# Agenda

# Adult Care and Well Being Overview and Scrutiny Panel

### Wednesday, 18 November 2020, 10.00 am

Due to the current COVID-19 pandemic, Worcestershire County Council will be holding this meeting in accordance with the relevant legislative arrangements for remote meetings of a local authority. For more information please refer to: Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020.

Please note that this is a public meeting, conducting remotely by videoconferencing between invited participants and live streamed for general access via a link on the Council's website to the Council's You Tube Channel

The Agenda papers and background papers can be accessed electronically on the Council's website. Members of the public and press are permitted to report on the proceedings.

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### **DISCLOSING INTERESTS**

### There are now 2 types of interests: 'Disclosable pecuniary interests' and 'other disclosable interests'

### WHAT IS A 'DISCLOSABLE PECUNIARY INTEREST' (DPI)?

- Any **employment**, office, trade or vocation carried on for profit or gain
- **Sponsorship** by a 3<sup>rd</sup> party of your member or election expenses
- Any contract for goods, services or works between the Council and you, a firm where you are a partner/director, or company in which you hold shares
- Interests in **land** in Worcestershire (including licence to occupy for a month or longer)
- Shares etc (with either a total nominal value above £25,000 or 1% of the total issued share capital) in companies with a place of business or land in Worcestershire.

### NB Your DPIs include the interests of your spouse/partner as well as you

### WHAT MUST I DO WITH A DPI?

- Register it within 28 days and
- **Declare** it where you have a DPI in a matter at a particular meeting
  - you must not participate and you must withdraw.

NB It is a criminal offence to participate in matters in which you have a DPI

### WHAT ABOUT 'OTHER DISCLOSABLE INTERESTS'?

- No need to register them but
- You must declare them at a particular meeting where: You/your family/person or body with whom you are associated have a **pecuniary interest** in or **close connection** with the matter under discussion.

### WHAT ABOUT MEMBERSHIP OF ANOTHER AUTHORITY OR PUBLIC BODY?

You will not normally even need to declare this as an interest. The only exception is where the conflict of interest is so significant it is seen as likely to prejudice your judgement of the public interest.

### DO I HAVE TO WITHDRAW IF I HAVE A DISCLOSABLE INTEREST WHICH ISN'T A DPI?

Not normally. You must withdraw only if it:

- affects your **pecuniary interests OR** relates to a planning or regulatory matter
- AND it is seen as likely to prejudice your judgement of the public interest.

### DON'T FORGET

- If you have a disclosable interest at a meeting you must disclose both its existence and nature - 'as noted/recorded' is insufficient
- Declarations must relate to specific business on the agenda
  - General scattergun declarations are not needed and achieve little
- Breaches of most of the **DPI provisions** are now **criminal offences** which may be referred to the police which can on conviction by a court lead to fines up to £5.000 and disqualification up to 5 years
- Formal dispensation in respect of interests can be sought in appropriate cases.



# Adult Care and Well Being Overview and Scrutiny Panel Wednesday, 18 November 2020, 10.00 am, Online only

### Membership

### **Councillors:**

Mrs J A Potter (Chairman), Mr R C Adams, Mr T Baker-Price, Mr A Fry, Mr P Grove, Mr P B Harrison, Mr R C Lunn, Mrs E B Tucker (Vice Chairman) and Ms S A Webb

### Agenda

Item No	lo Subject				
1	Apologies and Welcome				
2	Declarations of Interest				
3	Public Participation  Members of the public wishing to take part should notify the Assistant  Director for Legal and Governance in writing or by email indicating the nature and content of their proposed participation no later than 9.00am on the working day before the meeting (in this case 17 November 2020).  Enquiries can be made through the telephone number/email address below.				
4	Confirmation of the Minutes of the Previous Meeting Previously circulated.				
5	People and Communities Strategy	1 - 14			
6	Promoting and Enabling Independence	15 - 22			
7	Performance, In-Year Budget Monitoring and 2021/22 Budget	23 - 40			
8	Work Programme 2020/21	41 - 44			

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All the above reports and supporting information can be accessed via the Council's websitehttp://www.worcestershire.gov.uk/info/20013/councillors\_and\_committees

Date of Issue: Tuesday, 10 November 2020



### **AGENDA ITEM 5**



### ADULT CARE AND WELL BEING OVERVIEW AND SCRUTINY PANEL 18 NOVEMBER 2020

### PEOPLE AND COMMUNITIES STRATEGY

### **Summary**

- 1. The Adult Care and Well Being Overview and Scrutiny Panel is to receive an overview of the new Strategy for People and Communities. The Strategy represents a strategic plan for change within the Council's Directorate of People (The Directorate), to a strengths-based model.
- 2. Senior Officers from the Directorate of People and the Cabinet Member with Responsibility for Adult Social Care have been invited to the meeting.

### **Background**

- 3. Following the creation and implementation of the revised strategic directorate model across the Council and appointment of the Strategic Director for People in May 2020, the strategic direction of travel for the People Teams has been established.
- 4. Aligned to the Corporate Strategy and shaped by the COVID-19 experience internally and system wide, the People Directorate approach is to review and redesign the service offering via a transformation programme that promotes independence and focuses provision of more complex support to those most in need.
- 5. In essence, the ambition and priority is to "work with partners to ensure that Worcestershire residents are healthier, live longer, have a better quality of life and remain independent for as long as possible."
- 6. In order to deliver the Strategy and significant efficiencies that are targeted within, implementation of a revised Target Operating Model (TOM) for the Directorate that is future-proofed for at least 3 years is an essential element for success, beginning with leadership.

### Strategic Aim

- 7. The Directorate Strategy focusses on outcomes for people and is a single Strategy for both people and the communities in which they reside.
- 8. It will create a clear offer that enables people, maximises use of the Council's assets, resources and workforce which is accessible to all and easy to use. It will also reduce duplication in buildings, systems, processes, commissioning, and service responses.

- 9. The Directorate aims, through its strategic approach, for Worcestershire's citizens to:
  - a) Be independent and connected:
    - This is for people who require some assistance to improve aspects of their life. All universal services to **be safe and well** are also available in combination with this level of support. This is our prevention and early help offer for people who may otherwise require eligible services under the Care Act.

