

Promoting Independence:

Our vision for transforming
Adult Social Care in Worcestershire



Adult Services Business Plan

2018 - 2022

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Introduction from Cabinet Member with Responsibility for Adult Social Care



This document sets out our priorities for the period April 2018 to March 2021 and follows-on from the vision, set out in our plan for the County, Shaping Worcestershire's Future:

“Worcestershire residents are healthier, live longer, have a better quality of life and remain independent for as long as possible. We will work together with partners and communities to enable Worcestershire residents to make responsible choices, when planning their lives to achieve the best possible outcomes. We will enable individuals to become or remain independent, self-reliant and an integrated part of their local communities.”

In order to help people to achieve these goals we recognise that adult social care has an essential role to play:

- helping people to stay healthy and supported to live in their local community with choice and control;
- providing information and services to help prevent and postpone the need for care and support, and educate people about the choices they may have if they do need care;
- ensuring social care is responsive to residents' needs and is seamless between different parts of the system;
- buying and providing services that are safe and ensuring people are satisfied with the quality of their care and support

However, these ambitious aims are also a corporate responsibility and the needs of people with disabilities, older residents and their carers, who need support, will be central to our decision making about services. These will range from traffic lighting and street landscape design through to working closely with Children's services to join up our services for young adults who are transferring to an adult service.

We will work in partnership with our District, Borough and Parish council colleagues on issues such as community safety, housing, leisure and economic regeneration. We will ensure that the needs of people in need of support are understood and acted on.

Our partnership with health colleagues will be a central part of what we do. We will seek opportunities to make practical changes that provide 'joined up' care or save money so that our whole health and social care system is more sustainable.

There is national recognition about the pressures that social care is working under and Worcestershire is no exception. We celebrate the fact that people are living longer but age may bring frailty. We are also working with more people with disabilities. This brings unprecedented financial pressure to which we need to respond. This will mean:

- maximising the independence of adults in our community, and championing a strengths based approach to meeting needs through the '3 Conversations' model (3CM);
- fully realising the benefits that can be gained by health and social care co-ordinating care around people's needs through more integrated and/or aligned ways of working;
- streamlining customer pathways to improve the experience for service users and to provide more efficient and effective interventions;
- ensuring staff are confident and equipped to deliver vital services, and they feel inspired and positive about the work that they do
- continuing to recognise and support the role of carers.

and, when we do change things we will always seek to involve our service users, their families and our staff

Councillor Adrian Hardman
Cabinet Member with Responsibility for Adults Social Care

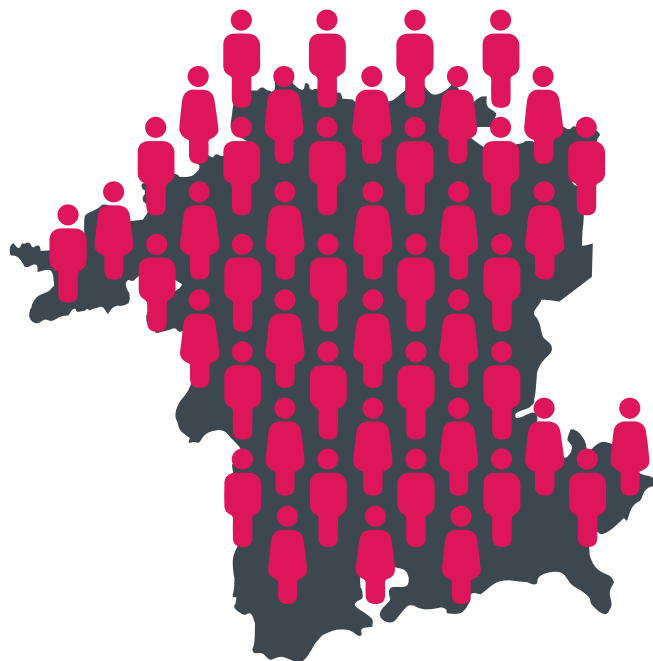
About Worcestershire

Worcestershire is a predominantly rural county (85%) with some urban areas.

The total population of Worcestershire is

583,491

with **71,377** residents aged **65-74** and a further **56,678** aged **75** and over.



(ONS 2016 revised mid-year estimates)

Of the population of Worcestershire living in urban areas, it has a relatively affluent profile overall but does have pockets of deprivation with around 19% of residents living in the top 30% of deprived areas in the country.

In general, the highest rates of income deprivation in older people are in the less affluent parts of the county's urban centres, although there are a few pockets in rural areas.

There are 3 NHS Clinical Commissioning Groups in Worcestershire. These are Redditch and Bromsgrove, Wyre Forest and South Worcestershire. These are overseen by one Accountable Officer who also oversees Herefordshire CCG. We have one Acute NHS Trust and one Community NHS Trust in the County.

Worcestershire County Council has jointly developed the Herefordshire and Worcestershire STP plans and is engaged at all levels of governance from the STP Partnership Board through the Delivery Board and takes a lead for some of the STP programme work streams.

Worcestershire Acute Hospitals NHS Trust provides hospital-based services from three main sites - the Alexandra Hospital in Redditch, Kidderminster Hospital and Treatment Centre, and Worcestershire Royal Hospital in Worcester.

A wide range of services are provided to Worcestershire residents as well as caring for patients from surrounding counties and further afield.

Last year care was provided to more than **238,905 patients**
- that is 40% of the Worcestershire population.

The Acute Hospitals Trust sees 2,293 patients every day. In a year these include 149,964 A&E attendances and 49,740 emergency admissions, significant numbers of whom will require support from Adult Social Care. The Acute Trust employs nearly 6,000 people and has an annual turnover of over £400 million.

The current position of the Acute Trust in relation to the Care Quality Commission (CQC) rating of inadequate is challenging and demands close partnership working to ensure timely discharges from hospital.

Worcestershire Health and Care Trust (WHCT) is the main provider of all age community services. These include health visiting, speech and language and physical and mental health care for children and young people. The Trust provides a range of services for adults and older people, including OT, physio and dementia care and Learning Disability services. WHCT manage 4 Community Hospitals based in Malvern, Evesham, Bromsgrove and Tenbury as well as GP Units in Pershore and Worcester City. WHCT are rated Good by the Care Quality Commission (CQC) employ around 4,000 staff.

The recent development of the new integrated Neighbourhood Teams is aligned with the implementation of Adult Social Care, 3 Conversation Model.

