

Agenda

Overview and Scrutiny Performance Board

Monday, 22 June 2020, 1.30 pm
County Hall, Worcester

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, conducted 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.

This document can be provided in alternative formats such as Large Print, an audio recording or Braille; it can also be emailed as a Microsoft Word attachment. Please contact Democratic Services on telephone number 01905 844963 or by emailing democraticservices@worcestershire.gov.uk

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 3rd 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.

Overview and Scrutiny Performance Board Monday, 22 June 2020, 1.30 pm, Online only

Membership

Councillors:

Mr R M Udall (Chairman), Mrs E A Eyre (Vice Chairman), Mr A A J Adams, Mrs J A Brunner, Mr A D Kent, Mrs F M Oborski, Mr P A Tuthill and Mrs R Vale

Co-opted Church Representatives (for education matters)

Bryan Allbut (Church of England)

Parent Governor Representatives (for education matters)

Vacancy (Secondary)

Agenda

Item No	Subject	Page No
1	Apologies and Welcome	
2	Declaration of Interest and of any Party Whip	
3	Public Participation Members of the public wishing to take part should notify the Democratic Governance and Scrutiny Manager (Interim Monitoring Officer) in writing or by e-mail indicating the nature and content of their proposed participation no later than 9.00am on the working day before the meeting (in this case Friday 19 June 2020). Enquiries can be made through the telephone number/e-mail address below.	
4	Confirmation of the Minutes of the Previous Meeting (previously circulated)	
5	Update on the County Council's Response to Covid-19	1 - 32
6	Draft Scrutiny Report: Care Work as a Career	33 - 62
7	Member Update, Work Programme and Cabinet Forward Plan	63 - 72

Agenda produced and published by the Democratic Governance and Scrutiny Manager (Interim Monitoring Officer) Legal and Governance, County Hall, Spetchley Road, Worcester WR5 2NP. To obtain further information or hard copies of this agenda, please contact Alyson Grice (01905 844962)/Samantha Morris 01905 844963 email: scrutiny@worcestershire.gov.uk

All the above reports and supporting information can be accessed via the Council's website [here](#)

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OVERVIEW AND SCRUTINY PERFORMANCE BOARD 22 JUNE 2020

UPDATE ON THE COUNTY COUNCIL'S RESPONSE TO COVID-19

Summary

1. The Leader and the Chief Executive of the Council have been invited to provide an update on the County Council's response to the Coronavirus pandemic (COVID-19).

Background

2. COVID-19 has meant unprecedented changes to lives across the globe. In the UK, on 23 March the Prime Minister asked the public to stay at home, to protect the NHS and to save lives. Schools were closed nationally from the end of Friday 20 March, whilst being required to provide a service for vulnerable children and the children of key workers.
3. Following Government guidance, on 16 March 2020 the Council moved away from business as usual activity and established an emergency planning approach to developing and enabling its response to the pandemic, whilst continuing to meet statutory duties.
4. Now, as the Council begins to move out of the response phase and into recovery, the Overview and Scrutiny Performance Board (OSPB) is keen to discuss the impact on services and staff, and how they have been able to respond.
5. Throughout the pandemic, all County Councillors have been kept informed about the Council's response through regular Directorate briefings. Following an informal meeting on 14 May, OSPB Members have also received further updates from the Leader on specific issues raised.
6. On 4 June, Cabinet received an update on action taken by the Council in response to the Covid-19 pandemic and this report is attached as Appendix 1.
7. The Board has asked the Overview and Scrutiny Panels and the Health Overview and Scrutiny Committee (HOSC) to consider how services have been affected, to highlight any emerging issues and to review current work programmes in light of this. Chairmen are invited to feedback on their Panels' / Committee's discussions.

Purpose of the meeting

8. Members are invited to consider and comment on the information discussed and agree:
 - any comments to highlight to the Leader of the Council
 - whether any further information or scrutiny work is required at this time

Supporting Information

- Appendix 1 – Covid-19 Response Cabinet report 4 June 2020

Contact Points

Alyson Grice/Samantha Morris, Overview and Scrutiny Officers, Tel: 01905 844962 / 844963

Email: scrutiny@worcestershire.gov.uk

Background Papers

In the opinion of the proper officer (in this case the Democratic Governance and Scrutiny Manager (Interim Monitoring Officer) the following are the background papers relating to the subject matter of this report:

- [Agenda for Cabinet held on 4 June 2020](#)

CABINET
04 JUNE 2020**COVID-19 RESPONSE**

Relevant Cabinet Member

Mr S E Geraghty

Relevant Chief Officer

Chief Executive

Recommendation

1. The Leader and Cabinet Member with Responsibility for Finance recommends that Cabinet:

- (a) Notes and endorses the action taken by the Council in response to the Covid-19 pandemic to date;**
- (b) Notes the revenue expenditure incurred by the Council to date, receipt of further Government grant and that further updates will be presented to Cabinet in due course;**
- (c) Uses the information in this report as the background for reporting to Council about the urgent decisions taken at the meeting of Cabinet on 26 March 2020.**

Background

- 2. A pandemic is an epidemic of disease that spread across a large region, for instance multiple continents or worldwide, affecting a substantial number of people. The current coronavirus pandemic emerged at the end of December 2019 with a reported cluster of cases of pneumonia in Wuhan, Hubei Province in China. A novel coronavirus was eventually identified and the World Health Organisation (WHO) set up the IMST (Incident Management Support Team) at the start of January 2020. On 11 March the WHO made the assessment that COVID-19 was to be characterized as a pandemic. In the UK on 23 March the Prime Minister asked the UK public to stay at home, to protect the NHS and to save lives. Council officers and colleagues in Worcestershire Children First were already co-ordinating the Council's response to a rapidly developing situation.
- 3. Our response included activating the Corporate Emergency Response Framework, setting up Councils own internal Gold, Silver and Bronze arrangements to meet the Covid-19 response requirements, which in turn are aligned to the LRF structures of Strategic (SCG) and Tactical (TCG) Co-ordinating Groups. The Mission of Gold being: "to preserve life, prevent the

spread of infection and maintain critical Council services". Appendix 1 sets out a diagram of the governance structure.

4. Schools were closed nationally from the end of Friday 20 March, whilst being required to provide a service for children of key workers and vulnerable children.
5. On 26 March Cabinet noted the allocation of £0.2m from earmarked reserves to fund actions already being taken in relation to public health and business continuity plans. It also noted receipt of un-ringfenced grant of £14.9m from the Government for dealing with the impact of coronavirus across the County and this was added to the revenue budget. Cabinet delegated authority to officers to take appropriate actions, including authorising expenditure and making temporary changes to policies arising from the Coronavirus Act, and associated legislation and guidance.
6. Officer decisions made in dealing with the Covid-19 response have been reported on the Council's website and include provision of PPE, Here2Help, development of the Adult Social Care Access Centre and purchase of care. In addition, various management decisions were made relating to the response, including closing County Hall to the public once the remote delivery of services was established.
7. The following sections and paragraphs set out by Directorate in more detail how the Council has been responding to COVID-19 and initial recovery planning, as well as the financial, asset and workforce impacts.
8. Looking forward as the Council begins to move into recovery and out of response, we will continue to bring forward updates to future Cabinets.

➤ **People Services**

➤ **System Wide Response**

9. The Local Health Resilience Partnership (LHRP) is the system wide health Emergency Preparedness, Resilience and Response (EPRRR) structure that was set up in the Health and Social Care Act (2012) and is jointly led across the Herefordshire and Worcestershire footprint and jointly chaired with an NHS England Director and the Director of Public Health. The main function is to gain assurance from health partners of compliance to EPRRR standards to ensure that health organisations have plans in place and are prepared for several scenarios, with global pandemic being number 1 on the risk register. As of the end of January the LHRP was stood up on a weekly basis and membership was widened to include social care, this was escalated to 3 times weekly and then became NHS Gold when it became evident that a full multiagency NHS focussed response would be required.

➤ **Response Overview**

10. The People Directorate is formed from three Divisions covering: Adults Social Care; Public Health and Communities. Following Government guidance, in relation to the COVID-19 Pandemic, on 16 March 2020 the Directorate moved away from business as usual activity and established an emergency planning approach to developing and enabling its response to the pandemic, whilst continuing to meet statutory duties.
11. From 16 March 2020 a robust Communications Strategy was developed by the Communications Unit. This has ensured proactive engagement and communication with all internal and external partners, providers and residents, sharing information, advice, and case studies from our independent providers reporting on the level of support provided by the Council. Examples are provided in Appendix I.
12. The Interim Strategic Director and Director for Public Health established a formal governance framework to support the Directorate response, Assistant Directors, Public Health Consultants and Senior Managers, from across the Directorate, initially met twice daily to develop and deliver the People Directorate's Emergency Plan and response.
13. The Council's EPRRR function, which is based in the Emergency Planning (EP) team in the People Directorate's Public Health Division and, is responsible for ensuring a EPRRR infrastructure, policy framework and ongoing support and advice, to enable senior WCC managers to contribute to the Local Resilience Framework (LRF) during the response phase in tackling the Covid-19 epidemic as part of the Civil Contingencies Act (CCA) responsibilities of the council as a category 1 responder and usually the lead authority on recovery.
14. The Council has not enacted any easements to the Care Act 2014, permitted under the Coronavirus Act 2020. It has put in place a robust review of demand for social care and capacity to respond, and this is reported weekly to the Directorate Leadership Team. The Council does not anticipate enacting any easements in the future.
15. A Record of Executive Officer Decisions, taken to support the People Directorate's response to the pandemic were published on 28 April and are attached at Appendix 2.

➤ **Social Care Response**

16. All people, in receipt of social care have been risk assessed to ascertain their level of need and contacted as appropriate. Their care and support plans have been reviewed and revised to ensure that appropriate levels of care and support are in place. Staff re-deployed from our internal day services and colleagues from the Health and Care Trust have supported this approach. This has been very well received by our service users and their families.

17. During the recovery period the service will explore the feasibility of retaining a named worker approach for people with Learning Disabilities, who have higher levels of care and support needs. We also will be focusing on a review of our processes, systems and procedures – building on the lessons learnt from the new ways of working, adopted during this time. This will bring added focus to community asset building and strengthen the 3 conversations, strengths-based approach.
18. Our Urgent Care and Community Hospital Teams immediately responded to the need to support discharges, within 3 hours, 7 days a week, 8am – 8pm. To achieve this staff have been re-deployed from other social work teams.
19. In anticipation of an increased demand for COVID-19 related hospital admissions and subsequent discharges, Public Health worked with Age UK to scale up the Home from Hospital discharge scheme and Independence at Home support. The Home from Hospital scheme was increased to enable rapid discharge of both COVID and non COVID patients from 8 till 8. The scheme was suitable for patients who required meet and greet and further settling in at home for up to 48 hours. The service provided a safe and well check, ensured availability of food/shopping and that the home was warm and secure to support recovery and independence and to prevent any re-admissions. The surge and demand for local hospital beds or discharges was not as high and was not required for as long as anticipated and the service was scaled back to usual activity at the end of April.
20. Fortnightly virtual meetings of the Worcestershire Safeguarding Adults Board statutory partners have been convened to provide oversight of safeguarding responses and facilitate information sharing and communication.
21. Operational safeguarding has continued as usual, with staff working at home. The number of safeguarding concerns reported has been variable on a week to week basis, but overall there is no significant difference in the number of reports received. The team has received a high level of calls for advice and support. The Deprivation of Liberty Safeguards Team (DoLS) initially prioritised urgent cases but has now resumed assessment of all high priority cases in line with usual practice.
 - **Protecting Those Who Are More Vulnerable**
22. There are several considerations that make certain population groups more vulnerable to severe disease. This is those who are extremely clinically vulnerable (also termed shielded population), for example those undergoing chemotherapy treatment, having had a solid organ transplant or with severe asthma. The County Council was given a direct instruction from Government to enable this group to shield. They were advised to shield for a period of 12 weeks in the first instance and to not leave their homes. Further there is a clinically vulnerable group which was characterised as those over 70 years of age or with at risk conditions (i.e. eligible for an NHS funded seasonal influenza vaccination).

23. In addition to that the Council planned for prevention and protection for groups who are vulnerable due to their social circumstances, for example those who are homeless. A homeless task force has been set up to bring together all district LA's and key partners in Worcestershire to take a proactive response to the COVID-19 pandemic. Public Health is leading a workstream of this task force ensuring that the requirements outlined in the Homeless Sector Plan, Care & Protect guidance are being met in a pragmatic and practical way that best meets the needs of the homeless population of Worcestershire. Protocols have been developed in conjunction with district housing colleagues which outline key procedures which will help to protect the vulnerable homeless population against COVID-19 infection. A pathway has been developed which outlines a multidisciplinary response to a COVID-19 symptomatic individual which allows them to be isolated safely and receive the ongoing care and support they require during isolation.
24. Partnership working between Public Health, the health and care trust and the CCG is developing easy access routes into health services for the homeless population which will have long term benefits after the threat of COVID-19 has reduced. The homeless taskforce also receives regular updates from other key service areas that work with vulnerable groups such as domestic abuse, the probation service, substance misuse and West Mercia Police.
 - **Protecting and working with our Care Homes**
25. Colleagues from across Public Health, Social Care, CCG and PHE have developed new systems to co-ordinate and facilitate action across the care home system to protect homes and prevent infection. Coordination of this joined-up approach is provided through regular daily operational meetings (Care Home Huddle) and weekly strategic meetings (Care Home Hub).
26. To help deliver this response proactive engagement at least once a week with all care homes in Worcestershire. This engagement provides help and support to prevent transmission of COVID-19 infection and control of local outbreaks. This enables early identification of issues for escalation and information collection to inform local RAG-ratings of care homes.
27. A key feature of the Action Plan relates to developing diagnostic testing capacity for all care home residents and staff. CCG, adult social care and Public Health have been working together to implement a testing programme for our care homes. This includes implementation of testing of both symptomatic and asymptomatic residents and staff in all homes is being targeted in order of prioritisation.
28. Adult Services Commissioners are working in partnership with Commercial and Financial colleagues to ensure appropriate financial support for our care providers, including continued payments to providers of domiciliary care, supported living, extra care and day services, for the duration of the Covid-19 outbreak, even in cases where services cannot be delivered. This is covered further under Commercial and Change and the Chief Executive Directorate commentary.

29. These measures have been taken in order to contribute towards the resilience of the health and social care system in Worcestershire and prevent provider failure. This is essential to ensure that there is sufficient, good quality supply of services in Worcestershire in order that the Council's duties under the Care Act can continue to be met now and moving forward once the Covid-19 outbreak has ended.
30. Additional payments to providers for Covid-19 related cost pressures such as additional staffing costs, increased cost of Personal Protective Equipment etc. These payments took the form of an additional temporary percentage increase to providers, from the beginning of April. The temporary nature of the increase will be reviewed in line with the developing COVID-19 situation. For domiciliary care, supported living, extra care and shared lives providers this increase is an additional 5% on their fee rates. For residential and nursing care providers, the increase is 5% on Band 2 and Band 4 rates respectively.
31. It is likely that some providers will be incurring additional COVID-19 related costs over and above the costs already reimbursed, but this is also likely to vary considerably from provider to provider. A process has been put in place to consider additional reimbursements for providers who apply to the council for further financial assistance. Providers who approach the Council are asked to submit details of the further additional costs which they are incurring. These applications are reviewed by Commissioners and the Head of Finance on a case by case basis and payments made where costs are deemed reasonable and directly related to COVID-19. This is alongside the additional funding which the Council is allocating to providers from the Council's share of the £600m national additional funding to support providers.
32. Where these additional payments relate to clients who have been discharged from hospital or are made to prevent hospital admission, funding is claimed via the CCG, otherwise the payments will be funded by the additional grant being allocated to local authorities.
33. We have also established a single point of contact to deal with all provider queries during the crisis. This is staffed 7 days a week and able to respond to urgent situations. Providers continue to receive updated advice and guidance, working in conjunction with the CCG and Public Health colleagues, for example health and infection control guidance has been circulated in the form of easy-to-use action cards and are now also working closely with Worcestershire CCG to co-ordinate swabbing and testing of provider staff, working flexibly to upscale arrangements in line with national and local health direction and policy
34. In line with advice from the NHS and to ensure prompt discharge from hospital (and to potentially avoid hospital admissions) it was agreed to pre-purchase (block) beds in Residential Care Homes and Nursing Care Homes for Older People for a period of three months from 30 March 2020. Purchasing in this way ensured there was an adequate supply of beds to meet anticipated needs identified for a) minimising hospital admissions for older people, where possible and b) facilitating discharge of older people from hospital to maximise hospital capacity to respond to the COVID-19 pandemic.

