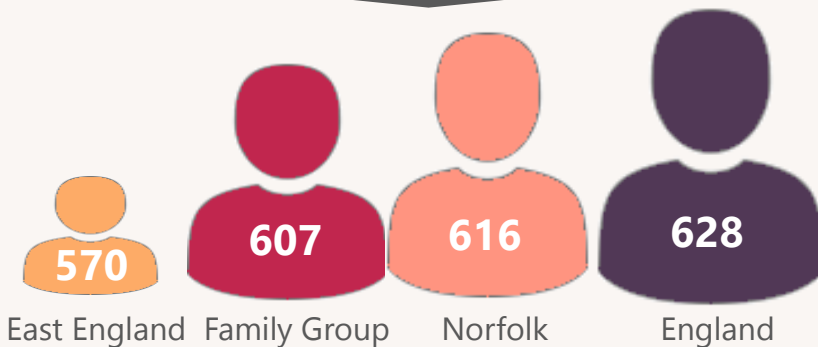
England

Family Group

Norfolk

East England

Per 100,000 population



## What does this tell us?

Norfolk's rate is still high, despite a continued decrease from 2013/14. We are the closest we have been to our family group since 2013/14.

SOURCE: ASCOF 2A(2)

## Our place in the family group and how this has changed over time

■ 2013/14 ■ 2014/15 ■ 2015/16

Gloucestershire	800	710	665
Lancashire	796	794	715
Norfolk	777	724	616
Northamptonshire	750	545	491
Leicestershire	731	734	594
Derbyshire	716	751	731
Family Group Total	656	640	607
Staffordshire	655	669	625
Lincolnshire	654	600	614
England	651	696	628
Eastern Total	649	566	570
Nottinghamshire	632	724	599
Suffolk	628	123	661
Worcestershire	609	638	635
Cumbria	594	0	491
Somerset	572	771	566
Devon	541	616	501
Warwickshire	539	504	573
North Yorkshire	511	695	525



For 2014/15 Cumbria did not provide any results so they have not been included in the family group average.

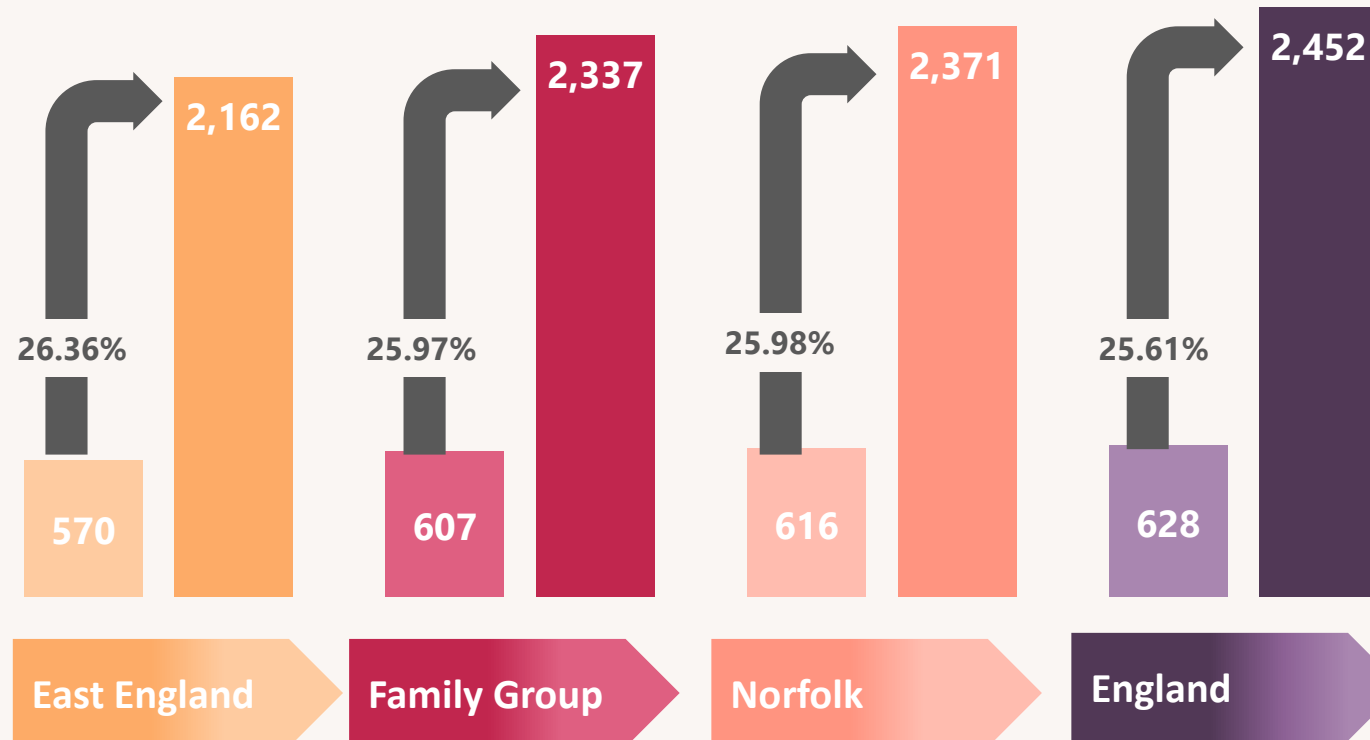
## What this measures:

This compares the number of people aged 65+ being permanently admitted to residential or nursing care (per 100,000 population) in year, against the number of people aged 65+, who were in receipt of residential or nursing care per 100,000 population.