Adult Social Care continues to work closely with all Partners in the ongoing development of the Sustainability Transformation Programme for Herefordshire and Worcestershire.

Around one third of babies born today in the UK are expected to survive to celebrate their 100th birthday and life expectancy in Worcestershire is higher than the national and regional average for both men and women. By 2019-21, male life expectancy in Worcestershire is projected to rise by 2 years to 81.8 years and female life expectancy to rise by 1.5 years to 85 years.

Case Study - Margaret's Story

104-year-old Margaret, who has advanced dementia, was living in a nursing home in Worcestershire which gave notice that it was to stop providing nursing care. Margaret's family was exceptionally upset and worried about the future prospects for her.

Margaret was not able to communicate her wishes and there was considerable concern that she might not even survive the ambulance journey to a new home.

It was a daunting case to resolve – but social workers, medical professionals and the family worked together to ensure the best outcome possible, putting Margaret's needs first while also being mindful of financial restrictions.

A home deemed suitable was located and a member of Margaret's care team accompanied her on the ambulance journey to her new home and stayed to help settle her in. The two homes also shared Margaret's personal story – including her love of jam sandwiches with no crusts, mashed banana and lots of hugs.

Six months on – and Margaret is thriving. She has moved to a home closer to her family, who visit more frequently – and on one visit she put out her arms to her son for the first time in years.

And the manager of the care home has assured her family they will always have a plentiful supply of jam and bananas for her.



The proportion of older people in Worcestershire is higher than the national average (17.3%). The highest proportion of older people is in Malvern Hills (26.6%), and the lowest proportion is in Worcester (16%) and Redditch (16.2%).

The population of people aged 65 and over in Worcestershire is projected to grow by over a third between 2015 and 2030. This increase will be concentrated in the oldest age groups.

Recorded levels of dementia in Worcestershire are lower than the national average. However a rapid increase in dementia, due to the ageing demographic, is a significant issue for Worcestershire which has a higher proportion of people aged 65+ than the national average.

Latest national estimates of prevalence of common mental disorders (CMD) indicate there has been an increase in depression since 2007.

Prevalence of depression is significantly higher in Worcestershire than in England as a whole, at 9.0% and has increased from the previous year.

The mental and physical health of carers is a major concern: better support is needed for people who care for others, frequently unpaid and to the detriment of their own health and well-being. The 2011 Census demonstrated that the health of carers decreases incrementally with increasing hours of care provided. People caring for 50 or more hours per week are twice as likely to report their general health as “not good”.

There has been an approximate 7% growth in Mental Health patients over the last 3 years - this includes people with complex needs transferring to social care.

The number of people aged over 65 with a limiting long-term illness in Worcestershire is projected to rise over the next 15 years by 41% and the number of older people living alone in Worcestershire is expected to rise by 20% between 2015 and 2030 from 35,450 to 42,550

There are around 2,413 people recorded on GP registers as having a learning disability in Worcestershire.

Approximately 1,440 adults with a learning disability receive long term support from the Council.

Adult Services receives around 27,000 referrals per annum. 1,799 safeguarding concerns were reported in 17/18, with 79 assessed as high risk.

Case Study - Gary's Story

Gary is a 50 year old man with learning difficulties, who lives independently and has a Worcestershire County Council support worker, Christina, who works with Gary and his family to ensure he thrives.

With her encouragement, Gary applied for a work placement at a community café run by community housing provider Bromsgrove District Housing Trust, one of our partners. The link-up has been a huge success – Gary is really popular, a dedicated worker and he now makes the journey independently, by bus. This is Gary's first meaningful work in nearly 30 years – an inspiring example of independence!

You can view a short video telling Gary's story [here](#).



Over 350 Adults with a Learning Disability in Worcestershire live in Supported Living units to support them to be more independent.

Over the last 6 years there have been an average of 46 people, with disabilities, per year assigned for transition to Adult Services through the Young Adults Team, from Children's Services.

2,000 people are receiving nursing or residential care and a further 2,200 people are receiving domiciliary care.

1,200 people receive direct payments.

There are around 7 million carers in the UK. Worcestershire County Council supports carers through the commissioning and provision of overnight short break services and invested, with Health, £1.87m to the carers' hub, delivered by Worcestershire Association of Carers who recorded 12,500 carers registered in the County during 2017/18.

Vision

Recognised as a key Corporate Priority, it is the Council's vision to ensure: *“Worcestershire residents are healthier, live longer, have a better quality of life and remain independent for as long as possible.”*

The aims within our vision will be achieved by working with partners to provide the framework, support and guidance to enable more adults to live healthy, independent lives and be active for as long as possible, while also ensuring we can provide the best support that people need in times of crisis.

Adult Services are on a transformation journey to ensure the best outcomes for Worcestershire's residents, in line with our core social care functions and ensure best value.

Our Core Functions:

- Assess and meet Care Act eligible need and commission and deliver services that meet that need directly or through the independent and voluntary sectors.
- Prevent, reduce and delay the need for care.
- Engage with the market to ensure that they are aware of and can meet current and future needs.
- Ensure a robust safeguarding system to protect vulnerable adults.

Our Purpose and Principles

Our purpose is to ensure that Adult Services provision, across the County Council, NHS and partners, provides the framework, support and guidance to enable more adults to live healthy, independent lives and be active for as long as possible – whilst ensuring we can provide the best support that people need in times of crisis.

This will be underpinned by our principles to ensure we:

- **Promote independence** through prevention, reduction and delay of demand in care
- **Keep people safe** and promote wellbeing
- **Shape and manage** the external market and internal service provision to ensure commissioning of effective and sustainable solutions
- Efficiently use and **manage our resources**
- **Provide advocacy** and support for people's rights, protection and equality
- **Recognise, support and equip our staff** to improving outcomes and quality of life for our residents - through continued best practice, learning and development.



Core Responsibilities for Safeguarding Adults

Social care plays an important role in helping people with care and support needs to live lives free from abuse and neglect.

As part of the duty to promote wellbeing, there is a requirement to protect people from abuse and neglect. This includes preventing abuse and minimising risk, but without taking control away from individuals.

