

Agenda

Adult Care and Well Being Overview and Scrutiny Panel

Friday, 24 March 2023, 10.00 am

Council Chamber, County Hall, Worcester

All County Councillors are invited to attend and participate

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 Scrutiny on telephone number 01905 844965 or by emailing scrutiny@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.

Adult Care and Well Being Overview and Scrutiny Panel Friday, 24 March 2023, 10.00 am, County Hall, Worcester

Membership

Councillors:

Cllr Shirley Webb (Chairman), Cllr Jo Monk (Vice Chairman), Cllr David Chambers, Cllr Lynn Denham, Cllr Andy Fry, Cllr Paul Harrison, Cllr Matt Jenkins, Cllr Adrian Kriss and Cllr James Stanley

Agenda

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1	Apologies and Welcome	
2	Declarations of Interest	
3	Public Participation Members of the public wishing to take part should notify the Democratic Governance and Scrutiny Manager in writing or by e-mail indicating both the nature and content of their proposed participation no later than 9.00am on the working day before the meeting (in this case 23 March 2023). Further details are available on the Council's website. Enquiries can also be made through the telephone number/e-mail address listed in this agenda and on the website.	
4	Confirmation of the Minutes of the Previous Meeting Previously circulated	
5	Safeguarding Adults (indicative timing 10:05 – 10:50am)	1 - 4
6	Learning Disability Operational Services (indicative timing 10:50 – 11:30am)	5 - 12
7	Update on Social Care Reforms (indicative timing 11:30 – 12:10pm)	13 - 20
8	Performance and 2022/23 In-Year Budget Monitoring (indicative timing 12:10 – 12:40pm)	21 - 40
9	Work Programme Refresh (indicative timing 12:40:12:50pm)	41 - 44

NOTES

Webcasting

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

Date of Issue: Thursday, 16 March 2023

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Members of the Panel are reminded that meetings of the Adult Care and Wellbeing Overview and Scrutiny Panel are Webcast on the Internet and will be stored electronically and accessible through the Council's Website. Members of the public are informed that if they attend this meeting their images and speech may be captured by the recording equipment used for the Webcast and may also be stored electronically and accessible through the Council's Website.

ADULT CARE AND WELL BEING OVERVIEW AND SCRUTINY PANEL 24 MARCH 2023

SAFEGUARDING ADULTS

Summary

1. The Independent Chair and Board Manager of the Worcestershire Safeguarding Adults Board (WSAB) have been invited to discuss progress and developments in safeguarding vulnerable adults in Worcestershire. This will include the Board's Annual Report 2021/22.
2. The Cabinet Member with Responsibility for Adult Social Care has also been invited.

Background

3. The Safeguarding Adults Board is an independent board, which seeks to promote wellbeing and reduce the risk of harm for people with care and support needs. Statutory partners include the County Council, Clinical Commissioning Groups, National Health Services and West Mercia Police.
4. Safeguarding in Worcestershire has a dedicated website: www.safeguardingworcestershire.org.uk which includes useful information, definitions, information about who does what, newsletters, the Board structure, leaflets and WSAB Board papers.
5. The Care Act 2014 placed safeguarding adults on a statutory footing for the first time and made safeguarding boards a legal requirement, although Worcestershire's Board has been in place for several years.
6. The Care Act states that the main objective of a Safeguarding Adults Board is to assure itself that local safeguarding arrangements and partners act to help and protect adults in its area who:
 - have needs for care and support (whether or not the local authority is meeting any of those needs) and;
 - are experiencing, or at risk of, abuse or neglect; and
 - as a result of those care and support needs are unable to protect themselves from either the risk of, or the experience of abuse or neglect.
7. Regular meetings have taken place between the Panel and the Safeguarding Board Chair since the Panel's more in-depth scrutiny review of safeguarding adults in 2011, which recommended regular dialogue between this Panel, the Worcestershire Safeguarding Adults Board Chair and the Director and Cabinet Member, as part of the Panel's monitoring role.

Issues for the Panel to Consider

8. Worcestershire Safeguarding Adults Board Annual Report 2020-2021 is attached at Appendix 1, and is available on the Safeguarding Worcestershire website by following this link [WSAB Annual Report 2021-22](#):
9. The Annual Report provides an overview of the activity of the Board during the year. This includes the safeguarding activity that took place to protect people in Worcestershire with care and support needs at risk of harm during this period. The guidance provided by the Care Act clearly sets expectations for the minimum content for Safeguarding Adults Boards (SAB) and Annual Reports (Schedule 2.4 (1) a-g).

Safeguarding Adults Reviews (SAR)

10. This year the WSAB introduced a 12-month pilot for a rapid review process. The concept of a rapid review was introduced for Local Safeguarding Children Partnerships and locally it was found to identify learning effectively and efficiently. As a result, it was possible to agree recommendations to improve systems and share learning more quickly and there has been a positive cost benefit with a saving of approximately 50% in comparison to following the current SAR protocol for all referrals.
11. During 2021/22, 6 referrals were received by WSAB. A decision was made that the SAR criteria were met in relation to three referrals and it was agreed that the rapid review process was appropriate.
12. Two SARs were completed and signed off by the Board during the year. All the SARs which were published can be found by following this link. [Safeguarding Adults Reviews](#).
13. One joint Domestic Homicide (DHR) and SAR is still awaiting Home Office sign-off before publication can take place (approximately 12-18 month back-log due to COVID-19).

Board Objectives

14. Objectives for 2021/22 were carried over from the previous year due to the need for Health and Care Staff to prioritise their response to Covid-19. Overall good progress was made against the objectives for the year against a background where statutory partners have continued to face significant funding pressures and increased workloads.
15. Key achievements include:
 - a) an extensive review of the Self-Neglect Policy which was relaunched in May 2023. This was undertaken in consultation with a wide range of stakeholders from across all sectors and based on the approach of no wrong door, whereby every contact is seen as an opportunity for intervention and all agencies work with the person rather than referring them elsewhere. The review clarifies the support pathway and introduces the concept of significant harm requiring a S42 enquiry. A copy of the

policy can be found by following this link [WSAB Self-Neglect and Hoarding Policy](#)

- b) Appointment of an Exploitation Coordinator to take forward work on adult exploitation.
- c) Establishment of an Assurance Panel to provide oversight and assessment of the implementation of the recommendations of the Thematic Review into Rough Sleeping
- d) Development of a Complex Adult Risk Management (CARM) frameworks which sets out a clear approach for multi-agency meetings when working with people with complex needs who are at risk of abuse or neglect but don't meet other social care or safeguarding criteria. Further details on this along with a copy of the CARM framework can be found by following this link [WSAB CARM Framework](#)

- 16. The Board also continued to develop its engagement of People with Lived Experience (PWLE) and wider stakeholders in developing all of the above work.
- 17. The Board has continued to seek assurance on how organisations have managed the impact of Covid-19. This has been further exasperated by the difficulties in recruiting and more recent industrial action, so continues to be a focus of the Board.

Activity Data

- 18. Whilst activity data saw an increase in the number of concerns reported compared to the previous year (Table 4.1 page 18) a large proportion of concerns reported relate to people who have been the subject of concerns previously. (Table 4.2 page 18).

Conclusion

- 19. The Annual Report includes details of contributions from each of the key partner agencies of the Board. These illustrate the work that is taking place across the County by the partner agencies to protect adults at risk from harm.
- 20. Discussion of the Annual Report provides the Panel with an opportunity to verify that systems across Worcestershire, including those of the County Council, are working well to safeguard Worcestershire's vulnerable adults. Discussions also enable the Panel to keep up to date with safeguarding statistics and trends, and to explore any issues identified through serious case reviews, and also through the Panel's own scrutiny work.
- 21. Worcestershire Safeguarding Adults Board Annual Report is also presented to the Health and Wellbeing Board.

Purpose of the Meeting

- 22. The Panel is asked to:
 - Consider and comment on the Worcestershire Safeguarding Adults Annual Report
 - understand and discuss key safeguarding statistics from the WSAB

Annual Report 2021/22

- identify any further information needs or potential areas for scrutiny.

Supporting Information

Appendix 1 [Worcestershire Safeguarding Adults Board Annual Report 2021-22](#)

Contact Points

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Specific Contact Points for this report

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Background Papers

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

- Agendas and Minutes of the Adult Care and Well-being Overview and Scrutiny Panel on 15 March 2022, 28 January 2021, 6 November 2019, 12 September 2018, 27 September 2017, 21 November 2016, 22 January and 13 October 2015 and 5 September 2013
- Care Act 2014 Schedule 2 Safeguarding Adults Board

All agendas and minutes are available here: [agendas and minutes](#)

ADULT CARE AND WELL BEING OVERVIEW AND SCRUTINY PANEL 24 MARCH 2023

LEARNING DISABILITY OPERATIONAL SERVICES

Summary

1. The Adult Care and Well Being Overview and Scrutiny Panel has requested an update on changes within Learning Disabilities Operational teams and how they will impact service provision, areas for improvement and progress to date.
2. The Cabinet Member with Responsibility for Adult Social Care and the Strategic Director and Senior Officers from the Directorate of People have been invited to the meeting to respond to any questions the Panel may have.