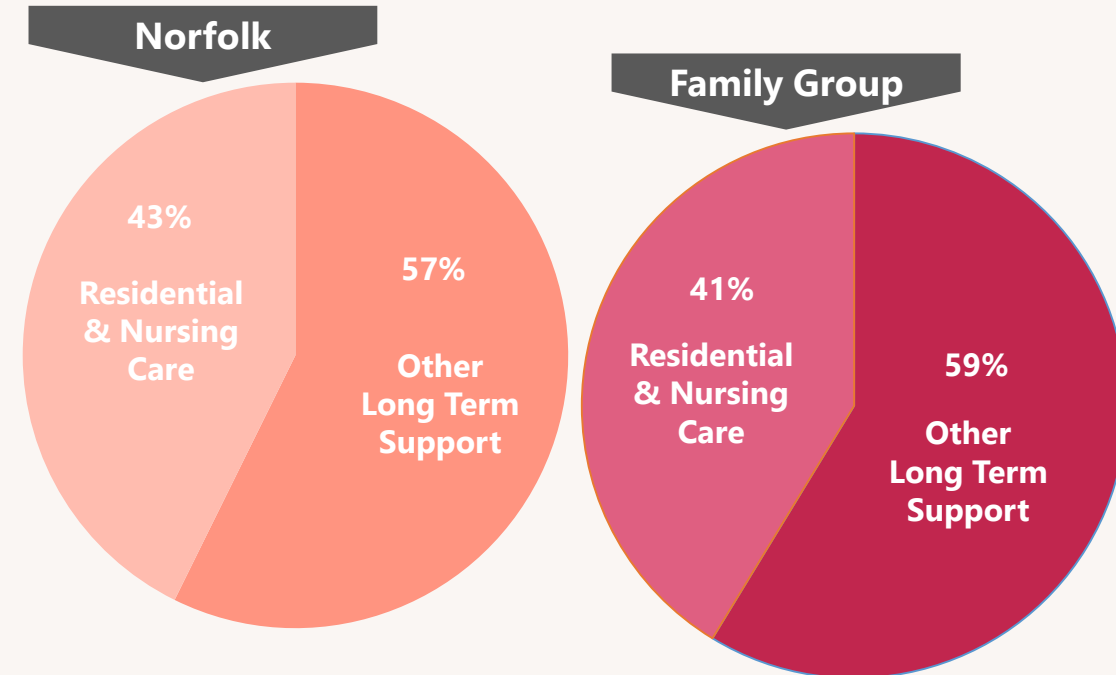
Per 100,000 population



The larger of the two numbers for each comparator groups is people aged 65+ in receipt of residential or nursing care, whilst the smaller figure is those admitted to residential or nursing care within the year. The percentage figure is what percentage the admissions are of those already in receipt of service.



## What % of Long Term Support is Residential and Nursing Care?



## What do we mean by 'Other Long Term Support'?

Other long term support includes direct payments, part direct payments, personal budgets and other commissioned support.

## What does this tell us?

As expected, unlike the 18-64 age range, the split between residential and other long term support is more equal. Norfolk's figures are slightly above our family group figures, however Norfolk is still below the national figures per 100,000, however the percentage split is higher.

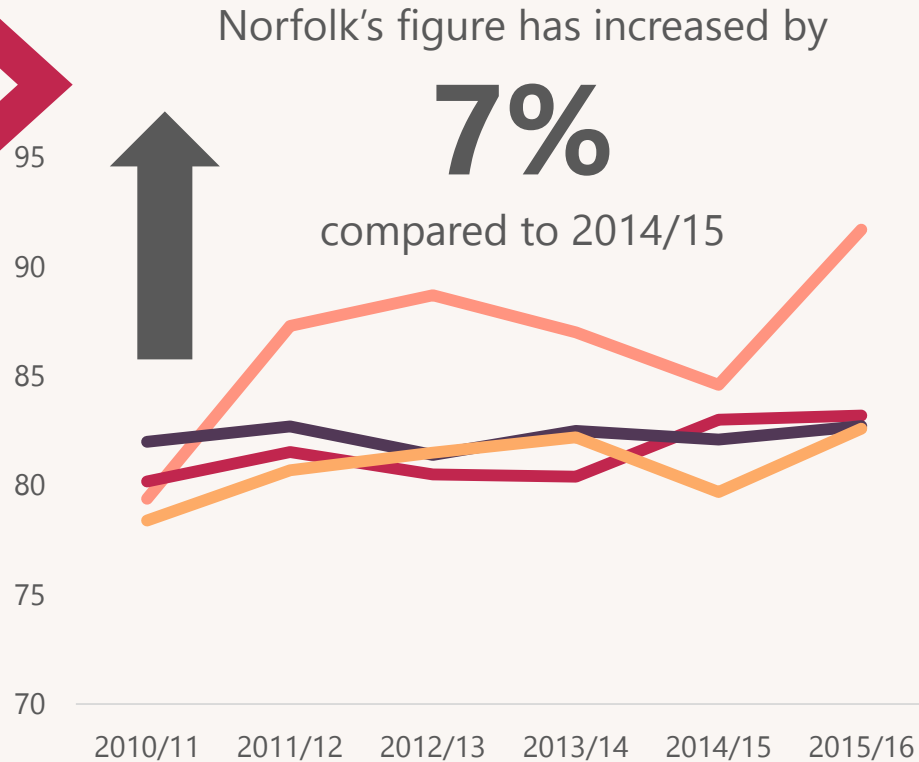
SOURCE: Residential Admissions ASCOF 2A (2) & People in receipt of long term care SALT LTS001b

# 25 Effectiveness of reablement for those aged 65+

## What this measures:

This measures the percentage of people still at home 91 days after discharge. It measures the effectiveness of our reablement services.

## How has this changed over time?



## What does this tell us?

Norfolk has the highest percentage of people that are still at home 91 days after discharge. Norfolk has gone from just above average for this measure, to significantly above the national average for this measure.