35. A new block contract has been commissioned with a home care agency. The block contract will deliver 450 hours of homecare per week in Wyre Forest, Malvern Hills, Worcester City and Bromsgrove for a duration of up to 6 months (initial contract length of 4 months, with an option to extend by a further 2 months for either all or a geographical part of the contract). The contract started during week commencing 20 April 2020.
36. Working closely with the Commercial Team to co-ordinate the distribution of Worcestershire's stocks of PPE. This includes implementing systems for appropriate prioritisation of stocks and working with providers to identify and support their PPE needs, in line with the most up to date infection control guidance.
37. Government recently announced a £600 million financial package of support for Care Home prevention and protection equipment. Worcestershire County Council is due to receive £7.5 million of this in two instalments and 75% of the allocation will be made, also in two instalments, to care homes based on the number of beds per home, and 25% retained to help further management of infection control working locally with our care providers.
 - **Working with the other partners**
38. We have supported the CCGs to roll out iPads to all care homes in Worcestershire and Herefordshire. The capability delivered has enabled online GP consultations and further opportunities are being explored to build on this development.
39. The Commissioning Unit is working actively as part of the newly established "Worcestershire Care Home Hub". The purpose of the Hub is to strategically lead, co-ordinate and facilitate action across the system to support care homes and prevent infection during COVID19. The joint-working aims to reduce the increase in the number of homes experiencing an outbreak and reduce the absolute number of cases and deaths, to pool and adapt resources and capacity to work collectively using a proactive and supportive methodology.
40. Through work with West Midlands ADASS colleagues, we are ensuring that Worcestershire is fully involved in regional data sharing and collaboration, feeding in local information e.g. with regards to market management and provider support as well as ensuring regional and national information is shared and disseminated locally.
41. Analysts across the council and system are working in new ways across WCC public health, Management Intelligence and Research & Digital, Worcestershire Acute Hospitals NHS Trust, Worcestershire Health and Care NHS Trust, NHS Clinical Commissioning Groups, West Mercia Police and the military. The main function of the intelligence group is to produce situation reports to support COVID-19 response planning.
42. Future work includes continuing to track cases and deaths, whilst looking ahead to attempt to predict the types of resources that will be needed in our acute hospitals and system wide over the coming months.

➤ **Public Health**

43. On 19th March, all Public Health commissioned services were provided with written assurance that their contractual payments would continue as scheduled for the existing and following quarter and that services would be given tolerance around their key performance indicators. There were discussions with providers about how they could continue to support service users and link them with other practical support that they may need. This assurance enabled providers to continue to deliver services, including Health Visiting, sexual health and support for carers.
44. Localised Public Health advice and support has been provided within WCC, and to partners and other agencies regarding COVID-19. This advice has interpreted national guidelines and applied to local services and scenarios. Advice has been provided regarding social distancing measures, appropriate Personal Protective Equipment (PPE) and Infection Prevention Control (IPC) advice and guidance for various settings and services. A variety of local guidance, flow charts and training aids have been produced and disseminated.
45. Those staff, who were identified as vulnerable, due to underlying health conditions, have continued to be shielded at home and for those who are employed in face to face services, they have, wherever possible, been re-deployed into front door and social work teams activity to provide telephone and email support to residents, carers, families, providers and social work teams. This approach will be kept under review.
46. A key workstream has focussed on the sensitive issue of management of the deceased and working in a multi-agency environment to ensure that the death to funeral service timeframe is managed effectively. Working through the death's management Bronze Group, working closely with the Ministry of Communities and Local Government (MHCLG), District Councils and Acute NHS Trust colleagues, funeral directors, crematoriums and cemeteries to develop effective response processes and facilities. The work of the EP team, while still assisting with advice and support on the Covid-19 response, is now turning to focus on the approach to Recovery, again through the formalised LRF process, with the WCC CEO chairing the SCG Recovery group. In support of Government requirements, the EP team will contribute to what will be a complex and challenging longer term process to support the local community recovery process, including that of local Government and the wider infrastructure affected by Covid-19. Part of the return to the "new normal" will be to ensure learning at LRF and local level to ensure resilience against future emergencies.
47. The Registrars service commenced the registration of deaths over the telephone and aims to introduce birth registrations and small wedding ceremonies in line with the Government's 3 Step Plan. The majority of the c.250 weddings affected by the pandemic have been rescheduled for late 2020 or 2021 with few cancellations. The team have responded effectively to the increasing demand on death registrations experienced during this time.

➤ **Community and VCS**

48. A community response was rapidly established with a range of partners, including District Council and VCS organisations to support people in need of practical help as well as the collection and co-ordination of offers of help. As part of this Here2Help was launched as “One Worcestershire’s” Community Action response with the sole aim of supporting residents through the Covid-19 pandemic. Here2Help is a campaign as well as a dedicated response service for all residents who ask for help and those individuals and organisations who offer to help. It aims to complement the national programme to support those individuals extremely vulnerable and being the most at risk of becoming severely ill from Covid-19 (our shielded cohort) and the NHS Volunteer Responders initiative.
49. The aim of the Here2Help service is to provide practical information and assistance enabling people to remain safe and well in their own homes. The Here2Help website was launched with online information and advice that followed an evidence-based MIND checklist for health and wellbeing. Individuals can make a request for help and individuals; groups and organisations can also offer help via the Here 2 Help website. www.worcestershire.gov.uk/here2help For those with no internet access, a helpline has been set up 01905 768053.
50. By the end of March 2020, a one contact telephone helpline was established and promoted for Worcestershire’s residents, service users, carers, families and providers. The service is presently open 8am-8pm, 7 days a week, although we are reviewing the need moving forward. This has supported many thousands of people in accessing care and support services, food supplies, medical supplies, as well as linking individuals with local voluntary and community groups for day to day support, information and advice. Mutual aid and NHS Good Sam volunteers are providing additional support where needed.
51. Information regarding requests and offers of support was detailed in the daily updates.
52. Worcestershire Association of Carers have aligned their opening hours and service provision for carers with the 8am-8pm, 7 days a week offer. This is supporting the County’s carers and has resulted in an increased number of carers assessments being undertaken via telephone, over recent weeks. This service enhancement has been funded by the County Council.
53. All libraries were closed on 24 March and an immediate focus was brought to enhancing the on-line offer. The speedy introduction of a Digital Library Hub was established to help Worcestershire residents stay active and connected with their communities. This has brought together a wide range of new and improved digital library resources and services. Libraries staff have been re-deployed to provide telephone and email support to our residents, through the new Here2Help service.
54. We have seen the largest ever increase in on-line library membership and digital book borrowing.

55. Worcestershire's green spaces and countryside centres have remained open and from 13 May have scaled up resources to support the recent Government Announcement in relation to outdoor activity and easing of restrictions. Plans are also being put in place to open take away café services, in County Council run green spaces, in line with Government Social Distancing advice.

➤ **Children's social care and safeguarding**

56. At the beginning of April 2020, Children's Social Care and Safeguarding implemented a Covid 19 protocol to provide clarity for staff, partners, children and families about the most appropriate way to safeguard children during the pandemic. The purpose of the protocol is to deliver required interventions to safeguard, promote welfare and prevent escalation for those "vulnerable children" already open to the service and for those who may be identified as at risk of significant harm in the community. It is also designed to adapt delivery in order to minimise spread of the virus in the community and maximise our staffing capacity for the duration of this pandemic. The main changes to usual service delivery in the Covid19 approach are:

○ **Assessment of risk and monitoring of children's welfare**

57. This is completed through direct visits and keep in touch (KIT) calls. A detailed operational protocol was written to promote quality and assurance in our assessment and our monitoring contacts
58. Children assessed as 'High and immediate risk' and 'priority' receive visits from social workers as part of weekly field work home visiting programmes, whereas others receive contact through KIT calls and technology. These keeping in touch calls are meaningful and used to reassess risk and promote attendance at school, so that the list of children requiring priority visits is regularly updated. Staff carrying out visits have been provided with the appropriate PPE in order to reassure parents and to keep them safe.

○ **Early Help and Social Work resource at Family Front Door (FFD).**

59. These staff resources have been pooled to manage all new incoming contacts and assessments of need and risk and to support in the delivery of Here 2 Help (see later notes).

○ **Face to Face Supervised family time.**

60. This has been suspended and contact for children in care with the family have continued using virtual methods that suit the child's age and understanding.
61. Operational protocols that give staff additional guidance to enable the service to continue work but within the wider limitations of staff capacity and movement restrictions are in place and these relate to: Legal Protocol, Family Time, Visits to Children and Young People and Care Leavers

62. The executive summary for partners and stakeholders of the protocol is available on WCC website and covered by an Executive Officer Decision Notice. It is in line with the DfE guidance about additional flexibilities during the pandemic and clear that our safeguarding, welfare and responsibilities to protect children from significant harm remain in place.
63. The protocol sets out the decision to work in a way to meet statutory duties within the current Covid 19 pandemic. The protocol will be reviewed in August 2020.
64. Additional financial support to in-house foster carers has been provided at the Free School Meal rate of £15 per week for the 6-week spring half term period to contribute to additional costs. There have also been some minimal temporary additional staffing costs to support the service and costs of temporary resource for additional care costs as a result of coronavirus, which are contained within the decision notice.
65. There has not yet been a significant increase in the numbers of children coming into care as a result of the virus. However, plans are in place to reopen a temporarily closed children's home in Worcester to accommodate children if this becomes necessary. This will require additional funding, as referred to in the ROED (see Appendix 2), if required.
66. Work is underway to plan for increased direct work with children and young people to ensure that their plans are appropriately progressed.
67. Families with vulnerable children continue to be actively encouraged to take up their school places as a further protective factor for the children.

➤ **Education**

68. Schools were closed for most children on 20 March 2020. They have however remained open since then for the children of critical workers and vulnerable children, including over the Easter school holiday period. Pupils not in school have been accessing online learning at home in order to continue their education.
69. The following table shows the numbers of pupils attending school in the work commencing 30 March and the figures for week commencing 11 May. This shows an increase in attendance which is particularly important for vulnerable children.

First Week of Lockdown - week commencing 30th March is first full week of data available

	Attending Week Total	Total Pupils for week	% Attending	
All	5646	402000	1.4%	Based on 80,400 children per day
Vulnerable	1009	8755	11.5%	Based on 1751 children per day - liquidlogic data
Critical	4653	30000	15.5%	Based on 6000 children per day - WCF estimate from original school returns

week commencing 11th May

	Attending Week Total	Total Pupils for week	% Attending	
All	10306	402000	2.6%	Based on 80,400 children per day
Vulnerable	2926	9045	32.3%	Based on 1809 children per day - liquidlogic data
Critical	7563	30000	25.2%	Based on 6000 children per day - WCF estimate from original school returns

70. DfE has issued guidance for schools to open further from 1 June 2020. The priority is for reception, year 1 and year 6 pupils initially, with an ambition for all primary, year 10 and year 12 pupils to return a month before the end of the school year. These year groups are designed to support children facing a transition. Worcestershire has a three-tier arrangement in parts of the county and there are other transition points for those children at year 4 and 8 mainly which creates additional complexity. Work and support are ongoing to enable all county schools and settings to respond to the guidance.
71. On 14 May the DfE issued further guidance for primary school opening, starting with reception, year 1 and year 6 pupils. The DfE resisted any change from this for pupils in three tier school arrangements, despite our and local MP representation. Detailed risk assessment work is underway with schools to cover the logistical, capacity, health and safety and staffing arrangements required to support wider opening with effect from the beginning of June. Governing Bodies, Trust Boards and the Local Authority will be involved in the decision making.
72. Transport is a key issue for schools' wider opening and capacity will be affected by the need to apply social distancing measures. There are costs of this that are currently being assessed, although these will depend on the numbers of children returning to school.
- **Special Educational Needs and Disabilities**
73. The DfE made amendments to the SEND legislation in order to relax some of the duties on assessing children for Education, Health and Care Plans (EHCPs) to require 'best endeavours' to be used to meet children's needs. However, the statutory duties remain in place. There are over 4000 children and young people with EHCPs in the county and individual risk assessment is being carried out for each one and risk assessed. For those who are rated at high risk of provision not being reasonable to meet the child's needs, action has been taken to minimise this risk.

- **Early Years**

- 74. Early Years providers have been affected by the virus with approximately 51% of providers closing. This is a challenge in terms of the Council's sufficiency duty for early years' places and work has been undertaken with the sector to provide appropriate financial support where necessary.
- 75. Potential funding requirements for Early Years has been identified in an Executive Officer Decision Notice along with a process to reimburse providers for verified additional costs relating to Covid-19. This is estimated in excess of £500k.
- 76. Childminders are also allowed to return to work and early years providers can charge for their commercial activities.

- **Economy and Infrastructure Directorate**

- **Response Overview**

- 77. Representatives of the Economy & Infrastructure Directorate Leadership Team and Senior Management Team have taken-up active leadership roles as part of the COVID-19 Emergency Response activity. This enabled the countywide response activity to be firmly established with a clear battle rhythm in operation. The Gold and Silver Commander roles have been occupied by the same individuals since the beginning of the emergency response to allow for robust arrangements to be established, ongoing delivery and continuity.
- 78. Staff representatives from across the Directorate have supported specific areas of response activity, e.g. food distribution, supporting businesses, project support.

- **Highways**

- 79. Highways reactive and safety critical works are ongoing and have been throughout the lockdown period, including gulley emptying. All customer enquiries continue to be responded to in the usual way, although direct contact is significantly reduced. This has provided time to catch up with the huge amount of flooding enquiries received.
- 80. The footways programme is being finalised and Members will shortly be notified of works in their area. In June there will be seven gangs on this, increasing to 10 gangs from July through to the end of the financial year. The Surface Dressing programme is now well underway, and Members are receiving weekly updates, in addition to the daily whereabouts (if applicable in their Divisions). There was a short delay in starting this programme, due to the contractor pausing works due to COVID-19, however we are confident that we'll be able to make up any lost time, subject to the usual caveats (weather, machinery etc). We have reviewed the Lengthsman activities during this period in line with Government Guidance to ensure safety when working in the public highway.

81. Grass cutting began on 4 May and the first cut should be finished by mid-June.
82. There are two mini-patching gangs on the ground (one more than usual) and they will be responding to the small permanent patches and small areas of surfacing.
83. Our Streetworks teams are examining utilities' applications, paying particular attention to social distancing rules, ensuring that pedestrians can move about easily. The same applies for our own works (where practicable) and there are additional signs on site to remind people to adhere to the Government advice.
84. Street Lighting works have continued, where possible, throughout the response period, with operatives working alone or where necessary travelling separately. Replacement of larger units involving two operatives working in close proximity has not yet resumed.
85. Development Control experienced a slight downturn during the lockdown in terms of the design-auditing activity, workloads have now returned to pre-lockdown levels. Discussions regarding the re-opening of sites with developers are well underway and the site supervision service has recommenced inspections of live works.