### b) Be supported:

- This is for customers who are eligible under the Care Act for care and support. However, before they access that level of care and support, they should be able to explore all the range of options under be safe and well and be independent and connected because this enables people to live a good quality of life
- If eligible services are also required, they can be mixed and matched with be safe and well and be independent and connected as suits that individual
- People who access services to be supported should be able do so in the least intrusive way and for the shortest time to enable them to be independent and live a good quality of life.
- c) Be safe and well:
  - Able to live the life and do the things a person wants to do as independently as possible with respect and dignity, in a safe and supported way
  - That advice is available when needed and care/support is designed around the individual needs.

### **Drivers for Change**

- 10. The COVID-19 pandemic has brought many issues into sharp focus for those who work within people and communities. The levels of need have been high at times, but also the way people have looked out for each other and supported themselves after receiving advice and guidance has been heartening.
- 11. The Directorate now knows far more about its communities than ever before. The Directorate also knows where greater input for people is required at times of local or national turbulence. Local authorities and other public bodies have been united in collaborating with partners and people in a mutually respectful and co-productive way.
- 12. COVID-19 aside, there are a number of professional, economic, system and national drivers for taking the approach outlined.
- 13. Worcestershire County Council is committed to working in full partnership with citizens and communities with an ethos of mutual respect and co-production. The starting point for that partnership is one of empathy, understanding, and looking out for each other.
- 14. What do we know:

- Population health, wellbeing policies and behavioural science teaches us that small adjustments made by individuals can enhance our lifestyle and wellbeing
- A sense of belonging, positive relationships and contributing to community life are important to people's health and wellbeing
- This is even more so during times of personal trauma (such as bereavement, ill health, loss of employment or your home) and local and national issues such as floods or pandemic
- Co-production is key: people are involved as equal partners in designing their own solutions. They can choose and steer those solutions, which better meet their requirements and are cost effective
- People are treated equally and fairly, and the diversity of individuals and their communities are recognised and involved as a strength.

### **Strategic Delivery**

15. The Directorate's Strategy focuses on people, not organisations. It will be delivered via a series of workstreams grouped together under 3 strategic pillars of change.







### PERSON CENTRED APPROACH

- Develop one front door for our residents.
- Ensure strong digital offer
- Build on strengths of local community assets
- Collaborative work with partners

### **SHAPING SERVICES**

- All age approach
- Make "strengths" based conversations the norm
- Redirect provider resources to independence and enabling

#### SHAPING AN EFFECTIVE MARKET

- Engage to develop independence and choice
- Work with partners to create an integration framework
- Commission for the whole population not just those who access "services"
- 16. Work has begun in designing workstreams, some are heading into implementation and others have been launched e.g. the revised service for reablement was launched on 26 October 2020. It is anticipated that the full programme will be delivered during financial year 2022/3, with the majority of implementation across the financial year 2021/2.
  - a) Each workstream is undergoing a rigorous approval and monitoring process in line with Council procedures and will be led by a senior manager supported through a team of appropriate experience and skilled project managers.
  - b) This will entail revisions to service configurations:

- The Directorate will demonstrate a "One Worcestershire" approach across Council departments and with partners to provide effective and efficient services across the County
- Some services will become much more integrated
- Some teams will become co-located and work more closely together than ever before
- The aim is to provide seamless care to the customer, to promote independent living with equality of access.
- 17. In some circumstances, consultation will be required:
  - Where change affects employees, the Directorate will consult with them and their representatives through existing Council processes
  - Where change impacts our partners, the Directorate will consult with them across the system, including health, the voluntary sector and providers as appropriate
  - Where change directly impacts customer groups, the Directorate will consult with them and their carers as appropriate.
- 18. Further information about the Directorate's Strategic Plan for a strengths-based approach is included in the presentation slides at Appendix 1.

### **Equality and Diversity Implications**

19. Each workstream, through the cases for change will include a full equality assessment to ensure that all potential equality and diversity implications are both considered and addressed as each element of implementation progresses.

### **Purpose of the Meeting**

- 19. Members are invited to consider and comment on the information discussed and agree:
  - whether any further information or scrutiny work is required at this time
  - whether there are any comments to highlight to the relevant Cabinet Member.

### **Supporting Information**

Appendix 1 – Presentation on People and Communities Strategy

### **Contact Points**

Emma James / Jo Weston, Overview and Scrutiny Officers, Tel: 01905 844964 / 844965 Email: <a href="mailto:scrutiny@worcestershire.gov.uk">scrutiny@worcestershire.gov.uk</a>

### **Background Papers**

In the opinion of the proper officer (in this case the Assistant Director for Legal and Governance) there are no background papers relating to the subject matter of this report.

# **People and Communities Strategy**

Our Strategic Plan for Change to a Strengths
Based Model

Paula Furnival Strategic Director, People



# Strategic approach

# Be Well and Stay Safe

WCC People's Directorate and its partners will **co-produce** ways of working with citizens to enable them to:

Be Independent and Connected

Be Supported

"It is our priority, working with partners, to ensure Worcestershire residents are healthier, live longer, have a better quality of life and **remain independent** for as long as possible."

# **Driving Best Practice – Managing Demand/Cost**

# Tier 1 – Universal and Self Service

Gross Budget c.£25m

Prior to Covid:

- 69% of contacts resolved at Tier 1
- 4.9% resolved at Tier 2
- 26% progressed to T3

Developing the T1 and T2 services will be critical tomanaging demand.

