

Annual Report from the Cabinet Member for Adult Social Care

Cabinet Member: Cllr David Huxtable - Cabinet Member for Adult Social Care

Division:

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1.0 Summary

- 1.1 Adult Social Care Services both nationally and locally face challenges in responding to funding pressures, increased need within our population, supporting a diverse market place and responding to practice improvements.
- 1.2 I am proud of the progress our services have made during the last year.
- 1.3 The service has established a clear strengths based approach, responding and supporting residents in a way that maximises their potential providing their individual independence
- 1.4 The relationship and interface with the NHS remains as important as ever and this last year has seen more significant developments, both in the continued delivery and impact of services such as 'Home First' and the further improvement of key shared metrics, as well as changes to Mental Health services and approaches becoming more personalised and less clinical.

Recommendations

2.1 The Council notes the progress to date and challenges faced by Adult Services.

3.0 Adult Services 2019

- 3.1 This report summarises progress across the key areas of Adult Social Care in 2019.

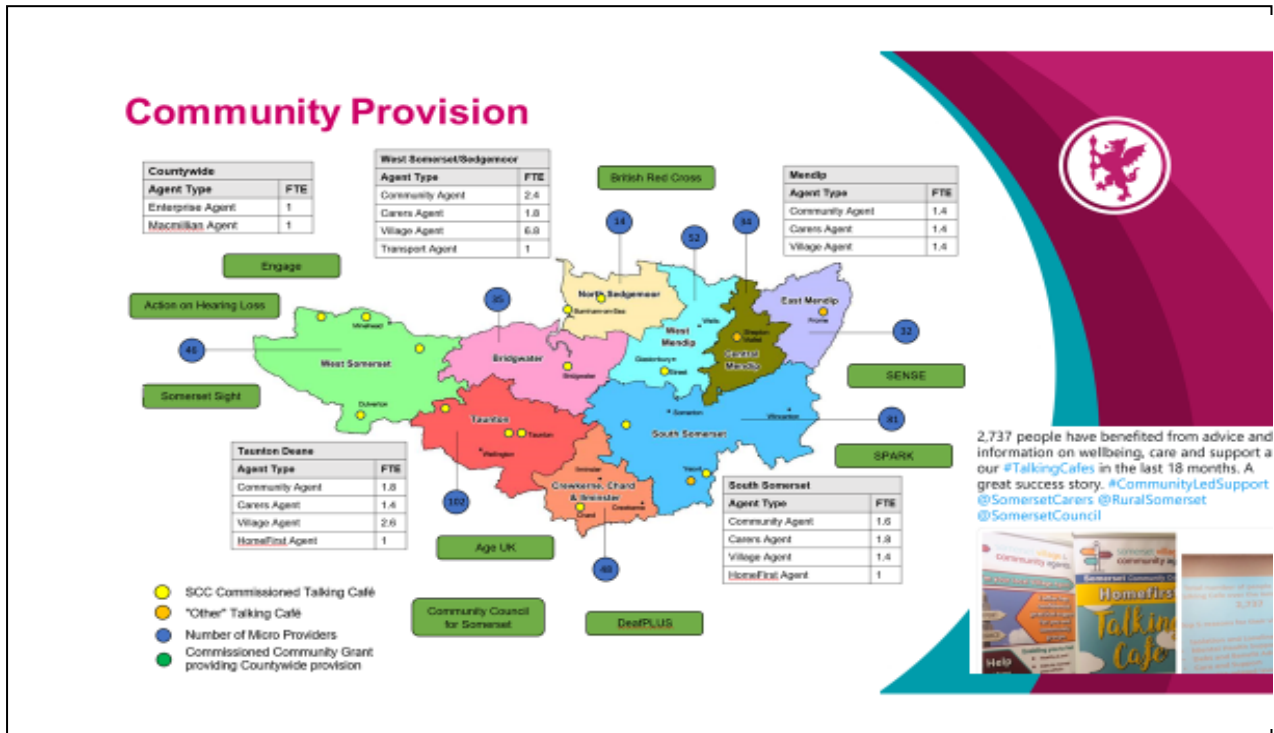
4.0 Promoting Independence & Community Connect

- 4.1 We have continued to work in partnership with health and community Partners to develop our Community, Connect approach and infrastructure so that people across Somerset can access information, advice and support online, by calling Somerset Direct or by popping into a Talking Café for a conversation.