➤ **Major Infrastructure Projects**

86. Following the Lockdown announcement on 23 March 2020, the majority of construction work on Major Infrastructure Projects was temporarily suspended and sites safely closed down. This was due to; supply chain matters, resourcing, being able to socially distance, confidence to be able to safely finish work started.
87. Where possible on-site work continued, including; Worcestershire Parkway – Platform 2 works and snagging, Kidderminster Station – internal / external works and seasonal / critical survey works and inspections. Non-construction work on infrastructure projects has continued throughout the period e.g. design works, business case development, planning development.
88. Further advice was received at the end of April from Transport Minister, Baroness Vere, regarding Highway maintenance and guidance provided from Highways Sector Council. On receipt of this contractors have been working through plans for how to Restart construction works. This has required; establishing new practices regarding social distancing, preparing Risk Assessments and Method Statements, mobilising the supply chain and workforce (some furloughed), re-establishing sites, confirming and agreeing plans.
89. Key work is now underway or planned at most locations including; SLR4, Churchfields, Pinvin, although there are some elements of the supply chain still to remobilise. Communications are carried to support Restart and new work, and this will continue as plans progress. Work continues to finalise plans, however at this stage the impact of COVID-19, in terms of any pause in works and the impact of new ways of working, on programmes and costs is not known.

90. Worcestershire 5G testing has also been temporarily suspended due to flooding and CV19 lockdown preventing final testing of the project that has also impacted on other final reporting deliverables. Consequently, an extension has been agreed with DCMS to end of June. With recent government announcement plans are now being actioned to re-commence testing at MHSP, subject to satisfaction of several factors.

➤ **Transport**

91. Our internal Fleet team has supported a number of specific response activities including:
- Receipt, storage and distribution of 400+ food parcels;
 - Support for delivery of medical supplies;
 - Support for transportation of Waste Collection Operatives for district councils.
92. Transport has continued to be provided for children of key workers; this amounts to 27 mainstream contracts and 74 SEND/Pupil Referral Units (PRUs). Liaison with operators takes place on a weekly basis to identify their capacity regarding vehicles and drivers. The same applies to our in-house fleet to ensure that we always have an up to date, accurate forecast of assets available to undertake service provision.
93. We are working extensively with public transport operators to identify those services that will provide a benefit for commuters e.g. adding additional vehicles on key commuter routes based on the latest DfT Guidance, with a view to increasing services back up to 70%-80% pre Covid-19 levels. To support this, we can confirm that our principal operators in the north and south of the county offer contactless payments, with smaller operators to follow within the next eight weeks. This would mean that 90% of the bus services in Worcestershire would be able to offer contactless payments.
94. We are working with operators to improve public confidence in bus services through, e.g. cleaning regimes, social distancing and better information. There will also be additional signage at bus stops to highlight social distancing. We will also be using our infrastructure, Real Time Information points and other information points, to disseminate messages to the public regarding social distancing.
95. A COVID-19 Bus Services Support Grant of £336k has been received from the DfT. This is to support services through this challenging period. We have also been granted early access to funding for supported bus services of £468K. Whilst these might at first seem like considerable sums, they are to deal with the immediate issue and short/medium term issues to support the bus industry, based on the dramatic downturn and likely slow recovery.

96. In March, we took the decision to maintain 100% of the contract payment for operators and maintain the levels of concessionary and Severn card reimbursements. This was to protect the economy based on our evidence that the operator market is fragile; we know that there are parts of the county which have poor commerciality and a reducing number of operators. We are in regular liaison with operators and, in line with national trends, patronage has reduced by circa 90% on public transport. There are, however, slow signs of recovery, which have been assisted by our financial support and funding from DfT for the bus industry on a national basis.

➤ **Waste**

97. The Waste Management Service has continued to operate throughout the response period with the key waste facilities of EnviroSort, EnviRecover and the Landfill site remaining fully operational. Throughout the period there has been regular dialogue with the Waste Collection Authorities in Worcestershire, including discussion and facilitation of contacts regarding support to maintain collection rounds.
98. Immediately prior to the “lockdown” announced on 23 March, Worcestershire Household Recycling Centres (HRCs) experienced their busiest weekend of the year, with usage similar to that of an Easter weekend. Following the introduction of the “lockdown”, all HRCs in Worcestershire were then closed reflecting the overall position of “Stay at Home” other than for food, health or work reasons.
99. On 7 April 2020, the Government published ‘Coronavirus (COVID-19): advice to local authorities on prioritising waste collections’. This *‘non-statutory guidance’* included some details relevant to HRCs. Having considered both the Regulations regarding travel and the non-statutory guidance relating to waste collections the conclusion was that the Regulations take precedence and therefore the HRC’s should remain closed, as under the Regulations residents are not permitted to travel to them to dispose of their waste. This also recognised the local Waste Collection Authorities in Worcestershire were maintaining their recycling and residual waste collections. Where they were running the service, some were seeing a fall in requests for bulky waste collections and were maintaining their garden waste collection services where it was possible to do so (depends on resourcing).
100. In relation to incidents of fly tipping, none of the local Borough, City or District Councils in Worcestershire advised of any significant increases beyond that normally experienced at this time of year.
101. In April Defra reviewed the “non-statutory guidance” and in advance of receipt of that the Waste Service team worked with the Council’s contractor and partners to consider what matters, circumstances and considerations could enable the reopening of HRCs.

102. Preparations assumed that the 'lockdown' was to be lifted in some form and with social distancing remaining in place. Arrangements included:
- Opening hours would be as normal.
 - A reduced number of HRCs open to enable sufficient staff to provide the extra resourcing required to open and operate the sites safely.
 - Only a limited number of residents would be allowed on site at any one time with a 'supermarket style' system would be implemented, with a 'one out, one in' access policy.
 - No assistance would be provided on site.
 - The deposit of some materials may not be possible if the re-processor is unavailable as a result of the COVID-19 outbreak.
103. On 7 May 2020 Worcestershire County Council confirmed plans to open 7 of the 11 Household Recycling Centres in Worcestershire as of Monday 11 May 2020. This recognised the need for higher levels of resourcing in order to operate the sites safely in line with the new social distancing requirements. The sites currently open are:
- Bromsgrove (Quantry Lane)
 - Malvern (Newlands)
 - Pershore (Hill & Moor)
 - Redditch (Crossgates)
 - Stourport (Bonemill)
 - Tenbury (*please note this is part time – normal hours apply*)
 - Worcester (Bilford Road)
104. Communications were carried out, including social media, to inform residents of the plans and the restrictions.
105. Work was undertaken with Highways and the Police to consider the impact of the centres and queuing on the Highway. Various traffic management arrangements were introduced.
106. The HRCs opened as planned as of 11 May 2020. Arrangements and traffic management have been adjusted as required recognising the very high numbers of people using the facilities.
107. The arrangements continue to be reviewed and plans are being finalised regarding the opening of some additional HRCs following the May bank holiday, details and timings to be confirmed. The costs associated with the impact of COVID-19 are being considered.
108. We continue to communicate regarding the HRCs and remind residents of the need to check the website for full details of the social distancing measures, opening times and other restrictions before they visit the HRC.

➤ **Management of the deceased**

109. A working group has been in place for some time to provide plans in relation to mass fatalities (major single incident) or an increase in the number of deaths which exceeds normal capacity (flu pandemic etc). The group is multi-agency including; all first responders, district councils, faith groups and funeral directors and is co-ordinated and chaired by the county council.
110. The group, working at bronze level, has been providing an operational approach and recommendations in terms of the management of the actual and forecast increased number of deaths within the County. Through the COVID-19 Response arrangements the group has worked with military colleagues to secure additional mortuary capacity via MHCLG. Information regarding deaths, funerals, capacity, plans etc has been critical to determine appropriate actions regarding the securing of local temporary mortuary capacity and management of funerals. It is acknowledged this is a very sensitive subject and work continues with partners and funeral directors to ensure the position is carefully monitored.

➤ **Commercial and Change and Chief Executive's Directorate**

➤ **Management of our land and buildings**

111. Gold Command confirmed closure arrangements for key buildings on 24 March and the Council's Property Team began to work with key providers particularly Place Partnership Limited (PPL) to manage the initial closure arrangements and ongoing management of closed and partially closed buildings. Staff and other users of the buildings were advised of building closures.
112. Our buildings are an important asset for the council and the Property team have been co-ordinating the security, maintenance, safety and recovery plans for all of our buildings throughout this period.
113. The property team together with colleagues across the Council and supply partners have from the outset considered and begun preparation for arrangements post the current lockdown arrangements. They are currently reviewing Government and industry guidance and engaging with various bodies to ensure that re-opening complies with requirements in unlock phases and the safety of our workforce and the public is a key priority.
114. A number of actions are already being undertaken (e.g. 'sneeze screens installed at County Hall reception and registrars) or planned for (e.g. sanitiser dispensers ordered, signs etc).
115. Offices across the County will face different challenges and need varying solutions to comply with the Government guidance. Offices will be risk assessed with certificates displayed to say they comply with Covid19 Secure Guidance. Complying with the 2m social distancing around use of workstations, County Hall could accommodate circa 150 staff.

116. The default position remains the same that staff continue to work from home where they can. As such assessing needs and providing equipment for people to work at home safely and effectively in the longer term is being developed with HR, IT and Property
117. The Property Team have also helped facilitate the use of the land at Sixways it leases from the Worcester Warriors for use as the Worcester COVID19 testing site working with all the stakeholders who have an interest in the site, Worcester City, Worcester Warriors, Ringway, NHS Acute Hospital Trust to release the land for this use.
118. The Council is also supporting the NHS Acute Hospital Trust (Worcester Royal) by providing the use of the top car park at County hall for use by its staff whilst they are unable to use the Sixways park and ride facility and there is increasing demand on their facilities. This is subject to review as the Council actions its recovery plans in due course.

➤ **Procurement**

119. The Council's Procurement Team has undertaken several critical activities including:
 - Establishing a PPE centre at the community equipment site, to source, stock and distribute PPE items & hand sanitiser to care homes, domiciliary care providers, personal care assistants, hospices, GPs, dentists, funeral directors, district councils and schools.
 - Creating a food preparation and distribution hub at County Hall to deliver food boxes to individuals in crisis and catering packs to street kitchens and food banks
 - Arranging alternative temporary accommodation for hospital discharge, rough sleepers and homeless
 - Agreeing 'block' contracts for additional care home beds and domiciliary care support for hospital discharge
 - Supporting the Commissioning and Finance teams with assessing care provider claims for additional costs
 - Changing invoice and payment processes to provide quicker payments to support businesses cashflow
 - Creating a financial risk assessment model to monitor the sustainability of the current supply base.
- **Purchase and distribution of PPE**
120. Public Health England issued new guidance on the use of PPE following the outbreak of COVID-19. As a result, demand for these items dramatically increased placing unprecedented demand on the existing UK stock and distribution network.

121. There has been an urgent need for the Council to step into the normal supply arrangements and secure items from other sources to ensure that care services and other key worker activities can safely continue.
122. In addition, central government has provided some PPE items for distribution via the Local Resilience Forum which the Council has taken responsibility for.
123. The items that have been purchased and distributed are face masks, medical gloves, aprons, body bags, hand sanitiser, thermometers and eye protection. An online request system for providers has been implemented and deliveries are done either same day or next day. There is also an 'out of hours' emergency delivery process.
124. Over 375,000 items have been distributed in the last 4 weeks. Orders have been placed for a further over 500,000 items with efforts continuing to source another 500,000 before the end of June 2020 to meet the expected demand. Sourcing of products is a whole region effort of 14 local authorities in the West Midlands and surrounding area coming together to place bulk orders.
125. The Procurement Team have also been working in partnership with the Community Equipment store where storage and distribution is being done with NHS delivery drivers. Where items are for primary care or require specialist support, e.g. training, the team are working jointly with Hereford and Worcester CCG.
 - **Food boxes and Street Kitchens**
126. Food parcels are also being distributed to individuals in crisis daily with requests being handled by our Public Health Colleagues on the Here2 Help Helpline. The requests are forwarded to the Procurement Team who then work in partnership with the Servest County Hall café staff to fulfil these. The café has been turned temporarily into an efficient food pick and pack centre.
127. The food boxes for individuals are procured from City of Wolverhampton Council who has established a production line with its local wholesalers. The boxes are collected and delivered by the Council's Community Transport team. The boxes contain enough food for 48 hours and can be delivered the same day.
128. The Street Kitchens and food banks are provided with a nutritious fresh combination of foodstuffs that Servest have developed. These are boxed up for voluntary organisations who either deliver or cook for people who are homeless or living in hostels. County Enterprises then undertake deliveries. To date 1,516 individuals have been provided with food across the County.
 - **Alternative temporary accommodation for hospital discharge and homeless**
129. As noted under the People Directorate feedback the Procurement Team has assisted in sourcing and securing additional capacity for discharge and rough sleepers as and when required. A 'call for help' was put out to local businesses and offers of over 400 rooms were received. 100 rooms were secured at two facilities under local and national contracts and the Procurement team worked with Adult Social Care team and hotel staff to ensure that the right arrangements

were in place and that PPE, waste disposal etc was in place. This accommodation is in place until at least the end of June 2020 as a contingency should future outbreaks in care homes occur and homes must close to new admissions. There may still be a requirement for a place for people to self-isolate when discharged from hospital and live with someone vulnerable.

130. The Procurement team has been working Public Health and District Council housing teams to secure accommodation for people who are homeless or rough sleeping. This is a complex issue to resolve and the places that will offer accommodation is very limited. Thirty-five rooms have been secured at the Fownes Hotel in Worcester and the Procurement team have supported seeking offers from hotels in other parts of the County. The accommodation needs to be supported with security and food provision that the team has worked on jointly with stakeholders.

➤ **Finance and Procurement supporting providers**

131. Several providers have contacted the Council claiming additional costs due to either staff absence through Covid19 related sickness, unable to undertake services due to resident sickness or increased operating costs e.g. PPE. The Procurement team worked with the Finance and Adult Social Care Commissioning teams to develop an approach to assessing claims for additional costs and how those costs can be recorded on an 'open book' transparent basis
132. At the start of the outbreak the Procurement and Finance teams agreed that all suppliers would be moved to immediate payment terms to assist businesses with cashflow during the lockdown period. The process for raising purchase orders and making same day payments to supplier (in particular for PPE) has been developed and agreed with the Finance team.
133. The Procurement team has started a process of assessing the risk of failure of key providers and suppliers. There are 911 with whom the Council spends more than £25k a year with, approximately 150 are care homes.
134. The Council's Insurance Team is presently working with schools and insurers to reclaim and repay monies for school trips and events. This matter is complicated as not all schools have taken out the Council's insurance. However, despite this the Council is supporting all schools in disputes and claims.

➤ **IT**

135. Our IT systems in normal times provide essential services to allow council business to be carried out for staff, residents and with our partners. With limited occupancy of our office facilities supporting remote working has been essential as has the development of new applications or solutions for specific pandemic responses.
136. All remote working systems have performed well supporting the vast majority of WCC staff to work remotely. Outages remain unusual even given the increased usage of our systems as highlighted here:
- 2900 Users on VPN - Peak number Connected simultaneously to our VPN

- 50% - 60% Internet Circuit – Average daily bandwidth usage of Internet Circuit
 - 1000+ Video Calls – Average number of video calls per week (increase from average of 30 per week prior to Covid-19)
137. Several specific applications have been developed to respond to various aspects of the Covid19 pandemic as shown here.
- Here2Help Website & App
 - Volunteer Redeployment App
 - Absence from Work due to Covid-19 App
 - Existing Medical Condition Declaration App
 - Previous Care Experience App
 - Covid-19 Testing App
 - Covid-19 Test Result App
 - PPE Request Form App
138. A number of specific solutions have been developed to respond to various aspects of the Covid19 pandemic as shown here.
- Desktop Background Rollout
 - Telephony Contact Centre Changes
 - Adults Access Contact Centre
 - Here2Help Contact Centre
 - Gov Notify to Text/Send Letters to residents
 - Provision of Zoom accounts for internal/external video calls
 - 25 Scanners provided to Registration Services
 - 100+ additional laptop devices provided
139. Several other business support activities have been taken to respond to various aspects of the Covid19 pandemic as shown here.
- Shielded Cohort Data - Analysis of Shielded Data against Social Care Data
 - Digital Devices for Vulnerable Children - Co-ordination of procurement & distribution
 - Staff Moves - Moving Discharge Team from Aconbury House to Skye Building at WRH
 - Out of Hours support – Extended to cover a wider range of issues
 - Online Council Meetings - Preparation for public Council meetings being held online via Zoom.
140. Despite the current situation the IT & Digital Service have been able to continue to deliver a number of key BAU activities:
- Internet Circuit Maintenance – Resilient Internet Circuit now installed in Wildwood
 - Liquid Logic - Post Go live Liquid Logic Upgrade & CPIS (Child Protection Information System) implementation
 - Civica Contact Centre – Transfer of the service back to WCC completed on 1st April.

