CABINET MEMBER UPDATE		
Overview and Scrutiny Committee (Adult Social Care) – 3 rd September 2024		
Councillor	Portfolio	Period of Report
lan Moncur	Adult Social Care	June-August 2024

1. Southport Incident - Social Work Response

Following the tragic events of Monday 29th July 2024, Adult Social Care has been working alongside council colleagues and partner organisations to support the wider community response. This has included reaching out to the immediate affected areas to support welfare checks and a presence at the Atkinson and Linaker Family Centre. The Executive Director of Health Care & Wellbeing has been chairing the Recovery Coordination meeting with key partners. Adult Social Care is part of the Psychological Care Coordination Group, which was established to assist with the provision of support offered to those impacted.

2. The Care Quality Commission (CQC) Assurance Update for Adult Social Care

On 24th June 2024, CQC contacted the Council to provide a notification of its plan to undertake an assessment of Sefton Adult Social Services. The service was given three weeks to complete the required information return and our submission consisted of a written self-assessment against the thirty- eight criteria set by CQC, linked to supporting evidence and included partner statements.

An action plan has been developed by the service to prioritise key areas of focus ahead of the second part of the assessment, which will be a site visit from CQC. This will happen within six months of the notification, and the Council will receive six weeks' notice of the visit. Part of the visit will include meeting with myself as Cabinet Member, the Executive Director Health Care & Wellbeing, people and carers using services, front line practitioners, partner organisations and community groups.

Oversight of preparation for CQC continues to be directed by the Executive Director Health Care & Wellbeing, with an Improvement Board in place and regular reporting to the Executive Leadership Team, my Cabinet Member briefings and Overview and Scrutiny Committee.

Following the site visit from CQC, a draft report will be produced and an overall rating. The draft will be subject to internal quality assurance by CQC and shared with the Council to check if factually accurate. Benchmarking takes place by CQC prior to sending and publishing our final report.

3. Strategic Commissioning

3.1 Better at Home transformation programme

The Adult Social Care and Health Strategy to support people to stay at home for longer with appropriate support and reduce the need for residential care is called Better at Home. Work has been progressing in a number of key areas. New discharge arrangements are now established at Southport & Ormskirk NHS Trust, which has

resulted in more people being discharged directly home from hospital and work is also progressing regarding the review of our Discharge to Assess bed-based provision across Sefton. This includes ensuring additional capacity for those individuals with dementia and delirium. These beds provide short stay opportunities from hospital to allow for further recovery and assessments, enabling wherever possible people to return home.

Health and social care commissioners are also working together to develop the Home First model, with a focus on increasing the availability of reablement and are working closely with Sefton New Directions and Mersey Care as delivery partners. New Directions have recently recruited additional staff to deliver reablement and this capacity should become available during October 2024.

The ASC front door redesign has commenced to improve the access and timeliness of support for people contacting Adult Social Care. Whilst data shows that referrals, which can currently be addressed by the team at the front door, are done so quickly, many people are still being transferred through to the community social work teams which can lead to longer waits.

Redesigning the front door is one of the transformation programmes for 2024/25 and will focus on promoting an Occupational Therapy first approach, resolving more requests at the first point of contact (today's work today) and providing a more integrated response for individuals and carers through co-location with health and community partners.

3.2 Domiciliary Care

The Domiciliary Care contract has now reached the end of its first year and includes several block contract arrangements which specifically support hospital discharges and ensuring that people are discharged quickly and safely. The ability to flex these arrangements up and down as needed has proved successful, and the commissioning team will continue to ensure increased capacity as planning starts for winter 2025/26.

The service continues to see an improved position in terms of the number of people awaiting a care package. As of 13th August, there were only fourteen people waiting for domiciliary care, with the usual waiting time being less than a week.

There remains a focus on improving quality and addressing quality concerns, wherever required, across the care market and recently this has included the termination of a contract due to significant quality concerns. In this case, all people receiving support were transferred to another provider.

3.3 New Directions

Work with Sefton New Directions continues with a particular focus on expanding the reablement services. Health and social care commissioners are working together to develop the wider reablement offer through New Directions, with the aim of providing greater availability across the borough to support as many people as possible to regain and maintain their independence.

