

<b>CABINET MEMBER UPDATE</b>		
<b>Overview and Scrutiny Committee (Adult Social Care) – 18<sup>th</sup> June 2024</b>		
Councillor	Portfolio	Period of Report
Ian Moncur	Adult Social Care and Health	March – May 2024

## **1. The Care Quality Commission (CQC) Assurance Update for Adult Social Care**

CQC have now identified the 27 Councils that will be subject to a planned assessment this year and locally this includes Wirral and Warrington. Whilst Sefton is not on the list, there is always the potential that the service may be subject to an unplanned assessment. Both Wirral and Durham Councils have already been identified for an unplanned assessment, which could take place at anytime during the next 6 months on a date yet unknown. This approach represents a different challenge to Councils.

Sefton has continued to be part of the Cheshire and Merseyside and North West ADASS group (Association for the Directors of Adult Social Services), to gather learning from those Councils who have already had their assessments and ensure that the Council accesses all the available preparatory support networks.

As a Council we have continued our preparation for Assurance, and since the last update report to Overview and Scrutiny Committee, there has been progress in a number of areas including:

- A “check in visit” with the Executive Director for Social Care and Health by colleagues from LGA and NWADASS. This followed the Adult Social Care Peer Review in 2022 and is part of the regional support in place for all local Councils. This visit provided helpful feedback regarding our preparation and prioritisation of key priorities, which have now been incorporated into the Adult Social Care Transformation Programme 2024/25. Further details are provided later in the report, however, in respect of assurance, this programme includes a focus on improving and strengthening professional practice, supporting more people to remain at home, and ensuring robust oversight of people waiting for services.
- Further co-production sessions have been held with people who are using services and partner organisations, and more are planned for July/August 2024.
- Work is in progress to complete the 4 Quality Assurance Statements required for CQC, and our final Assurance Statement. In addition, the service is progressing with collating its bank of evidence which is required as part of the assurance process.
- ASC have invested in additional resources across the service to support CQC Readiness, given the volume of changes adult social care are making require

specific skills and abilities to move at a pace, so that in the event of Sefton receiving a CQC notification, we would be ready to submit our CQC return pack and self- assessment over the 3 week's timeframe that we would have.

For more information about the Care Quality Commission, please access our new CQC Assurance webpage: [Sefton Adult Social Care Preparing for Care Quality Commission Assessment](#)

## 2. Strategic Commissioning

The focus of Strategic Commissioning has now shifted to delivery of the corporate transformation programme 'Better at Home'. This seeks to accelerate the long-held ambition to support more people to remain independent at home for longer and to drive up the quality and effectiveness of Care when it needs to be delivered through a residential model. It is also being delivered across the Health and Social Care landscape and incorporates objectives for the NHS and Adult Social Care.

The project includes the enhancement of Reablement capacity, working with the market to deliver reablement up to the demand levels we are now experiencing. This will complement the existing offer from New Directions and allows us to ensure we are maximising the reablement potential of all, resulting in asset-based care and support being delivered at just the right level. We are currently modelling optimum demand and capacity whilst working on a specification that can be let through our Domiciliary Care framework. We do continue to work in collaboration with New Directions to expand and improve reablement as a key part of their business model.

Another key pillar of this work is the recommissioning of Supported Living; having worked with the LGA we now have a clear understanding of how we currently use the Supported Living market in Sefton and the areas for improvement, expansion, and redesign. This builds on previous codesign and consultation work with the people that use these services and will work in collaboration with our Strategic Housing Colleagues to deliver a Strategic Supported Living Strategy. This will allow more people to be supported in a range of housing options in a way they want and in the most effective and efficient way in terms of value for money and personalised outcomes.

We work with our Health partners to deliver a Discharge to Assess Pathway which delivers sufficient intermediate care to maintain patient flow and support financial recovery of the NHS landscape.

### 2.1 Domiciliary Care

Our Domiciliary care contract now reaches the end of its first year and includes several block contract arrangements which specifically support hospital discharges and ensure flow through Intermediate Care services. The ability to flex these up and down as needed has proved reasonably successful, and we will continue to improve on achieving optimum levels as we start to plan for winter 2024/25. We have been

able to work with our providers to increase their quality and have supported strategic partners to work through improvement plans leading to sustained improvements in quality.

