Appendix A

Adult Social Care & Public Health Performance, Risks and Financial Position Quarter 2 (July to September 2023)

ASCPH Select Committee 4th December 2023



Contents





E FINANCIAL PERFORMANCE

| Previous forecast Variance | Change in forecast | Department | Final Budget | Actual | Year-End Forecast | Latest Forecast Variance | Var as a %of budget |
|----------------------------------|--------------------|---|-----------------|----------|----------------------|-----------------------------|------------------------|
| £ 000 | £ 000 | | £ 000 | £ 000 | £ 000 | £ 000 | |
| | | ASCH Committee | | | | | |
| (334) | 182 | Strategic Commissioning and Integration | (38,344) | (55,954) | (38,496) | (152) | 0.40% |
| 5,659 | 258 | Living Well and Direct Services | 155,572 | 98,118 | 161,489 | 5,917 | 3.80% |
| (790) | 604 | Ageing Well and Maximising Independence | 145,221 | 80,402 | 145,035 | (186) | -0.13% |
| (205) | (156) | Public Health | 3,328 | (1,584) | 2,967 | (361) | -10.85% |
| 4,330 | 888 | Forecast prior to use of reserves | 265,777 | 120,981 | 270,995 | 5,218 | 1.96% |
| 144 | (144) | Transfer to / (from) Revenue Reserves | (2,891) | (900) | (2,891) | - | 0.00% |
| - | - | Transfer to / (from) Capital Reserves | - | - | - | - | 0.00% |
| - | - | Transfer to / (from) reserves (Ageing Well) | - | - | - | - | 0.00% |
| 205 | 153 | Transfer to / (from) Grant reserves | (3,328) | - | (2,970) | 358 | -10.76% |
| - | 3 | Redundancy related costs | - | 3 | 3 | 3 | 0.00% |
| 348 | 12 | Subtotal | (6,219) | (897) | (5,861) | 361 | -5.80% |
| 4,678 | 900 | Net Department Total | 259,558 | 120,084 | 265,134 | 5,579 | 2.15% |

• The overall Adult Social Care and Public Health budget is forecasting a £5.579 million overspend as of 30th September 2023.

• Integrated Strategic Commissioning is forecasting a net underspend of £0.15million after reserves, a decreased underspend of £0.04million since period 5.

• Ageing Well are forecasting an overspend of £0.15m. Overspends across all package types are offset by additional client contributions, additional joint funding income, staffing underspends and anticipated savings.

- The **Maximising Independence Service (MIS)** currently have a forecast **underspend of £0.366million** against a budget of £16million. This is due to Total Mobile licenses pending recruitment of additional staff towards the end of the year and some vacancies
- Living Well is forecasting an overspend of £6.83m 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.
- Direct and Provider Services area continues to forecast an underspend which at the end of September 2023 was £0.91m, a shift of £0.06m since the previous month.in addition to savings already delivered in year.
- Public Health is forecast to underspend by £0.36m, an increase from Period 5 of £0.15m.



f FINANCIAL PERFORMANCE – PUBLIC HEALTH

- 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.
- The table below paragraph 4 summarises the departmental financial position, including Public Health. As of the budget monitoring period ended 30 September 2023, a Public Health underspend of £0.36m is projected, which would be added to the Public Health reserves at the end of the financial year.
- 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.
- As of budget monitoring period 6, ended 30 September 2023, the uncommitted reserves balance is projected to stand at £8,789,678 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 £6,056,986 by 31 March 2027.
- Therefore, work has been undertaken to identify priorities for further investment during the MTFS period. Some of these, including proposals increasing our investment in severe multiple disadvantages, the Community Infection Prevention and Control service, domestic abuse and tobacco control, have already received approval and are reflected in the budget. Further proposals are being developed, some of which will be incorporated into the annual budget cycle. This will further reduce the projected reserves position for March 2027.





