

CABINET MEMBER UPDATE		
Overview and Scrutiny Committee (Adult Social Care and Health)		
Councillor	Portfolio	Period of Reporting
Paul Cummins	Cabinet Member Adult Social Care	December 2022 - January 2023

1. Update on the National Assurance Framework for Adult Social Care

Adult Social Care continues to prepare for the introduction of the new National Assurance Framework which will be introduced in April 2023. The final report from the service's Local Government Peer Review was presented to Cabinet in November and Overview and Scrutiny Committee in January, along with an action plan to address any areas required for strengthening. Regular update reports on progress will be provided to Committee for assurance.

The Department of Health and Social Care (DHSC) has recently provided a final draft of the planned assurance framework, whilst the Association of Directors of Adult Social Services (ADASS) have provided further guidance to support preparation including a self-assessment proforma and recommendations to ensure robust corporate oversight and governance. The Executive Director has recently taken an update on progress to the Executive Leadership Team and a new Executive oversight group will be formed shortly, alongside an internal and external reference group. Ensuring a whole Council approach to being "assessment ready" is fundamental to the success of this preparation.

An update from CQC has been issued at the end of November 2022 in relation to the proposed assurance framework, which includes further developments to the framework, including the introduction of an additional quality statement. This is within the Working with People theme and is to capture "Equity in experience and outcomes".

Workshops with Adult Social Care staff were held throughout November and December 2022 to provide an update on what the National Assurance Framework will mean for staff and the service. Groups discussed the four themes: Working with People, Providing Support, Ensuring Safety and Leadership, and staff input was captured around what is working well and identified suggested areas for development. The workshops have been well received and feedback will be included in plans for National Assurance preparation. Further workshops are currently being planned for February/March 2023 in order to ensure the workforce are fully engaged in the process.

Progress to date in relation to the themed areas include:

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Working with People – engagement with Healthwatch to progress collation of people's views with lived experience; the customer journey approach to embed personalisation and

strengths-based practice, including lessons learnt from complaints, case files audits, etc; and a task and finish group has been established to scope numbers and resources needed to establish a specialist Learning Disability Team.

Providing Support – review of direct payment provision and processes has commenced including how to take forward recommendations from the internal audit completed; and the market position statement is to be refreshed.

Ensuring Safety - the transition of safeguarding work to area teams has commenced and this is being carefully monitored as work to formally establish the Safeguarding Hub progresses.

Leadership - policy and strategy audit completed, and policies that require updating are now being progressed. An ASC strategy will also be developed.

2. Integration and National Policy Update

2.1 Sefton Partnership Maturity

The latest review meeting with the Cheshire and Merseyside Integrated Care System senior leaders was held on the 24th of January. There was positive feedback on work with Primary Care which will be developed in a strategic document. Management of those patients who are ready for discharge was cited as positive also and recognition that this remains a very challenging area for Health and Social Care. Further work with the Northwest Ambulance Service and the 111 service is needed still although there was recognition that the relationships across the Sefton partnership are exceptionally strong. Sefton is achieving a good patient experience through good quality outcomes-based commissioning and transformation and there is good evidence of this in Sefton. The next meeting will focus on our Partnership priorities.

2.2 Integrated Care Teams Development

A joint workshop with ASC staff (frontline practitioners, lead practitioners and team managers) and current Integrated Care Co-ordinators (MerseyCare Colleagues) has been held in January 2023. This workshop was to review the approach, what is working well and what changes need to be made to make a difference. All agreed that the approach has helped all to understand roles and responsibilities, that the Multi-Disciplinary Team (MDT) meetings held work well, and that the roll out of the ICT working in the North, especially in relation to support of the care home market, throughout Covid and the pace at this was introduced was exceptional. As a result of the initial workshop held, further workshops will now be organised to take this area of work forward. There is a need to look at how a consistent approach is embedded within North and South Sefton, given the MDTs have different formats across Sefton Place, as well as who attend these and whether this needs to include other disciplines. The workshops also identified the need to consider how this work can link to the locality huddle approach within communities to enhance this method of working, with an aim of holding a stakeholder event whereby engagement with residents of Sefton can be undertaken to develop understanding of the

Integrated Care Team working, and what residents want from this within their local community. As a result of the workshop, strategic priorities were also agreed in relation to exploring use of estates, where staff can be co-located in terms of MDT meetings, and how to progress shared IT systems. This is a crucial area of work to progress the Sefton partnership delivery and help Sefton to realise the benefits of Integration.

3. Life Course Commissioning

Key focuses for Adult Social Care Commissioning include the following:

3.1 Domiciliary Care

As previously reported, there is a new tender set to be published in February 2023 for a new service to be mobilised by August 2023. This new service will seek to meet the current challenges being experienced throughout the care market.

Further work has taken place with Healthwatch Sefton to ensure that the service specification and model of service reflects findings of a recent survey that they conducted with Service Users.

Capacity issues within the domiciliary care market remain, in part, due to factors such as workforce recruitment, retention, and an increased acuity of the people being referred, however we are seeing an improved position with respect to the number of people in the community awaiting a package of care.