3.4 Care Homes

ASC continues to meet with care homes in the Sefton Care Home Partnership Board on a monthly basis. Recent meetings saw good numbers of care home leaders meet with commissioners to discuss a number of areas of focus, such as top up payments and opportunities to improve current processes. An update on the gross payments pilot was also provided.

Implementation of the Market Sustainability Plan with care homes also continues, in order to support the market to meet higher acuity of need, deliver specialised block contracts, and explore how the Real Living Wage challenge can be addressed. An overarching plan for the sector will cover:

- The implementation of new care home framework
- Gross payments
- Fee setting
- Market management including quality and delivery of market sustainability plan

In respect of gross fee payments, work is continuing with a number of care homes trialing the new approach. An evaluation will be undertaken, and a full report and recommendations will be submitted to Cabinet later in the year.

3.5 2025/26 Fee Setting

Work has now commenced on 2025/26 fee setting, including different fee models, for example, for care homes. The service will seek to submit a report to March 2025 Cabinet so that fees can be set in advance of the new financial year.

3.6 Carers Strategy

A Carers Strategy has now been coproduced with carers across Sefton, the Carers Centre and key partner organisations. It is currently progressing through the final sign off process. Overseeing the implementation of the strategy and delivery plan will be done by the new Sefton Carers Partnership Board which is due to commence in October 2024.

3.7 Falls Strategy

A Falls Strategy has been developed through a series of engagement sessions and workshops, and an action plan to deliver the strategy is being developed. A partnership board will take the work of the strategy forward, ensuring the plan is delivered.

Working in partnership with the care home market, ASC currently have a number of pilots in operation to test out the impact of remote monitoring and digital equipment aimed at reducing falls. This includes twenty-two care homes now trained to use the specific technology. The results are very positive, and one provider has reported a 60% reduction in falls so far.

3.8 Quality Assurance

The work of the quality assurance team is currently being reviewed to strengthen support and monitoring across all types of regulated care, with a focus on reviewing and enhancing the current approaches to early intervention and risk stratification

Currently the team are using the PAMMS assessment model to review care providers, particularly care homes. PAMMS stands for "Provider Assessment & Market Management Solution" and it is an online tool which manages the monitoring process. This application was developed by the Association of Directors of Adult Social Services (ADASS).

A regional group is currently looking at the use of PAMMS as some authorities are wanting a quicker process to review providers as well as this more detailed assessment. The QA team is developing a shorter review document for local focused visits, aligned to queries that come in from CQC, or from operational, safeguarding, and adult social care teams.

The quality assurance team have carried out a number of PAMMS visits to various care homes this month.

- One visit has been completed and has come out as good.
- Six care homes are undergoing a PAMMS assessment.
- Five assessments are due to commence in August.

ASC works closely with health partners to ensure a proactive and integrated approach to monitoring and oversight of the care market. Regular meetings are in place to review any concerns and agree collaborative action to address issues quickly and support quality improvements, whilst ensuring people accessing services remain safe.

4. Adult Social Care Budget

The first quarter (April – June 24) financial monitoring at a service level reflected a potential deficit of £3.078M, based on current activity levels continuing for the remainder of the year. ASC has a programme of savings / transformational work to achieve a balanced financial position by March 25, which includes reducing costs in some service areas (including ensuring clients are in the most appropriate care settings), but the potential deficit is expected to reduce as the programme progresses. However, in the report to Cabinet in July 2024 a potential deficit of £2M was reported – this was to recognise that there are inherent risks in achieving a balanced outturn position, particularly at this early stage of the financial year.

ASC budgets were reduced by £ 4.756M at the start of the year to reflect.

- £2.390M savings agreed by Council at budget setting stage
- £1.366M gap required to implement fee uplift (per report to Cabinet in April 2024)
- £1.000M savings to fund additional staffing requirements within the service to support transformation

The area of current forecast overspend relates to placements and packages costs which is always the most significant area of risk within ASC budgets. ASC are working to reduce the financial risk in this area through the transformation programme to ensure a balanced outturn position can be achieved. This budget area is also the most volatile and updates are reported monthly to ASC senior managers and to the Cabinet Member.