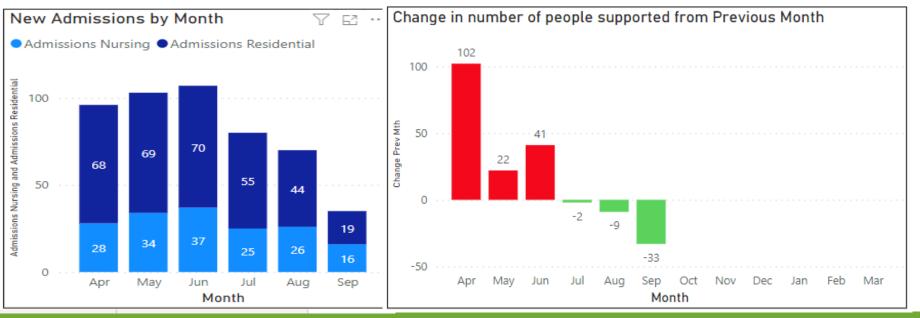
MIS delayed delivery of £832K savings due to reduced referrals from hospitals. Situation is improving and focus with partners is on reducing abandoned discharges which is affecting performance against the target. All benefits predicted to be achieved by 25/26

MIS enablement has a positive forecast for delivery against the savings target for 2023-24 however unlikely to achieve total savings that include those not achieved from 2021/22 and 2022/23

Strengths Based Approach – Status is "**at risk**" methodology being identified to capture pressure and savings, Strategic Insight Unit to look at alternative options to residential care and associated benefits.

Use of interim residential care for people who could go home has now been stopped as a routine option in all hospitals. Reduction seen in new admissions and people in care homes for the first time as described in the slides below.

The findings of a recent diagnostic around enhancing and scaling up the Departments Technology Enabled Care (TEC) offer provided evidence of the benefits both financial and for the outcomes of people supported by the Council. TEC Innovation sites have seen identified in the South to progress "proof of concept" which has been funded from the discharge grant





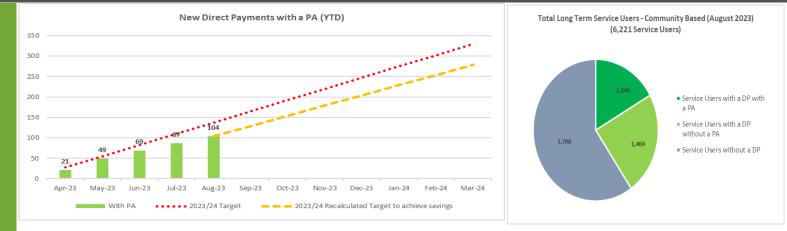
- The new appointee and deputyship team works with people unable to manage their own money to achieve their life goald
- This was based upon an increase in deputyship and appointeeship cases coming into the ACFS, so client contributions would go up.
- This increase was based upon a baseline of 1028 in August 2023 and to hit a target of 1210 by March 2025
- The forecast predicates the target will be hit early

Service Improvements

- A new system to review our letters about the amount of financial contributions people make towards their care is in place – a third of staff have been trained on expectations and 50% of our letters have been reviewed. All work due to be completed by the end of December
- Reducing the amount of "waivers"
 50% improvement on this time over last year from £80 k to £40k
- Consultation now live on "making your direct payments contribution work for you" - The survey will close on13th Nov
- Online financial assessments for people to complete has a proposed go live date of 9th Oct
- Place Based working we are starting local team clinics



BENEFITS REALISATION



The total proportion of people supported that use **Direct Payments** (DP), to offer people more choice and control over their support is 40.1% with a target of 42%

The utilisation of **Direct Payments** to employ PAs is forecast to meet in-year savings. This is a result of the change of commissioning and the impact of the centralised PA team leading on the commissioning.

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.

More demand than supply for supported living accommodation

Working with Commissioning colleagues to deliver 205-355 units over next 1-3 years and additional 121 supported living units in next 2-4 years

Review of Preparing for Adulthood pathway and protocol document ongoing including co-production with young people, families, staff and partners,

Development of education links set as priority for 2023/24

Short Breaks services could provide improved service offer to people and carers

Consultation due to commence in October



Nottinghamshire County Council

Strategic Commissioning

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ADULT SOCIAL CARE PERFORMANCE THEMES