- Babcock insourcing – IT & Digital elements of the project have been progressed and are on track for 1st June go live.
- Digital Worcestershire Website - www.worcestershire.gov.uk/digital - The site showcases the digital work we are delivering as a Council and will also provide digital resources for residents and businesses to help with digital inclusion.

HR, OD and Engagement

141. To date HR, OD and Engagement have undertaken several different Covid specific activities as part of the Council's Covid19 response including:
- a) Measures to protect and support our vulnerable and at-risk employees
 - b) Identification of key workers (c.1000) and implementation a process to ensure these staff can carry out their duties
 - c) Design and implementation of a voluntary redeployment process with districts/city
 - d) Worked with Deloitte to set up and co-ordinate all testing for non-NHS staff for multiple organisations including Police, Fire, Districts, Schools and care homes
 - e) Flexibility of policy provision to ensure workforce effectiveness during Covid
 - f) Continued Trade Union engagement throughout
 - g) Developed and implemented fast track onboarding and induction training for care staff
 - h) Specialist training and care home support
 - i) Workforce resilience course designed and launched – large uptake
 - j) Consumer relations
 - k) Regular staff communication and engagement
 - l) Stakeholder engagement across multiple organisations
 - m) Response to large increase in media interest (300% increase)
 - n) Social media response / awareness
142. At the onset of the coronavirus pandemic, HR, OD and Engagement designed and issued a medical disclosure survey for all WCC and WCF employees. This enabled us to ensure those who were most at risk could be effectively supported during this time. This activity identified 792 employees who have been written to and advised to work from home with immediate effect. If people have been unable to undertake their normal duties, we have worked with their line manager, and sought alternative deployment during this time, an example of this would be a frontline care worker, joining the Access Centre or Here2Help call centre.
143. HR, OD and Engagement have worked to identify 1,200 essential workers who were required to travel during lockdown. The team led on the design and distribution of key worker letters for each person and posted to their home address. This has meant they can travel to undertake essential activities such as safeguarding visits and personal care calls.

144. At the start of the Covid19 outbreak it was anticipated that we would see significant capacity issues for both County and District, frontline services. HR, OD and Engagement led the design, implementation and management of a voluntary redeployment scheme, liaising with partners from districts, WCF and WCC.
145. HR, OD and Engagement have led the employer referral testing route at Worcester Warriors Sixways, for those public sector (non-NHS) staff in Worcestershire who are eligible for testing, this includes but is not limited to West Mercia Police, Hereford and Worcester Fire Service, District Councils and schools.
146. The process designed and implemented is in the majority automated, fast, clearly defined and accessible. We have worked with the national testing team to ensure we have access to priority testing, and all employees who have requested a test and meet eligibility have been tested within 48 hours, the majority within 24 hours. This to date has resulted in c.700 employees who have been tested.
147. To date, there has been a need to review several HR policies and processes with a view to reducing the pressure and on all managers and employees. An example of this would be the review of the managing attendance policy, with the temporary suspension of elements of the process, this has elevated pressure on managers, freeing time up for them to focus on the Covid19 response and ensuring minimal impact on frontline services.
148. There have been fortnightly update sessions with all trade unions including school representatives. Close collaboration has enabled us to move at pace and ensure swift resolutions. It has built on our established and positive relationship with the unions, which has been invaluable at this uncertain time.
149. To ensure there is resilience in frontline provision, HR, OD and Engagement have run a bespoke campaign for care staff, created a fast track onboarding process and have designed and implemented a fast track induction programme. To date there have been 66 applications, 33 people have been offered relief contracts. 18 have started in their new roles, and 15 are still in process. 29 people have attended the fast track induction course which is open to new starters and people who have redeployed into frontline care roles.
150. Seven people within Learning and Development Team will be delivering the PPE training to nursing/care homes across Worcestershire from week commencing 11 May. They will attend specialist training, which will cover:
 - a) infection prevention and control,
 - b) application, correct use, removal and disposal of PPE
 - c) how to carry out swab testing safely
151. These staff will liaise directly with the care homes and arrange to go in and train the trainer or nominated champion within each home and carry out regular follow up checks and support until a vaccine is available.

152. Staff updates have been sent out every working day throughout the crisis. All staff x-mails have been issued on behalf of Paul Robinson, Richard Taylor, Kathryn Cobain, Elaine Carolan, Michael Hudson and Catherine Driscoll. More staff members than ever before dialled into the Staff Briefing which have been delivered online. To showcase the Council's response to coronavirus we have launched a series of videos under the theme of Our Story. This will become a video record of the council's response to the pandemic.
153. There has been a 300% increase in the number of media calls that we have been receiving daily during the crisis. Interest has come in from local, regional and national media outlets. 82% of the media releases that we have issued since the beginning of the lockdown have been issued proactively.
154. Our social media following has increased significantly during the lockdown across all our channels. On average we have been posting between 8 and 10 social media posts each day (including weekends) on each channel.

Legal Implications

155. The Council has responded to the national emergency in accordance with the Civil Contingencies Act 2004, including participating in the Local Resilience Forum and working as 'One Worcestershire' with the District Councils to support residents and continue to provide services.
156. As reported to the Cabinet meeting on 26 March, the Coronavirus Act 2020 had just received Royal Assent. This changed requirements for certain service delivery and enabled changes to be made to current policy approaches, with a potential impact on finances. Various aspects of the Act have been implemented through Regulations and guidance has also been issued. Cabinet in March authorised officers to take appropriate action in relation to the coronavirus pandemic, including authorising expenditure and making temporary changes to Council policies arising from the Act, associated legislation, national guidelines and Government directions.
157. With the rapid development of the virus and the Council's response, notice of these decisions in March could not be given on the Cabinet Forward Plan, and it was not possible to convene a meeting of the Council to agree to the changes to the budget and policy framework. In accordance with constitutional requirements, the Chairman of the Overview and Scrutiny Performance Board was consulted and agreed to these decisions being taken as urgent. Cabinet is required to report to Council on the reasons for acting outside the policy and budget framework and the information presented here forms the basis for that report to the July Council meeting.

158. Officer decisions have been reported on the Council's website and include provision of PPE, Here2Help, development of the Adult Social Care Access Centre and purchase of care. Full details are set out in Appendix 2, and at the following link:

http://www.worcestershire.gov.uk/downloads/download/1403/officer_executive_decision_making_-_record_of_officer_executive_decisions_2020

Financial Implications

159. Government has issued two grants to local authorities both totalling £1.6 billion. From this the County Council has received £25.5 million in allocation to contribute towards its cost of response and recovery to COVID-19.
160. In addition, the Council is working with the CCG and NHS England to recover additional costs in ensuring prompt and safe discharges from hospital to enable effective care and treatment through the whole system. Our working understanding is that all such costs will be funded 100% from the NHS £1.3 billion allocation. To date we have claimed and receipted just over £0.8 million from this fund.
161. To date the Council anticipates to spend at least £15 million of that by the end of the first quarter and more thereafter. As such the full extent of the additional grant is expected to be spent by the end of the second quarter. The s151 Officer with his peers is liaising with MHCLG and the County Council Network (CCN), regarding our future need. At this stage that is very hard to predict, and we will continue to model and work with Government over our future need, including the impact on our Council Tax and Business Rates income / bases. This will be reported to Cabinet throughout 2020/21.
162. In addition, £600 million funding was made available for Care Homes and processed via Councils under Government guidelines. The Council received £7.5 million, of which 75% will be directly distributed to all care homes in the County on a per beds basis. The remain 25% will be distributed in consultation with Public Health to support infection control and protection measures required and determined locally.

Risk Implications

163. A risk register has been maintained by Silver throughout the process and reviewed, with any escalation to Gold as appropriate.

Joint Equality, Public Health, Data Protection and Sustainability Impact Assessments

164. The response and recovery is being led with the Director of Public Health playing a key role in both the Council's Gold governance arrangements and the LRF engagement. Full assessments of risk and actions are being carried out on a daily basis and further information has been included within the body of this report.

Supporting Information

- Appendix 1 – Governance structure
- Appendix 2 – Record of Officer Executive Decisions

Contact Points

County Council Contact Points

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Specific Contact Points for this report

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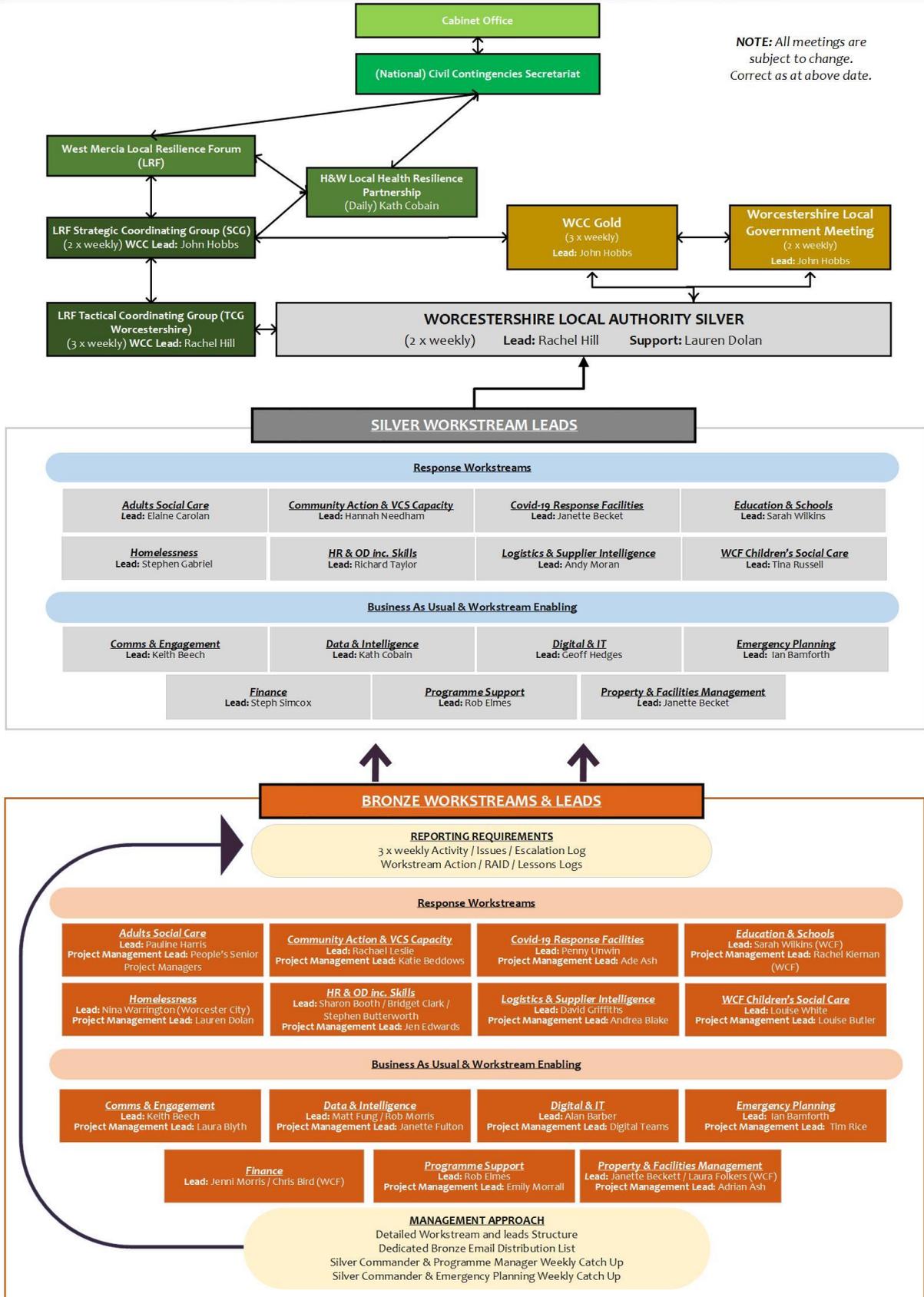
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Background Papers

In the opinion of the proper officer (in this case the Chief Executive) there are no other background papers

APPENDIX 1: COVID-19 RESPONSE STRUCTURE

COVID-19 Programme Structure (HIGH LEVEL ONLY) v0.15 01 May 2020



Record of Executive Decisions

- A. Accommodation to house hospital discharge patients
[http://www.worcestershire.gov.uk/downloads/file/12491/accommodation_to_house_hospital_discharge_patients - 25 march 2020](http://www.worcestershire.gov.uk/downloads/file/12491/accommodation_to_house_hospital_discharge_patients_-_25_march_2020)
- B. Additional payments to commissioned providers of adult social care
[http://www.worcestershire.gov.uk/downloads/file/12485/additional_payments_to commissioned providers of adult social care - 1 april 2020](http://www.worcestershire.gov.uk/downloads/file/12485/additional_payments_to_commissioned_providers_of_adult_social_care_-_1_april_2020)
- C. Allocation of DfT Covid-19 bus services support grant
[http://www.worcestershire.gov.uk/downloads/file/12517/allocation_of_dft covid-19 bus services support grant - 23 april 2020](http://www.worcestershire.gov.uk/downloads/file/12517/allocation_of_dft_covid-19_bus_services_support_grant_-_23_april_2020)
- D. Covid-19 emergency service delivery for social care safeguarding services
[http://www.worcestershire.gov.uk/downloads/file/12400/covid_19 emergency service delivery for social care safeguarding services - 6 april 2020](http://www.worcestershire.gov.uk/downloads/file/12400/covid_19_emergency_service_delivery_for_social_care_safeguarding_services_-_6_april_2020)
- E. Extension of the hours and role of the adult services access centre
[http://www.worcestershire.gov.uk/downloads/file/12490/extension_of_the_hours_and role of the adult services access centre - 24 march 2020](http://www.worcestershire.gov.uk/downloads/file/12490/extension_of_the_hours_and_role_of_the_adult_services_access_centre_-_24_march_2020)
- F. Here2Help
[http://www.worcestershire.gov.uk/downloads/file/12487/here2help - 27 march 2020](http://www.worcestershire.gov.uk/downloads/file/12487/here2help_-_27_march_2020)
- G. Offer of rental support for County Council tenants
[http://www.worcestershire.gov.uk/downloads/file/12493/offer_of_rental_support_for county council tenants - 24 april 2020](http://www.worcestershire.gov.uk/downloads/file/12493/offer_of_rental_support_for_county_council_tenants_-_24_april_2020)
- H. Personal protective equipment and hand sanitiser
[http://www.worcestershire.gov.uk/downloads/file/12492/personal_protective_equipment and hand sanitiser - 19 march 2020](http://www.worcestershire.gov.uk/downloads/file/12492/personal_protective_equipment_and_hand_sanitiser_-_19_march_2020)
- I. Pre purchase of care home beds for older people
[http://www.worcestershire.gov.uk/downloads/file/12488/pre_purchase_of_care_home beds for older people - 25 march 2020](http://www.worcestershire.gov.uk/downloads/file/12488/pre_purchase_of_care_home_beds_for_older_people_-_25_march_2020)
- J. Purchasing care above care and support plans
[http://www.worcestershire.gov.uk/downloads/file/12484/purchasing_care_above_care and support plans - 19 march 2020](http://www.worcestershire.gov.uk/downloads/file/12484/purchasing_care_above_care_and_support_plans_-_19_march_2020)

K. Purchase of domiciliary care

[http://www.worcestershire.gov.uk/downloads/file/12489/purchase_of_domiciliary_care -
_20 april 2020](http://www.worcestershire.gov.uk/downloads/file/12489/purchase_of_domiciliary_care_-_20_april_2020)

L. Additional expenditure recorded as part of the Council's response to Covid-19 – children's services

[http://www.worcestershire.gov.uk/downloads/file/12523/the_record_of_additional_expen
diture incurred as part of the councils response to the covid-19 virus -
_15 and 19 april 2020](http://www.worcestershire.gov.uk/downloads/file/12523/the_record_of_additional_expenditure_incurred_as_part_of_the_councils_response_to_the_covid-19_virus_-_15_and_19_april_2020)

OVERVIEW AND SCRUTINY PERFORMANCE BOARD 22 JUNE 2020

DRAFT SCRUTINY REPORT: CARE WORK AS A CAREER

Summary

1. The Overview and Scrutiny Performance Board (OSPB) is asked to consider and approve the attached draft scrutiny report on Care Work as a Career.