5. Adult Social Care Complaints, Compliments and MP Enquiries

In June and July 2024, ASC received twenty-three complaints and eleven Elected Members enquiries. Eighteen compliments were received.

100% of Elected Member enquiries were responded to within the expected timescale during this period. 88% of complaints were responded to within the expected timescale during this period, with six complaints received in July remaining open but within timescales.

In respect of the twenty-three complaints received, those raised related to the following areas: decision making (1), fees and charges (4), advice and information (2), staff response (2) and the quality-of-service Provision (14).

Ten complaints were upheld either fully or partially; seven complaints were not upheld; six remain under investigation. Learning from complaints included the need to improve communication arrangements especially when people are on annual leave or have left the authority, finances and specific issues with providers

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 across a number of forums within ASC. Listen and Learning notifications are shared across the Service with specific themes for learning. 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.

No new Local Government Ombudsman cases were received during this reporting period.

6. Quality and Practice

Since receiving the letter of Notification from the Care Quality Commission (CQC), Adult Social Care have been progressing ahead with the auditing and collation of fifty individuals records which will be submitted prior to CQC visit. The fifty individual records chose will showcase the journey of individuals within Adults Social Care. The learning and practice themes from these audits are being shared at the new Audit and Practice group chaired by the Senior Manager for Quality and Safeguarding and a series of learning session for all ASC staff.

In order to continue to explore ways to improve the experience of individuals and care contacting Adult Social Care, the service is currently running a number of innovations sites to test out new ways of working. Feedback being received is already demonstrating the impact of the changes and improved outcomes for individuals and staff. A full evaluation of the first innovation sites is due shortly and recommendations will then be made for rolling this approach out across the service.

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.

Following learning identified from previous SAR's and DHRs', training options for all staff in relation to the application of the Mental Capacity Act have been reviewed and further bespoke training has now been commissioned training for all staff who complete Mental Capacity Assessments as part of their role. This is due to commence in October 2024.

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

7. Performance and Key Areas of Focus

The following highlights the long-term activity trends for Adult Social Care:

- Overall provision of people receiving long-term services have remained fairly stable over the past twelve months. At the end of July there were just over 4,200 open long-term services.
- Number of carers starting carers services have increased over the past twelve months by a fifth compared to the same period last year. On average, there are forty-five carer service starts per month.
- Number of contacts received in the last twelve months increased slightly from the previous year by 3%, however numbers are generally lower compared to 2019/20 (pre-Covid).
- Timeliness of handling contacts has improved slightly compared to twelve months ago. Currently around 77% of contacts are resolved within two working days.
- The number of initial assessments undertaken in the last twelve months remained fairly stable compared to the same period last year. On average, teams are completing 217 assessments per month.
- The number of annual reviews completed in the last twelve months increased by just over a third compared to the same period last year. On average teams are completing 401 annual reviews per month.
- Number of safeguarding contacts received in the last twelve months saw an increase of 14% compared to the same period last year. On average we are receiving 240 safeguarding contacts per month.
- The number of safeguarding referrals remaining open at month end remains an issue. At the end of July, 376 referrals remained open, 15% required focused work for more than 6 months.
- Sefton continues to perform consistently in Making Safeguarding Personal. At the end of July, 96% of victims saw their outcomes met in full or partially.

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 & reablement:

The 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 decreased slightly from the previous month keeping us outside of the bottom quartile for England and the North-West. Just under 70% of people using services 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. The Better at Home transformation programme has a key focus on increasing the numbers of people being supported in their own home.

The number of people with open reablement service remained fairly stable compared to 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. July saw 153 reablement starts and just over half of these were provided by alternative to reablement services.

July saw a small increase in the proportion of older people (65+) still at home ninetyone days after hospital discharge into a reablement service and we are currently outside the top quartile in the North-West and in England.

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.

Employment:

Number of learning-disabled people going into paid employment remained stable from the previous month, with around 2.5% of people being employed. This proportion puts Sefton outside the bottom quartiles in the region and nationally.

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 July, Sefton remained in the top quartile for England and outside the bottom quartile for the North-West.