DECISION-MAKER:	HEALTH OVERVIEW AND SCRUTINY PANEL		
SUBJECT:	ADULT SOCIAL CARE UPDATE		
DATE OF DECISION:	24 OCTOBER 2019		
JOINT REPORT OF:	SERVICE DIRECTOR, ADULTS, HOUSING AND COMMUNITIES, AND DIRECTOR OF QUALITY AND INTEGRATION (INTERIM DIRECTOR OF ADULT SOCIAL SERVICES)		
CONTACT DETAILS			
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STATEMENT OF CONFIDENTIALITY		
Not applicable		
BRIEF SUMMARY		
This paper outlines the transformation journey the service is on, including reference to the Peer Challenge findings, the council's proposed investment in staff and quality, the new 'Making Social Care' Partnership Board and the structure and approach of the Improvement Programme. Reflecting the wide remit of the service and to provide context, the service's performance is presented by way of the monthly dataset and the Care Quality Commission local profile for older people. The report briefly references developments relating to the Local Safeguarding Adults Board.		
RECOMMENDATIONS:		
	(i)	That the Panel notes the current performance in Adult Social Care and the progress being made towards improving services in line with the findings of the Local Government Association peer challenge.
	(ii)	That the Panel notes the council's response to the Local Authority Data Profile: Older People's Pathway, published by the Care Quality Commission.
	(iii)	That the Panel notes the arrangements in place for the interim Chair of the Local Safeguarding Adults Board and steps being taken to recruit a permanent Chair.
REASONS FOR REPORT RECOMMENDATIONS		
1.	The Chair of the Health Overview and Scrutiny Panel has requested an update on these topics.	
ALTERNATIVE OPTIONS CONSIDERED AND REJECTED		
2.	Not applicable.	

DETAIL (Including consultation carried out)	
LOCAL GOVERNMENT ASSOCIATION PEER CHALLENGE	
3.	The report of the Peer Challenge was finalised on 18 September 2019, has been published on the council's website and is attached at Appendix 1. Paragraphs 4 to 10 below are adapted from the Executive Summary of this report.
4.	The council requested that the Local Government Association undertake an Adult Social Care Peer Challenge at the council and with partners. The work was commissioned by Sandy Hopkins, Chief Executive, and Richard Crouch, Chief Operations Officer. They were seeking an external view on the state of the adult social care service and to use the findings as a marker on their improvement journey. The specific scope was to give a clear base from which to reframe the work of the department, in particular: • Is social work practice in line with delivering within the statutory requirements of the Care Act? • Do we have sufficient capacity and capability within the workforce? • Is the budget set at the correct levels? • Does the council have the right strategy and governance arrangements in place to deliver its adult social care objectives?
5.	It was clear to the peer team from the pre-reading and the conversations they engaged in while onsite in Southampton that senior leaders from across the council, both Members and officers see a significant opportunity to transform the council. They found the adult social care management team to be commendably honest about the position of the service in the self-assessment for this work. Throughout the onsite work there were few things of which they were unaware. If peer challenge is, in part, an assessment of self-awareness it is to their credit that very few things were discussed with them were a surprise. Being in this position makes it easier to improve.
6.	The key changes that need to be made are fully understood by the leadership in that the strategic resources review needs to be agreed and fully implemented. As part of this there will be the appointment of a permanent Director of Adult Social Services (DASS) with statutory responsibility for both commissioning and delivery of adult social care which should ensure that there are clear lines of accountability, responsibility and reporting to Members, partners and staff. This will provide the stability adult social care requires.
7.	Through this process in adult social care it needs to be ensured that there is sufficient leadership and capacity at all levels to deliver the service from the Director of Adult Social Services, through the Assistant Director level, middle and frontline managers. When this structure is put in place, it is recommended that the council considers how to ensure there is a good understanding of social work practice and safeguarding at a senior level, so that when decisions about frontline service delivery are made they are informed by this knowledge, with senior colleagues and Elected Members fully appraised of risk when advice and guidance is given.