- 4.2 We now have 15 Community Connect Talking Cafes and a network of Community Agents and village agents who work closely with our social work teams to ensure that people are able to find solutions that help them live as independently as possible in their own home and community. 2 of these are in hospitals. Since March 2017 to end September 2019 we have supported 5,519 people in Talking Cafes.
- 4.3 We have redesigned and implemented a new website – www.somersetcommunityconnect.org.uk – Some of the key things on the site include:
- Information and advice
 - A directory of Micro-Providers - the growing network of small-scale, often single-person, care providers who can help with care at home.
 - A list of drop-in events being run by a huge range of community and voluntary organisations in your local area
 - Information about support for carers
 - Help to access equipment through the county's two Independence and Advice Centres
 - A directory of registered home care and care home providers
- 4.4 A key part of this strategy is to enable people to have choice and control about their care. They may choose to have this money as a Direct Payment so that individuals can choose, arrange and pay for their own personalised care and support.
- 4.5 However, we know that people find the need to keep records of the orders, invoices and payments associated with having a direct payment onerous and potentially puts them off having a direct payment. Our new website is a key element of this strategy and an eMarketplace where people can choose and buy care products and services in an Amazon like environment.
- 4.6 We have continued to work with Somerset Direct and our social work teams to improve the customer experience and focus on finding solutions that are personalised, proportionate and timely. Working in this way we have consistently resolved over 65% of calls straight away without onward referral to social work teams, and after a same day call back from social work teams, a further 15% are resolved.
- 4.7 We have continued to build our network of Microproviders and developed a quality assurance framework to ensure that people can use Microproviders with confidence. We now have 492 active Microproviders, organised in 16 networks across Somerset providing over 9,000 hours of support to over 1,500 people.

4.8 In looking to the future we are developing integrated ways of working in neighbourhoods in line with our Improving Lives Strategy and the Fit For My Future programme to further embed strength based practices across health and care. We have social workers working in GP practices, and are sharing information with health coaches and GPs. Through the Sider programme and neighbourhood programme we will further embed these practices and develop solutions that enable and promote integrated and inclusive communities.

4.9 Community Provision



5.0 Carers

In Somerset there are 58,000 people who have identified themselves as carer. Adult Social Care have continued to work with individuals, carers, partners and communities to promote the identification and recognition of carers with an aim to support more carers. Our Carers Service provided by Community Council for Somerset in partnership with Somerset Partnership, Engage and Spark Somerset has developed new community-based solutions. We launched our Investing in Carers Transformation Programme which deliver improved support for carers with carers.

5.1 Table showing Adult Social Care Outcomes Framework (ASCOF) measures derived from the Carer Survey in 2018/19.

Key:

| |
|--------------|
| Deteriorated |
| No change |
| Improved |

| Measure Ref. | Measure Description | Data Source | Somerset | England | South West Region |
|--------------|--|---------------|----------|---------|-------------------|
| | | | 2018/19 | 2018/19 | 2018/19 |
| 1D | Carer-reported quality of life | Carers Survey | 7.2 | 7.5 | 7.3 |
| 1I(2) | The proportion of carers who reported that they had as much social contact as they would like | Carers Survey | 25.1 | 32.5 | 28.1 |
| 3B | Overall satisfaction of carers with social services | Carers Survey | 31.1 | 38.6 | 38.5 |
| 3C | Proportion of carers who report that they have been included or consulted in discussion about the person they care for | Carers Survey | 63.5 | 69.7 | 69.2 |
| 3D(2) | The proportion of carers who find it easy to find information about support | Carers Survey | 53.5 | 62.3 | 64.0 |

6.0 Learning Disabilities

6.1 Following a recognition that change is required across a number of identified areas pilot projects are taking place which test new approaches with the aim to maximise independence. A skills analysis was been completed across community teams and a training plan is in place to meet identified learning and development needs.