Adult Social Care received additional funding from Central Government and has used a high proportion of this to increase fee rates paid to care providers to further support them with addressing these issues.

The arrangement for additional block-booked capacity with a Provider in North Sefton to support timely discharges from Hospital, has been extended to April 2023. Work is taking place on establishing similar capacity in the South of the Borough.

Linked to Domiciliary Care and wider strategic aims of supporting more people in their own homes, work is taking place on seeking to expand the Reablement Service.

3.2 Day Opportunities

We have recently published the outcome of our consultation on Day Opportunities and have worked to co-produce the specification in three lots which look to support service users with a more flexible community-based offer.

Work is taking place on finalising arrangements for a procurement exercise.

3.3 Supported Living

Work is taking place on utilising the current LCR Flexible Purchasing System to procure services. An associated report will be submitted to Cabinet. A public consultation on the future model of Supported Living closed on the 29th of January and a report is being finalised.

3.4 Care Homes

Engagement with the market is ongoing an online survey for Providers to complete was conducted, however response rates were low, so further engagement is required. The survey was an opportunity for care homes to submit information on details such as changes in demand for their services and cost pressures such as increases to utility bills.

We continue to engage regularly with Care Homes through Strategic Partnership and Finance Forum meetings.

Market analysis is taking place, including contacting care homes to get more detailed information on bed vacancies and top-up fees in order to assess the viability of current and proposed fee rates and the ability of Adult Social Care to make placements at its standard contracted fee rates. At present there are issues in terms of care homes requesting additional funding to meet Service User needs and either starting to levy or increasing their top-up fees. Providers are reporting issues with increased staffing costs and other cost pressures such as those related to significant utilities cost increases.

Evaluations of bids received from care homes for Capital Improvement funding are to be evaluated and work is also taking place on awarding grants to care homes for Digital transformation.

3.5 Fee Rates and Cost of Care Exercises 2023/24

Work is taking place to formulate and agree 2023/24 fee proposals. Once agreed, consultation with Provider markets will then commence.

Sefton Council, as with all other Local Authorities, are required by the Department of Health and Social Care to publish their Fair Cost of Care reports for Care Homes and Domiciliary Care by 1st February. Once published, further engagement with Providers will take place, including highlighting issues with the data submitted by Providers.

There is no requirement / commitment for Local Authorities to immediately implement the outcomes of the report and their publication is separate to 2023/24 fee proposal exercises.

3.6 Winter Planning

Following the announcement of national funding, work has taken place on the implementation of various schemes, including:

- Providing additional block-booked Domiciliary Care capacity to support with hospital discharges, reducing waiting times.
- Creating a 'Discharge Hub' with a greater Social Work and Occupational Therapy capacity.
- Expanding the Intermediate Care / Transitional care home bed capacity.
- Providing support through the Voluntary Sector to meet other Social Care and Housing needs.

- Providing further support to Market Management and strengthening brokerage offers, assisting to find the most appropriate service quicker.
- Helping providers to support people with higher needs and acuity.

There has been further national funding announced relating to the purchasing of care home placements for people being discharged from Hospital and arrangements for this are being progressed, including seeking expressions of interest from care homes that may have beds available.

3.7 Charging Reform

The Autumn Statement of 17th November 2022 included an announcement that there would be a delay in rolling out Adult Social Care Charging Reform from October 2023 to October 2025. The government has stated that it remains committed to delivering the adult social care charging reforms and supporting people drawing on care and support. The delay covers implementation of the extended means test, a lifetime cap on personal care costs and new arrangements for self-funders.

The delay will give local authorities additional time to prepare for the rollout of these reforms. Local plans to support implementation of the Charging Reform are being reviewed in light of no additional funding being provided as part of the government budget settlement. System development to support this area of work is now being considered.

4. Adult Social Care Budget

Monitoring of the 2022/23 Adult Social Care budget for December continued to reflect a forecast of a potential deficit of £1.4m based on a number of assumptions about expenditure and income for the remainder of the year.

There are ongoing pressures relating to increased package costs (increases in areas including Residential/Nursing and Supporting Living), however increases in income from client contributions and joint funded packages will help to mitigate and the net position is currently forecast as a deficit of £3.7M.

Staffing remains a pressure as vacancies are being filled by agency staff/consultants owing to national workforce challenges, however, there is a cost implication to that. Savings against Transport budgets / additional income and equipment capitalisation will offset some of the pressures on the ASC forecast position.

Hospital Discharge Funding (national allocation £500M) has been allocated to Sefton (£1.250m) and this will assist with care package costs following discharge and may mitigate against costs currently included in the forecast. An additional allocation of Hospital Discharge (national allocation £200M) has recently been allocated to Sefton Place and will assist with placement costs for new discharges for four weeks.

There remain a number of uncertainties around the assumptions that may impact on this position before the year-end. The use of additional temporary funding may improve the current deficit. ASC has a programme of savings as part of Transformation and Demand Management which are reviewed regularly. Also, the introduction of a new budget

monitoring system across Sefton will allow for budget managers increased oversight of the current and forecast financial position.