Wellbeing and Independence

| Hospital Discharge | The targets for hospital discharge remain off track since June. It tak an average of 5.9% days (6 days last month) to discharge people from when they are well enough to go home, against a target of 3 days. Improvement requires action from all partners and a programme is in place with 3 key priorities. Urgent Care diagnostic by PA Consulting | om n | Ave 5.2 | Arage Da leave f 5.1 | ys betw nospital 5.5 | | | y to 5.9 |
|---|--|-------------------|--|----------------------------|----------------------------|----------|----------|-------------|
| Safeguarding | to be completed end Oct 2023. 80.5 % of people were asked their desired outcomes, which is above the national average of 80%, but below the target of 100%. The new workflow in Mosaic will improve understanding of performance in this area as the reasons why people are not asked will be recorded. A meeting with key stakeholders to take place to agree a go live date for the new workflow in Mosaic | | | | | | | |
| Deprivation of Liberty Safeguards (DoLS) | The team are working closely with the new DoLs provider who is not yet delivering sufficient capacity of Best Interest Assessor (BIA) Social Workers. This is the main reason performance remains off track. Mitigation is ongoing recruitment to Council employees which is having improved success and sourcing via our Corporate non-specialist agency contract There has been a 10.2% improvement in the %age of completed DoLs assessments since last month | | | | | | | |
| | reaching 56.6% in September. This however remains off track, with mitigations in place to recruit to four BIA posts will hopefully be reflected in performance | | | | | | | |
| | For the month of September 2023, 78% of people who are in receipt of services have received a review in the last 12 months against a national target of 100% which is a slight improvement from last month | Due | RA(20.44% · | G Revie | w Time | liness | | |
| Long-Term Reviews | In the last twelve months 4,809 people have had a review, with 1,500 currently without a review in the last year. | Overo 24.2 | | | | - In Tim | e 55.359 | 6 |
| | Strengths-Based reviews starting in AW North Notts to improve outcomes and reduce spend on statutory services where appropriate | months Due - R | Overdue - Previous review more than 12 months ago Due - Review Due within 4 months In Time - Review due in more than 4 month | | | | | nths |

Flexible and Integrated Care and Support

| Carers | To underpin the new All Age Carers strategy a new carer support services (the Carers Hub and Young Carers support) have been jointly commissioned with Nottingham City and the Integrated Care Board and new contracts commenced on 1st October 2023. Commissioners are currently working with the new Carers Hub service provider to enable a smooth transfer from the previous incumbent, and to ensure minimum disruption to the service that carers receive Implementation of the new strategy includes changing the way the department works with carers so that all services and teams 'think carer' with their everyday practice. This includes ensuring that workers have 'better conversations' with carers as part of the strength-based approach and ensure they listen and include carers with the support they need to continue their caring role. Standards have been set by carers who co-produced the new strategy of what 'good' looks like for them through the 'I' and 'We' statements they created. These link directly with the new social care practice framework, with the outcome of audit work against this framework used to evidence where workers are having 'better conversations' as part of the support for the person, as well as the quality of completed assessments of carers needs. |
|----------------------------|---|
| Technology Enabled Care | TEC - 892 referrals have been received since Apr 23 which for the same period last year is a 54% increase for Ageing Well 36% increase for Living Well , 20% increase for MIS 11% increase for Discharge to Assess |



ADULT SOCIAL CARE PERFORMANCE THEMES

Workforce

| Exceeded and the second and the seco | Further recruitment activity has continued over the last quarter with the launch of "Shining Stars" recruitment campaign which ran until the end of September 2023. The campaign pilot was a pilot aimed to attract people from diverse backgrounds into some of our hard-to-fill roles in the north of Nottinghamshire. Through this campaign, our colleagues were showcased as shining stars and the social care department as a place promoting positivity and well-being, delivering high-quality care that truly helps people live in the place they call home. The campaign prompted 217 applications in total with a high proportion (approx. 61%) of applications for |
|--|--|
| | Community Care Officers. Work continues to pre-screen, shortlist and interview the applicants |
| External Workforce | Capacity in the care market has been improving steadily over recent months this is partly due to increased recruitment of overseas workers, with approximately 30% of the external social care workforce being overseas workers There is an escalating risk for this workforce in respect of: Risks that this workforce is being exploited, there has been an increase in modern slavery etc. in recent months. Providers sustainability in respect of financial viability and maintaining capacity to be able to pay the wages for the overseas workers. Risks to service delivery if providers have their licences suspended or terminated. To support the ongoing challenge of recruitment for our social care providers (9.5% vacancy rate) and in recognition of provider feedback around boosting the advertisement of their vacancies, a digital advertising agency has been funded to promote our Opportunities in Nottinghamshire (oppsinnotts) website. During the period end of March to 31st August there was a total of 22,343 on-site searches for 'care' which then led to a total of 13,665 clicks through to apply for jobs. Evaluation work is underway to determine the impact of this on care vacancies across the county and whether the above figures resulted in an increase in applications and positive recruitment outcomes for the sector. |
| | ottinghamchira |