Background

3. Until February 2019, the Learning Disability Service (LDS) was delivered by Herefordshire and Worcestershire Health and Care NHS Trust (HWHCT). In March 2019, this service returned to Worcestershire County Council (the Council). The LDS supports over 1400 adults with a learning disability within Worcestershire who have identified care and support needs. It consists of two teams located in the north and south of the county. Each team is led by an Area Manager and the teams include Advanced Practitioners, Social Workers and Social Care Workers.
4. In addition, a Vulnerable Adults Team (VAT) supports around 120 adults aged 16 to 25 who have Autism, associated conditions and learning difficulties. This service has been subject of a review to consider the benefits of an 'all-age' model.
5. The Young Adults Team, is now part of the All-Age Disability Service, delivered by Worcestershire Children First (WCF), in which Adult Social Care commissions support for young people with a range of disabilities aged 16 to 25 years.
6. Adult Services retained the VAT to enable further work, considering the development of Autism services and now have robust plans in place now to build this into an Autism and learning difficulty service.

Peer Challenge Outcome

7. In December 2019, the Council was subject of a peer challenge programme with the Association of Directors of Adult Social Services (ADASS). A key line of enquiry was to look at the effectiveness and efficiency of the LDS which, at that time, consisted of two Learning Disability Teams, a Young Adults Team, and Vulnerable Adults Team. This included a review of practice, examining cases from service areas.

8. Several areas of development were identified:
- Joint working in relation to NHS Continuing Healthcare (CHC) funding and decision making/agreement on a joint strategy with the Integrated Care Board (ICB) on the funding of individual packages.
 - Development required in terms of strength-based practice for the service.
 - Development of joint understanding of the funding responsibilities related to an individual with a learning disability discharged from a Mental Health Section 117 (S117) aftercare.
 - Co-production needed to be strengthened.
 - Whether there was an understanding across the Council and partners of the spend and demand pressures faced from the increasing complexity and demand for people with learning disabilities and autism.

Progress since ADASS Peer Challenge Outcome

9. Joint working has continued with the ICB to develop a memorandum of understanding for NHS Continuing Healthcare and formal agreement for joint funding arrangements.
10. The CHC Partnership Working Policy is in place which outlines the dispute process.
11. For the Transforming Care cohort (people who are in or have been admitted to a secure mental health hospital), S117 now includes a 60/40 split agreement for individuals with a learning disability subject to S117 funding. There is a S117 policy, and Dynamic Support Register (DSR) which is kept by HWHCT and monitors individuals at risk of admission to an acute Mental Health Hospital. Staff attend regular meetings with HWHCT to proactively review and monitor this list.
12. For admissions to Acute Mental Health Hospitals for Adults with Learning Disabilities and Autism, the Council is within the required targets set by NHS England and have 4 people in locked rehabilitation and 7 people in secure settings, with these people monitored regularly. There are a few challenges around suitable community providers that are skilled to meet forensic needs and risk management. This is under review via the complex need's framework review. Also, the new policy is being implemented and commitment regarding the DSR needs to be further strengthened by system commitment.
13. The LDS has made real strides in the development of strength-based practice. For the last 12 months and prior, the service has consistently achieved over 90% for staff who have been awarded a rating of good over better in Proud Conversation, the Council's current audit tool. These audits include a huge consideration of how strength-based practice is.
14. In terms of co-production, the LDS has a long-established partnership with the Learning Disability Partnership Board and Autism Partnership Board which includes multiple agencies and most importantly, experts by experience. The service is working with both Boards to develop the updated Learning Disability and Autism strategies.

Care Quality Commission (CQC) Self-assessment

15. As part of the on-going work around preparation for CQC inspection, Adult Social Care is in the process of developing a robust quality assurance framework for practice. The LDS has been the subject of a robust self-assessment to prepare for the upcoming CQC inspection of adult services. There is a thorough self-assessment plan which incorporates a number of actions including the need to have access to specialist training, and key pathways to be developed with partners to be able to access timely specialist support as and when required.

Named Worker Progress

16. The LDS introduced the named worker approach to allocations. This is nationally recognised best practice and aims to create meaningful relationships between individuals and their families, and professionals involved. This results in the allocated worker working pro-actively with the person, provides a consistent approach to safeguarding, court of protection work, multi-agency work including CHC and S117. The worker is then able to respond promptly to changes in need and is a consistent person for care providers to liaise with.
17. The service is in the process of providing all individuals with a named worker, with the opportunity to review with individuals and families, how the named worker approach is working, and this will inform improvements or provide the opportunity to celebrate good practice. So far, frontline staff have been feeding back on its effectiveness, and we are seeking to extend the feedback to families, providers, and other professionals.
18. The named worker approach is a huge strength for the LDS, it has been established in the South of the County initially, and there has been recent investment into the North to operate this model. Senior Officers will continue to monitor this approach as it is dependent on their being adequate staffing within the service which will be kept under review.

Learning Disability Review Project

19. In 2022, the People Directorate Leadership Team (PDLT) agreed investment for an external agency to complete a backlog of outstanding reviews for the LDS. PDLT had previously recognised the proportion of staffing the LDS received when the Central Review Team disbanded was not sufficient for the demand and had agreed some additional posts. However, there was a backlog and vacancies in staffing, impacting on the ability of the service to be able to achieve good review performance. The external agency has supported the LDS to improve the annual review position. Currently, the review performance for the Learning Disability Service is at 90.5% against a target of 95%, the review project will cease in May 2023. The service will then need to ensure that it is able to meet the demand of the reviews going forward in a timely manner.

Commissioning Conversations

20. Joint working with the Commissioning Team is a real strength of the LDS. Currently, there are weekly 'commissioning conversation' meetings with the Team and frontline staff to look at high-cost support packages. These meetings are vital to support with ensuring best value and high-quality services for people

new to the service and people who continue to receive services after their annual review. The meetings and joint working also support strategic commissioning, enabling early planning of services based on current trends and future predicted need.

Transitions

21. The transition of young people into the service from WCF continues to strengthen. The LDS continues to receive referrals from the Young Adult's Team via the existing arrangements. The Vulnerable Adults Team receives transitions for young people, those with autism and learning difficulties from WCF Throughcare Service which sits outside of All-Age Disability. There are operational meetings with both teams to ensure transitions are timely ensuring people have an effective and smooth transition to adulthood, enabling Adult Social Care (ASC) to also manage and forecast the budget effectively.

Pathway Planning Team

22. In 2022 a new social work team was established to work closely with commissioning on ensuring individuals with Learning Disabilities, Autism and Mental Health needs are accessing the most appropriate services for their needs. This team is supporting with re-modelling and re-negotiating services as well as supporting with moves to more appropriate forms of support.

Social Worker of the Year Awards 2022

23. Last year, a member of staff from the LDS south team, was nominated for Newly Qualified Social Worker of the year. This is a nationally recognised award for exceptional Social Worker's and teams, and it is a significant achievement to be nominated.

Co-production

24. The LDS South Team publishes a newsletter which it shares with people who use the service to ensure key updates are shared and we are in the process of developing this in the north too. The service continues to have good links with Speakeasy N.O.W. and regular engagement with experts by experience via the Learning Disability Partnership Board. ASC is strengthening its overall approach to Co-production via the creation of the Building Together Forum, which will launch soon.

Recruitment and Retention

25. In line with national shortages of Social Workers and other neighbouring Councils, recruitment and retention are a key challenge for the LDS. Progress has been made with recruitment, but the Council faces particularly a challenge in the north team which neighbours other authorities such as Birmingham and Warwickshire. To address this, the service is moving towards a 'grow your own' model whereby it supports Social Care Workers to take up the offer of applying for the Social Work degree training, which the Council offers and encourage students on placement and newly qualified staff to remain with the team and develop into the future experienced social workers.

Vulnerable Adults Team Review

26. The Vulnerable Adults Team is the current offer for people with a learning difficulty or autism aged 16-25 and is a very small service. For people with those conditions who are 25 years and above, support is provided by the Area Social Work Teams. To provide a more robust and consistent offer, work has been done to review the service and create an offer with better outcomes for people that is future proof based on growing demand.
27. There is an on-going review to consider potential changes towards a different offer for Adults with Autism and Learning difficulties. The ambition is that this would also include a transition function for individuals with autism and associated conditions and completes assessments for people who are 18+ with a diagnosis of autism and learning difficulty.
28. Potentially changing the service in this way could provide ASC with a consistent and robust offer, and cases of this nature could be transferred from Area Teams to be part of the Adult and Autism service where staff will have specific skills and knowledge for this area of work. There is also an excellent opportunity to grow this service in conjunction with the upcoming Autism strategy. The ambition for the service will be to operate a named worker approach to allocations, in a similar fashion to the LDS. The need for such a service can be seen in the table below which outlines the growing population of individual living within the county with Autistic Spectrum Disorders.

Projected number of people aged 18-64 with Autistic Spectrum Disorders in Worcestershire, 2020-40

	2020	2025	2030	2035	2040
18-24	420	410	456	472	448
25-34	687	690	658	674	730
35-44	676	730	777	782	749
45-54	821	755	746	801	849
55-64	802	875	856	791	788
18-64 total	3,406	3,460	3,492	3,520	3,564

Source – PANSI projections of people with Autistic Spectrum Disorders

29. The number of people with Autistic Spectrum Disorders in Worcestershire is projected to increase from 3,400 in 2020 to almost 3,600 in 2040, an increase of over 150. The 45-54 age range is projected to have the highest number of people with Autistic Spectrum Disorders in 2040.

