

Adult Social Care & Public Health Performance, Risks and Financial Position Quarter 3 (October to December 2023)

ASCPH Select Committee 4 March 2024



OUTCOMES

"We are writing to express our sincere gratitude and appreciation for the extraordinary service provided by the Start Team... Their commitment to restorative care and goal-oriented, home-based rehabilitation has made a significant impact on my father's life.

The kind professionalism and exceptional proficiency and empathy demonstrated have not only improved our father's physical well-being but have also played a vital role in restoring his confidence and independence. Their kindness, thoughtfulness, and unwavering support have created a positive environment that goes beyond the call of duty and has helped improve his personal well-being...

Thank you for leading a team that prioritizes excellence in Adult Social Care & Health. Your team's efforts have made a positive impact on our father's life, and for that, we are sincerely grateful."

**Feedback received for
the AW Start Team**

LW Story of Difference A Brooke Farm Trainee has successfully gained seasonal work at the Nottingham Branch of John Lewis. She will return to Brooke Farm in January and it is hoped that this experience will lead to a permanent outcome going forward.

Learning Disability Complex Care – First Christmas in their own home

Due to new supported accommodation developments, we have supported several people with a learning disability and/or autism to leave hospital and have their first Christmas in their own homes. J hosted Christmas for his family in his new bungalow, and his family said it was the best Christmas they had all had in years – they even found time to try out the local Disco over Christmas for a bit of a dance.





ADULT SOCIAL CARE PERFORMANCE THEMES

Wellbeing and Independence

Hospital Discharge

The targets for hospital discharge have been improving this quarter, in line with trajectory. It takes 5.6 days to discharge a person from when they are well enough to go home (Nov data). System improvement plans are in place including a focus on P1 flow, P2 rehab beds and abandoned discharge. Deep dive is underway to review longer delays.

| Jul | Aug | Sep | Oct | Nov |
|--|-----|-----|-----|-----|
| Av. Days between ready to leave hospital and discharge | | | | |
| 5.7 | 6 | 5.9 | 5.7 | 5.6 |

Safeguarding

78.5% of people were asked their desired safeguarding outcomes in Dec, below the aspirational target of 100% and just below the national average of 81%. Of those, 95% felt their outcomes were achieved, which is on track. The percentage of cases where the risk was reduced or removed is improving but remains off target. The new workflow in Mosaic will improve understanding of performance and inform subsequent action plans.

After initial success in reducing the number of people with a safeguarding case open for longer than 3 months, the number open over 6 months or more has begun to rise again, however the number of people with safeguarding cases open between 3-6 months has reduced significantly.

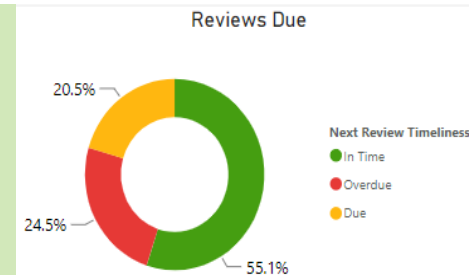
Deprivation of Liberty Safeguards (DoLS)

Performance against the target of 100% of DoLS assessments within timescales remains off track, however we continue to see steady improvement on this - 65.3% in November, compared to 56.6% in September.

The new external DoLS provider has agreed to a revised contractual 'call-off', limiting the number of assessments to improve quality and timeliness and accepting financial penalties if targets not met. Recruitment drive for more Council employed BIA social workers was successful, with four candidates now in post and further recruitment planned. Four additional agency staff also recruited.

Long Term Reviews

In December, 77.1% of people in receipt of services have received a review in the last 12 months against a statutory duty of 100%. Year-end performance is forecast to be around 77.8% which is lower than March 2023 (79.4%). Performance is impacted by staffing vacancies currently in recruitment and additional posts currently onboarding. Mosaic processes are also being reviewed where data is being skewed by reopened cases which show from their initial start date. Strengths-based reviews are continuing to improve outcomes and reduce spend.