SOURCE: ASCOF 2B(1)

## Our place in the family group by % of people still at home 91 days after discharge:

Norfolk	91.70%
Somerset	91.40%
Nottinghamshire	91.30%
Staffordshire	87.80%
Worcestershire	87.70%
Leicestershire	87.50%
Devon	87.10%
Cumbria	85.60%
Warwickshire	84.00%
Family Group Total	83.20%
Lancashire	83.20%
England Total	82.71%
Eastern Total	82.60%
North Yorkshire	82.50%
Gloucestershire	81.40%
Suffolk	77.80%
Derbyshire	77.00%
Lincolnshire	76.00%
Northamptonshire	72.90%




Enhancing

Quality of Life

for people with

Care and support needs

*'People are able to find  
employment when they want,  
maintain a family and social  
life and contribute to  
community life'*

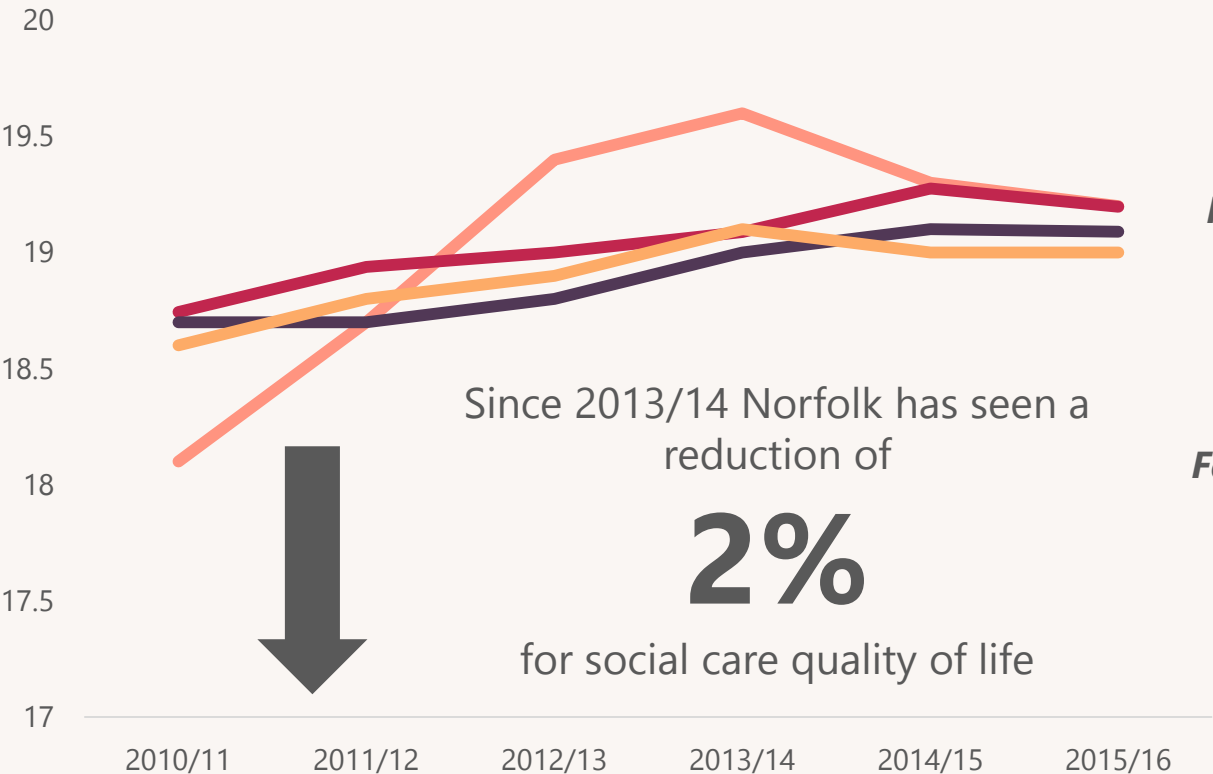




# 27 Social Care related quality of life

## What this measures:

This measures the average score for social care-related quality of life. This is taken from the annual Adult Social Care Survey.