Case Studies

30. Mr X has come through to ASC for a re-assessment and increase in his support due to an increase in behaviours associated with his diagnosis of Autism and a Severe Learning Disability. Mr X is at risk of admission into a Secure Mental Health Hospital for Learning Disabilities. The Multi-Disciplinary Team are working together to ensure that an admission is prevented, and an assessment is urgently completed so that support can be enhanced to reduce the likelihood of an admission. Completing an assessment will allow for an exploration of the best

value services to meet need. The individual has a named social worker, which means their assessment can be completed promptly by a professional who knows them well. Delaying the re-assessment will lead to an admission into an acute Mental Health (MH) setting, this would also create strain on the ambulance service due to the conveyance required, and there are delays currently with ambulance responses known to the system, this would increase the risk further should Mr X be waiting for transportation to hospital and continue to be in an acute MH crisis.

31. Miss P has Autism and has come through as an assessment request for the current Vulnerable Adults Team as a transitions case. This transition to Adult Services is required now that Miss P has turned 18. The request for Adult Service to assess has come from WCF, and an assessment is needed urgently to determine Care Act eligibility. Miss P is currently in a placement and has complex needs. It is important for Adult Services to complete a timely assessment to determine eligibility and apply a best value approach to the support provided. Adult services need to complete a timely assessment to ensure risks are managed post 18 and the right care provider is meeting needs safely in a cost-effective way. Delaying this assessment will mean that Miss P could have been supported to live in a more independent setting, but instead will remain where they are until a suitable alternative setting can be found. A timely assessment also gives commissioning a good opportunity to find suitable services for young people to promote their independence.

Key Future Priorities

32. LDS key priorities include:

- To retain and recruit staffing into the team to ensure the named worker approach to allocations can continue.
- To transform the current Vulnerable Adult service into a service with a focus on Autism and Learning difficulties.
- To embed the requirements identified within the CQC self-assessment for the Learning Disability service.

Purpose of the Meeting

33. The Panel is asked to:

- Consider and comment on the information provided
- Determine whether any further information or scrutiny on a particular topic is required.

Contact Points

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Background Papers

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

- Agenda and Minutes of the Adult Care and Wellbeing Overview and Scrutiny Panel on 15 November and 28 January 2021
- Agendas and minutes from Cabinet on 22 July and 4 February 2021 and 22 October 2020

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

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ADULT CARE AND WELL BEING OVERVIEW AND SCRUTINY PANEL 24 MARCH 2023

UPDATE ON SOCIAL CARE REFORMS

Summary

1. The Panel will consider an update on the Government's reforms for Adult Social Care and its potential impacts for Worcestershire.
2. The Cabinet Member with Responsibility (CMR) for Adult Social Care and the Strategic Director for People have been invited to the meeting in order to respond to any queries the Panel may have.

Background

3. The key areas of reform, focused within this update are:
 - a) Charging Reform and the introduction of a lifetime cap on the amount people will need to spend on their personal care, alongside a more generous means-test for local authority support.
 - b) Establishment of a Fair Cost of Care.
 - c) Introduction of Care Quality Commission (CQC) Assessment Regime on how Local Authorities discharge their duties under Part 1 of the Care Act (2014).
4. The Panel has been kept informed of reforms taking place in adult social care, with the most recent update on 23rd January 2023. Panel members will therefore be aware of the complexity of the reforms. The change in direction by Government including the delay of introducing the reforms has caused confusion with staff, residents and providers, although great care has been taken to communicate the change.

Charging Reform

5. On 7 September 2021, the Government set out its new plan for adult social care reform in England. This included a lifetime cap on the amount anyone in England would need to spend on their personal care, alongside a more generous means-test for local authority financial support.
6. In December 2021, a white paper, People at the Heart of Care (see background papers), outlined a 10 year vision that put personalised care and support at the heart of adult social care.
7. On 18 July 2022, the Panel received an overview of the Government's review of charging for Adult Care Services.
8. The Government originally proposed that the adult social care charging reforms would be implemented from October 2023. However, at the Autumn Statement

2022, delivered on 17 November 2022, the Chancellor announced that the reforms would be delayed for two years, with the funding allocated “to allow local authorities to provide more care packages.”

9. The Strategic Director for People (DASS) ensured a robust approach was adopted to understanding the Council’s requirements to respond to the change in legislation and a detailed plan of required changes to policy, procedure and processes was developed and communicated.
10. Ahead of the Autumn Statement, officers had commenced activity to ensure all appropriate requirements were in place for the original planned go live date of October 2023.
11. Whilst the timeline for implementation of charging reform changes to be enacted, has been delayed for 2 years, Adult Social Care are continuing to plan and implement changes that will support the introduction of the reforms, whilst also improving accessibility for Worcestershire residents. These improvements include:
 - a) Comprehensive data cleansing – ensuring the Council has accurate and comprehensive data available for all clients
 - b) Re-Design of the Adults Front Door – ensuring capability, skills and capacity to effectively manage all demand into Adults Social Care
 - c) Website refresh – ensuring improved accessibility for residents
 - d) Self Service enablement - enabling professionals and residents to refer and assess their eligibility for care and support on-line.
 - e) Self Service financial assessments – enabling residents to understand their expected contribution towards the costs of their care
12. This activity will further support the Council’s preparation for CQC Inspection which is covered later in this report.
13. Further guidance and confirmation of the revised go live date is awaited from the Government. When this is confirmed, further work will continue in relation to:
 - a) Introduction of a solution for residents to have their care accounts established and available on-line
 - b) Further revision to the Charging Policy – in line with the introduction of the care cap and revised means test
 - c) Review and refresh of current customers’ financial assessments and levels of contribution towards their care.

Fair Cost of Care

14. Key to the implementation of the Care Cap will be calculating the median cost of care in Worcestershire, which was captured under the initiative “fair cost of care.”
15. Now, with the Government decision to delay the adult social care charging reforms for two years, the requirement to move towards the median cost of care was removed, along with any ring-fenced grant for the purpose.

16. Nationally, £162 million was allocated for 2022/3 for Market Sustainability. Worcestershire's proportion of this was £1.6 million which was fully passported to providers and none reserved for undertaking the Department for Health and Social Care (DHSC) exercise. As a result of changes made at the Autumn Statement, the funding from 2023/24 onwards will be allocated in the form of the Market Sustainability and Improvement Fund. Nationally this equates to £400 million for 2023/4, in addition to the £162 million which is recurrent from 2022/3. For Worcestershire this provides a further £4 million of funding in 2023/24, all of which will be passported to providers as part of the annual fee uplift. Indications are for this grant to increase in 2024/25 (to £683 million nationally), and an assumption has been made that this could result in a further £2.8 million of funding for Worcestershire.
17. The DHSC confirmed, just prior to Christmas 2022, that Local Authorities should use this grant to "make tangible improvements to Adult Social Care and in particular address discharge delays, social care waiting times, low fee rates, workforce pressures and promote technological innovation within the sector". The Council's duty has therefore been to ensure that this is how the grant is used, across *all* care sectors to meet the aims set by the DHSC.
18. Establishing a median cost of care, through the analysis of provider submitted data was the first step in the adult social care charging reforms. The cost of care exercise focussed solely on the 18+ domiciliary care markets and the 65+ general and nursing residential care markets.
19. Local authorities were required to submit a range of documents to the DHSC no later than 14 October 2022 in respect of this exercise, with further requirements to be confirmed. The Council met all requirements and received no comments or requests for points of clarification. Fulfilment of all conditions as set by the DHSC was essential in order to receive funding from a specific grant for use in these two market sectors in relation to market shaping, sustainability and fees.
20. The DHSC has been absolutely clear in its communication that the exercise to calculate the median cost of care was not, and is not, intended to replace the Council's duties under Section 5 Care Act 2014 when setting the level of fees for the funding of care in the County.
21. Whilst movement towards the fair, or median, cost of care as originally communicated has now been essentially stalled, local authorities are still required, in order to meet grant conditions to publish some of the documents submitted. The requirements for content of these Annex documents, have been clearly prescribed by the DHSC.

CQC Inspection

22. Since 2010 local authorities have worked together to support their own performance through 'sector-led improvement', typically on a regional basis and involving sharing information and data, and teams of local authority practitioners and managers conducting peer reviews of other authorities. However, from April 2023 the CQC will review and assess the performance of

local authorities in discharging their 'regulated care functions' under Part 1 of the Care Act 2014. Additionally the CQC will have a duty to review how partners are working together across Integrated Care Systems (ICS).

24. The CQC will assess local authorities using a new single assessment framework that builds on the approach that is currently used to assess providers (following five key lines of enquiry: Safe, Effective, Caring, Responsive, and Well-led). They will also draw upon 'I' quality statements used in Think Local Act Personal, 'Making it Real' framework (see background papers), that reflects the most important aspects of personalised and culturally appropriate care. Themes that will be assessed are:

Theme 1: How We Work with People: How local authorities work with people (assessing needs (including unpaid carers, supporting people to live healthier lives, prevention, well-being, information, and advice).

Theme 2: How We Support People: How local authorities provide support (market shaping, commissioning, workforce equality, integration and partnership working).

Theme 3: Ensuring safety: How Local Authorities ensure safety within the system (safeguarding, safe systems, and continuity of care).