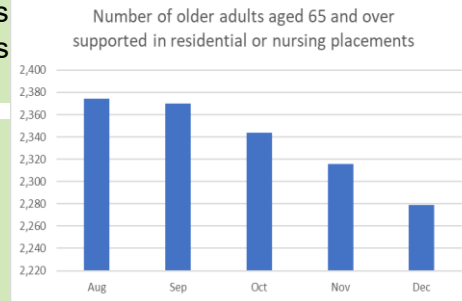
ADULT SOCIAL CARE PERFORMANCE THEMES

Flexible and Integrated Care and Support

Long term care

The number of older adults (over 65) in residential/nursing placements continues to gradually decrease, with 95 fewer people supported in care homes since August.

The year-end prediction for young adults (18-64) new admissions per 100,000 population may exceed the target by the equivalent of 8 people. 76.9% of 18-64 year olds are receiving long-term support living in their own home or with family.



Carers

The Carers Strategy launch was held on 16th November and was well attended by carers, with positive feedback. Action planning is underway with a series of workshops planned to discuss implementation. New services for carers commenced on 1st October and commissioners are working with providers to ensure services are delivered in line with the new specification and strategy aims. Work is being carried out through the practice framework to look at the quality of carers assessments and ensure carers are getting parity of provision. Work has commenced with Social Care Futures to look at the provision of short breaks for carers with the initial planning meeting for intelligence gathering set for 30th January.

Supported Accommodation

68 voids within supported accommodation as of Jan 24. For 36 of these an individual has been identified and assessment and transition work is ongoing. Void levels are higher than previous reporting periods, in part due to the recent creation of two new supported accommodation schemes where graduated use is ongoing. Where a void has been open for more than 12 weeks, factors include workforce issues, compatibility, quality suspensions, and service location. An action plan is being followed to manage the timescales and available resource, ensuring mitigation of financial investment and maximising opportunities for use of accommodation.

| | Oct 23 | Nov 23 | Dec 23 |
|---|--------------|--------------|--------------|
| Number of schemes | 179 | 179 | 181 |
| Total number of units of accommodation | 749 | 749 | 763 |
| Number of voids | 55 (7.3%) | 54 (7.2%) | 64 (8.4%) |



Workforce

Internal Workforce

Learning and celebration event held 8-9 November. Colleagues attended from across the department to hear keynote speakers, network and take part in discussions. People with lived experience were involved in the sessions and the level of engagement and enthusiasm from colleagues was evident throughout.

Vacancies across the department remain high at 20.52% (Dec 2023), particularly for registered social workers, BIA social workers and positions in the Bassetlaw area. Discussions are underway with the Corporate Workforce Lead to develop options.

Sickness absence has been on a downward trajectory this quarter, from a high in October (17.39 annual average FTE days lost /employee) to 14.03 FTE days in December. Muscular/Skeletal, Op/Post Op Recovery and Stress/Depression were the most common reasons for absence.

External Workforce

Funding secured to commission Mental Health First Aider training for our external care providers, to support mental health in the workplace. Courses will be held throughout the county from April-June 2023 and initial feedback has been very positive.

Funding also secured to renew the accredited Medicines Management Training for care homes and fund 1000 licenses. This will provide assurance that staff are competent to deliver medication for residents and it will also provide a recognised qualification for the carer.

Bid submitted with system partners to support our External Workforce Planning Project, including promoting recognition, respect and understanding, recruitment and retention and development and learning. We are through the second stage of the process after being longlisted.





