

**9 July 2018****Agenda Item: 8****REPORT OF THE DEPUTY CORPORATE DIRECTOR, ADULT SOCIAL CARE  
AND HEALTH****FINDINGS OF PILOT OF SOCIAL CARE ASSISTANTS WITHIN LOCALITY  
TEAMS****Purpose of the Report**

1. To provide an evaluation following the conclusion of the short-term Social Care Assistant pilot that has taken place within locality teams. Also to seek approval to trial a tailored business support offer using existing business support staff with operational teams to incorporate more social care related support tasks but less generic business support.

**Information****Background**

2. Following approval by the Adult Social Care and Public Health Committee on 13 November 2017, the Social Care Assistant (SCA) pilot was carried out to test whether the role could support recommendations presented in a report by the LGA called 'Managing demand in adult social care' namely:
  - How we respond when people approach us for care
  - Reducing new admissions to residential care
  - Focusing on help that supports recovery/progression
  - Using community/family/ neighbourhood solutions rather than formal care
  - Not prescribing "dollops of formal care" as an easy solution
  - Helping people live with long-term conditions.
3. A £75,000 budget was agreed from the Improved Better Care Fund (IBCF) monies and would have funded the recruitment of 7 fte SCA posts at Grade 3 for a period of five months.
4. Due to the short-term nature of the pilot, only 3 SCA posts were recruited to from the beginning of January 2018 until the end of March 2018. A Grade 3 costs £23,412 per annum so 3 SCAs for three months was at a cost of £17,559 (excluding any expenses/mileage) which left an underspend of £57,441 that was not utilised from the BCF.
5. The SCAs were placed within the following teams:

- a. Broxtowe, Gedling & Rushcliffe Physical Disability Team
- b. Gedling Community Learning Disability Team
- c. Bassetlaw/Newark Older Adults Team.

6. The following tasks were identified through time task exercise carried out throughout the pilot:

- **Acting as a central point of contact for the team and service users/their families**  
This worked well and feedback has been gathered from the team, partners and service users/their families expressing the difference this has made in terms of response times, confidence levels and ease of access to information, advice and signposting.
- **Covering/supporting Duty**  
Having the SCA cover the Duty telephone calls meant that tasks that did not require assessing staff involvement were dealt with quickly by the SCA therefore cases often did not need to be allocated which meant that assessing staff only received the complex pieces of work that actually required their input. Substantial feedback has been gathered around the amount of time this saved for assessing staff and how this reduced the pressure on them and their time was freed up to focus on active reviewing and creative support planning.
- **Carrying out minor but time intensive social care related tasks that do not require assessing staff expertise**  
The SCAs undertook some of the work normally done by assessing staff that did not require their qualified expertise such as:
  - making referrals to services
  - requesting Assistive Technology
  - submitting requests for transport
  - chasing equipment/services
  - responding to requests for information
  - minor changes/updates to care packages/personal details within the social care recording system
  - clarifying/confirming information/updates with service users/agencies
  - completing financial information forms including resolving financial queries and liaising with Health
  - supporting assessing staff with commissioning requests.

7. These tasks being carried out meant that assessing staff had additional time to carry out their assessments and reviews in a timely manner and carry out more active reviewing when required. Assessing staff also reported having the headspace to think more creatively when it came to support planning. For service users and their families, it meant that their queries were responded to more quickly. This meant they received requested information sooner and requests for low level equipment/ changes to care and support were processed quicker.

8. A large amount of very positive qualitative feedback was gathered from team managers, team members and the SCAs' mentors which evidenced how invaluable their support had been to the teams.

9. All feedback received reaffirmed the benefit to assessing staff of having the SCA within the teams and how, in a short timescale, they had freed up the capacity of assessing staff by carrying out the social care related support tasks that did not need to be undertaken by an experienced/qualified assessing colleague. This allowed the assessing staff to spend more time with service users, promoting their independence and carrying out active reviewing work where appropriate.
10. The teams involved in the SCA pilot experience increases in productivity (assessments and reviews completed) and also an increase in the timeliness of these assessments.
11. To test the approach 3 SCAs were also established within the Countywide Reviewing Teams, as part of the Targeted Reviews Project where they screen work for allocation, follow up paperwork with people in advance of reviews, make appointments, facilitate and support reviews clinics and ensure that the organisation of teams' workloads is as efficient as possible. Since their introduction all teams have reported increases in service capacity and an increase in the volume of reviews undertaken.
12. The Children's Social Care department introduced a similar pilot called the Social Work Support Officer (SWSO) pilot in April 2015 which has recently been extended until 31<sup>st</sup> March 2019. Some notable findings from a recent review of the pilot to date which were taken to the Children and Young People's Committee in February 2018 are:
  - a. improved sickness rates and morale within teams
  - b. more time for direct work with children and families and to progress cases
  - c. An estimated average time saved per social worker in teams with SWSOs of 6.5 hours per week, which equates to £408,000 worth of paid social worker time per year across those teams.

### **Next steps**

13. The next phase of the evaluation of the SCA role is to explore whether social care related support tasks could be undertaken within existing resources by existing business support staff and the impact this would have on the business support offer.
14. It is proposed to trial this for six months. The outcome of this trial will be evaluated and a further report will be brought back to Committee with recommendations.

### **Other Options Considered**

15. To only integrate the role into the operational team structure and advise teams to fund this role when staff leave: based on experience with the Hub Worker role, the majority of teams will not be able to find sufficient funds/resourcing gaps to do this without their productivity being affected.
16. To not change anything and for teams to carry on as before.

### **Reason/s for Recommendation/s**

17. It was evidenced during this short pilot that operational teams have benefitted from having a SCA working with them.

18. To support the Adult Social Care Strategy by maximising the time freed up for assessing staff to allow them time to focus on active reviewing and promoting independence. The SCA also supported the Improving Lives project.
19. To ensure that staff are being used efficiently and economically and are doing tasks that befit their grade and pay and to maximise and maintain the positive impact on staff wellbeing, this has led to assessing staff thinking more creatively when support planning and feeling more receptive to change.
20. The pilot with business support will evaluate if the role of the Social Care Assistant can be incorporated within the Grade 3 Business Support role.

## **Statutory and Policy Implications**

21. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

## **Financial Implications**

22. There are no financial implications to this as the proposal is to use existing resource.

## **Human Resources Implications**

23. This will mean working with Business Support colleagues to tailor a bespoke support offer for operational teams.

## **RECOMMENDATION/S**

- 1) That Committee gives approval to trial a tailored business support offer using existing business support staff with operational teams to incorporate more social care related support tasks but less generic business support.
- 2) The outcome of this trial will be evaluated and will come back to Committee with recommendations.

**Paul Mckay**

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### **Constitutional Comments (LM 25/06/18)**

24. The Adult Social Care and Public Health Committee is the appropriate body to consider the contents of the report.

### **Financial Comments (CT 27/06/18)**

25. The financial implications are in paragraph 22 of this report.

### **HR Comments (SJJ 21/06/18)**

26. Managers will be required to establish any Social Care Assistants through the usual Committee Process using existing staffing budgets. The trial will involve existing staff in Business Support.

### **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

[Report to Adult Social Care and Public Health Committee dated 13 November 2017](#)

[John Bolton's Managing demand in adult care paper for the LGA dated February 2017](#)

[The Munro Review of Child Protection dated May 2011](#)

[Social Care Innovations pilot by Department of Health in Hampshire dated 20 March 2017](#)

[Extension of the Social Work Support Officer Programme – report to Children and Young People's Committee on 12 February 2018](#)

### **Electoral Division(s) and Member(s) Affected**

All.

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