Theme 4: Leadership and workforce: Leadership capability within Local Authorities (capable and compassionate leaders, learning, improvement, and innovation)

25. Preparatory works, for the CQC Assurance Readiness Self-Assessment Programme, took place between January and March 2022 which included the development of a range of assessment tools and audits including the CQC Assurance Readiness Self-Assessment Tool which regional and national ADASS has stated is a *“robust approach to self-assessment, the tool represents an excellent aide memoire for the type of evidence that is likely to be considered by CQC in their online and field-based assessments”*.
26. To prepare for CQC assurance, the People Directorate undertook an ambitious self-assessment assurance programme which ran from April to October 2022. This has entailed completing the 'Towards Excellence in Adult Social Care (TEASC) Tool with members of the senior leadership team and Cabinet Member with Responsibility for adult social care, focus groups, surveys, CQC assurance readiness workshops, specialist service area reviews, audits, and assurance tasks with staff, those who use services and their carers, providers, partners, and residents.
27. Completion of the assurance programme has provided the Directorate with an 'as is' picture of the current level of assurance in relation to the Council's regulated care functions under Part I of the Care Act 2014. The assurance programme has enabled the Directorate to evaluate and judge its performance based on local evidence and the viewpoints' of individuals receiving services and support, their caregivers, and partner agencies. The following outcomes of the assurance programme include:

- Further embed self-evaluation for improvement
 - Provide evidence of the organisation's strengths and areas for improvement
 - Further promote a culture of coproduction with service users, their caregivers and residents to support ongoing adult social care improvement.
 - Promote and strengthen partnership working by fostering interorganisational knowledge and trust
 - Enhance the ability to meet the needs of the local community and learners through high-quality, experiential staff development
 - Enhance employee autonomy, leadership, and confidence
28. The CQC Published interim guidance on 24 February 2023. This interim guidance has been approved by the Secretary of State for Health and Social Care as required by the Health and Care Act 2022. Its aim is to help local authorities understand more about the approach during the pilot phase. They will expand and update this interim guidance in collaboration with stakeholders as they develop their model over the coming months and transition to ongoing assessment. It will form the basis for the more detailed guidance about the process due later in the year.
29. The CQC have confirmed that between April 2023 to September 2023 they will begin to review data and published documentary evidence across all local authorities. They will focus on themes in these two quality statements:
- Care provision, integration and continuity
 - Assessing needs
30. They will also look at themes and insight on:
- Access
 - Commissioning
 - Market shaping
 - Workforce
 - Personalisation
31. The CQC **will not** publish this data and evidence at an individual level but instead use their independent voice to publish findings at an overall national level as a collection of overall evidence. This may be through an annual statutory state of care report for Parliament. This national review of adult social care regulatory functions will be the first of two elements towards full assessment of these two quality statements. It will also support the CQC in developing judgements for individual local authorities and provide a context and opportunity to benchmark data collated.
32. Also from April, the CQC will undertake a limited number of pilot assessments with local authorities (they think 5 local authorities will be chosen) and this will take place between April and September 2023.
33. From September to December 2023 formal assessment of local authorities will commence and the aim is to complete 20 assessments. Discussions are still

taking place on what the initial assessment will look like and the best way to publish findings from the pilot assessments.

34. From early 2024, formal assessments will continue and the Government has requested that individual ratings, of local authorities who took part in the pilots, along with assessments, will be published with a description of findings.

In Summary

35. The change in direction by Government, including the delay of introducing reforms has caused confusion with staff, residents and providers.
36. The Council is also currently responding to the findings of the self-assurance process, against the CQC Inspection and has areas of improvement that are being planned and delivered.
37. An added complication for the fee review process has been the changed emphasis as regards the Fair Cost of Care exercise undertaken during 2022 in respect of 18+ domiciliary care services and 65+ residential and nursing care.
38. These changes have not been well understood (or accepted) by providers although great care has been taken to communicate the change.

Purpose of the Meeting

39. The Panel is asked to consider the update provided regarding the Government's reform for Adult Social Care and its potential impacts for Worcestershire and:
 - comment on the approach taken by the Council to meeting the requirements of the reform;
 - consider the impact of the reforms within Worcestershire; and
 - determine whether any further information or scrutiny is required

Contact Points

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Background Papers

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

- Government guidance documents:
 - [People at the Heart of Care: adult social care reform white paper - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/white-papers/people-at-the-heart-of-care)
 - [Market sustainability and fair cost of care fund 2022 to 2023: guidance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/white-papers/market-sustainability-and-fair-cost-of-care-fund-2022-to-2023)
- [Making it Real - Think Local Act Personal](#)
- Agenda and Minutes of the Adult Care and Well-being Overview and Scrutiny Panel on 23 January 2023 and 18 July 2022

All agendas and minutes are available here: [agendas and minutes](#)

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ADULT CARE AND WELL BEING OVERVIEW AND SCRUTINY PANEL 24 MARCH 2023

PERFORMANCE AND 2022/23 IN-YEAR BUDGET MONITORING

Summary

1. The Panel will be updated on performance and financial information for services relating to Adult Care and Well Being.
2. The Cabinet Member with Responsibility for Adult Social Care, the Strategic Director and Senior Officers from the Directorate for People and the Acting Chief Finance Officer have been invited to attend the meeting to respond to any queries from Panel Members.

Performance Information

3. Attached at Appendix 1 is a dashboard of performance information relating to Quarter 3 (October to December 2022). It covers the indicators from the Directorate and corporate level and other management information (as appropriate) which relate to services relevant to this Scrutiny Panel's remit.
4. The Scrutiny Panels consider this information on a quarterly basis and then report by exception to the Overview and Scrutiny Performance Board (OSPB) any suggestions for further scrutiny or areas of concern.

Financial Information

5. The Panel also receives in-year budget information. The information provided is for Period 9 and is attached in the form of presentation slides at Appendix 2.

Purpose of the Meeting

6. Following discussion of the information provided, the Scrutiny Panel is asked to determine:
 - any comments to highlight to the Cabinet Member at the meeting and/or to OSPB at its meeting on 29 March 2023
 - whether any further information or scrutiny on a particular topic is required.

Supporting Information

Appendix 1 – Adult Services Performance Information Dashboard
Appendix 2 – Budget Monitoring Information for Period 9 2022/23.

Contact Points

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Background Papers

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

- Agenda and Minutes of the Adult Care and Well Being Overview and Scrutiny Panel on 23 January 2023, 7 November, 28 September, 18 July, 15 March and 14 January 2022, 15 November, 29 September, 8 July and 28 January 2021, 18 November, 22 September, 27 July and 27 January 2020, available on the website: [Weblink for agendas and minutes](#)
- Agendas and minutes of the Overview and Scrutiny Performance Board on 7 December, 20 October, 29 September, 20 July, and 23 March 2022, 17 November, 30 September and 21 July 2021

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

Adult Care and Well-being Scrutiny Panel - Summary Report

Q3: December 2022

Key Priorities ASC Business Objectives:

Reduce the number of older adults and adults aged 18-64 whose long-term support needs are met by admission to care homes.

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

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

Prevent, reduce or delay the need for care

1. Admissions to Permanent Care per 100,000 (18-64)

2022-23 Target rate = 16

Worcestershire 18-64, Population = 347,701, population updated November 2022

Good Performance = Lower

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

Analysis:

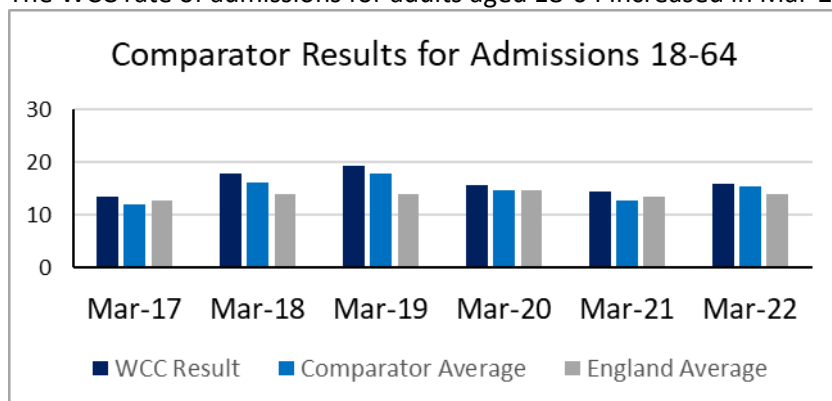
This national indicator looks at planned admissions and as such includes 12-week disregards, so potentially some of those included will eventually become self funders.

The data includes people within the age group 18-64 who have physical disabilities, learning disabilities or mental health issues.

Controls are in place to ensure that permanent admissions are minimised and are only used where there is no other support available in a community-based setting. Work is ongoing to ensure that maximum use is made of services such as supported living, and all options to support adults aged 18-64 to remain living independently or with families are considered as a priority.

Comparator Data: (Latest national data available is Mar-21)

The WCC rate of admissions for adults aged 18-64 increased in Mar-22 to 15.8 and is also above the comparator and England average.