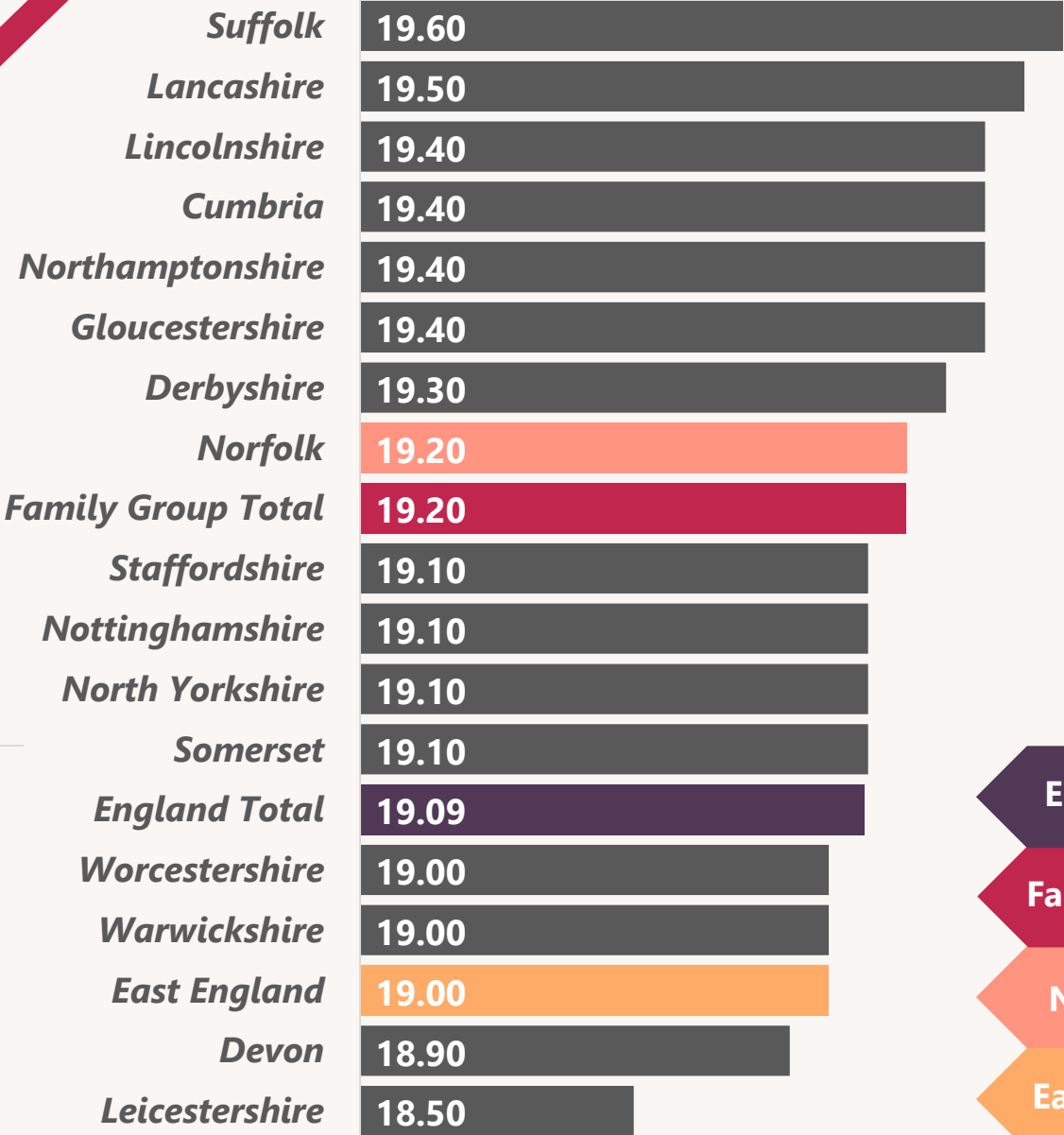


## What does this tell us?

Norfolk is above the national average for this indicator, however our figures have dropped down to the same as our family group average. The national average has also seen a slight reduction, whilst our family group and the East of England have all seen an increase in satisfaction.

SOURCE: ASCOF 1A

## Our place in the family group for social care quality of life



England

Family Group

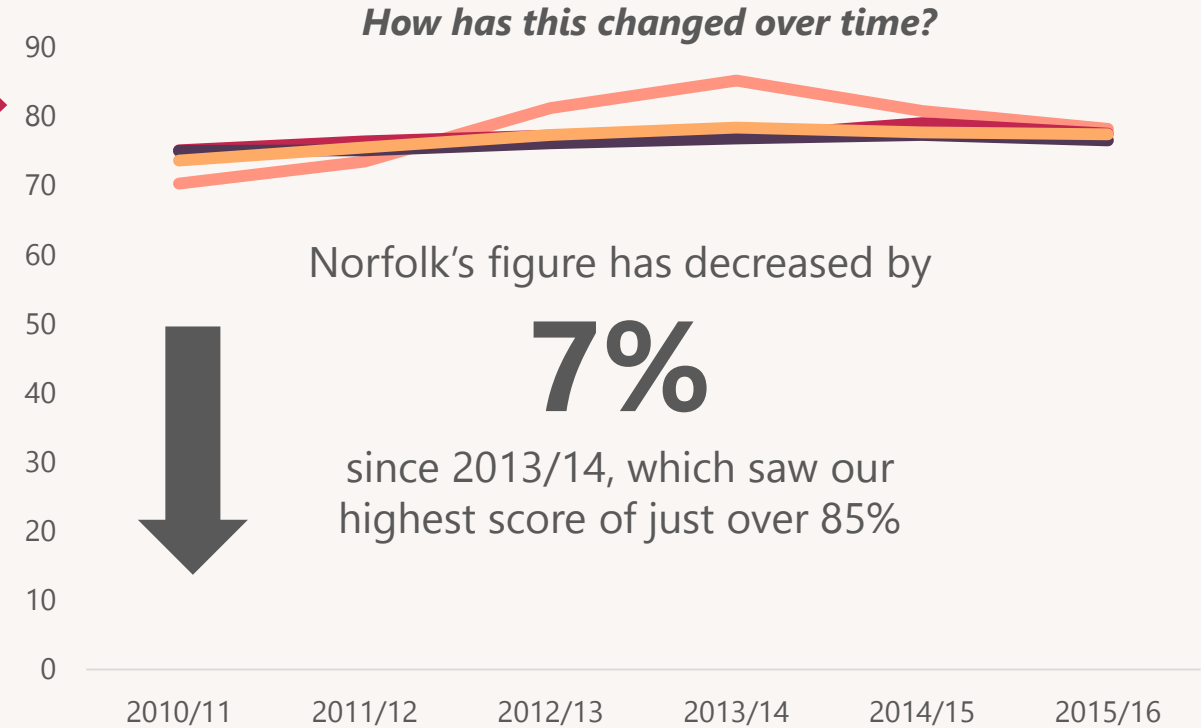
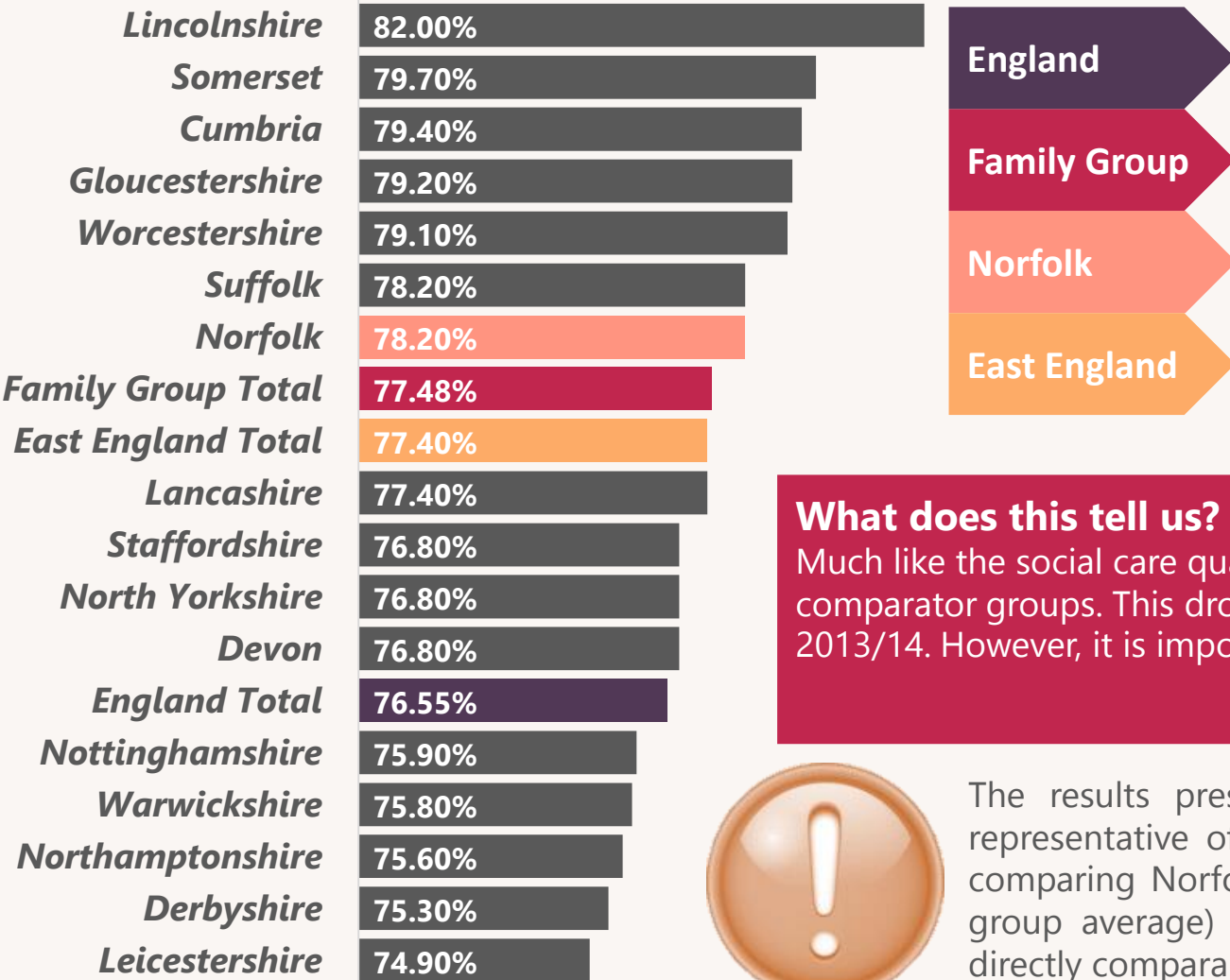
Norfolk