5. Adult Social Care Complaints, Compliments and MP Enquiries

Between December 2022 and January 2023, Adult Social Care have received fourteen complaints to date – a decrease of 26% from the previous two months. For these complaints, 86% were resolved upon receipt, responded to within the twenty-five working day target or remain within this timescale.

Two of the complaints related to decision-making, one related to financial charges and funding, nine complaints related to the quality of the service we provide – this includes communication issues and delays. We also received one complaint about the information and advice offered to a family and the final complaint concerns staff attitude which remains under investigation.

For the complaints which have been concluded we upheld 40% of these, either partially, or in full. The reasons for complaints being upheld were as follows:

- Delays in progressing cases.
- Delays in communication.
- Failing to complete regular reviews of the support plan.

In the same period, Adult Social Care received twenty-two compliments and nine MP enquiries.

Oversight of complaints is maintained via the Senior Leadership Team Meeting and in one-to-ones with the Assistant Director for Adult Social Care and Health and Executive Director. Learning and is presented via the Practice Forum so lessons learned from complaints can be shared with frontline practitioners, as well as senior managers. During Q4 there are plans to further strengthen this learning and quality improvement approach across the service and we are considering how we can incorporate rapid learning reviews into our consideration of complaints.

We received a Final Decision from the Local Government and Social Care Ombudsman which found fault with the Council as we had completed an assessment but had been unable to identify a domiciliary care provider to deliver the support. We agreed to apologise to the complainant and pay a financial remedy recognition of the distress caused to the complainant.

At present we are awaiting the Final Decisions from the Ombudsman in relation to two complaints about the Council being unable to identify care providers to deliver the assessed support for two adults.

The Ombudsman's Equal Justice focus report highlights how the Ombudsman will now consider everyday human rights in its future decisions. This report has been shared at the Quality Improvement Forum and the Principal Social Worker is reviewing to ensure compliance with recommendations.

6. Principal Social Worker Update (PSW)

Preparations are taking place for World Social Work Day which will be held on Tuesday, 21st March 2023. This year's theme is Respecting Diversity through Joint Social Action.

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Working collaboratively with colleagues from Children's Services and the Learning and Organisational Development Team plans are in place to hold a market event at Bootle Town Hall to celebrate the many facets of social work practice. So far, we have twenty-two tables with different teams. These consist of internal teams and social network groups and external agencies that are both Children and Adults focused. This event is an opportunity for Social Workers across the Council to come together, peer network and learn more about other teams and how they fit with their own teams and role.

The event will also show Research in Practice Webinars linked to diversity, inclusion, and social action – with a timetable of events so people can dip in and out as they wish. These will be relevant to the theme of World Social Work Day (Respecting Diversity through Joint Social Action). The event will take place between 1-4pm.

7. Performance and Key Areas of Focus

The Adult Social Care Outcomes Framework (ASCOF) measures how well care and support services achieve the outcomes that matter most to people as put forward by Central Government. The ASCOF is used both locally and nationally to set priorities for care and support, measure progress, and strengthen transparency and accountability.

The main points of note on Sefton's performance are:

Admission into care and reablement:

Total Care Home admissions in December remained below the annual average. The rate of admission for those aged 18-64 stayed high, and we remained in the bottom quartile.

The rate of admission for over 65s continued the downward trajectory, keeping us outside of the bottom quartile.

Reablement numbers remain low, although rate of clients over sixty-five receiving reablement saw a small increase in December. The impact of the expansion of the Rapid Response service run by New Directions is yet to be seen, recruitment commenced at the end of August. The success of reablement remained a positive with just over 90% of clients 65+ discharged from hospital remaining at home ninety-one days after receiving reablement services.

Self-directed support and direct payments:

Provision of services to clients by either self-directed support or direct payments has remained relatively consistent over the last twelve months. The proportion of carers receiving a direct payment continued to increase. December saw a highest figure for this metric in the last twelve months. Work done by the Carers Centre to distribute more direct payments looks to be having a small impact on the measure. Further work needs to be done to reach the top quartile with all carers needing to have received a direct payment to hit this target.

Employment:

Sefton continues to rank in the top quartile for the proportion of adults in contact with secondary mental health services in employment, both in the Northwest and nationally. A very small increase was noted in December for the proportion of adults with learning

disabilities going into paid employment. Sefton remained just outside of the bottom quartile in the Northwest but in the bottom quartile nationally.

Housing:

Sefton compares well to other local authorities on clients in settled accommodation. Just under 90% of clients in contact with secondary mental health are living independently. Over 88% clients with learning disabilities are living in their own home or with their family. This puts us in the top quartile in England for each of these metrics.

Safeguarding:

The number of safeguarding referrals remaining open at month-end remained an issue, although the number reduced in December and reached the lowest point in last six months.

The team continued to perform well in the timely handling of safeguarding contacts and referrals with just over 96% of contacts resolved within seven days and 67% of referrals resolved within twenty-eight days. Sefton also continued to perform well in Making Safeguarding Personal with nearly 98% of those expressing a preferred outcome having that preference either fully or partially met.