Year / Month	WCC Result	Comparator Average	England Average
Mar-17	13.3	12.0	12.8
Mar-18	17.9	16.0	14.0
Mar-19	19.3	17.8	13.9
Mar-20	15.5	14.7	14.6
Mar-21	14.4	12.8	13.3
Mar-22	15.8	15.3	13.9

Worcestershire Results (Reporting Method: Rolling 12 months, Q3= January 2022 to December 2022)

Month	Mar-21	Jun-21	Sept-21	Dec-21	Mar-22	Jun-22	Sept-22	Dec-22
Result and RAG	14.4	17.6	20.5	19.9	15.8	16.1	16.1	16.7
Numerator	49	60	70	68	54	56	56	58

Admissions per Month	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Total
No. of Admissions	0	4	6	2	9	1	9	8	5	7	5	2	58

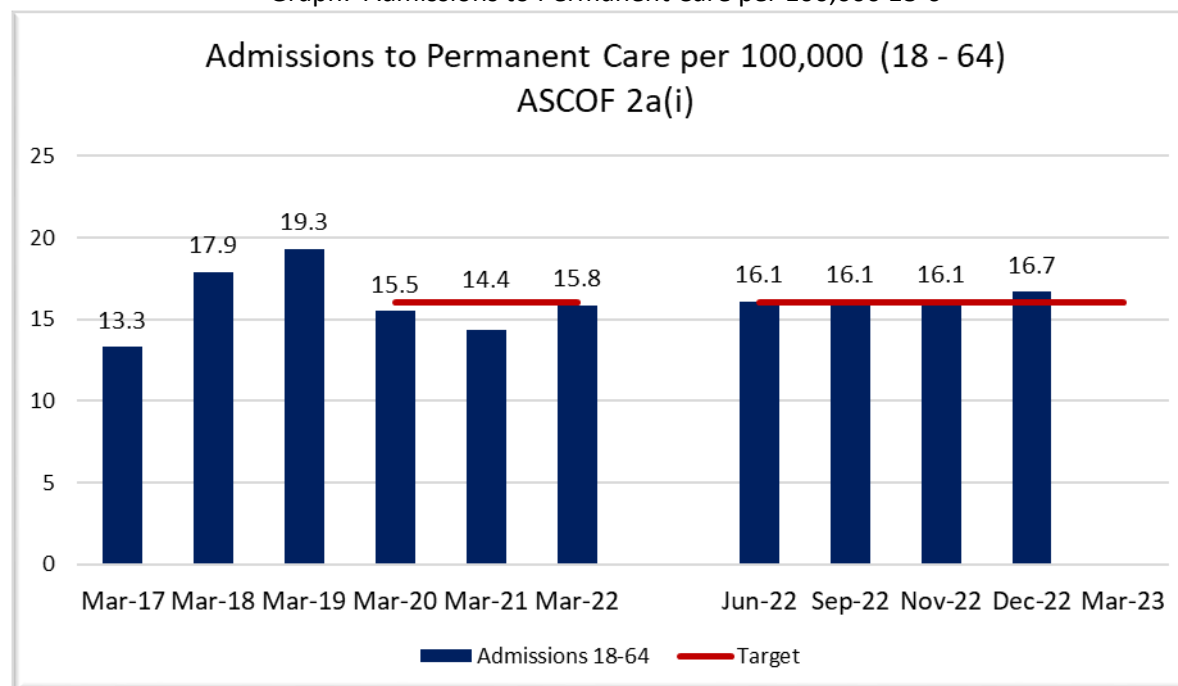
Commentary:

Over the period 2019-2021, the rate of admissions for adults aged 18-64 people fell and was particularly low in Mar-21 due to the pandemic. Numbers rose during 21-22, declining towards the end of the year but remaining higher than the previous year. National results for 21-22 show Worcestershire just over the comparator average and higher than the national average (where good performance is low).

Through 2022-23 the rate has been at 16 – for Q3 the rate is 16.7 or 58 people (amber).

The action plan to focus on demand and spend is now fully established. All placements are routinely scrutinised and alternatives to admission considered as the preferred option. Additional scrutiny of all funding decisions is currently in place to ensure maximum use of prevent, reduce and delay options to maximise people’s independence wherever possible. Where long term funded services are required, we are using best value principles and identify any themes/improvement actions.

Graph: Admissions to Permanent Care per 100,000 18-6



2. Admissions to Permanent Care per 100,000 (65+)

2022-23 Target rate = 604

Worcestershire 65+, Population = 138,036, population updated November 2022

Good Performance = Lower

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

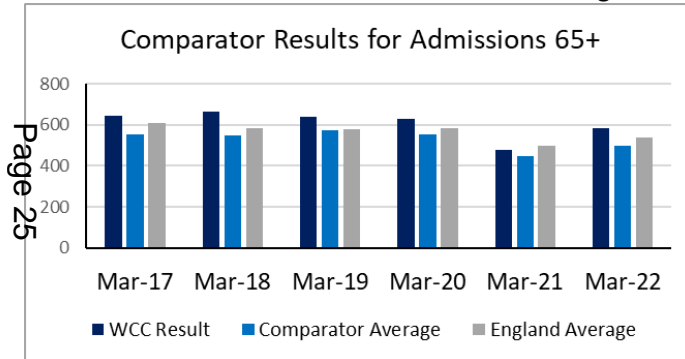
Analysis:

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

The aim is to support older people to remain living independently, in their own homes, for as long as possible. Measures are in place to ensure that admissions only occur where there is no other option to meet a person's needs. There are audits of new admissions each month to ensure they are appropriate and to identify any key trends/themes. These are reported to the Assistant Director and to PDLT monthly. As the population ages and has increasingly complex needs the pressure on preventing admissions becomes increasingly challenging. There will be an implication of Covid on people's long-term health and well-being that could impact on the need for 24/7 care.

Comparator Data: (Latest national data available is Mar-21)

The WCC rate of admissions for 65+ increased significantly in this period and is still above the comparator and England average.



Year / Month	WCC Result	Comparator Average	England Average
Mar-17	642.0	552.2	610.7
Mar-18	663.9	549.8	585.6
Mar-19	637.9	571.3	579.4
Mar-20	629.1	553.7	584.0
Mar-21	475.8	447.2	498.2
Mar-22	585.0	498.6	538.5

Worcestershire Results (Reporting Method: Rolling 12 months, Q3= January 2022 to December 2022)

Month	Mar-21	Jun-21	Sept-21	Dec-21	Mar-22	Jun-22	Sept-22	Dec-22
Result and RAG	475.8	595.2	659.1	639.6	585.0	540.4	495.5	517.26
Numerator	654	818	906	879	804	746	684	714

Admissions per Month	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Total
No. of Admissions	58	67	71	53	76	51	42	62	53	53	75	53	714

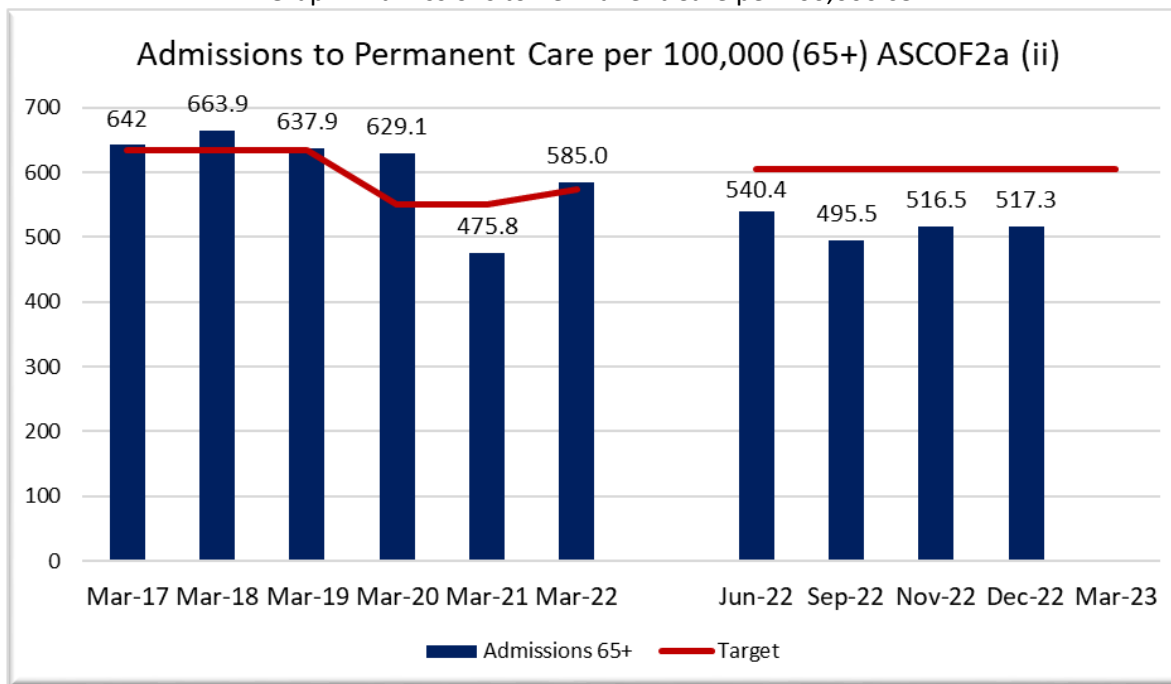
Commentary:

Since 2018 the rate of admissions for older people has been falling - this dropped significantly in Mar-21 due to the pandemic, and although it rose in Mar-22 it was still below the rate in Mar-20. It has remained below this through 2022-23.

For December the result has increased to a rate of 517.26 or 714 admissions (rated green).

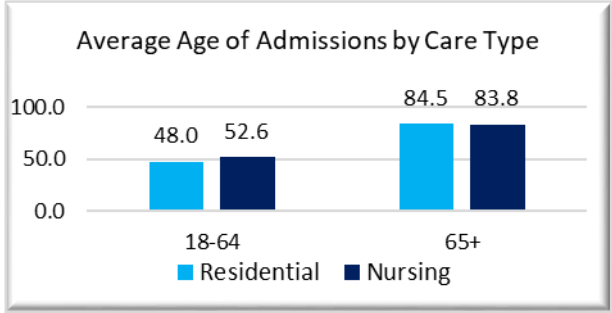
Work streams to address this are ongoing. An action plan has been established to focus on demand and spend. High-cost packages, authorisations and actions post review are being scrutinised as part of this. Ongoing work with Commissioners looking at extra care provision, Continuing Health care decisions continues as does the scrutiny of all new placements. Additional scrutiny of all funding decisions is being completed to ensure maximum use of prevent, reduce and delay options to maximise people's independence wherever possible. Where long term funded services are required, we are using best value principles and identify any themes/improvement actions. The conclusion of a recent audit of admissions revealed high levels of confidence that staff are avoiding long term care that placements made could not have been further delayed. Decisions relating to Level 4/critical incident levels within acute hospitals are likely to impact on numbers requiring long term care home placements.

