

11 September 2023
Agenda Item 6

REPORT OF THE CABINET MEMBER FOR ADULT SOCIAL CARE AND PUBLIC HEALTH

ADULT SOCIAL CARE AND PUBLIC HEALTH PERFORMANCE, RISKS AND FINANCIAL POSITION – QUARTER 1 2023-4

Purpose of the Report

1. To provide the Committee with a summary of the Adult Social Care and Public Health financial position at the end of June 2023.
2. To provide the Committee with a summary of Adult Social Care performance against performance themes.
3. To provide the Committee with a summary of Public Health performance against the Annual Delivery Plan, Corporate Vital Signs and Joint Health and Wellbeing Strategy.
4. To provide the Committee with a summary of adults' vital signs and key departmental risks.

Information

Current Financial Position as at 30 June 2023

Previous forecast Variance £ 000	Change in forecast £ 000	Department	Final Budget £ 000	Actual £ 000	Year-End Forecast £ 000	Latest Forecast Variance £ 000	Var as a % of budget
		ASCH Committee					
(61)	(27)	Strategic Commissioning and Integration	(39,285)	(39,640)	(39,373)	(88)	0.22%
3,622	510	Living Well and Direct Services	155,851	50,998	159,983	4,132	2.65%
(3,925)	2,744	Ageing Well and Maximising Independence	145,275	43,117	144,094	(1,181)	-0.81%
(13)	(62)	Public Health	2,564	(1,484)	2,490	(75)	-2.91%
(377)	3,165	Forecast prior to use of reserves	264,405	52,990	267,194	2,788	1.05%
-	-	- Transfer to / (from) Revenue Reserves	(2,288)	-	(2,288)	-	0.00%
-	-	- Transfer to / (from) Capital Reserves	-	-	-	-	0.00%
-	-	- Transfer to / (from) reserves (Ageing Well)	-	-	-	-	0.00%
13	62	- Transfer to / (from) Grant reserves	(2,564)	-	(2,489)	75	-2.93%
-	-	- Redundancy related costs	-	-	-	-	0.00%
13	62	Subtotal	(4,852)	-	(4,777)	75	-1.55%
(363)	3,227	Net Department Total	259,553	52,990	262,417	2,863	1.10%

5. The overall Adult Social Care and Public Health budget is forecasting a £2.86 million overspend as at the end of June 2023.
6. Strategic Commissioning and Integration is forecasting a net underspend of £90,000 after reserves, an increased underspend of £30,000 since Period 2 that is due to underspend on staffing.
7. Ageing Well is forecasting an overall underspend of £890,000. The Community Care budget, however, is overspent across all types of residential and homebased care services, with £4.71 million of savings to be delivered in year from this budget. The main cause of additional costs is that both the amount of support and the cost of care is increasing. The overspend is being offset because the department is receiving higher than average additional client contributions to the cost of individual's care, additional joint funding income and staffing underspends. Rolling and bespoke recruitment programmes based on successful new ways of recruitment are underway.
8. Living Well is forecasting an overspend of £4.69 million; overspends in Long-Term Care, and Direct Payments plus Predicted Needs, are partially offset by additional funding income and savings still to be delivered.
9. Direct and Provider Services area continues to forecast a £560,000 underspend in addition to savings already delivered in year.
10. Public Health is forecast to underspend by £80,000, an increase from Period 2 of £60,000. This is due to savings on staffing and Health checks.

Benefits Realisation of Service Improvement Programme and Risks

Ageing Well

11. In Ageing Well, the Council's reablement service supports people to set goals to re/gain independent living and social skills, maximising their well-being and confidence. As a result, people also need less homecare, which provides a financial benefit. Reablement performance is a national Social Care indicator and the Council benchmarks. Current data shows that 66% of people accessing reablement do not require ongoing, longer-term services. Additional community reablement capacity was invested in following an independent assessment that there were people who could benefit that were not accessing reablement and this is on track to meet their target number of people and deliver the associated £420,000 savings.
12. Every year the Council re-ables 2,245 people who have had a period of ill-health in hospital to manage ongoing demand pressures. Additional capacity has also been invested in reablement to support hospital discharge by system partners. Our Maximising Independence Service is not, however, getting the number of referrals that they need associated with this extra capacity and £832,000 savings are at risk. This has been escalated to the Discharge to Assess and Urgent Emergency Care Boards to assess the reasons and develop an improvement plan by 22 August.
13. A diagnostic has recently been undertaken for the Enablement service and, with implementation of improvement plans, the new Community Reablement Team is now almost

receiving enough referrals to realise the planned benefits. The data provides evidence of this with 245 people successfully completing a programme of enablement against a target of 797.

14. The Ageing Well strength-based programme is complex to deliver because its foundations are in improving practice and decisions across all the operational teams to ensure people are offered short-term preventative interventions and ways to achieve a good life by linking people into the assets of their local communities, families and support networks, before ongoing formal social care support is considered. The Council is an outlier in its high use of short-term residential care for older people and benchmarks higher than average in its use of long-term residential care. The number of older adults supported in residential care is currently at 2,252 against a year-end target of 2,104. Independent assessment in 2018/19 evidenced that the greatest area of opportunity to realise benefits both for people and financial was to reduce both short- and long-term residential care. The fragility of the homecare market and NHS pressures through the hospitals meant that this was not possible to achieve in 2022/23. A diagnostic has been undertaken with support from the corporate Strategic Insight Unit, which concluded that the £1.1 million non-delivered savings in 2022/23 are not achievable in 2023/24 in addition to the current year's savings, and this will be taken through the corporate approval process.
15. There is evidence that the Department's strategy to improve access to short-term services that prevent, reduce and delay the need for social care is successfully maintaining the numbers of older people receiving long-term support at the same levels over recent years and mitigating the impact of demographic increases. However, the diagnostic shows that, on average, each person's individual's homecare support plan is 43% larger than in 2019/20 because people have more complex needs, and the unit cost of care has increased by 5%. A revised plan is being developed, aiming to mitigate this wherever possible and to deliver the savings of £1.2 million for 2023/24. Positively, early success has been seen in starting to reduce the numbers of people going into short-term residential care from hospital due to the improved capacity in homecare.