Implementation of the new TOM, Peopletoo estimate cumulative savings and cost £9m-£21m

Tier 2 – Targeted Interventions

70%

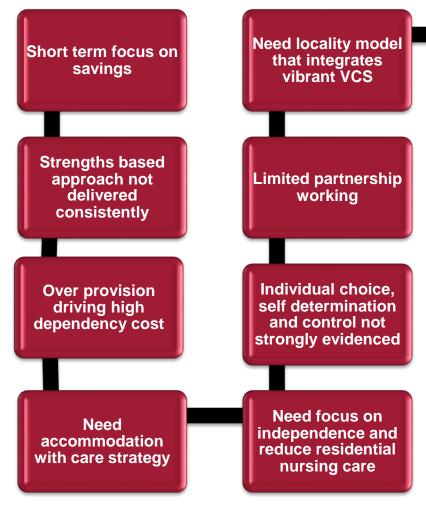
20%

Tier 3 – Services 10%

Gross Budget c.£239m Gross Budget c.£46m



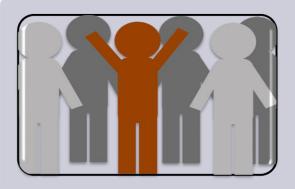
- A single strategy for people and communities
- With a clear AIM
- And a focus on OUTCOMES for people
- Developed and co-produced with people, staff and partners
- That meets need by maximising the use of our assets, resources and workforce
  - Gives a clear OFFER to enable people
  - Which is clear, simple and easy to access or use
  - Reduces duplication in buildings, systems, processes, commissioning, service responses



Under usage of universal services by those with higher needs

Need to simplify and enhance market management and supplier relations

We will lead and implement a full person-centered ethos across People Directorate, the County Council, and with our partners in order to enable and empower people to live the life they wish through a new operating model, appropriate training and assurance







### PERSON CENTRED APPROACH

- Develop one front door for our residents.
- · Ensure strong digital offer
- Build on strengths of local community assets
- Collaborative work with partners

### **SHAPING SERVICES**

- All age approach
- Make "strengths" based conversations the norm
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### SHAPING AN EFFECTIVE MARKET

- Engage to develop independence and choice
- Work with partners to create an integration framework
- Commission for the whole population not just those who access "services"

Programme delivery 2020 / 2021 / 2022



# How will we deliver the strategy?

- A series of workstreams have been created through the 'case for change' process
- These have been approved through:
  - SLT and Cabinet
  - our directorate transformation board (PDLT),
  - the CSP process and
  - Chief Officers Group (where appropriate, or communicated to COG for information where there is no council-wide implication).
- Each workstream is led by a senior manager and will be delivered through a team of appropriate experience, supported by skilled project managers
- Working proposition .....you can do better with less .....if you work in a more co-produced, collaborative way
- Examples 1. Care home admissions 2. Carers

# What does this mean for my service area?

- Service configuration:
  - We will demonstrate a "One Worcestershire" approach across Council departments and with our partners to provide effective and efficient services across the county.
  - Some services will become much more integrated
  - Some teams will become co-located and work more closely together than ever before
  - Our aim to provide seamless care to the customer, to promote independent living with equality of access
- Consultation
  - Where change affects employees, we will consult with them and their representatives through existing council processes
  - Where change impacts our partners, we will consult with them across the system, including health, the voluntary sector and providers as appropriate
  - Where change directly impacts customer groups, we will consult with them and their carers as appropriate



# QUESTIONS?

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### **AGENDA ITEM 6**



### ADULT CARE AND WELL BEING OVERVIEW AND SCRUTINY PANEL 18 NOVEMBER 2020

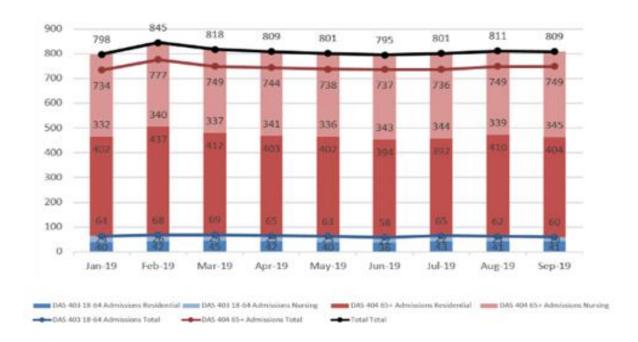
### PROMOTING AND ENABLING INDEPENDENCE

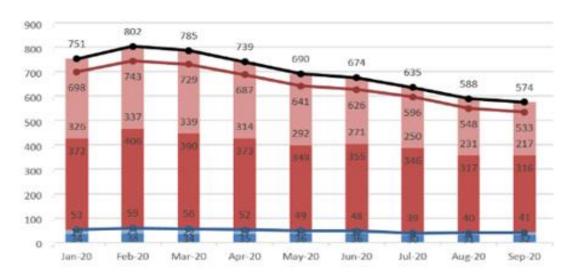
### Summary

- 1. The Adult Care and Well Being Overview and Scrutiny Panel is to receive an overview of the vision and plans being introduced to continue to promote people's independence and sustain their independence for as long as possible, at home.
- 2. Senior Officers from the Directorate of People and the Cabinet Member with Responsibility for Adult Social Care have been invited to the meeting.

### **Background**

- 3. The People Strategy has a clear focus on the Council's priority to "work with partners, to ensure Worcestershire residents are healthier, live longer, have a better quality of life and **remain independent** for as long as possible."
- 4. The People Directorate and its partners are **co-producing** ways of working with citizens to enable them to stay in home-based environments, for as long as possible and negate the need for long term care in residential and/or nursing care, including those already at home or requiring care/support following hospital discharge.
- 5. The Graphs overleaf shows the significant decline in the current demand for long term care, which is as a result of 3 main factors:
  - a) Customers and their families being reluctant to move to care home settings, due to perceived risk of infection
  - b) Care homes unable or reluctant to take new customers, due to COVID-19 outbreaks/infections
  - c) Success of the current Supported Living Strategy and project.





- 6. It is further evident that there is an imbalance between capacity to support home-based care and the appropriate demand of those leaving hospitals. This will result in people who can appropriately have their care needs met in their own home, instead of being taken through a bed-based pathway or experiencing an increased length of stay within the Acute Trust. This has clinically been identified as a key contributor to patients experiencing Hospital Acquired Functional Decline, which is a driver for poorer patient outcomes and increased cost into the system.
- 7. The tables below show a comparison of hospital discharges during 2019 and 2020 (patients snapshot of first whole week of every other month).

2019/ month	Number					
January	75					
March	76					
May	70					
July	64					
September	71					
October	54 (total 410)					

2020/ month	Number				
January	68				
March	77				
May	126				
July	96				
September	78				
October	102 (total 547)				

- 8. There are several streams of connected activity that are in progress including:
  - a) Introduction of Community Reablement Service
  - b) Increasing Shared Lives provision
  - c) Increasing Extra Care provision
  - d) Increasing Supported Living provision
  - e) Home First Programme
- 9. These are explored further in the sections below.