Graph: Admissions to Permanent Care per 100,000 65+

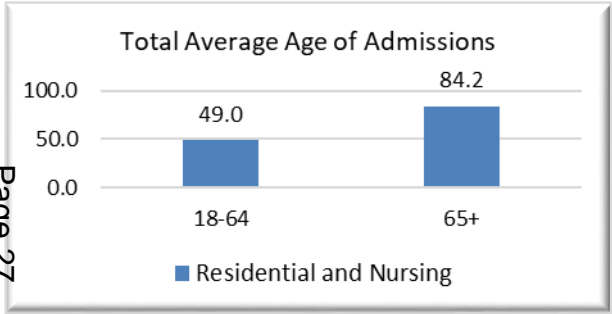


Profile of People Admitted to Long Term Care (Reporting Method: Rolling 12 months, Q3= January to December 2022)

Average Age of Admissions by Care Type



Type of Care	18-64	65+
Residential	48.0	84.5
Nursing	52.6	83.8

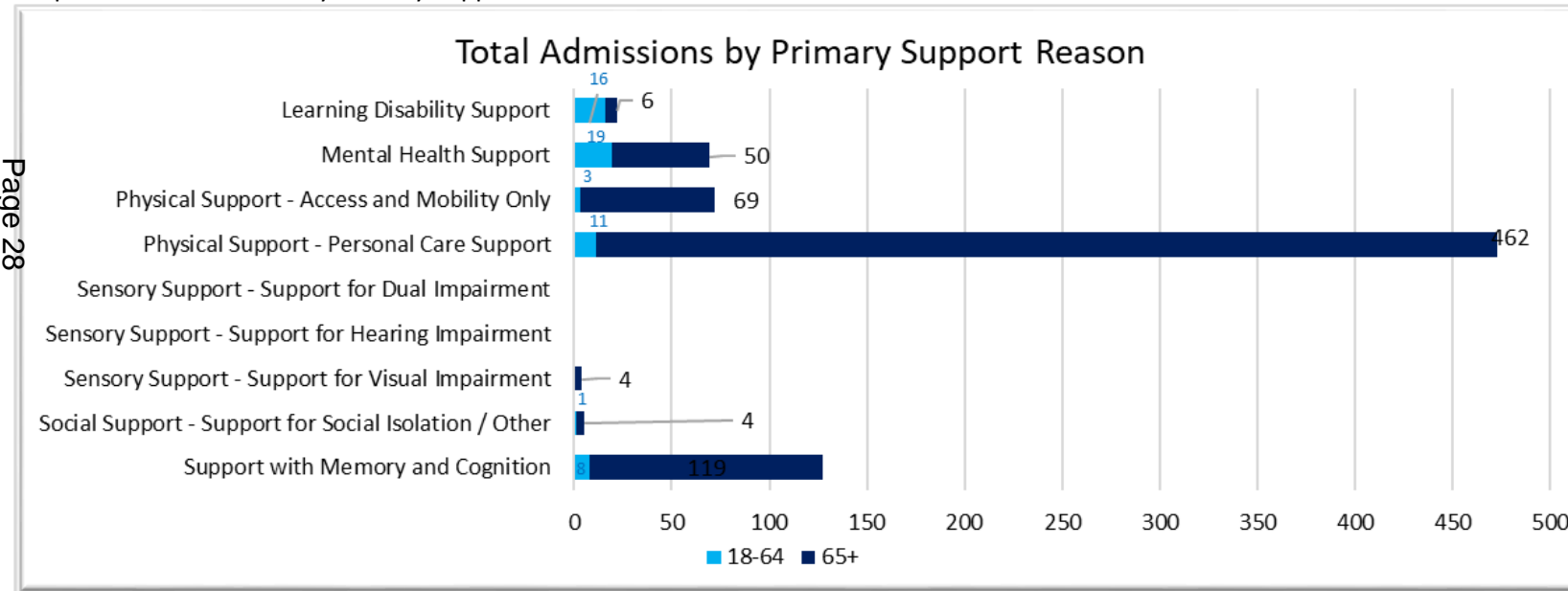


Type of Care	18-64	65+
Residential and Nursing	49.0	84.2

Admissions by Primary Support Reason – Residential and Nursing

Primary Support Reason	18-64	65+	Total
Learning Disability Support	16	6	22
Mental Health Support	19	50	69
Physical Support - Access and Mobility Only	3	69	72
Physical Support - Personal Care Support	11	462	473
Sensory Support - Support for Dual Impairment	0	0	0
Sensory Support - Support for Hearing Impairment	0	0	0
Sensory Support - Support for Visual Impairment	0	4	4
Social Support - Support for Social Isolation / Other	1	4	5
Support with Memory and Cognition	8	119	127
Grand Total	58	714	772

Graph: Total Admissions by Primary Support Reason



3. Outcomes of Short-term Services

2022-23 Target rate = 83.5%

Good Performance = Lower

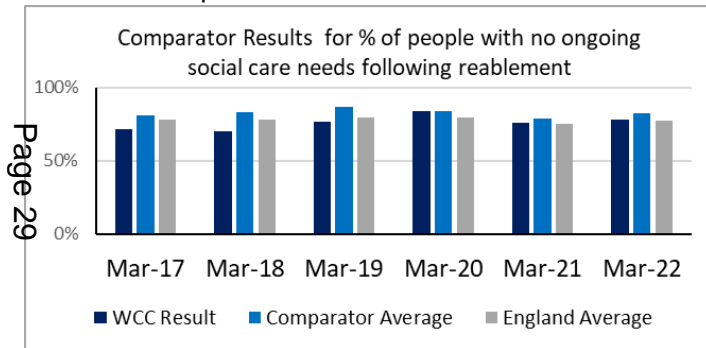
Definition: Proportion of people with no ongoing social care needs following a reablement service - sequel to short term services to maximize independence. (ASCOF2d)

Analysis:

This is a national ASCOF indicator which measures rehabilitation success rates for people (all ages 18+), in terms of the percentage who do not require ongoing services following a reablement service. In Worcestershire this has related solely to services provided by the Urgent Promoting Independence Team (UPI) (focusing on hospital discharge) but from Oct-21 the new community reablement service is also included. The community team have assisted with hospital discharges at various stages within the pandemic. COVID-19 has significantly impacted the cohort of people using these services, particularly for those discharged from hospital where the focus has needed to be on system flow. New hospital discharge models were in place from the start of Covid-19 and have meant that more complex people are being given the opportunity for reablement and leaving hospital via Pathway 1 with the UPI team.

Comparator Data: (Latest national data available is 2020-21)

The latest comparator data available is 2021-22. The result for WCC was 78.4% - which is higher than the England average but below comparators.



Year / Month	WCC Result	Comparator Average	England Average
Mar-17	71.7%	81.2%	77.8%
Mar-18	70.1%	83.5%	77.8%
Mar-19	76.6%	86.7%	79.6%
Mar-20	84.2%	83.9%	79.5%
Mar-21	76.0%	79.1%	74.9%
Mar-22	78.4%	82.7%	77.6%

Worcestershire Results (Reporting Method: Q3 = April to December 2022, monthly data, cumulative)

Month	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sept-22	Oct-22	Nov-22	Dec-22
Result and RAG	78.4%	78.6%	78.9%	80.8%	80.6%	81.9%	82.1%	81.8%	82.1%	82.6%
Numerator	1135	110	220	341	432	530	623	762	892	1012

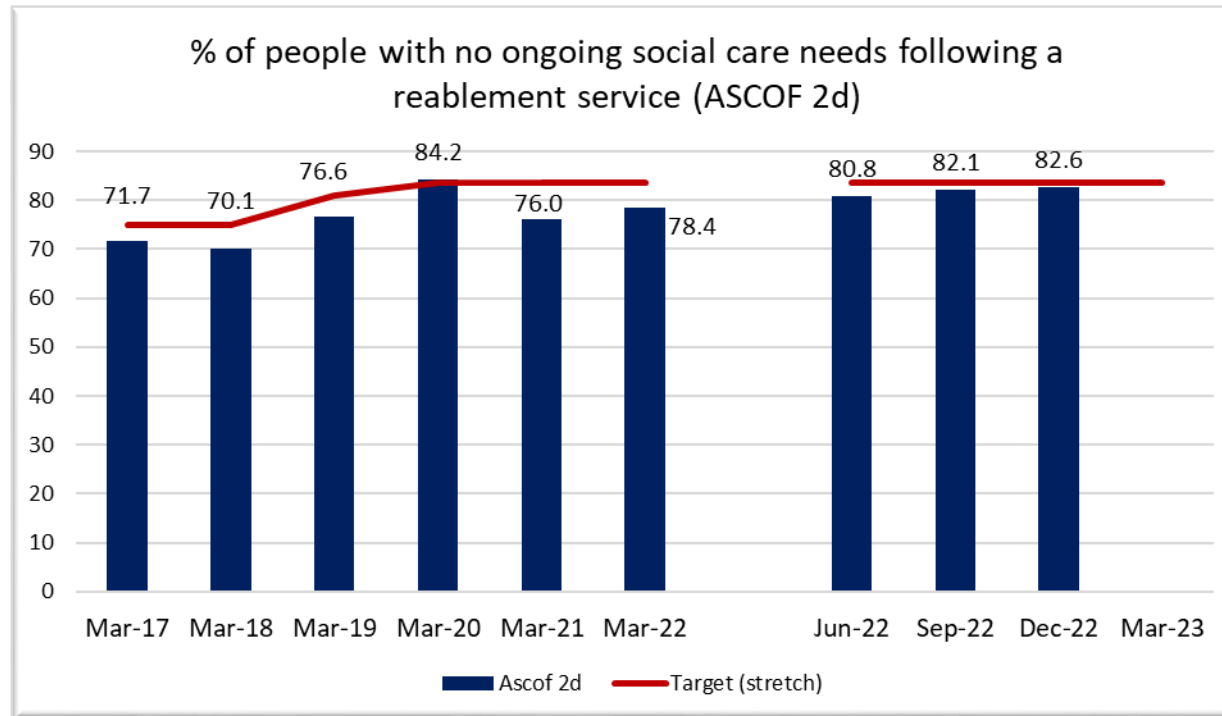
Commentary:

For 2020-21 the result was 76% compared with 84.2% in the previous year. This decrease is linked to pressures during the pandemic meaning people with more complex needs were discharged from hospital through pathway one to facilitate hospital discharge and flow across the whole system.