There is a requirement for all safeguarding work to be person-led and outcome focused. This is known as Making Safeguarding Personal and is achieved by consideration of the six key principles:

- **Empowerment** - People being supported and encouraged to make their own decisions and informed consent
- **Prevention** - It is better to take action before harm occurs
- **Proportionality** - The least intrusive response appropriate to the risk presented
- **Protection** - Support and representation for those in greatest need
- **Partnership** - Local solutions through services working with their communities
- **Accountability** - Accountability and transparency in delivering safeguarding

Worcestershire County Council is the lead agency for Safeguarding Adults and Adult Social Care is an important part of this role, but is not the only service with legal responsibilities. As well as social care, commissioners, voluntary, independent and private sector providers, health services, housing and criminal justice agencies are all important safeguarding partners.

The Care Act 2014 introduced new safeguarding duties for local authorities, including: establishing a Safeguarding Adults Board to oversee and lead adult safeguarding across Worcestershire and undertake Safeguarding Adults Reviews; co-operation with relevant partners; responding to safeguarding concerns and where necessary, making or causing enquiries to be made in order to establish whether action needs to be taken to prevent or stop abuse or neglect; and to arrange for the provision of independent advocacy.

All social care staff are clear about their responsibilities to:

- Promote well-being, provide information and advice and to support people to remain as independent as possible;
- Work in partnership with people and their carers with their consent, with the support of an advocate or in line with the requirements of the Mental Capacity Act 2005;
- Consider whether any restrictions within a person's care plan amount to a deprivation of their liberty and to act accordingly;
- Protect people from abuse and neglect in all that we do;
- Help people at risk of harm or abuse to stay safe and help individuals to recover from abuse and neglect;
- To work closely with partners, particularly the Police and NHS, to promote safe living; and
- Reflect social work values within their work and reflect on learning from statutory reviews and quality assurance activities.

The Director of Adult Social Services is responsible for safeguarding, with lead responsibility delegated to the Quality and Safeguarding Services Manager. Within Worcestershire County Council, the nominated Director of Adult Social Services (DASS) is the Director of Adult Services. The DASS is legally accountable through specific responsibilities under statutory guidance issued by the Department of Health (DoH) to:

- Maintain a clear organisational and operational focus on Safeguarding Adults
- Make sure relevant statutory requirements and other national standards are met:
- Ensure that the Safeguarding Adults policies and procedures are coordinated and effectively implemented.

The key responsibilities of the DASS are:

- Leading commitment to outcomes for people at risk of harm;
- Developing the means to measure whether outcomes are realised so that practitioners and boards know how efficient they are;
- Services and procedures drive engagement with people ensuring their preferred outcomes are discussed
- Staff are competent in working with families and networks and have skills, knowledge and permission to use the full range of legal and social work interventions;
- Engage with local criminal and justice systems to make sure victims get the same access to justice as everyone else;
- Performance of safeguarding services is regularly checked and audited.

The DASS is also responsible for:

- Ensuring that there is a clear organisational focus on safeguarding adults;
- Ensuring that there are clear protocols in place, for dealing with adults identified as being at risk of abuse and/or neglect and that all staff are aware of these;
- Ensuring that the Safeguarding Adults Board is working effectively and a framework of inter-agency arrangements are in place
- Ensuring that staff providing care services exercise a duty of care and that personal dignity is upheld
- Ensuring that a Principal Social Worker is in place to lead and oversee excellent social work practice.

Case Study - Joanne's Story

Joanne is a 27-year-old woman with a learning disability. She lived at home with her parents after returning from residential college and was nervous about living on her own; however, her parents were keen to build on the skills she learned at college.

Joanne is now living in her own flat, part of a cluster of flats. She said: "I felt a little nervous but once I moved in I felt very confident and enjoy cooking my own meals with staff helping me. The staff are friendly and helpful; if there are any problems I can ask for help."

Her parents were also anxious about the move, but say they have seen her thriving in her new home. "Joanne is a lot more confident. Her dad saw a huge change in her in just the first few days. We hope she has a home for life."

Supported living is the term used to describe how people with disabilities are enabled to live independently in their own homes. This can be from as little as a few hours per week to help people with shopping and paying bills, to providing a number of hours each day with access to support at night. Support is tailored to the needs of the individual and should enable people to be as independent as possible whilst ensuring that they are safe.



How we are organised

Our workforce remains a high priority for management both across the Council and within Adult Services. Currently there are approximately 1200 staff in Adult Services. The Council's operating model is designed to support the most efficient delivery model focussing on prevention and independence and is regularly reviewed to ensure it remains fit for purpose and aligned to strategic objectives. A revised organisational design for Adult Services will be endorsed during the Autumn 2018 and be implemented during April 2019.

