

27 April 2015**Agenda Item: 6**

REPORT OF THE SERVICE DIRECTOR, SOUTH NOTTINGHAMSHIRE

OUTCOME OF SECTOR LED IMPROVEMENT PEER CHALLENGE 2014

Purpose of the Report

1. The report updates the Committee on the departmental response to the areas of development highlighted by the regional sector led improvement peer challenge process that took place between July and September 2014, and proposes that Committee receives a further report in October 2015 when this year's peer challenge process is completed.

Information and Advice

2. As part of the sector led improvement process the department is required to complete a self-assessment template on an annual basis which challenges the Council to assess and illustrate how well it is performing against 6 key themes:
 - Enabling maximum choice and control
 - Helping people to stay well and independent
 - Enabling accessible information and positive advice and support
 - Keeping people safe
 - Leadership
 - Use of resources.
3. The self-assessment formed the basis of a 'local challenge' in July 2014 involving the Deputy Director, Adult Social Care, Health and Public Protection, and an independent social care consultant with regard to the Council's current performance in adult social care, its strengths and the areas for development. Further to this the cycle of challenge was completed with a summit in September involving all the Directors of Adult Services in the East Midlands meeting to share and discuss their progress; a regional action plan was developed following the summit. A report on this process and the outcomes was considered by the Committee on 1st December 2014.
4. The Senior Leadership Team considered the areas for development identified in the local challenge and leads were identified to update on current work and progress against these areas (some of the identified areas were already known to the department) and what further improvement actions were required and planned.
5. Further to this process the Committee will be aware that the department recently took part in a peer challenge process focused on performance against new standards called

Commissioning for Better Outcomes. The department is currently awaiting the full report from the peer challenge team and a report on this will be brought to Committee in due course. As there is overlap in some of the areas identified for improvement it is intended to combine the action plans where it makes sense to do so, and the improvement work undertaken will be reviewed at the departmental Performance Board.

Areas for improvement

6. There were seven areas highlighted by the challenge process as areas for improvement. The first three of these are on a performance indicator basis, and the intention is that these should be monitored alongside other departmental performance indicators through the Performance Board. The first area concerns the employment of people with mental health needs, identified as low with a slight drop from the previous year. The challenge process looked at performance data for 2013/14 - 3.9% which is half that of the comparator group (8.2%).
7. The Young Adults Mental Health, Learning Disability and Sensory Neurological Impairment Integrated Commissioning Group has a number of associated actions and milestones for 2015/16. These include: evidence based packages of care being offered in a person's recovery and rehabilitation that will provide access to appropriate training and employment; development of an integrated approach between health and social care to reduce the number of Employment and Support Allowance claimants; ensuring those off work due to mental health problems have early access to mental health interventions (included in the Nottinghamshire Workplace Award Scheme), and quarterly monitoring of the Council's Co-production service performance outcomes indicator that measures the number of people accessing the service in voluntary or paid employment.
8. Also relating to mental health services, the second area identified was a low number of people in contact with secondary mental health services who are living independently (25.7% against 50.8% in the comparator group). It is Nottinghamshire Healthcare Trust that collects and provides the performance information on people living independently through the Care Programme Approach documentation. The Council intends to work with the Trust to understand the information they produce and to look at whether this can be aligned with the Council's data.
9. As a result of the Mental Health Utilisation Review (2013/14) the Council has helped to move 28 people from NHS care to supported independent living. Using an integrated health and social care approach at least 15 people are due to move into independent living accommodation by June 2016. A joint partnership approach is in place with Nottinghamshire Healthcare Trust, the Clinical Commissioning Groups and the Council to review housing support options for people with complex care needs. The Council also has an accommodation panel to ensure that the most appropriate accommodation support is identified, and the use of residential care is reduced.
10. The third area is the high number of older people funded by the Council in residential and nursing care homes. Over the past three years there has been a steady reduction in the number of older people supported in residential and nursing care across the County. The figures for 2013/14 (1,900 per 100,000 population for adults over 65 years) are very close to the East Midlands average (1,860 per 100,000 population).