### 2.2 New Directions

ASC continues to work closely with Sefton New Directions, and the outcome of the collaborative review (which was undertaken between ASC and SND) is being implemented, which includes New Directions formulating proposals on how they will transform and remodel the most strategically relevant parts of their business to help address the council's commissioning challenges, as well as addressing budgetary pressures. This will include the review of back-office functions, day opportunities, supported living offers and as previously referred to, the reablement offer.

### 2.3 Care Homes

ASC continues to meet with care homes in the Sefton Care Home Partnership Board on a monthly basis; led by Care Home providers, guidance is delivered and shared by Council officers and Health partners. Equally, the Board offers its Providers an opportunity to celebrate successes, share best practice and engage in peer support between care home leaders in a new arrangement, where the first half of the Partnership Board is reserved for care home leaders only, with officers and health colleagues joining for the second half. Feedback from care homes on this partnership has been positive and they value the sharing of information on issues such as training opportunities.

ASC is progressing with the 4<sup>th</sup> round of the Care Settings Grants Programme. To date, over £1.6m in grants have been issued. Unlike the first three rounds, this round has been expanded to include Supported Living settings, as well as Residential & Nursing Care Homes.

We continue to implement the Market Sustainability Plan with Care Homes to seek to rebalance the market to allow them to meet higher acuity of need and to work with health and social care to deliver specialised block contracts as required and explore how the Real Living Wage challenge will be addressed. We continue to work with a set of volunteer Care Homes to trial the payment of gross fees with a full evaluation being taken to the October Cabinet. Cabinet approved at its May meeting a new approach to contracting with the Care Home market, building on work we have completed regionally to create a shared specification, and allowing us to work flexibly but create more personalised approaches to how we work with the market.

### 2.4 2024/25 Fee Setting

2024/25 fees have been implemented following the decision by Cabinet and the final agreed rates have been communicated to Providers.

A new policy and process relating to the commissioning and delivery of additional 1:1 support in care homes has been implemented.

We continue to work with the market through a new expanded brokerage offer which is starting to affect the trend of growing non-standard rates being charged by care homes, however there is further work to be done in ensuring we have implemented the conclusion of a recent independent market appraisal conducted by a company called Care Analytics.

### 2.5 Quality Monitoring

The Quality Assurance Team continue to work with providers across the care home market utilising the recently introduced Provider Assessment and Market Management Solution system (PAMMS). The system enables ASC to understand the quality and effectiveness of services within individual care homes, adopt improvements to raise standards, and complements existing quality assurance processes.

We currently have two Domiciliary Care Providers CQC rated as Inadequate, however one of these Providers has made significant quality improvements and is taking new referrals on a phased basis, and for the other Provider we are transferring their contract.

The percentage of good and outstanding care homes in Sefton remains above average, with 82% of care homes rated as good or outstanding. The regional figure is 79%. We have 1 inadequate home out of 122 and this home continues to receive support to improve through some operational challenges.

## 3. Hospital Seasonal Pressures

During April and May, both hospital sites at Southport Hospital and University Hospital Aintree have been extremely pressured and this has been due to the acuity of patients within both Accident and Emergency Departments. The combination of high attendances and acuity has resulted in a high number of decisions to admits to a hospital ward. For example, at Southport Hospital a high number of decisions to admits was around 30+ people twelve months ago, however currently each week at Southport the number of people who require an acute bed is running at 50+ .These demands and level of acuity across both hospital sites have resulted in the number of ready for discharge patients averaging around 60+ across Sefton Place each week, rather than an average of 40+ patients seen twelve months ago. This demand has put pressure on the entire health and social care system; however, ASC continue to work closely with colleagues from health and community services to manage these pressures.

Other changes across both Hospital sites includes the Implementation of a Care Transfer Hub (CTH) which is nationally mandated within the Hospital Discharge and Community Support Guidance under section 91 of the Care Act 2014. The ethos

behind a transfer of care hub is that there will be a multi-disciplinary team meeting twice a day with a social care, nursing and therapy lead present to ensure that people receive the right level and type of support on discharge and wherever possible are able to return to their own home.

A transfer of care hub has been established at University Hospital Aintree and will commence in Southport hospital on the 3<sup>rd</sup> of June 2024 as part of a phased approach.