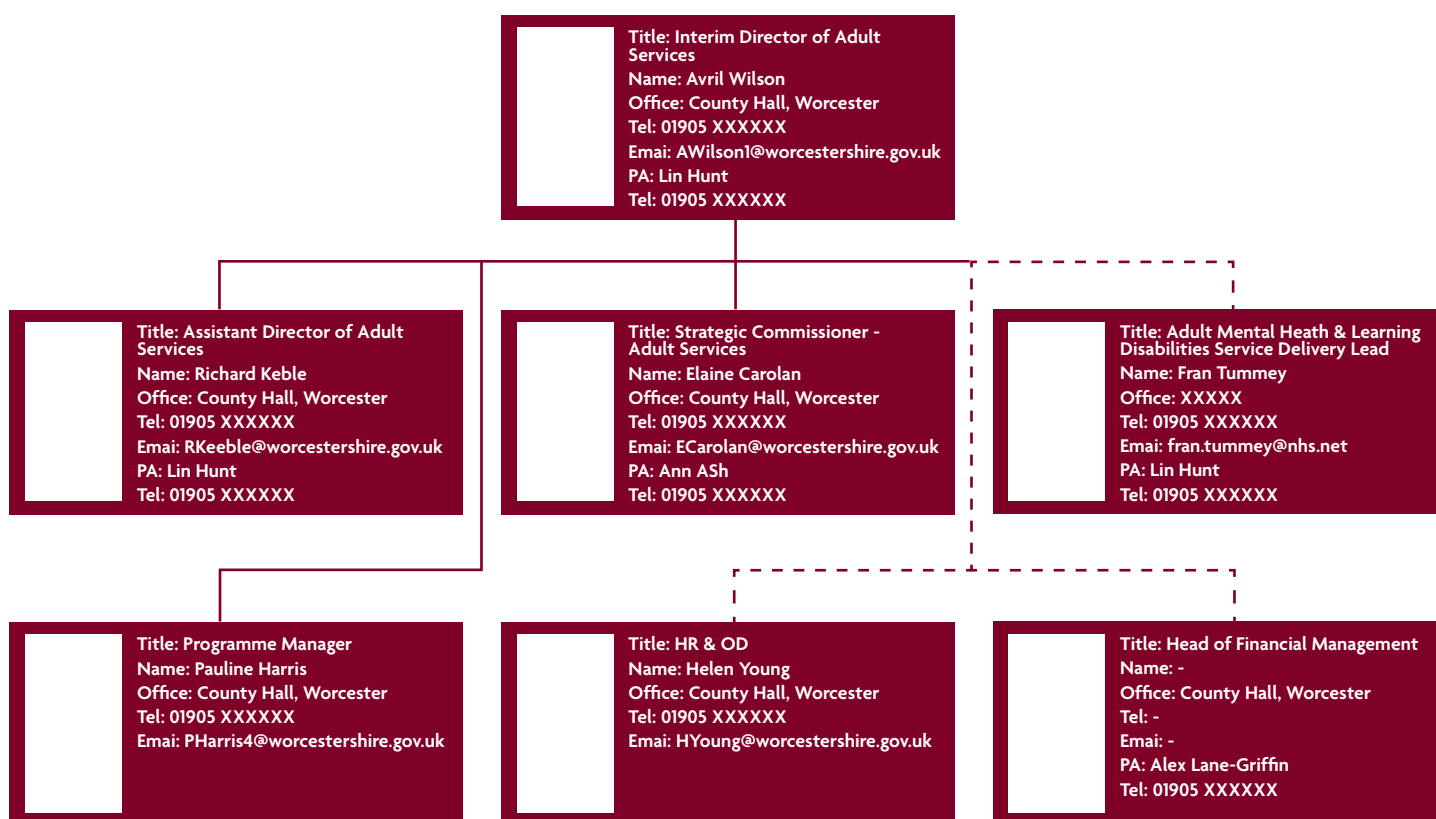
We employ a number of staff in Integrated Mental Health and Learning Disability services that are currently managed by the Health and Care Trust. Additionally, a number of health professionals are employed in our Recovery Services (specifically nurses). One of the key priorities for 2018/19 is to review the organisational design of provider and commissioned services to ensure the best possible outcomes for Worcestershire's residents within an affordable financial envelope.

In addition to Older People Social Work teams being provided by the County Council, other in house provision includes:

- Young Adults Team
- Residential Homes
- Home Care
- Replacement Care
- Day Opportunities
- Supported Living
- Shared Lives

The Directorate's review of provider services will be completed in October 2018 and recommendations will be delivered by the new financial year.

The Directorate is led by the Director of Adult Services and the Directorate Leadership Team.



Employee Engagement and Development

Our employees are our most valuable resource and without their genuine engagement in supporting the delivery of our priorities and plans it would be impossible for us to deliver the services that our service users, their families and carers deserve. Ensuring that we have a highly skilled, well-motivated and empowered team of the right people, in the right place, at the right time is essential.

Corporately we have developed a suite of management and leadership competencies, under eight key areas. During the last year all managers have undertaken formal training to understand and develop their competence in each area; with individual priorities for development identified where appropriate. There are four levels of competency which are aligned to the Council's layers of management.

The appointment of a Principal Social Worker, a shared post, between the Council and University of Worcester and the establishment of our Social Work Academy both recognise the vital role social workers play in improving outcomes and the quality of life of our residents. They also ensure continued best practice and continued learning.



WORCESTERSHIRE SOCIAL WORK ACADEMY

The Social Work Academy is a professional hub providing a clear framework for professional development, ensuring Social Workers can thrive and achieve the highest quality practice. It provides access to relevant professional development and resources to: enhance skills; increase knowledge and equip Social Workers to progress their career.

Routines into
Social Work

Carer
Pathways

Career
Progression

Continuing
Professional
Development

Research and
Resources

News and
Updates

Workforce metrics continue to focus on sickness absence, agency spend and vacancy rates. Sickness absence rates remain higher than we would like. We are looking to put in place a number of interventions to address both short term and long term sickness absence. A management plan is being developed to target focussed attention in those areas of concern.

A dedicated Social Work recruitment team has been established to focus on improving the candidate experience. A recent drive and focussed campaign for Social Care recruitment has been extremely successful.

The Leadership team is working with front line staff to develop an action plan that responds to the key areas highlighted during the staff survey conducted in early 2018.

In April 2018 the Council launched a new recruitment campaign Leave the Big City Behind You. The campaign encourages people to move away from the larger congested conurbations to either find a new life in Worcestershire, or to commute to the county to work here at the Council.

WHAT DO YOU PREFER?



Leave the Big City Behind You has been launched on Facebook, Twitter, LinkedIn and Instagram. In the first 24 hours the campaign was seen by over 20,000 people. Here is the film that has stimulated most comment and conversation so far.

Key Strengths and Achievements

Performing Well:

- ✓ Vast majority of Adult Social Care Outcome Framework Indicators are on or above national average.
- ✓ Quality of In House Services rated as good by CQC.
- ✓ Internal quality assurance of market is robust and effective with Worcestershire being rated as one of the best in the Country by CQC.
- ✓ DToC performance continuously improving and within target for consultant beds

Partnership and Engagement:

- ✓ Strategic relationships with NHS are strong
- ✓ Cross Council and partner working strong - shared posts that support all ages.
- ✓ Provider relationships open and robust - Adult Services Commissioners successfully completed consultation in relation to fee proposals for 2018/19 for care homes, domiciliary care, supported living and extra care services in Worcestershire.
- ✓ Carer engagement is strong and productive and Worcestershire Carers Strategy outlines how joint working with Health, Social Care and voluntary and community sector and carers has developed support services in the community and provided by professionals.
- ✓ Adult Learning Disability Strategy outlines how we work in partnership with the Learning Disability Partnership Board to progress priorities for people with a Learning Disability in Worcestershire.

Partnership and Engagement:

- ✓ Comprehensive Change and Savings Programme with focus on financial challenges and understanding of service area pressures.
- ✓ Roll out of 3 Conversations Model as a vehicle for engagement, demand management and innovation – focus on understanding the positive difference it makes for the people we support.
- ✓ Key focus on promoting independence, through Supported Housing and Extra Care and Care Package Reviews and the use of Assistive Technology.
- ✓ Domiciliary Care Commissioning focused on better outcomes for service users and value for money.
- ✓ Sustainability and Transformation Plan, Accountable Care Organisation and alignment with Neighbourhood Teams

Benchmarking and Comparator Data

As a learning organisation - Worcestershire County Council and Adult Services welcome and encourage external peer support and challenge.