6.2 The Learning Disability Transformation Programme has been put in place. The programme aims to ensure good value and assess the spend on Learning Disability, that more people with learning disabilities are supported to live independently in their own homes and that improved access to employment will help reduce the inequalities experienced by learning disabled adults. key areas of work for learning disability services include:

- Prevention and early intervention
- Short term intervention
- Workforce
- Managing capacity and demand
- Longer term care and support

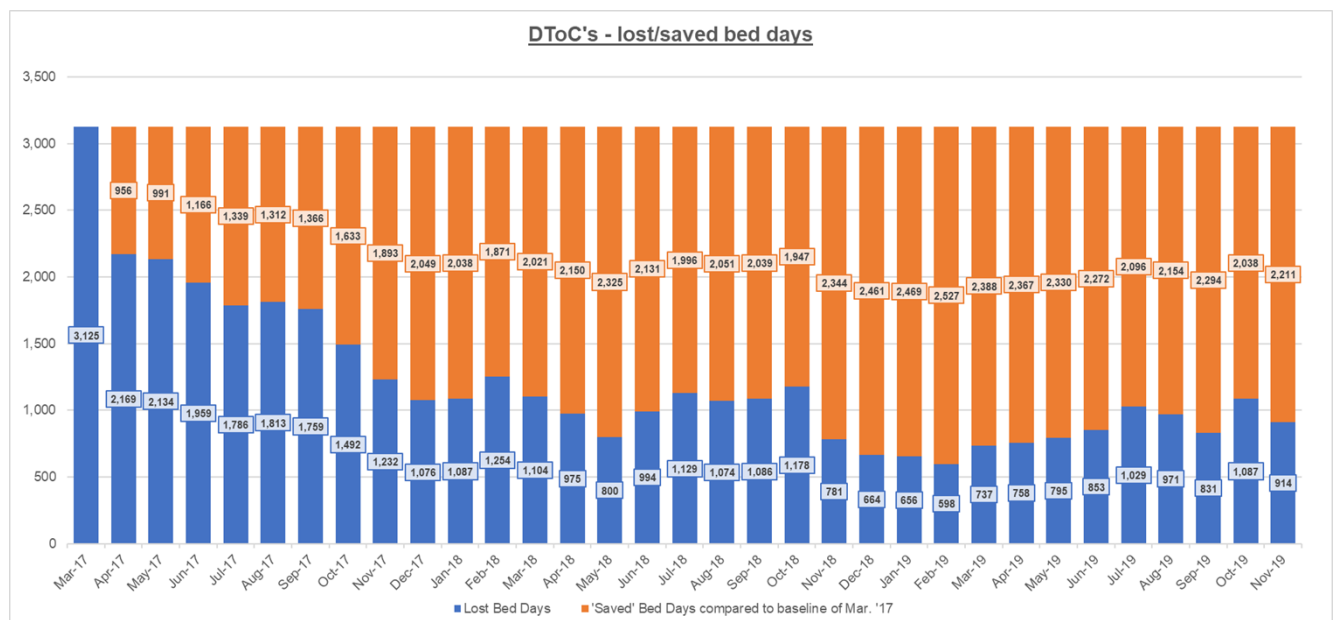
6.3 The council has engaged in the Learning Disabilities Mortality Review (LeDeR) Programme is a national programme aimed at making improvements to the lives of people with learning disabilities. Working with the University of Bristol and Somerset CCG reviews of deaths are carried out with a view to improve the standard and quality of care for people with learning disabilities.

7.0 Working with Health & our Hospitals

7.1 The demand on our health system in Somerset continues to grow and this can put pressure on partnerships and follow on demand for social care. However, these partnerships and joint working remain strong and continue to have the person and their carer at the centre of decision making, rather than any individual organisation.

7.2 In the south west region (end Aug 2019) Somerset was ranked the best performing health and care system on Delayed Transfers of Care. This is due to the expansion and refinement of our trailblazing Home First scheme as well as the continued excellent partnership working with our acute and community trusts.

7.3 Chart showing DToC bed days 'saved' using a baseline of March 2017.



7.4 Home First continues to support people to go home straight from hospital as soon as they are able and has supported over 5000 people since it began in 2017. We are now working on the expansion phase to be implemented later this month with an increased amount of pathway 1 capacity and even greater integration between NHS, ASC and the provider market.

7.5 We are currently driving forward with further integration within the A&E departments of the acute hospitals in Somerset. We have launched the A&E social care service in Yeovil District Hospital already. The social care element is there to turn people around very quickly once they have reached A&E and return them home where a swift, safe and timely solution is appropriate.

7.6 The DToC position has improved significantly over last 2 years with September 2019 system figure of 2.46% which is below our 2.50% target.

- 7.7 We are improving the experience of those people who have experienced a stroke and are needing a care package to help them return home. We are working closely with Bluebird Domiciliary Care, Taunton, they are coming in to the stroke unit to be part of the decision-making forum about what care people require and hopefully enabling us to get the care in place much quicker than is currently possible.
- 7.8 The county wide Hospital Interface Service (HIS) Improvement work stream was launched in September and is supported by the Principal Social worker and our learning and development team as well as NHS colleagues looking at improving practice, embedding person centred practice and making HIS an attractive area for staff to work, e.g. we are currently rolling out personal development plans for staff.