Stories of Difference - Strengths-Based Approach to build a trusting relationship and support Ms S to continue to live in her own home and connect to her local community

"Ms S was living in a state of severe self-neglect with no hot water and unable to use the bathroom. She lives alone and has some memory problems; she hoards balls of wool and other items. From our initial contact, she was very worried about being 'taken away' and leaving her home. With support from the Ageing Well Gedling Team, Age UK were able fix the bathroom, a Promoting Independence Worker (Maximising Independence Service) helped her make connections and friends in the local community and linked with her neighbour. Additionally, her finances have been protected and she has some ongoing care support at home. This was all happened from building trust and a good rapport. She is still living at home and is happier and healthier."

Living Well

Strengths-Based Approaches

16. Living Well continues to work closely with the Maximising Independence Service to ensure that opportunities to build skills and confidence and to prevent or delay the need for ongoing care and support are identified and fully supported. To date in this financial year, 315 people have been supported by promoting independence workers to increase their skills for independence.
17. The Three Conversations Approach is now embedded as 'business as usual' in Living Well teams. Data is only available from September 2022, but there is an encouraging reduction in the percentage of people progressing from a Conversation 1 to a Conversation 3. This was 29.84% between September and December 2022, and is 26.44% between May and July 2023. One of the aims of the Three Conversations Approach is to use Conversation 1 to try to meet someone's outcomes by building on their strengths and those of the people around them. Therefore, it is encouraging that more outcomes are being met at the Conversation 1 stage. Teams have shown considerable innovation in adopting culture change, with one team using a coaching approach called 'GROW' in their huddles. Huddles are team meetings where ideas and challenges are shared with colleagues. Peer challenge is encouraged in a supportive, encouraging environment. Best practice is shared with all teams through countywide Team Manager meetings.
18. The Living Well strengths-based benefits realisation programme is supported by a detailed project plan. Objectives within the plan include:
- Identifying people who can move from residential services to supported living to enable greater independence.
 - Working with commissioning to ensure that the right accommodation is available for people at the right time.
 - Exploring whether staffing in residential services can be configured in a less restrictive way.
 - Using technology-based care to maximise independence.
 - Reconfiguring Housing with Support services to reduce voids and ensure available housing is being used effectively.
 - Introduction of a revised process to ensure greater accuracy with predicted needs.
19. There is currently more demand than supply for supported living accommodation. Living Well and Commissioning Managers are working closely together to deliver an ambitious programme of new supported living developments over the next five years. Phase 1 of this plans to deliver 205-355 units of supported living over the next one to three years. Phase 2 will see an additional 121 supported living units in the next two to four years.

Preparing for Adulthood

20. Monthly meetings between the Preparing for Adulthood team and the Strategic Commissioning Team are ensuring earlier identification of demand for accommodation for young people.

21. A dashboard has been developed to enable more effective management of demand in the Preparing for Adulthood team. The dashboard will help to predict the number of young people who will potentially need support from adult services. This will inform financial predictions and future demand for services.
22. Work has commenced on a review of the Preparing for Adulthood pathway and protocol document. The vision and principles for the pathway have been co-produced with young people, carers, and staff.
23. Ongoing work to develop closer links between the Preparing for Adulthood team and education colleagues has not progressed as quickly as intended due to staff absences. However, this is a priority for 2023/24.

Shared Lives

24. Shared Lives continues to overachieve its savings target with initiatives such as the development and streamlining of the carer referral process and a new operating model to modernise the service to sustain service growth.
25. The consultation on the review of Council-provided day services is now complete and work to finalise the proposed new service offer is underway. The savings target for this financial year has been delivered through the holding of vacancies ahead of the proposed changes to the service model, which will then deliver the targeted savings on a recurrent basis.
26. Consultation is due to commence in October of this year on a new service offer for Council-provided short breaks services, which is intended to deliver an improved service to people using the service and their carers as well as delivering financial benefits to the Council.

Stories of Difference - Recent feedback gathered by the Care Quality Commission as part of regulatory monitoring of the Council's short breaks services:

'They always provide excellent care for our daughter. We 100% trust them to look after her and give the attention she requires. She can be quite difficult at times, but this never fazes them'.

'The staff have a good relationship with me and always inform me if there is any problem. I do not know what I would do if he could not go there as he will not go anywhere else, they are all fantastic and we both appreciate all they do'.

'As a parent I feel comfortable leaving my disabled young adult in the care of Helmsley Road staff as I know they will be safe, and their complex needs catered for. A very happy young adult returns home, communicates what they have done and is always looking forward to returning'.

'They make it loads of fun when I am at respite. Make sure I am clean and tidy. I always enjoy myself'.