During 2017, Adult Services invited the Association of Directors of Adults Social Services (ADASS) to complete a peer challenge recognising:

- Need to inform new Cabinet Member with Responsibility
- Move to strengths based requires different thinking
- We need to recruit and retain the best workforce
- Financial challenge and the need to ensure the best use of resources
- Many new managers in post

The peer team returned in February 2018 and reported clear and considerable changes and actions had taken place, highlighting the team's focus, energy and attention to detail.

Progress against several themes emerged from the review:

- **Increased focus on financial challenges** and improved understanding of service areas most pressured.
- **Further development of transformation plans** and resourcing of programme team enabling more clarity and certainty of direction and delivery
- **Roll out of 3 Conversations Model** as a vehicle for engagement, demand management and innovation – and our focus on understanding the positive difference it makes for the people we support stood out strongly
- Work completed to reassure ourselves of **appropriate standards of governance, policies and practice to keep adults in Worcestershire safe.**

The vast majority of Adult Social Care Outcomes Framework Indicators are on or above the national average. A robust performance management framework is in place with monthly reviews at Senior and Directorate Leadership Teams. A Summary of ASCOF Indicators and comparison with England Results are included overleaf.

Adult Services Leadership Team's key focus is to:

- **Reduce** the number of older and younger adults whose long term support needs are met by admission to care homes.
- **Increase** the number of customers whose short term support services enable them to live independently for longer
- **Increase** the number of older people who stay at home following reablement or rehabilitation
- **Sustain** the current performance on delayed transfers of care from hospital
- **Prevent**, reduce or delay the need for care

| 2016-17 | Worcestershire | | | | England | | |
|---|----------------|------|-------|---------|---------|-------|---------|
| | WCC | Rank | CASSR | Results | Rank | CASSR | Results |
| 1C1B The proportion of carers who receive self-directed support | 100 | 1 | 16 | 73.2 | 1 | 150 | 83.1 |
| 1C2B The proportion of carers who receive direct payments | 100 | 1 | 16 | 68.9 | 1 | 150 | 74.3 |
| 3D1 The proportion of people who use services who find it easy to find information about support | 82.3 | 1 | 16 | 74.4 | 5 | 151 | 73.5 |
| 3A Overall satisfaction of people who use services with their care and support | 71.5 | 1 | 16 | 66.5 | 10 | 151 | 64.7 |
| 1J Adjusted Social care-related quality of life – impact of Adult Social Care services | 0.44 | 4 | 16 | 0.42 | 14 | 151 | 0.40 |
| 1B The proportion of people who use services who have control over their daily life | 81.6 | 2 | 16 | 79.1 | 20 | 151 | 77.7 |
| 1A Social care-related quality of life score | 19.6 | 4 | 16 | 19.3 | 22 | 151 | 19.1 |
| 1I1 The proportion of people who use services who reported that they had as much social contact as they would like | 49.7 | 3 | 16 | 47.2 | 26 | 151 | 45.4 |
| 4B The proportion of people who use services who say that those services have made them feel safe and secure | 91.4 | 4 | 16 | 88.1 | 29 | 151 | 86.4 |
| 3D2 The proportion of carers who find it easy to find information about support | 69.2 | 2 | 16 | 64.4 | 29 | 151 | 64.2 |
| 1D Carer-reported quality of life score | 8 | 5 | 16 | 7.7 | 32 | 151 | 7.7 |
| 1I2 The proportion of carers who reported that they had as much social contact as they would like | 38.4 | 5 | 16 | 34.0 | 41 | 151 | 35.5 |
| 3C The proportion of carers who report that they have been included or consulted in discussion about the person they care for | 72.8 | 7 | 16 | 71.1 | 48 | 151 | 70.6 |
| 4A The proportion of people who use services who feel safe | 71.6 | 8 | 16 | 71.7 | 50 | 151 | 70.1 |

| | | | | | | | |
|--|-------------|-----------|-----------|--------------|------------|------------|--------------|
| 1E The proportion of adults with a learning disability in paid employment | 6.8 | 6 | 16 | 5.7 | 51 | 151 | 5.7 |
| 1C2A The proportion of people who use services who receive direct payments | 30.4 | 10 | 16 | 33.7 | 52 | 151 | 28.3 |
| 1C1A The proportion of people who use services who receive self-directed support | 95.7 | 6 | 16 | 88.4 | 71 | 151 | 89.4 |
| 3B Overall satisfaction of carers with social services | 39 | 7 | 16 | 38.7 | 68 | 151 | 39 |
| 1G The proportion of adults with a learning disability who live in their own home or with their family | 78.1 | 7 | 16 | 76.8 | 70 | 151 | 76.2 |
| 2B2 The proportion of older people (aged 65 and over) who received reablement/rehabilitation services after discharge from hospital | 2.7 | 5 | 16 | 2.3 | 79 | 151 | 2.7 |
| 2A2 Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population | 642 | 13 | 16 | 552.2 | 85 | 151 | 610.7 |
| 2A1 Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population | 13.3 | 10 | 16 | 12.0 | 90 | 151 | 12.8 |
| 2D The outcome of short-term services: No ongoing support required afterwards | 71.8 | 13 | 16 | 81.2 | 103 | 151 | 77.8 |
| 2B1 The proportion of older people (aged 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services | 78.3 | 13 | 16 | 81.6 | 116 | 151 | 82.5 |
| 2C1 Delayed transfers of care from hospital, per 100,000 population | 18.2 | 12 | 16 | 16.9 | 120 | 151 | 14.9 |
| 2C2 Delayed transfers of care from hospital that are attributable to adult social care, per 100,000 population | 9.6 | 11 | 16 | 7.5 | 127 | 151 | 6.3 |

Stakeholder Engagement and Consultation

Strategic relationships with the NHS are strong with lots of examples of good practice. These include the integrated approach to Mental Health and Learning Disability teams, social workers working in Neighbourhood Teams with GP Practices, whole system support to facilitate discharge from Acute Hospitals.

Cross Council and partner working is also strong, evidenced by shared posts that support all ages, and we have member, management, staff and partner commitment to the 3 Conversations Model.

Provider relationships are open and robust and Adult Services Commissioners have successfully completed consultation in relation to fee proposals for 2018/19 for care homes, domiciliary care, supported living and extra care services in Worcestershire.