East England

# 28 People using services who have control over their daily life

## What this measures:

This measures the % of people using services who feel they have control over their daily life. This is also taken from the annual Adult Social Care Survey.



## What does this tell us?

Much like the social care quality of life indicator, Norfolk has dropped down and is now just above our comparator groups. This drop is significant when you look back to our highest score of 85% in 2013/14. However, it is important to note we are still above the national average for this indicator.

**SOURCE: ASCOF 1B**

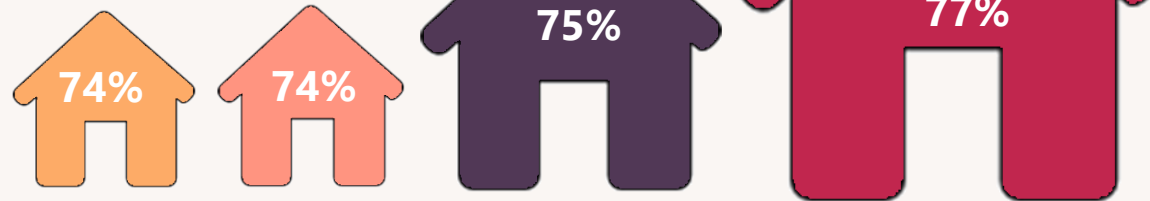


The results presented here have been weighted to make the survey results more representative of total local populations. This means that caution must be taken when comparing Norfolk's performance with the results from other areas (and with the family group average) since variations in population characteristics mean our results are not directly comparable with anything but our own historic performance.

**What this measures:**

This measures the % of people with learning difficulties living in their own home or with family.

% of people



England

Family Group

Norfolk

East England

	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16
England	59	70	73.5	74.9	73.3	75.4 ↑
Family Group	56.9	66.9	73.9	75.3	73.9	76.7 ↑
Norfolk	70.2	71.9	72.1	73.4	74.20	74.0 ↓
East England	54.5	66.3	73.1	73.9	69.2	74.0 ↓

**What does this tell us?**

For the first time in six years, Norfolk has seen a reduction in figures. However, this is a slight reduction of 0.20%. This feels significant because both nationally and within our family group the figures have increased, so our ranking has decreased.

SOURCE: ASCOF 1G

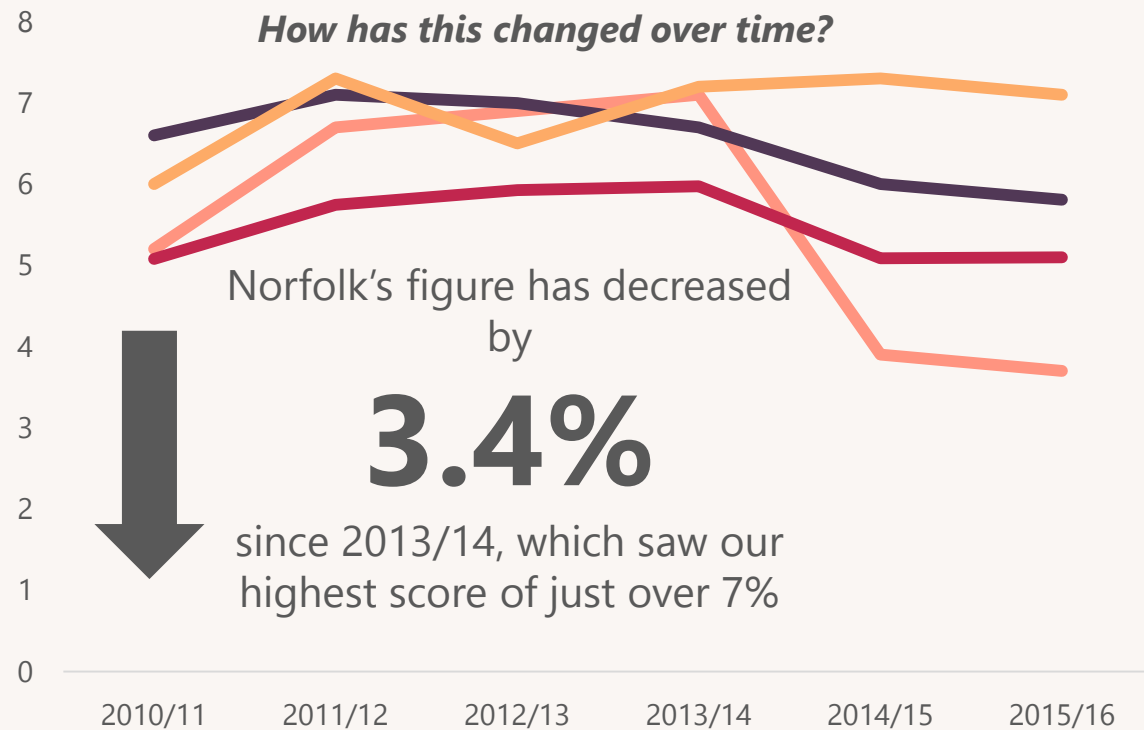
Even though Norfolk has only had a **0.20%** reduction since 2014/15, we have dropped from **7<sup>th</sup> place** in our family group to **12<sup>th</sup> place**.