Background

2. At its meeting on [14 February 2019](#), the Council agreed the following Motion:

"Council acknowledges and respects the 15,000 Worcestershire residents who work in the care industry. Many more residents are dependent upon their care. Council asks the Cabinet Member Responsible to consider ways in which their work can be celebrated and encouraged and how more people can consider care work as a viable career option."

3. The Cabinet Member with Responsibility (CMR) for Adult Social Care suggested a Scrutiny Task Group be established with the Terms of Reference set out below. The Overview and Scrutiny Performance Board (OSPB) agreed at its meeting on [28 March 2019](#) that a Scrutiny Task Group would be set up to scrutinise this issue, led by Councillor Liz Tucker. The Scrutiny Task Group commenced its work in October 2019.

Terms of Reference

4. The terms of reference for the Scrutiny were to investigate:
 - How the Council can promote and develop care work as a career
 - How the existing care workforce can be better supported and celebrated

Update report

5. Members will recall that an update report was considered by OSPB on 29 January 2020, a meeting which was attended by the Leader of the Council. Owing to the timings of the Council's budgetary process, the Task Group had wished to make two recommendations for consideration in advance of its final report. The recommendations concerned resources being identified for the promotion of the care worker role and for an Apprenticeship Programme. The Task Group had suggested that if the Board was content with the recommendations, they should be presented to Cabinet on 30 January 2020 as part of the OSPB's Budget Scrutiny proposals and comments.

6. At the meeting, the Leader thanked the Task Group's Lead Member for highlighting the recommendations and confirmed that he was supportive of their sentiment and, if accepted by the Cabinet Member, given that the financial amounts involved were not significant enough to affect the budget policy, they could be dealt with in-year. In light of this, there was no requirement for the Task Group's proposals to be included in the OSPB's Budget Scrutiny proposals to Cabinet.

7. Since January, the Task Group has concluded its work. However, the situation in relation to COVID-19, has meant a delay in being able to present the report to OSPB for consideration. A final draft report has now been produced and is attached as Appendix 1.

OSPB's Role

8. One of OSPB's roles is to monitor the quality of scrutinies that are carried out to ensure that scrutiny reports are robust and evidence based, and that they follow the terms of reference agreed by the OSPB.

9. To help with this, the Task Group's lead has provided the OSPB with regular verbal updates on the progress of the scrutiny.

Next Steps

10. Once the Board is content, the Scrutiny Report will be considered by Cabinet at its meeting on 25 June 2020.

Purpose of the Meeting

11. The OSPB is now invited to consider, comment on and approve the attached Scrutiny Report.

Supporting Information

Appendix 1- Draft Scrutiny Report: Care Work as a Career

Contact Points

Alyson Grice and Samantha Morris, Overview and Scrutiny Officers, 01905 844962/844963, scrutiny@worcestershire.gov.uk

Background Papers

In the opinion of the proper officer (in this case the Democratic Governance and Scrutiny Manager (Interim Monitoring Officer) the following are the background papers relating to the subject matter of this report:

- Agenda and minutes of the OSPB meetings on 28 March 2019 and 29 January 2020 – available [here](#).

[All agendas and minutes are available on the Council's website here.](#)

Scrutiny Report

Care Work as a Career

March 2020

www.worcestershire.gov.uk

Scrutiny Task Group Membership

Liz Tucker
(Lead Member of
the Task Group)



Tom Baker-Price



Charlie Hotham



Peter McDonald



Richard Morris



Officer Support

Samantha Morris, Scrutiny Co-ordinator and Alison Spall, Overview and Scrutiny Officer.

Further copies of this report are available from:

Email: scrutiny@worcestershire.gov.uk

Website: www.worcestershire.gov.uk/scrutiny

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draft

Foreword

The world has changed since our Task Group reached the end of its five-month scrutiny review as to how the Council could promote and improve recruitment and career prospects for front-line care workers and better support and celebrate the current care workforce. The intimate personal service and support that they give to vulnerable individuals did not appear to be widely valued by members of the public. Clear career pathways and training opportunities to enable them to progress were limited and rewards and recognition were low.

Our report was completed just before the Covid-19 pandemic turned our whole world upside down, shining a spotlight onto the NHS and the social care sector. The commitment, determination and fortitude that these employees have shown carrying out their duties has led to the whole nation pouring out its gratitude and respect. We recognise that the vital role that care workers carry out has been brought to the fore in a way which none of us could ever have predicted, however, we also feel that it makes our findings even more important and relevant. Surely, this is an ideal time to enhance the career prospects for our front-line care workers and to ensure that the value and potential job satisfaction of their day to day work is embedded within the public's understanding.

The Task Group recognised that budget constraints meant it would be more productive to concentrate our efforts on where we could best make a difference rather than spend much time working up recommendations on pay and job evaluation criteria. The low pay is clearly an important cause of recruitment and esteem problems; however, care workers spoke warmly of the rewarding relationships they formed supporting their clients and our recommendations concentrate on other ways of increasing the attractiveness of this type of work as a fulfilling career.

I would like to thank my fellow members of the Care Work as a Career Task Group, each one of us brought a different and valuable perspective to our subject. I would also like to thank the Scrutiny Officers, Samantha Morris and Alison Spall, who have worked so hard to help us establish contacts, stick to the core subject and ensure our recommendations are properly grounded in evidence. I thank all the people we met, from within the Council and the wider care sector, who gave up their time to meet with us and explain the reality and challenges from their own perspective. Lastly, I thank the then Interim Strategic Director of People and the Cabinet Member with Responsibility for Adult Social Care for their availability, generosity of time, and help in clearing up any misunderstandings throughout the exercise.

Councillor Liz Tucker

Lead Member of the Care Work as a Career Scrutiny Task Group

Care Work as a Career

Background and Purpose of the Scrutiny

1. At its meeting on [14 February 2019](#), the Council agreed the following Motion:
"Council acknowledges and respects the 15,000 Worcestershire residents who work in the care industry. Many more residents are dependent upon their care. Council asks the Cabinet Member Responsible to consider ways in which their work can be celebrated and encouraged and how more people can consider care work as a viable career option."
2. The Cabinet Member with Responsibility (CMR) for Adult Social Care suggested a Scrutiny Task Group be established with the Terms of Reference set out below. The Overview and Scrutiny Performance Board (OSPB) agreed at its meeting on [28 March 2019](#) that a Scrutiny Task Group would be set up to scrutinise this issue, led by Councillor Liz Tucker. The Scrutiny Task Group commenced its work in October 2019.

Terms of Reference

3. The terms of reference for the Scrutiny were to investigate:
 - How the Council can promote and develop care work as a career
 - How the existing care workforce can be better supported and celebrated
4. The Scope of the Scrutiny is detailed at Appendix 1.

The Task Group's approach

5. Evidence has been gathered from a variety of sources, including Officers of Worcestershire County Council (the Council), the CMR for Adult Social Care, the owner of a company providing Residential Care Homes, the Managing Director and Caregiver from an agency providing domiciliary care, Unison Representatives and the Locality Manager (Midlands) from Skills for Care (SFC).
6. Visits by the Task Group were also made to Kidderminster College to find about their social care courses and apprenticeships and their interactions with the Council and also to Shropshire Council, to look at the Bridge Project in Shrewsbury and to learn about Shropshire Partners in Care (SPIC).
7. A full schedule of the Task Group's activity is listed in Appendix 2.
8. Prior to the completion of the Task Group's work, due to the timings of the Budget Scrutiny process, an update report from the Task Group was presented by the Lead Member to the OSPB on 29 January 2020. The Report recommended consideration of a publicity campaign to promote the Care Worker role. It also recommended development of a structured route for Care Worker apprentices to flow into adult social care (*see Recommendations 1 and 6*). At the meeting, the Leader of the Council confirmed that if these recommendations were accepted as a way forward by the CMR

(as part of the Task Group's final report), given the financial amounts involved, they could be dealt with in-year.

9. In drawing up its recommendations, the Task Group has been mindful of what the Council can realistically achieve, given budget constraints and its remit. **Accordingly, the issue of Care Workers' salaries was not considered in detail.**
10. Since the completion of the Task Group's work, the Covid 19 pandemic has clearly had a colossal impact on the social care sector and individual care workers in particular, with the critical role that they are carrying out. The Lead Member's Foreword draws attention to the fact that the evidence contained in this report refers to the situation in social care in late 2019, prior to Covid 19. As a result of the pandemic there are clearly new and pressing priorities for the sector, but at the heart of this will be the importance of supporting and promoting care workers, which was, of course, the focus of the Task Group's work

Recommendations

Promotion of the Care Worker role

Recommendation 1: The Task Group recommends that resources be identified to prioritise a publicity campaign aimed at promoting the work of Care Workers and increasing public understanding of the crucial role they carry out.

11. The Task Group felt there should be a specific publicity campaign to raise the profile of the profession and provide insight into the role that Care Workers carry out. With greater public understanding, it is anticipated that the profile and respect for the Care Worker role would be enhanced and more people would perceive care work as a worthwhile career option. This could include reference to case studies and testimonials highlighting the positive experience of the Care Workers that Members met.
12. The Task Group was advised that an additional budget of c£15-16k would be required for the Communications Team to provide a dedicated member of staff to be allocated to this task for at least a 3-month period, with some capacity for ongoing and legacy work.
13. Later in the Report (at Recommendation 8) the Task Group recommends that there should be a general package of measures introduced to support and celebrate the dedication, commitment and outstanding performance of Care Workers (where appropriate) which will also assist in raising the profile of the profession.

Recommendation 2: The Task Group recommends that the Council should sign up to the 'I Care Ambassador' Scheme as an employer. The Council should then encourage and enable a minimum of six Council employees (one from each of the six district areas) to be supported to carry out the 'I Care Ambassador' role.

14. The Task Group met with Locality Manager (Midlands) from Skills for Care (SFC) which is a government funded organisation that helps to create a well-led, skilled and valued adult social care workforce. SFC support adult social care employers to deliver what the people they support need and what commissioners and regulators expect. One of their initiatives is the 'I Care Ambassador' Scheme, which positively promotes the care worker role. The ambassadors are staff from across the sector who work to inspire and motivate people to understand more about working in social care. They are involved in a range of activities and can make a difference to employers both in helping to recruit new staff and also retain existing workers.
15. There are currently very few 'I Care Ambassadors' active in Worcestershire and the Task Group felt that the Council should consider embracing this initiative by signing up as an employer and encouraging and enabling a number of Council employees to carry out such a role alongside their other duties. The Task Group suggested that at least one Ambassador for each of the six districts in the County could work well.

Recommendation 3: The Task Group recommends that the Council should seek to build a closer working relationship with Skills for Care and develop networking opportunities for the mutual benefit of both organisations.

16. SFC is a charity currently receiving 70% of its funding from the Department of Health and Social Care (DHSC). The Task Group received a wealth of valuable insight and information about the care sector from the SFC Locality Manager (Midlands) and a visit was also facilitated to the Bridge Project in Shrewsbury (*see recommendation 10 and paragraph 102*).
17. The Task Group felt that there would be a mutual benefit to be gained from Officers from the People Directorate networking with SFC. The Lead Commissioner, People Directorate has already made initial contact with SFC.

Recruitment and Retention of Care Work Staff

Recommendation 4: Whilst understanding the budgetary conditions faced by the Council, the Task Group recommends that the Cabinet Member with responsibility for Adult Social Care explores what influence the Council is able to have to enhance the terms and conditions of Care Workers through its commissioning process.

18. The Task Group gained some knowledge about the commissioning process and was keen to identify areas where the Council could add influence through this process, including the specification for the Domiciliary Care preferred providers contract. The Task Group felt that in seeking to be an exemplar to private care providers, the Council should consider not only how to demonstrate its own high standards in conditions of employment, but also to seek to add influence (where possible) via its contract specifications for other care providers outside of the Council.
19. The Task Group has identified examples where the Council might be able to have influence through the commissioning process, for instance in training requirements and with paid travel for split shift workers. The Task Group acknowledged that they were not in a position to directly influence the detail of the specification, but Members felt that the commissioning process presented an ideal opportunity for the Council to be able to have a positive influence on the terms and conditions of Care Workers.

Recommendation 5: The Task Group recommends that the Council considers introducing an employee referral scheme to incentivise staff to recommend friends or family for roles in social care.

20. The Task Group learnt that employee referral schemes such as 'Refer a Friend' can be very efficient and cost-effective. Referral Schemes tend to be popular with employees and have proved to be an effective way of recruiting, as applicants have a realistic idea of what the job entails, hence leading to new recruits being more likely to remain in the role. Schemes also tended to attract people who already had personal caring responsibilities and therefore were well suited to the role.

Development of the Care Worker role

Recommendation 6: The Task Group urges the Cabinet Members with Responsibility for Transformation and Commissioning and Adult Social Care to consider scaling up the provision of care worker apprentices to flow into adult social care. This could be achieved with the development of a structured rolling programme of apprenticeships of 18 month's duration commencing every 6 months, centrally managed and coordinated. Care Worker apprentices would be of considerable benefit to social care teams by providing a regular source of newly qualified apprentices and would also help to make effective use of the Apprenticeship Levy.

21. The Task Group was aware that the Council was revising its Apprenticeship Strategy and as part of the process, it seemed an ideal opportunity to scale up the Care Work Apprenticeship Scheme. In the meantime, as mentioned at paragraph 8, the Task Group provided an update report to OSPB at its meeting on 29 January 2020 in which they requested that their idea was considered as part of the Budget Scrutiny process.

22. The Task Group felt that the Council should lead from the front and become an exemplar of good practice among care worker employers in this. With a structured route into social care and appropriate support and encouragement, it is expected that more people of all ages will be attracted to the many professional development opportunities available for a fulfilling career in social care.

Recommendation 7: The Task Group recommends that in developing its best practice and aiming to be an exemplar of a care work employer, the Council should consider whether there would be economies of scale, by extending its existing training offer to preferred providers, to ensure standards and consistency.

23. The Task Group was aware that training services varied across care providers, with some using in-house provision and others accessing training via colleges and other training facilities. With the Council's soon to be introduced new framework arrangements for domiciliary care in Summer 2020, (including the introduction of a new system of a Lead Provider for each of 10 zones), it was suggested that as the new contracts would require certain levels of training to be met, this could an opportunity to expand the Council's training provision to support the needs of the Lead Providers. This would aid the Council's statutory duty from the Care Act 2014 to help develop a market that delivers a wide range of sustainable high-quality care and support services, that will be available to communities.