Carer engagement is strong and productive and Worcestershire Carers Strategy outlines how joint working with Health, Social Care and voluntary and community sector and carers has developed support services in the community and provided by professionals.

Our Adult Learning Disability Strategy outlines how the Learning Disability Partnership Board and subgroups ensure:

- Action plans are in place
- Big issues will be escalated
- Focus and progress on cross cutting themes that affect everyone with a learning disability
- Voices of people with learning disabilities and family carers are heard
- Continued joint working with Worcestershire's People's Parliament

Market Position Statement

We are committed to the co-production of services with a wide range of stakeholders, with a particular focus on the needs of service users and carers and the role of the voluntary and community sector

In order to commission and deliver high quality, cost effective services, Adult Services are engaged in the following initiatives:

- Development of an Outcomes Based domiciliary care approach across Worcestershire. This could dramatically change the landscape of the Domiciliary Care Market in Worcestershire reducing the number of providers who will then pick up guaranteed volumes of work. This will challenge the traditional approach to the delivery of homecare and providers will need to change and adapt to a more flexible form of service delivery. The 'traditional' approach are for those organisations who have large overheads e.g. big offices, large back office staff and adopt traditional ways of recruiting which don't tie into the more modern world.
- Development of a technology enabled care approach. This is for people who receive care in a community setting and those who receive care in a residential or nursing setting.
- Reviewing how equipment is used to support people at home
- Working with providers to develop Supported Living provision, including provision which meets complex needs, in Worcestershire, in line with the Council's Supported Living Strategy.
- Develop provision in Worcestershire for 16-25 year olds, including potential options for residential college provision.
- Develop a mixed market of day service and overnight short breaks (replacement care) support. For example, externally-provided Day Services for people with Learning Disabilities are commissioned under a revised specification and contract through a DPS (Dynamic Purchasing System) opened up to providers monthly to encourage more choice in the market.
- Ensuring best use of the Continuing Health Care funding
- Continuing the development and utilisation of Extra Care with Housing Providers
- Commissioning of discharge to assess beds in Care Homes

- A move towards developing in-house provision for specialist services
- The commissioning of Block Purchased beds

The Adult Services' Market Position Statement is aimed at providing a clear picture of the environment in which Adult Social Care for older people and people with a disability is provided in Worcestershire. It sets out the wider context in which we commission services, the main policy drivers that affect us and the key objectives we wish to achieve. We hope that this document will further inform on-going dialogue and meaningful relationships with stakeholders.

Adult Services is committed to stimulating, shaping and sustaining a diverse, active market where innovation is encouraged and rewarded, while poor practice is highlighted and actively discouraged. We are dedicated to ensuring that services are delivered in a way that is personalised, with a strong focus on individual choice and control that takes account of issues of diversity and equality.

We recognise the invaluable contribution that statutory partners, providers and community/voluntary organisations continue to make in maintaining a sustainable market that provides high quality, cost effective, care and support.

The introduction of The Care Act in 2014 was designed to ensure that the focus in health and social care is on the overall wellbeing of the individual and that this is at the forefront of any care and support they receive. It emphasises, amongst other things, the need to promote individual wellbeing, taking into account the views, feelings and wishes of the individual about the care and support they receive. This should consider all aspects of their wellbeing including their physical and mental health, dignity and respect and control over their daily needs.

As a result of a growing and aging population and financial pressures, Worcestershire County Council will need to be innovative in the way we deliver adult social care throughout the County, including working to build new capacity across the voluntary and community sector.

Services and activities have been grouped into three broad areas over which there is strategic commissioning oversight. These are;

- Supporting People with a Learning Disability
- Supporting Older People and People with a Physical Disability or Sensory Impairment at home and in the community
- Supporting Older people and people with a Physical Disability in a Care Home

Worcestershire County Council has recognised that managing across these broad areas can deliver:

- Improved outcomes and quality of care for individuals
- Sustainability of service provision and the market, including excellent, commercially focussed, contract management
- Savings through increased efficiency, understanding of markets and planning of service delivery

The Market Position Statement highlights the key current and future commissioning priorities for Adults Social Care in Worcestershire.

Key Risks and Assumptions

This section of the plan sets out the risks that apply across Adults Services – the key risks facing Adults Services in Worcestershire relate to projected Demand and Growth in the context of reducing resources and ensuring Market Sustainability in light of current and forecast pressures including; National Living Wage, etc.

The Directorate recognise its significant areas of risk are as follows, and they review mitigation, against these risks regularly through Directorate Performance Board.

| Risk | Mitigation |
|---|---|
| The pace on current projects and/or identification and realisation of new projects does not deliver reductions in demand and/or spend that enable a balanced budget at year end. | <ul style="list-style-type: none"> ■ Funding secured for dedicated programme team ■ Formal project management and governance approach – with early risk identification and mitigation ■ Monthly performance board – covering change, budget, savings and performance |
| Current forecast demographic and/or seasonal changes in demand, built in to Adult Services budget are exceeded and results in higher than forecast spend. | <ul style="list-style-type: none"> ■ Comprehensive growth and demand forecasts developed for consideration as part of 2019/20 budget setting |
| Current processes do not support early visibility and indication of potential issues in forecasting change in demand, activity and or spend through correlation of decision making with financial, performance and activity reporting mechanisms. | <ul style="list-style-type: none"> ■ Revised approach to activity, performance financial reporting developed go live September 2018 to ensure early identification and forecasting of changing trends. |
| Forecast reduction in convergence of demand into service delivery, through the three conversation model approach is not achieved and/or sustained when the current pilot is rolled out across all Locality Teams. | <ul style="list-style-type: none"> ■ Monthly reporting and focus on convergence and comparisons on baseline position to ensure early identification of issues and required mitigations. |
| Leadership and management capacity is insufficient to deliver the scale and pace of change required to deliver a balanced budget, alongside statutory responsibilities. | <ul style="list-style-type: none"> ■ Increased capacity within programme team ■ Specialist support engaged in key areas e.g. Provider Services Strategy ■ Corporate support secured for further support e.g. BCF Funding Review |

Action Plan

This action plan sets out the key statutory, service development and transformational activities for Adult Services for the next 3 – 5 years.