ADULT SOCIAL CARE PERFORMANCE THEMES

Quality Assurance – Annual Conversation Feedback

Strengths Based Working

STRENGTH

Wholesale shift to strengths based working

Investment in professiona practice and leadership

IMPROVEMENT

Build on practice audit process to increase number of reviews

Deeper dive into quality of assessment and reviewing practice

Embedding Owning and Driving Performance (ODP)

STRENGT

Significant progress using data to improve performance and outcomes

ODP Tools used by colleagues and performacne messages understood

IMPROVEMENT

Move from use of data to intelligence

Improve waiting times for assessment

Automated reporting for areas such as supervision, EPDR and mandatory training

STRENGT

Big Conversation and listening events

Becoming

co-productive

Introduction of Making it real Forum

IMPROVEMENT

Making It Real Forum -Develop some people led outcomes and performacne metrics

Making ir Real Forum has meaningful engagemtn with political leadership

Working in Partnership

STRENGTH

The strength of joint working in the areas of meantal health and learning disabailities

Trabsfer of Care Hubs and improved support to hospitals

Exceptional support to care providers during pandemic

IMPROVEMENT

Improve working with district councils

Improve ineqaulities, diversity and inclusion

Working with voluntary, community and wider partners including Healthwatch

Adult Social Care (ASC) and wider Council

STRENGTH

Good level of understanding of the depth and breadth of change delivered in ASC

There is strong financial management

Emerging work on life course approaches such as the Carers Strategy

IMPROVEMENT

Build understanding of the risk, cost and outcomes of Social Care waiting times

Maximising Employment, Housing and Place leadership for outcomes for people who draw upon care and support



STORIES OF DIFFERENCE

Mrs B had a fall at home and required reablement support to help her increase her confidence and mobility again. Mrs B's son called AW Rushcliffe for assistance and following an initial strengthsbased conversation it was clear that re-ablement would be the best option. Support was arranged quickly, and the following compliment was sent to the AW Community Care Officer:

"I would just like to take this opportunity to thank you so much on behalf of my mother for all your help and assistance in securing a care package so quickly and effectively in what has been a difficult time for my mother. In addition, may I thank you for setting out the position so clearly and pointing me in the right direction for the future care of my mother."

AW Strengths-Based Approach

Feedback from a LW Team Manager following a social worker's excellent strength-based approach with a person who was refusing to engage with social care and wider stakeholders:

"It was known that the person loved animals so reflecting on the best way to engage with the person, the social worker took her own dog to the visit. The results were immediate. The young adult started to talk about her life and interests and engaged wholeheartedly with the social worker to achieve their outcomes. This was a lateral way of working but so positive and productive – a real person-centred approach!"



STORIES OF DIFFERENCE

Mum informed me she had felt quite stressed as she had not heard from the team for some time since her original contact with NCC and was worried Kaitlyn would miss out on the opportunity to attend Landmark's.

However, since having the assessment meeting at Worksop Library with GB and the ongoing contact/updates from GB, she has felt such relief and asked that I thank GB for all her support. I confirmed I would pass this on and asked if I could also highlight the work GB has completed to our managers as it is evident GB has applied our policies and processes really effectively and efficiently - without this effort, there would have been a significant delay.

I've also read through the assessment and transport Eligibility, and it really is a good example of how we should record work. It's a shame GB is going on Mat Leave, she could have done a presentation in the team meeting!

I do also think it highlights how well Clinics can work so we need to spread that message too.

LW Strengths-Based Approach

Compliment received by Social Worker in AW Flexible Response Service:

"Your support, advice and professional knowledge and understanding has been invaluable to us at a time of considerable emotional distress and anxiety concerning my dear Mum's health. Laura, you are an asset to your team and we wish you every success in the future"