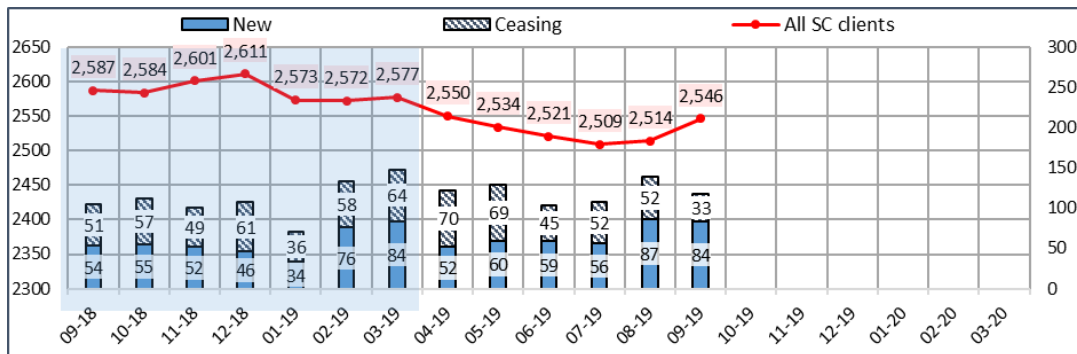|	
8.	The service needs to create a base budget for adult social care based on need and then a strategy to deliver the service within these resources. This understanding of what is required should then be used to negotiate with colleagues both inside and outside the council about what good adult social care delivery looks like. This process should create clarity and confidence for adult social care at all levels. Thus, it should be possible to address the culture of anxiety and the capacity issues that hinder its ability to work really well for people.
9.	Lead Members are dedicated to working with adult social care staff to provide good leadership and direction and it is a positive position to be in that there are good partnership relationships across the City. There are strong relationships with health to deliver integration as well as the good work of the Joint Commissioning Board and the Integrated Commissioning Unit (ICU). The ICU's focus is on transformation and creating system change of which Adult Social Care is a key element.
10.	Senior managers recognise the need to strengthen the approach to communicating the new vision and strategy for Southampton across adult social care and its partners, so that staff are clear about the way forward and how they can play their part in it. In order to contribute to this transformation staff will need more support in managing changing cultures and ways of working.
CORPORATE RESOURCE REVIEW	
11.	As referenced in the findings of the peer challenge, a consultation on a restructure of the council's senior leadership team took place between 13 August 2019 and 26 September 2019. The new structure has been confirmed with a new role of Executive Director, Wellbeing (Adults and Health), which will oversee all elements of adult social care operations and commissioning, in line with the Peer Challenge recommendations. The post holder will be the statutory Director of Adult Social Services and will also oversee public health. The council has advertised this vacancy with a closing date of 4 November 2019 and the Chief Officers Employment Panel is scheduled to meet to consider the appointment during the week commencing 2 December 2019.
MAKING SOCIAL CARE WORK BOARD	
12.	The Peer Challenge identified the need to have a clear strategy for Adult Social care that was understood, shared and implemented by people with care and support needs, staff working in the service, the whole council and wider stakeholders. The reviewers highlighted the need to negotiate with colleagues, both inside and out of the council, about what good service delivery looks like. As a consequence, it was decided to develop the "Making Social Care Work Board" with broad representation to ensure a wide range of experiences, views and opinions. This includes users of the service, carers, community representatives, staff, councillors, GPs and other stakeholders such as providers of health care and home care providers. The Board has an independent Chair. There is a core group who are developing the vision and strategy for adult social care and other people are invited to bring in additional expertise and experience for particular topic areas. Once the strategy is developed the purpose of the Board will be to oversee implementation to