8.0 Mental Health

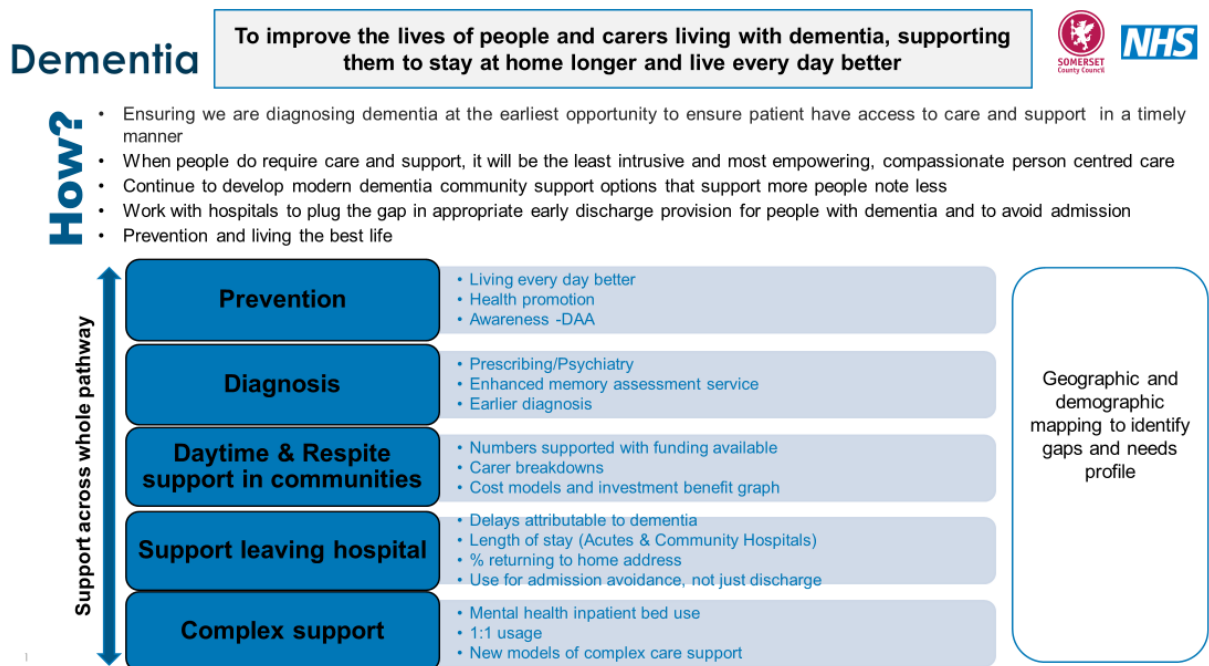
- 8.1 SCC has worked alongside colleagues at the CCG to support an NHS "trailblazer" bid for early distribution of additional funding to support people with poor mental health. See this link <https://youtu.be/t3Ky9ZUqjIM> for more information. This bid was successful and will see an expansion not only of community mental health teams but also the networks and support that work alongside them. It will include third sector and community groups being embedded in the health teams to provide preventative support and to enable an easier step down from formal services.
- 8.2 SCC is also working hard to prevent permanent placements in residential care, particularly for working age adults who require supporting with their Mental Health. A new contract "Step Together" aims to support people to access mainstream housing and support them in managing their tenancy. This will encourage independent living and personal responsibility in a setting that people can be proud of and keen to maintain. Both these housing based initiatives are designed to widen the choices available to people and our workforce and discourage the need for residential care.
- 8.3 Significant work has been undertaken during the year to embed mental health social work teams within adult social care. Integrated peer forums have been instituted across the region to enhance professional challenge and improve access to community resources through greater engagement with community agents. Greater professional collaboration and discussion has enabled the further development of the strengths based approach, improving patient centred outcomes and promoting the independence of service users.

8.4 Locality Lead positions have been created to develop local ownership, improve the collaborative approach and develop inter-professional relationships with Community Mental Health Services and Home Treatment Teams. The Approved Mental Health Professional Hub continues to provide a holistic view when undertaking assessments under the Mental Health Act. The 24/7 service works closely with mental health colleagues in Somerset Partnership Trust to ensure that the social determinants of mental health are considered, and that least restrictive interventions are employed.