### **Service Overviews**

### Community Reablement

- 10. On 22 September 2020, the Panel received an update on plans to introduce a Community Reablement service in October 2020.
- 11. This service went live, as planned on 26 October 2020 and up to 4 November, 27 referrals have been made to this service with 25 live reablement interventions being provided. The Panel will receive a further report in the future on progress and outcomes achieved.

### **Shared Lives**

- 12. Shared Lives is a highly flexible form of supported living. The Shared Lives Scheme recruits Shared Lives Providers to provide individuals with the opportunity to live in the community within a family setting where they can develop their skills and confidence in a stable and supported environment.
- 13. Shared Lives is a provision within the Provider's own home and there are many differing types of Shared Lives Providers within the Worcestershire area.
- 14. The person with care needs has a licence agreement to rent a room in their Shared Lives Provider's house. The Shared Lives Provider will provide for some of the person's needs (the person may also have funded day opportunities or a direct payment).

- 15. The Worcestershire Shared Lives registered Scheme has been in operation since 2004, although it existed in another form previously. It has an established staff team and Registered Manager who successfully delivers support to people living in Worcestershire. Currently the scheme has incorporated Shared Lives Plus aspirations and guidance to achieve outcomes for over 127 people.
- 16. This service is now moving to increase the number of Shared Lives providers for Worcestershire. A proof of concept pilot is currently being explored to test the ability of the Scheme to potentially double over time through targeted recruitment activity. The Proof of concept would include:
  - a) Designing and delivering area-specific campaigns to recruit new Shared Lives carers
  - b) Co-design recruitment, approval, referral, matching and monitoring processes which can be carried out rapidly and without face to face contact, based on our existing comprehensive good practice and resource pack and guidance
  - c) Recruit and assessing new Shared Lives carers
  - d) Deliver Shared Lives support to an increased number of people, monitoring outcomes using our existing outcome monitoring tool, and refining new processes based on real-time data and outcomes.

### Extra Care

- 17. An Extra Care Strategy for Worcestershire was developed in 2011/12 (Worcestershire Extra Care Strategy 2012-2026). To inform the Strategy data was used from the Worcestershire Housing and Support Needs of Older Persons Assessment that was carried out in 2009/10, alongside the involvement of a broad range of stakeholders and interested parties. The Extra Care Strategy set out the framework for the future development of extra care housing in Worcestershire.
- 18. As at June 2020 there were 270 people who were in Extra Care in which the Council had nomination rights. There were a further 62 people who had been supported into Extra Care and have since become 'self-funders' following the sale of their homes. In total this is 332 people. The Council has nomination rights for 397 Extra Care units. There has been an increase of people in Extra Care schemes however the target has not been achieved since 2016/17.
- 19. To enhance the use of extra care there has been significant work with Social Work teams e.g. identification of key workers and holding team meetings in Extra Care schemes to ensure staff are aware of what extra care schemes offer and to ensure good local working arrangements.
- 20. There has been work undertaken to engage with the wider public via a number of marketing campaigns e.g. What is Extra Care (Worcestershire County Council).
- 21. Whilst there have been notable successes at an individual level there has not been the wider uptake or creation of demand for Extra Care places. Anecdotal evidence suggests that the decline in uptake is in part due to people coming to the Council in a period of crisis and with increased care needs.

- 22. In total there are 35 less Council funded people in Extra Care compared to June 2019. This is in part a result of not being able to let tenancies during the COVID-19 pandemic. Two housing providers have expressed concern that both the ability to fill the units in Extra Care schemes is affecting the business model and financial viability of schemes in the long term. The impact of the pandemic on some schemes has increased the challenge. Providers have also raised concern that in some schemes maintaining balanced communities in Extra Care schemes is also a challenge with an increased level of need from people who are placed by the Council.
- 23. One of the key components of the Extra Care Strategy was to deliver a mixed economy of provision including being able to cater for the substantial and growing market of self-funders in Worcestershire.
- 24. McCarthy and Stone, as an example, are in conversation with the Council as they wish to increase their presence in Worcestershire and are willing to work with the Council to ensure the schemes are sustainable and support the Council's wider aims with regard to active ageing and supported money management. McCarthy and Stone, as do other housing providers, want to secure land across Worcestershire and ensure a Case for Change development pipeline for Extra Care across Worcestershire. They have identified areas such as Evesham, Alvechurch, Broadway, Bromsgrove, Pershore as key areas they would like to pursue.
- 25. The impact of planning policy is also crucial in the development of Extra Care. Defining an extra care development as C2 (residential institution) or C3 (residential dwelling house) for planning purposes has significant impact on whether a scheme is financially viable to the developer. A C3 development, which is how the majority of Extra Care developments are classified is beneficial for the land owner (more houses can be built and more quickly) but for an Extra Care developer there is an impact on the commercial viability of the development as, for example, affordable housing section 106 contributions are generally sought on all C3 developments, increasing the cost to the developer.
- 26. Commissioners are now revising the Extra Care Strategy and Needs Assessment in order to:
  - a) Develop an updated and clear market position statement (MPS) for developers who want to develop Extra Care in Worcestershire. This work sits alongside the development of an MPS for Supported Living
  - b) Support a marketing campaign across Worcestershire to raise awareness about Extra Care for residents across Worcestershire
  - c) Develop a 'health settings / place based' approach working with Extra Care providers. Aim to develop a more consistent wellbeing offer / approach across providers noting current service offer differs across Extra Care settings
  - Review opportunities for developing Council owned land for Extra Care schemes. Link into the Head of Strategic Land and Economy within Worcestershire County Council
  - e) Ensure Extra Care developments are considered as part of the wider Strategic Housing Group and sub-group
  - f) Develop a partnership approach with the housing providers to identify, incentivise and support people into Extra Care Schemes

g) Decrease voids / increase tenancies and increased income. This approach would also free up housing stock which would benefit the wider housing market.