In 2021-22 the result has gradually increased to 78.4% at Mar-22 and have continued to steadily increase despite continued pressures across the system, more people using the services and having more complex needs.

For Q3 2022-23 the monthly results have gradually increased from 78.6% in April to 82.6% in December 2022.

Graph: Percentage of people with no ongoing social care needs following a reablement service.



4. People Aged 65+ at home following Rehabilitation

2022-23 Target rate = 82.0%

Good Performance = Lower

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

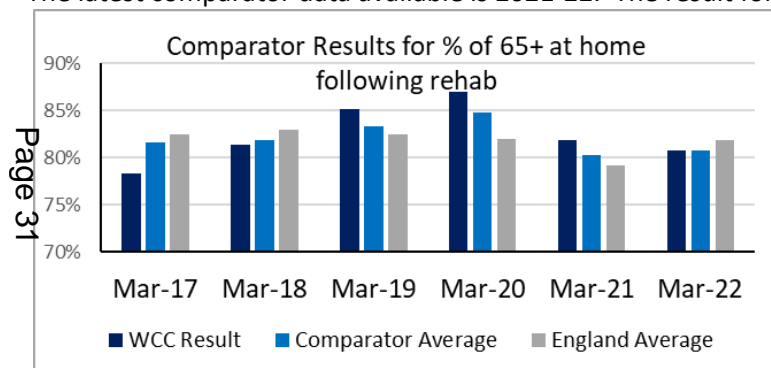
Analysis:

This is a national indicator that measures the percentage of older people who have completed a reablement program on discharge from hospital and are still at home 91 days later, on a quarterly basis. Reablement services include some that are health led.

The acute hospitals are under increasing pressure, and there continues to be higher acuity in patients discharged to reablement services. These services support people being discharged to remain independent for as long as possible, and it becomes increasingly challenging to ensure that they are at home after 91 days as the needs of people using these services become more complex. As before, COVID-19 has significantly impacted this cohort of people.

Comparator Data: (Latest national data available is 2020-21)

The latest comparator data available is 2021-22. The result for WCC was 80.8% - the same as comparator average but lower than England average.



Year / Month	WCC Result	Comparator Average	England Average
Mar-17	78.3%	81.6%	82.5%
Mar-18	81.4%	81.8%	82.9%
Mar-19	85.1%	83.3%	82.4%
Mar-20	86.9%	84.7%	82.0%
Mar-21	81.8%	80.2%	79.1%
Mar-22	80.8%	80.8%	81.8%

Worcestershire Results (Reporting Method: 3 months running total, Q3 = October to December 2022)

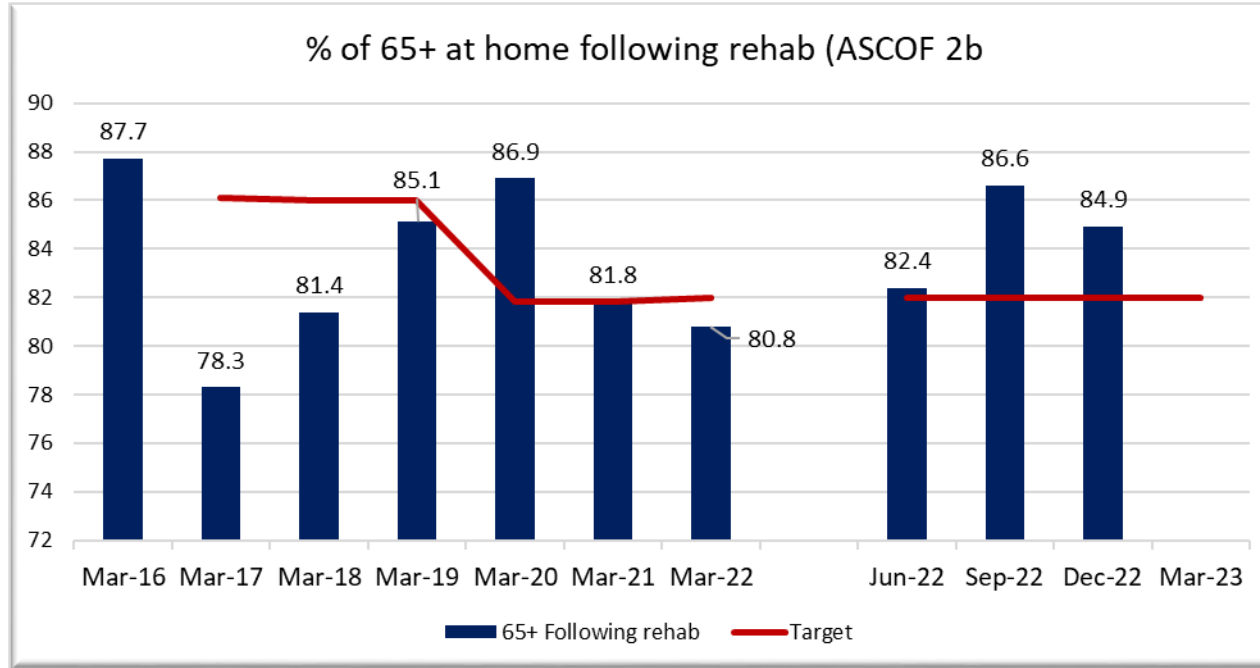
Month	March 2022	June 2022	September 2022	December 2022
Result and RAG	80.8%	82.4%	86.6%	84.9%
Numerator	497	548	625	631

Commentary:

Despite the pressures across the health and social care system due to Covid, performance on this measure for 2021-22 was 80.8%. This was lower than the pre-pandemic level in Mar-20 of 86.9% but a good result considering pressures on the system and acuity of need and in line with comparators.

For Q3 2022-23 the result has dropped to 84.9% compared to 86.6% last quarter. The level of positive outcomes remained constant for Neighbourhood team results, but due to higher acuity of those with the Reablement Team more people had died or returned to hospital in Q3.

Graph: Percentage of 65 plus at home following rehab. Showing yearly results from March 2016 to March 22. Then Quarterly for 2022-23.



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5. Annual Care Package Reviews Completed

2022-23 Target rate = 95.0%

Good Performance = Higher

Definition: Percentage of people in services for twelve months who had a review completed in those twelve months or whose review is in progress at that point.

Analysis:

This is a local measure that looks at people who have been in receipt of services for a year or more and checks that they have been reviewed in that period.

Worcestershire Results (Reporting Method: Rolling 12 months, Q2 = October 2021 to September 2022)

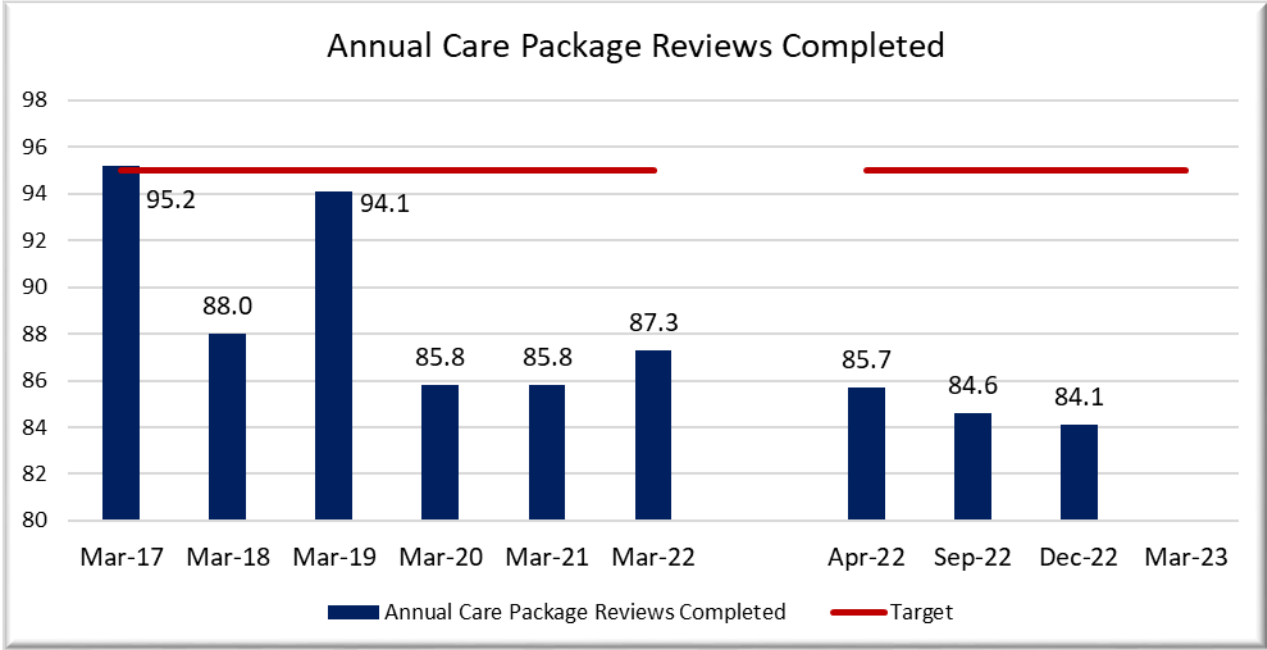
Month	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22
Result and RAG	87.2%	88.4%	87.3%	85.7%	86.3%	86.0%	85.7%	86.1%	84.6%	85.2%	84.6%	84.1%
Numerator	4143	4222	4184	4109	4149	4149	4045	4063	4003	3997	3974	3964