In the second secon

- Within the **Integrated Sexual Health Services** there has been an increase in the total number of appointments across all three providers. This is positive in the context of continued industrial action and reduced capacity due to recruitment and retention challenges. All providers are meeting or exceeding the quality standard of 60% of new service users accepting a HIV test and 30% of women aged 16-24 receiving contraception accepting Longer Acting Reversible Contraception (LARC).
- The 0-19 Healthy Families Programme (HFP) in quarter two when compared to Quarter one increased in both the proportion of new birth review visits completed by 14 days, and in the proportion of 12-month development reviews completed by 15 months. Other key indicators remained consistent.
- This quarter the Integrated Wellbeing Service has been working with public health and wider partners to complete a scoping exercise and action plan focused on improving support for people with severe mental illness (SMI). They have also been working within localities with local partners and collaborating with the CVS tp better understand how services can be tailored to meet local needs, with a particular focus on health inequalities.
- **Domestic Abuse Services** share that referrals continue to be more complex (involving substance use and mental ill-health) and often at higher and escalating risk levels. Ongoing cost of living pressures have a significant impact on a survivor's ability to leave, resulting in them staying in abusive relationships for longer.
- There has been a slight reduction in the number of successful completions this quarter within The All Age Substance Misuse Service due to an increase in complexity of presentations of residents with multiple challenges including poorer mental health, housing issues and increased financial vulnerability. However, there is still a significant number of people presenting to CGL with drug and alcohol dependencies and CGL are overcapacity within the service as per the contract number.



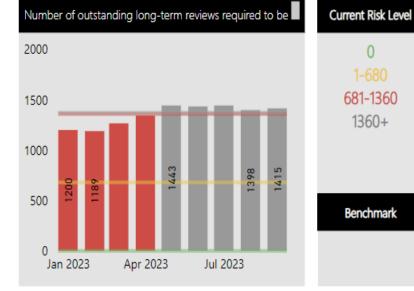
🔍 ADULT SOCIAL CARE VITAL SIGNS

Statutory Duties

Waiting Times:

- East Midlands ADASS /IMPACT project looking at the impact of people who are waiting has commenced with survey out to get staff perspectives
- Internally the Vital Signs dashboard is progressing with snapshot examples for
 - Mental Health Act referrals
 - Safeguarding incomplete s42's
 - Long Term care reviews
- Work continues around the waiting times for care act assessments including carers with the risk prioritisation tool has been piloted with positive results, with rollout due in November.





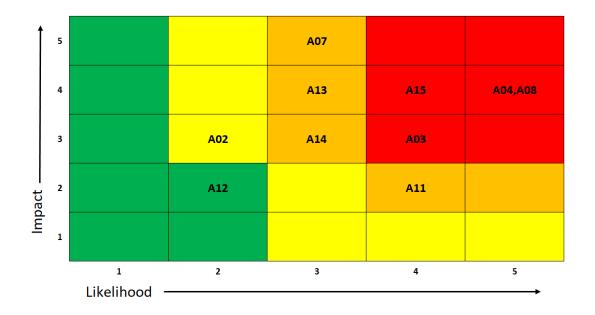
VITAL SIGNS

Market Sustainability

| Nursing Home Urgent Closure | CQC notified the Council on the 20/09/2023 of their decision to suspend a registered Nursing Home from 21/09/2023 This required an urgent escalation to ensure that people were safe and that they and their families were kept informed. Unprecedented factors meant that on the day there was a long delay in getting into the service to support safe moves to different care homes, despite all the required health and care services being on site. This very difficult situation required close working between social work operational teams, QMMT, ICB quality team, CHC nurses, medication management, ambulances, police, legal teams, local pharmacists and other care homes. This multi-disciplinary approach resulted in the successful moves of 16 people to a new home in approximately 5 hours <u>A fantastic achievement which would not have been possible without all those people involved.</u> | | | |
|--------------------------------------|--|--|--|--|
| Day Service | The Council were informed by Thera East Midlands of a day service closure in the Rushcliffe area. Nottingham Mencap have worked incredibly diligently, driven a real desire to ensure people are not left without a service, to create a new service offer to commence from 22 September. Nottingham Mencap have skilfully managed the complexities with family anxieties and have truly gone above and beyond expectations to ensure this is a successful transition | | | |
| Extra Care | Metropolitan and Thames Valley Housing have formally written to the Council as they are exiting the regulated care market due to a change in strategic direction. A new care provider will be required for the care of people who currently residing within two schemes in Rushcliffe from 1st April 2024. Additional risk as the Provider will not be tendering for the accommodation element of the service in the future which will need to be commissioned separately following some review work and options modelling but will mean no new nominations can be made. | | | |



A DEPARTMENTAL RISK



| 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 | νн | 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 |
| A15 | Financial | Adult Social Care over spend and Benefits Realisation for Ageing Well Strengths Based Approach | VH | A diagnostic has been completed by the Strategic Insight Unit on AW Strengths Based Approach. New targets and actions are being put in place for Group Manager service and team plans. |