Supporting and Celebrating the Existing Workforce

Recommendation 8: The Task Group recommends that the Council considers developing a package of measures to recognise, reward and celebrate the work of Care Workers, under the strap line of ‘Worcestershire Cares’.

24. The Task Group felt there needed to be a package of measures introduced to recognise the valuable work and commitment shown by individual Care Workers. It was important that this should not be a tokenistic exercise, but instead should involve a series of initiatives which could be used to reward and celebrate dedication and commitment in a meaningful and timely way. Such measures could shine a light on examples of good practice and seek to raise the morale of individual Care Workers.
25. The Task Group felt that the measures should support and celebrate Care Workers and needed to be backed up by a specific publicity campaign to raise the profile and provide insight into the role that Care Workers provide. Linking the initiatives together under a ‘Worcestershire Cares’ theme would help to provide a focus for promotional and celebratory events. With greater public understanding of the role, it was expected that the care worker role would be more valued by the public and this would, in turn, encourage people to consider a worthwhile career in the sector.

Liaison with education and training providers

Recommendation 9: The Task Group recommends that the Council should develop a plan to co-ordinate and strengthen its relationships with education and training providers in the County.

26. The Task Group discovered that there was a range of contacts between the Council and education and training providers, although there was inconsistency in these connections and a lack of formal arrangements. Members identified that there was a range of opportunities for the Council to work with colleges including extending its provision of work placements and work experience opportunities, attending job fairs and providing information talks to groups of students. Whilst there are examples of this taking place at present, it appeared that there was considerable scope for improved connections to be built on and developed in a much more co-ordinated and formal manner. The Task Group felt that it was crucial that the Council should have a regular presence at college events and pursue opportunities to interact proactively with relevant students to encourage them to consider developing a career in social care.

Evidence of what works well elsewhere

Recommendation 10: The Task Group urges the Council representatives to keep abreast of the Bridge Project at Shropshire Council. This Project uses sophisticated primary data from local sources to predict future service need aiding early intervention alongside more clearly defining the commissioning need. The Task Group feel that there are opportunities for collaborative working and for savings to be made to help Worcestershire’s care sector.

27. The Task Group carried out a visit to the Bridge Project in Shrewsbury which proved to be very interesting and worthwhile. The project takes housing, social care and health data from a local area to predict likely future needs at individual household level and can enable highly targeted early intervention. The combination of data from many

services speeds up the identification of the location of groups of clients for contracting purposes. It had also led to significant savings being achieved for Shropshire Council during contract negotiations. Members felt that there was greater scope for Worcestershire to benefit from this initiative.

Recommendation 11: The Task Group recommends that the Cabinet Member with Responsibility for Adult Social Care considers facilitating a County-wide body to represent care providers across the social care sector.

28. When the Task Group visited the Bridge Project in Shrewsbury, it also heard about the work of Shropshire Partners in Care (SPIC) which is a not for profit organisation representing approximately 240 independent Nursing, Residential, Supported Living and Domiciliary Care companies in Shropshire and Telford & Wrekin. SPIC offer a wide range of services for adult social care providers including acting as a conduit for fee negotiations between the private and voluntary sector and Shropshire Council as well as providing support, advice and guidance to its members.

29. Members were encouraged by the success of the SPIC organisation which had been operating for 20 years and felt that a similar organisation could work well in Worcestershire.

Recommendation 12: The Task Group requests that the Cabinet Members with responsibility for Transformation and Commissioning and Adult Social Care report back to the OSPB in January/February 2021 to provide details of progress made on this Report's recommendations.

Care Work as a Career

The classification of care work roles

30. Skills for Care advise that **job roles in social care** can be categorised as follows:

- **Direct Care roles** such as Activities Worker, Care Worker, Personal Assistant, Rehabilitation Worker, Shared Lives Carer and Advocacy worker.
- **Management roles** such as Team Leader, Supervisor, Manager, Deputy Manager or Team Manager and Specialist Coordinator such as end of life or dementia Coordinator.
- **Other Social Care support roles** such as Housing support officer, Volunteer Coordinator, Social Care prescriber, Welfare Rights Officer, Employment Advisor, Trainer or Assessor and Administration roles including Finance, HR and Marketing.
- **Regulated professional roles** such as Social Worker, Occupational Therapist, Nurse (including Nurse Associate), Complementary Therapist and Counsellor.
- **Ancillary roles** such as Cook or Kitchen Assistant, Housekeeper or domestic worker, Driver or Transport Manager and Maintenance.

31. For the purposes of this Task Group's work, the role of 'Care Worker' has been specifically focused on those providing **direct care roles** in residential homes and on a domiciliary basis. We have used the term 'Care Worker' to incorporate all those roles.

32. There are 314 (Care Quality Commission regulated) care employers in Worcestershire that employ 16,100 workers across the independent sector, the Council and jobs working for direct payment recipients. The largest percentage of these jobs (over 85%) are within the independent sector.

33. The following is a summary of the demographics of the Worcestershire social care workforce. This data was supplied by Skills for Care in January 2020 and was taken from the Adult Social Care Workforce Data set. The figures refer to the whole adult social care workforce (private, independent, voluntary and local authority):

- 86% of workforce are female, 14% male
- The average age of a worker is 44 years
- 10% of workers are under 25 years, 63% are aged between 25 and 54 and 27% are 55 years and above
- 91% of Care Workers are British, 5% from the EU, 3% Non-EU and 1% unknown
- There is a 38.8% turnover which equates to 5,000 leavers
- 67% of these leavers remain in the sector, moving to another employer
- There is an 8.9% vacancy rate, which equates to 1,300 jobs
- The average years of experience in a role equates to 4.1 years
- The average years of experience in the sector equates to 9.1 years
- Rates of pay - the average pay per hour in the Council for front line workers is £10.15 and for Registered Managers £16.72. In the independent sector the figures are £8.46 for front line workers and £12.88 for Registered Managers
- 54% of staff hold a qualification relevant to adult social care.
(figures supplied by Skills for Care)

34. The Council currently employs 465 Care Workers (344.32 FTE) across the following roles: Care Assistant, Support Worker, Senior Support Worker, Home Care Assistant, Senior Care Assistant, Senior Home Care Assistant, Promoting Independence Assistant, Shared Lives Worker, Residential Support Worker, Senior Residential Support Worker, Senior Support Worker.

35. The Council's employees are split between the different settings as follows:

Employee Profile 31/10/2019	Headcount	FTE
Directorate of Adult Services	397	287.92
Adult Day Care	157	118.55
Adult Residential Care	55	39.92
Adult Resource Centre	37	22.72
Home Care	141	100.16
Shared Lives	7	6.57
Worcestershire Children First	68	56.4
Children with Disabilities Short Breaks	18	11.21
Children's Residential Care	50	45.19

How the Council can promote care work as a career

36. The Task Group met with some Council Care Workers and one from the private sector. It was evident that for these Care Workers, the difference that could be made to people's lives was a crucial factor for them choosing to work in social care. The needs of the residents and clients were paramount, and they were dedicated to ensuring that they carried out their duties with care and compassion. The Care Workers were keen that people carrying out social care roles should receive effective support from their employers and the recognition from wider society of the value of their work.

Publicity

37. One of the primary objectives of the Task Group was to seek ways to improve the recognition of the role of Care Workers and increase public understanding of the importance of the personal work that they do. The Council's Communications Manager was invited to discuss ways in which the Communications Team could help with this objective.

38. The Task Group was informed that priorities for the Communications Team were established once a year, around April, and that Adult Social Care had been one of the top priorities in the last three years. The Communications Team were regularly involved in publicity campaigns to support recruitment drives for the People Directorate and currently to support recruitment for the Reablement Service which featured current care staff in the campaign.

39. The Task Group was also informed of the 'One Worcestershire' initiative which the Council was involved in, which draws together public and private bodies from across the County with the aim of promoting and showcasing what Worcestershire has to offer. It was suggested to the Task Group that a campaign to promote the values of social care work could be highlighted through this initiative in the future.

40. The Task Group felt that a specific publicity campaign was required to raise the profile and provide insight into the role that Care Workers provide. With greater public understanding of the role, it was expected that the Care worker role would become better understood and valued by the Public and that more people would be encouraged to seek careers in this rewarding sector. Additionally, current employees would hopefully feel much more valued and appreciated for the difficult role that they carry out. Any promotional work could also have a positive impact on recruitment across the County, potentially leading to a more stable care sector as a whole.

41. The Task Group was advised that if any additional publicity was required, a member of staff would need to be allocated for at least a 3-month period, with some capacity for ongoing work. This would require an additional budget of £15-16k. The Task Group suggested that it may be possible to seek some funding from the discretionary part of the Public Health Ring-Fenced Grant to support this initiative. The Director of Public Health indicated that whilst supportive of the idea of a campaign in principle, it was necessary to check how it would sit alongside initiatives already in the pipeline. The importance of liaising with the Local Workforce Action Boards (LWAB) to ensure joint working was also highlighted.

42. As mentioned at paragraph 8, following the Update report to OSPB in January 2020, there was general support for the publicity campaign, with assurance that the funding

could be identified from within current budgets, without having to seek approval through the Budget Scrutiny process.

43. The Task Group felt that there was also a need for more internal publicity on the role of the Care Worker, in order to promote the valuable work that was carried out and to aid a greater understanding of the role. Through the Council's own staff, this message would then disseminate to their friends and family and the wider community.
44. Outside of the work that the Council can do with its own resources, the Task Group asks the Cabinet Member to work with the LEP in raising the profile of care workers and developing a meaningful strategy of support.

Skills for Care

45. Skills for Care (SFC) is an organisation which helps to create a well-led, skilled and valued adult social care workforce. The practical tools and support help organisations and individual employers in England to recruit, develop and lead their staff, retaining them from entry level right through to senior leadership and management roles. The Task Group met with the SFC Locality Manager (Midlands) to learn about their work and benefit from their knowledge and experience in the care sector field. The Task Group was informed that the SFC was a national charity, established about 20 years ago by the Department of Health to support adult care employers. The charity currently received 70% of its funding from the Department of Health and Social Care (DHSC) and had clear responsibilities to ensure that the sector was effectively managed and resourced and with an appropriate framework of qualifications available to support the sector.
46. The Locality Manager provided a report which included detailed information about what other local authorities were doing in the areas of commissioning, market shaping, recruitment, retention and celebrating care. In addition, it highlighted the DHSC's national campaign 'Every day is different' which aimed to raise the profile of adult social care and highlight the personal and professional rewards of working in a growing sector. Campaign materials were freely available for use by all those in the sector. Members felt that the Council would benefit from developing closer links with SFC to learn from their expertise and the work of other authorities.
47. The Task Group was informed of the SFC initiative whereby 'I Care Ambassadors' worked to positively promote the care worker role. These ambassadors were staff from across the sector who worked to inspire and motivate people to understand more about working in social care. The work of the 'I Care Ambassadors' included giving talks and presentations, attending careers fairs, mentoring and media and publicity work. Their work was largely targeted at students and teachers in schools and colleges, unemployed people, careers advisors and community groups. Their work had been shown to make a difference to employers both in helping to recruit new staff and also to retain existing workers.
48. Key outcomes relating to the work of the I Care Ambassadors nationally in the past two years, have shown that:
 - 361 Ambassadors have delivered activities to 122,000 people.
 - 100% of those who requested an ambassador gave positive feedback
 - A 23% increase in people were interested in a career in care after hearing from an ambassador.

- The areas where Ambassadors were most active were the South West, London and the East Midlands.

49. The Task Group were informed that there were very few employers in Worcestershire signed up to the 'I Care Ambassadors' Scheme. Members felt this was a very proactive initiative and one which the Council could usefully participate in. Therefore, the Task Group recommends that the Council considers embracing this initiative and identifying and supporting some Council employees who would be willing to consider carrying out such a role. They suggested that a minimum of six with one representing each District area could be a good approach.

Issues with recruitment and retention of care workers and how the Council and partners can improve this

Current recruitment situation

50. The Task Group discovered that the situation regarding recruitment and retention varied considerably between the Council and the private sector. They were informed by the Trade Union that pay, conditions and job security were key issues that all Care Workers were concerned about, but that working within the public sector was often seen as preferable because of the more stable, regulated working environment, and the support structures in place. Anecdotally, it was suggested that NHS Health Care Worker roles (with similar duties to a Care Worker) benefitted from significantly higher salaries than Care Workers in local authorities, although from a review of job adverts, there appeared to be little difference. Both roles were however, paid higher salaries than Care Workers in the private sector, which clearly impacts social care recruitment in the private sector.
51. The Council has some care settings where staff turnover was an issue, but in general the level of vacancies was at a lower level. Between April and September 2019, there were 25 Leavers across Adult Services and Worcester Children First, with an average of 5.38% turnover. As at November 2019, there were 6 job vacancies being advertised and 8 other job roles where candidates were undergoing checks to be able to start work.
52. This was in addition to a recruitment campaign for a new Community Reablement Team where 27 new roles were being created. There had been 119 applications received for these posts, the number being boosted by a number of initiatives to capture interest, including Open Days, use of social media and videos posted of current care staff talking about their role. Also, those invited for interview were then supported with a 'tips for interview' guide to help them prepare fully for their interview. This recruitment process was now coming towards completion, with the Service due to be up and running on 1 April 2020.
53. The Task Group's meetings with private care providers had illustrated there was a significant recruitment problem within the sector. A private care provider advised the Task Group that national turnover rates for care work staff working for private providers was around 35%, which increased when there were substantial changes such as a new Care Home Manager in place. Private providers were regularly having to rely on Agency staff to provide adequate cover, at a significant cost to their business.

Issues impacting on recruitment and retention

54. From discussion with a Trade Union, the Task Group was informed of some issues of concern from their members, including:
- The isolation and loneliness experienced by some staff in 'side by side' roles especially, when working unsociable hours.
 - The impact of the Council's Attendance Policy which, was seen as contentious as care workers felt they were penalised because they were much more susceptible to picking up viruses, in comparison to office-based staff.
 - The impact on staff when they felt that genuine career progression routes in day care centres had been removed as a result of restructuring.
 - Payment for travel – care staff were not paid for their first or last journey of the day and split shift workers could be further disadvantaged as four journeys per day were classified as first or last journeys.
55. The level of wages paid by private care providers (often national minimum wage) and the zero hours contracts were key issues, and it was accepted that improved rates of pay would undoubtedly help the recruitment situation. The Task Group learnt that the shift pattern working was not as flexible as some staff would wish. It was reported that this was less of an issue with staff from overseas who were often keen to work any extra shifts.
56. Care Workers could sometimes feel undervalued and under paid. It was highlighted, for instance, that a promotion which came with significantly more responsibility, would sometimes have very little monetary benefit to the employee.
57. Care Workers commented how demoralising it was to see a Care Worker role advertised with wording to the effect of 'no skills required'. The Care worker role requires a multitude of skills if it is to be carried out effectively. It also comes with significant responsibilities including ensuring that a Clients Care Plan was followed accurately. They felt that this should be reflected in a person specification.
58. There was variation between private providers in whether travelling time was paid between clients. Some roles were advertised with relatively high hourly rates, but this masked the fact that the rate was only paid for the time actually spent with clients and not travelling between, so in reality paid hourly rates were significantly lower. The Trade Union had referred to their 'Ethical Care Charter for the commissioning of homecare services' which they were keen for the Council to sign up to in order to protect private sector Care Workers.
59. In terms of working hours of staff employed by the Council, the Task Group learnt that some staff would find it more convenient to work more hours at one location, rather than having to seek a second job or temporary shifts elsewhere. They highlighted that the availability of posts with longer working hours would encourage recruitment in general. The Interim Strategic Director for People (ISDP) advised that there was currently a range of contracts in place in provider services, but that an overhaul was needed.
60. Private Care providers commented that any help from the Council on awareness raising, promotion of the profession and assistance with a recruitment programme overseas would be very welcome. One provider commented on the critical shortage of qualified nurses wishing to work in nursing homes.