Commentary:

Performance for Q3 2022-23 has decreased to 84.1%. Increased demand (more contacts and more people receiving services) is impacting on reviewing capacity as are staffing issues. Processes are being reviewed to identify efficiencies. Overtime has been agreed to target reviews. The Learning Disability service results continue to improve using the

support of an external provider. For mental health teams results have been impacted by a previous project last year with one large provider meaning a number of reviews carried out there are now due again. Plans are in place to prevent this happening next year.

Graph: Annual Care Package Reviews Completed. Showing yearly results from March 17 to March 22. Then Quarterly for 2022-23.



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Adult Care and Well Being Overview and Scrutiny Panel

24 March 2023

**Forecast Outturn 2022/23
As at Period 9 (December)**

P9 (Quarter 3) Forecast Financial Position – Adults

Adults Revenue Forecast	2022-23 Gross Budget Q3	2022-23 Net Budget Q3	2022-23 Forecast Outturn Q3	2022-23 Forecast Variance Q3	2022-23 Forecast Variance Q1	2022-23 Forecast Variance Q2
	£'000	£'000	£'000	£'000	£'000	£'000
Older People	106,517	72,733	73,794	1,061	1,984	2,754
Learning Disabilities	77,071	65,626	69,598	3,972	3,235	3,253
Physical Disability	20,864	16,408	18,262	1,854	1,888	1,823
Mental Health	27,771	18,927	21,824	2,897	1,923	1,694
Adults Commissioning Unit	19,774	340	-258	-598	-77	81
Central Services (incl iBCF and Social Care Grant)	1,488	-35,125	-38,044	-2,919	-2,454	-2,997
Provider Services	10,720	9,694	9,858	164	0	0
TOTAL ADULTS	264,205	148,603	155,034	6,431	6,499	6,608

Key Headlines – Adults

- Continuation of underlying overspend from 21/22 which was £6.1m offset by one-off mitigation
- Additional activity and increased unit costs are causing pressures on all placement budgets
- Already 3% growth since end of March (increase of 227)
- Forecast to be 4% by year end
- Gross overspend of £13.4m partially offset by £7m of one-off mitigation = £6.4m net overspend
- Offset in year by underspends in budget allocated for Liberty Protection Safeguards, one-off income, use of reserves and temporary savings relating to vacant posts
- Contribution of £2.7m towards corporate savings target

Key Forecast Variances – Adults

Older People - £3.3m overspend

- 4% increase in client numbers since 1 April and increase in costs
- Residential care – 95 additional clients since 1 April and 9% increase in unit costs (£65 / client / week)
- Nursing Care – 6% increase in unit costs (£55 / person / week)
- Direct Payments – 12% increase in unit costs (£40 / person / week)

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Learning Disability - £4m overspend

- 5% increase in client numbers since 1 April and increase in costs
- Residential by 14% (£193 / person / week)
- Nursing by 13% (£182 / person / week)
- Domiciliary care by 11% (£48 / person / week)
- Supported living by 9% (£89 / person / week)

Key Forecast Variances continued – Adults

Mental Health - £2.9m overspend

- Unit cost increases mainly relating to clients supported under s117 of Mental Health Act
- An average supported living placement is 23% greater than 1 April (£186 / client / week)

Physical Disability - £1.9m overspend

- Increase in unit costs
- Home care average weekly costs have increased by 17% since 1 April (£42 / person / week)

Provider Services – overspend relating to staff overtime payments

Support services - underspend due to additional one-off Direct Payment and CHC income recovery

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ADULT CARE AND WELL BEING OVERVIEW AND SCRUTINY PANEL 24 MARCH 2023

REFRESH OF THE SCRUTINY WORK PROGRAMME 2023/24

Summary

1. The Panel is being asked to consider suggestions for its 2023/24 Work Programme prior to it being submitted to Council for approval.

Background

2. Worcestershire County Council has a rolling annual Work Programme for Overview and Scrutiny. The Panel routinely reviews its work programme at each meeting to consider which issues should be investigated as a priority.
3. In addition, on an annual basis, the rolling annual Work Programme for Overview and Scrutiny is approved by Council.

Scrutiny Work Programme 2023/24

4. The Scrutiny Work Programme for 2023/24 is now being refreshed. Panel Members and other stakeholders have been invited to suggest topics for future scrutiny.
5. The suggestions are detailed on the draft Work Programme (attached at Appendix 1).
6. Members are asked to consider the draft Work Programme and agree its priorities for 2023/24. Issues should be prioritised by using the scrutiny feasibility criteria agreed by OSPB.
7. The Overview and Scrutiny Performance Board will receive feedback on the Scrutiny Panels' and the Health Overview and Scrutiny Committee's discussions and agree the final Scrutiny Work Programme at its 27 April meeting. Council will be asked to agree the Work Programme at its meeting on 18 May.

Feasibility Criteria

8. The criteria (listed below) will help to determine the 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?

Remit of the Panel

9. The Adult Care and Well Being Overview and Scrutiny Panel is responsible for scrutiny of:
- Adult Social Care
 - Health and Well-being

Dates of Future 2023 Meetings

- 22 May at 2pm
- 14 July at 10am
- 13 October at 10am
- 5 December at 10am

Purpose of the Meeting

10. The Panel is asked to consider and prioritise the draft 2023/24 Work Programme and consider whether it would wish to make any amendments. The Panel will wish to retain the flexibility to take into account any urgent issues which may arise.

Supporting Information

Appendix 1 – Adult Care and Well Being Overview and Scrutiny Panel Work Programme 2023/24

Contact Points

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

Background Papers

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

[Agenda for Overview and Scrutiny Performance Board on Wednesday, 25th May, 2022, 10.00 am - Worcestershire County Council \(moderngov.co.uk\)](#)

All Agendas and Minutes are available on the Council's website [weblink to Agendas and Minutes](#)

SCRUTINY WORK PROGRAMME 2022/23

Adult Care and Well Being Overview and Scrutiny Panel

Date of Meeting	Issue for Scrutiny	Date of Last Report	Notes/Follow-up Action
24 March 2023	Update on Social Care Reforms	18 July 2022	
	Safeguarding Adults Annual Update	15 March 2022	
	Learning Disabilities Operational Service		
	Performance (Q3 October to December) and In-Year Budget Monitoring	7 November 2022	
22 May 2023	The Council's Adult Services Replacement Care Offer (previously known as respite)		
	Independence Focussed Domiciliary Care Service in Worcestershire		Directorate Suggestion February 2022
	Performance (Q4 January to March) and In-Year Budget Monitoring		
6 July 2023 – Joint with Children and Families Overview and Scrutiny Panel	<ul style="list-style-type: none"> • All Age Disability (0-25) Service (ongoing Scrutiny of the transformation of the Service) • Learning Disability Strategy • Autism Strategy • Carers Strategy 	11 January 2021	
		15 November 2021	
Possible Future Items			
14 July 2023	Update on Better Care Fund	23 January 2023	
	The role and cost benefit of Assistive Technology in Care Planning	14 January 2022	
13 October 2023	Performance (Q1 April to June) and In-Year Budget Monitoring		

5 December 2023	Performance (Q2 July to September) and In-Year Budget Monitoring		
TBC	Update on The Role of Adult Social Care in Complex Hospital Patient Discharges	7 November 2022 18 July 2022	
TBC	NHS Continuing Health Care (CHC), including any funding implications		Directorate Suggestion July 2022
TBC	How the Council works with Carers		Panel suggestion 8 July 2021
TBC	The role and cost benefit of Assistive Technology in Care Planning		Discussed at the 14 January 2022 meeting
TBC	Update on Direct Payments		Added at the 20 May 2022 Meeting
TBC	Staff Vacancies and retention		Requested at 28 September 2022 meeting
TBC	Liberty Protection Safeguards – awaiting national guidance on implementation		Panel member suggestion March 2022
Standing Items			
Annual	Safeguarding Adults Annual Update	28 January 2021 15 March 2022 24 March 2023	Annual Update from Worcestershire Safeguarding Adults Board
Annual	Compliments and Complaints for Adult Services	15 November 2021 28 September 2022	Annual Report
Quarterly	Performance and In-Year Budget Monitoring		