#### **4. Occupational Therapy and Sensory Team**

The Occupational Therapy Team has been undergoing a programme of transformation and reviewing its pathways and processes in order to further improve response times and services for local people.

There has continued to be a rise in requests for “low level equipment” and to address this the service recently launched a ‘mobile clinic’ in May 2024. The mobile clinic aims to provide a responsive and preventative approach for residents with low level needs to be seen within 7 days of contact, with assessments and equipment being provided in a single visit. The clinic will continue to evolve over the next 12 months, expanding the offer to include technology and minor adaptations.

All staff have been trained in moving and handling, including single handed care, to increase response time and provision of consistent assessments by all OT staff. Over the next twelve months, engaging further with care arrangers and the promotion of single-handed care will be explored.

The development of a sensory strategy is in the early stages of progress. Visual impairment is currently provided through a Sefton Rehabilitation officer for visual impairment (ROVI) alongside a contracted provision by Galloways. Hearing impairment equipment has been reviewed and we are working alongside MSDP to explore the offer and policy for Sefton.

#### **5. Adult Social Care Budget**

The financial year end saw an ASC budget deficit of £2.905M which was impacted by a number of factors including the increased costs of placements and packages, an additional day's costs due to the leap year and an additional bank holiday which also impacted on some services. Adult Social Care maximised the use of grants and reserves which reduced the deficit to what had been reported earlier in the year. Throughout the year, ASC had continued to find savings and efficiencies against its approved programme which also had a positive impact on the financial position. Further savings have been identified as part of the Medium-Term Plan and a transformation programme of work is being developed to continue to look at specific areas within Adult Social Care with a view to further efficiencies over a 3-year period.

## 6. Adult Social Care Complaints, Compliments and MP Enquiries

In February, March and April 2024, ASC received thirty-five complaints and twenty-seven Elected Members enquiries. 24 Compliments were received.

77% of Elected Member enquiries were responded to within timescale during February and March and this rose to 100% in April. 75% of complaints were responded to within timescale during this period. The target is 90% and the service is working to ensure improved performance is delivered in this area.

In respect of the complaints investigated those raised related to the following areas: decision making (11), fees and charges (5), advice and information (3), and the quality-of-service Provision (15).

22 Complaints were upheld either fully or partially;  
9 Complaints were not upheld;  
1 remains under investigation.

Of the complaints upheld the following areas were identified:

- Communication in relation to the direct payment process
- An error which resulted in the failure to progress referral to advocacy services
- Communication regarding charges and fees including advice from a care provider regarding reablement services
- Delay in relation to a contractor being sourced to commence works relating to a Disabled Facilities Grant (DFG)
- Communication regarding progression of a safeguarding concern
- Delay in passing information between the social work and finance team
- Charges in relation to a care home placement and choice options .

All complaints are reviewed by the senior leadership team within Adult Social Care so learning and improvements can be taken forward across practice, process, and care provision. Learning is shared with practitioners in the practice forum, team meetings and on an individual basis where required. Full apologies are provided to families and individuals wherever appropriate and direct contact is made with complainants by a senior manager. Updates are provided to the Executive Director and will be to myself as Cabinet Member during my monthly briefings.

### 6.1 Local Government and Social Care Ombudsman

ASC received a draft decision from the Ombudsman dated 23 April 2024, with the Final Decision issued on 16 May 2024. This was in relation to a complaint about funding arrangements which the Council agreed to apologise to the complainant for, having not taken into the account the extra amount it was paying at the Care Home when calculating the top up payments between January 2020 and July 2022. The

Council also agreed to pay a refund and interest to reflect the effects of inflation, as recommended by the Ombudsman.

The Ombudsman has confirmed that another referral it received has been placed on hold with the Council, until the care home has completed its investigation under its own complaints procedures. The Council had not previously been made aware of the concerns by the complainant and an investigation is now underway.

### **7. Quality and Practice**

Since the last report, Adult Social Care has commenced its twelve-month transformation programme in collaboration with Partners4Change. The first two innovation sites are underway, and the initial feedback received from individuals, their carers and frontline staff has been extremely positive. We are already starting to see the positive impact for people accessing the service by reducing bureaucracy and enabling practitioners to spend more direct time with people. As part of this transformation programme, ASC will be regularly gathering direct feedback from people accessing services and frontline practitioners to evaluate the impact this new programme is having for individuals and on the quality of practice. The initial innovation sites run for 14 weeks after which there will be an evaluation and potential development of further sites.