Public Health Financial Position

27. The Council receives a ring-fenced Public Health Grant ('the grant') from the Department of Health and Social Care (DHSC), which is subject to a range of conditions and must be used to fulfil the Council's statutory duty to improve the health and wellbeing of the people within Nottinghamshire, including provision of a number of mandatory services. Amongst other things, these conditions stipulate that "the main and primary purpose of all spend from the grant is public health". Broadly speaking, this means that the grant must be invested in ways that the Director of Public Health and Section 151 Officer identify "have a significant effect on Public Health". In 2023/24 the value of the grant to Nottinghamshire is £44,567,373.
28. The table below paragraph 4 summarises the departmental financial position, including Public Health. As of the budget monitoring period ended 30 June 2023, a Public Health underspend of £80,000 is projected, which would be added to the Public Health reserves at the end of the financial year.
29. During the Autumn, officers in Public Health will undertake work with finance colleagues to confirm that forecasting is being undertaken with due rigour, identify where there are genuine grounds for uncertainty in the forecasts, and ascertain mitigating actions to address those uncertainties.
30. As of the latest budget monitoring period (period 4, ended 31 July 2023), the uncommitted reserves balance is projected to stand at £9,403,396.88 by 31 March 2024. If no further investments were made and based on the Section 151 Officer's assumption (for planning purposes) that the grant will increase by 1% annually within the period of the Council's Medium Term Financial Strategy (MTFS), the forecasted reserves would accrue to £13,795,214.63 by 31 March 2027.
31. Therefore, work has been undertaken to identify priorities for further investment during the MTFS period. These are the subject of a separate paper. Those requiring funding to start in 2023/24 are also the subject of a paper to secure budget approval from the Section 151 Officer. These investments would decrease the reserves position to £4,640,579.97 by 31 March 2027. Further proposals will be developed during 2023/24, some of which will be incorporated into the annual budget cycle. This will further reduce the projected reserves position for March 2027.

Performance Themes

A) Wellbeing and Independence

April-June 2023 Performance

Hospital Discharge

32. Currently, across all three acute hospitals in the county the percentage of discharges made on the same day or the next day that the person was deemed well enough to go home (Medically Safe for Discharge (MSFD)) is off target at 34% against target of 70%. The Integrated Care System remains in a position of national assurance since January 2023 due to it being an outlier in the high numbers of people in hospital who do not need to be there. People are not just waiting for social care, they may be waiting for a variety of reasons

including further health assessments, therapy, transport, equipment delivery, medication, etc. before they can go home. The departmental target to reduce the time it takes for people coming to social care through the transfer of care hubs is 3 days and the current performance is 5.5 days. The increase in homecare capacity over recent months has significantly improved flow through our services and positively increased the number of people going directly home from hospital.

33. The Integrated Care System has a new plan for delivery of Urgent Care to reduce the length of time people spend in hospital when they are well enough to go home. Assessment is being undertaken of all the different improvement projects and their impact on reducing MSFD numbers. This is positive as joint actions are required from all partners to affect the changes required. Projected impacts are now in place for the key work social care is involved in, which are to optimise how the multi-disciplinary Transfer of Care Hubs operate, review pathways and services for people who require accommodation-based rehabilitation and develop more integrated ways of working across reablement and community health services.

Safeguarding

34. Work is being undertaken to improve practice and better understand the reasons as to why people may not be asked what outcome they want following a safeguarding referral. Currently the position on this national indicator shows that 78.1% of people are asked against a target of 100% and a national average of 80%. Although work is ongoing to improve practice against this aspirational target, there are some valid reasons why people may not have been asked, for example, if they die before it is possible to meet them, or they refuse to engage. In future, the department will be keeping a record of reasons people were not asked, to better understand the gap between our aspirational target and practice. More positively, 96.4% of the people that were asked about their outcomes were happy that their outcomes were either fully or mainly achieved, against a national average of 95%.
35. Social workers record whether a safeguarding intervention results in risk being either reduced or removed and the department's performance is currently low at 79% against the target of 90% and a national average of 90%. Further practice guidance is going to be sent to all teams and there will be learning from the safeguarding quality audits to identify further improvements.
36. There has been focused work to reduce the numbers of people who had an open safeguarding case for longer than three months, which was identified as a key risk. The numbers of people with safeguarding enquiries open six months or over has reduced from 276 in October 2022 to 37 in August 2023, whilst the number of people with safeguarding enquiries open between three to six months has reduced from 95 in October 2022 to 82 in August 2023. For reference, there are currently over 400 safeguarding enquiries actively being worked on within the department that have been open for three months or less.

Deprivation of Liberty Safeguards

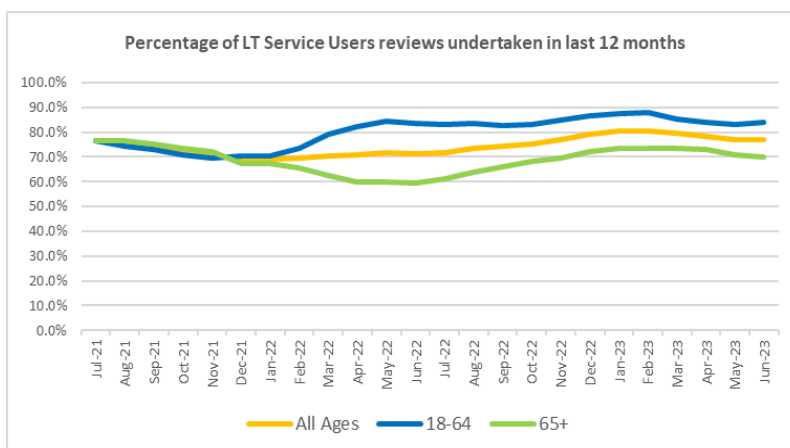
37. The Council has a statutory duty to complete 100% of Deprivation of Liberty Assessments (DoLS) to time, with the Council likely to receive over five thousand referrals this year. Like all councils nationally, this duty has proved challenging to meet, especially since the Cheshire West Supreme Court ruling expanded the definition of what constitutes a deprivation of liberty. Currently, the department has managed to complete 32% of the referrals received since April

2023. By way of context, this figure stood at 59% in April 2023, the last month of the contract with our previous third-party DoLS assessment provider.