### **Supported Living**

- 27. The Worcestershire Housing and Support Commissioning Plan 2014-18 and Worcestershire Supported Living Strategy 2017 2020 both set out a plan of work to create more opportunities to enable people with a learning disability to move into supported living. The Supported Living Project was established with the following aims:
  - Reduce dependence on residential care and more expensive supported living services
  - Work in partnership with housing and support providers to develop a range of housing options, particularly cluster flats for people with disabilities
  - Enable individuals living with families or in shared houses to become more independent
  - Ensure that young adults in transition to adulthood have a range of housing choices in-county
  - Give more people choice and control over where they live, who they live with and who supports them.
- 28. To date, with a focus on, but not exclusively working with people with learning disabilities, 275 individuals have moved into supported living environments, achieving savings of £2.4 million to date.
- 29. The Council has developed 9 cluster flats and over 100 shared houses.
- 30. Numbers in supported living have continued to steadily increase over the last 12 months, with an additional 127 individuals moving to a supported living option.
- 31. Commissioning and operational teams are currently working to fill 3 new learning disability supported living services and 2 new mental health supported living services by January 2021. The first of these services to start will be the redevelopment of the County Council Kingfield's day service at Ledwych Road, Droitwich. Commissioning teams are also in talks with developers to obtain 2 sites for individuals with complex needs to be delivered in 2021.
- 32. The needs assessment for the future demand is now being developed to incorporate people with mental health issues, physical disabilities and vulnerable adults, as well as updating the current learning disability needs assessment. This will feed into a new Supported Living Strategy aiming to continue to expand Supported Living provision that will enable greater capacity for our customers to be supported in an independent setting.
- 33. Commissioners are working in partnership with Worcestershire Strategic Housing Group to develop a Supported Accommodation Strategy, which will feed into the Worcestershire Strategic Housing Plan.
- 34. The refreshed Supported Living Project will:

- Further reduce residential care placements
- Increase housing options for our under 65 cohort
- Be underpinned with a detailed needs assessment predicting future demand and commissioning needs for the future
- Deliver a market position statement with clear information about the services that need to be developed
- Develop a housing module for social work review to feed into dynamic needs assessment
- Update our Supported Living Strategy
- Develop a Supported Accommodation Strategy for Worcestershire in Partnership with the District Councils.

### **Home First Programme**

35. In 2019 the Council and system partners developed the Onward Care Team (OCT) which in co-ordination with the Acute Trust's *Home First* program altered the dispositions of the pathways (PW) – increasing Pathway 1 demand, whilst decreasing Pathway 2 and 3.

- 36. Prior to March 2020 complex discharges were facilitated via 3 distinct pathways:
  - Pathway 1: Discharge Home with Support (Health or Social Care)
  - Pathway 2: Discharge to a community hospital
  - Pathway 3: Discharge to a Nursing or Residential Home
- 37. During March 2020 it was recognised that there needed to be a further increase in the number of individuals being discharged via PW1 to support the Discharge to Assess principle and reduce the excess use of Care Home placements. To support this initiative additional investment was put in place to increase the flow of people via PW1. This was calculated to provide an additional 40 discharges per week.
- 38. Moving forwards, further enhancement and capacity is being enabled for this approach with a key focus on:
  - At least 95% of over 65's leaving hospital should be going straight home/normal place of residence either on Pathway 0 (no support) or Pathway 1
  - For the VERY small number of people who really cannot go straight home and need rehabilitation in a community bed (**Pathway 2**), the aim must be to get them home as soon as possible. If they then require some further enablement on their return home, additional to any pre-existing package of care, this will be funded for **UP TO** 6 weeks.
  - **Pathway 3** is for < 1% of people where it is clear that they need 24-hour care in a nursing home, probably permanently.
- 39. The new, cross system approach is expected to derive significant areas of benefit for people and to operational delivery including;
  - Improved patient experience
  - Reduced impact of hospital acquired functional decline

- Reduced reliance on bed-based care
- Improved flow through the acute system
- Reduced care in ED corridor
- Reduced length of stay in acute and community care.

### **Equality and Diversity Implications**

40. The Panel has already received the Equality and Public Health Impact Assessment for the Community Reablement Service and further assessments are in progress as part of the initiation of the other areas outlined above.

### **Purpose of the Meeting**

- 41. Members are invited to consider and comment on the information discussed and agree:
  - whether any further information or scrutiny work is required at this time
  - whether there are any comments to highlight to the relevant Cabinet Member

#### **Contact Points**

Emma James / Jo Weston, Overview and Scrutiny Officers, Tel: 01905 844964 / 844965 Email: <a href="mailto:scrutiny@worcestershire.gov.uk">scrutiny@worcestershire.gov.uk</a>

### **Background Papers**

In the opinion of the proper officer (in this case the Strategic Director for People) the following are the background papers relating to the subject matter of this report:

 Agendas and minutes from the Adult Care and Wellbeing Overview and Scrutiny Panel on 22 September 2020 - <u>Agenda and minutes</u>



### ADULT CARE AND WELL BEING OVERVIEW AND SCRUTINY PANEL 18 NOVEMBER 2020

# PERFORMANCE, IN-YEAR BUDGET MONITORING AND 2021/22 BUDGET

### **Summary**

- 1. The Panel will be updated on performance and financial information for services relating to Adult Care and Well-being.
- 2. In addition, as part of the Budget Scrutiny process for 2021/22, the Panel will receive details of the emerging pressures and challenges for services, as identified by the Directorates, for the 2021/22 Budget. Discussion about emerging pressures and challenges will then help to inform the Overview and Scrutiny Panels' scrutiny of the draft 2021/22 Budget at meetings in January 2021.
- 3. The Cabinet Member with Responsibility for Adult Social Care, the Strategic Director for People and the Head of Finance have been invited to attend the meeting to respond to any queries from Panel Members.

### **Performance Information**

- 4. The Corporate Balanced Scorecard is the means of understanding progress against the Council's Corporate Plan. The Scorecard contains a range of indicators linked to key priorities and themes. Many measures are long-term and may be affected by a wide range of factors, some of which are outside the direct control of the Council.
- 5. In addition, the Corporate Balanced Scorecard provides a means of understanding progress against the Council's Corporate Plan and has a range of indicators linked to key priorities and themes for each Directorate. This is reported to Cabinet and is also available on the Council's <u>website</u>.
- 6. Attached at Appendix 1 is a dashboard of performance information relating to Quarter 2 (July to September 2020). It covers the indicators from the Directorate level scorecard and those from the corporate scorecard and other management information (as appropriate) which relate to services relevant to this Scrutiny Panel's remit.