	facilitate ongoing user and carer input into assessing the effectiveness of the services provided and contribute to new developments.
13.	There is a focus on four key aspects, based on national evidence of best practice: • Prevention and early intervention • Maximise recovery and promote independence • Improve quality of life to people with care and support needs • Provide choice and control for people who have care and support needs The strategy won't cover everything that adult social care does but will concentrate the most important things that need to improve.
14.	Priorities for a future effective service that will meet the required outcomes have been identified as: • Communication that works • Better IT systems that talk to each other • Accommodation which is future proof and link to an individual's disabilities • Improved community provision • Personalised care which is tailored to an individual's needs and promotes dignity and respect • Easy and accessible information • Improve public opinion so people value social care more • Care plans which are future focused • Better links between teams and more joined up working • Support and respite for cares when they need it
15.	Work is underway on what "good" social work practice is and how success is best measured. The Board will be reviewing a first draft of the strategy in November and wider consultation will be undertaken once this is further developed. There has been internal and external communication about the work of the Board and key outputs from each meeting are posted on: www.southampton.gov.uk/making-adult-social-care-work This has prompted some interest from other residents in the city.
16.	Communication with the council has been identified as a key challenge. A separate workshop is being held to resolve issues raised and improve practice moving forward.
ADULT SOCIAL CARE IMPROVEMENT PROGRAMME	
17.	At the Peer Challenge feedback meeting, the lead reviewer said, "You are on the right track in delivering a strengths and community based approach; first focus on the basics and provide the right support for this to happen". The Improvement Programme addresses this.
18.	In addition to the Peer Challenge, there have been improvement plans, action plans, initiatives, projects, budget pressures and savings targets across Adult Social Care. Coupled with the complex nature of the service and resourcing constraints there has at times been confusion leading to under delivery of these plans and improvements. Recent reviews and audits have identified the

		strengths of the service in terms of staff engagement and integrated working and where the service needs to focus next on its improvement journey.
	19.	The Improvement Programme has been established to address some of these issues by consolidating this activity into an organised and structured programme of work with dedicated resource from the Projects and Change team to ensure its delivery and clear identified benefits. The programme will improve the quality of the service provided as well as improving the customer experience. The programme will also aim to drive financial sustainability by identifying ways of forecasting and managing demand, making processes more efficient and reducing duplication.

	20.	Ten projects have been identified and are being developed into project plans to be delivered over the next three years. Work is already underway in several areas and the recent Adult Social Care staff conference has helped shape the projects and the phasing of activities. The workstreams have been defined to ensure that we are addressing 'getting the basics right' as identified by the Peer Challenge:
		
		1. Information and advice
		    • To help people to help themselves in their communities
		    • Early intervention and prevention
		    • Options appraisal and potential improvement/replacement of the Southampton Information Directory (SID)
		
		2. Accessing services
		    • Operating model review and implementation
		    • Ensuring consistency in experience, ensuring high quality wherever people enter the service
		    • Effective triage, reducing handoffs, seamless experience, teams resourced to visit to resolve issues where necessary
		    • Establish assessment capability and operation
		
		3. Assessment and Reviews
		    • Establish an effective review process
		    • Remove the current backlog of reviews
		    • Provide assurance regarding compliance with the Care Act - recording protocol, use of advocacy, communication with individual's carers
		    • Employee competency and skill mix
		    • Timely reviews
		
		4. Safeguarding Adults
		    • Approach to safeguarding has changed to a standard model to reduce duplication and handoffs – review pathway and implement improvements where necessary
		    • Providing assurance about the safeguarding pathway (including data - dashboard showing end to end customer journey, risk and volume at each stage)
		
		5. Personalised Care and Support
		    • Embedding personalisation and strengths-based approaches to practice

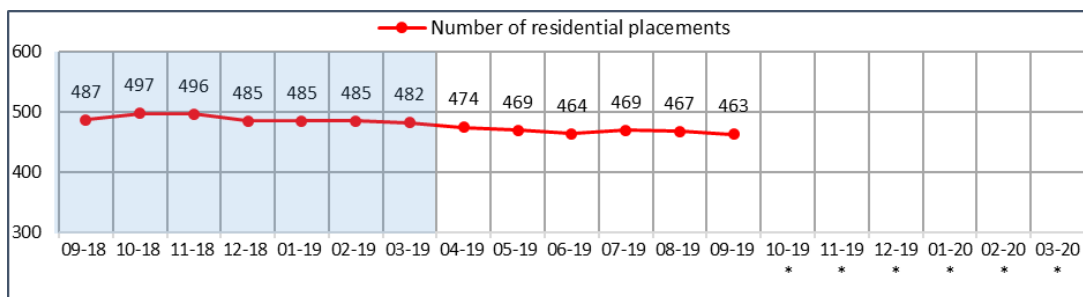|	
	• Business process and practice • Set up and implementation of the Professional Development Academy • Assurance that assessments are high quality • Practice pathway review and implementation as required 6. Simplifying billing • End to end process review and implementation of improvements • Customer journey 7. Customer experience • Reviewing the journey/pathway/communications to carers • Asking the right questions • Getting communication and engagement right • Making sure all the key enablers are in place • Mapping the 'end to end' customer experience • Agreeing the way in which we will work and support people 8. Telecare • Commercial development including marketing • Horizon scanning/product delivery and evaluation • Improving IT infrastructure • Next generation networks (digital) upgrade programme • Training, awareness raising with practitioners 9. Making finance personal • Personal budgets methodology • Direct payments Information, Advice and Guidance service roll out • Improved consistency for service users • Calculating carers personal budget process • Streamlining financial approval processes 10. Southampton Day Services • Making best use of the current day services offer • Developing employment opportunities for people living with disability • Supporting independence and promoting wellbeing
21.	Current activity is focused on the priority areas of Assessments and Reviews, Personalised Care and Support, and Simplifying Billing. In addition, there is a tactical improvement gateway that will ensure that any required improvements to the current client case management system, Paris, are considered appropriately alongside the programme that is implementing the replacement that the council has procured, CareDirector, which will be operational from November 2020. Additional project resource will be joining the Improvement Programme over the next couple of months which will be further supported by the role of Transformation Lead for Adults which is currently being recruited to.
ADULT SOCIAL CARE DEMAND AND PERFORMANCE	
22.	September's Adult Social Care monthly performance dataset is attached at Appendix 2.