Lancashire	91.80%
North Yorkshire	88.30%
Derbyshire	84.30%
Cumbria	82.70%
Somerset	81.90%
Leicestershire	77.50%
Family Group	76.67%
Nottinghamshire	75.90%
England	75.38%
Worcestershire	75.10%
Lincolnshire	74.70%
Norfolk	74.00%
East England	74.00%
Gloucestershire	71.60%
Warwickshire	71.10%
Devon	70.00%
Staffordshire	69.20%
Northamptonshire	66.00%
Suffolk	61.50%

# 30 People with Learning Disabilities in paid employment

## What this measures:

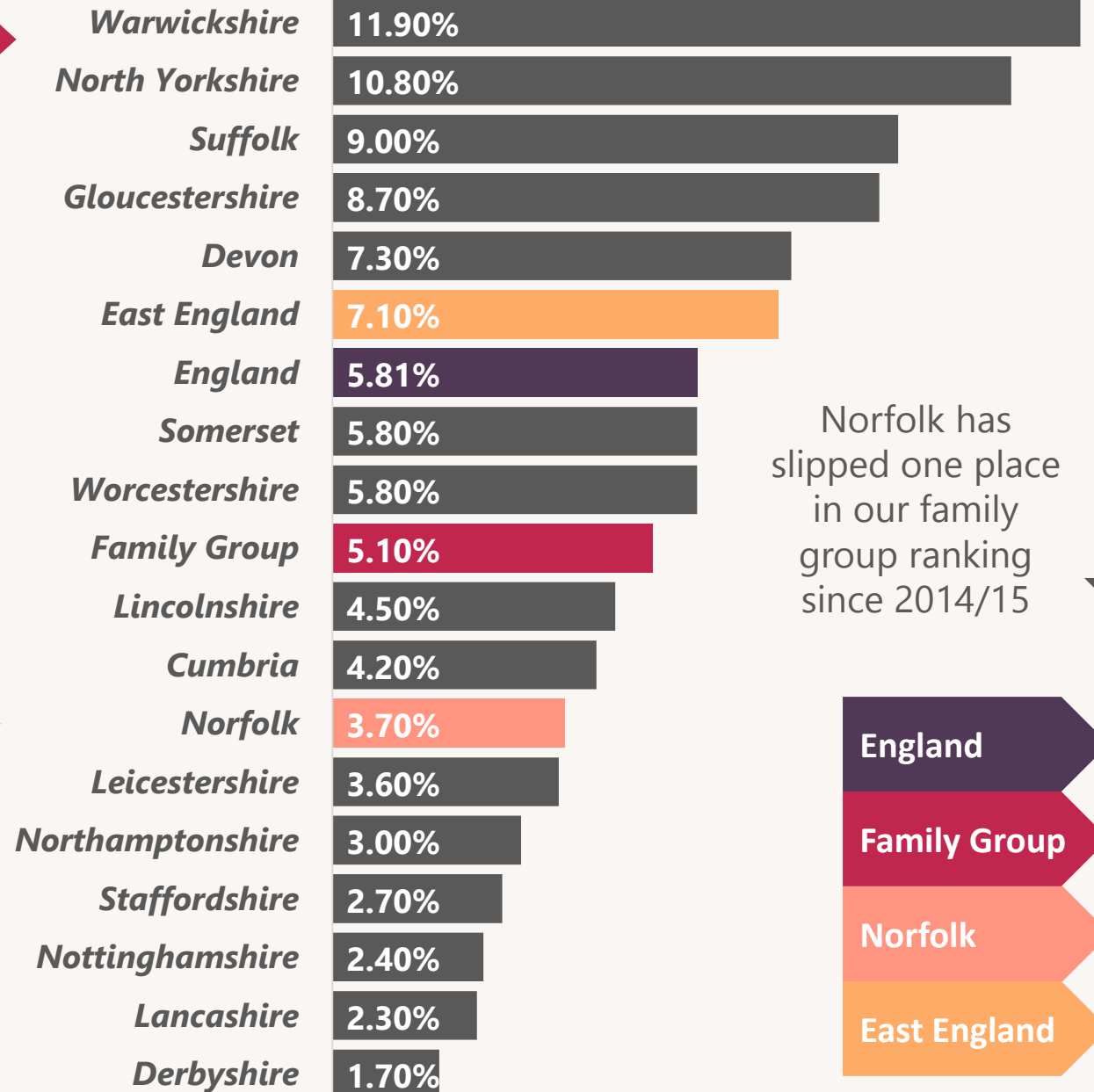
This measures the % of people with learning disabilities who are in paid employment.



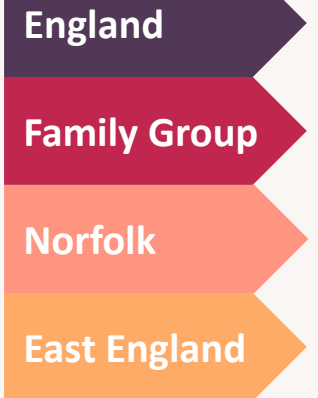
## What does this tell us?