### **Financial Information**

7. In addition to regular performance information, the Panel also receives in-year budget information. The information provided is for Period 6 and is attached in the form of presentation slides at Appendix 2.

### **Budget Scrutiny 2021/22**

- 8. As part of the Budget Scrutiny process for 2021/22, Directorates have been asked to identify the emerging pressures and challenges for services, and these are also set out in Appendix 3.
- 9. The Panel's discussions on these issues will be reported to OSPB on 9 December 2020.

### **Purpose of the Meeting**

- 10. Following discussion of the information provided, the Scrutiny Panel is asked to determine:
  - any comments it would wish to highlight to the CMR or OSPB, relating to the in-year budget and performance information
  - any comments to report back as part of the budget scrutiny process on the emerging pressures and challenges for services, to the OSPB at its meeting on 9 December 2020
  - whether any further information or scrutiny on a particular topic is required.

### **Supporting Information**

Appendix 1 – Adult Services Performance Information Dashboard Appendix 2 – In-year Budget Information (Presentation Slides) incorporating budget scrutiny information of emerging pressures and challenges for 2021/22 Appendix 3 – 2021/22 emerging pressures and challenges for services.

### **Contact Points**

Emma James/Jo Weston, Overview and Scrutiny Officers, Tel: 01905 844964/ 844965 Email: scrutiny@worcestershire.gov.uk

### **Background Papers**

In the opinion of the proper officer (in this case the Assistant Director of Legal and Governance) the following are the background papers relating to the subject matter of this report:

 Agenda and Minutes of the Adult Care and Wellbeing Overview and Scrutiny Panel on 22 September, 27 July and 27 January 2020, 6 November, 25 September, 11 July, 14 March and 23 January 2019 – available on the website: Weblink for agendas and minutes

All agendas and minutes are available on the Council's website here.

### **Key Priorities ASC business objectives:**

**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

**Prevent**, reduce or delay the need for care

Priority- Reduce the number of older and younger adults whose long term support needs are met by admission to care homes

Indicator: Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population (ASCOF 2A(1) (low is good)

Analysis: This national indicator looks at planned admissions and as such includes 12 week disregards, so potentially some of those included will eventually become self funders. This includes people within the age group 18-64 who have physical disabilities, learning disabilities or mental health issues. Controls are in place to ensure that permanent admissions are minimised and are only used where there is no other support available in a community based setting. Work is ongoing to ensure that maximum use is made of services such as supported living, and all options to support young people to remain living independently or with families are considered as a priority.

The admission rate per 100,000 of the younger population for Worcestershire was 16.71 (57 young people) in the year to end of Mar-20, compared with 19.3 in the previous year (66 young people). In terms of benchmarking data, the latest available is 2018-19 - based on this data Worcestershire is above the national average of 13.9 (ie our admissions are above this but below the comparator averages (17.8) (national and comparator results are shown on the graph in the green and purple blocks). In Q2 2020-21 the rate has dropped to 12.32 (42 young people) (Sep-20). Covid-19 is significantly impacting this.

Priority- Reduce the number of older and younger adults whose long term support needs are met by admission to care homes

Indicator: Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population (ASCOF 2A(2) (low is good)

Analysis: This national indicator looks at planned admissions and as such includes 12 week disregards, so potentially some of those included will eventually become self funders. All people over the age of 65 are included in this indicator.

Measures are in place to control all permanent admissions to either residential or nursing care. Any new placements can only be approved at Area Manager level and all new high cost placements go through a scrutiny panel. Projects are underway to look at practice in authorities with lower rates of admissions. Compulsory pick ups such as those from continuing health care and self funders also impact on results here. There is a pilot in process where a single worker will complete all self funding pick ups using an risk assessment tool to ensure this is applied consistently.

The admission rate per 100,000 of the older population for Worcestershire was 627.64 at the end of Mar-20 based on 853 admissions compared with a rate of 637.9 last year. Comparing to 2018-19 national data - this is above the national (579.4) and comparator (571.3) averages.

For Q2 2020-21 the rate has dropped to 453.99 (617 people) and has been significantly impacted by Covid-19. Admissions are counted over a rolling year to end Sep 2020, the number dropping considerably so far this year.

Priority: Increase the number of customers whose short term support services enable them to live independently for longer

Indicator: Proportion of people with no ongoing social care needs following reablement after hospital discharge - Sequel to short term services to maximize independence (ASCOF 2d) (high is good)

Analysis: This is a national ASCOF indicator which measures rehabilitation success rates for older people, in terms of the percentage who no longer require services following a reablement service. In Worcestershire this relates solely to services provided by the urgent promoting independence team. A service which is available to support hospital discharge. As such the service is working with people with increasingly complex needs. Despite the increasing acuity of people requiring the service, performance has increased over the last year and the result for 2019-20 is 84.21%.

For Q2 2020 the draft results are much lower at 74%% for Sep 2020. This is due to increased complexity of people which includes a large increase in the need for double ups. New hospital discharge models in place since start of Covid-19 have meant that more complex people are being given the opportunity for reablement.

Priority-Increase the number of older people who stay at home following reablement or rehabilitation

Indicator: Older people remaining at home following hospital discharge and a reablement service - Proportion of 65+ who were at home 91 days after discharge from hospital into reablement/rehabilitation services (ASCOF 2b) (high is good)

**Analysis:** This is a national indicator used as a supporting metric for the Better Care Fund program. It measures the percentage of older people who have gone through a reablement program on discharge from hospital and are still at home 91 days later, on a quarterly basis. Reablement services include some that are health led.

The 2019-20 target for this indicator was 81.8%

For 2018-19 the result was 85.1 for Worcestershire which was above the family average of 83.3 and the England averge of 82.4.

The acute hospitals is under increasing pressure, and there continues to be higher acuity in patients discharged to reablement services. These services support people being discharged to remain independent for as long as possible, and it becomes increasingly challenging to ensure that they are at home after 91 days as the needs of people using these services become more complex. Despite this performance on this measure has increased steadily through 2019-20, and is 86.9% for Q4.