The service continues to review and triangulate learning from compliments, complaints, Safeguarding Adults Reviews (SARs) and Domestic Homicide Reviews (DHR's) to improve practice and outcomes for local people and identify specific training needs.

In the last quarter we commissioned CHC training for staff across ASC; following feedback from practitioners we will be rolling this training out across the year to improve practice and provide better outcomes for individuals with complex health needs. Following learning identified from previous SAR's and DHRs', we are reviewing training options for all staff in relation to the application of the Mental Capacity Act and Trauma informed practice.

ASC are currently participating with partner organisations in one active DHR and SAR which are due to conclude within the next 6 months; any best practice or learning will be shared and embedded.

As part of the grow your own strategy within the ASC workforce, Sefton are due to welcome 18 new Best Interest Assessors within the next quarter.

ASC are committed to holding regular staff workshops three times a year to share learning and best practice. 160 staff attended the workshops in May, and we are due to hold a further one in July and September. These sessions particularly focused on the plans for transformation and feedback from staff about how the leadership team could support them in their role.

## 8. Performance and Key Areas of Focus

### 8.1 Long-term activity trends

The following highlights ASC's long-term activity trends:

- Overall provision of people receiving long-term services have remained stable over the course of the past twelve months. At the end of April there were just over 4,100 open long-term services.
- On average, we had 134 carer service starts in last three months - that is down by 10% from the previous three months, however, starts are generally higher compared to 6-12 months ago.
- Number of contacts received in the past three months increased by 2% compared to the previous three months. On average, Sefton ASC is receiving around 2,000 contacts per month.
- On average, teams are completing 440 assessments per month.
- The total number of reviews undertaken in the last 3 months was up by 15% compared to the previous 3-months. The teams have been working hard to clear the backlog of overdue reviews, many of which are complex cases requiring much greater time and resource. On average 640 reviews were completed per month in the last three months.
- Number of safeguarding contacts received in the last three months increased by 2.8% from the previous three months. On average, Sefton ASC is receiving around 240 contacts related to safeguarding per month.
- The volume of safeguarding referrals being managed remains high. The 398 referrals open at the end of April was the highest we have seen in the last 12 months.
- In the last three months timeliness in handling initial safeguarding contacts continued to perform well with 97% contacts being resolved within seven days. 69% of safeguarding referrals were completed within 28 days – up from 64% in the previous three months.
- Around 96% of safeguarding enquiries saw preferred outcomes met fully or partially and the proportion has been stable over the past twelve months.

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.

### 8.2 Admission into care & reablement

Our rate of admission to care homes for those aged 18-64 remained stable from the previous month and we remained in the bottom quartile for both the North West and



England. The rate of admission for over 65s increased slightly from the previous month keeping us outside of the bottom quartile for England and North West. Just under 70% of our service users are in 'community based' services (i.e. not in nursing or residential placements) - this proportion is low compared to other North West authorities and puts us in the bottom quartile. This links with the planned transformation programme and expansion of community services.

The number of people with open reablement service at the end of April was up by 7% from the previous month and Sefton remained out of the bottom quartile in the North West on the number of episodes of reablement or intermediate care for people aged 65 and over. In April, New Directions provided 72 new service starts, whilst 87 service starts were provided through spot purchasing Domiciliary Care providers to deliver Reablement packages. This is referred to as 'Alternative to Reablement' whereby our main Reablement Provider (New Directions) is unable to accept the referral. April was third month in a row when such 'Alternative to Reablement' service starts were higher than New Directions referral starts. It has been identified that there is a need to commission additional dedicated Providers to deliver Reablement services, and to this end a report is being formulated to seek approval from myself as Cabinet Lead to commence a procurement exercise. New Directions are also being supported with their ongoing expansion as the wider strategic aim is to ensure that as many people as possible receive an initial phase of Reablement in order to maximise their independence.