| Outcome | Activity Type | Key Actions | How will this be measured | Owner | Timescales |
|---|---------------------------------------|--|--|--------------------|--|
| Increase the number of over 65's living independently for longer | Transformational – Corporate Priority | Roll out of 3CM strengths based model across all older adults social work teams | Monthly activity reporting on number of older people in care homes. | Assistant Director | Oct 2018 – 3CM Live in all older adults social work teams. |
| Minimise the number of people who need to go into permanent or residential nursing placements | Transformational – Corporate Priority | Secure an outcomes based commissioning approach with domiciliary care providers Invest in technology to support people living at home longer. Increase social worker capacity in Acute Settings to facilitate appropriate transfers of care. | Tracking against baseline of number of older adults entering the service who are converted into care home packages. Contractual performance measurement with providers based on outcomes. | | Roll out of assistive technology enabling approach – October 2018 to December 2019. Outcomes based commissioning rolled out for domiciliary care – April 2019. New organisational design for Acute social workers live -January 2019 |
| Ensure intensive support and capacity is available for those in the greatest need/ in crisis | Statutory – Corporate Priority | Ensure performance on percentage of user defined outcomes are achieved. Review of current arrangements to provide rapid response, out of hours and hospital social work support. | Monthly reporting of safeguarding performance through Corporate Balanced Score Card. Monthly performance reporting on delayed transfers of care. | Assistant Director | Ongoing Completed by December 2018 |

| Outcome | Activity Type | Key Actions | How will this be measured | Owner | Timescales |
|---|---------------------------------------|---|---|------------------------|--|
| Ensure cross system approach to preventing the need for social and/or acute health care care | Transformational | Co-location and aligned working with Neighbourhood Teams | Monthly performance reporting through Alliance Boards | Assistant Director | Go Live June 2018 |
| Reduce and sustain the reduction in Delayed Transfers of Care (DToC) | Service Development | <p>Increase social work capacity in acute hospital settings.</p> <p>Review and re-commission Step Down Unit</p> <p>Coordinated management of Pathway 1 discharge into the community.</p> | Monthly performance reporting on delayed transfers of care | Assistant Director | <p>Go Live January 2019.</p> <p>Complete 1 April 2019</p> <p>Go Live July 2018</p> |
| Ensure the care market in Worcestershire remains good quality, value for money and focused on better outcomes for our residents | Service Development | <p>Procurement and implementation of the key services as identified in the Market Position Statement:</p> <ul style="list-style-type: none"> ■ Key service commissioning timeline ■ Development of 3-5 and 5-10 year commissioning strategy ■ Development of a regional commissioning strategy | <p>Adult Services Performance Board and Corporate Commercial and Commissioning Board – monthly reviews.</p> <p>Regional Commissioning Network</p> | Strategic Commissioner | <p>Delivery through 2019/20</p> <p>April 2019</p> <p>2019/20</p> |
| Ensure our provider services are fit for purpose | Service Development Transformation | Complete full review of Provider Services and Develop Strategy and Action Plan for Change | Monthly reporting through Adult Services Performance Board | Assistant Director | October 2018 |

| Outcome | Activity Type | Key Actions | How will this be measured | Owner | Timescales |
|--|-----------------------------------|--|---|---|--|
| Ensure we have a highly skilled, well- motivated and empowered team of the right people, in the right place, at the right time is essential. | Service Development | Develop workforce plan. Complete action plan from staff survey key topics. Increased focus on managing attendance Introduction of more robust Performance Management | Monthly reporting through Adult Services Performance Board | Director, HR & OD Business Partner & Directorate Leadership Team | Ongoing through 2019 |
| Meet all of our statutory and Safeguarding obligations | Statutory | Achieve average or above performance on ASCOF indicators. Achieve CWC Good rating for all regulated services | Monthly reporting through Adult Services Performance Board | Director and Directorate Leadership Team | Ongoing |
| Ensure we deliver within allocated budget and resource allocations | Statutory Transformational | Refresh & robustly manage cross Directorate Savings/ Change Programme. Clearly define Growth and Inflation budget increase requirements. Introduce added and robust focus to spend across all teams. Introduce cross activity, performance, budget and savings dashboard and reporting. | Monthly reporting through Adult Services Performance Board. | Director, Head of Finance, Programme Manager, Assistant Director and Strategic Commissioner | Ongoing September 2018 August 2018 September 2018 |

| Outcome | Activity Type | Key Actions | How will this be measured | Owner | Timescales |
|--|---------------------|--|---|--|---|
| Ensure Adult Services Organisational Design is fit for purpose and provides best value and aligned to Core Functions | Transformational | Develop and promote Adult Services Core Offer and complete a full review and organisational re-design of Adult Services in line with this offer. | Monthly reporting through Adult Services Performance Board. | Director, Assistant Director and Strategic Commissioner | September 2018 – review completed. April 2019 – new organisational design live. |
| Increase awareness and understanding of the issues faced by adult social care. | Service Development | Develop and deliver the Adult Services Marketing and Communications Plan | Monthly review with Director of Adult Services | Director, Assistant Director, Strategic Commissioner and Programme manager | Marketing and Communications Plan Completed – August 2018. Launch with 70th birth celebrations September 2018. Ongoing actions over the next 12 months. |

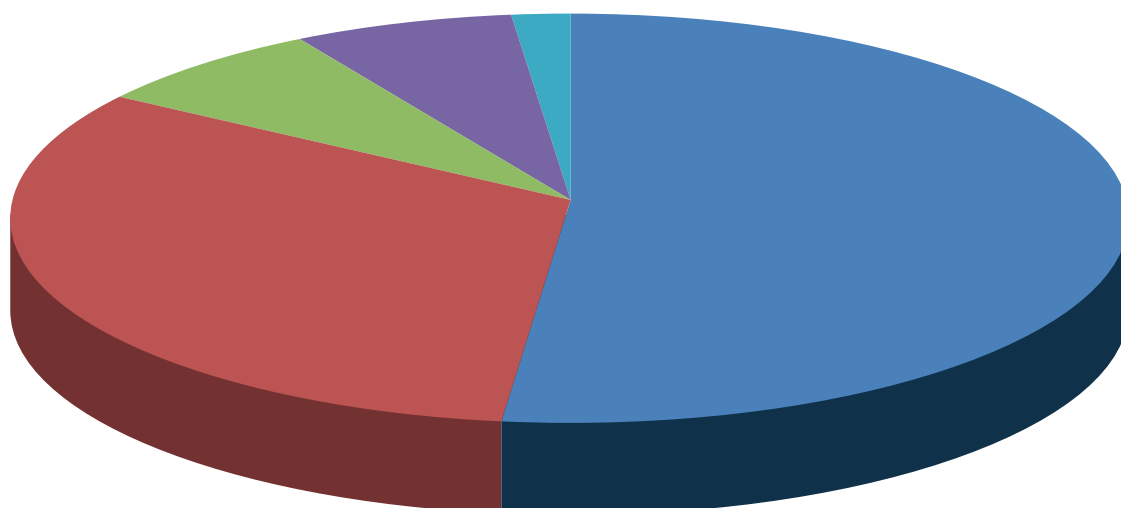
Financial Resources Overview

The following table sets out the Council's 2018/19 Adult Social Care budget:

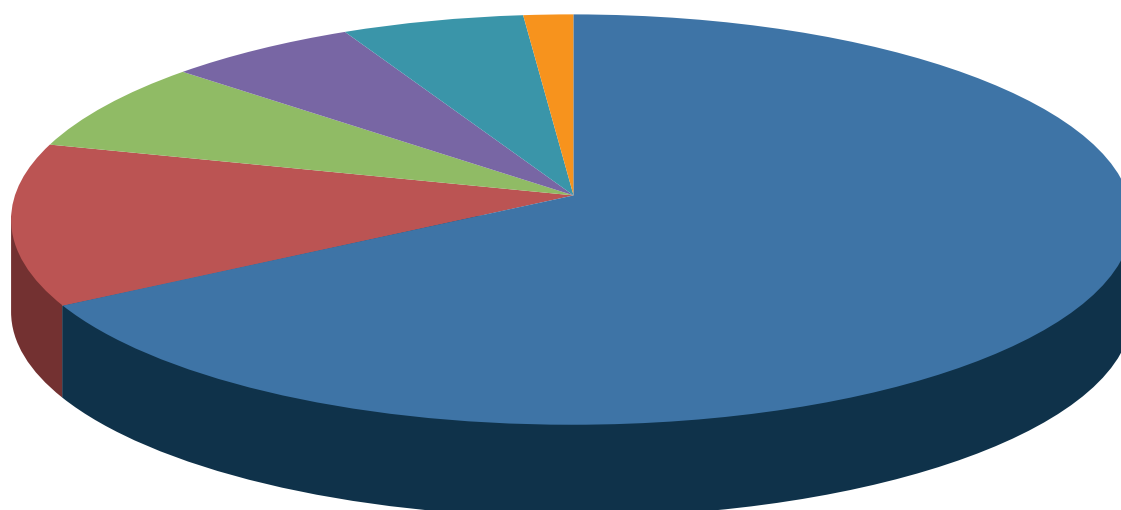
| Spend Relating to: | £m |
|-----------------------------------|----------------|
| Older People | 97.036 |
| Adults with a Learning Disability | 60.083 |
| Adults with a Physical Disability | 14.144 |
| Mental Health Services | 13.080 |
| Other Services | 3.348 |
| Total | 187.691 |

| Spend Relating to: | £m |
|------------------------------------|----------------|
| Grant, Council Tax, Business Rates | 125.396 |
| Client Contributions | 23.875 |
| Health Contributions | 13.527 |
| Improved Better Care Fund | 11.124 |
| Better Care Fund | 10.937 |
| Other Service Income | 2.832 |
| Total | 187.691 |

2018 / 19 Spend



2018 / 19 Funding



This budget includes the cost of Social Work Teams to assess and support people, the cost of in-house services including residential and day care, a range of specialist advice and support services and the provision of a range of packages of care and support including approximately:

Older Peoples Services:

1,370

people in Residential
or Nursing Care

1,820

people receiving
care packages at home
or in Extra Care

270

people receiving a direct
payment to purchase
their own care

People with a Physical Disability:

70

people in Residential
or Nursing Care

270

people receiving
home care packages

40

people supported
to live independently

420

people receiving a direct
payment to purchase
their own care.

People with a Learning Disability:

320

people in Residential
or Nursing Care

180

people receiving
home care packages

450

people supported
to live independently

440

people receiving a direct
payment to purchase
their own care.

Mental Health Services:

122

people in Residential
or Nursing Care

90

people receiving
home care packages

70

people supported
to live independently

60

people receiving a direct
payment to purchase
their own care.

The Adult Services Budget is facing a number of significant financial challenges over the next few years due to:

Increasing numbers of people requiring care due to:

- An ageing population,
- People who previously funded their own care, becoming eligible for care due to depleting resources, and
- Younger people with disabilities becoming eligible for Council funding as they turn 18 or later in life as their own parents become infirm.

And increasing cost due to:

- Increased frailty of older people needing more intensive care,
- People with more profound disabilities surviving longer into adulthood and needing more intensive care as they get older, and
- Market forces factors that affect the ability of providers to offer care packages and placements at the Council's standard rates – including from 2016/17 the rise in national minimum wage.

The Service is already working to transform the way it works in terms of direct service provision, commissioning within the marketplace, working with partners and a new social work operating model. However, the Council faces the need for ongoing increased investment in enabling communities and individuals to stay well and remain independent.

Despite all these challenges, the service has been relatively successful in limiting the rise in numbers of older people who need Council funded care through a range of measures including:

- The introduction of an asset based social work model (the Three Conversation Model),
- Moving away from 'bed based' solutions with the development of Extra Care Housing and Supported Living,
- Providing significant support to carers in Worcestershire through Worcestershire Association of Carers, and
- The introduction of a much more robust system of challenge in Continuing Health Care cases where we believe the individual should be health funded.

The operational responses outlined above will not, however, manage demand in the longer term. The Council's overall financial position means that developing a sustainable offer based on individual and community resilience driving better social and health outcomes will be difficult in terms of investment in the short term, but critical in the longer term.

Governance

This Business Plan has been approved by the Director of Adult Services, following engagement with the Directorate Leadership Team; Cabinet Member with Responsibility for Adults Social Care; Director of Public Health and Worcestershire's Strategic Leadership Team.

This Business Plan will remain a dynamic document and will be formally reviewed annually, with the first review being quarter four of 2018/19 financial year.

The Director will review progress through bi-monthly reviews at Directorate Leadership Team.

The Director of Adult Services is accountable for the actions outlined in this Business Plan and the Assistant Director and Strategic Commissioner, supported by the Head of Finance, Programme Manager and HR and OD Business Partner are responsible for delivery against these actions.

Progress will be monitored through monthly one to ones with Leadership Team officers and the Director.