61. The possibility of a Recruitment Portal for permanent staff was raised by the ISDP, which could benefit all providers. This had been discussed as part of 'One Worcestershire' and if it came to fruition would be a live portal including all Worcestershire jobs.
62. One of the private providers had commented that if the Council could facilitate a Forum for Residential Care providers to network, it would be supported by the sector.

Commissioning process

63. Members were advised about changes to the commissioning arrangements for domiciliary care. In the Summer of 2020, a new system would be introduced whereby the County would be divided into 10 zones and there would be a Lead Provider appointed for each zone, with the Lead Provider sub-contracting if necessary (*although they were required to provide at least 95% of the contract themselves*). This new arrangement was expected to be more efficient and simplify the process of dealing with providers who were not meeting the current standards. It was noted that clients would still have the same Care Workers, although in time there might be some changes.
64. The Task Group clarified that the Lead Provider was required to ensure that all packages of care within its zone were delivered in accordance with the specification, including those delivered by any sub-contractor. Members would wish to seek assurance that there was a formal reporting mechanism on the performance of the sub-contractors to ensure that there was accountability and that standards, such as appropriate training levels, were maintained.
65. The Task Group felt that the that the commissioning process was a useful way in which the Council could exert some influence to improve the Care Workers situation across the County. Setting and demonstrating high standards for other care providers as a way forward should be seen as a key part of its exemplar employer role in the County.
66. The Task Group were informed that contracts with private providers were outcome based and included issues such as ensuring that residents and clients felt valued and treated with dignity, that their health and well-being was maximised, that staff should have positive relationships with residents and clients and be well motivated themselves. The Council wasn't in a position to dictate employment terms and conditions to the agencies. Having said that, there was still some scope for influence in the commissioning process, asking questions about social value, for example, and checking that contractors were signed up to the 'Working for Carers' commitment. Members were keen to ensure that any possible scope and influence that the Council could have to improve the situation of Care Workers through the tendering process was effectively used.
67. A Care provider informed the Task Group that the gap between the price paid per bed by the Council compared to self-funders was over £250 per week therefore if the provider had a home which was reliant on Council residents, this could lead to a problem with the sustainability of the home. This funding gap clearly had a significant impact on the salary levels able to be offered to recruit staff.

68. The Task Group was informed by a private provider that through the Council's contractual arrangement, private providers used to be required to ensure that all their staff completed a Diploma in Social Care. This had not been enforced by the Council for some time, which he felt had led to a less robust service. The Task Group were made aware of the training and development expectations under the new Domiciliary Care preferred providers contract, which required Lead Providers to ensure that a minimum of 60% of their staff should have or be working towards a Level 2 or 3 NVQ in Social Care or a Diploma in Health and Social Care.

What the Council can do to develop care work as a career

Apprenticeships

69. As part of being an exemplar employer, the Task Group felt that a structured route into social care should be provided. With appropriate support and encouragement throughout their apprenticeship, it is hoped that more people would be attracted to work in the social care sector and take up opportunities for a fulfilling career in whichever role they chose.

70. The Council has a role in respect of apprenticeship opportunities, both as an internal provider and through external contracts. Currently social care apprenticeships are managed through the internal and development delivery team, which could offer apprenticeships up to level 5. External contracts were entered into when the Council did not have the accreditation or expertise to offer a particular apprenticeship in-house.

71. As a result of the Public Sector Apprenticeship Targets Regulations 2017, the Task Group learnt that large public sector organisations have a 4-year target to have 2.3% of employees on apprenticeships by 2022. It was noted that the current number of apprenticeships was approximately 100 across the whole Council, although it was noted that only 4 of these were in direct Care worker roles with a further 4 in Lead Care worker roles. The Task Group learnt that during the current Organisational Review of the Council's structure, there had been a less proactive recruitment of Apprentices taking place, but this situation was expected to change after April 2020.

72. In terms of the Council's Employer Provider Status (delivering apprenticeship training directly to staff, rather than outsourcing to an external training provider) and the Government's Apprenticeship Levy (AL) Scheme which was available to fund the training and assessment of apprentices, the Task Group discovered that if the Council did not use all the available AL monies during a two-year period, the money was then returned to the Government. This had started to take place in April 2019 and between April and the end of November, £311,798.84 had been returned. The Task Group wanted to ensure that the AL monies were used in the most effective manner going forward and that recruitment to adult social care roles was boosted by regular availability of newly qualified apprentices.

73. The Task Group supported a plan for an enhanced apprenticeship programme into social care roles. Noting that an apprenticeship would normally take place over an 18-month period, Members suggested that if new apprenticeships were commenced every 6 months, this would mean that there would be a rolling programme of newly qualified apprentices into social care. This enhanced programme could see apprentices benefitting by receiving a varied training programme, with time spent in each key distinct area of the Directorate. Their 20% training time could then be managed by the central Learning and Development team in terms of providing training, support and

workshops. At the end of the process, apprentices would be awarded a City and Guilds qualification, a Level Two Diploma in Adult Care. The Task Group recognised that it would be beneficial to the Council to have a mix of youth and maturity on the apprenticeship scheme.

74. The Task Group was aware that a revised Apprenticeship Strategy was currently being approved by the Senior Leadership Team of the Council. In the meantime, as referred to in paragraph 8, the Task Group had provided an update report to OSPB in which they asked that their idea was given due consideration as part of the Budget Scrutiny process as they wished to see some additional monies, in the region of £6-10k identified and set aside towards the start-up costs for an apprenticeship programme and any associated materials required for use in publicity campaigns and recruitment events.
75. The Assistant Director for Human Resources, Organisational Development and Engagement (Assistant Director (HR, OD and Engagement)) attended a Task Group meeting and was supportive of the Task Group's drive and enthusiasm to see apprenticeship numbers increased. He explained that as part of the development of a revised Council Apprenticeship Strategy, there were a number of initiatives planned which together could see the Council developing and supporting a larger number of apprenticeships each year. This included the Council engaging with a national programme of traineeships for those young people currently not in education or training and also a structured approach to supporting care leavers with their careers. He hoped that the Social Work Academy could be used to support the development of the Apprenticeship programme into the future.
76. The Task Group informed the Assistant Director (HR, OD and Engagement) that they were seeking additional funding (c.£6-10k), part of which they envisaged helping towards the start-up costs of an apprenticeship programme into adult social care. The Assistant Director whilst welcoming the possibility of additional monies, advised that there was an existing Talent Management Budget which would be used for the overall plans of the future Apprenticeship Strategy.
77. A Member of the Task Group visited Kidderminster College to discuss the variety of courses offered in social care, apprenticeship schemes, work experience placements and the areas of current and possible interaction with the Council. The College had a rapidly expanding provision of apprenticeships and advised that they were able to offer to facilitate the promotion and co-ordination of apprenticeships in the future, if this was of interest to the Council. The College were keen to develop closer links with the Council and Members felt there was considerable scope for working together in the future.

Training

78. The Task Group learnt that all Care Workers were required to complete a Care Certificate as part of their Induction process, to ensure that they had the basic skills and competencies to start their role. This involved training and workplace assessment. Whilst employees of the Council and some private providers paid employees for the time spent on completing their Care Certificate, the Task Group discovered anecdotally that a few private providers expected new staff to complete this process on a voluntary basis. The Task Group was advised that the Council's Quality Assurance Team carried out checks on this as part of their inspections.

79. It was noted that some care providers had in-house training provision, whilst others sourced their training from elsewhere. Officers from the People Directorate indicated that there were initial discussions taking place to see whether the Council's training provision could be expanded in the future to support the needs of contractors. With the soon to be introduced new framework arrangements for domiciliary care and the introduction of a new system of a Lead Provider for 10 zones, it was felt that this could be an opportunity to expand the Council's training provision to support the needs of contractors. The new contracts would require certain training provisions were met and there would be scope for the Council's training provider to expand its role. The Task Group supported the idea of standardising training for Care Workers across the County. It was also noted that grants were sometimes available to small businesses to help them with training costs.
80. The Task Group was pleased to learn that within the Council it was very possible, for those who wished to do so, to start as a Care Worker and work their way up the levels, with on the job training, carving out a rewarding career. One of the Team Leaders the Group met had done just this, whilst remaining in full time employment throughout. The Task Group were also informed that it was possible to use credits obtained for example through a Level 3 Social Care Certificate and transfer on to a healthcare assistant or nursing pathway in the NHS.
81. The ISDP advised that they were working on a defined career path to make effective use of very experienced staff in a role such as Social Work Assistant. This was welcomed by the Task Group.

How the existing care workforce be better supported and celebrated.

82. The Task Group felt that the dedication and commitment of Care Workers in carrying out their crucial work was under-recognised and under-valued. The needs of the residents and clients were put first, and they performed their duties with care and compassion. One example, the Task Group learnt, was how difficult it could be to ensure a rota was fully staffed and that Care Workers would often cover shifts at short notice, despite the impact to their personal life, to ensure that the service could be fully supported.
83. Care staff were keen to emphasise that the value of the Care Workers role needed to be recognised. They felt it needed personal marketing, good news stories and explanation about the reasons for going into care roles, so that people might be inspired to work in the sector. They felt that increased positive publicity would be very helpful to combat the often-unhelpful stories in the Press about the Care sector and particularly when something had gone wrong. Such stories, which appeared in the Press from time to time, could tarnish the care sector as a whole in the minds of the public and linger long in their memory. Some also expressed their dislike of the title 'Care Worker' which they found to be old fashioned and off putting.
84. In addition to the promotional activities referred to earlier, the Task Group agreed that there needed to be a package of measures introduced to support and celebrate the dedication and commitment of individual Care Workers. It was important that this should not be a tokenistic exercise, but instead should involve a series of initiatives which could be used to reward and celebrate dedication and commitment in a meaningful and timely way. Such measures could shine a light on examples of good practice and seek to raise the morale of the individual Care Workers. Linking initiatives under a 'Worcestershire Cares' strap line was felt to be a useful approach. An annual social

care stakeholder roadshow could be held and an awards ceremony would raise the profile of Care Workers, along with the use of industry recognised badges. Other smaller, more timely recognition would also make a difference too. Evidence of what worked well in other places included loyalty bonuses where there was a high turnover of staff, 'You're a Star' card and gift voucher for individual initiative or achievement, perks or discounts for shopping for all Care Workers (*made available by working with local businesses*).

85. The Task Group had been informed of the work of Shropshire Partners in Care, which is a social care organisation representing independent care providers within Shropshire and Telford & Wrekin. The organisation is the voice of the independent care sector and is the main conduit for fee negotiations between the private and voluntary sector and Shropshire Council. It also supports its members by providing advice and guidance, mandatory training at a low cost and help with job fairs, work coaches and care ambassadors. Members felt that a similar organisation could work well in Worcestershire.
86. The Task Group learnt from care staff that the Council's 'relief pool of Care Workers' benefitted from the inclusion of some highly motivated workers, for instance, trainee Occupational Therapists and Physiotherapists who were required to gain some experience in care work as part of their course. When these workers covered a shift, the other Care Workers found them to be very helpful and supportive. The Task Group suggested that there could be a formal arrangement with Worcester University to ensure there was a regular supply of suitable students to work on the relief pool. The ISDP agreed to look into this suggestion.

How the Council liaises with education and training providers to develop skills and promote care work as a career

Careers events

87. With the Council's reorganisation process, responsibility for attending Careers events and jobs fairs, was currently being transferred to a different Council team. Members were informed of certain events that the Council was often represented at, such as the main Jobs, Apprenticeship and Skills shows each year, but there were many more events at Colleges which it would be useful for the Council have a presence at, to demonstrate how a career path in social care was possible and the rewards that could be obtained from pursuing such a career.
88. The Task Group felt that there was considerable scope available for meeting with young people at schools and colleges to talk to them about social care as a career. No individual team currently had specific responsibility for this role, however, provider services had indicated they were willing to attend a school or college for this purpose, if asked. Members were pleased to learn of a recent initiative where Social Care Managers had been attending Worcester 6th Form College to inform young people about the roles on offer. Some shadowing of staff was also to take place. Members welcomed this initiative and hoped it could be expanded to other Colleges in time. Members felt that the Council should be proactively seeking to engage with health and social care students in all Colleges, and where possible taking along social care staff to directly promote the roles available and the career paths that are possible. They felt that the enthusiasm of the Councils staff should be harnessed to spark the interest of the next generation.

89. Members were pleased to learn about a new initiative which was currently being developed through joint working on the Sustainability Transformation Plan around the apprenticeship theme, whereby all health and social care providers across the County were looking to form a partnership to act as representatives of the sector. This would mean, that once up and running, partners would be carrying out promotional activity and information talks on behalf of the whole sector. This was seen as a very positive initiative, making good use of joint working to share the role to promote the sector as a whole.

Colleges

90. As part of their work, the Task Group contacted representatives from the Heart of Worcestershire College, Worcester 6th Form College, Evesham College (*part of Warwickshire College*) and the University of Worcester. A visit was also made to Kidderminster College. These institutions offer a range a range of full-time courses for people keen to work in the social care sector, from entry level, through intermediate, advanced, level 5 management courses and foundation degrees. Some of the Colleges also offer a range of 12 – 18-month apprenticeships at Level 2, 3 and 5. These are available to new recruits to the care sector or those already employed in the sector looking to upskill. All of the social care courses involve work placements with care providers, which vary dependent on the level of qualification involved.

91. The Task Group were informed by some colleges that only a small percentage of the health and social care students currently entering the job market on completion of their studies, chose the social care route.

92. Members identified that there was a range of opportunities for the Council to work with Colleges including providing work placements and work experience opportunities. The Task Group discovered that the contact between the Council and with education and training providers regarding work placements, was currently on an ad hoc basis arranged through individual managers, rather than being managed by one particular team. This, however, meant that there was inconsistency in the connections between the Council and different colleges and no overall formal rolling programme of work placements in the Council's social care settings. Some initial work was being carried out to try to informally co-ordinate what was taking place.

93. Some Colleges had indicated that they would welcome closer links with the Council. The Task Group felt that the Council should continue to strengthen its relationships with education and training providers in the County to ensure that stronger connections and working relationships were forged. They felt that the connections between the Councils and Colleges should be much more co-ordinated and set out in formal arrangements. It was crucial that the Council should have a regular presence at key College events across the County and proactively interact with relevant students to encourage them to consider developing a career in social care.

How Private Care Providers support Care Workers in particular those used by the Council

94. The Task Group met with a Managing Director of Domiciliary Care Service, who outlined the comprehensive package of measures in place to fully support his Care Workers which included a full Induction process including shadowing of initial visits to

clients, a buddy scheme for new starters, training opportunities and career development, a range of communication methods to keep employees fully informed and recognition of individual initiative and achievements. This standard of support was very comprehensive, and Members were mindful that it was unknown to them whether this was replicated across other care providers in the County.

95. As referred to above, Members were keen to understand what influence the Council had as part of the Commissioning process, in respect of the terms and conditions for Care Workers employed by private providers, to ensure that they were operating as fair and ethical employers.