11. The work undertaken by the Council to reduce new admissions to permanent residential and nursing home care has been successful, and this work continues. The number of admissions per 100,000 population has reduced consistently over the past year (2013/14 figures – 650 per 100,000 population) and are now below both the East Midlands and national averages (710 and 680 respectively).
12. It is suggested that the remaining four areas for improvement are incorporated into the action plan that will be developed in response to the recent peer challenge on Commissioning for Better Outcomes.
13. The fourth area identified was in relation to the Council having a high proportion of support packages that were at a very low level. Work is underway to identify the current number of packages in question so that review work can be undertaken. The department and Public Health colleagues have undertaken an audit of service users receiving short homecare visits, and a separate audit of homecare providers. Findings have been shared with care providers and commissioners to inform the suitability of commissioning these visits.
14. One of the ongoing issues in this area is the need to clarify the position on whose responsibility it is to commission, fund and provide visits to people who require a prompt for taking medication, as this is not currently undertaken by community health providers.
15. The fifth area identified for improvement was that there is more for the Council to do in respect of developing strong and robust community capacity, to help support people with social care needs. A Cross Council Community Empowerment and Resilience Programme led by the Council's Corporate Director for Policy, Planning and Corporate Services is now in place and is looking at:
 - understanding communities and the Voluntary and Community Sector (VCS) in Nottinghamshire
 - enabling the VCS to grow, be more sustainable and to better support the communities it serves to be more resilient
 - building capacity within communities to enable them to be more empowered and resilient
 - exploring how the approach and use of resources is optimised both within the Council and with other stakeholders to maximise positive impacts on communities and reduce reliance on public services
 - exploiting opportunities for collaborative working to benefit communities (e.g. creating an innovative and trusting relationship which will enable partnership bids for appropriate and significant funding).
16. The Council is also currently working on a new short term prevention service, which should be in place by Autumn 2015. This will be focused on targeted short term support with an emphasis on self-care for older people and people with long term conditions. This is being developed with the input of older people in the community, and in conjunction with Public Health and Clinical Commissioning Groups. Nottinghamshire Help Yourself, an online directory for advice, information and support across the County, became available from March 2015. The website is a partnership between health, social care and the voluntary sector to bring information and advice together in one central repository.

17. The sixth improvement area identified was in relation to support and services for black and minority ethnic communities. The challenge process suggested that this should be examined further possibly in liaison with Public Health with a view to targeting activity and appropriate support. Discussion has taken place with a Public Health manager with a view to building on the information in the Joint Strategic Needs Assessment (JSNA) and producing a plan on targeting services in the future. A chapter on demography - covering all populations of identity - was developed for the JSNA in March 2014.
18. As part of the Joint Carers' Commissioning Strategy 2015/16, the Council and all Clinical Commissioning Groups have agreed to jointly fund a Commissioning Officer who will work with seldom heard carers, including carers from black and minority ethnic communities. This post will identify carers and work with them to develop information and services which meets their needs.
19. The final area for improvement identified was the need for greater corporate ownership and accountability for adult safeguarding through regular meetings of the Chair of the Board and the lead safeguarding officer, with the involvement of the Chief Executive, Director of Adult Social Care and the Committee Chair. Meetings have been arranged for the Nottinghamshire Safeguarding Adults Board (NSAB) Chair and the new Chief Executive of the Council. The NSAB Chair has also met recently with the Deputy Director of Adult Social Care, Health and Public Protection and will meet with the Corporate Director on his return in April. The NSAB Chair has also attended recent Adult Social Care and Health Committee and Health and Wellbeing Board meetings to highlight the statutory footing the Care Act has brought to Adult Safeguarding Boards and the emphasis on Making Safeguarding Personal agendas.
20. For this year, the annual self-assessment as part of the East Midlands Sector Led Improvement programme will be issued for completion by the end of June 2015, with the follow up local challenge meeting for the Council in August.

Other Options Considered

21. This report is for noting.

Reason/s for Recommendation/s

22. This report is for noting.

Statutory and Policy Implications

23. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working 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

24. There are no financial implications.

Safeguarding of Children and Vulnerable Adults Implications

25. One of the recommended areas for improvement identified in the challenge related to ensuring greater accountability and ownership of adult safeguarding at senior levels of the Council. The Care Act has introduced a statutory footing for Adult Safeguarding Boards and Nottinghamshire is well placed to respond to new legal requirements.

Implications for Service Users

26. Improvements in all the areas identified within the report will benefit service users across the County.

RECOMMENDATION/S

That the Committee:

- 1) notes the work undertaken and plans in progress to respond to the areas for improvement raised in the regional sector led improvement peer challenge process.
- 2) receives a further report in October 2015 when this year's peer challenge process is completed.

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Constitutional Comments

27. As this report is for noting only, no Constitutional Comments are required.

Financial Comments (KAS 08/04/15)

28. The financial implications are contained within paragraph 24 of the report.

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.

Feedback from Peer Challenge process – report to Adult Social Care and Health Committee on 1 December 2014

Electoral Division(s) and Member(s) Affected

All.