PUBLIC HEALTH PERFORMANCE

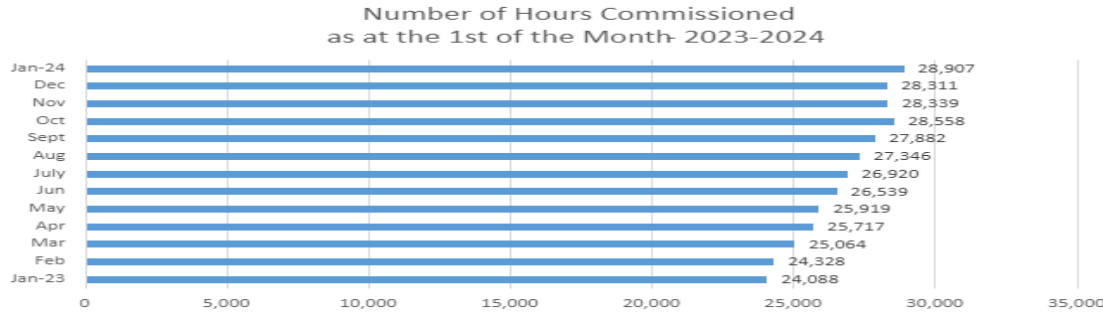
- Re-commissioning of the **Integrated Sexual Health Services (ISHS)** is drawing to a conclusion. Moderation is taking place in February and hopefully the successful bidder will be notified in March. This will give the new provider six months in which to mobilise. Nottinghamshire will have a new model ISHS from 1st October 2024.
- **The 0-19 Healthy Families Programme (HFP)** continue to perform well and to benchmark well against both the England average, and statistical neighbours. Cabinet has agreed the recommendation to re-commission the service and this process continues.
 - Public Health offered **flu clinics** to frontline workers over 16 days between 2 October and 8 November. Flu clinics ran at 34 different locations and delivered 1391 flu vaccinations.
 - In addition to the flu clinics, PH also managed to get the NHS COVID vaccination team on site for 2 days to offer both winter vaccinations to eligible staff. The team vaccinated around 150 people.
 - The vaccinations will not only protect the staff who have been vaccinated but also the vulnerable residents that the staff work with against flu infection and serious illness.



VITAL SIGNS

Market Sustainability

Home Care



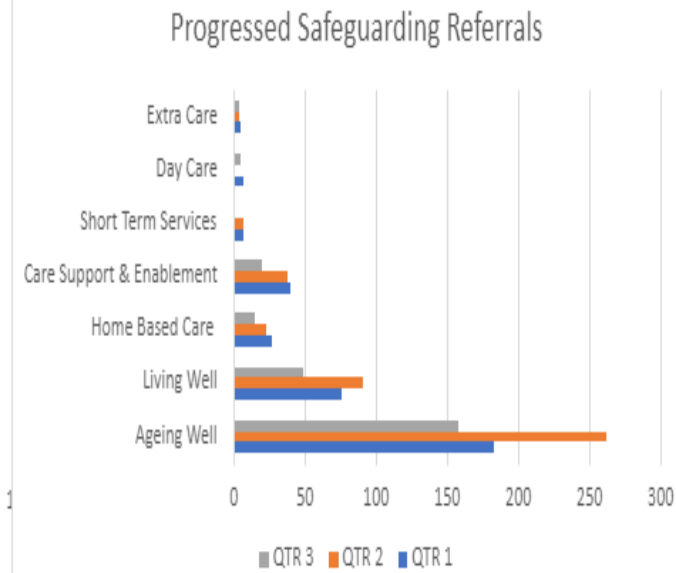
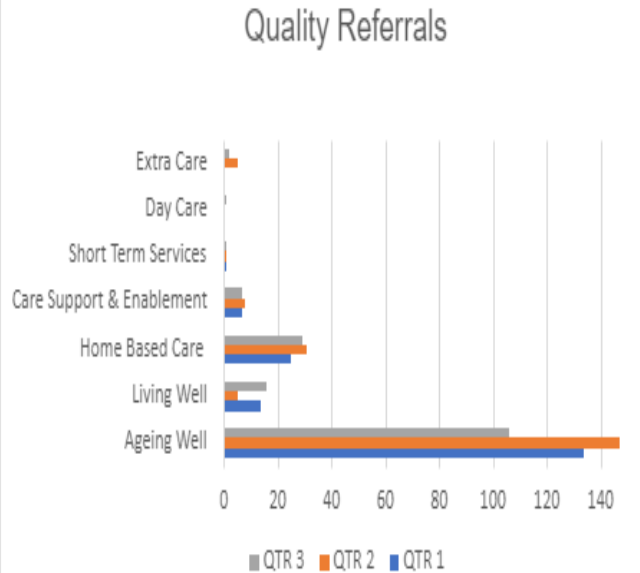
Home Care market has decreased slightly over November and December but comparing the data of December 2022 we are delivering an increase of 16.24% (4,598 hours)

Day Services

The current position with Nottingham City Council is having an initial impact on the provision of day services, as the City have pulled out of the contract and therefore will not accept and new people from the County (which is an issue as the City offer a diverse range of day services).