38. Unfortunately, the transition to the new supplier, after completion of the compulsory re-tender process, has not been ideal, with June recording only 13% of referrals received completed. Since that time, much work has been undertaken with the new provider, including requesting a formal performance improvement plan from them as allowed for within the contract service specification. Whilst the new provider is now taking 20 assessments a week, with a target of 50 a week expected within three months, this does explain the current low percentage completion rate. Alongside this, the department is currently recruiting additional staff to increase output. Although this is set against a longstanding national shortage of specialist 'Best interest Assessors' (BIAs), the department remains confident that the current team establishment will increase to complete more assessments on a month-by-month basis.
39. A new legal replacement for DoLS, the 'Liberty Protection Safeguards' was due to be introduced as part of the Adult Social Care Reforms, however, this has now been delayed at least until the end of the current parliament. Consequently, the Council, like all Councils, must continue to operate under the existing 'DoLS' system, which was criticised by the House of Lords as far back as 2014 for being 'excessively bureaucratic' and 'not fit for purpose'. The Department recognises the risk contained within the current system, and alongside the measures described above, is committed to improving the quality of Mental Capacity Act (MCA) practice by ASCH staff through more training, quality improvement audits and recruitment of a dedicated MCA practice lead.

Long-Term Reviews

40. For the month of June 2023, 76.8% of people who are in receipt of services have received a review in the last 12 months against a national target of 100%



41. To support improvement in this area a review of the key risk indicator and key risk tolerances for reviews has taken place with monthly targets set with teams with the ambition to reach 100%.
42. Currently, there are 1,561 people without a review in the last 12 months. This remains a high risk from both a performance and risk perspective.

43. A review dashboard is live to ensure accurate number of completed reviews is reported and outstanding reviews are identified to aid Team Managers prioritisation of reviews, this will be further developed to apply the risk tolerances.
44. A data cleanse of information in Mosaic is an ongoing action, with the aim of having a reliable and accurate source of information which can be tracked each month against the target to complete 100%.

B) Active and Supportive Communities

April-June 2023 Performance

Employment and Training

45. The Parameters for the measure; proportion of young adults supported to access employment, education, training, or volunteering, were agreed when the measure was set up in 2022. However, work is now underway to review what can be included to contribute to the target and is due to be resolved by the end of August 2023.

C) Flexible and Integrated Care and Support

Direct Payments

46. Work is ongoing to increase the total proportion of commissioned care packages that use Direct Payments (DP), to meet the national target of 42%. Current data shows the department is achieving 40.7%. This is being addressed through:
- renewed communications to front line teams to raise awareness of the benefits and the process of referring people in for consideration,
 - disseminating a live DP data dashboard to show TMs their team's activity in commissioning DP packages along progress in achieving the savings target, and
 - run drop-in trouble-shooting webinars with staff and circulate recordings to maximise opportunities to share training.
47. As well as increasing the total number of DP packages being commissioned, there has been success at increasing (compared to last year) the proportion of DP packages to employ personal assistants and the savings target for 2023/24 is currently on track. This is good news for the people employing a PA, as it enhances their levels of dignity and empowerment.

Carers

48. As part of the new co-produced all-age carers strategy, the department heard feedback from carers through the big conversation events which took place across the county earlier in the year. Some of the themes coming out of the events are listed below:
- Better access to relevant and appropriate information, advice, and guidance.
 - Better access to short breaks or replacement care to get a break from caring.
 - More support for carer health and wellbeing.
 - Being listened to and being able to access good communication and information from health and social care providers.

49. Plans are being developed with partners to address some of the concerns, and the feedback will also be used to refresh the Adult Social Care Strategy.

50. One of the carers who helped to coproduce the strategy said:

"It's different, because it is (a strategy) across all the city and county so we don't get that postcode lottery again. We have the opportunity to do this together and help inform services going forward."

51. The department has also recognised there needs to be better visibility of carers data to support teams identify and prioritise carer groups and are improving the Mosaic workflow are looking to introduce care champions into teams.

D) Workforce

Workforce Plan Progress

52. There have been a number of initiatives being progressed as part of the department's workforce plan. A few of these are detailed below:

- Implementation of Think Ahead programme to attract Mental Health social workers.
- Streamlined recruitment process for some frontline roles and improved social media reach.
- Rebranding our recruitment adverts to incorporate the departments cultural priorities.
- Developed a 12-months rolling recruitment timeline for managers.
- Developing retention activities plan so that managers can have oversight on progress.
- Occupational Therapy rotations process with Health partners being progressed.

53. The department is seeing an improving trend for vacancies as detailed in the table below.

June 2022	September 2022	December 2022	March 2023
385	352	353	341

Practice Quality Assurance

54. As part of the department's readiness for CQC inspection, the Council has developed a new practice framework which demonstrates how the department will work towards the Social Care Future vision and Making it Real standards.

55. A recent audit of practice as part of this framework has taken place with Team Managers completing case reviews and speaking to people our frontline staff have been supporting.

56. Some of the feedback gathered is detailed below:

The worker was very good in every way. I could talk to her about personal things, and I could trust.

She was very helpful, showed real concern about me - I was not a number.

The worker was very busy, I wish she had more time to talk.



Public Health performance against Annual Delivery Plan, Corporate Vital Signs and Joint Health and Wellbeing Strategy

Public Health performance against Annual Delivery Plan -April-June 2023 Performance

57. The PH performance framework provides an overview of the impact of the PH division on improving population health outcomes for the residents of Nottinghamshire. The data here covers quarter one 2023/24 (1 April to 30 June 2023). The data confirms that PH services are predominantly recovering well from the COVID-19 pandemic. Further detail on key performance indicators is available on request.

A) Statutory Duties

Integrated Sexual Health Services (ISHS) (Nottingham University Hospitals (NUH), Sherwood Forest Hospital Foundation Trust (SFHFT) and Doncaster and Bassetlaw Hospitals (DBH))

58. In Quarter one, the sexual health services continued to provide excellent high-quality care for local residents. Overall, there has been a decrease in the total number of filled appointments across all three providers, particularly in April. The reasons are different for each provider but are due to combinations of additional bank holidays, industrial action (particularly at NUH) and reduced capacity due to recruitment and retention issues.