For the second year in a row, Norfolk's figures for this indicator have fallen. Although the figure is not as significant as 2014/15, when combined together the decrease over two years is a significant 3.4%. Norfolk, is one of five within our family group to see a decrease in this figure since 2014/15.

SOURCE: ASCOF 1E



Norfolk has slipped one place in our family group ranking since 2014/15



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

## What this measures:

This measures the overall satisfaction of people who use services with their care and support.

% of people



Even though Norfolk has only had a **0.70%** reduction since 2014/15, **we have moved** from **8<sup>th</sup>** to **5<sup>th</sup>** position in our family group.

England

Family Group

Norfolk

East England

	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16
England	62.1	62.8	64.1	64.8	64.7	64.4 ↓
Family Group	63.2	63.6	65.8	65.9	66.5	64.5 ↓
Norfolk	55.1	60.8	68.7	70.1	66.9	65.7 ↓
East England	58.7	60.5	62.3	65.6	63.6	67.6 ↑

Derbyshire	70.10%
Lancashire	68.30%
Devon	68.00%
Suffolk	67.90%
Norfolk	67.60%
Northamptonshire	67.60%
Warwickshire	66.70%
Gloucestershire	65.70%
Family Group	65.70%
Lincolnshire	65.20%
Staffordshire	64.90%
East England	64.50%
Cumbria	64.40%
England	64.35%
Worcestershire	64.20%
North Yorkshire	63.10%
Somerset	61.40%
Nottinghamshire	61.30%
Leicestershire	58.00%

## What does this tell us?

Norfolk's figures follow both the national trend and the trend within our own family group, of a decrease in satisfaction. The East of England as a whole has seen an increase in satisfaction. This data was also taken from the Adult Social Care Survey so caution must be taken when looking at this data.

**SOURCE: ASCOF 3A**



Safeguarding

those who are

vulnerable from

abuse or harm

*'Everyone enjoys physical safety and feels secure'*

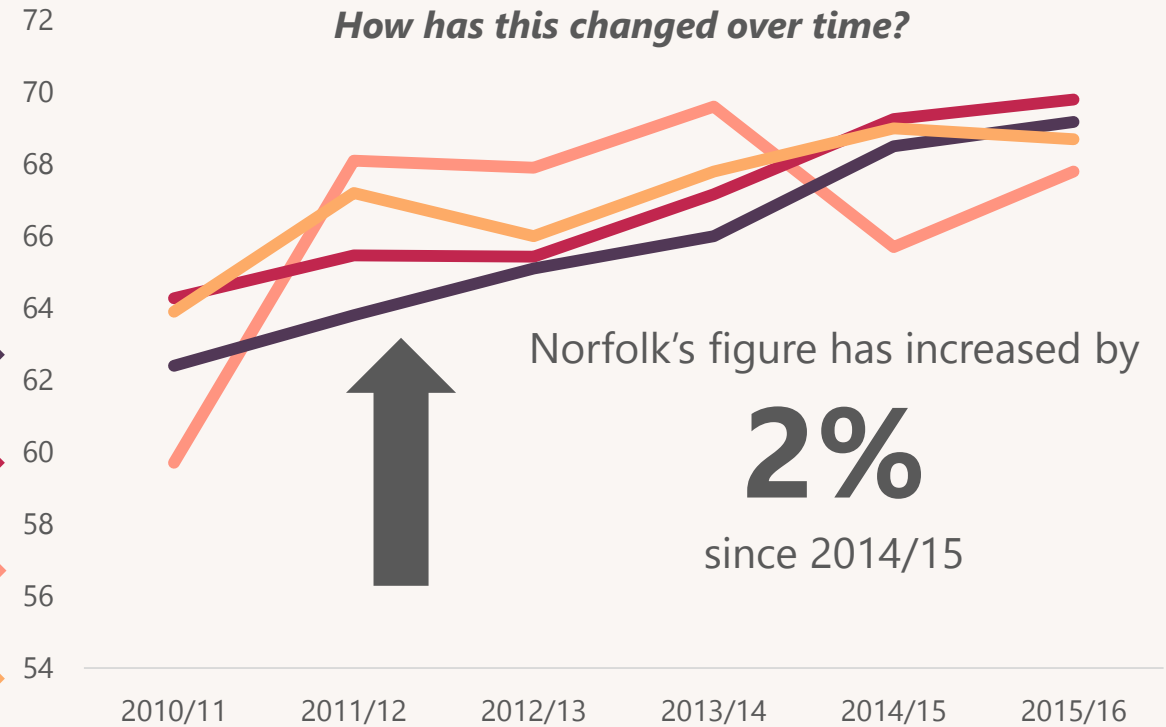
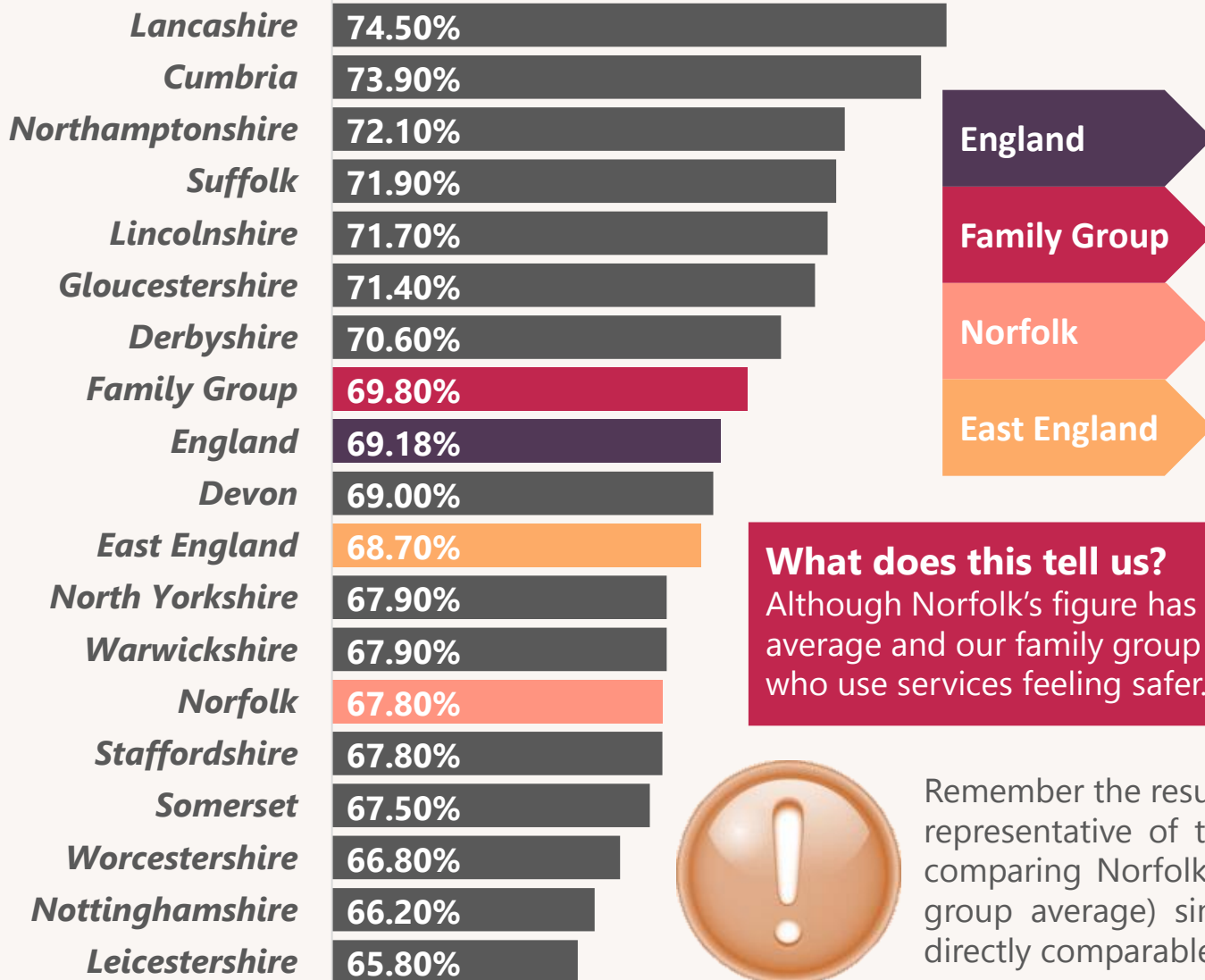