For Q2 2020-21 the result is 85.7% so down slightly on the Q4 result due to the increased complexity of people's needs, but begining to pick up on earlier months.

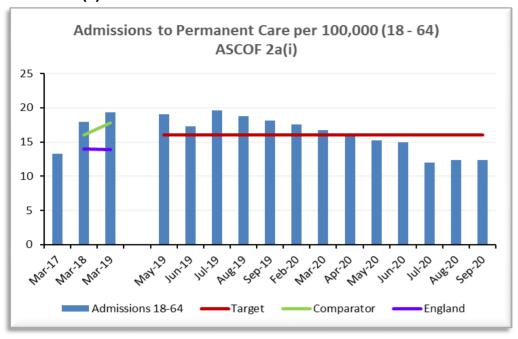
### Priority: Prevent, reduce or delay the need for care

Indicator: Annual care package reviews completed - Percentage of people in services for 12 months who had a review completed in those 12 months or whose review is in progress at that point (high is good)

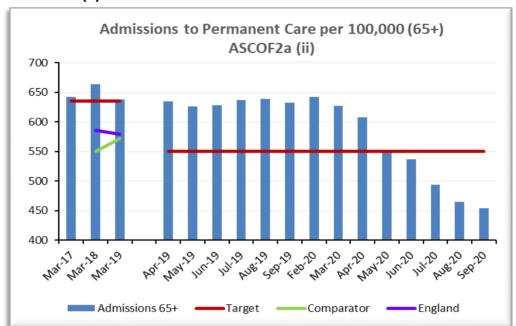
Analysis: This is a local measure that looks at people who have been in receipt of services for a year or more and checks that they have been reviewed in that period. Up until Mar-17 this measure was set at 15 months. The target has remained at 95% whilst reducing the time allowed to 12 months.

Performance at the end of 2019-20 is 85.8%. During Q2 2020-21 performance has dipped to 84.7%. Performance across different services varies with the area social work teams being on target, whilst mental health and learning disability teams are below target and rated as red. However both services have plans in place to improve performance and reporting. In addition to the usual process of annual reviews social workers are also involved in reviewing people who have been funded via Covid special grants. Work is being undertaken where possible to tackle this jointly but it will impact on performance in some cases.

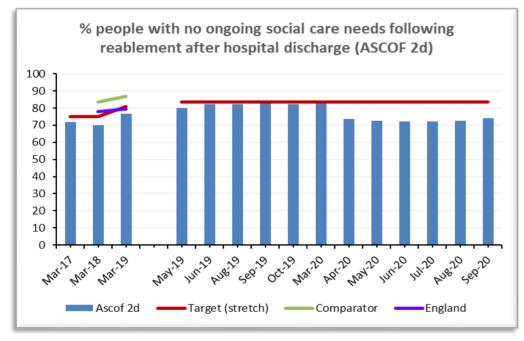
### ASCOF 2a(1)



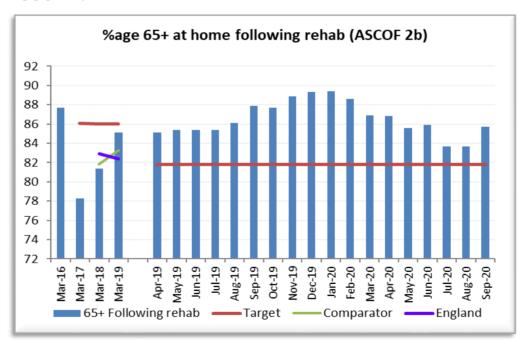
### ASCOF 2a(2)



### **ASCOF 2d**



### **ASCOF 2b**



Note: The purple and green blocks are the comparator and England average

Please Note: Where there is a gap in reporting this is due to the move from Frameworki to LAS, when reporting was being re-established.

### **Annual Reviews Completed**



Please Note: Where there is a gap in reporting this is due to the move from Frameworki to LAS, when reporting was being reestablished.

# Adult Care and Well Being Overview and Scrutiny Panel

**19 November 2020** 

Quarter 2 2020/21 Financial Update



# **Q2 Forecasted Position – Adult Care**

Service	2020/21 Gross Budget	2020/21 Net Budget	2020/21 Forecast	20/21 Draft Variance Before Adj's	Proposed Additional Use of Reserves / Cfwd Grants	2020/21 Forecast Incl one off adj	Variance After Adj's	Variance After Adj's	Change Since Q1
	£000	£000	£000	£000	£000	£000	£000	%	£000
Older People	97,701	62,776	61,587	(1,189)	0	61,587	(1,189)	-1.9%	(1,280)
Leasing Disabilities	70,573	61,111	62,099	988	0	62,099	988	1.6%	(967)
Mental Health	22,342	17,048	17,771	723	0	17,771	723	4.2%	(12)
Physical Disabilities	18,827	15,980	15,132	(848)	0	15,132	(848)	-5.3%	322
Adult Provider Services	13,728	9,299	9,547	247	0	9,547	247	2.7%	(27)
Adults Commissioning Unit	2,338	593	566	(27)	0	566	(27)	-4.6%	70
Support Services, Grant allocations and savings	(234)	(26,563)	(25,813)	750	(385)	(26,198)	365	-4.6%	92
Better Care Fund (excluding Health)	10,127	(269)	(267)	1	0	(267)	1	-0.5%	1
Total	235,402	139,975	140,620	645	(385)	140,235	260	0.2%	(1,800)



# **Key Headlines – Adult Care**

- The current forecast overspend position of c£260k is a significant improvement on the Q1 position of £2m overspend
- Main reasons for the improvement in the forecast
  - Tighter control on overall spend
  - Managing accountability
  - Changed entry pathway into residential and nursing care and increased pathway 1 exits which is demonstrating a 27% drop in new admissions when comparing Aug 2020 with Aug 2019 (reduction of 223 people)
  - Decrease in the projected numbers of people coming into the care system, although the costs of those being placed are, on average, higher

# **Key Headlines – Adult Care**

Overall the current forecast position is an overspend of c£260k, although there are variations between the different client groups

- Older People Services includes a full year saving relating to the implementation of "Liberty Protection Safeguards" (c£1.6m) which has been delayed by Central Government, along with staffing savings
- Learning Disability and Mental Health Services are forecast to overspend due to increases in average unit costs
- Physical Disabilities is forecasted to underspend as activity numbers are lower than budgeted
- Provider services are overspending due to agency and overtime costs within the internal units