59. The recruitment of experienced clinicians hinders the ability of services to increase service activity. Services are reluctant to make long term investments due to uncertainty caused by the current recommissioning of services.

60. NUH are slightly underperforming in terms of the percentage of 15-24 year olds in contact with the service accepting a chlamydia test. The service is working to ensure that staff are encouraging testing and coding this activity when it takes place. The increased access to online testing may be having an impact as many young people are refusing tests because they have already had a test online.

61. All services are meeting the quality standard of 30% of women aged 16-24 receiving contraception accepting Longer Acting Reversible Contraception (LARC). The demand for LARC is increasing due to people struggling to access it in primary care. This is resulting in longer waiting times, particularly for LARC that involves increased medical intervention.

Services are exceeding the quality standard of 60% of new service users accepting a HIV test. This is important in reducing the transmission of HIV.

62. Re-commissioning of this key PH service continues. The initial selection stage has taken place with successful bidders currently being invited to the Initial Invitation to Tender stage. Many of the issues that commissioners are currently working with services to address, have informed the creation of a new service model.

Stories of Difference

DBH

"Dear Tri-health,

I wished to write to you today and take the opportunity to reflect with you on my personal experience of attending your clinic at Retford... I strongly feel and recognise when providing care related services, this level of support, I received today can be taken for granted, perceived by teams as "this is what we do". My thoughts upon leaving today, was "really, is this what you do?" because I felt there was a real skill, in not only providing physical care but also emotional support to a patient/ service user who felt worry, anxiety and shame upon admission and upon discharge left feeling supported, nurtured and welcomed".

SFHT

"Dan (name has been altered) attends the sauna regularly. He has never had tests for STIs. He sees a poster at the reception that the outreach worker is here today. He speaks to the worker and agrees to have a screen. He also gets information on how to stay safe. Dan receives a positive result for a STI. An appointment to see a doctor is arranged. Dan is now engaged with the service and has received a number of preventative interventions. Dan also mentioned to other sauna users about the outreach worker".

Health Checks (GPs)

63. Health check activity continues to show a steady recovery towards pre-pandemic levels during quarter one of 2023/24 with 5.7% more invites and 19.5% more health checks delivered as compared to quarter one in 2022/23. GPs are still under a lot of pressure and therefore whilst work with GPs to offer training and advice will continue, it may be difficult to get back to pre-COVID levels in the foreseeable future.
64. Additional funding continues to support community outreach health checks at workplace health events across the county. Outreach delivery at six events in convenient locations around the county improved access and enabled the delivery of 81 additional health checks in less clinical settings. As a result, 45 residents were referred to their GP for further investigation of raised blood pressure, raised cholesterol, and/or for being pre-diabetic, which otherwise might have continued to be undetected.
65. Many participants expressed the motivation to change their lifestyle following the NHS Health Check in order to reduce their risk of developing a heart condition.

Healthy Families (Nottinghamshire Healthcare NHS Foundation Trust)

66. The 0-19 Healthy Families Programme (HFP) continued to perform well during Quarter One of 2023/24, with 99.78% (1764) of new births receiving a face-to-face visit from the service within 14 days. In addition, there has been a 2.5% increase in breastfeeding rates at a county-wide level, 1% above our locally agreed target of 46.5%.
67. Analysis of performance data relating to the mandated elements of the service for last year identified that the Nottinghamshire HFP continues to benchmark well against both the England average, and statistical neighbours.
68. Historically, recruitment of staff, in particular qualified health visitors has been a challenge for the local provider. This picture is reflected nationally with significant workforce pressures being reported. However, the provider reports that in Nottinghamshire we are starting to see improvements, with less long-term sickness within the workforce and successful recruitment to vacant posts. Workforce capacity, recruitment and retention is monitored closely as part of the ongoing contract management process.
69. The contract for the HFP was due to end on 31 March 2024. At the Cabinet meeting in June 2023, approval was given to extend the contract by 6 months, bringing the contract end date to 30 September 2024. Cabinet also agreed the recommendation to re-commission the service using a co-operation approach with the incumbent provider, Nottinghamshire Healthcare NHS Foundation Trust. This process is now underway.

B) Strategic Priorities

Integrated Wellbeing Service (ABL - Your Health Your Way (YHYW))

70. During Quarter one 2023/24, Your Health Your Way achieved 3,154 outcomes for Nottinghamshire residents. This included, 407 people who had quit smoking at four-weeks following setting a quit date; 198 adults who achieved a weight loss of between 3% and 5%, and 664 adults, children and young people who had increased their levels of physical activity.
71. This quarter represents the highest level of outcomes achieved in any quarter to date and continues the upward trajectory of performance.
72. In addition, the service has attended 30 community events across the county and completed over 500 health checks. Other community engagement has seen the service deliver a 6-week 'Move More' exercise programme in partnership with BCVS for residents from ethnic minority backgrounds; a falls prevention group for people with early-stage dementia; and a healthy cooking course for young women from the Gypsy-Traveller community in partnership with the YMCA and Newark and Sherwood District Council.
73. The service has used funding to recruit to a new community role hosted by Mansfield CVS, with a focus on developing relationships with residents in the Bellamy estate in Mansfield. The job description was developed collaboratively with partners across Mansfield, and plans are in place to work with place-based partners across the remaining districts to roll out similar roles across the county. These roles will support the service and wider partners in better understanding how services can be tailored to meet local needs, with a particular focus on health inequalities.

74. During this quarter, the service has developed a new programme and curriculum to deliver family weight management sessions with school settings and this will be rolled out when schools return in September. The service also launched an early-years family weight management pilot supporting the families of children aged 2+ in Killisick.
75. While phone support for smoking cessation remains popular, the service has expanded the number of face-to-face stop smoking clinics available across the county to extend the reach and increase accessibility.
76. The staffing structure has been restructured to enhance capacity within the service and despite a small number of vacancies, the service anticipates being up to full capacity in quarter two.