# 33 People who use services who feel safe

## What this measures:

This measures the % of people who use services who say that they feel safe.



## What does this tell us?

Although Norfolk's figure has increased since 2014/15, it is still significantly below the national average and our family group average. Our family group has followed the national trend of people who use services feeling safer.

SOURCE: ASCOF 4A



Remember the results presented here have been weighted to make the survey results more representative of total local populations. This means that caution must be taken when comparing Norfolk's performance with the results from other areas (and with the family group average) since variations in population characteristics mean our results are not directly comparable with anything but our own historic performance.

ASCOF

Summary

Tables

2015/16



# 35 ASCOF Summary Table

## What this measures:

This table summarises Norfolk's ASCOF scores for 2015/16, and how this compares to the previous year. It also shows how Norfolk compares to the Family Group average and our ranking within the Family Group. 1 is the best and 16 is the worst.

Enhancing quality of life for people with care and support needs						
1A	Social care-related quality of life score	▼	19.20	19.30	19.19	8
1B	The proportion of people who use services who have control over their daily life	▼	78.20	80.80	77.57	6
1C (1A)	The proportion of people who use services who receive self-directed support	▼	88.20	88.70	85.25	10
1C (1B)	The proportion of carers who receive self-directed support	▲	88.10	72.60	70.72	8
1C (2A)	The proportion of people who use services who receive direct payments	▼	33.00	34.80	30.27	4
1C (2B)	The proportion of carers who receive direct payments	▲	87.70	43.50	64.45	7
1E	The proportion of adults with a learning disability in paid employment	▼	3.70	3.90	5.46	10
1F	The proportion of adults in contact with secondary mental health services in paid employment	▲	5.40	3.90	18.36	15
1G	The proportion of adults with a learning disability who live in their own home or with their family	▼	74.00	74.20	75.98	10
1H	The proportion of adults in contact with secondary mental health services living independently, with or without support	▼	36.30	62.30	58.86	3
1I (1)	The proportion of people who use services who reported that they had as much social contact as they would like	▼	47.50	48.70	45.14	3
Delaying and reducing the need for care and support						
2A (1)	Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population	▼	17.50	30.70	12.58	14
2A (2)	Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population	▼	616.40	707.00	600.01	10
2B(1)	The proportion of older people (aged 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	▲	91.70	84.60	84.06	1
2B (2)	The proportion of older people (aged 65 and over) who received reablement/rehabilitation services after discharge from hospital	▼	2.10	2.70	2.44	10
2C(1)	Delayed transfers of care from hospital, per 100,000 population	▲	21.70	10.50	28.56	6
2C(2)	Delayed transfers of care from hospital that are attributable to adult social care, per 100,000 population	▲	3.00	1.60	11.24	2
2D	The outcome of short-term services: sequel to service	▼	73.90	82.50	75.24	8
Ensuring that people have a positive experience of care and support						
3A	Overall satisfaction of people who use services with their care and support	▲	67.60	66.90	65.28	5
3D (1)	The proportion of people who use services who find it easy to find information about support	▼	71.20	74.80	72.96	10
Safeguarding adults whose circumstances make them vulnerable and protecting from avoidable harm						
4A	The proportion of people who use services who feel safe	▲	67.80	65.70	69.55	11
4B	The proportion of people who use services who say that those services have made them feel safe and secure	▼	81.00	83.40	87.66	15

# Adult Social Care Benchmarking Report 2015/16

Report produced by  
Business Intelligence

3<sup>rd</sup> Floor, County Hall,  
Martineau Lane, Norwich  
NR1 2DH

Email: [bi@norfolk.gov.uk](mailto:bi@norfolk.gov.uk)

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