Evidence of what works well elsewhere

96. **Value based recruitment.** The first phase of the DHSC's Adult Social Care Recruitment Campaign, 'Every day is different' took place in early 2019 and aimed to drive a new generation of people to consider social care roles. Campaign toolkits were issued with materials for posters, leaflets, social media tweets etc. After the first phase of the campaign 40% of females and 31% of males surveyed said the adverts had made them want to find out more about jobs in the SC sector. Derbyshire County Council used campaign materials in their own advertising and saw a 45% increase in visits to their recruitment website. The 2nd phase of the campaign was currently underway.
97. **Employee referrals** can be very efficient and cost-effective. As 8 in 10 care staff would recommend a job in adult social care, employers should be making more use of the potential of this advocacy role. It is important that staff making referrals are given a reward and thanked personally for their role. The Providers we talked to use a 'Refer a Friend' scheme which was popular with employees and proved to be an effective way of recruiting as applicants have a better idea of what the job entails. The referrer was issued with a financial reward. The Task Group felt that this was an initiative that the Council could usefully take forward.
98. **Work Ambassadors.** Referred to previously in this report, the SFC 'I Care Ambassadors' help to promote the social care sector and inspire others. They can have considerable impact with results demonstrating that there was a 23% increase in young people and adults showing interest in a career in social care after talking to/listening to an Ambassador. The feedback obtained by the Ambassador was also helpful to employers.
99. **Family Care-er Recruitment events.** Targeting those who have caring responsibilities at home, to see how a career in Social Care could fit around their responsibilities. Events encourage people to bring their children and activities are available to entertain them whilst their parents find out more about potential careers.
100. **SFC and the Local Government Association** have supplied us with some current examples of local authorities which are engaging in a range of interesting initiatives to boost recruitment in social care. A summary is shown below:
- Derbyshire – Joint health and Social Care apprenticeships
 - Lincolnshire - Developing use of Nurse associates in nursing home sector
 - Shropshire - Recruitment fairs in conjunction with the Department of Work and Pensions

- Herefordshire – Care Heroes scheme in conjunction with learning programmes to ensure that employers have the rights skills and knowledge to prepare and support care staff, when recruited.
 - South West Proud to Care initiative – a joint recruitment initiative between LA's and the NHS.
 - Staffordshire County Council – targeting local companies in danger of mass redundancies, to highlight the benefits of working in social care.
 - Shropshire Partners in Care – focused recruitment targeting two groups, career changers (20 to 39 years) and retirees/those wanting a second career.
 - Haringey – a series of outreach events, including use of the local website 'Proud to Care'
101. **Warwickshire County Council** was currently working with Coventry University to look at what the workforce of the future will look like for an integrated health and care system, supporting people in their own homes. One of the challenges has been the different pay scales.
102. **Commissioning and Market shaping.** SFC provided details of local authorities which were involved in initiatives and activities in these areas. These included:
- Tameside Council which had introduced commissioning for outcomes (rather than time and task) and 6 care providers were currently commissioned on a neighbourhood basis and paid in advance for an estimated number of hours of care in that area. Each provider was required to pay staff the living foundation wage i.e. £9.30ph. Outcomes for Care Workers and their clients had greatly improved.
 - Bradford Council which had introduced a continual payment of a care package even if the individual who was receiving care was admitted to hospital. This had helped with the delays that were faced when trying to find a care provider to take up a care package at the point of discharge from hospital. The Council had also included travel time in their care package which had supported retention of staff and improved productivity. This had also allowed some 'walking rounds' in some areas.
 - Shropshire Council - The Bridge project – Members visited the Bridge project and received a presentation from Shropshire's Executive Director of Adult Social Care and Housing and their Strategic Lead for the project. The project, based on digital technology, takes housing, social care and health data about individuals and is able to predict demand for future services. It is also able to identify when intervention is likely to be needed with preventative measures for individuals potentially at risk. The key to the success of the project is the use of very local information and combining data from various sources. When the data sources were combined, the system could predict likely future service needs at household level e.g. elderly, alone and poorly incapacitated at home, as well as where the best location was for a new care home linking into local housing and transport links or to determine the most efficient allocations of work for Care Workers. Members were impressed with the effectiveness of the project and encouraged by the potential of positive financial and social outcomes.
 - Somerset Council which was working in partnership with Community Catalyst which developed micro, community-based care and support services to provide flexible solutions in very rural communities.

Conclusion

The Task Group has identified that the dedication and commitment of Care Workers in carrying out their crucial work was often un-recognised and under-valued. They performed their duties with care and compassion and the needs of the residents and clients were always put first. In carrying out this task, Members were pleased to be able to meet with a number of Care Workers directly; their dedication and enthusiasm for their job was clearly evident and much appreciated. It was evident that for these Care Workers, the difference that could be made to people's lives was a crucial factor as to why they chose to work in social care. Members were keen to ensure that Care Workers should receive effective support from their employers and the recognition from wider society of the value of their work. This was the driving force behind the Task Group's work.

The Task Group has set out a number of recommendations which it is hoped will have an impact towards helping the current workforce to feel better supported and celebrated and also to boost the promotion and development of Care work as a worthwhile and respected career.

draft

Appendix 1

Scope of the Scrutiny

To find out:

- What roles are classed as care work?
- What the Council can do to promote and develop care work as a career?
- How can the existing care workforce be better supported and celebrated?
- What are the issues with recruitment and retention of care workers and how can the Council and partners improve this?
- How the Council liaises with education and training providers to develop skills and promote care work as a career?
- How agencies support Care Workers in particular those used by the Council?
- What has worked well elsewhere? For example, use of social media, creation of homecare co-operatives, links with education and training providers, value-based recruitment and saturation marketing, use of apprenticeships, establishment of a social work/carers academy

Appendix 2 - Schedule of Activity

Date	Activity
17 October 2019	Discussion with the Director of Adult Services.
31 October 2019	Discussion with: Registered Shared Lives Manager, Senior Home Care Assistant and Senior Promoting Independence Assistant
20 November 2019	Discussion with: Senior Content & Communications Manager & Unison representatives
25 November 2019	Discussion with: The Registered Manager, Team Leader and Support Worker from a Council setting which provides respite/replacement Care to adults with Learning Disabilities. The owner of a Residential home in Worcestershire.
5 December 2019	Discussion with: Learning & Development Manager Vocational Accreditation Lead Commissioner, Learning disabilities Lead Commissioner, Older people, Physical disabilities
9 December 2019	Discussion with the Managing Director and Care giver from domiciliary home care service in Worcestershire.
8 January 2020	Task Group Meeting.
13 January 2020	Discussion with the Cabinet Member with Responsibility for Adult Social Care, Interim Strategic Director for People and Interim Director for Public Health.
28 January 2020	Visit to Kidderminster College
29 January 2020	Discussion with: Skills for Care, Locality Manager (Midlands) Lead Commissioner, Older People, Physical Disabilities Assistant Director for Human Resources, Organisational Development and Engagement
29 January 2020	Update Report to the Overview and Scrutiny Performance Board
3 February 2020	Task Group Meeting
20 February 2020	Site visit to The Bridge Project in Shrewsbury. Meeting with Shropshire's Executive Director of Adult Social Care and Housing and the Strategic Lead for the Bridge project.
3 March 2020	Task Group Meeting
10 March 2020	Discussion with the Interim Strategic Director of People

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OVERVIEW AND SCRUTINY PERFORMANCE BOARD 22 JUNE 2020

MEMBER UPDATE, WORK PROGRAMME AND CABINET FORWARD PLAN

Summary

1. The Overview and Scrutiny Performance Board (OSPB) is asked to:
 - (a) Receive an update on emerging issues and developments within the remit of each Member of the OSPB, including an update on each Overview and Scrutiny Panel and Task Group;
 - (b) consider the Work Programme for the remainder of 2019/20 and agree whether it would wish to make any amendments;
 - (c) Consider the Council's latest Forward Plan to identify:
 - any items it would wish to consider further at a future meeting; and
 - any items it would wish to refer to the relevant Overview and Scrutiny Panel for further consideration.

2. Due to the COVID-19 pandemic, Board meetings scheduled for March to May 2020 were cancelled to allow the Council to focus its activity on responding to the pandemic.

Member Updates

3. In order to ensure that Members of the OSPB are fully informed about issues relating to scrutiny in Worcestershire, communication between Members is essential. To assist in this, it has been agreed that an item will be placed periodically on the OSPB agenda to enable each Member to feed back on emerging issues and developments within their remit. This will also provide an opportunity to highlight possible future agenda items. Regard for the Council's statutory requirements in relation to access to information will be critical.

4. Board Members' areas of responsibility are as follows:
 - Adult Care and Well-Being Overview and Scrutiny Panel – Juliet Brunner
 - Children and Families Overview and Scrutiny Panel – Fran Oborski
 - Economy and Environment Overview and Scrutiny Panel – Alistair Adams
 - Corporate and Communities Overview and Scrutiny Panel – Adam Kent
 - Health Overview and Scrutiny Committee (HOSC) – Paul Tuthill
 - Crime and Disorder – Rebecca Vale
 - Quality Assurance – Liz Eyre

5. As part of their role, it was agreed by the Strategic Leadership Team (SLT) that scrutiny lead members should receive regular briefings from the Directorates they are shadowing. These briefings, alongside the Forward Plan (see below), can be used to help identify any emerging issues that may be appropriate for future scrutiny. Recognising that work across the County Council is of interest and value to all OSPB members, the notes from these briefings (where produced) are available to all members electronically.

6. Members may also be leading scrutiny task groups. It will be important for Members of OSPB to be aware of how each scrutiny is developing so that they can fully consider the final report.

7. The Board is asked to consider the updates on emerging issues and developments within the remit of each Member of the OSPB, including an update on each Overview and Scrutiny Panel and Task Group.

Work Programme

8. From time to time the Board will review its work programme and consider which issues should be investigated as a priority. The Board is asked to consider and agree its Work Programme for the remainder of 2019/20, taking into account any changed priorities as a result of the COVID-19 pandemic.

9. Worcestershire County Council has a rolling annual Work Programme for Overview and Scrutiny, which is agreed by Council on an annual basis. The last programme was agreed on 12 September 2019.

10. The main responsibilities of the OSPB are:

- Commissioning work for Scrutiny Panels
- Establishing Scrutiny Task Groups (agreeing Terms of reference and Reports)
- Advising on Council's Policy Framework ie Sustainable Community Strategy (if any), Corporate Plan, Children and Young People's Plan, Local Transport Plan, Youth Justice Plan, 'Act Local in Worcestershire' framework, such other plans and strategies as required by law to form part of the Policy Framework or which may be and have been adopted to be part of that Framework eg Corporate Plan, Budget
- Call-ins
- Designated by the Council as its statutory Crime and Disorder Committee and must meet at least annually.

11. The OSPB agreed to use a set of criteria (listed below) to help determine its scrutiny programme. A topic does not need to meet all of these criteria to be scrutinised, but they are intended as a guide for prioritisation.

- Is the issue a priority area for the Council?
- Is it a key issue for local people?
- Will it be practicable to implement the outcomes of the scrutiny?
- Are improvements for local people likely?
- Does it examine a poor performing service?
- Will it result in improvements to the way the Council operates?

- Is it related to new Government guidance or legislation?

12. The Board is asked to consider its 2019/20 Work Programme (attached at Appendix 1) and agree whether it would wish to make any amendments.

Cabinet Forward Plan

13. The Board will wish to consider any issues arising from the Council's Forward Plan which is attached at Appendix 2.

14. The latest version of the Plan (available at the time of Agenda despatch) is routinely considered at each meeting of OSPB.

15. The Board is asked to consider the Council's latest Forward Plan in order to identify:

- **Any items that it would wish to consider further at a future meeting;**
- **Any items that it would wish to refer to the relevant overview and scrutiny panel for further consideration.**

Supporting Information

Appendix 1: OSPB Work Programme 2019/20

Appendix 2: Forward Plan (as at 12 June 2020)

Contact Point for the Report

Alyson Grice/Samantha Morris, Overview and Scrutiny Officers

Tel: 01905 844962/844963

Email: scrutiny@worcestershire.gov.uk

Background Papers

In the opinion of the proper officer (in this case the Democratic Governance and Scrutiny Manager (Interim Monitoring Officer) there are no background papers relating to the subject matter of this report:

[All agendas and minutes are available on the Council's website here.](#)

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OSPB 2019/20 OSPB WORK PROGRAMME

Date of Meeting	Issue for Scrutiny	Date of Last Report	Notes/Follow-up Action
25 March 2020 Cancelled due to Covid-19	Performance and In-Year Budget Monitoring - Feedback from Scrutiny Panels (Period 9 Finance/Q3 Performance October-December 2019)		
	Member Update, Work Programme and Cabinet Forward Plan	Every meeting	
	Refresh of the Scrutiny Work Programme	24 July 2019	
23 April 2020 Cancelled due to Covid-19	Member Update, Work Programme and Cabinet Forward Plan	Every meeting	
	Final Scrutiny Report: Care Work as a Career		
3 June 2020 Cancelled due to Covid-19	Worcestershire LEP Annual Update	23 May 2018 24 May 2019	To be looked at annually A briefing to update Members is being prepared by the LEP.
	Update on the Autism Pathway	28 February 2018 24 May 2019	This issue is now being taken forward by the Children and Families O&S Panel.
	Member Update, Work Programme and Cabinet Forward Plan	Every meeting	
22 June 2020	COVID-19 Update		
	Final Scrutiny Report: Care Work as a Career		

Date of Meeting	Agenda Item(s)	Date of Last Report	Notes/Follow-up Action
	Member Update, Work Programme and Cabinet Forward Plan	Every meeting	
22 July 2020	Annual WCC Community Safety Update	24 July 2019	To be looked at annually
	Refresh of the Scrutiny Work Programme	24 July 2019	To be looked at annually
	Member Update, Work Programme and Cabinet Forward Plan	Every meeting	
23 September 2020	Question Time with the Leader and Chief Executive	n/a	
	Member Update, Work Programme and Cabinet Forward Plan	Every meeting	
19 October 2020	Member Update, Work Programme and Cabinet Forward Plan	Every meeting	
20 November 2020	Member Update, Work Programme and Cabinet Forward Plan	Every meeting	
9 December 2020	Member Update, Work Programme and Cabinet Forward Plan	Every meeting	
TBC	Draft Scrutiny Report: Children and Adolescent Mental Health Services (CAMHS)	10 December 2019	Scrutiny Task Group underway
TBC	Draft Scrutiny Report: Gateway Drugs and Young People	10 December 2019	Scrutiny Task Group agreed
TBC	Draft Scrutiny Report: Elective Home Education	28 November 2018	Scrutiny Task Group agreed

Date of Meeting	Agenda Item(s)	Date of Last Report	Notes/Follow-up Action
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Possible Future Items

TBC	Children and Young People Strategic Partnership Report		Policy Framework Report
n/a	Social Mobility ie the movement of individuals, families, households, or other categories of people within or between social strata in a society. It is the opportunity for those from underprivileged backgrounds to break the boundary of their social class – this would be cross cutting		

Standing Items

n/a	Commissioning work for Scrutiny Panels	As required	
n/a	Establishing Scrutiny Task Groups (agreeing Terms of reference and Reports)	As required	
n/a	Call-ins	As required	
n/a	Advising on Council's Policy Framework ie Sustainable Community Strategy (if any), Corporate Plan, Children and Young People's Plan, Local Transport Plan, Youth Justice Plan, 'Act Local in Worcestershire' framework, such other plans and strategies as required by law to form part of the Policy Framework	As required	

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FORWARD PLAN

FORMAL NOTICE OF KEY DECISIONS TO BE TAKEN BY, AND PRIVATE MEETINGS OF, CABINET (OR OTHER EXECUTIVE DECISION-MAKING BODY OR PERSON)

Forward Plan	Expected Date of Decision	Page No.
		4
Coronavirus Response Potentially Key Decision - Potentially a Cabinet Decision, Cabinet Member Decision or Officer Decision	Within the plan period	5
Scrutiny Report – Care Work as a Career	25 June 2020	6-7
Balanced Scorecard and Corporate Risk Update – Quarter 4 2019/20 Performance Report	25 June 2020	8
'Called In' Decisions or Scrutiny Reports Potentially Key Decision	Within the plan period	9
Notices of Motion Potentially Key Decision	Within the plan period	10

All entries will be for decision by Cabinet unless otherwise indicated

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