Stories of Difference

A client engaged with the adult-weight management programme shared the following feedback:

"I have been feeling so much better, more get up and go. I can get up the stairs without holding onto the banister and not panting up the stairs like I did before. I am feeling a lot fitter, went on an 8 mile walk recently and really enjoyed it, was chatting away with my friends and wasn't struggling like I would have done previously.

I really managed to get to grips with both exercise and food tackling them both and have really enjoyed this surprisingly, managed to reduce portion sizes which the session massively helped. My advice for new starters would be to just go for it, it's such a friendly group and we do all make friends. It so supportive and motivating.

I have enjoyed immensely the last 12 weeks and really grateful for the support."

Illegal Tobacco Services (In-house, Trading Standards)

77. Recent and ongoing enforcement actions have highlighted the scale and complexity of the work being done by this service including links to organised criminal gangs.
78. The sale of vapes to under-18 children has now exceeded the sale of illicit tobacco linked to peer pressure and the profit margins in vapes. Most of the 'Elf Bars' are aimed at children due to their bright colours and packaging. They are designed as slush puppies, slim fizzy drink cans and the popular Prime drinks with exotic flavours. Furthermore, these vapes which should have a legal limit of 600 to 700 puffs are now being sold with up to 10,000 puffs. The service is tackling the offending premises and a large amount of stock is being removed costing the traders thousands of pounds.
79. All local Authorities in Nottinghamshire are pushing for disposable Elf Bars to be banned from local sale due to possible future health and environment effects when disposed.

INTENT – Smoking & Vaping Prevention Programme for Secondary Schools

80. Twelve schools participated in the programme in quarter one (the spring and summer term of the academic year 2022/23) and 11 schools have been recruited and have signed up to participate in the next academic year 2023/24. Additional Vaping lesson plans have been added to the programme and this has been a useful 'hook' to encourage schools to participate. A review/stocktake of the first year of the programme has been undertaken with some positive results.

Stories of Difference

81. The schools who participated in the stocktake/review of the first year of the programme reported that they found the Programme useful to fulfil the statutory requirements of RSHE regarding tobacco and vaping education. Both staff and young people in participating schools reported that the lessons were informative and interesting.

Homelessness (Framework)

82. This is a new contract which gives greater emphasis to enabling health and wellbeing outcomes within the context of supporting people to live independently. The service delivered support to 233 unique service users over the quarter.

83. The provider has piloted a new data monitoring request and is working with the commissioner to ensure that we are 'measuring what matters' this includes a new requirement to look at the housing outcomes for individuals in the 6 months following exit from the service.

84. A new contract manager is now in post which has added significant extra capacity to work on the development of the contract. A service development and improvement plan (SDIP) has been co-produced between the provider and commissioner with clear areas of continuous improvement identified for the coming year. Opportunities to improve the consistency of the provision across the county have already been identified and work has begun at pace to address this.

85. Challenges within the service include an increased number of individuals who have little prospect of coping well in their own tenancies after six months. This is resulting in the service continuing long-term support to these individuals and being able to take on fewer new individuals. There are also several external factors relating to housing and long-term supported housing supply that are having a similar impact. Provider and commissioner are working together to ensure that anything that can proactively be done to mitigate the impact of this is being undertaken.

86. There are continued recruitment and retention issues within the service and the provider has given significant inflationary increases to night staff to address this. Staff wellbeing continues to be an organisational priority and there are a range of initiatives and resources available to staff including support from clinical psychologists around debriefing from any critical incidents.

Domestic Abuse Services (Notts Women's Aid (NWA), JUNO Women's Aid and Equation) (Jointly commissioned with the Police and Crime Commissioner)

87. Adult social care and public health commissioning board agreed to extend Domestic Abuse Support Contracts by four years to up March 2028. This covers the full eight years contract and provides consistency, allowing service developments and gives sufficient time to prepare for a procurement in 2028.
88. Domestic abuse services have been given a 3% uplift on contract values in 2023/24 to help them address the increases in costs to deliver their services. This has also allowed them to consider pay awards for staff. Staff recruitment and retainment challenges seen in the previous year have resolved, with a large number of staff recruited in quarter one.
89. Male support services delivered by Equation are seeing an increase in their referrals and improved take up of services.
90. Juno Women's Aid are planning to deliver a new support programme called Own My Life. This programme helps women to understand the impact their abuse has on their lives and how they may view themselves. This increased understanding allows them to begin to rebuild their lives and start their recovery.
91. Notts Women's Aid have been working closely with CGL and have seen an increase in referrals for women using substances who have or are experiencing domestic abuse in CGL support services.

Stories of Difference

Equation Male Survivor case study

Case summary: High-risk referral received from NUH following a domestic incident where survivor had been assaulted by his brother (perpetrator), which had resulted in A falling on the floor and hitting his head on the kitchen countertop and being taken to A&E by a family member. The brothers lived in the same household with their elderly parents adding concerns for the welfare of the parents. There are concerns that Perpetrator is taking steroids, and when survivor challenged him on this, it led to an incident. Survivor disclosed that the Perpetrator has been like this for years.

Support needs identified: Safety Plans, Emotional support, regaining confidence, and Housing support.

Support services delivered/Referrals/Signposting: Signposted to Nottingham counselling service and Hetty's (for support living with someone misusing alcohol/substances). Local housing authority

Outcome: Survivor has engaged with support and now feels at a point where he feels safer and more in control of the situation. He has chosen to remain in the family home for now but is currently planning to leave the environment to find his own dwelling.