23.	*Figure 1*: Number of Adult Social Care clients funded by the council, September 2018 to September 2019 (source: internal database)
	There was a steady reduction in the number people supported by the council from a peak of 2,611 in December 2018 to 2,509 in July 2019, but the numbers have since increased.
24.	*Figure 2*: Number of people funded by the council in residential care placements, September 2018 to September 2019 (source: internal database)
	The Peer Challenge identified the number of residential placements as an area of focus. Some research carried out separately for the council by the Local Government Association found Southampton to be the 24th highest social care authority in the country for placing older people in residential care, with only six authorities outside of the north of England placing more older people in care homes. The number of these has decreased by 24 over the past year, as people are supported to remain living independently at home or in alternatives, such as extra care housing.

CARE QUALITY COMMISSION – LOCAL AUTHORITY DATA PROFILE

25.	The Care Quality Commission (CQC) Local Authority Data Profile is attached at Appendix 3 and provides an overview of the older people's pathway. It highlights a number of key features for Southampton.
26.	There are positive CQC ratings for the majority of social care providers in the city. This is in part due to the active work that has been undertaken by the Integrated Commissioning Unit (ICU) Quality Team supporting social care providers in driving up quality standards. Overall Southampton has seen

	130% improvement in CQC ratings and 95% of care home beds are now rated Good. No nursing homes are suspended from taking placements which has significantly reduced out of city placements and ensured best use of better value beds contracted by the council. The development of the Enhanced Health in Care Homes Programme with the Clinical Commissioning Group (CCG) offering dedicated primary care support, case management and leadership, training and policy development support has also improved outcomes.
27.	Southampton has a lower level of nursing home beds in the city, which does impact effective discharges from hospital, especially for individuals with very complex needs. There is work to develop the market further, as outlined in the council and CCG Market Position Statement (2019).
28.	Requests for support from those over 65 years has reduced and there is a reduction in the use of residential care which is positive as it is an indicator of the integrated work to help people remain independent in their own homes and the increased availability of extra care as an alternative.
29.	The lower uptake of Direct Payments has been identified as a key issue for Adult Social Care. A joint task force was set up in October 2018 to support the council to look at ways of improving the delivery and take up of Direct Payments. This has led to a number of recommendations including improved Advice, Information and Guidance, training to the council workforce, access to support planning and brokerage services and to Personal Assistants.
30.	Workforce challenges both within council provided services and the wider social care market. Southampton was chosen to host the South East launch of the 'Every day is different' campaign from the Department of Health and Social Care to try and boost recruitment into the sector. Skills for Care estimates that in Southampton, 7.8% of roles in adult social care are vacant, this equates to around 425 vacancies at any one time, similar to England at 8.0%.
31.	Primary care in the city have now been rated as Good for all practices and the availability of extended access to patients is of great benefit in support to supporting social care providers and keeping people out of hospital. The council is working as part of the health and care system to improve delayed transfers of care as demonstrated by progress against High Impact Change model. This is impacted through the role of the integrated rehabilitation and reablement service; along with reduce hospital admissions and shorter lengths of stay. Less time in a hospital bed does reduce ongoing social care needs. There has been a recent increase in emergency readmissions that is being investigated.
32.	There is active management of the market to try and ensure availability and best value. The average cost figure provided by CQC predates the re-procurement of Southampton's home care framework, which went live on 1 April 2019, and where the new average price is approximately £17 per hour, in line with UK Homecare Association's recommended sustainable funding level for this service type. Southampton's average price is in line with the regional average for residential and nursing care, which is higher than the national average because of the South's relatively higher cost of living.