## Page 3

## **Impact of COVID-19**

The forecast position shown in this document excludes the impact of COVID-19, as it is assumed to be funded from the following external funding sources

- COVID-19 grant £29m
- Test and Trace £2.75m
- Infection Control £7.45m
- Transport £1.3m
- Community Hardship £0.6m
- Support for loss in sales, fees and charges
- CCG grant relating to hospital discharges and avoiding admission to hospital

Areas where COVID related spend / loss of income has been funded from these external resources which are relevant to this panel include

- Loss of income from clients
- Additional costs associated with supporting care providers including inhouse services
- Additional costs of PPE
- Delay in implementation of change programmes



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# Adult Care and Well Being Overview and Scrutiny Panel

**18 November 2020** 

2021/22 Emerging Pressures and Challenges



## Key areas which are being reviewed by the Directorate

- Nature of support is changing latent demand
- Unit costs for care provision including impact of inflation and National Minimum Wage
- Market availability and ability to provide types of care needed by clients
- "one system approach" to intermediate care and learning from the positive lessons of shared working with NHS, independent and VCS sectors
- Delivering the 2020/21 savings relating to organisational redesign which have been delayed due to COVID

## Key areas which are being reviewed by the Directorate

- Implementing a single "front door" for access to Council services
- Working with key partners to develop integrated community offer Here 2 Help
- Development of a strong digital offer for our customers
   and clients
   Move towards a more "reablement" and "enabling"
- Move towards a more "reablement" and "enabling" social care offer
- Develop a new "All Age Disability Offer"

- Medium to long term impact of COVID-19
  - Impact on provider sustainability
  - Demand on the care service and sector
  - Increase in numbers of self-funders entering council care
  - Economy
  - Transport

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- Funding availability
- Social distancing
- Engagement and communications
- Here to Help Development
- Ability to regenerate our income collection and trading activities
- Clients ability to pay their assessed charges and potential requirement for reassessments

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## Key areas which are being reviewed by the Directorate

- Impact of Brexit
  - Contracts
  - Supply chain
  - Funding availability
  - Staffing availability
  - Changes in legislation
  - Impact on providers

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#### **AGENDA ITEM 8**



#### ADULT CARE AND WELL BEING OVERVIEW AND SCRUTINY PANEL 18 NOVEMBER 2020

#### **WORK PROGRAMME 2020/21**

#### **Summary**

1. From time to time the Adult Care and Well Being Overview and Scrutiny Panel will review its work programme and consider which issues should be investigated as a priority.

#### **Background**

- 2. Worcestershire County Council has a rolling annual Work Programme for Overview and Scrutiny. The suggested 2020/21 Work Programme has been developed by taking into account issues still to be completed from 2019/20, the views of Overview and Scrutiny Panel Members and the findings of the budget scrutiny process.
- 3. Suggested issues have been prioritised using scrutiny feasibility criteria in order to ensure that topics are selected subjectively and the 'added value' of a review is considered right from the beginning.
- 4. The Adult Care and Well Being Overview and Scrutiny Panel is responsible for scrutiny of:
  - Adult Social Care
  - Health and Well-being
- 5. The overall scrutiny work programme was discussed by OSPB on 22 July and agreed by Council on 10 September 2020.

#### **Dates of Future Meetings**

- 28 January 2021, 2pm
- 15 March, 2pm
- 8 July, 10am
- 29 September, 10am
- 15 November, 2pm

#### **Purpose of the Meeting**

6. The Panel is asked to consider the 2020/21 Work Programme and agree whether it would like to make any amendments. The Panel will wish to retain the flexibility to take into account any urgent issues which may arise.

#### **Supporting Information**

 Appendix 1 – Adult Care and Well Being Overview and Scrutiny Panel Work Programme 2020/21

#### **Contact Points**

Emma James / Jo Weston, Overview and Scrutiny Officers, Tel: 01905 844964 / 844965 Email: <a href="mailto:scrutiny@worcestershire.gov.uk">scrutiny@worcestershire.gov.uk</a>

#### **Background Papers**

In the opinion of the proper officer (in this case the Assistant Director for Legal and Governance), the following are the background papers relating to the subject matter of this report:

- Agenda and Minutes of Council on 10 September 2020
- Agenda and Minutes of OSPB on 22 July 2020

Date of Meeting	Issue for Scrutiny	Date of Last Report	Notes/Follow-up Action
	People and Communities Strategy		Suggested at 27 July 2020 meeting
18 November 2020	Promoting and Enabling Independence		Suggested at September 2020 Agenda Planning meeting
	Performance (Q2 July to September 2020), In- Year Budget Monitoring and 2021/22 Budget Scrutiny		
	Budget Scrutiny		
28 January 2021	Worcestershire Safeguarding Adults Board Annual Report		
	Day Services for Adults with Learning Disabilities		Suggested at November 2020 Agenda Planning
Possible future Iten	าร		
TBC	The Council's Adult Services Respite Offer		Suggested at 11 June 2020 meeting
TBC	All Age Refresh of the Carers Strategy	15 September 2019	
TBC	The Council's approach when self-funders in residential care homes run out of funds		Suggested at November 2019 OSPB meeting
TBC	All Age Disability Strategy		Suggested at September 2020 Agenda planning meeting
15 March 2021?	Integrated Care System (NHS Policy Requirement by April 2021)		J
15 March 2021?	Fair and Transparent Funding arrangements between the Council and Clinical Commissioning Group (adults and children) including Continuing Health Care	25 September 2019 11 June 2020	Cross cutting with Health Overview and Scrutiny Committee and Children and Familie Overview and Scrutiny Panel

TBC	Health and Social Care inequalities		Panel Member suggestion
TBC	Care Act easements as a result of COVID-19	11 June 2020	Watching brief as the Council has not applied any at this current time
TBC	Overview of services provided to adults of working age		Panel Member suggestion
Standing Items	Performance and In-Year Budget Monitoring	Jan/March/July/Sept/Nov	
	Budget Scrutiny Process	November 2020 and January 2021?	
	Adult Safeguarding – Annual	Danially 2021:	