Testimonial: *'I feel that I have been able to deal with the situation a lot better following speaking to a professional; Equation has helped make me feel less isolated and more in control of my situation I no longer feel defenceless within my situation'. 'I didn't know anything about Equation*

before and feel that this is a valuable service to support males who experience domestic abuse. I would recommend this service to others.'

Insights (that could inform service improvement): Better opportunities for alternative and emergency housing would give clients more confidence in escaping the abuse.

All Age Substance Use Treatment and Recovery Service (Change Grow Live (CGL)) (Jointly funded with the PCC)

92. Adult social care and public health commissioning board agreed that the CGL contract would be extended until March 2028. This will provide a consistent approach to supporting people who are dependent on drugs and alcohol across Nottinghamshire.
93. There were 1374 new entrants into CGL this quarter of which 368 were new entrants into service for alcohol support.
94. Overall, there are 4423 people in treatment in Nottinghamshire which is 29% over the contracted target. CGL are currently distributing assessments across the team to ensure that people are getting into treatment in a timely way.
95. Partnership working continues and presentations of the service offer has been delivered this quarter to GPs with a view to increasing numbers in treatment. Reports from CGL indicate that individuals that are accessing support for substance use have multiple needs, therefore are in treatment longer and requiring additional interventions and onward referrals.
96. Developments from CGL this quarter include one of the support workers working with a private dental practice in Worksop, who has offered 12 places for rough sleepers. In addition to this, CGL Worksop were the first site that welcomed the dental van. The first event was in July and will be monthly from September. 38 CGL employees have expressed an interest to be training in mental health first aid, training to be delivered imminently.
97. There has been work undertaken in service to support people who are neurodiverse and in treatment. Rooms have been rearranged in Worksop with furniture rearranged and square tables replaced with rounded.
98. The CGL women's worker continues to work intensely with a small caseload of women, including women recently released from prison and is in the process of being vetted for HMP Foston Hall with the aim of providing in-reach at the prison.
99. There were 69 young people referred to the service this quarter of which 19 were from the youth justice service and 21 were from children's social care. Successful integrated and multi-agency working, along with therapeutic and recovery support, has resulted in the risk of significant harm for a family (3 children aged under 11) being reduced, the child protection plan is to be reduced from Child Protection to Child in Need. Mum remains abstinent and continues to engage in recovery support, children are to be successfully discharged from the service.

Stories of Difference

During May Half Term 2023, the team at CGL Nottinghamshire facilitated a Forest School Event for Children and Young People aged 5-13 whose parents or carers may be dependent on drugs and alcohol. Feedback from the young people were extremely positive,

"I felt really happy and really excited. The best was where we made the dens and when we played in the park and when we got to see all the animals. I loved it all. The other children went through the same things, thought we were the only ones going through it, so I felt relaxed with them".

Positive feedback has been received from a parent in relation to the support her daughter and herself have received from the resilience team:

'Not only has E been supportive to my daughter, but she has also been really supportive of me as well and has provided some really helpful advice, I am always quick to complain if I believe an injustice has been served and will fight for what's right, but, on the flip side, I think it's as equally important to highlight the positives and E has been fantastic – a real asset to CGL.'

Oral Health Promotion Services (Community Dental Services (CDS) CIC)

100. Following a re-commissioning process, the oral health promotion services started quarter one with a new provider, Community Dental Services (CDS) CIC.
101. Staff from the previous provider did not TUPE over which has limited the capacity and ongoing relationships to deliver the services. However, oral health (OH) training reached 38 staff and supervised toothbrushing was held in 19 settings in quarter one.
102. OH training has been promoted and delivered online this first quarter, but the provider plans to introduce in-person training and begin support for care homes and distributing toothbrushing packs during quarter two. Initial response to training received by care home staff has been positive with improved knowledge and understanding of the importance of oral health for residents in care homes.
103. CDS have made a positive start in providing immediate and ongoing support to families with children receiving tooth/teeth extraction following tooth decay, supporting 136 cases within quarter one.
104. In terms of social value, two new jobs have been created and are now filled by staff from the local area.

Stories of Difference

Care Home staff members have commented *'I've learned additional information that we did not have that is important in oral health care'* and *'[I've learnt] how to brush the teeth properly and what to look for in the signs and symptoms of disease and decay'*.

Vital signs development across public health

105. **Appendix A** '+ Vital Signs' tab provides a summary of the Public Health division vital signs and Q1 2023/24 data. The Business Intelligence Unit has developed overarching vital signs dashboards and are in the process of developing a Public Health specific performance

dashboard that will incorporate a broad range of public health key performance indicators that automatically feed into the ASCH and corporate vital signs dashboards. Due to the need to collate performance data from external providers and the minimal change in trends over short periods of time, this data will be updated on a quarterly basis. The workforce vital signs are collated departmentally by HR.

106. The vital signs dashboards will also link into the Nottinghamshire Joint Health and Wellbeing Strategy indicators dashboard which demonstrates Nottinghamshire's performance against the key Public Health Outcomes Framework (PHOF) metrics. This dashboard is available at [hws_indicators_June2023.html \(nottinghamshire.gov.uk\)](https://www.nottinghamshire.gov.uk/hws_indicators_June2023.html). It can be seen from this dashboard that overall Nottinghamshire performs above or similar to the national average. Areas where Nottinghamshire as whole performs lower than the England average are detailed below:

- Life Expectancy and Healthy Life Expectancy at birth for females (2018-20)
- Adults with a learning disability or in contact with secondary mental health services who live in stable and appropriate accommodation (2020/21)
- Obesity and smoking rates in early pregnancy (2018/19), breastfeeding prevalence at 6-8 weeks after birth, smoking status at time of delivery and newborn and infant physical examination (2021/22)
- 16-17 year olds not in education, employment, and education (2021)
- Social isolation in adult carers (2012/13)
- Percentage of adults aged 18 plus classified as obese or overweight (2021/22)
- Successful completion of drug treatment (opiates, non opiates) and alcohol (2021) and alcohol related hospital admissions (2021/22)

107. N.B. There is a time lag in delivery of the overall outcome and publication of the PHOF data. Many of these areas of performance have also been highlighted in the narrative report and Public Health continue to drive performance to support these outcomes. However, it is also important to note that broader civic, service and community population intervention approaches are required and often take several years to achieve large scale sustainable impacts on outcomes.