9.0 Dementia

9.1 The council, together with the Somerset CCG, has refocused its efforts on supporting people with dementia and their carers. The strategy looks at five key areas where we identified that support needed to be improved or updated. A multi-disciplinary group (including peers and third sector providers) oversees this work and has strengthened the links between health diagnosis/treatment and social care support around wellbeing, environment and carers.

9.2 The strategy in summary:



9.3 Mental health social work teams, and the Approved Mental Health professionals continue to work with colleagues from the Intensive Dementia Support Service (IDSS) to provide intensive support to patients with dementia while they are in a period of crisis.

10.0 Safeguarding Service

10.1 The adults safeguarding service has continued to receive high numbers of alerts, these are concerns where an adult may be at risk of harm or abuse. Most alerts are made from private care settings across Somerset. Our close liaison with Somerset Direct has positively enhanced the experience that people receive when they first make contact with the Local Authority. In March 2019, 60.5% of all contacts handled by Somerset Direct were resolved at this, the first point of contact. The safeguarding team is committed to upskilling and increasing the safeguarding awareness of the call advisors to ensure that even more alerts are managed as safely and as quickly as possible. This also ensures that the alert needs more attention, it is passed to the most appropriate service quickly and efficiently. Somerset Direct staff attend recognising adult abuse training. They also have a direct consultation line to the safeguarding triage team and the service provides monthly peer supervision to continually drive up the safeguarding screening at the earliest opportunity. For more information on adult safeguarding in Somerset please see the Somerset Safeguarding Adults annual report which can be found at <https://ssab.safeguardingsomerset.org.uk/wp-content/uploads/SSAB-Annual-Report-2018-19-Final-for-Publication.pdf>

11.0 Provider Quality and Partnerships

11.1 Somerset has continued to perform very well in comparison with nearest neighbour authorities as well as the England average when it comes to the quality of local provision as judged by the independent regulator, the Care Quality Commission. This is reflective of the robust partnership arrangements the Local Authority has with care providers, as well as with the CQC and Somerset Clinical Commissioning Group, in ensuring quality and safety standards are routinely monitored, challenged and supported. Based on October 2019 data from the CQC's Area Data Profile for Somerset:

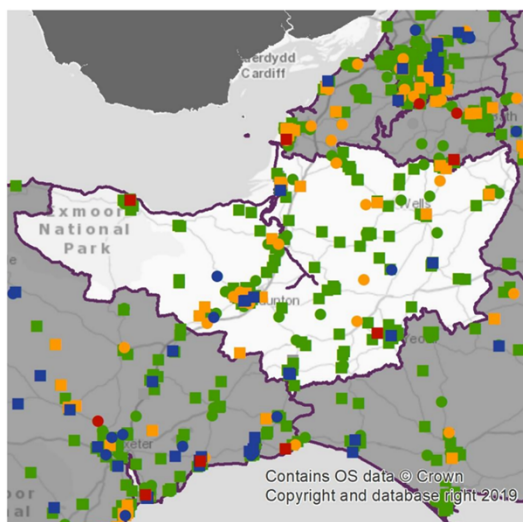
- 78% of Nursing Homes in Somerset were rated 'Good' or 'Outstanding' compared with 74% (comparators) and 73% (national average)
- 86% of Residential Care Homes in Somerset were rated 'Good' or 'Outstanding' compared with 82% (comparators) and 82% (national average)
- 79% of Domiciliary care agencies in Somerset were rated 'Good' or 'Outstanding' compared with 76% (comparators) and 70% (national average).

11.2 Ratings – Adult Social Care

Ratings - adult social care



This map shows the overall ratings of active adult social care locations in Somerset. There may be multiple locations in one position so not all locations may be visible



CQC data accessed on 22 October 2019

Nursing homes - see circles on map

| Area | Inadequate | R.I. | Good | Outstanding | Unrated |
|-------------|------------|----------|----------|-------------|---------|
| This LA | 0% (0) | 22% (13) | 73% (43) | 5% (3) | 0% (0) |
| England | 2% | 20% | 69% | 4% | 4% |
| Comparators | 3% | 20% | 68% | 6% | 3% |

Residential homes - see squares on map

| Area | Inadequate | R.I. | Good | Outstanding | Unrated |
|-------------|------------|---------|-----------|-------------|---------|
| This LA | 1% (2) | 8% (13) | 81% (133) | 5% (8) | 5% (9) |
| England | 1% | 13% | 79% | 3% | 3% |
| Comparators | 2% | 14% | 78% | 4% | 3% |