Care Homes

The financial viability and quality of the external care home services is an increasing concern, with high bed vacancy rates and staff turnover including care home managers. High levels of safeguarding and quality referrals are also being seen.



Fee Uplift

External providers are contacting the department to request fee increases for the 2024/25 period, with many quoting changes to NLW and inflationary increases as significant drivers in their cost pressures. To date, the average increase request is over 12%, which is higher than previous comparable years.

£ FINANCIAL PERFORMANCE

| 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 |
|-------------------------------------|-----------------------------|--|-----------------------|-----------------|----------------------------|-----------------------------------|----------------------|
| | | <u>ASCH Committee</u> | | | | | |
| (193) | (439) | Strategic Commissioning and Integration | (37,445) | (65,290) | (38,077) | (632) | 1.69% |
| 2,855 | 1,249 | Living Well and Direct Services | 157,168 | 134,366 | 161,272 | 4,104 | 2.61% |
| (1,386) | 192 | Ageing Well and Maximising Independence Communities and Public Health Committee | 147,144 | 117,673 | 145,950 | (1,194) | -0.81% |
| (642) | 2 | Public Health | 2,652 | 606 | 2,012 | (641) | -24.16% |
| 633 | 1,004 | Forecast prior to use of reserves | 269,519 | 187,356 | 271,157 | 1,637 | 0.61% |
| | | <u>ASCH Reserves</u> | | | | | |
| - | (137) | Transfer to / (from) Revenue Reserves | (3,769) | (900) | (3,906) | (137) | 3.63% |
| - | - | Transfer to / (from) Capital Reserves | - | - | - | - | 0.00% |
| - | - | Transfer to / (from) reserves (Ageing Well) | - | - | - | - | 0.00% |
| | | <u>Public Health Reserves</u> | | | | | |
| 642 | (4) | Transfer to / (from) Grant reserves | (2,652) | - | (2,014) | 638 | -24.06% |
| - | 3 | Redundancy related costs | - | 3 | 3 | 3 | 0.00% |
| 642 | (139) | Subtotal | (6,421) | (897) | (5,920) | 504 | -7.84% |
| 1,276 | 865 | Net Department Total | 263,098 | 186,458 | 265,237 | 2,141 | 0.81% |

- The overall **Adult Social Care and Public Health budget** is forecasting a **£2.14 million overspend** as of 31st December 2023.
- Integrated Strategic Commissioning is forecasting a net **underspend of £0.77 million** after reserves, an increased underspend of £0.58 million since Period 8.
- **Ageing Well** is forecasting an **underspend of £0.50m**. Overspends across all package types are offset by underspends on Short Term Care, additional client contributions, additional joint funding income, staffing underspends and anticipated savings.
- The **Maximising Independence Service (MIS)** currently has a forecast **underspend of £0.69 million** against a budget of £17 million. This is due to underspends on the Total Mobile recharge budget and ongoing vacancies due to expansion of the teams.
- **Living Well** is forecasting an **overspend of £5.37m million**, an increased overspend on £1.16 million since Period 8. Overspends across all package types (except Day Care) plus Predicted Needs, are partially offset by additional joint funding income, additional client contributions, MSIF Grant Income and savings still to be delivered.
- **Direct and Provider Services** is forecasting a decreased **underspend of £1.27 million**, a shift of £0.08m since Period 8.
- **Public Health** is forecast to **underspend by £0.64m**, this is the same as at Period 8.

£ FINANCIAL PERFORMANCE – PUBLIC HEALTH

- The Council receives a **ring-fenced Public Health Grant** from the Department of Health and Social Care, 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**.
- Currently, it is forecasted that there will be **£9.6m** in PH grant reserves available at the end of 23/24.
- PH colleagues have been working to identify priority areas to invest PH grant reserves. Some of these, including proposals increasing our investment in severe multiple disadvantage, the Community Infection Prevention and Control service, domestic abuse and tobacco control, have already received approval and are reflected in the budget.
- In the recent budget setting cycle for 2024/25, PH colleagues have worked closely with the Cabinet Member for Communities and Public Health to identify further areas of investment to augment the existing Public Health contribution to the wider Council. In many cases, these represent direct savings on the MTFs, for example funding for children & young people’s speech & language therapy and support for survivors of historic sexual abuse.