April saw a small decrease (0.7 percentage points) for the proportion of older people (65+) still at home 91 days after hospital discharge into a reablement service and we are currently outside the bottom quartile in North West and outside the top quartile in England

### 8.3 Self-directed support & direct payments:

Provision of services to *people receiving services* 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 remained fairly stable from the previous month with around 98% of carers receiving a direct payment.

A targeted consultation exercise is currently underway for direct payment recipients and recipients of other Adult Social Care services. The exercise aims to identify improvements that can be made to the direct payment scheme and any barriers to people applying for a direct payment. 3160 people have been sent details of the consultation.

### 8.4 Employment

Number of learning-disabled people going into paid employment remained stable from the previous month, with around 2.7% of people being employed. This proportion puts us outside the bottom quartiles in the region and nationally. Work is progressing with corporate colleagues to explore further opportunities in relation to social enterprises and additional opportunities.

Changes in NHS methodology for indicators concerning service users with mental health services, resulted in Sefton dropping out of the top quartiles for this measure.

### 8.5 Housing

The proportion of learning-disabled people who live in their own home or with their family has remained stable over the past few months. In April, we remained in the top quartile for England and outside the bottom quartile for the North West.

Changes in NHS methodology for indicators concerning service users with mental health services, resulted in Sefton dropping out of the top quartile for this measure.

## 9. Workforce

Workforce is a pivotal part of the Adult Social Care transformation programme “Better at Home” with a bespoke programme designed to “Build an Integrated Workforce”. Whilst the monthly Strategic Workforce Meetings (SWM) are well established, going into their second year, the focus has been predominantly on the internal workforce, specifically around attracting and retaining qualified staff. To this end the SWM has been very successful in terms of adopting a “grow your own approach” through the apprenticeship scheme, linking in with regional and national workforce strategies and identifying gaps that exist in terms of the Care Quality Commission workforce regulations.

Over the last quarter the SWM has been focused on creating a robust action plan, that sits across ASC, HR and Learning and Development to readiness for CQC assurance. However, the remit of the SWM will expand to how ASC can, with partners, create opportunities for a more integrated workforce approach. This will include exploring potential future opportunities for combined learning, development opportunities, the potential future for integrated posts and co-location. The key aims being to create better experience and more seamless response for people and carers using services.

## 10. Learning and Development

Offering a wide range of learning and development opportunities for practitioners is key to ensuring the retention of staff, and during the last three months there has been progress in several areas:

- Following the implementation of the updated Supervision Policy and delivery of supervision training, this will now be rolled out to non-frontline managers from September 2024.
- Further Continuing Healthcare training will be arranged for social workers.

- 31 staff from across Sefton Provider Services have completed the Safeguarding Adults Awareness eLearning since its launch in May. Feedback has been very positive.
- We are working with the Cheshire and Merseyside Teaching Partnership to explore options for delivering Tier 1 and Tier 2 Oliver McGowan mandatory training.
- Supported the Adult Social Care mandatory workshops in May 2024 and will be supporting further planned workshops.
- Launched the Personalisation training programme May 2024 which includes Care Act (2014), Assessment and Determination of Eligibility and Recording in Social Care.
- We are continuing to promote Research in Practice to all Adult Social Care staff.
- 3 staff from Adult Social Care successfully completed the Social Work degree apprenticeship in February 2024. Two staff gained a 1<sup>st</sup> Class Honours.

### **11. Learning Disability and Autism (LD&A) Team**

The new LD&A team will 'go live' on Monday 3<sup>rd</sup> June 2024. The team was a recommendation of the Local Government Association Peer Review in 2022. The team will provide social care interventions to people with a diagnosis of learning disability and/or autistic people. The purpose of the team is to provide greater continuity and improve outcomes for individuals and families through having a dedicated workers with the expertise, skills, and knowledge in working with people with LD and Autism.

This team will also support transitions and preparation for adulthood and a review of the current arrangements is being carried out in partnership with Children's Services and forms part of the current review of the 0-25 Pathway.

Recruitment to the new team has been carried out with People First Merseyside who supported with interviews for practitioners. Adult Social Care will continue to develop the service in co-production with People First Merseyside and we are looking to expand this group to widen participation.

The aim of the team is to work in collaboration with individuals and families/carers to deliver a person-centred approach when working with individuals, which promotes choice, control, and independence as far as is practicable to do so.