Domiciliary care agencies - not shown on map

| Area | Inadequate | R.I. | Good | Outstanding | Unrated |
|-------------|------------|--------|----------|-------------|----------|
| This LA | 1% (1) | 7% (6) | 73% (59) | 6% (5) | 12% (10) |
| England | 1% | 11% | 66% | 4% | 19% |
| Comparators | 1% | 10% | 71% | 5% | 14% |

Community care services - not shown on map

| Area | Inadequate | R.I. | Good | Outstanding | Unrated |
|-------------|------------|---------|----------|-------------|---------|
| This LA | 0% (0) | 22% (5) | 74% (17) | 0% (0) | 4% (1) |
| England | 0% | 8% | 72% | 4% | 16% |
| Comparators | 0% | 6% | 76% | 3% | 14% |

*R.I. = requires improvement

11.3 Our Proud to Care initiative continues to work with all of our providers and the Registered Care Providers Association to promote working in the care sector. A new HR officer has recently been appointed to further enhance our recruitment and retention approach to this sector in recognition that there are still significant shortages of care staff nationally and locally and it is incumbent on us all to value them and the work they do just as we do with our NHS. With that in mind Somerset County Council has provided the funding to open its own staff benefit scheme, My Staff Shop, to all care staff. We hope that this is a clear sign that we want to be a partner with our providers and their staff and not just a purchaser of goods or services.

12.0 Key areas for improvement during the coming year

12.1 We now need to embed the changes described above across the service and continue to develop practice, ensuring our staff are consistent in changing their way of working from the traditional model of doing for people to one of promoting people's independence. We need them to be more inquisitive about practice, to build and share ideas and solutions, and continue develop the leadership skills of our workforce. The continuing development of our relationships with our partners health, housing and communities is critical to our delivery model. We need to better describe and show how by the use of data, innovation system and cultural change is demonstrated and achieved. We

need to develop our IT solutions to aid our workforce and we need to develop our assistive technology offer to our customers.

13.0 Transformation

- 13.1 We will continue to develop and deliver our transformation programmes around Mental Health, Learning Disabilities and Investing in Carers
- 13.2 We want to support more carers, maximising independence and preventative solutions ensuring the right support at the right time. We are continuing to develop our offer for carers, introduce new ways of working for a more integrated service ensuring equality of service provision and improved outcomes for carers.

14.0 Liberty Protection Safeguards

- 14.1 A significant programme of work is underway to prepare for this change and to ensure that we are well prepared for the changes we believe the Act and the associated Codes of Practice will deliver. The LPS will deliver a single scheme which will apply in all settings reducing delays and complexity currently experienced in community settings. The scheme will extend the age range including those aged 16yrs and above instead of the current 18yrs and above. The Act introduces a Responsible Body which will authorise any deprivation and create a new role of Approved Mental Capacity Professional. Significant work is still required to be undertaken including detailed consultation on the content of the Codes of Practice before the full impact can be appreciated and mitigated, this work will continue throughout this year in preparation for the expected implementation later in 2020.

15.0 Partnership working

- 15.1 Our joint Better Care Fund programme continues to help support partnership working and the 2019/20 plan is on track to national sign off and distributing funding for new and existing integrated initiatives. Some of these include: better dementia support on leaving hospital; trusted assessor initiatives to support care homes; community agents working across all acute and community hospitals and investment in technology that's supports independent living.
- 15.2 In terms of hospital discharge key objectives for the year ahead are maintaining consistent decision making across home first in the County. Supporting our NHS colleagues to remain focussed on community solutions rather than bed based solutions, particularly in times of system escalation. Supporting our staff group to work in person centred way, that enables creative working as well as positive risk taking.

15.3 The focus is now switching to working as a system to support people in their own communities and ensure that health and care systems away from the hospital functions are as joined up and multi-disciplinary as possible. ASC are therefore supporting work on neighbourhood teams; primary care networks and supporting community provision and groups at grass roots level.

16.0 Learning Disabilities

16.1 An ambitious plan for 99 people to transfer to residential to supported living is in hand which will give people the security of their own front door and tenancy. A renewed focus on support more people into employment and continuing to modernise our day service offer will also be an important feature of the year ahead. The strategic learning disability and autism review will take place alongside mapping services across Somerset which will further inform areas of improvement and development to improve learning disability services.