108. The risk level for the market sustainability vital sign, mentioned previously, is calculated within Public Health through oversight of the risks to our commissioned services. Public Health commissioned services risk remains low, with only 5 of these risks escalated to the Public Health divisional risk register and none of these classed as Very High.

Vital signs development across adult social care statutory duties

109. The overarching departmental vital signs identified within ASCH are statutory duties (including the Annual Delivery Plan), market sustainability, and workforce.

110. Work is underway to develop an Adults vital signs dashboard to provide an overview of the current risks associated with the ability to meet the statutory duties under the Care Act, maintain a sustainable care market and have sufficient workforce capacity.

111. The current areas of pressure are in our Mid-Nottinghamshire Maximising Independence Service and the Bassetlaw Discharge to Assess. This is due to staffing pressures in Bassetlaw and changes to ways of working in the Transfer of Care Hub. Additional support

is being provided to the Bassetlaw Team and recruitment has commenced for a new Team Manager.

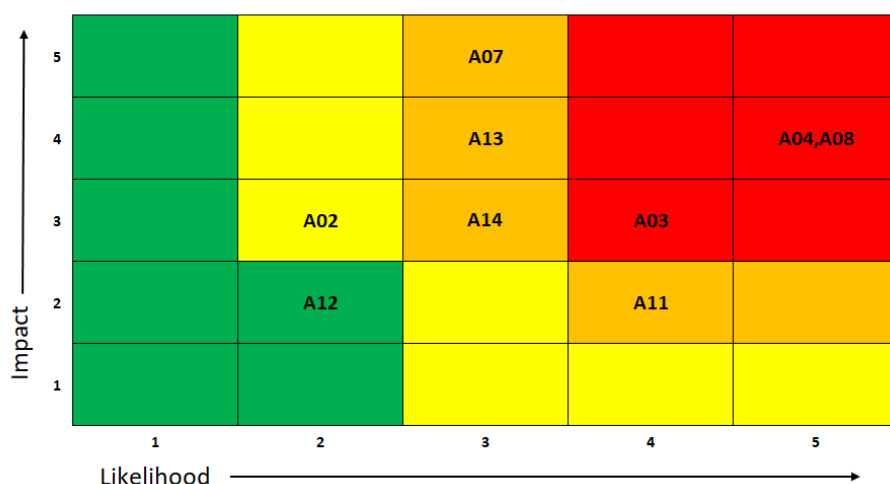
112. In Mid Notts the Maximising Independence Service continue to focus on people who are waiting for a service. This waiting list is reducing, with mitigations in place to manage risk, however this remains a key area of focus for improving performance. The MIS waiting list overall has reduced as follows:

	03.04.2023	31.07.2023
MIS Countywide	736	404
MIS Mid Notts	360	277

113. The Multi Agency Safeguarding Hub for Adults has been under significant pressure in recent months due to a combination of staffing issues, (illness, departures and new staff), and an increase in workload. As part of the mitigation to this risk the Council is looking to improve how people access social care, including safeguarding (front door) as part of a corporate programme and have used funding from Department of Health and Social Care to commission external support from experts in making the best use of digital opportunities.
114. The care market has increased significantly over recent months and work is underway to explore issues of supply and demand within specific geographical areas.
115. Living well care homes are seeing an elevated level of risk at the moment, and work is underway with operational staff to ensure that there is awareness of the risks and to also plan support for improvements. In July 2023 a specific Quality and Contracts Manager post was recruited to that will lead on improving quality in complex living well services, this is a joint funded post with the ICB.

Other areas of departmental risk

116. The heat map represents ASCPH risks as at the end of June 2023.



117. Further detail is given below on the very high risks from the heat map.

Risk ID	Risk Category	Risk Description	Current risk status	Mitigating actions to reduce risk
A03	Compliance & Regulation	People waiting for a conversation about their needs	VH	Development of vital signs reporting to support operational visibility and prioritisation and provide strategic oversight. DHSC development of wait time metrics to ensure consistency on data and reporting across Local Authorities.
A04	Compliance & Regulation	Data gaps following the Introduction of Client Level Data reporting to DHSC	VH	Improvement plans in place to reduce data gap.
A08	Financial	DHSC re-alignment for funding for charging reform	VH	Keep up to date with all charging reform updates from DHSC.

Financial Implications

118. There are no direct financial implications arising from this report.

RECOMMENDATION/S

- 1) That the Adult Social Care and Public Health Committee considers and comments on:
 - a) the financial position of Adult Social Care and Public Health, as at the end of June 2023.
 - b) the summary of Adult Social Care performance against performance themes.
 - c) the summary of Public Health performance against the Annual Delivery Plan, Corporate Vital Signs and Joint Health and Wellbeing Strategy.
 - d) the summary of adults' vital signs and key departmental risks.

Councillor Matt Barney
Cabinet Member for Adult Social Care and Public Health

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Constitutional Comments (SF 01/09/23)

119. The content of and recommendations within the report fall within the remit of the Adult Social Care and Public Health Select Committee (Council Constitution, Section 6, Terms of Reference in particular 'g. Review/scrutinise performance of the Council against policy objectives and performance targets').

Financial Comments (KRP 01/09/23)

120. The financial position is set out in the report, reflecting actuals and budget holder forecasts as at the end of period 3.

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.

None.

Electoral Division(s) and Member(s) Affected

All.