	Southampton is also subject to particular pressure in relation to average cost of residential and nursing care due to proximity to Hampshire and the county council's substantially higher published rates for these services and the growing market of self-funders residing near the city border.
INDEPENDENT CHAIR OF THE LOCAL SAFEGUARDING ADULTS BOARD	
33.	The previous Chair, Robert Templeton, resigned in the summer in order to pursue an alternative employment opportunity. The council had hoped to make a joint appointment of a new Chair with Hampshire, Portsmouth and the Isle of Wight. This could have been beneficial, as many of the care providers, health, police and ambulance etc. are shared across the four areas. There is already a well-developed regional approach to adult safeguarding policy etc. which helps to ensure consistency and resilience. However, it was not possible to progress with a joint appointment, as not all authorities were in agreement, so the Local Safeguarding Adults Board Executive (comprising the council, police and health) has proceeded to advertise the role. Interviews are scheduled for 4 November 2019, with a view to the Chair being in post in time for the December Board meeting.
34.	The Chief Officer of Choices Advocacy, Judith Clayton, a member of the Board, will act as Interim Chair in order to maintain the independence of the role pending recruitment to the permanent position.
RESOURCE IMPLICATIONS	
Capital/Revenue	
35.	Subject to approval by Cabinet on 15 October 2019, the council will consult on a draft three year budget for 2020/21 to 2022/23, which will enable the recommendations made in the Peer Challenge to be addressed, by investing an extra £9.9M to employ extra social work staff and to make sure that the budget is set at a level that will meet rising costs and demand.
36.	This includes over half a million pounds a year to pay for extra social work staff, which will relieve pressure on frontline staff and managers and enable social workers to carry out timely and high-quality assessments. In addition, the proposals include employing an extra eight social workers and independence advisors for a year, to catch up with a backlog of reviews, which will help to make sure that people's social care needs are being met in the best way for them.
37.	The net investment of £9.9M over three years comprises an investment of £14M for extra staff and to meet rising costs and demand, and savings of £4.1M, which can be achieved by supporting people to be independent, to live at home safely and to make full use of support that is available from the council, the NHS and the community. In 2020/21, savings of £1.7M are proposed, by making best use of the extra staff to promote wellbeing and support people to live independently wherever possible.
Property/Other	
38.	No implications.
LEGAL IMPLICATIONS	

Statutory power to undertake proposals in the report:	
39.	Not applicable.
Other Legal Implications:	
40.	Not applicable.
RISK MANAGEMENT IMPLICATIONS	
41.	The approach to addressing the recommendations made in the Peer Challenge outlined in this paper, including through the Making Social Care Work Board and Adult Social Care Improvement Programme, will help to mitigate legal, financial and reputational risks.
POLICY FRAMEWORK IMPLICATIONS	
42.	This supports the council's objective of supporting people to live safe, healthy, independent lives and the council's priority to improve wellbeing as part of its 2025 investment programme.

KEY DECISION?	~~Yes~~/No
WARDS/COMMUNITIES AFFECTED:	Not applicable.

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SUPPORTING DOCUMENTATION

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Appendices	
1.	Adult Social Care Peer Challenge Report
2.	September Adult Social Care Monthly Performance Dataset
3.	Care Quality Commission Adult Social Care Profile – Older People's Pathway – Southampton

Documents In Members' Rooms

1.	None.

Equality Impact Assessment

Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out?	~~Yes~~/No

Data Protection Impact Assessment

Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out?	~~Yes~~/No

Other Background Documents
Other Background documents available for inspection at:

Title of Background Paper(s)	**Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)**
1. None	